



Francis Marion University

Physician Assistant Program

Student Handbook

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Section I: General Program Information

Introduction

The purpose of the Francis Marion University Physician Assistant Program (FMUPAP) is to prepare individuals to practice as a compassionate, ethical, and clinically skillful Physician Assistants. The FMUPAP grants a Master of Science in Physician Assistant Studies (MSPAS).

This handbook contains specific policies and procedures pertinent to the program for the Class of 2018. It is to be used in conjunction with the FMUPAP Clinical Year Handbook. All students should be familiar with both documents.

The policies and procedures in this handbook are revised annually and will take effect at the start of each academic year. The policies and procedures contained herein will take effect on August 22, 2016. Modifications to this document may be made at any time during the academic year. Students will be notified electronically via their email accounts of any such changes and will be subject to any changes once notified.

PA Program Admissions Committee

The program's admissions committee will consist of the Program Director, the Medical Director, principal faculty and all who are deemed faculty Members of the PA Program.

Application Assessment Criteria

A Review of Application sheet is completed for all applicants in order to determine whether or not they qualify for an interview. All applicant files are reviewed by a program faculty member. Candidates are considered for personal interviews based on the following criteria:

- A Bachelor's degree
- a minimum overall cumulative grade point average (GPA) of 3.00 on a scale of 4.00 including undergraduate and graduate course work; a GPA of 3.00 on a scale of 4.00 in the prerequisites of:
 - 4 credits in general biology with lab
 - 8 credits in anatomy and physiology with labs (may be taken as two combined anatomy and physiology courses with labs or one anatomy course with lab and one physiology course with lab)
 - 4 credits in microbiology with lab
 - 8 credits in general chemistry with labs
 - 4 credits in organic chemistry with lab
 - 3 credits in statistics or biostatistics
 - 6 credits in psychology (at least 1 course preferably in abnormal or lifespan development at 200 or above level)
 - 1 credit in healthcare terminology
- Provide a personal statement of 400-750 words explaining their reason for applying to the program and describing her/his clinical experience. Applicants should have at least 250 hours in direct patient health care experience. The types of experience which meet this requirement include, but are not limited to, that of a registered nurse, paramedic, corpsman, athletic trainer, medical assistant, respiratory therapy, nurses' aide, medical technician, counselor in a health care setting, medical scribe, etc.

- Submit scores from the Graduate Record Examination taken within the last five years. Only the General Test is required. Combined scores above 290 with a minimum of 140 on each of the Verbal Reasoning and Quantitative Reasoning sections are recommended. The GRE code for CASPA is 0553.

If any prerequisites are missing, they must be successfully completed prior to entry into the program.

In order to be invited for an interview, a candidate must meet or exceed program requirements as described in the preferences above, have a literate and thoughtful personal statement, and good references. Interviews are offered on a first-come first-serve basis.

The candidate will be required to successfully pass a criminal background check before the interview, and pass a urine drug test and show proof of immunizations before matriculation.

FMUPAP Mission Statement

The Francis Marion University Physician Assistant Program seeks to educate excellent primary care physician assistants to become compassionate, ethical, and clinically skillful graduates who are ready to provide health care services with personal and professional integrity.

FMUPAP Goals

- Matriculate a diverse student body who reflect the richness of South Carolina's population
- Promote an educational atmosphere that empowers students to become self-directed, life-long learners.
- Provide students with superior knowledge and skills for the evaluation, monitoring, diagnosis, treatment, and counseling of patients across their lifespan.
- Foster the development of compassionate, ethical, culturally aware healthcare providers.
- Prepare students to practice as part of an efficient and effective healthcare team.
- Emphasize the needs of underserved populations and prepare and encourage graduates to serve those populations, particularly in the Pee Dee region of South Carolina.
- Establish an educational program which enriches the FMU community and meets standards set by the university, regional and national regulatory and accrediting bodies.

FMUPAP Learning Outcomes

At the completion of the Program, graduates will be able to:

- Elicit a detailed and accurate medical history, perform a complete physical examination, and appropriately record all pertinent data;
- Perform and interpret routine diagnostic studies;
- Perform or refer appropriately for therapeutic procedures;
- Provide complete and accurate patient assessment in order to formulate an appropriate management plan in a variety of healthcare settings;
- Provide appropriate patient education and counseling to address health maintenance and disease prevention; and
- Facilitate the appropriate referral of patients to address their medical and social welfare needs.

Technical Standards

The Francis Marion University Physician Assistant Program accepts applicants who we believe have the ability to become highly competent physician assistants. Admission and retention decisions are based not only on prior satisfactory academic achievement but also on non-academic factors outlined in these Technical Standards. Such factors serve to ensure that persons admitted to and retained in our Physician Assistant Program possess the intelligence, integrity, compassion, humanitarian concern, and physical and emotional capacity necessary to practice primary care medicine.

Technical standards, as distinguished from academic standards, refer to those physical, cognitive, and behavioral abilities required for satisfactory completion of all aspects of the curriculum, and the development of professional attributes required by the faculty of all students at graduation.

Francis Marion University does not discriminate on the basis of race, color, religion, ethnicity, national origin, age, gender, sexual preference, marital, or disability status.

Applicants, students and graduates must possess the abilities listed in the following areas:

- **Motor Skills and Strength**
 - Motor skills necessary to elicit information from patients through performance of the physical examination techniques of inspection, palpation, percussion, and auscultation;
 - Ability to safely perform techniques of physical examination;
 - Motor functions necessary to provide general medical care;
 - Motor coordination to respond quickly in emergent situations and to provide emergent medical care;
 - Ability to work for extended period of time without rest;
 - Ability to lift, carry, push and/or pull up to 50 pounds as required by clinical settings;
 - Sufficient ability to utilize standard medical and surgical equipment, and to perform common diagnostic procedures; and
 - Ability to coordinate fine and gross-motor skills, equilibrium and endurance with concomitant use of vision and touch.

- **Sensory**
 - Visually obtain information from patients, documents, diagnostic studies, films, slides, videos, etc.;
 - Observe demonstrations provided during lectures and in the laboratory or clinical setting; and
 - Acquire olfactory, auditory, and tactile information to enhance visual interpretation.

- **Communication**
 - Communicate effectively and respectfully with patients, family, physician supervisors and other members of health care team;
 - Obtain, process and communicate information succinctly, accurately and in a timely manner to appropriate individuals;
 - Produce complete and accurate written, oral or dictated patient assessments, prescriptions, etc.;
 - Make correct judgments in seeking supervision and consultation;
 - Listen and communicate effectively, responsively, and empathetically in a manner that promotes openness on issues of concern; and
 - Exhibit sensitivity to others including cultural differences.

- **Conceptual, Integrative and Quantitative Abilities**
 - Assimilate technically detailed and complex information presented in teaching and clinical settings;
 - Perceive three dimensional spatial relationships among structures;
 - Measure, calculate, reason, analyze, and synthesize information across modalities;
 - Interpret information from diagnostic maneuvers and instruments;
 - Integrate visual, auditory, sensory, tactile and spatial information; and
 - Form and test hypotheses required for clinical problem solving.

- **Behavioral and Social**
 - Ability to function with integrity and in an ethical manner;
 - Ability to accept responsibility for learning and to learn in a self-directed manner;
 - Attributes of dependability, flexibility, tolerance, respect and empathy;
 - Emotional stability to function effectively under stress;
 - Ability to adapt to environments that change rapidly without warning and/or in unpredictable ways;
 - Accept supervision and apply feedback.

- **Safety**
 - Demonstrate ability to follow standard precautions in clinical settings and during procedures;
 - Comply with requirements for working with hazardous materials in classroom and clinical settings;
 - Alert program faculty and supervisors to physical or emotional conditions that place students, patients or others at significant risk;
 - Obtain immunizations or provide verification of immune status in regard to Hepatitis B, Rubella, Varicella and Tetanus annually as required;
 - Obtain and provide verification of PPD status annually;
 - Provide verification of continuous health insurance coverage during the program;
 - Comply with urine drug screening requirements of the program and clinical sites;
 - Obtain and provide verification of criminal background clearance through Castle Branch.

- **Disability Accommodation**
 - Any student, who because of disability may require special arrangements in order to meet course requirements, must first obtain approval for accommodations through the University's Office of Disability Support Services. Once accommodations are approved, the student must meet with the program director. Accommodations are for present and future activities and are not retroactive. Students will not receive special arrangements unless accommodations are approved by the University's Office of Counselling and Testing.

Drug Screening

- A. Students must submit to body fluid toxicology screens (urine drug screens) at times required by the program and at random. All students will complete urine drug screening prior to entry into the program. Acceptance into the graduate level Physician Assistant Program is contingent upon the results of the urine drug screen.
- The laboratory will confirm any positive drug screen results.

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- Students will be responsible for the cost of the screening and any further testing to confirm positive screen results.
- B. If the student has a confirmed positive drug screen while in the Physician Assistant program, the student will:
- be unable complete courses or supervised practice experiences that academic year and will be considered suspended from the program;
 - be required to enter a drug treatment program as soon as possible;
 - be required to complete a drug treatment program. Upon request, the University's Office of Counseling and Testing will provide a referral list of programs.
 - provide verification to the program director that treatment has been successfully completed prior to returning to the program.
- C. The student will be eligible to enter a specific course or supervised practice experience when it is offered in the regular course offerings. This is contingent upon proof of successful completion of the drug treatment program, negative drug screen results obtained immediately before re-entering the program, and availability of supervised practice sites. Only the most current drug screen results will be reported to the supervised practice site.
- D. In the case of a student for whom parts B & C apply, as a condition of remaining in the program, the student must:
- work with the program director to develop a contract for monitoring her/his progress;
 - begin or continue activities prescribed by the treatment center; and
 - agree to random drug testing at a certified laboratory at her/his own expense.
- E. The student is responsible for paying all costs associated with these requirements.
- F. If the student has a positive drug screen after re-entering the program, s/he will be dismissed from the program.

RESOURCES FOR EDUCATION AND TREATMENT

On-campus

- The Office of Counseling and Testing (843 - 661-1840)
 - This office offers individual counseling and alcohol and drug education programs. Various educational programs (including video and print resources) regarding alcohol and other drug use and abuse and related issues are available.
- Dean of Students Office (843 - 661-1182)
- Campus Police (843 - 661-1109)
- Emergency (843 - 661-1109)

Off-campus

- Local meetings of support groups, including Alcoholics Anonymous (AA) and Al-Anon – Contact the Office of Counseling and Testing for information (843 - 661-1840)
- Circle Park Associates (843 - 665-9349)
- Alcohol and Drug Abuse Hotline (1-800-ALCOHOL)
- Narcotics Anonymous (1-800-777-1515)

- National Cocaine Hotline (1-800-COCAINE)
- National Institute on Drug Abuse/Treatment Hotline (1-800-662-HELP)

Competencies for the Physician Assistant Profession

Between 2003-2004, the National Commission on Certification of Physician Assistants (NCCPA) led an effort with three other national PA organizations (Accreditation Review Commission on Education for the Physician Assistant (ARC-PA), American Academy of Physician Assistants (AAPA), and Physician Assistant Education Association (PAEA) -- formerly Association of Physician Assistant Programs (APAP) to define PA competencies in response to similar efforts conducted within other health care professions and the growing demand for accountability and assessment in clinical practice. The resultant document, *Competencies for the Physician Assistant Profession*, provided a foundation from which physician assistant organizations and individual physician assistants could chart a course for advancing the competencies of the PA profession. This document was updated in 2012 and then approved in its current form by the same four organizations.

These competencies serve as a map for the individual PA, the physician-PA team, and organizations committed to promoting the development and maintenance of professional competencies among physician assistants. While some competencies will be acquired during formal PA education, others will be developed and mastered as physician assistant's progress through their careers. The PA profession defines the specific knowledge, skills, attitudes, and educational experiences requisite for physician assistants to acquire and demonstrate these competencies.

The clinical role of PAs includes primary and specialty care in medical and surgical practice settings. Professional competencies for physician assistants include the effective and appropriate application of medical knowledge, interpersonal and communication skills, patient care, professionalism, practice-based learning and improvement, and systems-based practice.

Patient-centered, physician assistant practice reflects a number of overarching themes. These include an unwavering commitment to patient safety, cultural competence, quality health care, lifelong learning, and professional growth. Furthermore, the profession's dedication to the physician-physician assistant team benefits patients and the larger community.

Medical Knowledge

Knowledge includes the synthesis of pathophysiology, patient presentation, differential diagnosis, patient management, surgical principles, health promotion, and disease prevention. Physician assistants must demonstrate core knowledge about established and evolving biomedical and clinical sciences and the application of this knowledge to patient care in their area of practice. In addition, physician assistants are expected to demonstrate an investigative and analytic thinking approach to clinical situations. Physician assistants are expected to understand, evaluate, and apply the following to clinical scenarios:

- evidence-based medicine
- scientific principles related to patient care
- etiologies, risk factors, underlying pathologic process, and epidemiology for medical conditions
- signs and symptoms of medical and surgical conditions
- appropriate diagnostic studies
- management of general medical and surgical conditions to include pharmacologic and other treatment modalities
- interventions for prevention of disease and health promotion/maintenance
- screening methods to detect conditions in an asymptomatic individual
- history and physical findings and diagnostic studies to formulate differential diagnoses

Patient Care

Patient care includes patient- and setting-specific assessment, evaluation, and management. Physician assistants must demonstrate care that is effective, safe, high quality, and equitable. Physician assistants are expected to:

- work effectively with physicians and other health care professionals to provide patient-centered care
- demonstrate compassionate and respectful behaviors when interacting with patients and their families
- obtain essential and accurate information about their patients
- make decisions about diagnostic and therapeutic interventions based on patient information and preferences, current scientific evidence, and informed clinical judgment
- develop and implement patient management plans
- counsel and educate patients and their families
- perform medical and surgical procedures essential to their area of practice
- provide health care services and education aimed at disease prevention and health maintenance
- use information technology to support patient care decisions and patient education

Systems-Based Practice

Systems-based practice encompasses the societal, organizational, and economic environments in which health care is delivered. Physician assistants must demonstrate an awareness of and responsiveness to the larger system of health care to provide patient care that balances quality and cost, while maintaining the primacy of the individual patient. PAs should work to improve the health care system of which their practices are a part.

Physician assistants are expected to:

- effectively interact with different types of medical practice and delivery systems
- understand the funding sources and payment systems that provide coverage for patient care and use the systems effectively
- practice cost-effective health care and resource allocation that does not compromise quality of care
- advocate for quality patient care and assist patients in dealing with system complexities
- partner with supervising physicians, health care managers, and other health care providers to assess, coordinate, and improve the delivery and effectiveness of health care and patient outcomes
- accept responsibility for promoting a safe environment for patient care and recognizing and correcting systems-based factors that negatively impact patient care
- apply medical information and clinical data systems to provide effective, efficient patient care
- recognize and appropriately address system biases that contribute to health care disparities
- apply the concepts of population health to patient care

Professionalism

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

- understanding of legal and regulatory requirements, as well as the appropriate role of the physician assistant
- professional relationships with physician supervisors and other health care providers
- respect, compassion, and integrity
- accountability to patients, society, and the profession
- commitment to excellence and on-going professional development

- commitment to ethical principles pertaining to provision or withholding of clinical care, confidentiality of patient information, informed consent, and business practices
- sensitivity and responsiveness to patients' culture, age, gender, and abilities
- self-reflection, critical curiosity, and initiative
- healthy behaviors and life balance
- commitment to the education of students and other health care professionals

Practice-Based Learning & Improvement

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

- analyze practice experience and perform practice-based improvement activities using a systematic methodology in concert with other members of the health care delivery team
- locate, appraise, and integrate evidence from scientific studies related to their patients' health
- apply knowledge of study designs and statistical methods to the appraisal of clinical literature and other information on diagnostic and therapeutic effectiveness
- utilize information technology to manage information, access medical information, and support their own education
- recognize and appropriately address personal biases, gaps in medical knowledge, and physical limitations in themselves and others

Interpersonal and Communication Skills

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

- create and sustain a therapeutic and ethically sound relationship with patients
- use effective communication skills to elicit and provide information
- adapt communication style and messages to the context of the interaction
- work effectively with physicians and other health care professionals as a member or leader of a health care team or other professional group
- demonstrate emotional resilience and stability, adaptability, flexibility, and tolerance of ambiguity and anxiety
- accurately and adequately document information regarding care for medical, legal, quality, and financial purposes

NCCPA CODE OF CONDUCT FOR CERTIFIED AND CERTIFYING PAs

(Adapted from the National Commission for Certification of Physician Assistant) The National Commission on Certification of Physician Assistants endeavors to assure the public that certified Physician Assistants meet professional standards of knowledge and skills. Additionally, NCCPA attempts to ensure that the Physician Assistants it certifies are upholding appropriate standards of professionalism and ethics in practice. The NCCPA's "Code of Conduct for Certified and Certifying Physician Assistants" outlines principles that all certified or certifying Physician Assistants are expected to uphold.

Breaches of these principles may be cause for disciplinary review. Disciplinary actions taken at the conclusion of that review may include formal censures, fines, revocation of certification or eligibility for certification

and/or other actions as deemed appropriate by NCCPA. Some disciplinary actions are reported to the state licensing authorities and the National Practitioner Data Bank. This “Code of Conduct” represents some, though not necessarily all, of the behaviors that may trigger review under NCCPA’s Disciplinary Policy.

Principles of Conduct

- Certified or certifying Physician Assistants shall protect the integrity of the certification and recertification process.
- They shall not engage in cheating or other dishonest behavior that violates exam security (including unauthorized reproducing, distributing, displaying, discussing, sharing or otherwise misusing test questions or any part of test questions) before, during, or after an NCCPA examination.
- They shall not obtain, attempt to obtain or assist others in obtaining or maintaining eligibility, certification, or recertification through deceptive means, including submitting to the NCCPA any document that contains a misstatement of fact or omits a fact.
- They shall not manufacture, modify, reproduce, distribute or use a fraudulent or otherwise unauthorized NCCPA certificate.
- They shall not represent themselves in any way as a Physician Assistant-Certified (PA-C) designee unless they hold current NCCPA certification.
- When possessing knowledge or evidence that raises substantial question of cheating on or misuse of questions from an NCCPA examination, fraudulent use of an NCCPA card, certificate or other document or misrepresentation of NCCPA certification status by a physician assistant or any other individual, they shall promptly inform the NCCPA.
- Certified or certifying Physician Assistants shall comply with laws, regulations and standards governing professional practice in the jurisdictions and facilities in which they practice or are licensed to practice.
- Certified or certifying Physician Assistants shall respect appropriate professional boundaries in their interactions with patients.
- Certified or certifying Physician Assistants shall avoid behavior that would pose a threat or potential threat to the health, well-being or safety of patients apart from reasonable risks taken in the patient’s interest during the delivery of healthcare.
- Certified or certifying Physician Assistants shall recognize and understand impairment from substance abuse, cognitive deficiency, or mental illness.
- Certified or certifying Physician Assistants shall maintain and demonstrate the ability to engage in the practice of medicine within their chosen areas of practice safely and competently.

Health Insurance

Students in the program must carry their own health insurance for the entire length of the program. Verification of continued health coverage must be submitted annually. Failure to obtain health insurance or verification will result in interruption of the student’s education and possibly delay graduation.

Withdrawing From the Program

Students who wish to withdraw from the program **must** consult with their academic advisor before meeting with the Program Director. The student must then initiate a complete withdrawal procedure at the Registrar’s Office. A Complete Withdrawal Grade Report will be completed. Failure to file the Complete Withdrawal Grade Report Form with the Registrar’s Office may result in the grade(s) of *F* for the course(s). A student who withdraws from the University after completion of one third of the semester receives in each course a grade of *W* or *F* as determined by the instructor at the time of withdrawal.

The effective date of a student's complete withdrawal from the University will be the date that the student initiates the withdrawal and a Complete Withdrawal Grade Report Form is filed.

Refund Policy

Can be found in the FMU web page <http://www.fmarion.edu/about/refundschedules>

Required Student Fees

Semester fees are refundable for full time students according to the following schedule:

Complete Withdrawal from the University

- 100% Withdrawal through late registration
- 90% Withdrawal between the end of the 100 percent refund period and the end of the first 10 percent of the term
- 50% Withdrawal between the end of the 90 percent refund period and the end of the first 25 percent of the term
- 25% Withdrawal between the end of the 50 percent refund period and the end of the first 50 percent of the term

An administrative fee equal to five percent of the total fees charged for the semester or \$100, whichever is less, will be withheld from the refund after the 100 percent refund period

Required Textbooks

Edmunds, M.W., & Mayhew, M.S. (2014) *Pharmacology for the Primary Care Provider* (4th ed.). Elsevier Mosby.

Fox, S.I. (2015) *Human Physiology* (14th ed.) McGraw-Hill.

Fox, S. (2013) *A Laboratory Guide to Human Physiology: Concepts & Clinical Applications* (13th ed.) McGraw-Hill

Saladin. (2016) *Human Anatomy* (5th ed.) McGraw-Hill.

Wise, E. (2016) *Laboratory Manual: Saladin Human Anatomy* (5th ed.) McGraw-Hill.

Bickley, L. S. (2013). *Bates guide to physical examination* (11th ed.). Lippincott.

Ballweg, et al. (2013) *Physician Assistant: Guide to Clinical Practice* (5th ed.). Saunders.

Dehn, R.W. & Asprey D. (2013) *Clinical Procedures for Physician Assistants* (3rd ed.). Saunders.

American Psychological Association. (2010) *Publication manual of the American psychological association* (6th ed.). American Psychological Association.

Fauci, A.S., & Braunwald E. (2015) *Harrisons Principles of Internal Medicine* (19th ed.) McGraw-Hill.

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Wolff K., Johnson R. & Saavedra R.P. (2013) *Fitzpatrick's Color Atlas and Synopsis of Clinical Dermatology* (7th ed.). McGraw-Hill.

Sadock, B.J., & Sadock, V.A. (2005) *Kaplan and Sadock's Pockets Handbook of Clinical Psychiatry* (4th ed.). Lippincott Williams & Wilkins.

Dubin, Dale. (2000) *Rapid Interpretation of EKG's* (6th ed.). Cover Publishing Company.

Fischbach, F. & Dunning, M.B. (2014) *A Manual of Laboratory and Diagnostic Tests* (9th ed.). Wolters Kluwer Health.

***Inter-professional course textbooks to be determined**

Section: II General Program Policies

Change of Address Policy

Students are **required** to notify the Program when there is a change in their address, e-mail or phone number. The Program will not be responsible for lost mail or late notification when a student does not provide notification of a change.

Attire

Didactic Phase: All students must wear: 1) publicly acceptable attire in the classroom setting. Clothing that exposes areas of the chest, abdomen, and midriff or back is unacceptable. The only exception to this dress code is in the physical examination laboratory setting. In this setting men may wear shorts and T-shirts. Women may wear shorts and a bathing suit top covered by a T-shirt. Sandals or flip-flops are permissible in the physical examination laboratory setting.

Vaccination Requirements

Hepatitis B – If previously unvaccinated, give 3-dose series (dose #1 now, #2 in 1 month, #3 approximately 5 months after #2). Give intramuscularly (IM). For HCP who perform tasks that may involve exposure to blood or body fluids, obtain anti-HBs serologic testing 1–2 months after dose #3.

Influenza – Give 1 dose of influenza vaccine annually. Inactivated injectable vaccine is given IM, except when using the intradermal influenza vaccine. Live attenuated influenza vaccine (LAIV) is given intranasal.

MMR – For healthcare personnel (HCP) born in 1957 or later without serologic evidence of immunity or prior vaccination, give 2 doses of MMR, 4 weeks apart. For HCP born prior to 1957, see below. Give subcutaneously (SC).

Varicella (chickenpox) – For HCP who have no serologic proof of immunity, prior vaccination, or diagnosis or verification of a history of varicella or herpes zoster (shingles) by a healthcare provider, give 2 doses of varicella vaccine, 4 weeks apart. Give SC.

Tetanus, diphtheria, pertussis – Give 1 dose of Tdap as soon as feasible to all HCP who have not received Tdap previously and to pregnant HCP with each pregnancy (see below). Give Td boosters every 10 years thereafter. Give IM.

PPD (Tuberculosis) - Either a 2-step PPD test (1-3 weeks apart) *or* QuantiFERON Gold Blood Test. If your results are positive, you must submit a clear chest X-ray (lab report required)

Hepatitis B

Unvaccinated healthcare personnel (HCP) and/or those who cannot document previous vaccination should receive a 3-dose series of hepatitis B vaccine at 0, 1, and 6 months. HCP who perform tasks that may involve exposure to blood or body fluids should be tested for hepatitis B surface antibody (anti-HBs) 1–2 months after dose #3 to document immunity.

- If anti-HBs are at least 10 mIU/mL (positive), the vaccinee is immune. No further serologic testing or vaccination is recommended.
- If anti-HBs is less than 10 mIU/mL (negative), the vaccinee is not protected from hepatitis B virus (HBV) infection, and should receive 3 additional doses of HepB vaccine on the routine schedule, followed by anti-HBs testing 1–2 months later. A vaccinee whose anti-HBs remain less than 10 mIU/mL after 6 doses is considered a “non-responder.”

For non-responders: HCP who are non-responders should be considered susceptible to HBV and should be counseled regarding precautions to prevent HBV infection and the need to obtain HBIG prophylaxis for any

known or probable parenteral exposure to hepatitis B surface antigen (HBsAg)-positive blood or blood with unknown HBsAg status. It is also possible that non-responders are people who are HBsAg positive. HBsAg testing is recommended. HCP found to be HBsAg positive should be counseled and medically evaluated.

For HCP with documentation of a complete 3-dose HepB vaccine series but no documentation of anti-HBs of at least 10 mIU/mL (e.g., those vaccinated in childhood): HCP who are at risk for occupational blood or body fluid expo-sure might undergo anti-HBs testing upon hire or matriculation. See references 2 and 3 for details.

Influenza

All HCP, including physicians, nurses, paramedics, emergency medical technicians, employees of nursing homes and chronic care facilities, students in these professions, and volunteers, should receive annual vaccination against influenza. Live attenuated influenza vaccine (LAIV) may be given only to non-pregnant healthy HCP age 49 years and younger. Inactivated injectable influenza vaccine (IIV) is preferred over LAIV for HCP who are in close contact with severely immunosuppressed patients (e.g., stem cell transplant recipients) when they require protective isolation.

Measles, Mumps, Rubella (MMR)

HCP who work in medical facilities should be immune to measles, mumps, and rubella.

- HCP born in 1957 or later can be considered immune to measles, mumps, or rubella only if they have documentation of (a) laboratory confirmation of disease or immunity or (b) appropriate vaccination against measles, mumps, and rubella (i.e., 2 doses of live measles and mumps vaccines given on or after the first birthday and separated by 28 days or more, and at least 1 dose of live rubella vaccine). HCP with 2 documented doses of MMR are not recommended to be serologically tested for immunity; but if they are tested and results are negative or equivocal for measles, mumps, and/or rubella, these HCP should be considered to have presumptive evidence of immunity to measles, mumps, and/or rubella and are not in need of additional MMR doses.
- Although birth before 1957 generally is considered acceptable evidence of measles, mumps, and rubella immunity, 2 doses of MMR vaccine should be considered for unvaccinated HCP born before 1957 that do not have laboratory evidence of disease or immunity to measles and/or mumps. One dose of MMR vaccine should be considered for HCP with no laboratory evidence of disease or immunity to rubella. For these same HCP who do not have evidence of immunity, 2 doses of MMR vaccine are recommended during an outbreak of measles or mumps and 1 dose during an outbreak of rubella.

Varicella (chickenpox)

It is recommended that all HCP be immune to varicella. Evidence of immunity in HCP includes documentation of 2 doses of varicella vaccine given at least 28 days apart, laboratory evidence of immunity, laboratory confirmation of disease, or diagnosis or verification of a history of varicella or herpes zoster (shingles) by a healthcare provider.

Tetanus/Diphtheria/Pertussis (Td/Tdap)

All HCPs who have not or are unsure if they have previously received a dose of Tdap should receive a dose of Tdap as soon as feasible, with-out regard to the interval since the previous dose of Td. Pregnant HCP should be revaccinated during each pregnancy. All HCPs should then receive Td boosters every 10 years thereafter.

References

- 1 CDC. Immunization of Health-Care Personnel: Recommendations of the Advisory Committee on Immunization Practices (ACIP). *MMWR*, 2011; 60(RR-7).
- 2 CDC. CDC Guidance for Evaluating Health-Care Personnel for Hepatitis B Virus Protection and for Administering Post exposure Management, *MMWR*, 2013; 62(10):1–19.
- 3 IAC. Pre-exposure Management for Healthcare Personnel with a Documented Hepatitis B Vaccine Series Who Have Not Had Post-vaccination Serologic Testing. Accessed at www.immunize.org/catg.d/p2108.pdf.

For additional specific ACIP recommendations, visit CDC's website at www.cdc.gov/vaccines/hcp/acip-recs/index.html or visit IAC's website at www.immunize.org/acip.

Universal Precautions/Blood Bourne Pathogens

Universal safety precautions and OSHA Regulations must be followed. Guidelines are presented during program orientation.

Post-Exposure Finger Stick Policy:

Students are responsible for knowing the protocol outlined by the individual institution where any potential incident may occur. In the event that a student acquires a needle stick during instruction or laboratory practice, the following policy must be followed:

- Wash the affected area immediately with soap and water.
- Report the incident to your instructor or preceptor immediately.
- The student who received the needle stick must report to McLeod Occupational Health or the nearest emergency room. If the student does not have transportation, call Campus Security at extension 1109 and ask an officer for assistance.
- The student who was the exposure source must also report to the emergency room along with the student who incurred the needle stick. All costs relating to the above is the responsibility of the student.
- All exposure incidents must be reported to the Clinical or Academic Coordinator within 24 hours.

Infectious Disease/Environmental Exposure

The Francis Marion University Department of Physician Assistant Studies has a commitment to protect the health and well-being of students, faculty, staff, and patients. As part of their training, students may encounter exposure to infectious and environmental hazards. This may include being exposed to human donors and preservative chemicals such as formaldehyde in the anatomy lab, latex or other products such as gloves that may contain allergens, and exposure to communicable infectious disease which may be transferred via airborne, mucous membrane splashes or needle-stick exposures in the clinical setting. While the risk of transmission is small, the Program has a number of policies and procedures in place to minimize risk.

- Students in the Department of Physician Assistant Studies are required to show proof of appropriate immunity, or documented immunization, as part of their matriculation requirements and prior to the onset of actual patient contact. Ultimately, each student is responsible for his/her health and safety in the educational and clinical settings. Therefore, it is the goal of the Department of Physician Assistant Studies that all students learn appropriate policies and procedures to follow in the event that they are injured or potentially exposed to blood-borne pathogens or other communicable diseases. Examples of blood-borne pathogens and communicable disease may include tuberculosis, hepatitis B, hepatitis C, and HIV. Women of child-bearing age may also have additional considerations, such as minimizing exposure to infectious diseases, possible teratogens or chemical exposures, or exposure to ionizing radiation.
- During the academic year of training, presentations are given on universal blood and body fluid precautions, infection control, and prevention of the spread of communicable disease. In

addition to instruction on how to prevent exposures, students will receive instruction on what constitutes an “exposure” and the procedures for care and treatment after an exposure. In the event of respiratory or gastrointestinal illness, students are advised to follow health provider recommendations to self-isolate at home until they are no longer potentially infectious to others. Additional instruction on procedures for care and treatment of exposures in the clinical setting will be provided as part of orientation to the clinical education phase.

- The student is financially responsible for any costs incurred secondary to infectious and/or environmental hazardous exposures.
- Effects of infectious or environmental disease or disability – acquisition of an infectious or environmental disease may impact student learning activities and outcomes. Students must be able to meet published health requirements at all times in order to continue matriculation in the Program and to provide care at clinical sites. Based upon outcomes and degree of infectious or environmental hazard exposure, a student’s continued participation in classroom and/or clinical activities as part of the PA Program may be delayed or prevented. In the event that the student contracts a communicable disease which potentially poses a risk to patients or co-workers (e.g., tuberculosis), steps will be taken to prevent dissemination in accordance with Centers for Disease Control and Prevention protocols. Certain communicable diseases may also be reported to county or state health authorities, as required by law.

Communication Policy

E-mail is the primary mechanism used by the Program to notify students of important information. All students are **required** to check their program e-mail on a **daily** basis. The Program will not be responsible if a student has inaccurate or missed information because the student does not routinely read, check and clear their e-mail account.

Policy on Student Employment

The Program discourages students from having outside employment while in the Program. If a student feels that it is necessary to work while in the Program, it is advisable that the student informs his faculty advisor of this need. Program expectations, assignments, deadlines and responsibilities will not be altered or adjusted to accommodate working students and it is expected that the student employment will not interfere with the student learning experience. Any conflict that may arise due to outside employment may be brought to the Student Affairs and Progression Committee (SAPC).

Policy on Student Work to Benefit the Program

Students will not be required to perform any clerical or administrative work or teaching on behalf of the PA Program. On occasion the faculty or staff of the program may make a request for a student to perform volunteer activity for the program (e.g., participate in a community health screening for the public). Students will not be obligated to volunteer and shall not be financially compensated for this activity.

Section III: Program Policies and Procedures

Purpose of this Section

FMUPAP Student Handbook

This section contains policies and requirements that govern academic performance and professional conduct for all Physician Assistant Program students who are enrolled in any phase of the Program. These policies are unique to the Program and are designed to promote standards for academic competency, clinical proficiency, and professionalism. They represent the parameters of achievement and behavior the Program faculty expects of its students as future healthcare practitioners. It is the responsibility of all students to be knowledgeable about Program policies. The policies will be applied to all aspects of the student's academic progress and conduct for as long as the student is enrolled in the Program.

The Program reserves the right to make changes at any time to this handbook. The Program is responsible for graduating competent PAs who will be serving public. As such, the Program maintains the right to refuse to matriculate or graduate a student deemed by the faculty to be academically or professionally incompetent or otherwise unfit or unsuited for continued enrollment.

Please read this section carefully and thoroughly. Students are expected to refer to these policies as needed.

Classroom Etiquette

The classroom environment is meant to support learning with minimal disruptions and distractions. Therefore, cell phones must be turned off (not on vibrate) during all lectures, labs and small group activities. If a student expects a critical or emergency call he should notify the lecturer before the start of class and move to a seat close to a door to reduce as much disruption as possible.

Please refrain from talking during lectures, placing feet up on tables or desks and/or multiple trips in and out of the classroom during the presentations.

Use of computers and technology for other than in classroom learning (such as texting, e-mailing, shopping) is inappropriate and unprofessional and will result in disciplinary action.

Attendance

Students are **required** to attend all scheduled classes, labs, small group activities and clinical assignments. The Program requires all students to be available for class and/or instructional activities from 8 AM – 5 PM Monday through Friday whether or not classes are scheduled. Occasional weekend instructional time may also be scheduled. Due to the nature of the program courses, lectures and exams may need to be moved on short notice. It is expected that medical and other personal appointments be scheduled around the class and clinical schedules.

Students are not permitted to take vacation time except during breaks specified in the Program's academic calendar. Attendance at all classes and clinical assignments is considered an aspect of professional responsibility and individual dependability. Repeated unexcused absences, as noted in each course syllabus, are considered a reflection of unprofessional conduct and may result in disciplinary action.

Emergency/Unexpected Absence

Absences or tardiness due to unexpected medical and/or personal issues are unavoidable. All Students **must** notify the Academic Coordinator as soon as possible regarding these unexpected events. The student is required to provide a statement from her/his medical provider for absences due to illness of three or more days. Absence from instructional periods for any reason does not relieve the student from the responsibility for the material covered.

Promptness is an important trait for a healthcare practitioner to possess. Not only does tardiness disturb the lecturer and student peers, it also reflects a lack of professionalism. Repeated tardiness to class is considered unprofessional conduct and, at the discretion of the instructor, the student may be referred to the Student Affairs and Progression Committee. Absences/tardiness can result in course failure, the delay of completion of the program or other disciplinary action. All students are required to be in their seats at the start of class.

Excused Absence Request

While it is the policy of the program that students are required to attend all classes, labs and clinical assignments, the program understands students may have exceptional events which might keep them from classes or program activities. Any student requesting time away for an exceptional event must notify the Academic Coordinator in writing at least **one month** in advance of the event. Time off may be granted for **no more than 3 days**. The approval of each request is made on an individual basis and there is no guarantee the approval will be granted.

In the event the request is granted, students are responsible for all material missed including examinations. If a student will be missing an examination, s/he should expect to take that exam, at the discretion of the Academic Coordinator either before leaving or immediately upon return to campus. This exam may be in a different format than the original examination given to the rest of the students.

Academic Advising

Within two weeks of matriculation, each student will be assigned a faculty member who will be their academic adviser. Students must meet with their assigned advisor at least once a semester, prior to academic registration for the next semester. Students who have not attended the required advising session will be unable to register for the next semester's classes. Students will have access to faculty advisors through office hours, which can be used to evaluate academic progress and discuss any related academic or professional issues. Advisement can take place more often per the discretion of the faculty member or at the request of the student.

Communication via the Chain of Command

Communication skills are a key component of the physician assistant profession. Conflict resolution, the ability to appropriately advocate for what is needed and the ability to effectively express oneself are critical behavioral attributes required for success. The following is an example of the process of contacting the faculty with questions or concerns that are general in nature.

- Contact your academic advisor for general guidance in:
 - Your progress in the program
 - Issues in the classroom that are disruptive or distracting
 - Issues with other faculty members or staff
- Contact the administrative assistant for:
 - Appointments with the Program Director
 - Any informational changes the program should know about
 - Any other administrative components of your education
- Contact the Academic Coordinator for:
 - Any academic issue during the didactic phase of the program such as scheduling, examinations, workshops, or absences

- Contact the Clinical Coordinator for:
 - Information pertaining to the clinical year documentation including logging in H&Ps, site evaluations and grades
 - Orientation or credentialing paperwork for rotations
 - Rotation administrative details
 - Educational issues pertaining to clinical rotations including relationships with staff, preceptors, learning objectives, examinations
 - Questions about rotation examinations
- Contact the Program Director for:
 - Issues mentioned above that require further review
 - Issues involving the Francis Marion University administration
 - Issues involving completion of program criteria

Grading Policy

The Physician Assistant Program utilizes an Excellent, Very Good, Good, Fair, Poor, Fail system for grading. Successful completion of every course and clinical rotation with a minimum grade of 77% is necessary to progress through the Program.

Alphabetic		Raw Score
A	Excellent	93 - 100
B+	Very Good	89 - 92
B	Good	85 - 88
C+	Fair	81 - 84
C	Poor	77 - 80
F	Fail	76 or below

Rounding

Per program policy, only final grades will be rounded and this is programmed into the Blackboard Gradebook. Final grades of 0.50 or greater will be rounded up to the next whole numeric value. Therefore, a 76.50 is the minimum grade needed to pass this course, as this is rounded to a 77. Exam and quiz scores will not be rounded and will be entered in grade book in Blackboard to the nearest hundredth of a percent.

Policy on Incomplete (IN) Grades

IN is given a student who for an acceptable reason is allowed to postpone beyond the end of the semester or term the completion of some part of a course requirement. Approval by the lead instructional faculty member of the course, the Academic Coordinator, and the Program Director is required. The designation of IN is not computed in the grade point average. If the IN is not replaced by a permanent grade by the end of the following semester, the designation of IN will automatically become a grade of F.

Examination Policy

Students must contact the Academic Coordinator in advance if they will miss a scheduled examination to arrange for a rescheduled exam. Failure to do so will result in a grade of zero (0) for the exam unless there is a significant extenuating circumstance. Any exam missed in courses taught by a faculty member from the Department of Nursing will be completed at the end of the semester. Any deviation from this practice may be brought to the Student Affairs and Progression Committee for review.

Cell Phone Use

The use of cell phones is prohibited during classes or testing. All phones must be silenced to avoid disruption in the classroom. In the event of an emergency in which a student must receive an important call, notify the instructor prior to the start of class, sit close to the door of the room and then quickly answer your phone and excuse yourself from the room to take the call.

Social Media Policy

Social media is internet-based tools designed to create a highly accessible information highway. It is a powerful and far reaching means of communication that, as a Physician Assistant student at Francis Marion University, can have a significant impact on your professional reputation and status. Examples include, but are not limited to, LinkedIn, Twitter, Facebook, Second Life, Flickr, Instagram, You Tube, MySpace, Yammer, YouTube and online comments sections.

Students are liable for anything they post to social media sites and the same laws, professional expectations, and guidelines are expected to be maintained as if you were interacting in person. The Francis Marion University PA Program supports your right to interact knowledgeably and socially. Guidelines have been developed to outline appropriate standards of conduct for your future and the reputation of our Program.

Guidelines:

- Social networking (or 'friending') FMU PA Program faculty and staff, guest lecturers, clinical preceptors, or current/former patients is strictly prohibited.
- Take responsibility and use good judgment. Incomplete, inaccurate, inappropriate, threatening, harassing posts or use of profanity on your postings is strictly prohibited.
- Think before you post as your reputation will be permanently affected by the Internet and email archives.
- Students should not address individual medical conditions or give medical advice through social media.
- HIPAA laws apply to all social networking so it is the utmost priority to protect patient privacy by not sharing information or photographs.
- You must protect your own privacy as to not let outsiders see your personal information.
- Social networking is permanently timed and tracked. Therefore, in order to respect work commitments, social networking during class, program activities, and clinical time is strictly prohibited.
- If you state a connection to the Francis Marion University PA Program, you must identify yourself, your role in the Program, and use a disclaimer stating that your views are that of your own and do not reflect the views of the Francis Marion University PA Program.
- All laws governing copyright and fair use of copyrighted material must be followed.
- Consult your faculty advisor or the Program Director if you have any questions regarding the appropriateness of social networking use.
- You are strictly prohibited from communicating with a member of the media or outside source attempting to gather information regarding the Francis Marion University PA Program through the social network. Refer all questions regarding program information, policies and procedures to the Francis Marion University PA Program Director.
- Failure to follow the above stated guidelines may be considered a breach of appropriate professional behavior

Statement of Honor

Upon becoming a member of the Francis Marion University Community, students are expected to behave with honor and integrity in a manner that reflects the values of the institution. Students must interact in a civil manner, both in and out of the classroom, treating all persons and property with respect. **Upon enrollment at Francis Marion University, students pledge not to lie, cheat, or steal.** They also pledge not to violate the FMU Honor Code or any civil/criminal laws. Inasmuch as honor and integrity serve to define one's character, the university community expects that students will not tolerate the aforementioned behaviors in others and will exhibit reasonable judgment in reporting students who violate the FMU Honor Code.

The Honor Pledge

"As a student at Francis Marion University, I pledge to obey the FMU Honor Code and civil and criminal laws. I pledge not to lie, cheat, or steal. I will encourage others to respect the Honor Code and will exhibit reasonable judgment in reporting students who violate it."

Academic Dishonesty/Progress

Academic honesty and integrity is expected of all students throughout their course of study at FMUPAP. Any violation of this code is considered to be a serious academic violation. Academic dishonesty;

- Constitutes a breach of academic integrity that violates the academic foundation of an institution;
- Compromises the integrity and well-being of the educational program;
- Makes the learning and working environment hostile and offensive;
- Undermines the credibility of the educational process
- Destroys opportunities for students to develop a strong sense of self-esteem and pride in accomplishment;
- Damages self-confidence that is an integral part of the educational growth and learning process.

What is Academic Dishonesty?

Academic dishonesty is intentional cheating, fabrication or plagiarism. It is also knowingly helping or attempting to help others to be dishonest. Academic dishonesty lowers scholastic quality and defrauds those who will eventually depend upon your knowledge and integrity.

Cheating

Definition:

Intentionally copying from another student's work or accepting assistance from other students during graded examinations; using or attempting to use unauthorized materials, information, or study aids during any academic exercise unless permitted by the instructor.

Clarification:

- Students completing any examination should assume that external aids (for example; mobile phones, on-line connections, books, notes, conversation with others) are prohibited unless specifically allowed by the instructor.
- Students are responsible for maintaining an appropriate demeanor and decorum during examinations (for example: no talking, eyes on your own paper, books, notes, and study aids should be not be accessed during an examination)

FMUPAP Student Handbook

- Students may not have others conduct research or prepare work for them without advance authorization from the instructor. This includes, but is not limited to, the services of commercial companies.
- Major portions of the same academic work may not be submitted in more than one course.
- Obtaining a copy of examination questions prior to taking the exam, obtaining a copy of a previous year's examination or questions, or reproducing a data base of test questions from memory.
- Action that destroys or alters the work of another student.

Fabrication

Definition:

Intentionally falsifying or inventing any information or citation in any academic exercise.

Clarification:

- "Invented" information may not be used in any laboratory experiment or academic or clinical exercise. It would be improper, for example, to document information regarding a patient which you did not directly obtain.
- One should acknowledge the actual source from which cited information was obtained. For example, a student should not take a quotation from a book review and then indicate that the quotation was obtained from the book itself.
- Students must not change and resubmit previous academic work without prior permission from the instructor.

Plagiarism

Definition:

Intentionally or knowingly representing the words or ideas of another person as your own in any academic exercise.

Clarification:

- Direct Quotation – Every direct quotation must be identified by quotation marks or appropriate indentation and must be cited in a footnote or endnote.
- Paraphrase – Prompt acknowledgment is required when material from another source is paraphrased or summarized in whole or in part, in one's own words. To acknowledge a paraphrase properly, one might state, "to paraphrase Locke's comment..." Then conclude with a footnote or endnote identifying the exact reference.
- Borrowed facts – Information gained in reading or research which is not common knowledge among students in the course must be acknowledged. Examples of common knowledge include the names of leaders of prominent nations, basic scientific laws, etc. Materials that add only to a general understanding of the subject may be acknowledged in the bibliography and need not be cited.

- One footnote or endnote is usually enough to acknowledge indebtedness when a number of connected sentences are drawn from one source. When direct quotations are used, however, quotation marks must be inserted and acknowledgment made. Similarly, when a passage is paraphrased, acknowledgment is required. Please consult with the instructor for further information about plagiarism.

Facilitating Academic Dishonesty

Definition:

Intentionally or knowingly helping or attempting to help another commit an act of academic dishonesty.

Clarification:

- A student must not knowingly allow another student to copy from his work during any academic exercise. This includes, among other things, examinations, laboratory reports, projects, or papers.

Lying

Definition:

Simply put it is not telling the truth or withholding part of the truth in order to deceive or make someone believe a false narrative.

Progression through Program

Professional Progress

Professionalism is as important as academic progress and holds equal importance to academic progress. Students are expected to demonstrate the legal, moral and ethical standards required of a health care professional and display behavior which is consistent with these qualities. Professionalism and professional ethics are terms that signify certain scholastic, interpersonal and behavioral expectations. Among the characteristics included in this context are the knowledge, competence, demeanor, attitude, appearance, mannerisms, integrity, and morals, etc. displayed by the students to faculty, staff, preceptors, peers, patients, colleagues in health care and other educational settings and the public. The Program expects nothing short of respect and professional demeanor at all times. Any violations of these tenets may precipitate referral to the Student Affairs and Progression Committee (SAPC).

Academic and Professional Progress

Satisfactory academic and professional progress must be evident and maintained by all students in the Program in order to demonstrate the ongoing acquisition of knowledge, skills and professional behavior through the curriculum. In the event a student fails to progress academically or professionally, a remediation plan will be put in place that may be supervised by the course faculty member, the Academic Coordinator, or the Clinical Coordinator. Students who fail to remediate successfully will be referred to the SAPC.

Standards of Conduct

Success in the Physician Assistant Profession requires certain behavioral attributes including: empathy, discipline, honesty, integrity, the ability to work effectively with others in a team environment, and the ability to address a crisis or emergency situation in a composed manner.

The subject matter in PA education can be of a very sensitive and sometimes disturbing nature. Students are reminded that the purpose of the educational sessions is to prepare them to provide physician supervised primary healthcare to all persons and in all environments without regard to the student's own personal beliefs and biases.

The program will not tolerate incivility by any member of the PA student body. Examples of incivility include rude, sarcastic, obscene, disruptive or disrespectful remarks or behavior, verbal or physical threats, or damage to property.

The Accreditation Standards for Physician Assistant Education states: *“The 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 for the graduate PA.”*

Adherence to these attributes requires that the Physician Assistant graduate and Physician Assistant students exhibit a high level of maturity and self-control even in highly stressful situations. In keeping with these precepts, Physician Assistant students must conduct themselves in a highly professional manner consistent with the patient care responsibilities with which they will be entrusted during their training in the Program. Students must adhere to the following standards. Failure to do so will result in referral to the SAPC and may result in disciplinary sanctions or dismissal from the Program.

Behavior

Students are expected to behave in a responsible, reliable and dependable manner. The student must project a professional image in manner, dress, grooming, speech and interpersonal relationships that are consistent with being a medical professional. The student should recognize her/his personal limitations and biases, whether they are intellectual, physical or emotional and strive to correct them. S/he must demonstrate the professional and emotional maturity to manage tensions and conflicts and should seek professional help when necessary.

Respect

Students are expected to treat all patients, faculty, program staff, clinical preceptors, and fellow students with dignity and respect. Conflicts should be resolved in a diplomatic and reasoned manner. Students should be sensitive and tolerant with regard to diversity in the student and patient population. Physician Assistant training involves a close working environment with other students and includes physical examination of fellow students and discussion groups that may reveal information of a personal nature.

These situations must be approached with respect for the privacy, confidentiality, and the feelings of fellow students.

Flexibility

Physician Assistant training involves instruction from practicing clinicians with unpredictable schedules. At times lectures or clinical sessions may need to be adjusted with short notice. We believe the advantages of utilizing practicing clinicians outweigh this inconvenience and ask students to be flexible and tolerant of changes.

Integrity

Integrity is the quality of consistency and steadfast adherence to a defined code of ethics. It includes honesty, soundness of mind and body. Students are expected to demonstrate integrity by adhering to the AAPA Ethical Standards of conduct. Physician Assistant students are expected to display the highest ethical standards commensurate with work as a health care professional. These are outlined in the *Guidelines for Ethical Conduct for the Physician Assistant Profession* published by the American Academy of Physician Assistants and can be found on the AAPA website (www.aapa.org). Violations will be referred to the Student Affairs and Progression Committee for investigation and may result in dismissal from the Program.

Confidentiality

Students must respect the confidentiality of patients and fellow students and are not permitted to discuss any patients by name outside the clinical encounter situation. *Adherence to regulations is mandatory.* Students should not discuss other students with preceptors. For academic presentations and history and physical assignments, all patient identifying data, including name, initials, date of birth, and facility where seen will not be included. Students will receive training on applicable sections of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) during new student orientation and again during orientation to the clinical phase of the Program.

Professional progress is as important as academic progress and any instance by a student that demonstrates unprofessional behavior will be addressed accordingly.

Procedure on Unprofessional Behavior

Students must adhere to the professional standards. Failure to do so will result in the following:

- **First incident of unprofessional behavior:**
The Program will document the incident in writing and the student will meet either a faculty member, the Academic Coordinator or Clinical Coordinator. This documentation will go on the student's permanent record and may result in referral to the SAPC.
- **Second incident of unprofessional behavior:**
The student will be automatically referred to the SAPC. The Committee will meet to determine a course of action for the behavior that can include but is not limited to corrective or disciplinary action, warning or dismissal.

Student Affairs and Progression Committee (SAPC)

The SAPC will consist of the Academic Coordinator (who will serve as chair), the Clinical Coordinator and selected principal and full-time faculty. This committee is charged with monitoring all PA students both academically and professionally, and making recommendations to the program director. The committee reviews the cases of students who meet the criteria for failure of academic or professional progress. The SAPC may review student records and discuss student records with appropriate faculty members and/or preceptors in determining an appropriate course of action for students experiencing

academic and/or professional conduct difficulties in the program. The SAPC may request the appearance of the student during a SAPC meeting. The committee can recommend remediation, deceleration, corrective action, academic or disciplinary warning, or dismissal. It can also recommend repeating of courses, clinical rotations, or entire sessions. Recommendations are made on an individual basis after considering all pertinent circumstances in each case. The committee's recommendation is then sent to the Program Director for approval. Once approved, the Program Director issues a letter of decision to the student regarding her/his status in the program as well as the specific plan of action developed by the SAPC.

Student Representation at the SAPC Meeting

The student may be present at the SAPC meeting. The student may not have an attorney present.

Appeals

Decisions of the SAPC may be appealed by a student to the Program Director within ten working days of the date of the above-referenced letter. The Program Director may overturn any findings of the committee or ask the committee to review any new materials that may be relevant to the situation. The Committee will meet if necessary to discuss the issue brought forth by the Program Director on behalf of the student. The SAPC Chair will submit any findings or recommendations in writing to the Program Director should a second review be requested.

Academic appeals that are not resolved to the student's satisfaction at the Program level may be appealed to the Grades Appeal Committee as per the appeals policy outlined in the FM Catalog.

Unprofessional conduct appeals that are not resolved to the student's satisfaction at the Program level may be appealed to the Provost. His/her decision is final.

Remediation/Deceleration

Remediation/ Deceleration are processes to resolve a student's inability to achieve a course or rotation competency. The process allows the student the opportunity to demonstrate achievement of the identified competency in the course or rotation.

The goal of remediation is to assist a student in mastering the area of study in which s/he has demonstrated a deficiency. In the didactic portion of the Program, a student must remediate any failed summative assessment (e.g., examination, lab practical, skills assessment, etc.) and pass a remediation process regardless of course grade. The course director will design a remediation program which may include review of material and skills with a faculty member, peer tutor, or other content expert. The maximum score that can be credited to a student on a remediation evaluation will be no more than 77% (C) regardless of the actual score on the evaluation. The only exception is if the student decelerates for one year to repeat a course then they will get the earned grade on remediation.

A student who receives a failing grade in any course/rotation (i.e., less than a "C") will not be allowed to progress within the curriculum until that course/rotation is satisfactorily completed. Provided that the student has not failed any other courses/rotation and is not currently on warning, the student may be given one opportunity to retake the failed course/rotation when it is next offered. This will be at the discretion of the Academic Coordinator for failed academic courses and the Clinical Coordinator for failed rotations. Most didactic courses are only offered one time per year, therefore the student will usually be required to decelerate for one year and repeat the failed course at that time. This may

delay graduation. If the student fails a rotation, the student will repeat the rotation at the earliest feasible opportunity, depending on their remaining rotation schedule. This may also delay graduation. If the student successfully completes the failed course/rotation, the student will be given permission to progress after review by the SAPC. If a student fails more than one course or rotation, or fails the same course or rotation for a second time despite remediation, s/he will be dismissed from the program.

Course Repetition

In order for a student to successfully progress through the MSPAS program and graduate, the student must complete all graduate courses with a “C” or better and have an overall GPA of 3.0 based on a 4.0 scale. Students will be allowed to retake one course or clinical rotation, due to academic failure, over the entire curriculum.

Consequences of Academic Deficiencies

When an Academic Deficiency occurs, depending upon the frequency, nature, and extent of the deficiency, the following actions may be recommended by the Student Affairs and Progression Committee. A student will be:

- placed on Academic Warning;
- required to remediate the deficiency;
- required to repeat the course/rotation
- subject to a change in clinical year rotation assignment and/or sequencing;
- decelerate
- dismissed from the program.

Academic Warning and Recommendation for Dismissal

Academic Warning should be regarded as a serious matter and is official notice to the student that her/his performance during the warning period must improve to meet Program standards in order to continue matriculation. Any student who fails to improve her/his performance in the areas identified by the faculty may be recommended for dismissal from the Program.

A student who receives a failing grade in any course (i.e., less than a “C”) will not be allowed to progress within the curriculum until that course is satisfactorily completed. Provided that the student has not failed any other courses and is not currently on warning, s/he may be given one opportunity to retake the failed course when it is offered again. Most courses are only offered once per year, therefore the student may be required to take a leave of absence for one year, and repeat the failed course at that time. If the student successfully completes the failed course s/he may be given permission to progress.

Students who fail the same course more than once or who fail two different courses across the curriculum—either academic or clinical courses—will be dismissed from the Program regardless of overall GPA. Any student required to repeat a course or rotation must anticipate a delay in the timing of her/his graduation and incur additional tuition and fees necessary to repeat coursework. Students who are decelerated due to a failed course may be required to demonstrate competencies for coursework previously completed, in order to progress through their program of study.

Didactic Phase:

A didactic phase student may be placed on Academic Warning if the student fails two (2) exams in a semester. The period of Academic Warning will be articulated in writing for the student, and will expire when and if the student adequately remediates the academic deficiency. If a student fails to remove specific deficiencies in accordance with the requirements for correction of academic deficiencies, the student will be dismissed from the Program.

Clinical Phase:

There are three (4) basic components to the evaluation of students during the clinical phase: clinical rotation examinations; clinical rotation evaluations; TYPHON LOGGING; and other clinical rotation requirements. Examples include: attendance, assigned projects, comportment, and/or oral/written presentations. Final determination of the clinical rotation grade is made by the assigned course director, taking all clinical rotation components into consideration.

If the student fails a rotation, the student is placed on Academic Warning and required to repeat the rotation as soon as feasible based on the student's remaining rotation schedule. The student may be forced to repeat the rotation at the end of the clinical year thereby delaying her/his graduation and possibly incurring more tuition expense. The student must successfully pass all of the components of the repeat rotation including the end of rotation exam. Upon successful completion of the remediation, the student is removed from Academic Warning. A student is only allowed to repeat one (1) clinical rotation or one (1) didactic course during the entire program. A failure of a second EOR examination when the student is on Academic Warning results in dismissal from the program. A student who fails the clinical preceptor evaluation component of the rotation will be referred to the Student Affairs and Progression Committee for disposition.

GPA Requirements:

A student must maintain an overall GPA of 3.0 based on a 4.0 scale to continue in the program. If their GPA falls below 3.0 the student is placed on Academic Warning and has one (1) semester to bring his GPA up to 3.0. Failure to do so will result in dismissal from the program.

Progression:

Students must complete all courses in a given semester before they can proceed to the next semester. A student is not allowed to proceed into the clinical phase of the program while on Academic Warning. If this arises they will be referred to the Student Affairs and Progression Committee for disposition.

Student Services

Career Development

The FMU Office of Career Development provides information about career development and job placement.

Counseling and Testing

Counseling and Testing provides the following services for the University community: 1) personal counseling services for enrolled students, 2) accommodations for qualified students with disabilities.

Personal Counseling

The FMU Office of Counseling and Testing employs therapists who are available to provide counseling by appointment and referral for emergencies. Common counseling concerns include depression, sexuality, stress management, substance abuse, relationship issues and academic problems. Students do not need to have severe emotional problems to benefit from services. Many students use counseling to expand their personal growth and development. Services are confidential and free to currently enrolled students.

Services for Students with Disabilities

The Director of Counseling and Testing is responsible for coordinating services for students with disabilities. The director collaborates with students in determining reasonable accommodations and acts as a liaison between students and faculty/administration on concerns relating to classroom accommodations. The Director of Counseling and Testing is also available to meet with prospective students to discuss services available at Francis Marion University. The director can be reached at 843-661-1841.

Substance Abuse

Substance abuse can accompany the demands of a rigorous academic program like Physician Assistant Studies. Students concerned with the use of substances should consult the FMU Office of Counseling and Testing, FMU Student Health Services, their personal physician, a mental health professional, or one of the other resources listed in the following section Resources for Education and Treatment:

RESOURCES FOR EDUCATION AND TREATMENT

On-campus

- The Office of Counseling and Testing (843 - 661-1840)
 - This office offers individual counseling and alcohol and drug education programs. Various educational programs (including video and print resources) regarding alcohol and other drug use and abuse and related issues are available.
- Dean of Students Office (843 - 661-1182)
- Campus Police (843 - 661-1109)
- Emergency (843 - 661-1109)

Off-campus

- Local meetings of support groups, including Alcoholics Anonymous (AA) and Al-Anon –. Contact the Office of Counseling and Testing for information (843 - 661-1840)
- Circle Park Associates (843 - 665-9349)
- Alcohol and Drug Abuse Hotline (1-800-ALCOHOL)
- Narcotics Anonymous (1-800-777-1515)
- National Cocaine Hotline (1-800-COCAINE)
- National Institute on Drug Abuse/Treatment Hotline (1-800-662-HELP)

DISCRIMINATION AND HARASSMENT POLICY

Francis Marion University follows all federal and state laws banning discrimination in public institutions of higher learning. Francis Marion adheres to all Title IX policies, and does not discriminate on the basis of race, color, sex, religion, ethnicity, national origin, age, sexual orientation, gender identity, veteran status or any other protected category under applicable local, state, or federal law. General questions regarding Title IX can be directed to the Office of Civil Rights (www.ed.gov/ocr). Specific questions may be referred to the University's Title IX Coordinator (titleixcoordinator@fmarion.edu)

The following person has been designated to handle inquiries regarding discrimination, harassment, and/or retaliatory complaints regarding harassment.

**Vice President for Administration
P.O. Box 100547
Florence, S.C. 29502-0547
105 Stokes Administration Building
Tel. No. 843-661-1146**

It is the policy of Francis Marion University, in keeping with efforts to maintain an environment in which the dignity and worth of all employees and students of the University are respected, that sexual harassment of students, employees, and visitors at Francis Marion University is unacceptable conduct and will not be tolerated. Sexual harassment may involve the behavior of a person of either sex against a person of the opposite or same sex, when that behavior falls within the definition as contained in the sexual harassment policy on the University website. Offenders of sexual harassment will be subject to disciplinary action which may include but is not limited to oral or written warnings, demotions, transfers, suspension without pay, or dismissal for cause. Sexual harassment is a form of sex discrimination which is prohibited under Title VII of the Civil Rights Act of 1964 for employees and under Title IX of the Education Amendments of 1972 for students. The South Carolina State Human Affairs Law also prohibits sex discrimination.

Procedure

Any University employee (faculty or staff; full-time or part-time) who feels that s/he has been sexually harassed and who wishes further information or who wishes to file a complaint should contact the Vice President for Administration immediately. Any student who feels that s/he has been sexually harassed under the definition in the University sexual harassment policy and who wishes further information or who wishes to file a complaint should contact immediately one of the following: the Vice President for Student Affairs or the Vice President for Administration. Any faculty or staff member receiving a complaint of sexual harassment should seek the advice of the Vice President for Administration. Details of the University's sexual harassment policy and administrative procedures are contained in the *Sexual Harassment Policy* available on the University website and in the Human Resources Office.

Section IV: Clinical Year Information

This section provides general information covering the clinical year. Students will not be permitted to enter the clinical phase of the program unless they have successfully completed and passed all didactic phase courses and requirements.

Students will receive a PA Clinical Year Handbook that will include all necessary information, policies and procedures during the Clinical year orientation.

Identification

Students must always identify themselves as Physician Assistant students to patients and site staff, and never present themselves as physicians, residents, medical students, or graduate Physician Assistants. If a patient or staff member misidentified them as any other discipline (such as medical student or physician) they must immediately correct the error. At all times while on clinical rotations, the students must wear their student photo identification badge and a short lab coat with embroidered FMUPAP logo provided by the University (unless the site prefers students not wear a lab coat in which case they will wear their photo ID prominently displayed). While in the Program, students may not use previously earned titles (i.e. PT, RN, DC, Ph.D., etc.) for identification purposes. Repeated failure of a student to wear proper identification will result in the student being placed on disciplinary warning status.

Clinical Rotation Sites

Clinical rotations consist of eight required, and one elective rotation designed to provide the Physician Assistant student with the opportunity to observe and participate in the delivery of health care services. The emphasis is on clinical skills development and application of the material presented during the didactic semesters of the Program to real-life clinical situations.

Student Preparation of Self and Others

You will need to begin to think about how to prepare yourself and any significant others who will be affected by your long hours and time away from home. This is a process you should begin talking about now. While we will do our best to meet your individual circumstances, there is no guarantee of placement in any particular location for any period of time.

Clinical Rotation Placement

Assignment of student rotations is the responsibility of the Clinical Coordinator and the Program.

The Clinical Coordinators have final say on approving the site for training. Additionally, students must be in good academic standing within the Program to be considered for placement in a requested elective rotation.

Students may not switch site assignments with other students. Once the rotation schedule has been set, requests for changes by the student will be limited to emergency situations only.

The Program works toward firmly establishing each four week block, however unforeseeable events can occur which may require a student to be moved to a different site with short notice just prior to starting and/or during a rotation.

Typhon Tracking System

Patient Logging

Typhon Group Physician Assistant Tracking System is an electronic tracking system to log patient encounters and procedures. Students are required to log information regarding patients seen daily. All submissions are

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reviewed by the program weekly (Fridays). Students are contacted if the weekly review shows inadequate patient care experiences. The Clinical Coordinator will discuss ways to maximize clinical opportunities for the remaining time in the SCPE.

Typhon Group Patient Logging: Patient logs will be evaluated for 5% of the SCPE grade and will be evaluated on the following criteria:

- Logging an appropriate number of patients per SCPE.
- Completeness of information provided (no missing data)
- Meeting the deadline for turning in the patient log (every Friday , 5:00pm, after starting the SCPE)
- Logging patients of a regular basis. Patient logs will be checked weekly, every Friday, to ensure that students are entering patient encounters on a regular basis.
- Logging accurate information for the criteria listed below. Any information that is deliberately logged incorrectly will be considered as fraud. All points will be lost for this grading component and the student will be referred to the Student Affairs and Profession for disciplinary action.

Patient encounters will be checked weekly to include the following information:

- Date of encounter
- SCPE type
- SCPE site
- Preceptor
- Patient age
- Patient gender
- Patient ethnicity
- ICD 10 Diagnosis code- to include all diagnoses assigned to the patient
- CPT procedure codes- to include all procedures performed

Patient tracking/logging is NOT optional and must be completed by the last day of the SCPE (Friday). Many credentialing agencies (i.e. hospitals) require student patient tracking logs for verification of adequate training to perform duties and responsibilities as a Physician Assistant

If a student fails to complete this SCPE requirement the student will receive a failure (F) in the course.

SCPE Specific Logging Requirements

Students must log specific number and types of patient encounters for each SCPE. The minimum requirements are listed in the table below:

SCPE	TOTAL FOR REQUIREMENTS FOR	PATIENT POPULATIONS (<i>MUST</i>
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	EACH SCPE	<i>INCLUDE IN LOGGING-at least one from each category observed by preceptor) If not to his/her satisfaction then must be remediated and done until successful.</i>
Family Medicine	10 per week/ 40 per SCPE	Acute care adult
		Chronic care adult
		Preventive and Wellness adult male
		Preventive and Wellness adult female
		Chronic care geriatric
		Acute care geriatric
		Preventive and Wellness pediatric
		Acute care pediatric
Internal Medicine (Inpatient)	10 per week/ 40 per SCPE	Chronic care adult
		Chronic care geriatric
Internal Medicine (Outpatient)	10 per week/ 40 per SCPE	Chronic care adult
		Chronic care geriatric
		Preventive adult male
		Preventative adult female
General Surgery	10 per week/ 40 per SCPE	Pre-operative patient
		Peri-operative
		Post-operative
Obstetrics and Gynecology	10 per week/ 40 per SCPE	Well woman exam
		Gynecological patient
		Prenatal care
Mental Health/Psychiatric	10 per week/ 40 per SCPE	Acute care adult/pediatric
		Chronic care adult/pediatric
Emergency Medicine	10 per week/ 40 per SCPE	Emergent care geriatric
		Emergent care adult
		Emergent care pediatric
Pediatrics	10 per week/ 40 per SCPE	Well child check on infant, child and adolescent
		Acute care pediatric (newborn, infant, child and adolescent)
		Chronic care pediatric

DRESS CODE FOR CLINICAL SITES

Students should maintain a professional appearance and dress appropriately whenever they are representing FMU and the PA profession in any off campus setting. This includes clinical sites, meetings, and special events. Being neatly dressed and well-groomed exemplifies a professional appearance. Clothing should allow for adequate movement during patient care and should not be tight, short, low cut or expose the trunk with any movement. Men are to wear dress pants, shirts and ties. Women are to wear dresses, dress pants or skirts,

with blouses, dress shirts or sweaters. Students are NOT to wear such items as jeans, sweatpants, shorts, cut-offs, sweat shirts, hoodies, T-shirts, tank tops, halter tops, off the shoulder or strapless tops or clothing with rips/tears. No hats.

COATS: A Program-issued white lab coat with an embroidered FMUPAP logo will be worn at all times unless directed otherwise by the preceptor.

SHOES: Wear closed toe dress shoes. No tennis shoes, clogs, sandals, flip flops or shoes with heels > 2".

EAR RINGS - no more than one earring per ear, no dangling or oversized earrings. No ear lobe stretching (gauging). No other visible body piercings are permitted.

OTHER JEWELRY: Watches, wedding bands and/or engagement rings are permissible as appropriate. Other jewelry such as bracelets or necklaces should be small and modest.

NAILS: Fingernails should be kept trimmed and clean. No artificial nails or gel nails. **TATTOOS:** No visible tattoos (must be covered during work hours).

PERFUME / AFTER-SHAVE: No perfumes or after-shaves/colognes.

HAIR: Hair should be clean and arranged so as not to interfere with patient care.

Student Involvement on Clinical Rotations

A student of the PA Program is not a licensed medical provider and, therefore, is not legally or ethically permitted to perform medical acts unless under the direct supervision of a licensed professional. All patients must be presented to the preceptor prior to the implementation of any diagnostic/therapeutic plans or discharge of the patient. The student will not write a prescription for any medication at any time without the direct supervision and the signature of the preceptor. The preceptor is responsible for medical care of the patient and for countersigning all orders, chart documentation, etc., written by the student.

PA Seminars

Students are required to return to campus at the end of each rotation for PA 720 Capstone. This course includes content to prepare the student for graduation.

Graduation Requirements

For a student to graduate they must have successfully completed all courses and clinical experiences with a grade of "C" or better, overall GPA of 3.0 on a 4.0 scale, be in good standing with the program (not on academic or disciplinary warning), and successfully complete the Graduate Evaluation.

Graduate Evaluation

Each section is worth 25% of grade.

(Must complete the following sections with a 77% or better and overall combined 3.0 GPA based on a 4.0 scale.):

A Graduate Evaluation will be made of each student in the final four months of the program which will include:

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- A cumulative multiple-choice examination designed by the program faculty.
- A series of Objective Structured Clinical Exams (OSCEs) assessing patients with complex medical conditions requiring mastery of the physical examination and high-level clinical reasoning skills.
- A scored complete physical examination
- A capstone project (paper, poster, case-study, etc.) reflecting the student's ability to understand, analyze, and communicate information relating to a specific patient, symptom, disease state, medical policy issue, etc. Students will present their findings in an oral presentation to their peers. Project topics will be reviewed and approved by the PA Capstone 720 course director.

A student's failure of any part of the graduation evaluation requires remediation in order for student to graduate.

STUDENT ACKNOWLEDGEMENT

I, _____,
Print Full Name

FMUPAP Student Handbook

have read the Student Handbook for the FMU Physician Assistant Program in its entirety and understand all sections. I have asked to have explained any sections that I had difficulty understanding. I understand that I am responsible for following all the provisions set forth by this manual while I am enrolled in the program. I recognize that these policies are provided to support my professional and clinical development and help me become a successful physician assistant.

I also signify that I have read and understand the following documents and hereby pledge my support.

- FMU Honor Code
- Francis Marion University Student Handbook

I understand what is expected of me as a student of the Francis Marion University Physician Assistant Program.

Student Signature

Date