



DREXEL UNIVERSITY

Physician Assistant

College of Nursing and Health Professions

Physician Assistant Department

Student Handbook

Welcome to the Drexel University Physician Assistant Program Student Handbook. This site contains program information, policies, academic expectations, and resources for PA students.

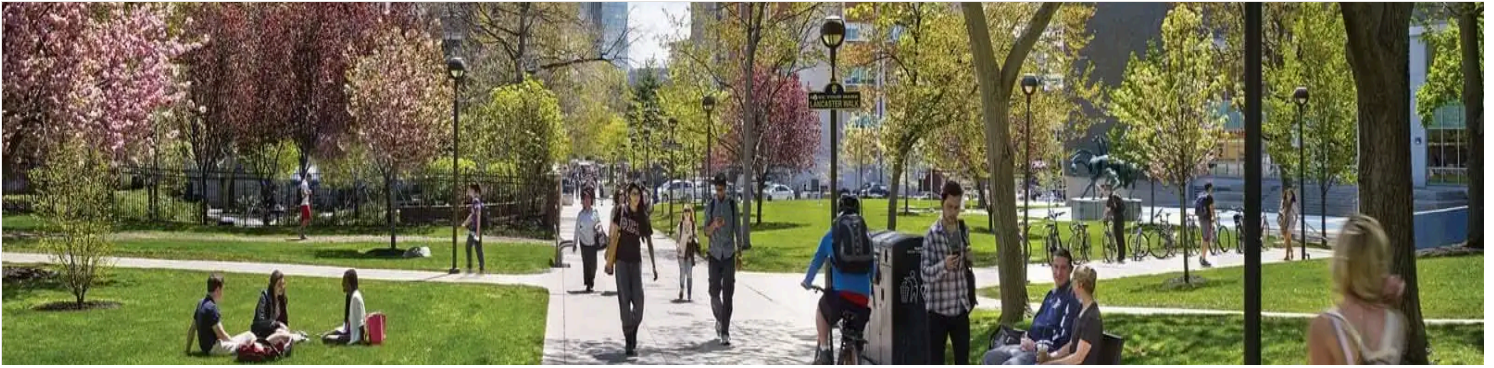
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General Information

ACCREDITATION

At its July 2026 meeting, the Accreditation Review Commission on Education for the Physician Assistant, Inc. (ARC-PA) placed the Drexel University Physician Assistant Program sponsored by Drexel University on Accreditation-Probation status until its next review in July 2028.

Probation accreditation is a temporary accreditation status initially of not less than two years. However, that period may be extended by the ARC-PA for up to an additional two years if the ARC-PA finds that the program is making substantial progress toward meeting all applicable standards but requires additional time to come into full compliance.

Probation accreditation status is granted, at the sole discretion of the ARC-PA, when a program holding an accreditation status of Accreditation - Provisional or Accreditation - Continued does not, in the judgment of the ARC-PA, meet the Standards or when the capability of the program to provide an acceptable educational experience for its students is threatened.

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as specified by the ARC-PA, may be scheduled for a focused site visit and is subject to having its accreditation withdrawn.

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

The program's accreditation history can be viewed on the ARC-PA website at <https://www.arc-pa.org/accreditation-history-drexel-university/>.

[Accreditation Review Commission on Education for the Physician Assistant \(ARC-PA\)](#)

Accreditation by the Middle States Commission on Higher Education of the Middle States Association of Colleges and Schools: Drexel University is fully

accredited by the Middle States Commission on Higher Education representing the highest level of recognition awarded to colleges and universities.

THE PURPOSE OF THIS HANDBOOK

This handbook describes the policies, procedures, practices, and processes governing the Drexel University Physician Assistant Program (DUPAP). DUPAP is an academic unit within the College of Nursing and Health Professions (CNHP) at Drexel University. Accordingly, this handbook should be read in conjunction with all applicable University and College policies and procedures. DUPAP-specific policies supplement, but do not supersede, University or College policies except where expressly permitted by University policy.

Together, these resources provide students with the information necessary to understand the expectations, requirements, and responsibilities associated with their education in the PA Program.

Students are responsible for complying with all applicable University, College, and DUPAP policies and procedures throughout their enrollment in the Program and in all educational settings and activities.

The University and Program reserve the right to amend this handbook and to modify, add, or remove any rule, policy, or procedure at any time during the program, with or without prior notice. Students will be notified of any changes via email and the University's Learning Management Platform.

CODE OF ETHICS OF THE PA PROFESSION

The American Academy of PAs (AAPA) recognizes its responsibility to aid the profession in maintaining high standards in the provision of quality and accessible health care services. The following principles delineate the standards governing the conduct of PAs in their professional interactions with patients, colleagues, other health professionals and the general public. Realizing that no code can encompass all ethical responsibilities of the PA, this enumeration of the Statement of Values of the PA Profession provides a basic framework upon which PAs should develop the tenets of ethical behavior to live by in their professional lives. For a more extensive review of AAPA Guidelines for Ethical Conduct of the PA Profession, please go to [Ethical Conduct](#).

Statement of Values of the PA Profession:

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

MISSION OF THE PA PROGRAM

The mission of the Drexel University PA Program is threefold:

- Educate qualified primary care PAs
- Promote the PA profession
- Improve health care delivery in rural and urban medically underserved areas

Inherent in the mission are significant charges to the faculty and staff in relation to the preparation of students for responsible positions as health care practitioners:

- Provide the student with a comprehensive learning experience offering the opportunities to maximize preparation for the chosen career as a PA
- Ensure by rigorous interval and final comprehensive testing and evaluation that each student has mastered all phases (both didactic and clinical) of training as well as demonstrated the professionalism required of an individual entering into the PA profession
- To every degree reasonably possible, assure certification and licensing authorities, future employers, and, most importantly, health care consumers that graduates have satisfied the training expectations required of a licensed PA

To accomplish its mission and meet its responsibilities, the Drexel University PA Program faculty and staff conduct a rigorous and thorough training experience utilizing a mature, well-proven curriculum delivering comprehensive didactic coursework and a diversity of essential, clinical exposures; thoroughly measures the progress of each student by repeated and eclectic examinations and clinical evaluations throughout the curriculum and comprehensively via summative examinations; and assesses each student's developing professionalism and suitability to become a PA practitioner.

PROGRAM ORGANIZATION

The program director, faculty, and the administrative staff conduct the day-to-day operations of the program. Listed are the faculty and staff members of the Department (effective September 14, 2026).

Name	Title	Email	Room
Ryan Clancy, MSHS, MA, PA-C, DFAAPA	Interim Chair and Program Director; Director, Clinical Education; Associate Clinical Professor	rjc328@drexel.edu	11E15
Ellen Feld, MD	Medical Director; Clinical Professor	edf26@drexel.edu	11E19
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Daniela Livingston, MD, PA-C	Assistant Clinical Professor	dcl33@drexel.edu	11E21
Charles Stream, MPH, PA-C	Associate Clinical Professor	ces432@drexel.edu	Remote

Name	Title	Email	Room
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Michelle Umstead, MS, PA-C	Assistant Clinical Professor	mu77@drexel.edu	11E16
Corina Gamber, MS, PA-C	Assistant Clinical Professor	cg3323@drexel.edu	11E20
Kevin Nguyen, PharmD, BCIDP	Assistant Clinical Professor	kbn37@drexel.edu	11E14
Vincenta Montgomery, DMSc, PA-C	Assistant Clinical Professor	vm624@drexel.edu	11E19
Denise Mielechowski, BS	Program Business Manager	dmm58@drexel.edu	Remote
Martha Davis, BA	Assistant Director, Admissions and Clinical Education	mjd55@drexel.edu	Remote
Nickole Harris	Clinical Support Coordinator	nh623@drexel.edu	Remote

A HISTORICAL PERSPECTIVE OF THE DREXEL UNIVERSITY PA PROGRAM

The Drexel University PA Program began training its first class of 10 students in 1971. The program was housed within the Department of Medicine of the Hahnemann Medical College and Hospital.

Seven students completed the training in 1973 and became some of the first PAs trained in the Commonwealth of Pennsylvania. The PA program became part of the newly inaugurated College of Nursing and Health Professions (CNHP) of Drexel University in July 2000. The PA Program has undergone continuous revision and growth and is among the largest civilian training programs for PAs in the United States. The program inaugurates a new class each fall term. The program offers several experienced full-time faculty of PA educators and support staff to guide

students through both didactic and clinical training. The program maintains a cadre of affiliate clinical faculty and training sites across Pennsylvania, in surrounding states, and other locations nationally. PA program students must work hard, but the rewards are well worth the effort. Graduates enjoy a well-deserved, nationally known reputation for excellence. Drexel PAs are employed in virtually every medical discipline throughout the United States.

Since August 2022, Drexel University PA Program is in the newly constructed Health Sciences Building on Drexel's main campus in University City. Drexel is a leading destination for learners, clinicians, researchers and industry partners. The University City area of Philadelphia is home to the University of Pennsylvania and several hospital locations. It is a vibrant part of the city with a growing number of restaurants and well-being spaces.

THE EDUCATIONAL PARTNERSHIP

The training of PAs is a challenging and demanding endeavor for both the student and the personnel of the educational program. The most efficient and satisfactory educational experience occurs when the student and the program personnel work in concert in a cooperative and respectful manner to achieve the goals of the student and the program.

Professional training engenders two major tasks to be accomplished during the educational experience:

Teaching is primarily the responsibility of the core and clinical adjunct faculty and administrative staff who seek to provide an environment conducive to effective presentation of that which must be mastered by the student to enter the PA profession. Traditional components of the educational milieu are part of the curriculum: classrooms, laboratories, special training equipment and supplies, clinical training venues, evaluative mechanisms, faculty, and administrators. The PA Program, the College, and the University also provide additional mechanisms and services to support the student during the training experience, including Policy and procedure guides and course-specific learning objectives. Additional services include program faculty advisors, academic advisors, library services, co-curricular support offices, and the student health center. The university provides approved educational accommodations through the Office of Disability Resources (ODR) for those students with documented needs, tutorial services, study skills assessment and training. Students also receive access to individual and family counseling, an official university email account, internet-accessible classrooms, complimentary, downloadable, educationally related software, bookstore services, access to fitness/wellness facilities, and a variety of student government and socially oriented activities.

Learning is, by necessity, the sole responsibility of each individual student; the student is the only one who can actually assimilate the knowledge and develop those skills required for that student to function effectively as a PA. The DUPAP makes every student aware, as early as the time of application to the program, of the specific parameters (technical standards) necessary for successful training as a PA by making those standards available on the [PA Program website](#). Those technical standards (also listed in [Appendix D](#) of this handbook) provide an excellent overview of the capabilities and capacities required for successful training and should be used by the student as a basis for formulating an effective strategy for mastering this professional curriculum and achieving the goal of becoming a PA. As is apparent from the technical standards, successful training involves more than attending classes and reading assignments. Integration of learned materials and skills and then effective application to new encounters and situations is the hallmark of successful professional training. It is incumbent upon each student to dedicate the time and effort needed for individual success. Any student encountering difficulties interfering with effective study should seek immediate assistance from the student's academic or faculty advisor, course directors, or the DUPAP directorship.

Many of these essential aspects of the "teaching/learning" partnership are further elaborated in subsequent pages in this handbook for the edification of the reader.

AN OVERVIEW OF EDUCATIONAL GOALS AND PHILOSOPHY

The training curriculum prepares the student for entry into the PA profession. In addition to the certificate of completion of training as a PA, the student meeting the prescribed requirements will receive the Master of Health Science Degree from Drexel University. To meet those professional training and educational objectives, the curriculum includes skills and knowledge-based course work as well as extensive clinical practica that provide a unified curriculum that best meets the needs of the professional PA student.

PA training may differ significantly from more conventional educational experiences encountered by the student. While similar in that each student is required to amass an immense fund of medical knowledge and be proficient in numerous psychomotor skills relating to evaluation and treatment, the student also must develop the highest standards of professionalism. Inherent in becoming a member of the PA profession is the student's willingness to adopt the commonly accepted norms of appearance, demeanor, attitude, ethics, and performance standards adhered to by the other members of the PA profession. The faculty regards the professional aspects of a student's education with the utmost importance and will continuously evaluate those aspects of the student's individual development. Until

the student has demonstrated to the faculty that they are knowledgeable and professional, that student will not be certified as having mastered the training required to become a PA.

The Drexel University Physician Assistant Program's Core Competencies for the New PA Graduate are provided in [Appendix A](#). Additional information regarding the relationship between PA professional competencies and the curriculum is provided in [Appendix B](#). The Functions and Tasks of Graduates are provided in [Appendix C](#).

INSTRUCTIONAL METHODOLOGIES IN PA EDUCATION

Throughout the training of the PA student, PA educators employ various teaching modalities, both conventional lecture-based instruction as well as other, less frequently encountered methods experienced in non-professional training.

The faculty believes that a student's awareness of the underlying reasoning enhances the effectiveness of the employed instructional methodologies.

One of the most important tasks of a PA student is to develop self-reliance and confidence in the ability to acquire knowledge through self-study. The curriculum is designed to assist the student in achieving independence and self-sufficiency in a variety of ways. Teaching styles may differ from those previously encountered and seem unfamiliar at first, but they are intended to develop the skills needed for a career in medicine. Every student must develop the ability to search out answers to questions because, as a graduate PA, one must have the initiative to answer new questions to continue to expand one's personal knowledge and expertise. This capacity is essential to becoming a competent medical practitioner.

In many courses, the student will be assigned class presentations. This is to develop the skills to present material clearly, logically, and succinctly; just as one will be presenting cases to patients, colleagues, and collaborating physicians. Such assignments represent ways to further the internalization of a body of knowledge because, to present well, one must know the material thoroughly.

The student hears repeatedly that the lecture objectives, topics, and live presentations cannot possibly encompass all the information needed to know about that subject, and that is absolutely true! Every student must read and study texts and other references to flesh out the classroom presentations that are overviews and not the maximum needed to know about any given topic.

The student must learn to organize, prioritize, and synthesize by expanding the classroom experience each day. Procrastination is to be avoided. Each student should establish a daily study routine sufficient to permit ongoing mastery of the material as it is being presented. In many cases, the instructors are people whose medical specialties are the subjects they are presenting.

The beginning student cannot possibly achieve their levels of expertise overnight; with diligent effort utilizing dependable study skills, the student will be able to give substance to the levels of knowledge needed in specific areas.

Throughout the program, every student will take many computer-based quizzes and exams using methodologies such as multiple choice, fill-in-the-blank, labeling, matching, short answer, and essay questions. There will also be oral examinations, practical examinations, standardized patient encounters, and simulated patient encounters at various points in the curriculum. Such testing maximizes the student's exposure to different ways of recalling and integrating information.

Individual competency assessments promote continuous application of academic information to clinical problem-solving. Each student is urged to look upon every testing situation as a learning opportunity; becoming proficient in test-taking helps to ensure the maximum benefit from each experience.

PROGRAM TECHNICAL STANDARDS

The goal of the DUPAP is to prepare the student to become a competent, caring PA, possessing the skills for lifelong learning necessary to incorporate new knowledge and methods into medical practices required to adapt to the changing professional environment.

There are specific technical standards that are prerequisites for admission, progression, and graduation from the DUPAP.

Every PA student must be able to perform independently, with or without reasonable accommodation, a diversity of skills related to effective performance as a professional student and health care practitioner in training. A detailed description of those essential functions and technical standards required of each PA student are in [Appendix D](#) of this handbook. Each student must be fully cognizant of the essential functions and standards; questions or concerns about the essential functions and standards should be discussed with the designated faculty advisor. Any student incapable of meeting these functions and technical standards is counseled to seek an alternative career path.

ACADEMIC CALENDAR

The Drexel University PA Program follows the Drexel University [Academic Calendar](#), which includes university holidays, class start and end dates, final examination periods, add/drop and withdrawal deadlines, and other important academic dates.

During the clinical phase of the program, clinical placement schedules generally align with the Drexel University Academic Calendar. However, students are required to follow the schedule established by their assigned clinical site, which may differ from the University calendar.

PLAN OF STUDY

The plan of study, course descriptions and degree requirements are located in the [Drexel University Course Catalog](#).

FOSTERING CULTURE, CLIMATE AND BELONGING

Drexel University and the College are committed to creating an environment that fosters [Culture, Climate, and Belonging](#). As a member of CNHP, the Program is committed to upholding these principles and being a place whose students, faculty, and professional staff reflect the richness of Philadelphia and the global community.

CNHP also strives to be an environment where its policies and practices ensure equitable treatment of and advancement for all, and one that creates a culture where all members of the community are welcomed and feel respected and valued as agents in their own education and professional development. Our future success depends on continuing and enhancing our commitment to these principles, enabling us to harness and sustain our creative and innovative spirit.

As per the mission of CNHP, to live our values of justice and health fairness, and for everyone across our communities to be ceaseless advocates for health as a human right, we must ensure that future healthcare providers, like PAs, have a deep sense of health disparities and what they can do to address them. As such, CNHP and DUPAP are committed to ensuring that its culture, classrooms, study areas, and work environments are places where all voices are heard, people are seen, and lived experiences are honored.

The Drexel University PA Program (DUPAP) **Statement of Culture, Inclusion and Belonging**: DUPAP strives to support our academic community and the mission of CNHP. We aim for students to become skillful clinicians when working with

medically underserved patients. Our goal is for our future PAs to understand and respond to social determinants of health.

THE DUPAP STATEMENT ON WELLNESS

The Drexel University Physician Assistant Program (DUPAP) recognizes that personal wellness is an important component of student success, professional development, and the ability to provide safe, compassionate, and effective patient care. Consistent with Drexel University's commitment to the health and well-being of its students, DUPAP seeks to foster a learning environment in which students are encouraged to attend to their physical, emotional, social, and psychological well-being throughout their education.

Physician assistant education is academically and clinically rigorous, and students may encounter periods of significant stress as they balance the demands of coursework, clinical education, professional development, and responsibilities outside of the Program. DUPAP encourages students to develop sustainable practices that support personal wellness, recognize signs of excessive stress, impairment, and burnout, and seek assistance early when personal circumstances may affect their health, well-being, academic progress, or ability to meet professional responsibilities. Seeking appropriate assistance is consistent with responsible professional behavior and should be viewed as an important component of self-awareness and professional development.

The Program incorporates education related to personal wellness, prevention of impairment, and prevention of burnout into the curriculum and encourages students to develop skills and habits that can support their well-being throughout PA education and their future careers. Wellness is understood broadly and may include attention to physical and mental health, sleep and restorative activities, supportive relationships and social connection, healthy coping strategies, financial and environmental stressors, and the development of appropriate boundaries and strategies for managing the demands of professional practice.

The Program's commitment to wellness does not eliminate the academic, technical, clinical, or professional requirements necessary for progression and graduation. Rather, DUPAP seeks to create an educational culture in which high standards and student well-being are mutually reinforcing. Developing the ability to recognize one's own needs, use appropriate resources, maintain personal wellness, prevent impairment and burnout, and seek assistance when needed is part of the preparation for a sustainable and responsible career as a physician assistant.

STUDENT MISTREATMENT AND HARASSMENT

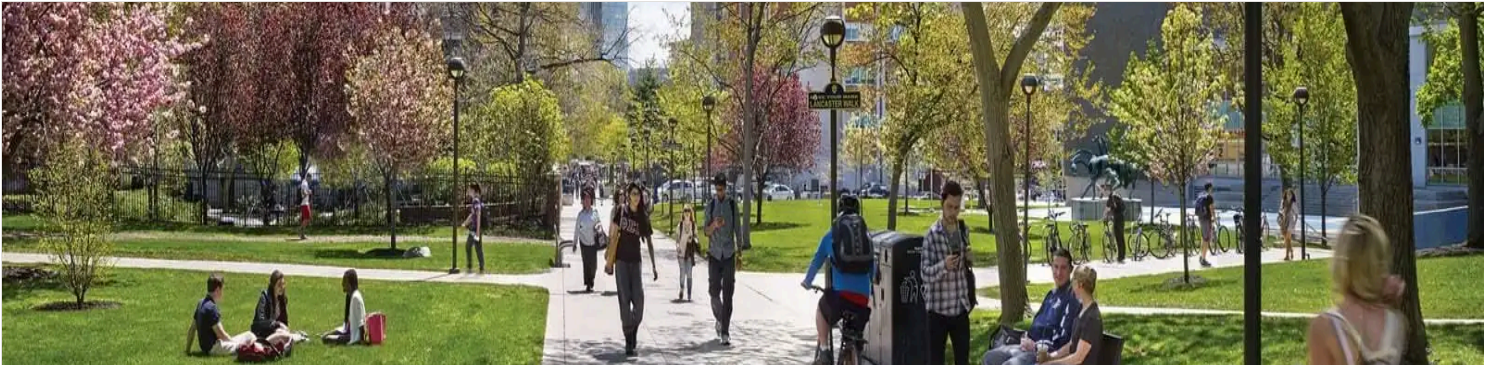
The Drexel University Physician Assistant Program is committed to maintaining a respectful and professional learning environment. Students have the right to participate in all didactic and clinical educational experiences free from mistreatment, harassment, discrimination, intimidation, and retaliation.

Mistreatment may include verbal abuse, bullying, humiliation, inappropriate use of authority, threats related to grades or evaluations, discriminatory or harassing conduct, retaliation, or other behavior that interferes with a student's educational experience. Appropriate academic evaluation, supervision, and constructive feedback are not considered mistreatment when conducted professionally.

Students may report concerns to the PA Program Director, Director of Clinical Education, another PA Program faculty member, or an appropriate College administrator. Students are not required to report a concern to an individual involved in the alleged conduct.

Students may also use Drexel University's [Student Academic Concerns & Complaints](#) process. Concerns involving discrimination, harassment, bias, or retaliation may be reported directly to the [Office of Civil Rights Compliance](#) in accordance with University policy. The [Office of the Ombuds](#) is also available as a confidential, informal resource for students seeking assistance in navigating concerns.

Retaliation against a student who raises a concern in good faith or participates in the review of a concern is prohibited.



Student Resources and Support

STUDENT RESOURCES AND INFORMATION

Computer Assistance

Visit the Information Technology website [here](#), call the IT Helpdesk at (215)895-2020, email: consult@drexel.edu

Photography for Official University Use

Drexel University reserves the right to photograph members of the University community including, but not limited to, its students, faculty, and staff, in situations appropriate to the image of an academic institution, and to publish likenesses in Drexel University publications, video, websites or other recruitment or promotional materials.

Bookstore

[Drexel's Online Bookstore](#)

Drexel University Library Services

The [Library](#) offers a variety of services and resources to the Drexel University community including reservable study spaces, equipment, course reserves, and authoritative information resources. The Drexel University Libraries provides numerous in-person and virtual services to support students with their coursework and research. The W.W. Hagerty Library is located on the University City Campus (3300 Market Street, Philadelphia, PA 19104).

Public Safety and Crime

The Drexel University [Department of Public Safety](#) works diligently to foster and maintain a safe environment for students, faculty, staff, visitors, and neighbors. The department's holistic and community-oriented approach to safety includes foot, bike, and vehicle patrols, a state-of-the-art dispatch center 24/7, walking escort services, DREXELALERT text messages to relay timely information, the Drexel Guardian app, and other safety technologies, and robust community engagement. To report a crime, one can either call 911 or 215-895-2222, which will connect to the dispatch center (TTY: 445-221-5436). The Drexel Guardian app can also be used for reporting. For more information about these public safety resources, policing and security, communications and operations, crime reports, or to submit a report or request, please see the Drexel University Office of Public Safety website.

In Case of Emergency:

After-Hours On-call Counselor: 215-416-3337 (for Drexel students only)

Drexel Public Safety: 215-895-2222 or dial 911

Students can call Public Safety at 215-895-2222 to request "medical transport" to the [Student Health Center](#)

The Center for Learning and Academic Success Services (CLASS)

[CLASS](#) provides academic support, including but not limited to academic coaching and tutoring, as well as study skills workshops

Spiritual and Religious Life

The [Office of Spiritual and Religious Life](#) and the [Student Center for Culture and Community](#) collaborate with students and campus or community chaplains to cultivate a culture of mutual respect for the variety of faith traditions on campus.

Student Health Center

The [Student Health Center](#) is located at 3401 Market Street, Suite 105B, Entrance 34th Street across from DAC.

Food and Housing Insecurity

Students experiencing food or housing insecurity are encouraged to access available University and College resources.

Dean's Emergency Fund: CNHP students in good academic standing who experience an unexpected financial emergency may be eligible for limited emergency assistance. Funds may support urgent needs such as temporary housing, emergency medical expenses, essential supplies, or crisis-related travel. Students may review eligibility requirements and application information through the [CNHP Scholarships and Financial Support](#) page or contact cnhpscholar@drexel.edu.

Mario's Market: Drexel also provides food assistance to students experiencing food insecurity through [Mario's Market](#).

Writing Center

The [Drexel Writing Center](#) helps all members of the Drexel community think through and develop writing projects. The Writing Center offers in-person and online workshops to help graduate students with a range of writing topics.

Office of Counseling and Health Services

The [Office of Counseling and Health Services](#) aims to support students' physical, personal, and psychological well-being. We offer programs and services to assist students with embracing and maintaining good health.

Office of Disability Resources

The mission of the [Office of Disability Resources](#) is to provide equal opportunities and equal access to education, employment, programs, and activities for individuals with disabilities at Drexel University. The Office of Disability Resources is located at 3141 Chestnut Street, Suite 228, Philadelphia, PA 19104, (phone) 215-895-1401, (TTY) 215-895-2299, (fax) 215-895-1402, email; disability@drexel.edu.

Transportation

Complimentary shuttles for students and employees of the university operate among the various University campuses. A University I.D. Card is required to ride the shuttles. For shuttle bus information and schedules click [here](#). Information regarding campus parking is available [here](#).

STUDENT ACTIVITIES AND DUPAP STUDENT SOCIETY

Student Organizations

Numerous regional activities, general student government, and other student organizations are available to DUPAP students. More information is available [here](#). Professional student-physician-assistant-related organization memberships are available to DUPAP students. More information will be presented about these organizations shortly after matriculation orientation.

Wilbur W. Oaks Student Society

The Wilbur W. Oaks Student Society is the DUPAP society that serves as the official service organization of the students of the Drexel University Physician Assistant Program, which is to promote the Physician Assistant as a qualified and competent member of a Professional Health Care Team.

Professional Organizations

- a. The Pennsylvania Society of PAs ([PSPA](#)) is Pennsylvania's official constituent chapter of the AAPA (see below), actively supports PA students in the Commonwealth of Pennsylvania, and invites student membership.
- b. The American Academy of PAs ([AAPA](#)) is the national, professional organization for PAs. There is an active student constituency (SAAPA) within the AAPA that advocates for PA students and student-related issues.

ACADEMIC AND FACULTY ADVISORS

Each student is assigned two advisors—a faculty advisor who will be a member from the PA program, and an Academic Advisor. At Drexel University, **your academic advisor serves as your academic home base**. They act as a central guide, liaison, and advocate from your first term through graduation. These individuals guide and mentor students throughout their tenure in the program. Academic and faculty advising cultivates collaborative relationships to guide students through their development within an inclusive environment, educating and empowering them to make informed decisions for success. Meetings will be scheduled with the faculty advisor at least once per term and as needed throughout the didactic and clinical components of the curriculum. Drexel University's College of Nursing and Health Professions recognizes academic advising to be a critical component of the educational experience of its students. CNHP's Department of Student Services seeks to provide student-centered academic advising services by building relationships, collaborating and providing students with the tools and resources they need to be successful.

Because the student is frequently the first to know of academic difficulties or personal problems that are adversely affecting performance, the student is expected to communicate with their advisor(s) promptly. Communication is an important aspect of professional development.

Although the graduate student is expected to handle situations to the best of the student's own ability, there may be times when it is advisable to make their faculty advisor or academic advisor aware that a difficult situation exists. Ongoing communication between the student and their advisors will ensure that the PA Program can be responsive to the needs of individual student situations or change in status.

The faculty advisor should be your primary point of contact for assistance with program-specific or field-specific questions, concerns, and support.

The academic advisor should be your primary point of contact for questions regarding plan of study, program progression, and navigating your student experience at Drexel University.

The faculty advisor is informed about the student's academic progress, including any examination failures, breaches of professionalism, or violations of policies across the entire spectrum of the student's training, and plays a major role in identifying and addressing academic and professional difficulties manifesting with any of their advisees.

The appropriate, preferred course of action for a student is to discuss any failed examination first with the course director, and the student should then schedule a follow-up meeting with their faculty advisor. The student and faculty advisor should review the potential need for additional intervention to address the student's substandard academic or professional performance.

CENTER FOR INTERPROFESSIONAL CLINICAL SIMULATION & PRACTICE

The College of Nursing & Health Professions faculty offer simulation experiences for students within the CICSP and other learning labs. Simulation experiences include task trainers, standardized patients, human patient simulators (computerized manikins), as well as hybrid experiences (a blending of two or more simulation experiences). Many of these experiences are recorded (video & audio) and assist the student(s) and faculty with mentorship and debriefing.

Confidentiality is essential to the learning process with simulation. Students are asked not to discuss events of simulations or debriefings with other students. As a leader in simulation education, the College of Nursing & Health Professions participates with members of outside institutions in educating healthcare professionals, academics, and 3rd party vendors about the process of utilization of simulation in student learning as well as administrative and technical aspects. Students are not identified nor are individual performance shared with any outside professional. More information on CICSP [here](#).

The Program uses these educational methodologies to maximize the student's self-confidence, self-sufficiency, and self-awareness as a developing health practitioner. Taking full advantage of the challenges of these experiences greatly facilitates training and development into the competent PA each student wants to become.



Student Policies

PROFESSIONAL STUDENT RESPONSIBILITIES AND POLICIES

Drexel University expects every student to exhibit initiative and responsibility in planning and executing the student's own professional training program. The student must always comply with the regulations and administrative procedures governing study in the specific major program of study.

Professional Conduct

The Program recognizes the absolute necessity for the highest standards of professionalism during training as a future health care provider. The faculty will continually evaluate the student in professionalism with the same emphasis and vigor as is devoted to academic and clinical performance.

Professionalism includes not only academic excellence and superior clinical performance, but also the demonstrated abilities to work productively with and relate effectively to peers, program staff, faculty, preceptors, and the other members of the health care team. Sensitivity to patient and community needs, as well as courtesy, respect, a positive attitude, punctuality, consistent attendance during all phases of the training experience are integral aspects of professionalism. The abilities to graciously accept and effectively profit from constructive criticism, assume personal responsibility for one's own actions, meet stated and implied requirements and expectations, willingly take, and follow through upon directions to completion, and exhibit flexibility and the spirit of cooperation during unexpected or adverse conditions are essential to becoming a true professional.

Every student must obey local, state, and federal laws and statutes and comply with the spirit and mandates espoused in the Code of Conduct of Drexel University as well as the policies of the University, the College of Nursing and Health Professions, and the Program.

Unprofessional conduct is unacceptable and warrants appropriate corrective or disciplinary action by the University, the College of Nursing and Health Professions, and the Program that may include dismissal from the University and the Program (Refer to the Academic Progression and Student Standing section of this handbook)

Disorderly or Disruptive Conduct

Conduct that interferes with, impairs, or obstructs the orderly conduct, processes, and functions of the University or which may adversely and unreasonably impinge on the legitimate interest of others is prohibited. Such conduct includes, but is not limited to, excessive noise, public intoxication, loud or indecent conduct, interference with the ability of others to enter, use, or exit any University facility, service, or activity, intentionally interfering with the freedom of expression or movement of others, interfering with University activity such as teaching, research, recreation, meetings, and public events, physical violence, reasonable apprehension of harm, or threat of violence against oneself or any member or guest of the University community. This prohibition extends to conduct outside the University that, in the University's sole judgment, is detrimental to its mission and interests (See also [Classroom Disruption](#)).

Civility and Student Code of Conduct

Drexel University expects all students to conduct themselves responsibly and in a manner that reflects favorably upon themselves and the University. When a student does not act responsibly and violates the University or academic program policies, rules, regulations, or standards of conduct, formal disciplinary action may result. The Conduct process reflects the University's concern that students maintain high standards. The Conduct process attempts to foster personal learning and growth, while at the same time holding individuals and groups accountable for inappropriate behavior. Likewise, Drexel University College of Nursing and Health Professions holds a shared philosophy and purpose as the University. In addition, the programs in this College have heightened standards of conduct given that the health professions are bound by standards of practice, codes of ethics, as well as licensure and certification boards.

Civility has to do with courtesy, politeness, and good manners. Civility is the awareness and recognition of others in all interactions and demonstration of a high level of respect and consideration. In civility, we recognize that no action of ours is without consequence to others or ourselves. We need to anticipate what these consequences will be and choose to act in a responsible and caring way.

Uncivil behaviors are acts of rudeness, disrespect, and other breaches of common rules of courtesy. These acts of incivility range from disrespectful verbal, non-verbal, or written behaviors to physical threats to another's well-being. Incivility is a lack of awareness and recognition (intended or unintended) of others in our interactions when we fail to give them a high level of respect and consideration. Incivility usually results when one does not anticipate how actions will affect others.

Drexel students are expected to know and comply with the Student Code of Conduct. To learn about the Code and Community Standards at Drexel go to the [Office of Student Conduct](#) and Community Standards.

STUDENT CONDUCT AND SAFETY POLICIES

Alcohol

Drexel University's policy regarding alcohol is consistent with the laws of the Commonwealth of Pennsylvania. This policy along with violations of the University Alcohol policy and sanction guidelines can be found [here](#).

Drugs

Drexel University prohibits the possession and/or use of narcotics or drugs other than those medically prescribed, properly used, properly secured, and in the original container (hereafter: Drugs). Drugs and drug paraphernalia will be confiscated if found on University property.

Paraphernalia is defined as anything used to consume/distribute/ handle/prepare/use drugs. A detailed description of this policy along with violations of the policy and sanction guidelines can be found [here](#).

Smoking

In alignment with The Commonwealth of Pennsylvania's Clean Indoor Air Act (CIAA), Drexel University prohibits smoking in all university buildings and within 20 feet of entrances, windows, and air intakes.

Weapons

Per [Drexel University Security Guidelines](#), the University prohibits the possession or use of any weapons capable of inflicting serious bodily injury on any and all University buildings and property, including vehicles parked in our garages and on our lots. Per Drexel University policy, only certain individuals approved by the University may be given authority to carry, keep, and handle pistols, firearms, and/or ammunition.

STUDENT IDENTIFICATION AND BUILDING ACCESS

- a. The DragonCard is the official University ID card for students, faculty and professional staff and must be carried at all times while on university-owned property. More information and office locations can be found [here](#).
- b. Drexel University maintains strict policies regarding building access on the University City Campus. All students are required to follow the procedures outlined in the [University City Campus Building Access Guidelines](#). Additionally, most Drexel University buildings are equipped with card readers to allow individuals with a Drexel Identification Card (known as a DragonCard) to enter. Individuals may be asked to produce their DragonCard upon request from a Public Safety officer or other university official when on or in any University-owned property. Access control privileges are determined by university administrators based on specific needs and requirements of the University and the cardholder. Individuals are not permitted to use someone else's

DragonCard, lend their card to anyone or tamper with it in any way. The cardholder is responsible to report immediately a lost or stolen card or one that fails to operate correctly.

INFORMATION FOR STUDENTS WITH DISABILITIES

In compliance with Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act of 1990, and applicable federal and state laws, Drexel University ensures people with disabilities will have an equal opportunity to participate in its programs and activities.

Members and guests of the Drexel community who have a disability need to register with the Office of Disability Resources (ODR), if requesting auxiliary aids, accommodations, and services to participate in Drexel University's programs.

Students with Disabilities and Accommodations

Students who believe that they may need academic adjustments while in the PA Program are encouraged to contact the [Office of Disability Resources](#). Students with disabilities requesting accommodations and services at Drexel University need to present a current accommodation verification letter (AVL) to the office before accommodations can be made. AVLs are issued by Disability Resources (DR).

STUDENT EMPLOYMENT POLICY

Outside Employment

The rigorous, full-time nature of the Physician Assistant program, encompassing academic coursework, clinical rotations, and mandatory program events, requires students' full academic and professional focus. Therefore, outside employment during enrollment is strongly discouraged.

Program schedules will not be adjusted to accommodate work obligations. This policy ensures compliance with accreditation standards, safeguards patient safety, and maintains the integrity of the learning environment.

Employment by the Program

Students must not be required to work for the program in any capacity, whether paid or unpaid.

- a. Substitution for Faculty: Students may not teach courses, lead labs without faculty supervision, or assume the primary responsibility for instruction. Faculty members are responsible for all aspects of instruction.

- b. Substitution for Clinical Staff: Students may not function as or replace clinical staff, including but not limited to medical assistants, nurses, or other healthcare professionals. Clinical rotations are for learning purposes, not staffing solutions.
- c. Substitution for Administrative Staff: Students may not perform administrative duties that are the responsibility of paid staff, such as record keeping, scheduling, or office management.
- d. Independent Practice: Students may not practice medicine independently. All patient care activities must be performed under the direct supervision of a licensed healthcare professional.

CURRENT ADDRESS AND TELEPHONE

It is essential that each student keep the program, and the university advised of their current mailing address and telephone number so that important mailings or messages can be delivered in a timely fashion.

1. The student may also review and change demographic data online in the Banner Web for Students account accessible through the [DrexelOne portal](#).
2. If a student's address or telephone number changes, the student must make both the changes through the Banner web for Students account and notify the DUPAP directly.
3. Difficulties arising from a student's failure to keep the program informed of these changed data are the student's responsibility, and the student bears sole responsibility for failing to keep current address and telephone information on file.

SOCIAL MEDIA GUIDELINES AND POLICIES

The Drexel University PA Program recognizes the ubiquitousness of social media, including applications such as Facebook, X, Instagram, and others. As a student in the PA Program, and as a healthcare professional, one should be aware that posting certain information and/or images on social media sites may be viewed as unethical, unprofessional, and in some cases, in violation of PA Program, CNHP, and University policies. Students are referred to, and expected to comply with, the Drexel University and PA Program policies on privacy, professionalism, discrimination, and harassment.

Some social media guidelines to consider...

- Students should monitor their online presence as well as online site policies and privacy settings. Maintain up-to-date use of privacy settings to limit the unknown or unwanted access to your profile or application.
- Remember that those with your permission to view your information may have the ability to share it without your consent. Therefore, all postings (information, photos, and videos) should be considered public and potentially visible to anyone at any time.

- Posting information and images online should be considered permanent. Deleting a post does not ensure removal. Data can be recalled and retrieved as it is often archived online, or others may have recorded your postings prior to removal.
- Students should represent themselves in a mature, professional, and responsible manner. Uncivil or disrespectful language used in communications is considered unprofessional and therefore not acceptable. Remember, potential employers, licensing boards and healthcare facilities where you may seek privileges and other individuals may screen social networking sites.
- Social media use can be a helpful tool, but users must realize that statements made online are considered to represent the views of an individual as if spoken verbally or written. Saying something electronically carries no less weight than communicating it in any other way. It is considered unprofessional to criticize classmates, peers, preceptors, or university faculty/staff. Damaging the reputation of another is also considered to be unprofessional behavior and could result in personal liability to you if found to be defamatory in a court of law. The nature of online communication makes such comments more lasting than you may initially believe.
- Your actions online are subject to legal ramifications. Please carefully consider your words and ALL possible consequences before writing/ posting/sharing.

Drexel University and the Drexel PA Program reserve the right to discipline students using social media in a manner which violates applicable Drexel University or PA Program policies, rules, and regulations. Examples of behavior which could result in disciplinary sanctions include, but are not limited to the following:

- a. Posting patient information.** Students may not post or otherwise disclose patient information in violation of a federal or state law or applicable professional ethics and healthcare facility policies. This includes cases or pictures. Removal of an individual's name does not constitute proper "de-identification" of protected health information. Furthermore, inclusion of data such as age, gender, race, diagnosis, date, or location of evaluation may still allow the reader to recognize the identity of a specific individual. Students may not take or post photos of patients or health care environments/rotation/ preceptorship sites. Photos may contain background identifying features of which you may not be aware.
- b. Posting program curriculum information.** Students may not share information about program curriculum or exams in any way that violates Drexel University or PA Program academic misconduct policies.
- c. Misrepresentation.** In posting information on social networking sites, students may not present or represent themselves as official representatives or spokespersons for Drexel University or the PA Program.
- d. Harassing or discriminatory postings.** Your use of social media may not violate the policies of [Drexel University's Office of Civil Rights Compliance](#)
- e. Violating the Acceptable Use Policy.** All social media activities involving use of Drexel's computer and network resources, including all electronic communication systems and

equipment, must comply with the Drexel University Acceptable Use Policy found at: <https://drexel.edu/it/about/policies/policies/01-Acceptable-Use/>

- f. **Inappropriate relationships.** It is considered unethical to establish non-professional relationships with patients, including inviting them to social network groups or accepting invitations from them. Additionally, requests from those who supervise or teach you to engage in activities outside of class sites are considered inappropriate. Such requests should be reported to the head of the PA Program or College Dean. Other forms of inappropriate behavior include "cyberstalking" and "sexting."
- g. **Copyright/trademark violations.** Seek the proper permission before posting photos, videos, or other media that you do not own.
- h. **Giving medical advice.** Students are not licensed healthcare providers and should not offer medical advice as a medical professional. You should in no way diagnose, manage, or medically advise any other individual on social media sites.

EMAIL AND ELECTRONIC COMMUNICATION

All students using email should adhere to standard and professional behavior when communicating via email. Some rules to remember:

1. Students are expected to have computer access daily.
2. Students should check their email twice daily and respond to all emails from DUPAP faculty and staff within one business day.
3. Always address an email to someone professionally: For example, an email to a professor should begin with: 'Dear Professor or Dr. Jones' or "Dear Mr./Mrs. Smith"
4. Always sign an email so the receiver knows who has sent it
5. All email correspondence should be written in a professional manner.
6. Be very judicious when copying (using the C.C. function at the top of your email routing) an email to someone. It may be improper to copy or forward another email or correspondence to another party without the permission of the receiver. Remember, copying or forwarding a memo to another party is very different than forwarding an article from the internet.
7. Avoid profanity. Avoid slamming– the use of harsh words to others in a public forum
8. What is written is often not easily deleted – especially by the party who receives the e-mail.
9. Return important emails that are sent in a timely manner. Avoid spamming– mass forwarding of items that may not be of interest to all members of the class.
10. Avoid the use of caps as much as possible.
11. Only write in an email what could be put on an office door – for the world to see.

12. Email transmitted fully or in part over University-operated computer infrastructure is subject to the [Drexel University Acceptable Use Policy](#).

13. Violators are subject to disciplinary action.

The DUPAP, the College of Nursing and Health Professions, and Drexel University use electronic forms of communication such as email and postings on secure Canvas sites to officially communicate with the student.

- a. The faculty, staff, and administration communicate individual or group messages electronically concerning schedule changes, forms, lecture materials, reminders, University and College announcements, etc.
- b. The DUPAP and other official university sources will direct its email communications to the student's official Drexel University email accounts ONLY.
- c. Every student is fully responsible for all electronic communications sent by the DUPAP.
- d. Additionally, the student is required to check the Canvas course and class shells for DUPAP and course-specific information
- e. Failure on the part of students to check for official communications and to respond appropriately to those messages may have severely deleterious consequences for which students will bear personal responsibility.
- f. The student is expected to activate the official university student email accounts immediately. Each student is to activate their account by following the instructions here: [Office 365 email setup](#)
- g. The student should use the email signature of PA-S for all email communications
- h. [The Drexel One Portal](#): The University has established an online, unified, electronic resource for students and employees. Access requires the user to have an activated, official University email account and User ID. Through the portal, the student may access local Philadelphia information of interest as well as a wide range of University-related information and services, including calendars, unofficial transcripts, registration, student billing, Canvas course links, and much more. Students are encouraged to explore and use the many services accessible through Drexel One.

HEALTH CLEARANCE AND COMPLIANCE POLICIES

To remain compliant throughout all phases of the Program, students must complete the required compliance processes by the established due dates. Failure to meet these requirements may result in the student being considered non-compliant and unable to progress in the Program. Please refer to Drexel Compliance website at [CNHP Clinical Compliance](#) for all specific information with questions directed to cnhpcompliance@drexel.edu.

Health Insurance

All students MUST provide proof of health insurance prior to matriculation. Each student's personal health insurance policy must remain active throughout their participation in the program. Students will be automatically enrolled in Drexel University's student health insurance unless coverage is waived per the University's criteria. Additional information regarding student health insurance requirements can be accessed [here](#).

Students are financially responsible for the cost of all health care services they may require while enrolled in the program, including any health care services required as a result of their participation in scheduled program activities (e.g., TB testing, immunizations, treatment of injuries, pathogen exposure evaluation and treatment). During the clinical phase of training, students are required to carry their insurance card with them to each clinical/practicum experience.

Environmental Health and Safety (EHS)

All students must complete online core courses/modules through BioRAFT. These modules include Clinical Bloodborne Pathogens, Emergency Response, Fire and Life Safety, Clinical Hazard Communication, Clinical Sharps and Needle Safety, Clinical Personal Protective Equipment, Respiratory Protection, Clinical Infection, Prevention and Control, Compressed Gas Safety, and Mercury Safety.

Students access this online training via www.drexel.bioraft.com and can contact EHS at safehealth@drexel.edu for any questions about the online platform.

Immunizations/Health Requirements

Drexel University requires all entering students to complete several immunizations and a health assessment before matriculation. Forms and additional information can be found at [CNHP Compliance Forms](#)

Substance Abuse Guidelines

Students are expected to follow CNHP Substance Abuse Guidelines at [CNHP Substance Abuse Guidelines](#) and Drexel University policies (see [Student Conduct and Safety Policies](#))

CPR Certification

Students must maintain current CPR certifications for infant, child, and adult throughout the curriculum. Acceptable CPR certifications must be the Basic Life Support (BLS) Healthcare Professional certification through the American Heart Association.

Pregnancy

A student who is pregnant or becomes pregnant during the program is advised to consult with their healthcare provider about any precautions or limitations that are appropriate to take. Neither Drexel University nor its affiliating clinical agencies assume responsibility for any harm that might occur to a fetus or a pregnant student.

The pregnant student must meet all student curriculum requirements and responsibilities. Any applicable policies at the clinical/practicum site must also be followed. Students seeking accommodations must contact the [Office of Disability Resources](#).

Student Health Information

Student health care cannot be provided by the PA program director, medical director, or principal faculty (except in emergency situations), nor can program faculty or staff have access to students health care records.

Physician Assistant Student Scrub Uniform Policy

Purpose

The purpose of this policy is to ensure that all physician assistant students maintain a professional appearance, promote patient safety, and adhere to infection control standards while representing the program in clinical and academic settings.

General Requirements

All Physician Assistant students are required to wear designated scrub attire during external clinical activities, simulation labs, and other program-specified events. Scrubs must be clean, well-fitted, and in good condition at all times.

Approved Scrub Attire

- Scrubs must be the program-approved color (Black) with Drexel PA logo, purchased from the University bookstore
- Scrub tops and bottoms must match and not be mixed with non-approved colors.
- Undershirts, if worn, must be solid-colored (white, black, or gray, beige), without logos or patterns, and must not extend beyond the wrist excessively.
- Scrubs must be free of wrinkles, stains, tears, or excessive wear

Footwear

- Closed-toe, closed-heel shoes are required.
- Shoes must be clean, in good condition, and appropriate for clinical environments.
- Athletic or professional medical footwear is recommended.

Identification

- Official program or institutional identification badges must be worn at chest level and visible at all times.
- Any additional required clinical site identification must also be displayed.

Personal Grooming and Hygiene

- Students must maintain good personal hygiene, including daily bathing and use of hygiene products.
- Hair must be clean, neatly styled, and secured away from the face if long.
- Beards and mustaches must be clean and well-groomed.
- Fingernails must be short, clean, and natural. Artificial nails and nail polish may be prohibited in certain clinical settings per site policy.
- Fragrances should be avoided or kept minimal due to patient sensitivities.

Jewelry and Accessories

- Jewelry should be minimal and not interfere with patient care.
- Acceptable items may include a watch, wedding band, and small stud earrings.
- Facial piercings may need to be removed or covered per clinical site policy.
- Smartwatches and fitness trackers are permitted if used professionally and do not pose an infection control risk.

Outerwear

- Only program-approved lab coats or jackets may be worn over scrubs in clinical settings.
- Personal outerwear (hoodies, non-approved jackets, badges) are not permitted during patient care activities.

Infection Control Compliance

- Students must follow all infection prevention guidelines, including:
 - Wearing clean scrubs daily
 - Changing scrubs if contaminated or soiled

Professional Conduct

- Scrubs are to be worn only for clinical or educational purposes and not for unrelated public activities.
- Students represent the Drexel University Physician Assistant Program and must always maintain a professional appearance at all times.

Non-Compliance

Failure to adhere to this dress policy may result in:

- Removal from the clinical or lab setting
- Professionalism citations
- Additional disciplinary action per program policy

PROFESSIONALISM POLICY

Professionalism and Professional Conduct

Professionalism is an essential component of PA education and preparation for practice as a healthcare professional. Students are expected to demonstrate professional behavior throughout the didactic and clinical phases of the program and in all settings in which they represent the PA Program, Drexel University, or a clinical partner while also aligning with the relevant ARC-PA accreditation standards (B2.19, B.3.05, B4.03).

Students are expected to comply with the Drexel University Code of Conduct and Academic Integrity Policy, as well as all applicable Program, University, course, and clinical site policies and procedures. Professional behavior includes, but is not limited to, respectful communication, integrity, accountability, reliability, preparedness, appropriate professional boundaries, ethical conduct, responsiveness to feedback, and respectful collaboration with patients, faculty, staff, peers, and healthcare teams.

Professionalism Concerns and Documentation

Professionalism concerns may be identified by faculty, staff, preceptors, clinical partners, patients, members of the healthcare team, or others who observe the learner's professional conduct.

All identified instances of unprofessional conduct must be documented using the Program's secure and confidential electronic Professionalism Reporting/Contract Form, regardless of the level of response. In this Professionalism Reporting/Contract Form, faculty will document the specific behavior or conduct, the date and setting in which it occurred, the individuals involved or who observed the conduct, and any relevant supporting information.

Documentation of a concern does not, by itself, constitute a finding of a professionalism violation. The purpose of documentation is to create an accurate record of concerns, interventions, and student responses and to allow the Program to identify patterns of behavior when appropriate.

The Program recognizes three levels of response to professionalism concerns:

1. Professionalism Warning
2. Professionalism Probation
3. Egregious Professionalism Violation

The appropriate level of response will be determined based on the nature, severity, frequency, context, and impact of the conduct, as well as the student's prior history and response to previous interventions. A concern does not necessarily progress through each level. Depending on the circumstances, a matter may be referred directly to the Student Progress and Review Committee (SPRC) for consideration of Professionalism Probation or an Egregious Professionalism Violation.

Level 1: Professionalism Warning

A **Professionalism Warning** is appropriate for an initial or lower-level professionalism concern that can reasonably be addressed through feedback, coaching, clarification of expectations, or other supportive intervention.

The faculty member who identifies or becomes aware of the concern will provide the student with an opportunity to discuss the occurrence before determining whether a Professionalism Warning is appropriate, except when circumstances require immediate action. This meeting should occur within 3 business days of the faculty member's receipt of the concern. Before issuing a Professionalism Warning, the faculty member will first consult with the SPRC regarding any prior documented professionalism concerns or warnings, as a second violation will trigger a formal professionalism review by the SPRC. The concern and any resulting intervention will be documented using the Program's designated Professionalism Reporting/Contract Form, which must be shared with the student and submitted to the Chair of the SPRC.

The faculty member may determine that the appropriate response is a Professionalism Warning. The faculty member will communicate the concern and expected professional behavior to the student and may require appropriate corrective or developmental action.

A Professionalism Warning may include:

- Verbal or written notification of the concern;
- Clarification of professional expectations;
- A meeting with the faculty member, advisor, or other Program representative;
- Targeted coaching or educational intervention;
- Written reflection or other developmental activity; or
- Monitoring of the student's behavior or performance.

A Professionalism Warning is intended to provide an early opportunity for correction and improvement. A warning is not Professionalism Probation. However, documented warnings may be considered by the SPRC and the Program Director when evaluating subsequent professionalism concerns or determining whether a pattern of conduct exists.

The SPRC Chair is responsible for monitoring the centralized professionalism tracking system. When a faculty member identifies or witnesses unprofessional behavior by a student, the faculty member should consult with the SPRC Chair or designee to determine whether the student has any prior documented professionalism concerns or warnings.

A second Professionalism Warning within the same academic year will trigger a cumulative professionalism review by the SPRC Chair or designee. A third Professionalism Warning, or a pattern of repeated professionalism concerns, will require referral to the SPRC for review.

The number of warnings alone does not determine whether Professionalism Probation is imposed. The SPRC will consider the nature, severity, frequency, context, impact, the student's response to prior interventions, and any demonstrated improvement when determining whether further action is warranted.

Level 2: Professionalism Probation

Professionalism Probation may be imposed only following review and recommendation by the SPRC. The Program Director will make the final determination based on the SPRC's recommendation.

The SPRC will review the documented concern and any relevant supporting information. The student will have an opportunity to respond and provide relevant information before the SPRC makes its recommendation to the Program Director.

The SPRC may recommend Professionalism Probation to the Program Director when the student has demonstrated conduct that warrants formal remediation, monitoring, and accountability. A Professionalism Probation plan will identify:

- The specific professionalism concern or violation;
- The professional behaviors and expectations the student is required to demonstrate;
- Required corrective, developmental, or remedial actions;
- Any required meetings, training, reflection, or other activities;
- The timeframe for completion;
- How progress and successful completion will be evaluated;
- The period of monitoring, when applicable; and
- The potential consequences of failing to meet the requirements of Professionalism Probation.

The purpose of Professionalism Probation is to provide the student with clear expectations and an opportunity to demonstrate sustained improvement.

A student may not be placed on Professionalism Probation more than two times during enrollment in the PA Program. A second Professionalism Probation will result in heightened review by the SPRC of the student's overall professionalism record and may result in a recommendation for dismissal or other appropriate action, consistent with applicable University policies and procedures.

Successful completion of Professionalism Probation will be determined in accordance with the requirements established in the student's probation/remediation plan.

Level 3: Egregious Professionalism Violation

An Egregious Professionalism Violation involves conduct that is sufficiently serious that immediate and significant action may be warranted. An Egregious Professionalism Violation does not require a prior Professionalism Warning or Professionalism Probation.

The SPRC will review the circumstances and determine whether to recommend to the Program Director that the conduct constitutes an Egregious Professionalism Violation. The Program Director will make the final determination. Examples may include, but are not limited to:

- Conduct that presents a significant risk to patient safety;
- Significant dishonesty, falsification, or misrepresentation;

- Serious breaches of patient confidentiality or privacy;
- Serious violations of professional boundaries;
- Threatening, violent, or abusive conduct;
- Conduct that materially jeopardizes a clinical affiliation;
- Serious violations of University, College, Program, course, or clinical-site policies; or
- Conduct that is fundamentally inconsistent with the responsibilities of a PA student or the professional standards expected of a healthcare provider.

Depending on the circumstances, an Egregious Professionalism Violation may result in a recommendation for dismissal or other appropriate action under applicable University policies and procedures.

When immediate action is necessary to protect patients, the student, the University community, or a clinical affiliation, the Program may temporarily restrict a student's participation in academic or clinical activities while the matter is reviewed. Such interim action is not, by itself, a finding of an Egregious Professionalism Violation or other professionalism violation.

Review and Determination

All professionalism concerns must be documented using the Program's designated Professionalism Reporting/Contact Form.

For a concern determined by the faculty member to warrant a Professionalism Warning, the faculty member may issue the warning and document the intervention without referral to the SPRC.

Concerns that may warrant Professionalism Probation or an Egregious Professionalism Violation must be referred to the SPRC for review and recommendation. The SPRC may:

- Review the documentation and supporting information;
- Meet with the student;
- Meet with the faculty member, preceptor, or other individuals with relevant information;
- Request additional information or documentation;
- Consider the student's response;
- Review prior documented professionalism concerns and interventions; and

Make recommendations regarding the appropriate level of response consistent with Program and University policy. A reported concern does not, by itself, constitute a finding of a professionalism violation. The student will have an opportunity to respond and provide relevant information before Professionalism Probation or an Egregious Professionalism Violation is determined. In determining the appropriate recommendation, the SPRC will consider the circumstances of each case, including:

- The nature and severity of the conduct;

- Whether the concern is isolated or part of a pattern;
- The student's response to the concern;
- Prior documented warnings, probation, or other interventions;
- The student's demonstrated improvement or lack of improvement;
- The actual or potential impact on patients, the clinical site, the University, or the Program; and
- Other information relevant to the determination.

Depending on the nature, severity, and pattern of the professionalism concerns, documentation of these events and related interventions will be included in student progress documentation and may have implications for future professional credentialing or licensure. Students should be aware that certain professionalism concerns, particularly repeated or significant concerns, may be subject to disclosure or reporting requirements applicable to future educational, credentialing, or licensing processes.

Clinical Education

A clinical site or preceptor may restrict or discontinue a student's participation in a clinical experience consistent with the site's policies. When a student is removed from a clinical site specifically due to concerns regarding the student's professionalism or professional conduct, the removal will constitute a professionalism violation and will result in a failed rotation, consistent with the expectations outlined in the Clinical Year section of this handbook. Such circumstances will be reviewed and documented in accordance with the Program's established professionalism processes. In addition to the failed rotation, the violation may result in additional Program action, up to and including dismissal.

Removal from a clinical site for reasons unrelated to professionalism does not, by itself, constitute a professionalism violation.

The Program will independently review the circumstances and determine appropriate academic or professional action. Professional conduct may be considered in determining a clinical course grade when consistent with the published requirements for that course.

A clinical-site concern or removal should be documented using the Program's designated Professionalism Reporting/Contract Form and referred to the appropriate Program faculty member for review.

Relationship to University Policies

This policy operates in conjunction with applicable Drexel University policies. Matters that fall within the University's Academic Integrity Policy, Code of Conduct, civil rights policies, or other University processes will be addressed or referred in accordance with those policies.

Nothing in this policy limits the University's authority to act under applicable University policies or procedures.

Academic sanctions, including a course failure or removal from a program, must be imposed in accordance with the applicable University academic process. Drexel's Academic Integrity

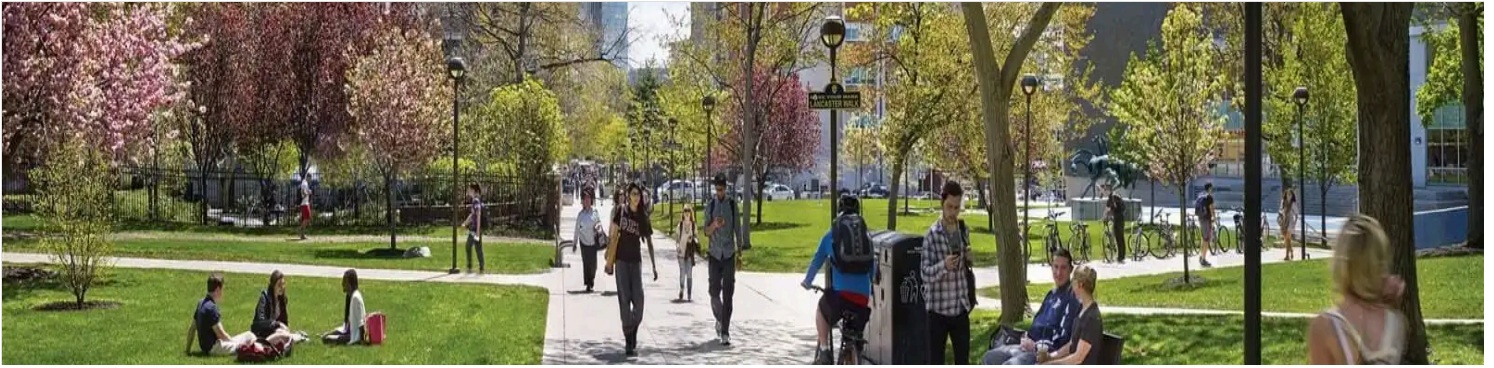
process distinguishes academic sanctions imposed by the academic unit from disciplinary sanctions imposed through Student Conduct.

Appeals

Students placed on Professionalism Probation or recommended for dismissal, or who are subject to another appealable academic or disciplinary action, will receive written notice of the decision and applicable appeal rights from the PA Program Director.

Appeals will be handled through the Drexel University process applicable to the action being appealed.

Academic sanctions arising from an Academic Integrity matter are subject to Drexel's Academic Sanction Appeal Process. University disciplinary sanctions are subject to the applicable Student Conduct appeal process.



Academic Policies

ACADEMIC HONESTY AND INTEGRITY

Students in the College of Nursing and Health Professions at Drexel University are engaged in professional practice. This requires action, responsibility, and accountability of the highest standards. Students in a professional program are held to these standards, which are mirrored in the standards of honesty and integrity in Drexel University's academic integrity code. Additionally, information about Academic dishonesty, as defined by the University, can be found here: [Academic Integrity](#). More information is also available in the [Student Code of Conduct](#).

All students in CNHP are required to maintain academic integrity throughout their tenure in the University. **Students are required to complete an Intellectual Honesty Attestation at intervals designated by the PA Program.** The attestation confirms the student's understanding of and agreement to comply with applicable PA Program, CNHP, and Drexel University academic integrity policies. Specific timing and procedures for completion will be communicated by the Program. This statement is below and in the student Canvas shell and/or syllabus. This requirement must be completed before any graded assignments/assessments are completed. Failure to complete this step may jeopardize a student's ability to progress in the Program.

Intellectual Honesty Statement

I certify that this paper is entirely my own work, with any words and/or ideas from other sources (print, Web, other media, other individuals or groups) being properly cited in text and referenced. I have not submitted this paper to satisfy the requirements of any other course.

GRADING POLICIES

All courses must be passed with an overall minimum letter grade of "B" or "CR" for courses graded Credit/No Credit (CR/NCR).

Repeating Courses

Any course, except for competency and remedial courses, in which the student does not earn the minimum passing course letter grade ("B" or "CR") may, after review of the student's academic status, and with permission of the Course Director, be repeated one time only, when the course is next offered. A student failing to achieve the required minimum acceptable letter grade in any repeated, professional course will be dismissed from the PA Program (refer to Academic Progression & Student Standing).

Remedial Courses which may not be repeated include the following:

- a. PA 570 Clinical Assessment Competency
- b. PA 571 Competency for Clinical Training
- c. PA 680/6810 Summative Remediation

Temporary Course Letter Grades

Any [temporary letter grade](#) (i.e., "INC" (Incomplete), "INP" (In Progress) or "GNS" (Grade Not Submitted)) must be converted to a permanent course letter grade within the time limit established by the Office of Graduate Studies, Office of the Provost, and University Registrar.

Grading Policies

Course letter grades are assigned according to the following numerical equivalency scale:

Letter Grade	Numerical Score	Quality Point Value for GPA Calculation
A+	97.5-100	4.0
A	91.5-97.4	4.0
A-	89.5-91.4	3.67

B+	87.5-89.4	3.33
B	71.5-87.4	3.0
B-	69.6-71.4	2.67
C+	68-69.5	2.33
C	67-67.9	2.0
C-	65-66.9	1.67
D+	63-64.9	1.33
D	61.5-62.9	1.0
F	below 61.5	0.0

The student is referred to the course syllabus for the specifics of the grading mechanism in each course. Students should also review the University policy outlined here [Grades Policy: Graduate Students](#).

Numerical Scores

Individual graded component numerical scores will be calculated to the first decimal place.

Cumulative Course Numerical Scores

Course numerical scores will be the sum of the weighted individual, graded components. Cumulative numerical course scores will be calculated to the first decimal place and will not be further rounded up or down.

Course Letter Grade

The minimum passing letter grade for any PA Program course is "B." The final course letter grade is based upon the total contributions of the weighted, graded, course components (all exams, quizzes, papers, presentations, other graded coursework, and class participation) provided the student has satisfied any must-pass, non-

graded components (Refer to the section: "Must- pass, Non-graded Course Components" below). A grade of "B-" or below is a failing grade.

Course Component Grading

Minimum Written Score Average Requirement:

For all courses in which written examinations/quizzes comprise a component of the course grade, the student must achieve a minimum average of the weighted value of the written examinations and quizzes equivalent to a letter grade of "B" to pass the course.

Must-pass, Non-Graded Course Components:

Many courses contain "must-pass, non-graded components" representing educational objectives essential to mastery of the course's subject matter. For those professional courses that include such must-pass, non-graded components, including evaluations of the student's professionalism and attitude and all other designated course requirements, a final course letter grade of "F" or "NCR" will be assigned if any must-pass, non-graded component is not satisfactorily completed. The student is referred to the individual course syllabus for details of any must-pass requirements associated with that course.

Recalculation of Examination Scores

If, after review by the course director, questions on an examination are subsequently excluded, credit will be awarded to those students who answered those excluded questions incorrectly.

Examination grades will not be recalculated based on the reduced number of questions.

Grade Posting

Examination scores will generally be posted within three weekdays following administration of the examination. Posting may be delayed until all students have completed the examination.

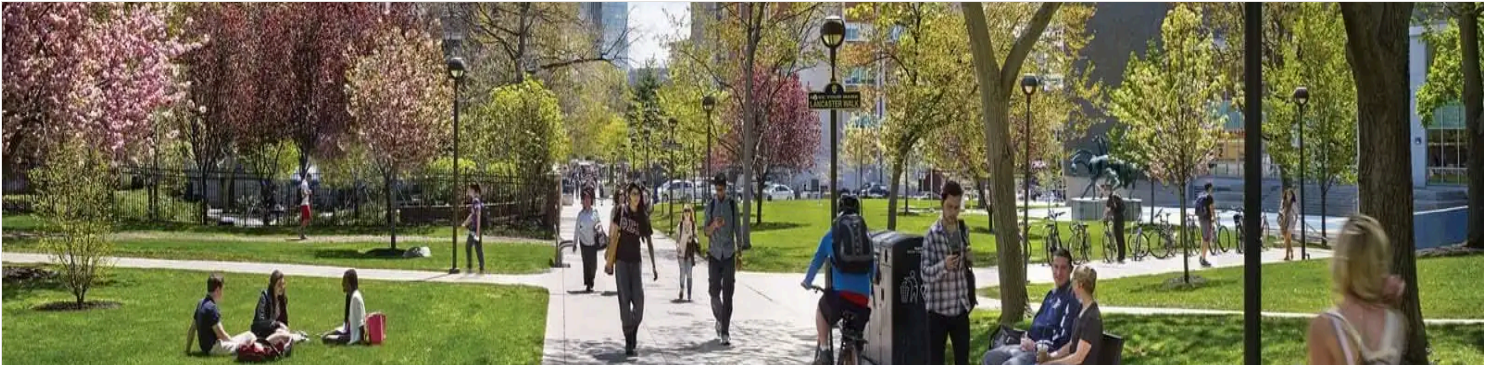
Scores will generally be posted in the course Canvas shell for student reference. Official examination and course grades are calculated by the Course Director in accordance with the grading parameters described in the course syllabus and applicable Program policies.

Final Grade Appeal Policy

A grade appeal is an official process and can be filed if the student can provide justification for one or more of the following reasons:

- There was an arithmetic error made in calculating the grade on an individual assessment or final grade; or
- The student can prove that an assessment or final grade was given in an arbitrary or capricious manner (i.e., deviation from the policies stated on the course syllabus); or
- The student can prove that the faculty member failed to invoke the use of a predetermined and communicated rubric/scoring system or failed to communicate expectations for an assignment(s)

The formal appeal must be completed by the end of the subsequent term in which the original assignment or final grade was received. Grades may be appealed by submitting a formal appeal with supporting documentation to the course instructor for review by completing the CNHP [Grade Appeal Form](#). The student will receive a response to their appeal via their Drexel email within five (5) business days of submitting it.



Academic Progression & Student Standing

MAINTENANCE OF MATRICULATION

1. Once matriculated, a student is required to register each academic term to be a degree candidate, unless the student has requested and received a formal leave of absence under university policy. An informal leave of absence arrangement is not acceptable and will not be granted nor honored retroactively.
2. Any matriculated student, not on an official leave of absence who does not register for an academic term will be subject to termination of student status and may be administratively withdrawn and dismissed from the University.
3. Reinstatement to matriculated status for a student who is administratively withdrawn will require a petition to and action by the Director of the PA Program.
 - a. The petitioning student will be treated as a new applicant requesting admission.
 - b. The petitioning student will be required to file a new application and pay another application fee.

PROGRAM PROGRESS

The student will have a maximum of five (5) academic years, including any leave(s) of absence, from the time of matriculation to complete the program. Any student unable to complete the program within the five-year limit will not be retained in the program.

The student is to maintain normal academic progress as follows:

1. Each didactic and clinical-phase course must be passed with at least the minimum acceptable grade, and all required graded and non-graded course

- components must be satisfactorily completed.
2. Students must maintain the required minimum term and cumulative GPA of 3.0.
 3. Each student, as a candidate for an academic degree, must complete the distributional requisites within the academic disciplines prescribed by the College of Nursing and Health Professions for that academic degree.
 4. A student may not begin the clinical rotation phase of the curriculum until all didactic courses have been successfully completed.
 5. Each student must successfully complete all clinical rotation courses. Satisfactory completion of all clinical practicum-phase courses, including all graded and non-graded components, is required before a student can be certified as having completed PA training.
 6. Each student must satisfactorily complete the graduation requirements established by the Drexel University PA Program before the faculty will certify the student for completion of training. See [Graduation Requirements](#).

PA PROGRAM ACADEMIC DISMISSAL AND PROGRESSION POLICY

Physician Assistant (PA) students must adhere to the [University's Academic Standing: Graduate Students policy](#). The PA Program maintains academic progression standards throughout the curriculum to ensure that students demonstrate the knowledge, skills, and competencies necessary for successful completion of the program and entry into clinical practice.

Failure to meet the academic or clinical requirements outlined in that policy or in this PA Program policy may result in a required [leave of absence](#), remediation, or dismissal from the PA Program.

I. Didactic-Year Academic Progression

1. Course Failure
 - A student who fails a didactic course is required to take a leave of absence from the PA Program. The student may rejoin the program when the failed course is next offered, typically one year later, to repeat the course. Once passed, the student may continue in the program.
 - Return From Leave of Absence: Upon returning from a leave of absence, a student will be required to enroll in a CR/NCR competency course during that term. Upon successful completion of the competency course and all other

courses in that term, the student will continue to progress through the didactic phase of the program.

- CR/NCR Competency Course: If a student is unsuccessful in the first CR/NCR competency course but successfully completes all other courses during that term, the student will be permitted to progress to the next didactic year term. During the subsequent term, the student will be required to enroll in a second CR/NCR competency course. Failure to successfully complete the second CR/NCR competency course, regardless of successful completion of all other courses during that term, will be grounds for dismissal from the PA Program.

2. Maximum Number of Didactic Course Failures

- A student may not fail more than two didactic courses during the PA Program
- A student may take a maximum of two leaves of absence associated with didactic course failure during the didactic phase of the program.
- A student who fails a third didactic course is not eligible to continue in the PA Program and will be dismissed.
- A student who fails the same didactic course twice will be dismissed

3. Cumulative Application of Course Failures

- Didactic course failures are cumulative (i.e., within a given term or across terms) and remain part of the student's academic record for purposes of determining eligibility for continued progression.
- The maximum of two didactic course failures applies regardless of whether the failures occur within the student's original cohort or following reentry into a subsequent cohort.

II. Clinical-Year Academic and Clinical Progression

Students entering the clinical phase must successfully complete all required clinical rotations and associated academic requirements.

1. First Clinical Rotation Course Failure

- If a student fails a clinical rotation course for the first time, the student may be permitted to repeat that rotation course.
- The student may progress in the program before passing that failed rotation course.
- The student may not progress to the clinical practicum course until all core rotation courses are successfully completed

2. Second Clinical Rotation Course Failure (same course)

- A student who fails the same clinical rotation course twice will be dismissed.

3. Second Clinical Rotation Course Failure (different course)

- A student who fails a second clinical rotation course will be required to sit out for the following term.
- During this period, the student will be required to enroll in and complete a required remediation course. There are billing and financial aid implications with this requirement, and students should contact Drexel Central for more information.
- Upon successful completion of the remediation course, the student will be permitted to rejoin the clinical phase of the program under an alternate plan of study and complete the remaining required rotation courses. This alternate plan of study could impact the order of remaining courses and corresponding clinical site placements.

4. Additional Clinical Rotation Course Failure

- Following a second clinical rotation course failure and successful remediation/reentry, the student may not fail any additional clinical rotation courses.
- Any subsequent failure of a clinical rotation course will result in dismissal from the PA Program.

III. Maximum Time to Degree Completion

- The entire PA Program, including all required didactic coursework, clinical rotations, remediation, and other degree requirements, must be completed within five years of the student's initial enrollment in the PA Program. Please see [Drexel University's Time to Completion Policy](#).
- The PA Program will not grant an extension beyond five years for completion of the program.
- Leaves of absence, repeated coursework, repeated clinical rotations, remediation, or reentry into a subsequent cohort do not extend the maximum five-year period.

IV. Dismissal

A student will be dismissed from the PA Program when any of the following circumstances occur:

1. The student fails a third didactic course.
2. The student fails the same course twice in any phase of the program (didactic or clinical)

3. The student exceeds the maximum of two leaves of absence associated with didactic course failure.
4. The student fails a third clinical rotation course
5. The student is unable to complete all PA Program requirements within the five-year maximum period.
6. The student is unable to successfully complete all [graduation requirements](#), including but not limited to all summative testing as outlined in the graduation requirement policy
7. The student fails to meet other academic, clinical, professional, graduation, or other program requirements established by the PA Program.

Dismissal under this policy constitutes dismissal from the PA Program and results in termination of the student's eligibility to continue toward completion of the PA degree.

V. Deceleration

ARC-PA defines deceleration as "the loss of a student from the entering cohort, who remains matriculated in the physician assistant program."

Deceleration results in a change in the expected graduation year. A student within the PA Program may be decelerated for the following reasons:

- A student takes a leave of absence from the PA Program.
- A student fails a didactic course and must repeat the course the following year
- A student is suspended from the PA Program.

VI. Reentry Following Leave or Remediation

Reentry following a leave of absence or required remediation is subject to the student's successful completion of all conditions established by the PA Program. Reentry does not reset or eliminate previously incurred course or clinical rotation failures, nor does it restart the five-year maximum period for program completion.

The PA Program reserves the right to establish reasonable remediation requirements including but not limited to remediation courses and other conditions for reentry to ensure that students demonstrate the knowledge, skills, competencies, and professional behaviors necessary for successful progression and completion of the program.

GRADE APPEAL POLICY

A [grade appeal](#) is an official process and can be filed if the student can provide justification for one or more of the following reasons per the University's Grade Appeal [Policy](#). Grade appeals begin in the college if the student can provide justification for one or more of the following reasons:

- There was an arithmetic error made in calculating the grade on an individual assessment or final grade; or
- The student can prove that an assessment or final grade was given in an arbitrary or capricious manner (i.e., deviation from the policies stated on the course syllabus); or
- The student can prove that the faculty member failed to invoke the use of a predetermined and communicated rubric/scoring system or failed to communicate expectations for an assignment(s)

To submit a formal grade [appeal](#), a student must submit the Grade Appeal [Form](#). Please consult your academic advisor with any questions.

DISMISSAL APPEAL POLICY

Students are formally notified of an Academic Dismissal in writing by the PA Program Director. A student has until Monday of the first week of the next academic term in which they are scheduled to be enrolled in classes to submit a formal appeal. If a student chooses to appeal a dismissal, a student should follow the [Dismissal Appeal Policy](#) steps. Students should consult their academic advisor with any questions.

GRADUATION REQUIREMENTS

It is well established that the whole is often more than the sum of the parts. Similarly, PA education is more than the sum of individual course grades. The faculty will assess the readiness of each student for graduation through cross-disciplinary mechanisms designed to evaluate knowledge, clinical skills, and the ability to apply them in clinically relevant situations.

This readiness will be assessed, in part, through the following graduation requirements:

1. **End of Curriculum (EOC) Examination:** A summative evaluation of the student's knowledge administered as an in-person, on-campus, computer-

based examination through the Physician Assistant Education Association (PAEA).

2. **OSCE (Objective Structured Clinical Examinations):** Performance examinations that evaluate history taking, physical examination, clinical reasoning skills, professionalism, and the student's ability to effectively apply those skills in a clinical setting.
3. **Technical Skills Competency Assessment:** Summative assessment of technical clinical skills, including chest X-ray and ECG interpretation, IM injection, sterile technique for minor procedures, sterile gloving, suture placement and removal, and wound dressing.

A student will be allowed a maximum of two administrations for each graduation requirement. Failure to demonstrate satisfactory achievement of a graduation requirement is considered evidence of significant deficiencies in the student's ability to function competently and safely as a graduate PA practitioner.

A student who fails a graduation requirement twice will not be retested until they have successfully completed the **Summative Remediation Course**, a one-credit course focused on the specific skill deficiencies demonstrated by the student. Fees for the course will be assessed in accordance with current tuition rates.

If a student again fails a graduation requirement after successfully completing the Summative Remediation Course, the student will be dismissed from the Program.

To be eligible for graduation, each student must also:

1. Successfully complete all didactic and clinical courses in the curriculum.
2. Satisfy all degree distributional requirements.
3. Maintain a minimum cumulative grade point average (GPA) of 3.0.
4. Officially apply for graduation in accordance with University requirements.

ISSUANCE OF DIPLOMAS AND CERTIFICATES OF COMPLETION

Diplomas and certificates of completion:

1. Cannot be issued until all the student's final course grades are assigned and
2. All financial and administrative obligations to the university have been completed.
3. The diploma, attesting to the student's earned academic degree, is issued by the University only at the end of the academic term in which the student completes the degree requirements.

The Certificate of Completion (of training as a PA), attesting to the student's successful preparation to enter the PA profession, is issued by the Program at the conclusion of the student's professional training.

SATISFACTORY ACADEMIC PROGRESS

Students are expected to meet certain standards to remain eligible to continue receiving financial aid. Satisfactory Academic Progress (SAP) is one such standard that the Department of Education requires Drexel to oversee. The [SAP policy](#) requires that students maintain a certain minimum cumulative GPA as well as earn a certain percentage of attempted course credits.

FINANCIAL OBLIGATIONS

Students who do not satisfy financial obligations to the University and have been placed on financial hold are not entitled to a final and official course grade from the instructor. Official course grades are submitted by faculty through Drexel's Banner academic information management system.

LACK OF NORMAL PROGRESSION

Failure to maintain normal progress in the Program curriculum may result in:

- a. Graduation delays due to repetition of courses, rotations, clinical practica, leaves of absence, or scheduling conflicts resulting in other than normal academic progress,
- b. Assessment of additional tuition charges in accordance with the policies of Drexel University and the College of Nursing and Health Professions,
- c. Leave(s) of absence (LOA)
- d. Dismissal from the program.

DROP/ADD/WITHDRAWAL POLICY

Once a student is registered in a course, it is their responsibility to attend the course, drop the course, or withdraw from the course. Dropping and withdrawing are distinct actions that affect student course enrollment status. In either case, a form from the Registrar's Office, with signatures, is required to change course

enrollment status. There are billing, financial aid, and academic record ramifications for changes to student enrollment status in any course; students must attend to the proper procedure when dropping or withdrawing from a course. Additionally, as per PA Program policies and procedures, if a student drops or withdraws from a course in the Program within a given term, they are able to continue their remaining courses in that term. In the didactic phase of training, at the conclusion of that term, the student must take a leave of absence (LOA) until that outstanding course is offered again; students may not progress until all courses that are offered in a given term are completed successfully. In the clinical phase of training, students may continue in the program in a modified plan of study. Students must also refer to the Office of Graduate Studies Adding/Dropping/Withdrawal policy and contact their faculty advisor and academic advisor. More information is also located within the University's [Academic Policies](#).

Students must also contact [Drexel Central](#) after Drop/Add/Withdrawal from a course.

LEAVE OF ABSENCE (LOA)

Please see Drexel University's [LOA policy](#)

The returning student must demonstrate current competency in selected coursework that may include courses taken before the LOA.

If the leave of absence resulted from an academic course failure, the student must participate in the following, as applicable:

1. Enroll in a CR/NCR competency course.
2. Meet regularly with their academic advisor.
3. Participate in diagnostic or skills testing and counseling.
4. Participate in individual tutoring, which may be at the student's expense.
University tutoring services are also available.
5. Participate in counseling or other academic support coordinated by the student's academic advisor.
6. Meet with the DUPAP Director or designee, as needed.

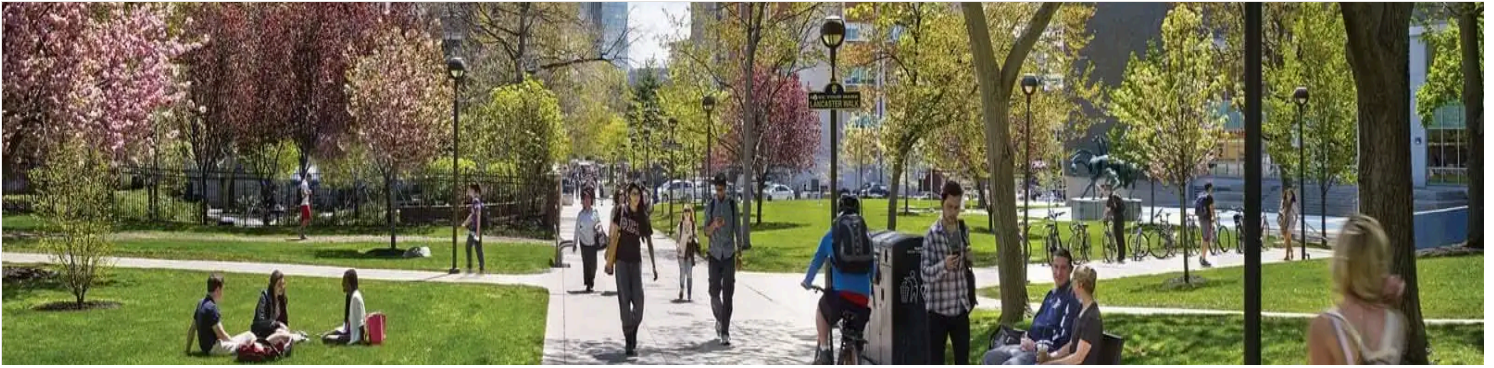
A student whose normal academic progress is altered for any reason may be required to demonstrate current competency in previously completed coursework.

THE STUDENT PROGRESS REVIEW COMMITTEE (SPRC)

- The SPRC consists of appointed program faculty members charged with the regular, periodic, systematic review of student academic, clinical, and professional performance and behavior to make appropriate recommendations relevant for the resolution of any identified student issues to the Program Director. Confidentiality is maintained during any and all procedures.
- The SPRC will perform a review of each student at the midpoint and end of each academic term, or at other times as necessary, to identify patterns that may adversely impact the student's professional development or academic progress.
- The SPRC will document student difficulties from review of course grades, communication from faculty or staff, and reports from other pertinent sources. Some typical difficulties may include:
 - a. Attendance and punctuality issues
 - b. Inappropriate interpersonal actions with faculty, staff, fellow students, or others
 - c. Student unresponsiveness to faculty requests to meet for the purpose of clarifying and resolving areas of concern.
 - d. Inappropriate interpersonal actions with clinical preceptors, clinical site administrators/staff, patients, or others during clinical phases of training
 - e. Violations DUPAP policies and regulations
- The SPRC will evaluate identified student situations, and, in accordance with the established policies of the DUPAP, CNHP, and Drexel University and the availability of university-based support services, generate recommendations to the Program Director appropriate to the resolution of the student's situation. Although recommendations are specifically constructed for each student's situation, some examples include but are not limited to:
 - a. Dismissal
 - b. Leave of Absence (Refer to the Lack of Normal Progress section elsewhere in this handbook)
 - c. Suspension
 - d. Probation

e. Warnings

- f. Mandatory or voluntary utilization of support services (i.e. tutoring, counseling, study-skills evaluation, etc.)
- g. Referral to the office of the Assistant Dean for Diversity and Student Affairs for violations of the [Student Code of Conduct](#) or other University-wide policies.



Didactic Year Overview & Expectations

KEY STUDY HABITS FOR SUCCESS IN PA SCHOOL

- Study consistently every day rather than cramming.
- Use active recall (quizzing yourself, flashcards, teaching concepts aloud) instead of just rereading notes.
- Review material repeatedly over time using spaced repetition.
- Focus on understanding concepts and pathophysiology, not just memorizing facts.
- Practice clinical reasoning by thinking through differential diagnoses and patient cases.
- Prioritize high-yield topics and commonly tested conditions.
- Complete practice questions regularly and learn from both correct and incorrect answers.
- Take care of your health through adequate sleep, exercise, nutrition, and hydration.
- Keep notes concise and efficient, turning them into study tools like flashcards or summaries.
- Build a support system of classmates, faculty, friends, and family.
- Manage stress proactively to prevent burnout.
- Treat PA school like a full-time job with a structured study schedule.
- Most important habits: Daily consistency, active recall, and spaced repetition.

ASSESSMENT EXPECTATIONS

Assessments in PA school are essential for measuring knowledge retention, clinical reasoning, and readiness to provide safe patient care. They help identify strengths and areas for improvement while ensuring students meet the competencies required for clinical practice and certification. Assessments may be administered in written, oral, or practical/skills-based formats.

Additionally, during the final term of the didactic phase of training, all students will complete the first of two standardized Physician Assistant Knowledge Rating Assessment Tool (PACKRAT) assessments offered by the Physician Assistant Education Association (PAEA); students will complete a second PACKRAT during the clinical phase of training.

DIDACTIC YEAR COURSE EVALUATION EXPECTATIONS

Students are required to complete course evaluations throughout the didactic year. These evaluations are confidential and anonymous and administered electronically each academic term. For each course, students will complete two evaluations: a program-specific evaluation that addresses individual lectures, and a university-administered evaluation that assesses the course as a whole.

Additionally, students are expected to complete an anonymous electronic survey at the conclusion of the didactic year to evaluate their overall experience during this phase of the program.

Student feedback is essential to the program's commitment to continuous quality improvement. The program values and is responsive to student input, and these evaluations play a critical role in informing ongoing enhancements to the curriculum and learning experience.

DIDACTIC YEAR CLASSROOM EXPECTATIONS

The student should adhere to professional standards for behavior when communicating with faculty and fellow students in the classroom:

- a. Always address the faculty member by title: "Professor" or "Doctor"
- b. Be respectful in all communications with fellow students, faculty, professional staff

- c. Follow the didactic year attendance policies (See [Attendance Policy](#)) and arrive at all activities, labs/seminars, and lectures on time
- d. To minimize disruption of a class already in progress and distraction to other students and instructors, a student arriving after a class has begun is to move promptly, quietly, and with minimal disruption to the closest available seating.
- e. Students are not permitted to bring guests or children to class.
- f. Appropriate use of electronic devices in the classroom:
 - a. The use of cell phones or other electronic devices during lectures and lab sessions for texting, talking or any other purpose is disruptive and, therefore, such use of electronic devices is prohibited. Please be courteous to your instructor and your fellow classmates and turn off all electronic devices and store them properly out of sight.
- g. The use of laptop computers during lectures and lab sessions must be limited to course activity only. Accessing any material that is not directly related to the current lecture/lab material is a violation of classroom policy.

ANATOMY LABORATORY EXPECTATIONS

Dissection of the human body is a privilege extended to only a select group of students at Drexel University. Because of this unique privilege and the sensitive nature of working with human material, there is a higher level of responsibility expected of students. The lab policies are designed to make students aware of their responsibilities and assist them in deriving the most benefit from the gross anatomy laboratory experience.

It is expected that every student will read and be familiar with the Drexel Human Anatomy Laboratory Policies and Procedures outlined in the course Syllabus and Learning Management page.

CLASSROOM DISRUPTION

Conduct that a reasonable person would view as substantially or repeatedly interfering with the conduct of a class is prohibited. Such conduct includes, but is not limited to, repeatedly leaving, and entering the classroom without authorization, making loud or distracting noises, persisting in speaking without being recognized, or resorting to physical threats or personal insults. Students are responsible for

complying with a professor or instructor's individual request regarding appropriate classroom behavior.

ATTENDANCE POLICY

Attendance and active participation in all scheduled lectures, laboratories, seminars and class meetings are essential components of the curriculum. These sessions are designed to foster clinical reasoning, professional development, and collaborative learning, and therefore attendance is mandatory, unless otherwise noted.

Attendance Tracking

- a. Attendance in required sessions will be monitored using an electronic tracking system.
- b. Students are required to sign in using their mobile device at the beginning of each session via a QR code.
- c. Failure to sign in will be recorded as an unreported absence unless otherwise communicated to the course director during the class period (e.g., technological issue with QR code, lack of access to a cell phone).
- d. A student must only access the QR code ONCE per class period; signing in on behalf of a classmate is considered a violation of the [Student Code of Conduct](#)
- e. Attendance in labs and seminars will be tracked by the faculty leader

Absence Notification

Attendance requires the student to be physically present, attentive, and actively participating in the learning activity. Students who arrive excessively late, leave early without notifying faculty, or engage in disruptive behavior may be marked as unreported absent at the faculty's discretion.

- Students arriving more than ten (10) minutes after the scheduled start of a required activity may be marked as unreported absent.
- Students who leave before completing at least eighty percent (80%) of a required activity without prior faculty notification may be marked unreported absent.

After an unreported absence, a course director may communicate with the student to discuss professionalism and related concerns.

This communication should NOT include any medical/health or other related documentation. Students should not provide medical records, physician notes, diagnostic information, or other personal documentation to Course Directors. Students experiencing ongoing circumstances that may affect attendance should work directly with Drexel University's Office of Disability Resources, Student Health Services, or other appropriate university offices.

Absences that are properly reported in accordance with this policy will be considered reported absences. Failure to notify the appropriate faculty member within the required timeframe will result in an unreported absence.

The distinction between reported and unreported absences is an important component of the Program's assessment of professionalism and accountability. While both reported and unreported absences contribute to a student's overall attendance record, a pattern of unreported absences may be viewed as a failure to meet professional communication expectations and may be considered by the Student Progress Committee during any review of academic performance, professionalism, or progression within the Program.

Unreported Absences

At the discretion of the course director, if a student fails to attend a session and does not communicate with the appropriate faculty member beforehand:

- a. The student may receive an email from the Course Director or Seminar/Lab Leader within 2 business days
- b. The student may be required to meet with the Course Director or Seminar/Lab Leader within 5 business days to discuss the importance of attendance and professionalism.
- c. The incident may be documented by the Student Progress Review Committee (SPRC)

Repeated Absences

Unexcused absences in a specific course or lab within a single academic term may result in:

1. A formal review by the SPRC.
2. Placement on Professionalism Probation, which could impact the student's standing in the program.

Attendance is required for all written examination/quiz, verbal presentations, Observed Standardized Clinical Encounter (OSCE), Standardized Patient (SP) experience, clinical skills testing, and other activities at the discretion of Program faculty and leadership. A student will fail/receive a zero if they miss any of the scheduled evaluations unless approved by the course director in advance of the absence. The student will be permitted to make up the missing evaluation if approved.

If a student is ill for a seminar or lab, it is that student's responsibility to learn the missed material. If a student in the didactic phase must be absent or late for any reason, it is the student's responsibility to:

- a. Contact via email or phone on each day of absence
- b. Course director, seminar, or laboratory instructor(s)

The student must, upon the day of the student's return to training:

- a. Arrange for the make-up of all missed training with all the course directors from whose courses the student has been absent
- b. Reschedule times with the course directors for make-up of any excused examinations

Absence for prolonged or excessive illness adversely affects a student's learning and jeopardizes mastery of the required knowledge, skills, and experiences needed to successfully progress or complete training as a PA.

Reported/Unreported Absences of Lecture	Reported/Unreported Absences of Seminar or Lab	Course of Action
1-2	1	Notified by the Course Director
3		Meeting with Course Director
> 4	> 2	Reviewed by Student Progress Committee

Accumulation of four (4) or more absences in a single academic term, whether reported or unreported, will result in referral to the Student Progress Committee for review.

Monitoring of Attendance Patterns

Accumulation of absences regardless of whether they are reported or unreported, may adversely affect a student's academic performance, engagement, and ability to meet course objectives. Consistent attendance is essential for the development of clinical reasoning, professional behavior, and mastery of course material.

Course Directors reserve the right to review a student's attendance record at any point during the academic term. If a pattern of absences is identified, the Course Director may initiate appropriate interventions, which may include, but are not limited to:

- Direct communication with the student to address concerns regarding attendance and engagement
- Required meeting(s) to assess barriers to attendance and reinforce professional expectations
- Implementation of a formal academic or professionalism support plan
- Referral to the Student Progress Committee for further review, if warranted

The program may review patterns of attendance across courses and learning activities. Students demonstrating a pattern of frequent absences, even when reported, may be required to meet with program leadership to discuss professionalism expectations and academic progression.

DIDACTIC YEAR DRESS CODE AND ATTIRE GUIDELINES

The following attire guidelines apply to all students in educational settings:

- a. Each student must have their Drexel identification card with them at all times.
- b. Students are expected to maintain a standard of dress that is respectful and appropriate for the academic environment.
- c. Clothing may not contain obscene wording, design, graphics, or pictures. (Examples of unacceptable attire include but are not limited to: sheer or revealing shirts, shirts exposing the midriff, halter or tank tops, garments designed to be worn as undergarments, garments that are soiled or torn, and overly casual clothing, e.g., political, team, graphics on clothes or buttons)

- d. Clothing that obstructs movement required to meet training functions, or clothing that exposes areas of the chest, abdomen, or back are unacceptable attire.
- e. Only closed-toed shoes are allowed in the lab setting.
- f. In settings that include patient contact, including standardized patient encounters or community service-focused activities, the clinical year student dress code will be enforced (See [Clinical Year Dress Code](#))
- g. Each course syllabus may also outline specific requirements and dress code expectations/exceptions for the particular course.

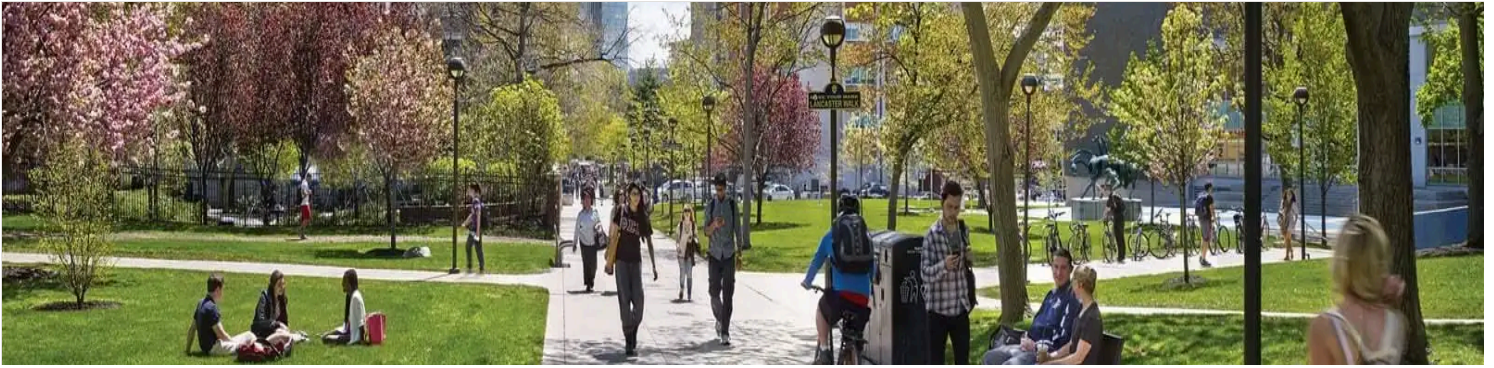
PA faculty reserve the right to dismiss from an educational site any student who is not appropriately attired. That action may result in requiring further professional, developmental training for the student, and may also interfere with graduation in a timely manner or even completion of program.

Additional Notes

Cultural and Religious Considerations: Head coverings, traditional cultural garments, and religious attire are always permitted. Accommodations will be made for religious or disability-related clothing needs.

Event-Specific Expectations: Business formal attire is required for professional networking, interviews, and public-facing events (e.g. AAPA challenge bowl, White Coat Ceremony, Senior Celebration).

Enforcement & Support: Faculty and staff will model appropriate attire expectations. If a student has concerns or needs accommodations, they are encouraged to contact the PA Program Director.



Didactic Year Examination & Remediation Policies

EXAMINATIONS AND QUIZZES/TESTING PROTOCOL

Written testing will generally occur in a computer-based format.

COMPUTER-BASED TESTING PROCEDURE

Prior to Scheduled Exam Day

- Students should download their exam prior to test day.
- Students are limited to downloading an exam once and only on the device they intend to use to take the exam.
- Any student who downloads an exam on a device they do not intend to use for testing purposes may receive a grade of zero.

Exam Day

- Students are required to bring their registered device, a fully charged battery, and a power cord.
- Students who do not have enough battery to complete the exam or memory to download the exam may not be allowed another attempt. They will receive the earned grade as it stands.
- Upon arrival to the exam room, students will place their belongings (backpack, books, papers, phones, smart watches, smart glasses, and anything else deemed appropriate by the proctor) to the front of the room, as directed by the proctor.

- Students are permitted to have 1 piece of blank paper during the exam; students must write their name on this piece of paper
- Students must have their device ready for the exam prior to the start time of the exam (disable any antivirus software, have the Exemplify program open, etc.)
- Once the proctor displays the Assessment Password, the testing environment begins and students are expected to enter the password in the Exemplify platform.
- Students who need to use the restroom must hide their exam (Ctrl+H, ⌘+H, or select 'Exam Controls' -> 'Hide Exam') and are not permitted to leave the room with their phones or any device.
- When a student is finished with the exam and ready to submit for scoring, the student must select the 'Submit & Exit' button featured at the top of the interface. This will bring up the exit screen, which allows the student to either 'Return to Exam' or 'Close Exam.' Students must select the toggle switch next to 'I am ready to upload my exam file' and then select 'Close Exam' option to exit the exam.
- The student will receive a green confirmation screen that their file was successfully uploaded. Students must show the green confirmation screen to the proctor prior to leaving the room and the proctor must acknowledge receipt of seeing this screen. Students must also hand their scrap paper to the proctor before exiting the room.
- If the student does not see the green screen, they must address this issue with the proctor prior to leaving the exam room.

Student-asked Questions During Examinations

- a. The only types of questions allowed during an exam must pertain to the physical condition of the exam, such as a technological issue, missing page, incorrect question numbering, typographical errors, or illegible copy.
- b. No questions related to interpretation of question content (including definition of terms, questions that assist the students in weighing alternative answers, or questions concerning the accuracy of the student's understanding basic, anatomy, physiology, or terminology will be entertained by the examination proctors during the administration of the examination.
- c. Individualized explanations by proctors to single students during an examination are potentially unfair to others taking the examination and are not permitted.

- d. The student is to answer the question as best as possible and make a written note of the question and the perceived difficulty on the face of the student's honesty statement paper so that the student's concern can be evaluated by the course director after the examination during the course director's review of the examination.

TEST TAKING POLICIES

- Students are expected to uphold academic integrity during testing. The students are accountable for both their own behavior and reporting of cheating or other academic misconduct by their peers.
- The University's Academic Integrity policy on cheating is as [follows](#):
 - Violation of either the CNHP or Drexel University Academic Integrity Policy will result in receiving a grade of "0" for the exam and may result in separation via suspension or expulsion from Drexel University.
 - The faculty reserves the right to change the seating in the examination room at any time.
 - If cheating is directly observed by the proctor, the proctor will immediately take away the exam from the student, ending the testing process, and the student will receive a zero for the exam. No prior warning needs be given by the proctor. The incident will be reported to the Conduct Board for further disciplinary action.
- Students must have a University ID card to be admitted to a testing location. If no ID card is available, a government-issued photo ID card will be accepted.
- Cell phone ringtones must be on silent during the exam. Cell phones are not permitted to be in the student's possession during the examination period.
- All personal items will be placed in the front of the room prior to the beginning of the exam.
- Students who arrive after the exam has begun may not be allowed to take the exam.
- A student arriving more than fifteen (15) minutes late for an examination will not be permitted to sit for that examination and must contact the course director.
- A student, believing that they have valid extenuating circumstances for being late for an exam, must present an explanation to the course director, who has

the discretion to excuse the lateness and schedule a make-up examination. More than one unexcused episode of lateness or unexcused absence from an examination will result in student referral to the Student Progress Review Committee for further action which may include placing the student on General Probation for professionalism issues. However, if a student arrives after any exam taker has completed the exam and left the exam setting, the student will not be allowed to sit for the exam. No student will be permitted to start their exam if anyone has completed the test and left the testing area.

- At the time the exam begins all smart devices must be shut off and removed from the desk or person.
- Students are required to take all examinations and quizzes on the scheduled day/time.
- Final Exam times may vary from regularly scheduled class times, and this information will be made available to students via the course syllabus and SharePoint calendar.
- Drexel University makes every reasonable effort to provide an environment conducive to testing. However, the university cannot guarantee a distraction-free testing environment.

Temporary Withdrawal from Examinations

- a. No student is permitted to leave the examination room during the first fifteen (15) minutes of the examination.
- b. A student who temporarily exits from the examination room (i.e., to use the restroom, etc.) after the first 15 minutes must leave any relevant testing materials with the proctor. The student must sign the in/out sheet and give the proctor any electronic device they may have on their person, if requested by proctor.
- c. The student's allotted examination time will not be extended for time lost during temporary withdrawal.

Permanent Withdrawal from Examinations

- a. A student completing the examination before the end of the test period may quietly retrieve personal belongings and leave the testing area.
- b. A student leaving the examination room early is not permitted to re-enter the examination room for any reason until the examination is concluded.

Departure from the Examination Area

Every student is cautioned that "Quiet talking among numbers of students standing outside of the examination room" results in a noise-level that is disturbing to other students still taking the examination, and constitutes unacceptable, disruptive behavior. Therefore, every student leaving the examination room early must vacate the surrounding area and not congregate outside the examination room. Any student in the immediate examination area who fails to follow proctor instructions to be silent or to vacate the examination area is subject to disciplinary action.

Examination Ownership and Security

- a. All examinations administered during the didactic year are the property of the DUPAP
- b. All examination materials are to be returned by the student to the proctors at the conclusion of the examination
- c. Removal, copying, or other forms of reproduction (i.e. one or more students reproducing examination questions after the examination is completed) of an examination and related materials for any reason constitute cheating and theft and warrant disciplinary action against the offender.
- d. Other students receiving, viewing, or duplicating such stolen examination materials will be treated as accomplices, and are also subject to disciplinary action.

Examination Reviews

- a. During the didactic year of training, at the discretion of the course director, secure test reviews for the class may be conducted. All books, bags and other personal property are to be placed in the front of the room prior to the examination review.
- b. During review sessions, copying or other forms of reproduction of examination-related materials for any reason constitute cheating and theft and warrant disciplinary action against the offender.
- c. Any other student receiving, viewing, or duplicating such stolen examination materials will be treated as accomplices, and are also subject to disciplinary action.
- d. A student who is unsuccessful on an exam will follow the DUPAP Remediation Policy

- e. Comprehensive and final examinations are not reviewed either in groups or on an individual basis.

TESTING ISSUES

Any issue of concern related to testing conditions must be brought to the attention of the proctor at the time of the exam.

Any questions/concerns regarding a specific exam item cannot be discussed during testing. Proctors cannot answer or clarify any student question regarding a test item while an exam is in progress.

Unforeseen Circumstances

From time to time, an examination may be interrupted by an unforeseen circumstance, such as a fire alarm. If this occurs, select Actions and then Save in Exemplify. Turn off your computer without exiting the Exemplify program.

Once the interruption has ended and you are instructed to resume testing, turn your device back on and reopen Exemplify. The proctor will provide the Universal Resume Code needed to re-enter the examination. Your previously entered answers will be saved, and the examination timer will resume accordingly.

MAKE-UP EXAMINATIONS

Absence from Scheduled Examinations

- It is the student's responsibility to attend all scheduled examinations in a course. Failure to sit for an examination may result in the student receiving a zero for that assessment.
- If a serious issue arises for a student that will prevent attendance at a test or examination, the student must notify the faculty member within 24 hours. Failure to provide notification may result in a zero grade for the exam.
- Notification of absence from an exam does not infer that the student will be excused from the exam or guaranteed a make-up option. That decision will be made by the faculty member and the Program Chair based upon the circumstances at the time.

- Should a student be absent without prior notification to the course director the absence is considered unexcused and eligibility to take a make-up examination will be determined at the discretion of the course director (refer to the general "Attendance" section of this handbook for related information). The highest grade a student may earn on a make-up examination in this circumstance is 71.5%.
- Vacations and personal events are not considered to be excused absences.
- More than one unexcused episode of lateness or unexcused absence to examination will result in student referral to the Student Progress Review Committee for further action which may include placing the student on General Probation for professionalism issues
- If a student who is not feeling well elects to sit for an examination, the student's examination effort cannot be rescinded. Once the examination is started by the student, the examination effort is considered to have begun. All students are encouraged to use good judgment in deciding whether to sit for an examination.
- In the event that a make-up examination is offered, the faculty member will determine the date, time, location, and format of the make-up examination. If a student cannot be present to take the make-up exam on the date and time prescribed by the faculty member, the student will receive no additional opportunity to make-up the exam and will be given a zero on the exam.
- Students should refer to the individual course syllabus for specific information regarding the format of make-up examinations.
- The make-up exam will test the same content, but the number and type of items may vary. This may include using alternate style questions such as fill in the blank and essay style items.

TESTING ACCOMMODATIONS

Students are responsible for obtaining accommodations on their own as per the [Office of Disability Resources](#). Testing accommodations are not retroactive for any assessment.

HARD COPY (PAPER BASED) TESTING PROCEDURE

The Scantron or exam answer sheet is the official record of the student's exam. No credit will be given for work completed on the exam booklet unless otherwise specified by the proctor.

All examinations are timed. Students must hand in all exam materials at the end of the time period, with no exceptions. No additional time will be given to fill in responses on the answer sheet. Filling in an answer sheet after the testing time has concluded will be treated as a cheating incident.

Calculators for med math calculations will be distributed prior to the beginning of the exam and will be collected at the completion of the exam. No other calculators will be permitted during the exam for any reason.

CHALLENGING QUESTION ANSWERS

During the didactic year, a student desiring to challenge answers to specific questions must:

- a. Provide two (2) reference sources (i.e., major medical texts) acceptable to the course director in support of the challenge.
- b. The student's supporting references must be presented to the course director within five (5) business days after the examination administration.

When possible, the student will be notified of the course director's decision within three (3) business days of the receipt of the student's supporting references. It is the course director's purview either to accept or disallow any additional answer(s). The course director's decisions are final.

EXAMINATION PRESERVATION

Examinations are kept for one (1) year after the end of the academic term and then destroyed.

EXAMINATION SCORE DISSEMINATION

Final and Comprehensive assessment scores will be released/posted to Canvas (Learning Management Platform) following the conclusion of the last final exam of a given term

EARLY INTERVENTION AND REMEDIATION POLICY

As part of the program's commitment to academic excellence and student success, the Drexel University Physician Assistant Program has established a structured Early Intervention and Remediation Policy to support students continued academic success. This policy is designed to ensure timely, consistent, and supportive responses to academic challenges, while also fostering personal and professional development. It applies to all written and practical examinations during the didactic phase, excluding final written examinations unless otherwise noted by the course director.

***Practical Examinations:** For students who earn less than 80% on practical examinations, they will meet with their lab instructor to review missed/incorrectly performed skills and will be retested on those remediated skills with their lab instructor within seven business days. As a reminder, practical examinations are must pass course components.

***Oral Examinations:** If a student earns below a 71.5% on their oral exam, they meet with the course director who will provide them with feedback on their performance, and the student will be required to perform a repeat oral exam with the topic area chosen by the course director. This must be completed within seven business days. As a reminder, oral examinations are must pass course components.

Performance Thresholds and Required Actions

1. Written Exam Score $\geq 75\%$

- No formal faculty action is required. Students are encouraged to maintain the study strategies and academic habits that contribute to their success.

2. Written Exam Score Between 71.5% – 74.9%

- This score range indicates the need for additional academic support. The following steps are initiated:
- The student will receive an email from their faculty advisor to initiate continued discussion about academic support and resources. The student should expect to receive this email within three business days of receiving their assessment score. The student and faculty will then establish a mutually beneficial time to meet to discuss academic progress, study habits, time management, and available support resources. This meeting should occur within seven business days of receiving communication from their faculty advisor and before a subsequent assessment in the course. This meeting is intended to offer encouragement and connect the student with strategies and resources that support success.

- The student will also be referred to their Academic Advisor within the College of Nursing and Health Professions (CNHP) to facilitate continued discussions and access to university-wide academic support services, which may include referrals to tutoring, counseling services, or study skills workshops.
- At the discretion of the student's faculty advisor, follow-up meetings may be scheduled as needed to evaluate progress and adjust support strategies.

3. Written Exam Score < 71.5%

- This score reflects a significant academic concern, prompting a more structured response:
- The student will receive an email from the course director to begin the remediation process. The student should expect to receive this email within three business days of receiving their assessment score. The student and faculty will then establish a mutually beneficial time to meet to review missed content, clarify difficult concepts, and receive targeted guidance. This meeting should occur within five business days of receiving communication from the course director.
- The student will also be referred to their Academic Advisor within the College of Nursing and Health Professions (CNHP) for additional support. This includes facilitating continued discussions and access to university-wide academic support services, which may include referrals to tutoring, counseling services, or study skills workshops.
- During the remediation process, the student is also encouraged, though not required, to meet with their faculty advisor to receive additional support, guidance, and mentorship.

Exam Retake Option: The student may request to retake the failed exam (excluding final exams). A maximum of two written exam retakes is permitted during the didactic phase.

If the student chooses not to retake the exam or exceeds the retake limit, a remediation activity will be assigned by the course director to assess competency of the missed content; this will be assigned during the student's meeting with the course director. At the discretion of the course director, the student will be assigned one of the activities outlined below and the student will be required to complete and submit this assignment within seven business days. Satisfactory completion of the remediation assignment is at the discretion of the course director.

Remediation Activities (per Course Director)

- Problem-based learning assignments focusing on areas of weakness.

- Written responses to selected examination items with reference citations.
- Supplemental examinations/quizzes or presentations
- Skill checks (see Practical Examination Information)
- Electronic media presentation with completion report

(note: if eligible, student can retake examination, see [examination retake policy](#))

Remediation efforts and outcomes are documented in the student's academic file.

All remediation for a given course must be completed by the end of that course

Purpose and Importance

This policy is designed to be supportive rather than punitive. It reflects the program's dedication to identifying students at risk of academic difficulty early and providing timely, individualized interventions. The goal is to promote academic improvement, enhance the use of institutional resources, and support each student's professional development.

Students are strongly encouraged to actively engage in this process, recognizing it as an opportunity for growth and learning. By participating in early intervention and remediation, students can improve their academic performance, build resilience, and strengthen the skills necessary for success in both the program and future clinical practice.

DIDACTIC YEAR EXAMINATION RETAKE POLICY

DUPAP has a written examination retake policy for students in the didactic phase of training (*this policy does not apply to students in the clinical phase of training).

Eligibility for Retake Examinations: Each student is allotted a maximum of two (2) written examination retakes for the duration of the didactic phase. This is a cumulative allowance that spans all didactic coursework and remains in effect throughout any approved leave of absence. Retakes completed before a leave of absence count toward the student's total allowable retakes. Documentation of students' use of examination retakes is tracked by the program's Student Progress Review Committee (SPRC).

For the purposes of this policy, a *written examination* is defined as an individual, proctored assessment that evaluates course content through written responses (e.g., quizzes, tests, midterm examinations).

Retake opportunities do not apply to:

- Comprehensive final examinations
- Written assignments or papers
- Group projects
- History/Physical Examination (SOAP) notes
- Practical or skills-based assessments
- Any other coursework not classified as a written examination
- Oral examinations

Conditions for Retaking an Examination: A retake is permitted only when the original examination score is below 71.5%. When a retake is completed, the maximum score that a student can earn on that assessment is 71.5%. If both the original and retake scores remain below 71.5%, the higher score will stand.

Requesting a Retake Examination: Students must request a retake within 2 business days of the initial examination grade being posted. Requests must be submitted directly to the course director via email and the student should also include their faculty advisor in that communication. Retake approvals are based on policy criteria and are applied consistently across all students.

The course director will meet with the student to:

- Confirm whether the request meets the policy's eligibility criteria
- Communicate the approval or denial of the retake
- Provide general feedback on content areas missed (specific questions or answer choices will not be reviewed)
- Outline expectations and next steps regarding the retake examination

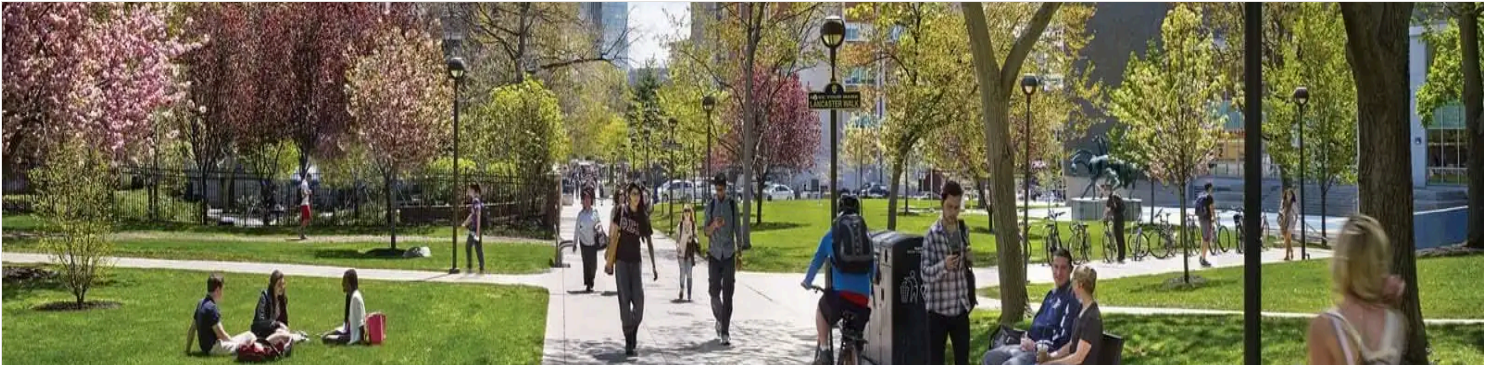
Administration of the Retake Examination: Retake examinations will assess the same course content as the original written examination but it will not be the former written examination. The format of the retake examination (e.g., multiple choice, fill-in-the-blank, short answer) is determined by the course director and will be communicated during the review meeting. Students will receive only those accommodations formally approved by the Office of Disability Resources (ODR) at the time of the retake and the program aligns with [Drexel University policies as related to religious accommodations](#). The retake examination will be scheduled as soon as reasonably possible, based on course director availability and program scheduling constraints, but this should not exceed 5 business days from the date of the student's meeting with the course director.

When a Retake Examination is Not Taken:

A student who:

- Chooses not to retake a failed examination, or
- Has already used both permitted retake opportunities

will be assigned a remediation activity to assess competency in the relevant material. The remediation activity will be selected from the approved list of remediation options (listed in the Early Intervention and Remediation Policy). The remediation assignment will be provided during the meeting with the course director and must be completed within seven (7) business days. Satisfactory completion of the remediation activity is determined by the course director and documented according to program standards. If a student's remediation assignment is not deemed satisfactory by the course director, the student will complete additional targeted remediation assignments until the work is deemed satisfactory by the course director.



Didactic Year Operations, Safety & Resources

DIDACTIC YEAR LECTURE RECORDING POLICY

Posting of classroom lecture recordings will be the discretion of the course director.

INCLEMENT WEATHER

Cancellation/ School Closing Notification for Inclement Weather During the Didactic Year

Drexel University announces weather-related closures or delays through the [DrexelALERT system](#), [official email](#), and the [main website](#). For didactic year students, closures typically affect all Philadelphia campuses, with updates also available via 215.895.MELT (6358). Classes may move to remote learning during closures and that information will also be communicated to students via LMS messages accordingly.

DIDACTIC EXPOSURE GUIDELINES

These guidelines are to be followed when a student has been exposed to an occupational hazard in the didactic setting.

1. A significant exposure is defined as:
 - a. A needle stick or cut caused by a needle or sharp that was actually or potentially contaminated with blood or body fluids.
 - b. A mucous membrane (i.e., splash to the eye or mouth) exposure to blood or body fluids; or

- c. A cutaneous exposure involving large amounts of blood or prolonged contact with blood - especially when the exposed skin was chapped abraded or affected with dermatitis.
2. Once the student incurs an exposure:
 - a. The student should immediately notify the faculty member supervising the activity where the exposure occurred
 - b. If event occurred within the context of a healthcare agency, the student and instructor should follow the healthcare agency's "Blood borne Pathogen Exposure Control Guidelines" (this includes washing the area of exposure, informing patient, obtaining consents for blood draw of the source patient, etc.).
 - c. Didactic students will complete the [Report of Student Injury Form](#) in collaboration with their designated DUPAP faculty member (e.g., course director or faculty member present at the time of the incident/injury) within twenty-four hours of the incident/injury.
 - d. The student must present their health insurance card for applicable billing charges.
 - e. All follow-up care should occur with the student's primary care provider (PCP). It is recommended that the student request a copy of the initial treatment plan and source patient results to share with the student's primary care provider (PCP).
 3. The [Report of Student Injury Form](#) must be completed and submitted to the Vice Dean of Strategic Operations and Academic Services within twenty-four hours of the incident
 - a. The student's faculty member present at the time of the incident will guide the student through the submission process.

INCIDENT REPORTS

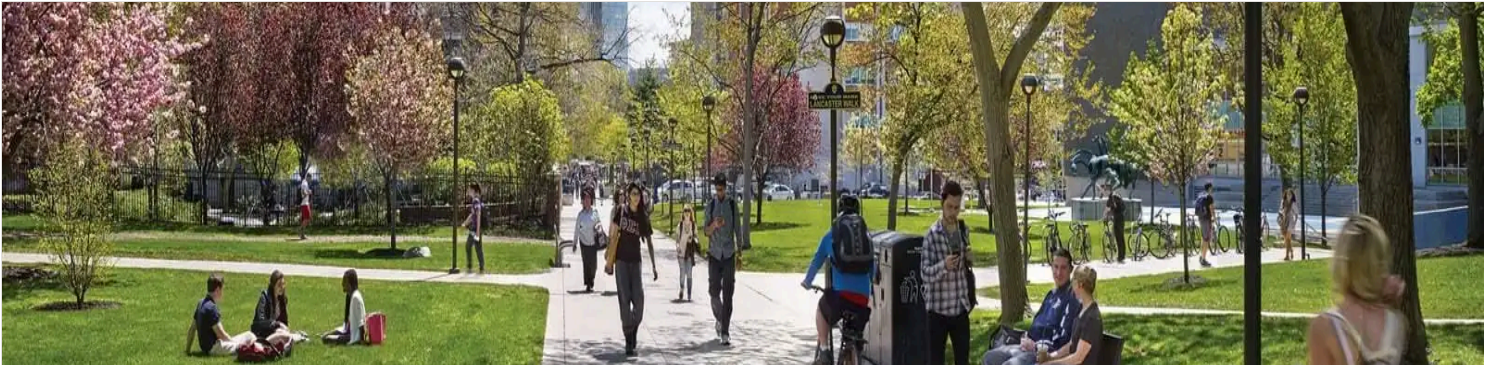
To report a student incident or injury, students are required to complete the Report of Student Injury Form in collaboration with their designated DUPAP faculty member (e.g., course director or faculty member present at the time of the incident/injury). This form should be completed within twenty-four hours of the incident; additional information is noted on the [Report of Student Injury Form](#).

DIDACTIC YEAR STUDENT CLINICAL SKILLS LAB RELIGIOUS ACCOMMODATION REQUEST POLICY

Students who require a religious or related accommodation for the Clinical Skills Lab—such as restrictions regarding instructors or peers of a particular gender due to gowning or physical examination skills--must submit a formal written request to the Program Director upon matriculation into the program. Failure to provide timely written notice may limit the program's ability to arrange appropriate accommodations.

DIDACTIC YEAR HELPFUL RESOURCES

Student Need	Recommended Resource
Course or exam concerns	Course Director
Study skills or tutoring	Academic Advisor CLASS
Stress and Burnout	Office of Counseling and Health DUPAP Faculty Advisor
Health Services	Office of Counseling and Health
Disability Resources	Disability Resources
Clinical Rotation Questions	Clinical Education Team/Director of Clinical Education
Didactic Year Exposure/Injury	Course Director
Technology Assistance	IT Help Desk
Food or Housing Insecurity	Student Life Office of Counseling and Health Mario's Market Food Pantry CNHP Emergency Dean's Fund
Discrimination or Harassment Concern	Office of Civil Rights Compliance / Title IX



Clinical Year Overview

CLINICAL YEAR FACULTY AND IMPORTANT CONTACTS

Name	Role / Responsibilities	Email
Joan Ward, DMS, PA-C	Chair and Program Director, Physician Assistant Department	jw3965@drexel.edu
Ryan J. Clancy, MSHS, MA, PA-C, DFAAPA	Director of Clinical Education; Clinical Coordinator and Course Director, Primary Care Practicums and Flex	rjc328@drexel.edu
Juanita A. Gardner, MPH, PA-C	Clinical Coordinator and Course Director, Pediatrics and Behavioral Medicine	jag66@drexel.edu
Corina R. Gamber, MS, PA-C	Clinical Coordinator and Course Director, Emergency Medicine and Family Medicine	cg3323@drexel.edu
Michelle Umstead, MS, PA-C	Clinical Coordinator and Course Director, Women's Health and Behavioral Medicine	mu77@drexel.edu
Vicenta Montgomery, DMSc, MMS, PA-C	Clinical Coordinator and Course Director, Internal Medicine and Family Medicine	vm624@drexel.edu
Martha Davis	Assistant Director, Admissions & Clinical Education	mjd55@drexel.edu
Nickole Harris	Clinical Support Coordinator	nh623@drexel.edu

Questions regarding any aspect of Clinical Education are to be directed to members of the Clinical Year team:

- Professional/education/clinical site-related issues: Contact the appropriate faculty member listed above
- Clinical site onboarding and EXXAT technical issues: Nickole Harris, Clinical Support Coordinator

In Case of Emergency:

- Director of Clinical Education: Cell: 267-359-5767
- Drexel Counseling Center: 215-895-1415/ After-Hours on-call Counselor: 215-416-3337
- Drexel Public Safety: 215-895-2222
- Medical Emergencies or to request "medical transport" to the Student Health Center: Call Drexel Public Safety at 215-895-2222 or dial 911
- Students can also download the free [Drexel Guardian App](#) for mobile devices

CLINICAL YEAR MISSION

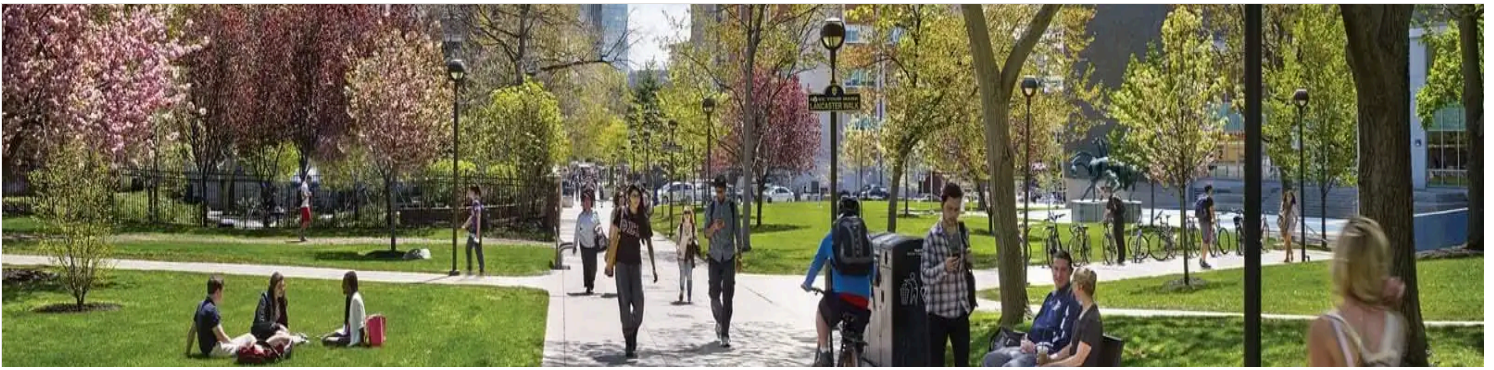
The Physician Assistant (PA) Program of Drexel University has long advocated the philosophy of expanding PA education from the University campus into the community. Beginning with the Clinical Rotation phase, followed by the Primary Care Practicum phase, students actively participate in the delivery of medical care to patients of all ages, in hospital ambulatory settings, specialty practices and primary care. Students in the clinical year serve as advocates for the PA profession with their physician supervisors, other health care professionals, patients, and their families. PA students strengthen their education and involvement with communities at their clinical sites through community service activities.

The clinical year builds on the foundation of the didactic year with five-week Clinical Rotations in Behavioral Medicine, Emergency Medicine, Internal Medicine, Pediatrics, Surgery, and Women's Health. During Clinical Rotations, students learn the body of knowledge and clinical skills of each specialty within the framework of the health care team and the PA role.

The Primary Care Practicum phase, consisting of one 10-week primary care placement, provides students with opportunities to increase their knowledge base, clinical skills, understanding of continuity of care, and level of responsibility through primary care placements. Throughout the clinical year, students are exposed to a

variety of practice settings with a focus on sites in rural and urban medically underserved communities. Student placement in underserved areas fulfills the mission of the PA Program to provide health care to communities in need and enhances the students' commitment to the goals of the PA profession. With the guidance and supervision of the clinical preceptors, and with specific structured feedback mechanisms, students' progress to higher levels of clinical responsibility as their skills and confidence develop.

The PA Program provides structured learning activities and timely feedback to students during the clinical year. Students take increasing responsibility for their education, developing the skills to provide patient care, function in a team approach, adjust to changes in the health care system, practice evidence-based medicine and become lifelong learners. Students complete the clinical year with the foundation of medical knowledge, clinical skills, professional behavior, and values to serve the public and uphold the traditions of the Drexel University PA Program and the PA profession.



Teaching and Learning in a Clinical Setting

TEACHING AND LEARNING IN A CLINICAL SETTING

Learning in a clinical setting presents a unique set of challenges to both teachers and students. The traditional educational structure of classroom and examination is replaced with the highly personal and less formally structured mentor relationship between preceptors and students. The student/preceptor relationships are variable, based upon the style of the practice, and not necessarily transferable to other clinical situations. Also, evaluations of the students' skills are less measurable by more traditional teaching/learning methods, and the evaluations depend much more upon the knowledge, skills, and expertise of the preceptors.

There are principles of clinical education that help the preceptors and students develop joint styles/methodologies for the educational process. These are presented below to focus the students' thinking about the clinical year experience and to help the students develop individual learning plans.

Needs of learners and teachers:

- a. Clearly defined learning outcomes: an understanding of what is to be learned
- b. A commitment by teachers and students to achieve these outcomes
- c. A clearly stated plan for achieving these outcomes that emphasizes practice by the learners and observations and reviews by the teachers
- d. An evaluation process, based on formal and informal feedback mechanisms, which measures the students' progress in achieving the outcomes

Feedback is an essential learning ingredient in the preceptor/student relationships. Giving and receiving feedback can be a more individualized interaction between the teachers and learners, and there are greater variations in evaluating either successes or failures in this learning format than with more classroom-oriented forms of teaching and evaluation.

STUDENT GUIDELINES

General Goals of the Clinical Rotations

1. Primary care practice requires specific skills in many disciplines, including internal medicine, women's health, pediatrics, surgery, emergency medicine, and behavioral medicine. The student is expected to develop basic diagnostic and therapeutic skills related to preventive, chronic, acute, rehabilitative, and emergent problems, which commonly arise in each of these disciplines. General objectives, which should be applied to all aspects of primary care, are listed below.
2. It is understood that the level of skills the PA student possesses at the beginning of clinical education is much less than the level attained by the final primary care practicum. As student training progresses, their ability to evaluate a primary care health problem should also progress.
3. The student will always function in a professional manner, be available when requested, be prompt, demonstrate tact and respect in patient and staff interactions, dress appropriately, demonstrate knowledge of their limitations, and demonstrate initiative in their learning.

Conduct

- Students will be under the direct supervision of the preceptor or preceptor's delegate at all times while conducting clinical activities (office hours, hospital/nursing home rounds, home visits, on-call, etc.). Students are expected to follow the preceptor's practice office hours, i.e. students may be required to be on site evenings, overnight, weekends, or immediately before or after a holiday (i.e. the day after Thanksgiving).
- Students must check email messages at their official University account and Canvas class shell for announcements at least once daily. Failure to reply to program faculty/staff within two business days may result in disciplinary action.
- **Drexel University ID must be worn during all patient encounters without exception.**
- Drexel physician assistant students must always properly identify themselves as physician assistant **students** (see [Professional Presentation Guidelines](#)).
- Students will follow and adhere to the guidelines and directions of the preceptor regarding all aspects of patient care, **including HIPAA regulations.**

- Preceptors must be notified immediately by the student regarding any absence or lateness from clinical duties. Clinical Coordinators must be notified by the student of any absence from the clinical site **prior** to the absence.
- Students are not permitted to function in settings outside the preceptor's practice unless approved and supervised by the preceptor. The Clinical Director must be notified in such instances.
- Dismissal from a clinical site is considered **grounds for dismissal** from the PA Program after appropriate review by the PA Program faculty.
- Students will practice professional ethics. For example, patient issues and/or the conduct of a physician's practice should never be discussed with another clinician or persons outside the practice, including on social media sites.
- Students are to contact the Clinical Director and/or the Clinical Coordinator immediately if difficulties are encountered during any phase of the clinical experience. Students must provide written documentation of the issue for program review.
- Students are responsible for updating their biographic data and contact information in EXXAT.

Student Expectations

- In addition to the above expectations, the following practice guidelines for professional behavior are to be followed (This list is not intended to be all-inclusive):
- Students are expected to conform to the laws, rules, regulations, and by-laws of the state, hospitals, and/or office practices in which they are being trained.
- Students may perform such evaluations, examinations, procedures, and patient education that the supervising preceptor is willing to train, approve, and supervise and which are a part of the preceptor's scope of practice.
- The student may complete prescription forms and other forms necessary in the healthcare of the patient—which then must be countersigned by the preceptor. **No student is permitted to carry pre-signed forms or prescription slips.**
- The student is permitted to examine, document, offer treatment plans, and encourage health promotion and disease prevention plans to the patient, in accordance with the medical practice policies and procedures. **No patient**

may leave the care of the practice or hospital until evaluated by the preceptor after evaluation by the student.

- Students at clinical sites are required to carry their HIPAA, CPR & Immunization Records with them to their sites. Any questions regarding the scope of practice for the student must be addressed to the preceptor and to the Clinical Coordinator or Clinical Directors.
- Students at clinical sites who benefit from housing provided by the clinical site must abide by the housing guidelines, policies, and procedures outlined by the clinical site or organization that provides the housing, i.e., cleaning.

Call Back Days

Call Back (CB) Days and related activities will be conducted periodically during the clinical year, usually at the end of each rotation. These days are set aside for examinations, class interaction, and continuing medical education. **Attendance is mandatory.** Adherence to clinical year dress code is mandatory for all call-back activities unless otherwise stated by the Director of Clinical Education. The PA Program reserves the right to alter this and individual student schedules to facilitate effective utilization of university resources. Students must plan to be on campus or virtual until 5pm every CB Day/week. Attendance, punctuality, and participation are expected from every student. Consideration for excused absence will be at the discretion of the clinical team.

Students who miss any mandatory component of CB Day activities without prior notification and approval will have five (5) points deducted from their overall rotation grade and may have an additional assignment to complete.

Troubleshooting Clinical Year Concerns

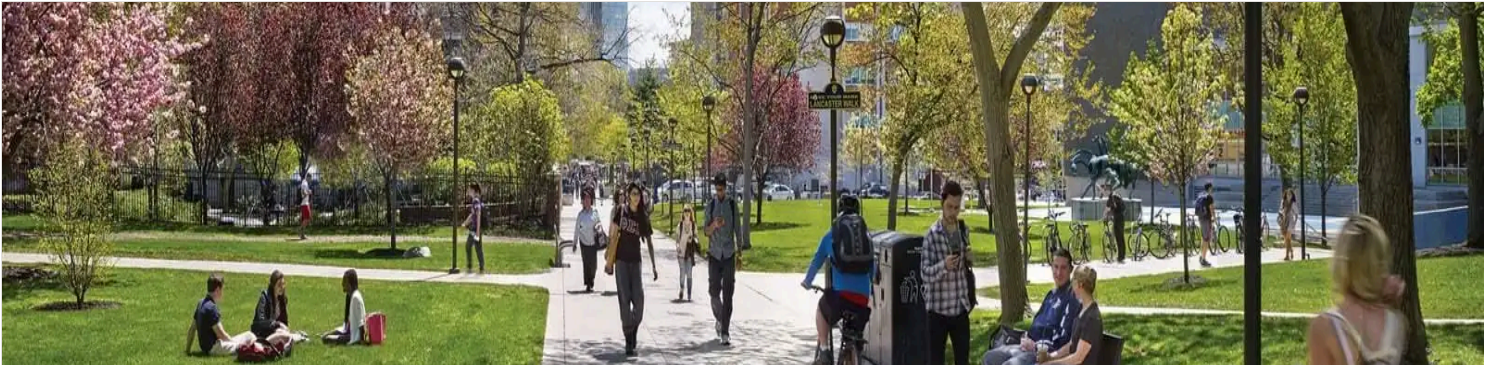
The Clinical Year Team must be made aware of any problems occurring during the clinical phase. If students have concerns about the professional, academic, clinical, or ethical aspects of their clinical training, the Clinical Year Team needs to be made aware of these concerns as they develop. They are prepared to take an active role, when appropriate, to ameliorate difficult situations. When it becomes necessary, students will expect prompt, dependable, and competent responses from the Clinical Year Team. In return, the Clinical Year Team expects that students will be prompt and dependable in informing them of emergent problems.

Students must provide written documentation of any issue for the Program review. Students are provided an opportunity to raise concerns to the Director of Clinical Education regarding their clinical placements in the period **prior** to when clinical sites and preceptors have been notified of the schedule. Once the site is notified

and administrative processes have been started, students are expected to attend their scheduled clinical placements.

Changes to student clinical placements after sites have been notified will only be considered in extreme circumstances, such as a site cancellation or an emergency on the part of the student or preceptor. Students must **not** reach out to site administrators or preceptors to request site changes.

The Clinical Year Team will be in contact regularly with both students and preceptors by telephone and/or email to relay messages, arrange site visits, and to obtain verbal or written feedback. These communications are intended to foster dependable relationships among the students, preceptors, and the PA Program, and to provide a mechanism for informal questions about the teaching, learning, and evaluation processes. Students should feel free to contact any member of the Clinical Year Team at any time with questions or comments.



Clinical Year Policies & Expectations

SUPERVISED CLINICAL PRACTICE EXPERIENCE PROCUREMENT POLICY

DUPAP maintains responsibility for the development, approval, and assignment of supervised clinical practice experiences required for successful completion of the program. Clinical rotations must be completed at locations and with preceptors that have been reviewed and authorized by the program before the rotation begins.

Students should not enter into independent agreements with healthcare practices, organizations, or individual clinicians regarding required clinical rotations. Students must not represent that a particular site or clinician has been approved by the program unless formal approval has been provided.

The program understands that students may have an interest in completing a clinical experience in a particular geographic area or specialty because of existing community connections, permanent residence, professional interests, or potential future career opportunities. Students may bring potential clinical opportunities to the attention of the Director of Clinical Education. Providing a recommendation is voluntary and does not create an obligation for the program to pursue or approve the proposed experience.

Students who would like the program to consider a potential clinical site or preceptor must submit the information requested through the program's designated clinical site submission process. The information provided must allow the program to assess the proposed clinical environment, preceptor qualifications, patient population, scope of practice, learning opportunities, and other requirements applicable to the rotation.

Following submission, the program will determine whether further development of the proposed experience is appropriate. Program representatives will communicate directly with the organization or clinician, request additional documentation, conduct an evaluation, and establish any necessary affiliation or clinical education agreements.

A proposed site or preceptor may be used for a program-required rotation only after the program has completed its review and granted formal approval. Approval is based on the site's and preceptor's ability to provide an appropriate educational experience and to meet all applicable program, institutional, accreditation, and regulatory requirements. The program retains final authority over the acceptance and use of all clinical education sites and preceptors, as all clinical rotation sites are provided by the program.

ACCOMMODATIONS FOR STUDENTS WITH DISABILITIES

Students requesting accommodations due to a disability at Drexel University need to submit a current Accommodation Verification Letter (AVL) to faculty before accommodation/s can be made. Each student requesting accommodations must submit/renew their request each term. Additionally, all students choosing to use their accommodations must schedule their exams through Clockwork at least 5 days/120 hours in advance for the student to be guaranteed the accommodation. For virtual exams, you must notify the clinical coordinator at least 5 days/120 hours in advance that you will use your accommodation, as virtual exams are not taken with ODR.

AVLs can only be submitted via the ClockWork Portal. AVLs are issued by the Office of Disability Resources (ODR). For additional information, visit the ODR Website at [Disability Resources](#) or contact the Office for more information: 215-895-1401 (V), or disability@drexel.edu.

HIPAA POLICY AND REQUIREMENTS

Students will make available to preceptors, upon request, proof of HIPAA training/orientation by providing copies of their training certificates.

HOUSING AND TRANSPORTATION

Students are responsible for securing all housing and transportation for the Clinical Year phase. The Program is not responsible for housing or transportation arrangements. There may be information on file regarding housing arrangements made by previous students for certain sites. Students are welcome to contact the Program for any information that may be available once sites have been assigned. **Students must prepare personally and financially for housing and transportation needs during the clinical phase of education.**

RELEASE FOR TRAVEL

Travel beyond the Philadelphia area is and will be required during the clinical year. Students are not guaranteed local clinical rotations and therefore are required to have access to a car or other mode of transportation for travel. Students are responsible for transportation to and from all clinical sites regardless of location. In addition, each student is also responsible for any expenses incurred while rotating at a clinical site, including but not limited to parking, gas, tolls, food, and other incidentals.

Students may not be given and should not ask for either a study or travel day off from their clinical schedule. Exam days on Friday are virtual, and in-person exam days fall on a Monday following a weekend to allow for travel.

CLINICAL COMPLIANCE

Clinical sites have the right to decline acceptance of students for training who do not comply with the provision of such information required by individual clinical training sites. If a student cannot meet all the clinical site's requirements, the Program will attempt to identify an alternative placement; however, if alternative sites cannot be found, the student's completion of the program may be delayed or made impossible. In the event of a positive criminal background report, or a change from the last documented child abuse, FBI fingerprint, or state criminal background check, the student must meet with the PA Program Director to evaluate their progression in the program. Failure to do so will result in disciplinary action up to and including immediate dismissal from the program without the opportunity to appeal. In addition, please be aware that individuals convicted of a felony or misdemeanor may be denied licensure as a health professional.

SHADOWING AS A PA STUDENT

Shadowing experiences are not facilitated by the PA Program. Students who want to shadow a practitioner must make arrangements independently and be aware that they are not representing the Drexel PA Program, will not wear the white coat with the PA Program logo/patch, and **are not covered by the program's liability insurance**. Students are obligated to make this clear to the practitioner with whom the arrangements are made. Students making shadowing arrangements independent of the program are advised that their status reverts to that of a non-provider observer and even tasks considered routine for a PA student on an approved clinical rotation must not be performed. As senior students approach graduation, they should be aware that the Pennsylvania Medical Board does not allow shadowing of a provider prior to employment. In addition, there are significant ethical considerations in "shadowing" a potential employer.

ATTENDANCE

Students are expected to be at all clinical sites as scheduled by the preceptors/site and are NOT authorized to attempt to adjust their schedule without direct communication with their clinical preceptor first. **Vacation days, study days, or travel days are not permitted.** The only planned exceptions to the attendance policy are for religious holidays and to accommodate preceptor schedules. If preceptors will not be at clinical sites for personal reasons (i.e., vacation) and cannot designate delegates to supervise students for that period, students are to contact the designated Clinical Coordinator immediately. Faculty will assign readings or other assignments to compensate for the lack of clinical exposure. Any days that students are absent from clinical sites beyond the seven (7) days allowed must be made up prior to the completion of training.

NOTE: The Clinical Year phase does not follow Drexel University's Academic holiday calendar. You are expected to follow your preceptor's schedule.

WEATHER SITUATIONS

If Drexel campus is either closed or delayed, this does **NOT** mean that the clinical site is closed or delayed. Students are instructed to contact the site directly to see if there are any delays or cancellations.

Student safety is paramount; students are encouraged to use their judgment when extreme and hazardous driving conditions are present. Student must report any

absence or lateness to their clinical coordinator.

STUDENT EMPLOYMENT

Employment during enrollment in the Program is strongly discouraged.

Employment that interferes with the student's academic or clinical responsibilities and performance will be referred to the Student Progress Review Committee and/or Program Director. PA students must not be required to work for the program at any time. PA students must not substitute for, or function as instructional faculty nor clinical or administrative staff.

ROTATION CLINICAL HOURS

Student work hours will vary depending on the clinical rotation and will be based on the schedule predetermined by the clinical site. Specific site clinical hours are established in collaboration with the PA program. Students are expected to work full time or follow the schedule provided by the clinical site. Any deviation from that requires review and approval from the PA Program. Students should expect to complete an average of 32hrs/week in supervised clinical practice, direct or guided instruction, and/or independent learning.

Students who are unable to obtain > 30hrs clinical hours per week may be required to complete an additional written assignment. This assignment may be implemented when exceptional circumstances arise at the clinical site, as determined by the clinical team.

Students should not be expected to **regularly** work on-site more than 60 hours per week. Some weeks may have activities that require additional hours; however, if this is a regular occurrence, the Director of Clinical Education should be notified to navigate further scheduling discussions. This time limit should not include students who may have on-call responsibilities or are working a shift schedule with atypical week structure.

In the event of an unplanned preceptor absence, the student is expected to contact the Director of Clinical Education as well as their clinical coordinator **immediately**. The student may be required to make up the hours at the site, be moved to an alternate site, or complete alternative learning assignments.

A student may not leave a clinical rotation without first directly speaking to either the Director of Clinical Education or their clinical coordinator unless there is a threat to their health or safety. Any such departure will be treated as abandonment of the

rotation and is subject to sanctions by the Student Progress Committee, including possible dismissal from the Program.

CORE ROTATION ROUTINE FOR STUDENTS

Students are expected to be at their assigned clinical site according to the established schedule. If you have questions regarding required hours at your clinical site, contact the Clinical Coordinator for your rotation. Students must accurately record their actual clinical hours in EXXAT.

Students may not act as administrative or clinical substitutes for paid employees while at clinical sites. If you have questions or concerns regarding your role or responsibilities at a clinical site, please contact your Clinical Coordinator.

The following provides a week-by-week summary of a typical core rotation. Additional information regarding the assignments referenced below is provided elsewhere in this Clinical Year Manual.

WEEK ONE

1. Check in with your Clinical Coordinator

During Week One, email your Clinical Coordinator with an update that includes:

- How you are doing at the clinical site
- Your clinical schedule
- The name of your established primary preceptor
- The name of the preceptor who will complete your mid-rotation and final evaluations
- Any known or planned absences during the rotation

Deadline: Submit via email by **Monday of Week Two at 8:00 a.m. EST.**

2. Complete EXXAT time tracking and patient/procedure logging

All patient logs, procedures, and timesheets must be completed in EXXAT by **8:00 a.m. EST each Monday** for the previous week.

Failure to complete required documentation by the deadline will result in no credit for each week of late or missing entries on the documentation score.

3. Review rotation learning outcomes

Review the rotation learning outcomes provided in the course syllabus and continue reading and studying throughout the rotation.

4. Connect with your next preceptor

Contact the preceptor for your next rotation. If you experience difficulty making contact, consult the Clinical Coordinator for the upcoming rotation or the Director of Clinical Education.

WEEK TWO

1. Continue EXXAT documentation

Continue entering patient logs, procedures, and timesheets in EXXAT.

2. Begin the OLD (Online Learning Discussion) assignment

The OLD assignment will be posted by Week Two. Begin working on the assignment once it becomes available.

3. Submit the mid-rotation preceptor evaluation

The mid-rotation preceptor evaluation is **mandatory and must be submitted through EXXAT**. The evaluation must be completed by your primary preceptor or their designee.

Deadline: Submit by **Friday of Week Two at 11:59 p.m. EST.**

4. Complete the Week Two Site Evaluation

Complete the Week Two Site Evaluation through EXXAT. This evaluation allows the program to identify any unexpected issues or concerns you may be experiencing at your clinical site.

Deadline: Submit in EXXAT by **Monday of Week Three at 8:00 a.m. EST.**

WEEK THREE

1. Continue EXXAT documentation

Continue entering patient logs, procedures, and timesheets in EXXAT.

2. Continue reading and studying

Continue reviewing course materials and preparing to meet the learning outcomes for the rotation.

3. Submit the graded rotation assignment

Submit the graded assignment identified in the syllabus for your current rotation.

Deadline: Submit in Canvas by **Friday of Week Three at 11:59 p.m. EST.**

4. Confirm arrangements for your next rotation

Contact the Clinical Coordinator for your next rotation if you are having difficulty connecting with your upcoming preceptor.

Do not wait until Week Five to notify your Clinical Coordinator that you are having difficulty contacting the site or preceptor.

WEEK FOUR

1. Prepare for the End-of-Rotation (EOR) Examination

Continue preparing and studying for the End-of-Rotation (EOR) examination.

2. Continue EXXAT documentation

Continue entering patient logs, procedures, and timesheets in EXXAT.

3. Submit the OLD assignment

The OLD assignment, made available in Canvas during Week Two, is due during Week Four.

Deadline: Submit in Canvas by **Friday of Week Four at 11:59 p.m. EST.**

WEEK FIVE

1. Complete EXXAT documentation and evaluations

Continue entering patient logs, procedures, and timesheets in EXXAT. Complete your evaluations of the clinical site and preceptor in EXXAT.

2. Review the Callback Day schedule

Check the Callback Day schedule to determine which days you are required to be on campus.

- Internal Medicine (IM), Behavioral Medicine (BMed), and Emergency Medicine (EMed) students must give presentations.
- All students are expected to attend Internal Medicine Teaching Rounds unless they are giving an EMed or BMed presentation.
- Room assignments and/or Zoom links will be posted in Canvas.

3. Thank your preceptor

Before leaving your current clinical site, thank your preceptor and provide a written thank-you card.

Schedule time with your preceptor to discuss your final evaluation.

4. Review your EXXAT procedure log

Make sure your EXXAT procedure log is current and review it with your primary preceptor before leaving the clinical site.

5. Review examination policies

Review the Clinical Year Manual for examination policies and requirements.

PROFESSIONAL PRESENTATION GUIDELINES

Both as a student physician assistant and graduate practitioner, one encounters a variety of patients from diverse cultural, ethnic, and socioeconomic backgrounds. To establish a professional and trusting relationship with those patients, and to decrease the potential for offense or discomfort to patients, a standard of hygiene, professional grooming, and clinical attire is required. A healthcare professional's dress and appearance are essential in establishing a relationship of trust and confidence. In some cases, this requires that individual personal attire preferences be balanced with the need for effective and safe patient interaction. As a student and soon-to-be medical professional, patients' needs come first - even at the expense of individual expression.

Drexel physician assistant students must properly identify themselves at all times as physician assistant students. All students must wear:

1. A short white laboratory coat with a Drexel University PA Program patch.
2. A student Drexel ID (Dragon Card) and an identification badge that clearly identifies the student's name followed by Physician Assistant Student. **Of note: no other badge, buttons, logos, stickers, or insignia may be worn along with the Drexel white coat.**
3. Additional identification may be mandated by the institution at which they are rotating.
4. Students are reviewed for compliance with this policy by their clinical preceptors and by faculty who make periodic site visits.
5. All students must dress in a professional manner as further described/defined in this manual. Jeans, shorts, cutoffs, T-shirts, recreational clothing, clothing that obstructs movement required to meet training functions, or clothing that **exposes areas or with movement exposes areas** of the chest, abdomen, or back are unacceptable attire (ex: short tops/ crop top even if paired with high-waist pants).
6. Clothes are to be in good repair, clean, and allow for adequate movement (not tight) for clinical training and patient care. Clothing may not contain obscene wording, design, graphics, pictures, or political statements.

7. Only closed-toed shoes are allowed in clinical settings.
8. Perfumes and colognes are prohibited as they can be an irritant to patients.
9. Except for small, non-dangling earrings, no visible facial or body piercings are acceptable in the clinical setting.
10. Hair must be neat and tied back and not allowed to drape onto patients.
11. No artificial nails; length to be kept short enough to perform necessary clinical skills (ex., percussion and deep abdominal palpation), nail color, if authorized by the clinical site to wear must be a muted tone.
12. Preceptors may have site-specific dress requirements that students will be expected to abide by (ex: hospital-issued scrubs may substitute for professional dress, at the discretion of the preceptor).
13. Personal hygiene is to be maintained at all times. This includes regular bathing, use of deodorants/antiperspirants, and regular dental hygiene.
14. Undergarments should not be visible, even with movement. Examples include, but are not limited to: thongs, bra straps, boxer shorts, or camisole.

Clinical supervisors, preceptors, and physician assistant faculty reserve the right to dismiss from a clinical or educational site any student who is not appropriately attired. That action may result in requiring further professional, developmental training for the student and may also interfere with graduation in a timely manner or even completion of the program.

EVENTS/ MISTREATMENT IN THE CLINICAL YEAR

Supervised Clinical Practice Experience Concerns and Student Mistreatment

The program is committed to providing students with clinical learning environments that are safe, respectful, inclusive, and conducive to professional education. Students who experience or witness conduct during a clinical rotation that raises concerns about their safety, dignity, or treatment are encouraged to report the concern promptly to the Director of Clinical Education or the Program Director by telephone or email. If a report is made via telephone, written documentation must follow that telephone conversation.

Concerns may involve, but are not limited to, conduct that causes a student to feel threatened or physically unsafe, harassment, discriminatory treatment, inappropriate sexual conduct, or other behavior that is inconsistent with professional standards.

When a concern is reported, the Director of Clinical Education or Program Director will assess the circumstances and determine appropriate steps to protect the student and preserve the educational experience. Depending on the circumstances, this may include temporarily or permanently removing the student from the clinical setting and arranging an alternative clinical site or preceptor.

The reported concerns in a timely and appropriate manner. Information will be handled as discreetly as possible, while recognizing that complete confidentiality or anonymity may not always be possible when an investigation or other action is necessary. Students who raise concerns in good faith should not be subject to retaliation by the program, clinical site, preceptor, or other individuals involved in the clinical education experience.

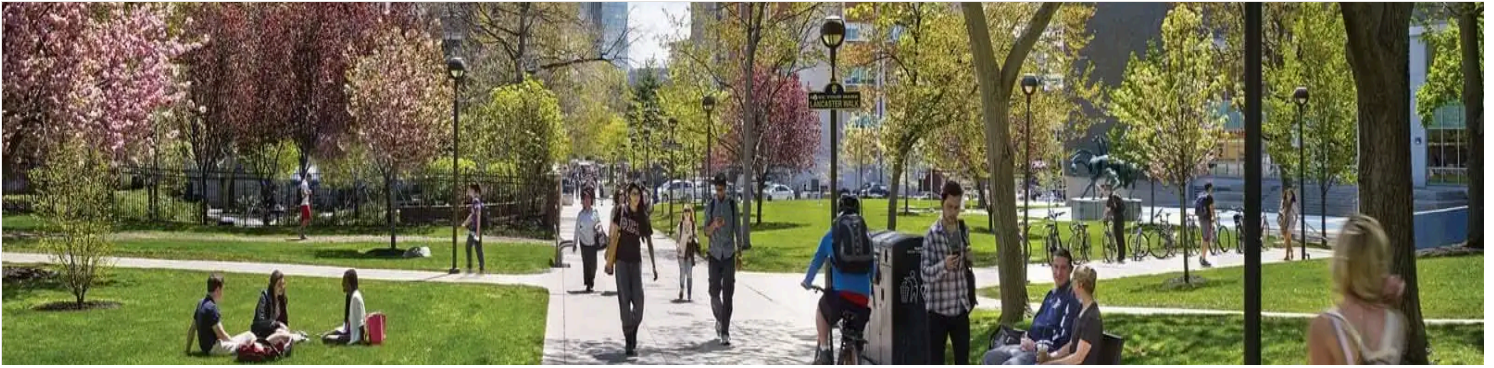
Examples of Conduct That Should Be Reported

Students should promptly notify the program when a clinical site or preceptor engages in conduct that may interfere with a safe and appropriate learning environment. Examples include, but are not limited to:

- Publicly humiliating, degrading, or intentionally embarrassing a student.
- Threatening a student with physical harm or engaging in conduct that results in actual physical harm.
- Making unwanted sexual comments, advances, or other sexually inappropriate conduct toward a student.
- Making derogatory or offensive comments related to a student's sex, gender identity, race, ethnicity, sexual orientation, disability, religion, or other protected characteristic.
- Assigning or influencing a student's evaluation or grade in a manner that is discriminatory or based on a protected characteristic rather than the student's performance.

The program may refer students to the appropriate University office or institutional resource for additional support, reporting, or investigation when a concern falls within University policies or procedures.

The student will be referred to the [Office of Civil Rights Compliance](#). Students can review the related University policies, the [Non-Discrimination and Anti-Harassment Policy](#) and the [Sexual Harassment and Misconduct Policy](#).



Absence & Leave Policies

ABSENCE & LEAVE POLICIES

Students are required to notify the PA Program when absent from any clinical day of rotation. **If a student is sick, they must notify the preceptor and Clinical Coordinator as early as possible of their absence.** Enter the absence in EXXAT as directed in orientation. Failure to comply with the above-mentioned will result in disciplinary action. This will be determined by the Director of Clinical Education.

As a general guide, up to seven (7) days per academic year are considered acceptable without serious compromise to the clinical training experience, although any absence from your clinical training adversely impacts the educational experience and academic requirements of the College of Nursing and Health Professions. Pending the circumstances of the absence, students may be required to make up the missed time via rescheduled hours or an assignment.

A comprehensive list of all Drexel academic policies is found here:

<https://drexel.edu/provost/policies-calendars/policies/>

MILITARY-RELATED ABSENCE FROM CLASS

Please see the policy on [Student Absences due to Military Service \(PO-70\)](#).

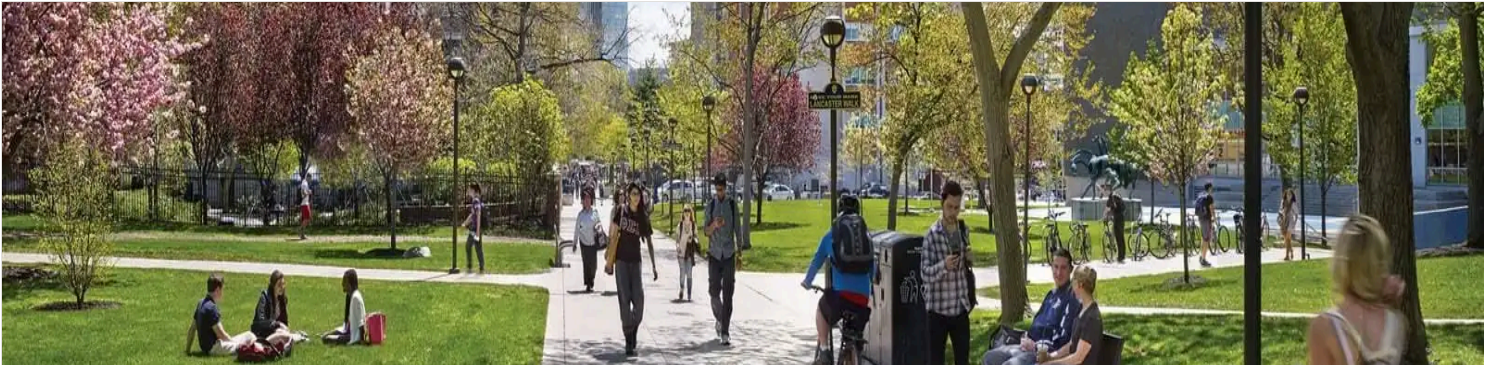
MEDICAL-RELATED ABSENCE

Due to privacy protections, students should never offer, and faculty should never request medical-related evidence or documentation regarding student absence, including but not limited to documentation from a medical provider.

Students who are sick with moderate illness and feel they may be contagious should use common sense and avoid contact with other people.

In cases of severe illness or injury that result in extended absences from class, students should coordinate with their clinical coordinator, clinical preceptor, and their PA Program faculty advisor to discuss appropriate options.

Students who are ill, hospitalized, or incapacitated in some way that affects their ability to safely and satisfactorily perform their duties in a clinical setting need to provide official medical clearance that clearly states their ability to return to clinical without restrictions. Students taking prescribed medications should be aware of the effects of these medications on alertness, judgment, and the ability to meet all technical standards. Students should not report to clinical sites if there is impairment of ability to safely provide care to assigned patients. This clearance needs to be made prior to returning to the clinical site. Please provide documentation to the Program Director, with the Director of Clinical Education copied, prior to returning to your site.



Student Requirements & Rotation Evaluations

TIME TRACKING

All students are to complete and submit timesheets via EXXAT. Absence and reason for absence from the clinical site must be reflected in the timesheet. **Do not “pre-fill” days or hours on site. Incomplete, missing or late timesheets will result in deductions from the documentation grade (see section on grading).** Timesheets and patient logging in EXXAT must be updated weekly. **Preceptors must be identified on each timesheet to be eligible for CME credit.**

EXXAT ELECTRONIC PATIENT LOGGING AND PROCEDURE TRACKING

All patient encounters are to be logged via EXXAT. Students may input patient logs directly through the EXXAT website (mobile or laptop/desktop). Students are required to log all clinical procedures in EXXAT. Incomplete, missing or late patient logs will result in deductions from the documentation grade (see section on grading). Prior to beginning clinical education, students are required to sign an EXXAT Honesty Certificate; all electronic entries submitted by the student must be truthful and accurate. Please direct any technical difficulties to Nickole Harris at nh623@drexel.edu and copy your designated Clinical Coordinator*.

***Technical problems with EXXAT/Logging? Please first try utilizing the “help” section in EXXAT before contacting Ms. Nickole Harris.**

MID-ROTATION PRECEPTOR EVALUATION AND

SELF-REFLECTION

Mid-rotation preceptor evaluation and reflection form via EXXAT: This is a MUST-complete assignment for each rotation. If you fail to complete and submit it, then you will not be permitted to progress to your next rotation. The purpose of this is to catch any deficiencies and unmet expectations during the rotation. By the end of week 2, Friday by 11:59 p.m., you must submit a signed evaluation by your preceptor or other provider designated to Exxat.

If you receive any score lower than a **"meets expectations"** in any of the components of the evaluation, you are required to include a reflection on what steps you will put in place to remediate and correct to improve prior to your final evaluation. You will also be required to meet with your Clinical Coordinator to discuss remediation of your deficiency. Remediation will be at the discretion of the clinical coordinator.

The deadline for submission is firm. You will receive 1 (one) point deduction for each day you are late with the submission to a maximum of 5 points (5 days). These points will be deducted from your final rotation grade for each day the form is late up to a maximum of 5 points deducted.

Examples:

1. You are 2 days late, and your final grade for the course is 98%. You will now be deducted 2 points to a 96%, pushing your grade from an A+ to an A.
2. Your final grade for a rotation is 75%, yet you were 5 days late with your submission. Your grade should be 70%. However, the deductions will never push you below 71.5. Your final grade in this situation would be 71.5%.
3. You fail to hand the form in by the end of the rotation. You will not be able to start the next rotation until the form is received. You will receive an incomplete in Banner.

WEEK 2 STUDENT EVALUATION OF ROTATION

All students are to submit a Week 2 Evaluation via EXXAT by Monday, 8 am of Week 3, during all clinical rotations and PCP. Any additional concerns must be directly communicated to the designated clinical coordinator via telephone or e-mail. Week 2 evaluations can be found with the Evaluations in EXXAT. They will be reviewed by the clinical coordinators who will follow up with the student if indicated. Missing or late Week 2 Evaluations will result in no credit from the documentation grade (see

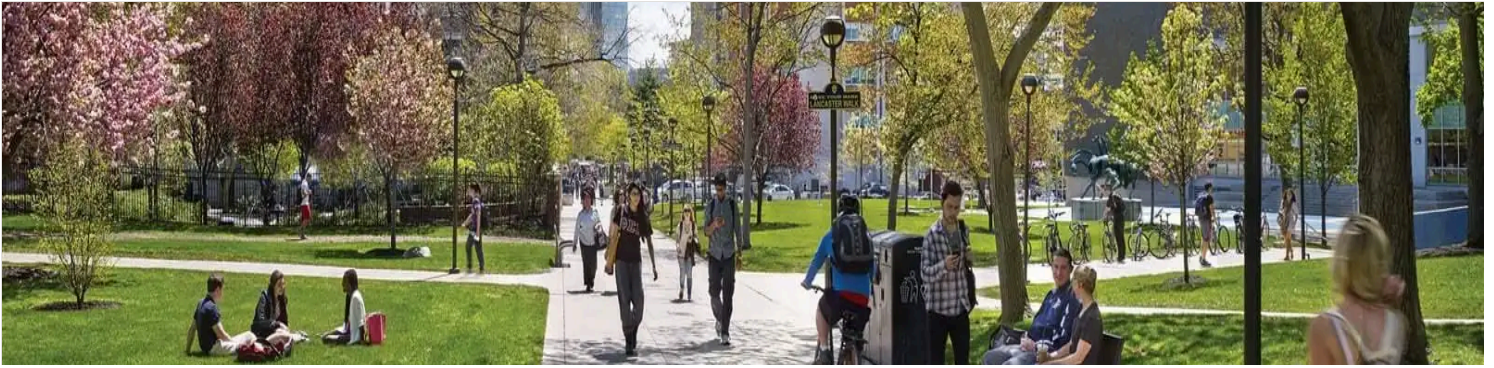
section on grading). The Week 2 Evaluations are a mandatory component of the rotation; therefore it must be completed to receive a final grade for the course.

END OF ROTATION STUDENT EVALUATION OF SITE AND PRECEPTOR

Student-generated evaluations of site and preceptor must be submitted via EXXAT by the end of each rotation and primary care practicum. These forms provide a mechanism for feedback to preceptors regarding your perceptions of educational experiences. Failure to evaluate the site and/or preceptor will result in point deductions from the documentation grade. Please note that these evaluations **are only visible to Drexel PA Program faculty/staff** and cannot be accessed directly by clinical sites and/or preceptors. These evaluations are mandatory

SITE VISITS

Students will be visited by Drexel PA Program faculty at least once during rotations to assess student progress during the clinical phase. These assessments are pass/fail. Students will receive qualitative feedback. If the student receives a failure during this assessment, another assessment will be scheduled at a future date. **The Program reserves the right to visit students at any time during the clinical phase of education for any reason.**



Rotation Grading, Exams, & Progression

GRADED COMPONENTS OF ROTATIONS

Calculation of Core Rotation Grades*

- Written Assignments: SOAP Note, Grand Rounds, Self-Assessments, Quizzes, PANCE Study Plan
- Online Discussions (OLD)
- Required Documentation
- Professionalism
- Preceptor Evaluation
- End of Rotation (EOR) Exam
- IPE/SP/OSCE Encounters (mandatory participation) = P/F

*Further details of the graded elements and calculations may be found in the course syllabi on the associated Canvas courses.

WRITTEN ASSIGNMENTS

See Individual Canvas Courses for associated rubric and instructions for the course-specific assignment(s). Please note, you must not at any time MAKE COPIES OF A PATIENT'S CHART to bring home or include in assignments/submissions. DO NOT "COPY and PASTE" portions of the patient's H&P from an EMR. Do not list the patient's name, Social Security number, medical record number, or any other identifying information. Failure to adhere to this constitutes a violation of HIPAA policy and may cause failure of your rotation. This assignment must be *your work*.

Any copying is a violation of Drexel University's policy on plagiarism and potentially also a HIPAA violation.

ONLINE DISCUSSIONS (OLD)

Students will participate in online discussions during each clinical year course where ongoing participation is required. These discussions will occur in the discussion board section of the Canvas course shell. OLD is an integral part of your learning. It also fosters collegiality among your peers. Contribute and participate early. Additional information, including the online discussion grading rubric, will be available on each of the clinical course Canvas shells.

REQUIRED DOCUMENTATION

- Weekly Patient and Procedure logs
- Weekly Timesheets
- Week 1 Check-in email
- Intellectual Honesty Attestation
- Week 2 Evaluation
- Evaluation of preceptor
- Evaluation of site

Note: There is no partial credit awarded for documentation items that are incomplete or submitted late/incorrectly. Each item must be submitted on time & correctly to receive credit. Please refer to the Documentation Rubric provided in each of the Canvas courses.

PROFESSIONALISM

To prepare students to provide patient-centered care and work collegially on collaborative medical teams in an interprofessional environment, students will be assessed on areas of professionalism, including initiative, responsibility, and professional conduct.

Please refer to the Professionalism Rubric provided in Canvas

PRECEPTOR EVALUATION

Preceptors will complete an online evaluation through the EXXAT system. Each designated preceptor will receive a link to complete the student evaluation.

END OF ROTATION EXAMINATIONS

At the end of each rotation, students will participate in Call Back Days, which include a proctored exam via PAEA, a computer-based exam based on topics identified by the PAEA topic guide and blueprint for the rotation that was just completed. This examination represents 45% of the student's grade for the rotation. The written examination must be passed* with a grade of 71.5 or better to pass the rotation, regardless of the final overall calculated grade.

*Exam failure policy as listed [below](#).

EXAM TAKING POLICIES

All electronic devices, including wearable technology, must be removed prior to the start of any exam and must be placed in your backpack, except the device that you are using to take your computer-based examination. All clinical year exams will be proctored.

You are expected to arrive at the designated exam location, including online exam rooms where you are taking the examination 15 minutes prior to the start of the exam. End of Rotation examination times are subject to change.

LATENESS TO EXAMINATIONS

1. A student arriving up to fifteen (15) minutes late, who still wishes to sit for the examination, is advised that no additional time beyond the scheduled conclusion of the examination is allowed and late arrival will result in **POINT DEDUCTION OFF professionalism grade**.
2. A student arriving more than fifteen (15) minutes late to an examination will **not be permitted to sit for that examination and must contact the Director of Clinical Education**.

A student, believing that they have valid extenuating circumstances for being late, must present an explanation and provide documentation acceptable to the Director of Clinical Education to excuse the lateness and schedule a make-up examination.

More than one unexcused episode of lateness or unexcused absence will result in student referral to the Student Progress Review Committee for further action, which may include placing the student on General Probation for professionalism issues. **This will result in a point deduction from the professionalism grade.**

VIRTUAL EXAM TAKING POLICY

The exam pins will not be released until the following conditions are met:

- Verification that all students are in proper view for observation by exam proctors
- Proper student view includes the following: from the lateral direction view of computer screen and keyboard, and the student (with the student in the frame from the head to the hips)
- Removal of all headphones and hoodies as well as wearable technology (i.e., smart watches).

During the entire exam, if you fail to meet any of the proctoring views then you will be pulled into a separate zoom room and asked to remediate your screen.

After the first warning, if you fail to correct the request or repeat the infraction a second time during any portion of your remaining exam time, **your exam will end immediately**. You will then have to repeat the entire specific End of Rotation exam in person or at a testing center (at your own expense) within 5 business days. If this results in an absence from your next clinical rotation, this will count towards one of your leave days.

PRECEPTOR END OF ROTATION EVALUATION OF STUDENT

Clinical preceptors are sent a link via EXXAT to complete the student's evaluation for rotations and primary care practicum. The evaluations will be sent out for rotations by the end of week 4, and at the end of week 9 for primary care practicum. Prior to leaving the site, students are required to make sure his/her evaluation has been completed, notify the program of any difficulties, and review the evaluation with his/her preceptor to obtain feedback on strengths and weaknesses.

Failure to achieve a grade of 71.5 or better on the Preceptor Evaluation will result in failure of the Rotation or Primary Care Practicum. Due to the seriousness of this situation, the PA Program will review the overall performance of students, as well as

the problems within the Primary Care Practicum. Appropriate actions, as deemed necessary by the PA Program, will be taken.

Any instance of unprofessional behavior during the clinical year will be grounds for failure of the course as well as possible dismissal from the PA Program. If you are dismissed from your clinical site at any point during your rotation by your preceptor for unprofessional behavior, you will receive a failure for that rotation, will not be permitted to sit for the rotation EOR exam, and will be required to repeat the rotation.

NON-LETTER GRADED EVALUATIONS

Clinical procedures are technical skills that are both a clinical year and a program requirement. Students are required to perform and document any procedure or other technical skills performed in the program's web-based platform (EXXAT).

A non-comprehensive listing of clinical procedures specific to the clinical setting will be provided under the learning objectives in the individual course syllabi, which are posted in Canvas and in EXXAT. These clinical procedures are recommended for the student to observe, assist, or perform if given the opportunity, during the clinical year. The Clinical Year team will periodically review student technical skill progress via comprehensive EXXAT procedure log reviews. The Director of Clinical Education will be notified if the student is not making steady progress in the clinical year attaining observations and performing clinical procedures.

The following procedures must be "performed" independently while on clinical rotations and will be assessed for competency as part of the program's summative assessment testing.

Students who are not allowed the opportunity or are otherwise unable to perform these procedures/technical skills while on clinical rotations will be required to complete them during specified call back day lab and activities. The following clinical procedures/technical skills must be completed and entered into procedure logs in EXXAT by the end of the student's last core rotation, prior to the start of PCP.

- Chest X-ray interpretation
- ECG interpretation/interpret ECG
- Injection: IM
- Sterile Technique for minor procedures (e.g. for I&D, suture)
- Sterile Scrub/Gown/Gloving
- Suture placement

- Suture removal
- Wound dressing
- ECG lead placement
- Splinting
- Pharyngeal swab
- UA dipstick evaluation
- Pelvic exam
- Fetal heart tone assessment (doppler or US)
- Measure fundal height
- Subq injection (ex MMR/Varicella)

The PA clinical team will monitor student encounter (patient and procedure) logs during each rotation for compliance. Students progressing through the clinical phase, who are not on target for achieving the patient encounters will be contacted by the Director of Clinical Education or their designee who will arrange alternative learning experiences, which may include changes to the clinical core and flex rotation placements, simulation exercises, or other experiences to ensure compliance with the above requirements. Completion of alternative learning experiences may delay the student's graduation, which will incur additional registration and tuition fees and extension of time. Patient logging requirements are also a requirement for program completion and graduation.

INTERPROFESSIONAL EDUCATION (IPE)

During the clinical year, every student has the opportunity to participate in an inter-professional simulation training activity to be held on the Drexel University campus. Students will be notified of upcoming IPE activities and will be asked to volunteer to participate with an inter-professional team during the clinical phase of PA student training. Simulated patients may be patient actors, mannequins, or both. Case subject area and objectives will be provided to students. Students assigned to attend inter-professional simulation should be prompt, wear professional attire or scrubs and lab coat, bring a stethoscope and be prepared to actively participate in simulation. Each student will advise his/her preceptor of the simulation date in advance and document participation in the EXXAT time sheets.

Learning outcomes:

- a. Identify the roles and responsibilities of various healthcare professionals.

- b. Work with individuals from other professions to maintain a climate of mutual respect and shared values.
- c. Use the knowledge of one's own role and those of other professions to appropriately assess and address the healthcare needs of the patients and populations served.
- d. Communicate with patients, families, communities, and other health professionals in a responsive and responsible manner that supports a team approach to the maintenance of health and the treatment of disease.
- e. Apply relationship-building values and the principles of team dynamics to perform effectively in different team roles to plan and deliver patient-/population-centered care that is safe, timely, efficient, effective, and equitable.

Simulation Workshops:

During the clinical year, students will be assigned to attend simulation workshops on the PA Day. Simulation-based training will provide guided learning experiences that replicate real-world clinical experiences and accelerate the development of expertise.

Case subject area, instructions, and objectives will be provided to students via Canvas.

STANDARDIZED PATIENT (SP) ENCOUNTERS

During a CB week, Standardized Patient (SP) encounter/s will take place. These encounters are **not** a part of the rotation course grade. However, these exercises serve as practice for the OSCEs (which will be graded and must be passed to progress to graduation.) It is mandatory to attend and participate in all SP encounters.

SP encounters will consist of 20-minute SP stations. The case scenario will be based on a common primary care disorder. Students will have 20 minutes with the SP to complete the history and physical examination. At the end of 20 minutes, the student will have 10 minutes to complete a post-encounter exercise. At the completion of the post-encounter exercise, the SP will provide feedback to the student. The student will then present the case to faculty virtually or in-person less than 5 minutes once completed. The faculty member will provide feedback to the student on his/her performance. The post-encounter exercises will include answering questions about the patient, giving differential diagnoses, interpreting labs/diagnostic studies, and other clinical interventions or management. The student will receive feedback from the faculty to whom the student presented the case.

CLINICAL ROTATION PROGRESSION

A student will officially pass a rotation only when:

- All components of the course have been completed and submitted.
- All graded components have received a passing grade, including a record of a passing Preceptor Evaluation and a passing End of Rotation (EOR) exam.
- The student has earned the minimally required final course score/grade* of 71.5 or higher necessary to receive at least a final course grade of "B" or higher.

*The final course grade, as described above, is a weighted, numerical value based on the scores for the preceptor evaluation, any written assignments, required documentation, professionalism, evaluations, and the rotation end of rotation (EOR) examination score. Points are deducted for requirements that are submitted late.

Please note, all graded components of a rotation must be passed to receive a passing grade for the rotation (see program policy), AND all components must be completed and submitted prior to finalization of grades submitted to Canvas. Remediation for EOR failures and the re-take policy are addressed below. Additional remediation of other components is at the discretion of the clinical coordinator. If **all** submissions and assignments have not been received and passed, you will receive an incomplete in Banner.

EXAM FAILURE

A student with a rotation written examination score <71.5 may have the opportunity to re-take their rotation specific End of Rotation (EOR) exam within two weeks of reviewing their initial examination performance with their clinical coordinator. The examination will be identical in length, format, and content covered, with new questions. Regardless of the passing score, the final EOR exam score will be recorded as 71.5. The highest final course grade for a rotation in which a re-test has been administered and passed is "B", regardless of the final calculated grade. A student's eligibility for remediation re-test examinations under this policy is limited to two rotations during the entire rotation-phase of the curriculum.

Students may fail a maximum of 2 EORs, including re-takes. A student has 2 re-take exams allowed during the clinical year and receiving a score of less than 71.5 on a 3rd could result in dismissal from the program due to poor academic performance.

REMEDIATION

Remediation is a process to address deficiencies of a student's knowledge, skills, or behavior to assist in achieving academic or professionalism competency(ies) and/or standards. The process allows the student the opportunity to demonstrate successful achievement of knowledge, skills, or behavior in a program course, clerkship, or competency. Depending on the circumstances for remediation, a student will be required to meet at least once with the course director and/or clinical director.

By participating in early intervention and remediation, students can improve their academic performance, build resilience, and strengthen the skills necessary for success in both the program and future clinical practice. Successful completion of **all** components of the clinical rotation, including submissions, assignments, activities, and evaluations (as listed in sections above) are mandatory to pass this clinical course. Remediation for these could include any or all of the following, resubmission of an assignment, participation in OSCE, SP, Skills training, or SIM, retake of an examination, completion of additional clinical hours, or repeat of a clinical rotation.

Remediation efforts and outcomes are documented in the student's academic file.

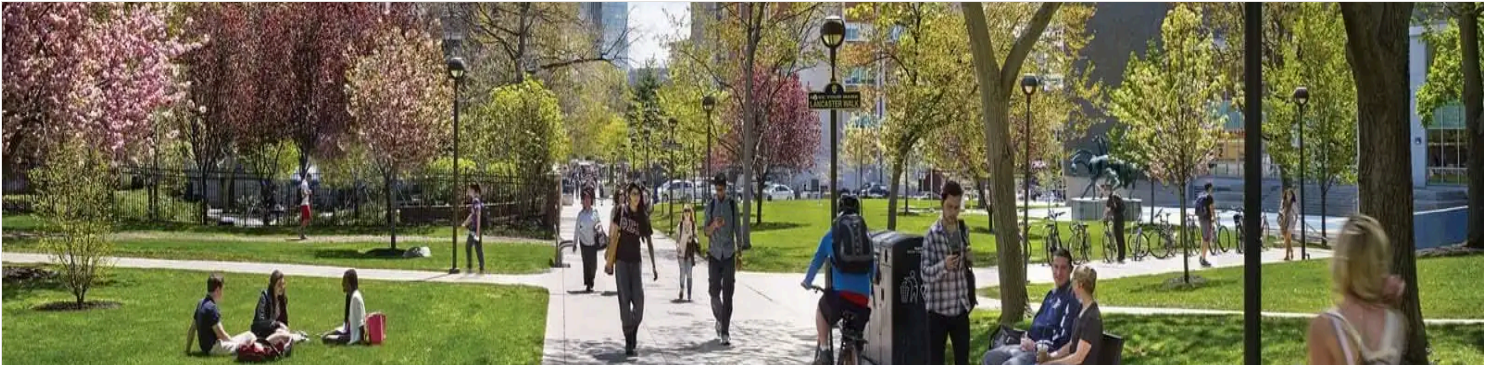
ROTATION FAILURE

Any student who fails a rotation will be required to repeat the rotation course after completing their remaining core rotations but before Primary Care Practicum (PCP). A student must successfully complete all core rotations prior to starting Primary Care Practicum.

Should a student fail two rotation courses, they will be removed from the current rotation cycle. The student will be required to take a one-credit, five-week remediation course which will include the student's critical assessment of their strengths and weaknesses, and a detailed plan for improving performance. After successful completion of this course, the student will return to the rotation cycle to complete any remaining, untaken rotations.

Subsequent additional failures of rotation courses during the remainder of the student's rotation phase could result in dismissal from the program.

Should a student fail the same rotation twice, the student will be considered for dismissal from the program.



Graduation Requirements & Program Summative Evaluations

SUMMATIVE ASSESSMENTS

Summative assessments are a mandatory component of PA education and must be completed within the last 4 months of a student's education. These assessments are used to evaluate a student's medical knowledge and clinical competencies and are utilized to determine a student's readiness for program graduation. These assessments will include an End of Curriculum (EOC) Exam, Standardized Patient Encounters/OSCEs, and Technical Skills Competency Assessments.

END OF CURRICULUM (EOC) EXAM

The EOC exam occurs at the end of the 8th core rotation, prior to the Primary Care Practicum course (PCP).

A Summative Examination will be administered via PAEA to assess the student's medical knowledge. The EOC is a computer-based evaluation consisting of a 300-question exam built using a blueprint and content area list developed by PA educators and national exam experts and required to be delivered in the final four months of the PA program.

This exam will be taken in-person using PAEA Software. It is the student's responsibility to ensure they possess a working device and charger for their examination. There are absolutely NO exceptions to this being an in-person exam as this is mandated by PAEA policy. Students with accommodations must work with Drexel University's ODR for accommodations. The exam is typically taken over 5 hours, however, PAEA notes that testing with time-based accommodations must occur over 2 days.

Like PAEA EORs, there are no group or individual reviews for this examination, however, some PAEA EOC resources may be found online at the PAEA site and on CANVAS. PAEA provides students with a scaled EOC score ranging from 1200-1800. Students who earn a score greater or equal to 1450 will have earned a passing score reflecting successful completion. The exam must result in a passing grade as a program completion requirement.

Per PAEA, if a student is unsuccessful on the examination's first administration, they will be required to complete the second form (i.e., a different version of the examination) no earlier than 60 days after their initial exam's administration (i.e., PAEA will not release the 2nd form until it's been at least 60 days from the initial test date). The scoring for that second administration is identical to the first.

OBJECTIVE STRUCTURED CLINICAL EXAMINATION (OSCE)

OSCEs will consist of four 25-minute Standardized Patient (SP) stations followed by interstation exercises. Each session will last 2.5 hours.

Students will have 15 minutes with the SP, followed by a 10-minute interstation exercise. Interstation exercises will include answering questions about the patient and/or their disease process and writing SOAP notes.

Students who do not achieve a passing grade will be retested at a designated retesting date in a similar format. Clinical cases may vary. Students who do not pass the second administration of the OSCE will return to campus and register (and pay) for a 1-credit pass/fail review course: PA 680 Summative Remediation. This course provides an intensive review of major topics covered in the didactic and clinical phase of the PA Program for any PA student who has not achieved a minimum passing grade on two administrations of the Summative Exam or OSCE.

During the last week of the course, the OSCE will be administered a third and final time. A third failure of the OSCE is grounds for dismissal from the PA Program.

As noted above, the final grade is comprised of three post-encounter question sections (30% of the final OSCE grade), three faculty assessments scored across encounters (45%), a SOAP note (15%), and the standardized patient's interpersonal and professional behavioral skills rating (10%), which is calculated as the average of all encounters.

Diagnostic Interpretation:

The student will be provided with two diagnostic studies - an ECG and a CXR and will be required to provide interpretation of each. A student will be required to interpret the ECG for any abnormalities, if any, and record rate, rhythm, and P and Q

wave abnormalities. For the chest X-ray, the student will be required to locate and identify landmarks and any abnormal findings, if any. A student should be able to assess/comment on the image's quality (exposure/penetration/rotation), demonstrate a structured approach to assessment (example ABCDEFG method where A: Airway, B: Breathing (lung fields), C: Circulation ex. heart size and position, D: Diaphragm, E: Everything else (bones, soft tissues), F: Foreign bodies, G: Gastric bubble), and recognize/identify any abnormal pathology. If there are no abnormal findings, then the student should state that it is a normal CXR with no abnormalities.

This section of testing offers remediation and reattempts until a passing level of performance is clearly demonstrated.

Technical Skills:

The procedural or technical skills component consists of 6 required technical skills assessed via rubrics. These skills are taken from clinical year course technical skills competencies. Testing will include a timed session to complete each procedural skill in a series as directed by the examiner and evaluated per a skills rubric which will be provided to the student prior.

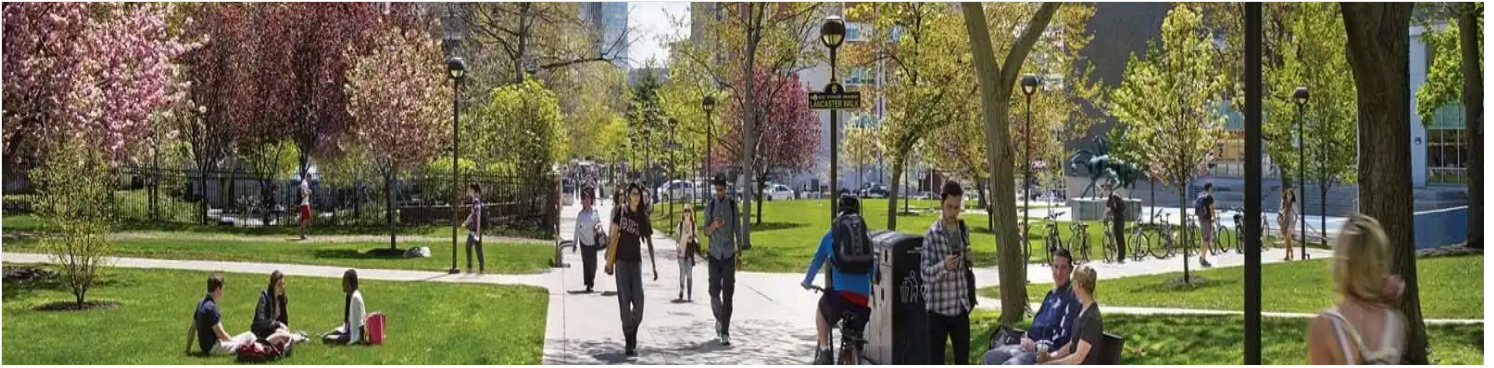
This section of testing offers remediation and reattempts until a passing level of performance is clearly demonstrated.

TECHNICAL SKILLS COMPETENCY ASSESSMENT

Summative testing for technical clinical skill competency will be completed on the following skills: Chest X-ray and ECG interpretation and performance of IM Injection, Sterile Technique for minor procedures, Sterile Gloving, Suture placement and removal, and wound dressing.

This testing will be broken into two sections. First, a timed session to complete each procedural skill in a series as directed by the examiner and evaluated per a skills rubric which will be provided to the student prior. In the second portion of the skills assessment, the student will be provided with an ECG and a CXR and required to provide interpretation of each. The student will be required to interpret the ECG for any abnormalities, if any, and record rate, rhythm, P and Q wave abnormalities. For the Chest X-Ray, the student will be required to locate and identify landmarks and any abnormal findings, if any. Student should be able to assess/comment on the image's quality (exposure/penetration/rotation), demonstrate a structured approach to assessment (example ABCDEFG method where A: Airway, B: Breathing (lung fields), C: Circulation ex. heart size and position, D: Diaphragm, E: Everything else (bones, soft tissues), F: Foreign bodies, G: Gastric bubble), and recognize/identify

any abnormal pathology. If there are no abnormal findings, then the student should state that it is a normal CXR with no abnormalities.



CNHP Clinical Policies & Requirements

CLINICAL ROTATION/PRACTICUM GUIDELINES

All students must meet the compliance requirements* of Drexel University and the assigned clinical site prior to starting clinical rotations and primary care practicum and to be fully compliant for clinical/ practicum rotations.

All students are expected to update their compliance requirements by the required due date. A student will be considered out of compliance if their requirements expire at any time during the clinical year. It is the student's responsibility to make sure all compliance requirements and deadlines are met. Failure to do so will delay progression in the program.

Please refer to CNHP Compliance website at <http://www.drexel.edu/cnhp/about/compliance/> for all specific information. If you have any questions, please email cnhpcompliance@drexel.edu.

**Requirements are subject to change as requested by our clinical affiliations.*

Students are required to have comprehensive medical insurance during the academic and clinical year. Students should carry their insurance card with them to each clinical/practicum experience. **If the student is injured or has an exposure and requires medical assistance during the clinical/practicum hours, they will utilize their personal medical insurance.** Please also refer to "Clinical exposure/injury guidelines" below.

BACKGROUND CLEARANCES/SCREENINGS

These screenings are completed yearly and students are expected to have a clear background report.

1. Child Abuse Clearance Check

2. Criminal Background Check

3. FBI Fingerprint Result

The student must contact the Vice President of Clinical Operations - Drexel Health if there is a change in the background report, child abuse report, FBI fingerprint or state criminal background check. The Vice President of Clinical Operations - Drexel Health will evaluate these changes and their impact on attending clinical rotations and primary care practicums. The University cannot guarantee clinical placements to any student with a positive background report. Students with charges that can be expunged should immediately begin the process.

Failure to report any changes in background clearances and screenings will result in disciplinary actions, up to and including dismissal from the program.

ADDITIONAL REQUIREMENTS

Clinical/practicum sites may have additional requirements that will need to be completed. Please consult with the clinical/practicum faculty member or preceptor for any additional requirements.

CLINICAL EXPOSURE/INJURY GUIDELINES

These guidelines are to be followed when a student has been exposed to an occupational hazard or is injured in the clinical/practicum setting.

A significant exposure is defined as:

A needle stick or cut caused by a needle or sharp that was actually or potentially contaminated with blood or body fluids; a mucous membrane (i.e., splash to the eye or mouth) exposure to blood or body fluids; or a cutaneous exposure involving large amounts of blood or prolonged contact with blood - especially when the exposed skin was chapped abraded or affected with dermatitis.

Once the student incurs an exposure or an injury:

The student should immediately notify the site supervisor and his/her Clinical/Practicum Faculty or preceptor of the incident.

If an exposure:

- The student and instructor should follow the healthcare agency's "Bloodborne Pathogen Exposure Control Guidelines" (this includes washing the area of

exposure, informing patient, obtaining consents for blood draw of the source patient, etc.).

- Report immediately to the facility's Emergency Department, if applicable, or the closest Emergency Department, if not, for evaluation of exposure. The goal is to have prompt evaluation in the event that you are started on HIV post-exposure prophylaxis.
- The student must present his/her health insurance card for applicable billing charges.
- For all exposures or injuries, all follow-up care should occur with the student's primary care provider (PCP). If the student obtained care at another site, it is recommended that the student request a copy of the initial treatment plan and source point results to share with the student's primary care provider (PCP).

An incident report must be completed and submitted per clinical/practicum site guidelines. A copy of this incident form and policy can also be found on the main PA Cohort Canvas shell. Once completed the Clinical/Practicum Coordinator will submit a copy of the incident report to the Vice President of Clinical Operations - Drexel Health.

CLINICAL COMMUNICABLE DISEASE GUIDELINES

Faculty and students must provide services with respect for human dignity and the uniqueness of the client, unrestricted by considerations of social or economic status, personal attributes or the nature of health problems.

Students with a communicable disease may not pose a health risk to other students in an academic setting; however, the CDC guidelines must be followed in the clinical/practicum setting. Students and faculty must follow the rules of confidentiality related to communicable diseases.

NOTE: Due to possible exposure to infectious diseases in the clinical/practicum areas, it is important for the student to notify the course chair of any chronic illnesses or if health status has changed recently (i.e. pregnancy) that may require further consideration when making clinical/practicum assignments.

If an accidental clinical exposure or injury occurs, faculty and students should follow the Clinical/Practicum Exposure/Injury guidelines.

An incident report should be completed and submitted per clinical/practicum site guidelines. The student and clinical/practicum instructor should submit documentation of the injury or illness to the course chair.

MEDICAL CLEARANCE TO ATTEND CLINICAL ROTATIONS

Students who are ill, hospitalized, or incapacitated in any way that affects their ability to safely and satisfactorily perform their duties in a clinical/practicum setting must provide official medical clearance that states their ability to return to clinical/practicum without restrictions. A hard copy of the medical clearance must be submitted to the Program Director

Any student seeking accommodations for a documented disability must contact the [Office of Disability Resources](#), 215.895.1401 (V), or 215.895.2299 (TTY), disability@drexel.edu.

Students taking prescribed medications should be aware of the effects of these medications on alertness, judgment, and the ability to meet all technical standards. Students should not attend clinical/practicum if there is impairment of ability to safely provide care to assigned patients.

The program reserves the right to request medical clearance.

POLICY FOR USE OF MOBILE DEVICES IN CLINICAL/PRACTICUM

- Students must utilize a password-protected mobile device to ensure that personal information is not accessible in the event that the device is lost or stolen.
- No identifiable patient information may be placed on the mobile device. No texting while on the clinical unit.
- No photos may be taken while in clinical/practicum
- Accessing the Internet is only permitted to obtain information related to clinical for the purpose of supporting clinical learning and patient teaching.
- As with all clinical equipment, the mobile device may act as a means to transfer germs. Please keep your device clean.
- Phones must be on vibrate or silent mode. No personal calls should be made or received while in clinical on the unit. Exceptions can be made with faculty approval in extreme extenuating circumstances.

Guidance Regarding Methods for De-identification of Protected Health Information in Accordance with the Health Insurance Portability and Accountability Act (HIPAA)

Privacy Rule

APPENDIX A: CORE COMPETENCIES FOR THE NEW PA GRADUATE

PAEA September 2019

Adopted by DU PA Program January 2024

1. Patient-Centered Practice Knowledge Competencies:

- 1.1 Recognize normal and abnormal health states
- 1.2 Discern among acute, chronic, and emerging disease states
- 1.3 Elicit and understand the stories of individual patients and apply the context of their lives (including environmental influences, cultural norms, socioeconomic factors, and beliefs) when determining healthy versus ill patients
- 1.4 Develop meaningful, therapeutic relationships with patients and their families (PA Comp. PC, FMM)
- 1.5 Partner with patients to address issues of ongoing signs, symptoms, or health concerns that remain over time without clear diagnosis despite evaluation and treatment (PA Comp. PC)

2. Society and Population Health Competencies:

- 2.1 Recognize the cultural norms, needs, influences, and socioeconomic, environmental, and other population-level determinants affecting the health of the individual and community being served
- 2.2 Recognize the potential impacts of the community, biology, and genetics on patients and incorporate them into decisions of care
- 2.3 Demonstrate accountability and responsibility for removing barriers to health
- 2.4 Understand the role of structural disparities in causing illness
- 2.5 Engage members of the health care team in the surveillance of community resources to sustain and improve health
- 2.6 Engage the health care team in determining the adequacy of community resources
- 2.7 Reflect on personal and professional limitations in providing care
- 2.8 Exercise cultural humility
- 2.9 Elicit and hear the story of the individual and apply the context of the individual's life (including environmental influences, culture, and disease) when determining healthy versus ill patients
- 2.10 Understand and apply the fundamental principles of epidemiology
- 2.11 Recognize the value of the work of monitoring and reporting for quality improvement
- 2.12 Use appropriate literature to make evidence-based decisions on patient care

3. Health Literacy and Communication Competencies:

- 3.1 Establish meaningful, therapeutic relationships with patients and families that allow for a deeper connection and create space for exploration of the patients' needs and goals to deliver culturally competent care (PA Comp. PC, FMM)

- 3.2 Interpret information so that patients can understand and make meaning out of the information conveyed to them
- 3.3 Recognize the need for and governing mandates that ensure patients have access to interpreters and appropriate resources when barriers to communication arise
- 3.4 Demonstrate insight and understanding about emotions and human responses to emotions that allow one to develop and manage interpersonal interactions (PCRS 4.7)
- 3.5 Communicate effectively with patients, families, and the public
- 3.6 Provide effective, equitable, understandable, and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy, and other communication needs (CLAS)
- 3.7 Organize and communicate information with patients, families, community members, and health team members in a form that is understandable, avoiding discipline-specific terminology when possible and checking to ensure understanding (IPEC CC2)

4. Interprofessional Collaborative Practice and Leadership Competencies:

- 4.1 Articulate one's role and responsibilities to patients, families, communities, and other professionals (IPEC RR1)
- 4.2 Redirect the focus of the health care team to the needs of the patient
- 4.3 Assure patients that they are being heard
- 4.4 Ensure patients' needs are the focus over self and others
- 4.5 Contribute to the creation, dissemination, application, and translation of new health care knowledge and practices (PCRS 2.6)
- 4.6 Recognize when referrals are needed and make them to the appropriate health care provider
- 4.7 Coordinate care
- 4.8 Develop relationships and effectively communicate with physicians, other health professionals, and health care teams (PA Comp. Comm)
- 4.9 Use the full scope of knowledge, skills, and abilities of available health professionals to provide care that is safe, timely, efficient, effective, and equitable (IPEC RR5)
- 4.10 Use unique and complementary abilities of all members of the team to optimize health and patient care (IPEC RR9)
- 4.11 Engage diverse professionals who complement one's own professional expertise, as well as associated resources, to develop strategies to meet specific health and health care needs of patients and populations (IPEC RR3)
- 4.12 Describe how professionals in health and other fields can collaborate and integrate clinical care and public health interventions to optimize population health (IPEC RR10)

5. Professional and Legal Aspects of Health Care Competencies:

- 5.1 Articulate standard of care practice
- 5.2 Admit mistakes and errors
- 5.3 Participate in difficult conversations with patients and colleagues
- 5.4 Recognize one's limits and establish healthy boundaries to support healthy partnerships

- 5.5 Demonstrate respect for the dignity and privacy of patients while maintaining confidentiality in the delivery of team-based care (IPEC VE2)
- 5.6 Demonstrate responsiveness to patient needs that supersedes self-interest (PCRS 5.2)
- 5.7 Demonstrate accountability to patients, society, and the profession (PCRS 5.4)
- 5.8 Exhibit an understanding of the regulatory environment

6. Health Care Finance and Systems Competencies:

- 6.1 Recognize that health care is a business
- 6.2 Articulate individual providers' value-add to the health care team in term of cost
- 6.3 Appreciate the value of the collaborative physician/PA relationship

Appendix B

Course Locations

“The PA profession defines the specific knowledge, skills, and attitudes required, and provide educational experiences as needed in order for PAs to acquire and demonstrate these competencies.” (Competencies for the PA Profession revised 2012). The full description of PA Competencies can be found on the AAPA website: [Competencies for the PA Profession](#)

The Program meets the listed competencies through the following courses:

- **Medical Knowledge:** Clinical Anatomy, Clinical Assessment, Patient Communications, Principals of Medical Science I-III, Clinical Medicine I-III, Pharmacology I-III, Clinical Skills I-III, Biopsychosocial Issues in Patient Care, and Evidence Based Medicine for PAs, Clinical rotations and Primary Care Practicum
- **Interpersonal and Communication Skills:** Clinical Assessment, Patient Communications, Ethical Issues for PA Practice, PA Practice, Clinical Skills I-III, Biopsychosocial Issues in Patient Care, Health Policy for PA Practice, Rotations, Primary Care Practicum
- **Patient Care:** Clinical Assessment, Patient Communications, Ethical Issues for PA Practice, PA Practice, Principals of Medical Science I-III, Clinical Medicine I-III, Pharmacology I-III, Clinical Skills I-III, Biopsychosocial Issues in Patient Care, Evidence Based Medicine for PAs, Health Policy for Practice, Clinical rotations and Primary Care Practicum
- **Professionalism:** Clinical Assessment, Patient Communications, Ethical Issues for PA Practice, PA Practice, Clinical Skills I-III, Biopsychosocial Issues in Patient Care, Health Policy for Practice, Graduate Project I-II, Clinical rotations and Primary Care Practicum
- **Practice Based Learning and Improvement:** Clinical Assessment, Patient Communications, Clinical Medicine I-III, Clinical Skills I-III, Biopsychosocial Issues in Patient Care, Evidence Based Medicine for PAs, Graduate Projects I-II, Clinical rotations and Primary Care Practicum
- **System Based Practice:** Clinical Skills I-III, Epidemiology for Practice and Prevention, PA Practice, Health Policy for PA Practice, Graduate Projects I-II, Clinical rotations, and Primary Care Practicum

APPENDIX C: FUNCTIONS AND TASKS OF GRADUATES

The Drexel PA graduate will be able to provide health care services with physician collaboration in a range of health care settings, from hospital based to ambulatory, to a variety of patients including infants to geriatrics, with health problems of an emergent, acute or chronic nature. The role of the PA Graduate includes:

1. Data Collection

- a. Perform a complete history and physical examination
- b. Perform a directed history and physical examination
- c. Order and/or perform appropriate diagnostic studies
- d. Review the medical literature

2. Data Synthesis

- a. Synthesize data from the patient history, physical examination, diagnostic studies and medical literature
- b. Make an assessment of the patient's health problem(s) and formulate an appropriate management plan
- c. Record data in the patient's medical record and prepare verbal and written case presentations

3. Intervention

- a. Implement the management plan, including drug and non-drug therapy
- b. Recommend appropriate referral to other practitioners and community resources
- c. Perform clinical skills such as assisting in surgery, suturing and casting

4. Patient Education

- a. Provide education and counseling to patients about symptoms and signs of their illnesses, the rationale for performing diagnostic studies and procedures, the meaning of the diagnosis/es, the goals and effects of therapy, prognosis and health promotion
- b. Evaluate the psychosocial aspects of the patients' health and provide appropriate counseling and/or referral for counseling beyond the PA's expertise

5. Professional Role

- a. Maintain the ethical code of the PA profession, with respect for the diversity of patient values and beliefs

- b. Develop skills for life-long learning, including appropriate use of the medical literature
- c. Practice collegially with other health team professionals

6. Technical Procedures Taught in the Didactic and Clinical Years

- a. Physical examination – complete and directed including pelvic and breast exams
- b. Clinical skills – bandaging and wound care, splinting/joint immobilization, casting, suturing, suture removal, wound taping wound stapling; venipuncture, intramuscular, subcutaneous, intradermal injections, IV line placement, , urinary catheter insertion, endotracheal intubation, surgical preparation techniques including scrubbing, gowning, gloving, passing of surgical instruments; incision and drainage of abscesses; performing digital blocks; conducting 12-lead EKGs, Administration of local anesthesia, aseptic technique, obtaining cultures (cervical, nasopharyngeal, urine, wound), cerumen impaction removal, developmental screenings, assessing fetal heart tones, finger sticks, fluorescein stains, hemoccult testing (stool), nebulizer treatment, pap smears, application of skin adhesives, preparing sterile field, surgical assisting
- c. As permitted – *diagnostic testing and clinical procedures*: urinalysis, urine pregnancy tests, gram stain, wet mounts, surgical preparation of patient, cardio-pulmonary resuscitation, administration of IV fluids, hemoglobin and/or hematocrit, peripheral blood smears, plotting growth charts, administration of routine immunizations, microscopic evaluation of cervical mucus, assist in deliveries, episiotomy, episiotomy repair, anterior nasal packing, NG Tube placement, *Specimen collection*: ABGs, culture/sensitivity of blood, sputum, stool, urethral, rectal, surgical specimen; heel stick.
- d. Possible under direct supervision, and with assistance as needed: *diagnostic testing and clinical procedures*: thoracentesis, joint aspiration, arterial puncture (other than radial artery), removal of non-penetrating ocular foreign bodies, central venous cannulation, Swan-Ganz catheter insertion, tube thoracostomy, endotracheal intubation, paracentesis, wound/ulcer debridement, arterial line placement, central line placement, chest tube placement, intubation, lumbar puncture, closed joint reduction, closure of deep lacerations, posterior nasal packing.

Appendix D

TECHNICAL STANDARDS FOR ADMISSION, ACADEMIC PROGRESSION, AND GRADUATION

In keeping with the goals of the PA Program, the highest priority is placed upon developing graduates who are competent, caring PAs possessing the skills of life-long learning needed to incorporate new knowledge and methods into their practices and to adapt to a changing medical environment. The faculty has determined that certain technical standards are requisite for admission, progression, and graduation from the PA Program.

An individual must be able to independently, with or without reasonable accommodation, meet the following technical standards of general abilities and those specifically of observation; communication; motor; intellectual, conceptual, integrative, and quantitative abilities; as well as essential behavioral and social attributes. Individuals unable to resolve deficiencies in these technical standards, with or without reasonable accommodation, are counseled to pursue alternate careers. Should a student request an accommodation meet the technical standards based on a disability, the student will be referred to the [Office of Disability Resources](#).

General abilities: The student is expected to possess functional use of the senses of vision, touch, hearing, taste, and smell so that data received by the senses may be integrated, analyzed, and synthesized in a consistent and accurate manner. A student must also possess the ability to perceive pain, pressure, temperature, position, vibration, position equilibrium, and movement that are important to the student's ability to gather significant information needed to effectively evaluate patients.

Observational Ability: The student must have sufficient capacity to accurately observe and participate in the lecture hall, the laboratory, and with patients at a distance and close at hand, including non-verbal and verbal signals, to assess health and illness alterations in the outpatient and inpatient clinical settings. Inherent in the observational process is the use of the senses to elicit information through procedures regularly required in physical examination, such as inspection, palpation, percussion, and auscultation.

Communication Ability: The student must communicate effectively verbally and non-verbally to elicit information; describe changes in mood, activity, posture; and perceive non-verbal communications from patients and others. Each student must have the ability to read and write, comprehend and speak the English language to facilitate communication with patients, their family members, and other professionals in health

care settings where written medical records, verbal presentations, and patient counseling and instruction are integral to effective medical

practice and patient care. The student must communicate effectively verbally and in writing with instructors and other students in the classroom setting, as well.

Motor Ability: The student must be able to perform gross and fine motor movements with sufficient coordination needed to perform complete physical examinations utilizing the techniques of inspection, palpation, percussion, and auscultation, and other diagnostic maneuvers. A student must develop the psychomotor skills reasonably needed to perform or assist with procedures, treatments, administration of medication, management and operation of diagnostic and therapeutic medical equipment used in the general and emergent care of patients required in practice as a PA. The student must be able to maintain consciousness and equilibrium; have sufficient levels of postural control, neuromuscular control, and eye-to-hand coordination; and to possess the physical and mental stamina to meet the demands associated with extended periods of sitting, standing, moving, and physical exertion required for satisfactory performance in the clinical and classroom settings.

Intellectual, Conceptual, Integrative, and Quantitative Abilities: The student must be able to develop and refine problem-solving skills that are crucial to practice as a PA. Problem solving involves the abilities to comprehend three-dimensional relationships and understand the spatial relationships of structures; to measure, calculate, reason, analyze, and synthesize objective and subjective data; and to make decisions that reflect consistent and thoughtful deliberation and sound clinical judgment. A student must have the capacity to read and comprehend medical literature. Each student must demonstrate mastery of these skills and the ability to incorporate new information from peers, teachers, and the medical literature to formulate sound judgment in patient assessment and diagnostic and therapeutic planning.

Behavioral and Social Attributes: Flexibility, compassion, integrity, motivation, effective interpersonal skills, and concern for others are personal attributes required of those in PA practice. Personal comfort and acceptance of the role of a dependent practitioner functioning under supervision is essential for training and practice as a PA. The student must possess the emotional health required for full utilization of the student's intellectual abilities; the exercise of good judgment; the prompt completion of all responsibilities in the classroom setting, as well as those in the clinical setting attendant to the diagnosis and care of patients; and the development of mature, sensitive, and effective relationships with

patients and other members of the health care team. Each student must have the emotional stability required to exercise stable, sound judgment and to complete assessment and interventional activities. The ability to establish rapport and maintain sensitive, interpersonal relationships with individuals, families, and groups from a variety of social, emotional, cultural and intellectual backgrounds is critical for practice as a PA. The student must be able to tolerate physically taxing loads and still function effectively under stress; adapt to changing environments; display flexibility; graciously accept constructive criticism; manage difficult interpersonal relationships during training; and learn to function cooperatively and efficiently in the face of uncertainties inherent in clinical practice.

In compliance with Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act of 1990, and applicable federal and state laws, Drexel University ensures people with disabilities will have an equal opportunity to participate in its programs and activities.

Members and guests of the Drexel community who have a disability need to register with the Office of Disability Resources (ODR), if requesting auxiliary aids, accommodations, and services to participate in Drexel University's programs. All requests for reasonable and appropriate auxiliary aids, academic adjustments, and services will be considered on a case-by-case basis and in a timely fashion.