



UNIVERSITY OF BRIDGEPORT
PHYSICIAN ASSISTANT INSTITUTE

STUDENT HANDBOOK

ACADEMIC YEAR: 2015-2016

Every effort is made to ensure the accuracy of the information contained in this Student Handbook, but the Physician Assistant Institute reserves the right to make changes without prior notice. The most current Handbook will be maintained on the University of Bridgeport website.

Table of Contents

University of Bridgeport Mission Statement	4
University of Bridgeport Physician Assistant Institute Mission Statement.....	4
Program Goals	4
Program Welcome, Philosophy, Plan of Study.....	5
Student Handbook Overview	5
Competencies for the Physician Assistant Profession	6-9
Academic Progress and Graduation.....	10-14
Policy on Harassment, Discrimination, Sexual Assault and Hate Crimes.....	14
Leave of Absence.....	15
Policy Statement on Religious Observance	15-16
Housing	16
Security and Personal Alarm Locator (PAL).....	16
Student Records	16
Disability Resources and Services	16
Student Health Services	17
Student Health Insurance	17
Counseling Services.....	17
Health Screening, Background Check, and Vaccination Requirements.....	17
Health Care While on Clinical Clerkships (Rotations).....	18
Attendance/Participation on Clinical Clerkships (Rotations).....	18
Clerkship Grade	18
Vaccination and PPD Requirements.....	19-20
Universal Precautions	20
Physician Assistant Program Policies.....	21-28
Physician Assistant Technical Standards.....	29-30
Physician Assistant Institute - General Education Objectives.....	31-33
Physician Assistant Institute - Specific Competencies	34-37
Physician Assistant Institute - Equipment List	38
Physician Assistant Institute - Tuition, Fees and Refund Policy	38
Professional Organizations and Student Society	38
Curriculum	39-44
Physician Assistant Institute - General Office Information.....	45
Appendix A - Remediation Policy	46-47
Appendix B - Acknowledgement of Student Handbook	48

University of Bridgeport Mission Statement



The University of Bridgeport offers career-oriented undergraduate, graduate and professional degrees and programs for people seeking *personal and professional growth*. *The University promotes academic excellence, personal responsibility, and commitment to service.* Distinctive curricula in an international, culturally diverse supportive learning environment prepare graduates for life and leadership in an increasingly interconnected world. The University is independent and non-sectarian.

—Adopted by the Board of Trustees on April 23, 2004

University of Bridgeport - Physician Assistant Institute Mission Statement

The mission of the University of Bridgeport Physician Assistant Institute is to develop clinicians with: dedication to patients; commitment to life-long education; respect for the profession; a global perspective on health care; volunteerism as a professional core value and an integrative approach to practice for the benefit of all patients. This mission to educate the physician assistant is reflected in our motto: *Adivare, Mederi, Communiter; TO HELP, TO HEAL, TOGETHER.*

Program Goals

In the design of the curriculum and clinical experiences it is the goal of the Physician Assistant Institute:

- To develop motivated, high quality graduates dedicated to self- discovery and self-assessment and committed to the application of critical thinking and analysis of research in order to utilize best practices in patient care.
- To develop highly competent physician assistants as evidenced by the ability to transfer knowledge from the classroom and rotation experience to graduate clinical performance through:
 - Successfully passing the national certifying examination.
 - Acquisition and application of the basic and clinical sciences.
 - Understanding the diversity amongst patients, ideas, perceptions of care, and culture while respecting the values associated with their ethnicity, sexual orientation and background.
 - Developing an appreciation for patient preferences and the diversity of the treatments and healers they seek.
 - The ability to implement effective communication skills to colleagues, patients and families they encounter to improve patient care and outcome.
- To develop a solid professional value system, committed to life-long learning, professional development and advocacy for the profession.

It is the intention of the University of Bridgeport, Faculty of Health Science, and the Physician Assistant Institute that we will endeavor to communicate these goals through our teaching, role modeling and clinical practice.

Program Welcome

The Physician Assistant Institute at the University of Bridgeport is housed within the Division of Health Sciences. The University of Bridgeport, our sponsoring institution was founded in 1927. The Physician Assistant Institute (PAI) is committed to the education of its students so that they will have the required academic and technical skills needed in order to become outstanding physician assistants whose practice is patient centered care. Students will be admitted to the program upon successful completion of an undergraduate degree at an accredited institution as well as meeting the program prerequisites.

Program Philosophy

The University of Bridgeport Physician Assistant Institute is committed to the development of highly qualified physician assistants who will serve as tomorrow's leaders in the delivery of patient centered health care, educational and professional service. An understanding of the importance of integrated medicine and an appreciation of global health issues will be woven into all phases of our curriculum.

Plan of Study

The physician assistant curriculum is comprised of a rigorous 28 month Master of Science Program. The goals and objectives of our program are guided by the criteria set forth in the standards and guidelines for an accredited educational program for the physician assistant as established by the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA). The first four terms are made up of primarily classroom instruction. The intensity of our didactic curriculum is matched by the rigor of the clinical phase of the program. The didactic phase of our curriculum provides a comprehensive background in the basic and clinical sciences which includes courses in human anatomy and physiology, pathophysiology, microbiology, genetics, pharmacology, history taking and physical examination, clinical medicine, procedural skills, medical ethics, global medicine, integrative medicine and patient education and counseling, surgery, information literacy, and PA profession history and professional issues. Course content is presented through traditional lecture, blended instruction, case based and hands on skills labs. The curriculum is overseen by core faculty and may include University of Bridgeport basic science and health professional faculty, practicing physician assistants, physicians and providers who have the expertise in their respective specialty. The clinical year exposes the student to the areas of family practice, internal medicine, pediatrics, obstetrics and gynecology, emergency medicine, general surgery and psychiatry. The student is also given the opportunity to choose one elective in an area of interest. The didactic and clinical phases of the curriculum are designed to enable the student to acquire proficiency in the competencies of the physician assistant.

Student Handbook Overview

This handbook is a reference for the University of Bridgeport Physician Assistant Institute students and others seeking information about the program. It contains information regarding admissions, financial aid, curriculum, academic and professional advancement, progress and promotions, student health services, academic and personal counseling. It is the responsibility of every physician assistant student to read, understand and abide by the policies contained in this handbook, as well as the rules and regulations of the University of Bridgeport as set forth in the Key to UB Student Handbook (available on the University website):

<http://www.bridgeport.edu/life/servicesforstudents/key.aspx>

This handbook is reviewed annually. The most current handbook is maintained on the University website:

<http://www.bridgeport.edu/life/student-services/key-ub-student-handbook/>.

The University reserves the right to change and amend all manuals as needed.

Competencies for the Physician Assistant Profession

Preamble

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

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

Introduction

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

The clinical role of PAs includes primary and specialty care in medical and surgical practice settings. Professional competencies¹ for physician assistants include the effective and appropriate application of medical knowledge, interpersonal and communication skills, patient care, professionalism, practice-based learning and improvement, systems-based practice, as well as an unwavering commitment to continual learning, professional growth and the physician-PA team, for the benefit of patients and the larger community being served. These competencies demonstrated within the scope of practice, whether medical or surgical, for each individual physician assistant as that scope is defined by the supervising physician and appropriate to the practice setting.

¹In 1999, the Accreditation Council for Graduation Medical Education (ACGME) endorsed a list of general competencies for medical residents. NCCPA's Eligibility Committee, with substantial input from representatives of AAPA, APAP and ARC-PA, has modified the ACGME's list for physician assistant practice, drawing from several other resources, including the work of Drs. Epstein and Hundert; research conducted by AAPA's EVP/CEO, Dr. Steve Crane; and NCCPA's own examination content blueprint.

Physician Assistant Competencies

Vers. 3.5 (3/22/05)

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

MEDICAL KNOWLEDGE

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

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

INTERPERSONAL & COMMUNICATION SKILLS

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

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

PATIENT CARE

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

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

PROFESSIONALISM

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

- understanding of legal and regulatory requirements, as well as the appropriate role of the physician assistant
- professional relationships with physician supervisors and other health care providers
- respect, compassion, and integrity
- responsiveness to the needs of patients and society
- accountability to patients, society, and the profession
- commitment to excellence and on-going professional development
- commitment to ethical principles pertaining to provision or withholding of clinical care, confidentiality of patient information, informed consent, and business practices
- sensitivity and responsiveness to patients' culture, age, gender, and disabilities
- self-reflection, critical curiosity and initiative

PRACTICE-BASED LEARNING AND IMPROVEMENT

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

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

SYSTEMS-BASED PRACTICE

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

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

The competencies for the physician assistant profession are available at www.nccpa.net.

Academic Progress and Graduation

Student Status

In Good Standing

To maintain full graduate status, the student must achieve a minimum GPA of 3.00 (based on 4.00) in his or her graduate study.

Academic Probation

Graduate students must have a 3.00 cumulative GPA to be eligible to graduate. Graduate students who receive below the required 3.00 GPA for any term will be placed on academic probation and will receive written notification of this status. At this point it is the student's responsibility to meet with his or her advisor. In order to be removed from academic probation, the student will need to achieve the requisite GPA of 3.00 in all subsequent terms. See Appendix A-Remediation Policy for details.

Grading Scale

(There is no rounding of grades)

The letter grade system for graduate courses is as follows:

Grade	Percentage	Quality Points
A	90% +	4.00
B+	85-89	3.50
B	80-84	3.00
C+	75-79	2.50
C	70-74	2.00
D	65-69	1.00 {Considered Failing}
F	< 65%	0.00
S/U	-	Satisfactory (S) and Unsatisfactory (U) courses are not calculated in the GPA
I	-	For Incomplete Coursework
W	-	Withdrawal from Course

Academic Policies

Performance in didactic courses will follow the letter grade scale outlined above.

Performance on clinical rotations will use the same scale as the didactic courses. Grades are assigned by program faculty and the student is not permitted to contact the preceptor for any reason regarding the grade.

Students are responsible for monitoring their own academic progress and contacting their faculty and/or academic advisor upon any sign of academic difficulty.

Academic Integrity Policy

Students have the responsibility to be honest and to conduct themselves in an ethical manner while pursuing academic studies. Students have the right to be treated by faculty in a fair and conscientious manner in accordance with the ethical standards generally recognized within the academic community (as well as those recognized within the profession). Should a student be accused of a breach of academic integrity or have questions regarding faculty responsibilities, procedural safeguards including provisions of due process have been designed to protect student rights. ***It is the student's responsibility to familiarize himself or herself with and adhere to the standards set forth in the policies on cheating and plagiarism in chapters 2 and 5 of the Key to UB Student Handbook*** <http://www.bridgeport.edu/life/student-services/key-ub-student-handbook/> ***and as described below in student obligations.***

Student Obligations

A student has an obligation to exhibit honesty and to respect the ethical standards of the profession in carrying out his or her academic assignments. Without limiting the application of this principle, a student may be found to have violated this obligation if he or she:

- Refers during an academic evaluation to materials or sources, or employs devices, not authorized by the faculty member.
- Provides assistance during an academic evaluation to another person in a manner not authorized by the faculty member.
- Receives assistance during an academic evaluation from another person in a manner not authorized by the faculty member.
- Engages in unauthorized possession, buying, selling, obtaining, or use of a copy of any materials intended to be used as an instrument of academic evaluation in advance of its administration.
- Acts as a substitute for another person in any academic evaluation process.
- Utilizes a substitute in any academic evaluation proceeding.
- Practices any form of deceit in an academic evaluation proceeding.
- Depends on the aid of others in a manner expressly prohibited by the faculty member, in the research, preparation, creation, writing, performing, or publication of work to be submitted for academic credit or evaluation.
- Provides aid to another person, knowing such aid is expressly prohibited by the faculty member, in the research, preparation, creation, writing, performing, or publication of work to be submitted for academic credit or evaluation.
- Presents as one's own, for academic evaluation, the ideas, representations, or words of another person or persons without customary and proper acknowledgment of sources.
- Submits the work of another person in a manner which represents the work to be one's own.
- Knowingly permits one's work to be submitted by another person without the faculty member's authorization.
- Attempts to influence or change one's academic evaluation or record for reasons other than achievement or merit.
- Indulges, during a class (or examination) session in which one is a student, in conduct which is so disruptive as to infringe upon the rights of the faculty member or fellow students.
- Fails to cooperate, if called upon, in the investigation or disposition of any allegation of dishonesty pertaining to a fellow student.
- Violates the Guidelines for Ethical Conduct for the Physician Assistant Profession as described by the American Association of Physician Assistants (AAPA).
http://www.aapa.org/your_pa_career/becoming_a_pa/resources/item.aspx?id=1518&terms=Ethical%20Conduct

Integrity Agreement

Students will be required to sign the following Integrity Agreement on assessments and exam reviews:

I understand that it is the responsibility of every member of the Physician Assistant Institute to uphold and maintain the University of Bridgeport Physician Assistant Institute Academic Integrity Policy.

As a student of the Institute, I certify that I have neither given nor received unauthorized aid on this exam/assignment. I further understand that any instance or violation of academic integrity is referred to the Progress and Promotions Committee of the Institute and recommended disposition may be sanction or dismissal.

Continuing to take this exam designates acceptance of the above agreement.

Exam Policy

Exam questions will come from lectures, assigned readings, video, web activities and handouts.

- Exam dates and times are set by faculty and included in course information.
- Instructors may change an exam date if necessary to facilitate the course or module.
- Students may miss an exam only in an emergency situation.
- Exams will be allowed to be taken 'early or late' in an emergency setting ONLY.
- The student is responsible for contacting the instructor ASAP regarding missing an exam and the reason. Documentation of the emergency may be requested.
- The makeup exam date, time and format will be decided by the instructor.

NOTE: If a student will miss an exam due to personal reasons it will be an unexcused absence. The exam will be given at a date and time set by the instructor. The exam will be in a more difficult format than the scheduled exam and will include short answer and/or essay questions. There will be a loss of 5 % of the total remediation exam grade as well. Exams given early for an unexcused absence cannot be remediated.

- During an exam students will leave all belongings along the side of the classroom.
- Cell phones will be off and in backpacks or purses at the side of the room.
- Students will sit in every other seat when possible.
- There will be no verbal questions during exams.
- If a student has a question they should write it in the comments section in Exam Master.
- When a student leaves the room for any reason, the exam will be considered finished and turned in.
- As soon as a student is finished with the exam, s/he will turn all papers in to the instructor and quietly leave the room and leave the hallway outside of the room.
- It is considered unprofessional behavior to approach the instructor regarding the exam or about exam questions until after the exam grades have been posted.
- Arguing an exam question may be considered as unprofessional behavior. To challenge an exam question:
 - a. A student may submit a challenge in writing to the instructor within two weeks of the exam.
 - b. Challenges are NOT an explanation of your thinking process; it is documented proof that the exam question has more than one correct answer, or is partially or completely incorrect. Appropriate citation and references are required.
 - c. Cite course accepted references for your challenge to the question.

Exam review (online)

When an exam is assigned there will also be a corresponding review time for that exam. The time frame will be visible to the examinee at time of test start. The review will be open for 1 week and the time allotted will be at 30 seconds per question. It is the responsibility of the examinee to note the review time and complete their review during the time frame allotted. The exam will NOT be opened outside of the time frame or for greater the time allotted.

The integrity statement applies to exam review and any reproduction or sharing of exam information is subject to dismissal from program.

Academic Advising

Students will be assigned an academic advisor upon admission into the program. Students will meet with their advisor at least once during the first term and as needed throughout the program to discuss progress and any problems they may be experiencing. Students may request a meeting with their advisor at any time.

Remediation

Student progress will be monitored with enough frequency to ensure that deficiencies in students' knowledge, skills and professionalism are identified in a timely fashion. Once identified, students with deficiencies will be required to enter the program's remediation process. Students will meet with course directors and their faculty advisors to identify the nature and underlying causes of the problems. Opportunities for remediation will be identified and the program will work with students to address the identified problem(s). Remedial actions may include referral for tutoring, time management, study skills enhancement, test taking strategies, and/or personal counseling. Faculty advisors will meet regularly with students for documentation and follow-up. For further details please refer to the full policy in Appendix A.

Didactic Grievance / Appeals Policy and Process

A student may appeal a final course grade, first to the instructor and then to the Director of Academic Affairs and finally the Director. If after appeal to the Director, a student remains unsatisfied, then an appeal may be presented to the Progress and Promotions committee. At the discretion of the Progress and Promotions the issue may be resolved or forwarded to the Vice Provost for Health Sciences for final resolution.

Clinical Grievance / Appeals Policy and Process

A student may appeal a final rotation grade, first to the Director of Clinical Education and finally the Director. If after appeal to the Director, a student remains unsatisfied, then an appeal may be presented to the Progress and Promotions Committee. At the discretion of the Progress and Promotions Committee, the issue may be resolved or forwarded to the Vice Provost for Health Sciences for final resolution.

Progress and Promotions

Each student will be presented by the faculty to the Progress and Promotions Committee. The committee meets toward the end of the didactic period and once again prior to graduation. The committee is charged with the responsibility to assure that students are maintaining progress. If a student is not progressing as required the committee may make recommendations for remediation or dismissal.

Program Withdrawal

Any student wishing to withdraw from the PA program must submit this in writing to the Program Director detailing the reason for withdrawal and expected plans if any, to return. An exit interview with the Program Director will be required. A student who withdraws in "good standing" academically, will be allowed to

reapply to the program after an interview with the program administration without going through the full admissions process.

Students who are withdrawing due to issues of an academic nature will be required to exit interview with the Program Director and the Director of Academic Affairs to delineate a plan, detailing requirements for readmission. A student in this category will be required to interview again with program administration *before* readmission is approved.

Dismissal

At any time a student can be dismissed from the program for academic or professional behavioral reasons. Any student in jeopardy of dismissal from the program will be notified in writing and have the option to respond. If necessary, the Progress and Promotions Committee will be convened and the issue presented. All recommendations of the committee will be presented to the Program Director for final action and to the Office of the Provost.

Graduation Requirements

Candidates for the degree of Master of Science from the Division of Health Sciences must, in addition to completing all course and other degree requirements, have a minimum GPA of 3.00 and receive a C or higher in all courses. No student will be graduated who has not resolved all financial obligations with the University.

Policy on Harassment, Discrimination, Sexual Assault and Hate Crimes

The University of Bridgeport embraces the principles of diversity and pluralism, insists on the right of all members of our community to be treated with respect and fosters our personal obligation to honor the individuality and dignity of all human beings. The institution will create and maintain an environment that acknowledges differences, encourages freedom of expression and motivates change. Harassment, discrimination and hate crimes are not conducive to this environment. Therefore, the University of Bridgeport will not tolerate any conduct or speech that has no intent other than to cause embarrassment or pain to any individual or group in our community. The University policies are found in the Key to UB Student Handbook, Chapter 6: <http://www.bridgeport.edu/life/student-services/key-ub-student-handbook/>.

Leave of Absence

Successful completion of all didactic coursework and clinical rotations is mandatory for graduation. However there are circumstances that require leaves of absence from the program. These include but are not limited to: family or personal medical leave, pregnancy, childbirth, jury duty, military duty, and death in the family. Requests for leave of absence must be made in writing to the Program Director, who can grant leave of absence for a specific period of time required by the circumstance necessitating leave. Upon return from the leave of absence, students will be permitted to resume coursework or complete the clinical part of the program. Each student's request for leave will be decided based on the particular circumstances involved; in all such requests the Program Director makes the final decision whether to grant or deny the request.

- **Jury Duty** – The student must bring notice of jury duty to the Program Director as soon as received. The Program Director will provide the student with a letter documenting enrollment in the Physician Assistant Program. Any missed work will be the responsibility of the student. Extended time away may require repeating a specific course or rotation.
- **Military** – Any student called to serve in active military service must show such orders to the Program Director as soon as received. The student will be eligible for readmission after completing military service.
- **Pregnancy** – A student who becomes pregnant during the didactic or clinical phase of the program must notify the Program Director as soon as possible. There is inherent risk to the pregnancy such as possible exposure to infectious disease, particularly during the clinical phase of the program; therefore any student who chooses to remain a part of the program must provide a note from her obstetrician or other licensed health care provider indicating permission to continue in the program. A pregnant student has the option to withdraw at any time from the program, but will need to make arrangements with the Program Director regarding re-entering the program. If the student leaves during the didactic phase, this most likely will require waiting until the following year to re-enter when the appropriate term starts. Leaving during the rotation phase of the program will require the student to complete any missed rotations. In any event all work must be completed before the University will award the Master of Science degree.
- **Funeral** – The student must notify the Program Director as soon as possible and make arrangements to make up missed coursework or rotation time with the Program Director and course faculty or Director of Clinical Education.
- **Illness or injury** – If a student needs a leave for personal or family illness or injury, documentation of such need must be provided by the licensed health care provider to the Program Director. When ready to resume the program, documentation must be provided by the licensed health care provider that states the student is capable of returning to full program activities. These activities are described by the University of Bridgeport Physician Assistant Institute Technical Standards based on the recommendation of the Association of Medical Colleges (AAMC) Special Advisory Panel on Technical Standards from Medical School Admission, approved by the AAMC Executive Council on January 18, 1979.

Policy Statement on Religious Observances

The University of Bridgeport Physician Assistant Institute recognizes that excellence in medical education cannot be dependent solely upon any calendar, since patient illness respects no calendar, be it secular or religious. Faculty members recognize, however, that some students may have special needs in the scheduling of tests, final examinations, and rotation duties because of religious beliefs and practices. To this end, students who anticipate conflicts with regularly scheduled classes, tests, examinations, and/or the delivery of patient care should notify the Program Director at least 15 days in advance of any conflict.

During the clinical phase, when the schedule of patient care and clinical conferences conflicts with a student's religious observances, after notifications to the clinical coordinator, the student should arrange substitution and make up work in consultation with, and in agreement with, the clinical coordinator and preceptor. Due to the "non-scheduled" nature of the clinical training, each student is expected to recognize

his/her own personal responsibility for patient care and his/her own learning experience. Preparing students to assume the responsibility for patient care is the nature of clinical training and is critical to student's professional training.

Housing

It is the responsibility of each student to arrange their own housing. Refer to the Key to UB: <http://www.bridgeport.edu/life/student-services/key-ub-student-handbook/>.

Security

Refer to Key to UB, at the following link- <http://www.bridgeport.edu/life/student-services/key-ub-student-handbook/> or <http://www.bridgeport.edu/life/servicesforstudents/campussafety/>

Personal Alarm Locator (PAL): <http://www.bridgeport.edu/life/student-services/campus-safety/>

Each full-time student at the University is provided a small personal alarm locator (PAL) that can signal for help instantly from anywhere **on campus** in an emergency. Small and easily carried, a PAL helps students summon help with the touch of a button. The signal is transmitted to the central computer in the Campus Security Office which identifies it and immediately provides information to the security dispatcher about who the student is, his or her vital information, a picture of the student, and a map of where the student set off the PAL. Assistance will be on its way in a short period of time.

Student Records

All inquiries regarding your records should be directed to the Program Director. Files are maintained by the following departments:

- UB Health Science Graduate Admissions - official application and associated admissions paperwork.
- The PA Institute - didactic and clinical grades, disciplinary actions, malpractice insurance documentation, documentation of compliance with immunization requirements.
- University of Bridgeport Student Health Services - history and physical exam records, immunization verification, accident and injury reports. Program faculty and staff cannot view health records of students except for immunization and PPD results. Students will sign a *Release of Information Form for immunization* results to be sent to preceptor sites.
- Registrar's Office - your official transcript.
- Faculty Advisor - files on student counseling and advising. These become part of the student file in the PA program office after graduating.

Disability Resources and Services

Disability Services offers a private and confidential atmosphere for students to talk about their disabilities and accommodation requests. We are committed to providing services to qualified students with disabilities so that they receive an equal educational opportunity. In compliance with Section 504 of the Rehabilitation Act, the Americans with Disabilities Act, and Connecticut State Laws, we provide reasonable accommodations to reduce the impact of disabilities on academic functioning, or upon other life activities in the University setting. The University respects the student's right to disclose or not to disclose a disability. However, the University is not responsible for providing services or accommodations for students who do not disclose a disability to Disability Services in a timely fashion.

To receive services or accommodations, students must provide appropriate documentation. Disability Services is located in the Health Sciences Center/Warner Hall, Room 119. Please contact Disability Services at 203-576-4454, or counselingservices@bridgeport.edu, when requesting accommodations.

All accommodations are determined on an individual basis. Requests for assistance and accommodations must be initiated by the student preferably at least two weeks prior or at the beginning of each academic semester.

Student Health Services

All University of Bridgeport students have access to the services provided by the Student Health Services. Also see below regarding health care services while on clinical rotations. Program faculty including the Medical Director cannot participate as health care providers for our students. Please refer to the UB Key for services available: <http://www.bridgeport.edu/life/servicesforstudents/key.aspx>.

Student Health Insurance

All Physician Assistant students are required to have health insurance during their enrollment in the program. Physician Assistant students **are** automatically enrolled in the UB sickness plan. UB health insurance can be waived if you have equivalent personal insurance (see UB website - Student Health Insurance for the waiver procedures and form).

For more information, contact Risk Strategies at (401) 831-1463 or email - ubstudentinsurance@risk-strategies.com.

You can visit the UB Student Health Services website for more information about insurance coverage: <http://www.bridgeport.edu/life/servicesforstudents/healthservices/insurance.aspx>.

Health Sciences students are automatically enrolled in the University injury plan. *This cannot be waived.*

Counseling Services

Counseling services are available in a private and confidential setting. For detailed information go to the following link: <http://www.bridgeport.edu/life/servicesforstudents/counselingservices>.

To make an appointment call 203-576-4454 or email: counselingservices@bridgeport.edu.

Health Screening, Background Check, and Vaccination Requirements

After acceptance into the program students are required to complete a physical examination to provide evidence of good health, no evidence of acute communicable disease, and show he/she is up to date on required immunizations. You will receive the Health Examination Report for you and your physician to complete at the time of your acceptance. It is also available on line in the Health Services section of the University web site. This must be completed before starting the program.

A criminal background check and sex abuse clearance is also required of all accepted students. There is a fee which is the student's responsibility. The program will provide students with instructions on completing this including the link and access code.

Prior to starting the Program all students are required to submit documentation of up-to-date vaccination status including PPD (as listed in this Handbook "Vaccination and PPD Requirements"). These documents must be submitted to UB Student Health Services and to the Program office.

Prior to starting clinical rotations, students will be required to obtain an up-to-date physical examination, PPD, and additional vaccinations such as influenza vaccine. Students will also be required to obtain a urine drug screen. The program will advise students on how and when to obtain these pre-clinical requirements.

Health Care While on Clinical Clerkships (Rotations)

While students are on clinical rotations at any major medical center, they should report to Employee Health for any acute illness or injury; if Employee Health is closed, students should report to the Emergency Department for evaluation and treatment under their private insurance. Students should request that a report be sent to the University of Bridgeport Student Health Services and the student should also notify the Student Health Services the following day.

Students assigned to other sites should go to closest acute care facility for accident or illness. The student should request that a report be sent to the University of Bridgeport Student Health Services and the student should also notify the Student Health Services the following day.

Attendance/Participation on Clinical Clerkships (Rotations)

Each clerkship, students are expected to conduct themselves in a professional manner. Unexcused absences or recurring episodes of tardiness in arrival at the pre-designated place/time may result in failure of the clerkship. Students have been instructed to notify the program and preceptor prior to ANY absence. Unexcused absences and/or failure to notify the Director of Clinical Education and preceptor of anticipated absences may result in dismissal from a clerkship. More than 3 consecutive days of excused absence may require a note from a health care provider clearing the student to return to the clerkship.

NOTE: Absences can affect successful completion of any clerkship.

The Director of Clinical Education is the approving authority for all requests to be absent for any period of time during a scheduled clerkship.

In the event that the primary preceptor is unavailable, at any time during the clerkship, arrangements should be made for the student to work with an alternate preceptor.

Clerkship Grade

All final clinical clerkship grades are assigned by the program. The preceptor evaluation and end of clerkship testing will be used in determining the clerkship grade; therefore grades will be postponed until the preceptor evaluation of student performance has been received by the program. Students have been informed that they are NOT to discuss grades with their clinical preceptors. Any questions about clerkship grades are to be referred to the PA Institute faculty who oversees the clerkship. 50% of the grade is based on the preceptor evaluation, 30% on the specific end of clerkship exam (a written case write up replaces the exam on elective rotations), 10% on the general medical knowledge exam and 10% on professionalism i.e. timeliness of Typhon logging activities, participation in call back day activities. Each student will make one oral case presentation during the clerkships. This counts for 50% of the professionalism grade for that block.

Vaccination and PPD Requirements

Healthcare workers are at increased risk for getting sick and passing illnesses to patients. It may be more difficult for these patients to recover from illnesses. It is critical that healthcare workers get immunized against vaccine preventable diseases so that they, and the people they care for, are less likely to become ill. Vaccines are effective at preventing disease among healthcare workers and the patients around them.

The requirements below reflect both University requirements as regulated by the State of Connecticut and the CDC Advisory Committee on Immunization Practices recommendations for healthcare workers. Vaccination records are maintained by Student Health Services and in your student file in the PAI. Students should keep a copy of the vaccination documentation and bring it with them at the start of each clerkship as several sites require original documentation of vaccinations. These documents can also be provided to the site after the student signs a release of information with Student Health Services or the PAI.

Measles (Rubella)*

- First dose on or after months of age and given in or after 1969.
- Second dose given on or after January 1, 1980. History of having had Measles is not acceptable documentation of immunity.
- Laboratory evidence (Blood Test) of immunity is acceptable in lieu of administered vaccine, but you must provide proof of immunity with a laboratory slip.

Rubella (German measles)*

- Immunization with Rubella vaccine after one year of age.
- History of having had Rubella disease is not acceptable documentation of immunity.
- Laboratory evidence (Blood Test) of immunization is acceptable in lieu of administered vaccine; you must provide proof of immunity with a laboratory slip.

**Connecticut law requires that all college students, born on or after January 1, 1957, submit documentation of two separate measles vaccinations and one rubella vaccination.*

Tuberculin Test - It is mandatory that all students have a Tuberculin Test:

- PPD (Mantoux) within six months of admission to the University.
- If the test is positive, a chest x-ray is required; history of having the BCG vaccine is not considered a contraindication to testing. In addition to providing documentation of a chest x-ray, any student with a history of a positive PPD must provide a statement from their physician that they were counseled regarding and or received TB prophylaxis.
- Any student who spends three or more months in a country outside the United States must subsequently be tested for Tuberculosis.
- The above TB screening must be updated every 12 months

Meningitis Vaccination

- Connecticut Law mandates all students who reside in on-campus housing provide certified proof of having received the Meningitis Vaccination.
- If it is medically contraindicated for the student to receive the Meningitis Vaccination, the student must present a signed certificate from a physician stating that, in the opinion of the physician, vaccination with meningococcal vaccine is contraindicated because of the physical condition of the student.

Vaccination and PPD Requirements Continued

Hepatitis B Vaccination

Hepatitis B vaccination or proof of immunity by titer is required of all PA students.

Please note: this is a requirement specific for PA students, and therefore is not listed as a required vaccination on the University Health Screening form. If this has not been completed prior to matriculation, the vaccination can be obtained locally. This is a three series vaccine and should be started within the first month of the program.

Varicella

An immune Varicella titer or written documentation of vaccination with two doses of Varicella vaccine.

Please note that **all** PA students must have Varicella immunization documented. (The University admission requirements have exceptions for those born before 1980, this does **not** apply for PA students.)

Tetanus-Diphtheria-Pertussis (Tdap)

A Tdap vaccination is required of **all** physician assistant students. The vaccination must have been administered within 10 years of the program admission date.

Influenza Vaccine

The influenza vaccine is recommended of all healthcare workers on an annual basis by the CDC Advisory Committee on Immunization Practices. Many clinical sites also have policies requiring documentation of up to date influenza vaccine during flu season.

Hepatitis-C titer

Universal Precautions

As a student in a healthcare program you will face the risk of exposure to potentially infectious material. The Bloodborne Pathogen (BBP) standard was developed by the Occupational Safety and Health Administration (OSHA) to protect healthcare workers who may come in contact with blood or other potentially infectious materials. These are referred to as universal precautions. These serve as a basis for practices and policies to reduce exposures to BBP. In Term One, you will receive an orientation to universal precautions. You must adhere to these in all clinical settings. During clerkships, if an exposure occurs you must know the policy for that site so it is important to discuss this with your preceptor at the beginning of each clerkship.

All sites will provide emergent care to mitigate the exposure (i.e. removing infectious material as appropriate to exposure). Immediate reporting of the exposure to your preceptor or designee is the next step. Depending on the site further treatment may be offered at the site or you will be referred elsewhere to complete the emergent treatment. This emergent care is generally provided without charge by the site, but this and follow up care may be billed to your private health insurance. You must provide written documentation of the exposure and care to the UB Student Health Service on their next business day. Exposure to infectious disease may result in serious and/or chronic illness and disability. Anxiety is often experienced following any exposure. These may have an adverse impact on your capacity to complete the program.

NOTE: Core faculty including the Medical Director is prohibited from providing, evaluating and/or delivering health care to students enrolled in the PA Institute.

PHYSICIAN ASSISTANT PROGRAM POLICIES

Physician Assistant Institute General Policies

Students are responsible for University, Physician Assistant Institute and individual class policies. Institute policies, guidelines and expectations may be modified or implemented during the academic year. Students will be provided with advance notice of any changes prior to their implementation. These policies apply to all courses offered by the Physician Assistant Institute, and will not necessarily be restated in each individual class syllabus.

Health Insurance Portability and Accountability Act (HIPAA)

All students must complete HIPAA training. No clinical contact in a “covered entity” will be allowed before training is completed. Students will complete the HIPAA training during term one of the program.

Bloodborne Pathogen Training (BBP)

All students must complete Bloodborne Pathogen (BBP) training. Students are to complete BBP training during term one of the program. This will be provided by the program. A record of the training is to be kept on file in the program office. (Refer to Universal Precautions in this handbook.)

Professional Dress Policy

The Physician Assistant Institute places a high value on professional appearance. The reasons are rooted on concern for infection control, professional impression, and cultural sensitivity. Professional appearance helps build trust and confidence in both patients and fellow health care providers. This manual describes minimum standards of dress. We encourage students always use good judgment and project a professional appearance.

A. General Standards

Personal hygiene. Personal hygiene must be maintained.

Hair and Nails. Hair should be conservative, neat and clean at all times. Beards and mustaches should be short, clean and well groomed. Fingernails should be clean, short and without acrylic or bonded type material.

Clothing. Avoid dress or attire that could be potentially offensive or distracting to the public, preceptors, patients and/or faculty. Clothing must be conservative, clean and in good repair.

Fragrances. Avoid strong fragrances: perfumes or cologne. Be aware that many people are sensitive to fragrances which may cause allergies or headaches.

Facial and oral jewelry. Facial and oral jewelry is not permitted while on clinical rotation.

Tattoos. Tattoos must be covered while on rotations or any patient interaction.

Each clinical site may have additional dress code guidelines.

B. Classroom Attire {*all clothing must be conservative and non-revealing*}

General Guidelines for Men and Women

No sweat pants

No pajama pants

No tank tops

Jeans – neat, clean, no rips, fitted

Shirts – neat, clean, no rips, not offensive or distracting

Scrubs are allowed (Program approved)

No form fitting clothing

C. Lab Attire

Appropriate attire will enable the student to adequately perform a detailed physical examination and identifying anatomic landmarks necessary to distinguish normal from abnormal findings. In addition to the general guidelines listed above, the following will apply:

Clothing. You may wear t-shirts and sweatpants. Women should wear sports bras and gym shorts. Men should wear gym shorts. Any concerns regarding this dress policy will be addressed on a case by case basis with the Program Director.

Hair must be off the face during labs and competencies. This applies to all clinical settings also.

D. Professional, Clinical and Competency Attire

Clothing and Shoes: Conservative, non-revealing clothing is expected. You are to avoid dress or attire that could be potentially offensive to the public, patients and/or faculty. No sandals, sneakers, or open-toed shoes (as per OSHA regulations). Employees are required to wear socks or hosiery at all times. Heels should be conservative i.e. not to exceed two (2) inches.

In addition to the general guidelines, the following will apply:

- Jeans, shorts, Capri pants, leggings, skorts, miniskirts, sweatshirts, strapless/spaghetti strap tops or dresses, plunging or revealing necklines, midriff shirts and t-shirts are **not** acceptable during clinical rotations.
- Tops must be long enough at the bottom and high enough at the neck to provide adequate coverage of the abdomen, back and chest
- Shirts and blouses must be tucked in at all times, unless the style of the specific shirt or blouse is designed to be worn over the pants or skirt.
- Underwear must not be visible through clothing or above the waistband of pants or skirts.
- Dangling jewelry is not allowed. Pins, rings, bars or studs may not be worn in the nose, eyebrows, tongue or in or around the lips.
- Hats generally are not permitted unless required for work purposes. Exceptions may be made for religious, cultural, or health need reasons.
- All students must wear photo ID badges and lab coats during clinical rotations.
- If the individual clinical rotation site requires its own ID, the student must wear both.
- Students are responsible to know and adhere to the dress code policy of each clinical site.
- Lab coats must be worn unless instructed otherwise by the preceptor. Lab coats must be clean, ironed and fit properly. Lab coats must be short jackets (long jackets are usually worn by attending and resident physicians)

Identification: Name tags must be worn at all clinical education sites, during simulated patient interactions, and may also be required for some guest lecture sessions. The name tag will clearly identify you as a Physician Assistant Student.

Personal objections by the student to this dress policy will be considered, but must be brought forth to the Program Director prior to engaging in patient contact. The Program recognizes that these statements utilize language which is, in some cases, imprecise and that the formulation of this policy is predicated on cultural norms. Nevertheless, students violating these provisions may be excluded from the activity and may be subject to further action if recurrent violations occur.

Business Attire: Some circumstances may call for business attire.

We recommend the following for professional business attire:

Men

- Suits
- Dress shirts with tie
- Dress slacks
- Sports Coat
- Dress shoes

Women

- Suits
- Dress blouse
- Dress slacks
- Blazer, sweater
- Dress shoes (no open toe shoes)
- Dresses, skirts (appropriate length for business and professional environment)

Behavioral/Professionalism Policies

Students must display a professional attitude at all times. Students' professional behavior is continuously monitored throughout the program. Students must adhere to the academic chain-of-command protocol. Complaints must be addressed with the faculty member responsible for the content area in question. A further appeal opportunity is available to students; students can appeal the decision with the Program Director. If not resolved at this level the student can bring the appeal to the Progress and Promotions Committee. Further appeal will follow the chain of command of the University.

Physician assistant students may not take the responsibility or the place of qualified staff. PA students will not have access to records or other confidential information of other PA students.

Use of electronic communication devices is limited to emergency situations. Audible pagers and cellular phones must be turned off during classes, lab sessions, competencies, or patient encounters. If an emergent situation exists, please discuss with instructor before the start of the activity or class.

All on-campus related injuries (i.e. needle sticks, cuts, falls, etc.) must be reported to Campus Security. Security and your appropriate supervisor will complete the required incident reporting documents.

Communication

The primary mechanism of communication with students will be email. Students are expected to check their email daily for up-to-date information. Communication is often the first impression you are making therefore appropriate tone is expected.

Students must also submit a current address, phone number, and emergency contact to the Registrar Office. Any changes to this information must also be submitted to the program administrative office.

Reporting of Criminal Charges or Arrests

Any student who is charged with a crime or arrested must report this to the Program Director immediately. Depending on the nature of the act involved, the student may be referred to the Student Conduct Board. See the UB Key for further details regarding this process.

<http://www.bridgeport.edu/life/servicesforstudents/key.aspx>

Attendance Policy

In the Physician Assistant Institute, it is expected that all students will assume responsibility for meeting all academic and clinical obligations punctually. Student attendance is expected in all classes and represents a component of professionalism. Students remain responsible for all of the work in the courses in which they are registered. For pre-arranged absences the student should submit an Absentee Form to the Program office at least five days prior to the scheduled absence. The form should be used during the didactic and clinical clerkship phases.

Form Location: Absentee Forms are location in the program office, in the student mailbox area, and on your class Canvas site.

In the event of an emergency absence, you must notify the program as soon as possible (*include the reason for your absence*):

1. During the Didactic phase: Email the program office at pai@bridgeport.edu and the course instructor(s).
2. During the Clinical Clerkship phase: Email the program office at pai@bridgeport.edu and the Director of Clinical Education.

OR

3. Call the program office's main number at 203-576-2400. Leave a message if there is no answer.

Class Preparation

Students must arrive at all educational and clinical sessions with the necessary lab instruments, texts, attire, and other materials as designated by the instructor, or may otherwise be excluded from participation in the activity. Students not properly prepared for competencies will not be evaluated. Make-up competencies for lack of preparation will not be offered.

Class Policy

- If a student must miss a class he/she will notify the instructor in advance via email with the date and reason for missing class. The instructor will determine if it is an acceptable reason.
- If a student misses a class due to an emergency he/she will notify the instructor via email as soon as possible (refer to the Attendance Policy above).
- Failure to comply with these instructions will affect assigned grades.
- Cell phones will be off and stored during class time. If there is an emergency situation when a student needs to have the phone on, this must be cleared with the professor.

Employment at the Physician Assistant Institute Policy

Physician Assistant Institute students can **NOT** be required to work for the program. Any concerns regarding violation of the policy should be referred to the Program Director.

Employment Policy

Acceptance into the Physician Assistant Institute at the University of Bridgeport requires a full-time commitment. It is an intense and rigorous program that is demanding. The program strongly discourages students from holding an outside job during the didactic and clinical years.

Evaluation Policy

Students are expected to take all quizzes, papers, presentations, competencies and examinations on the scheduled day at the scheduled time. Students may not bring materials into the evaluation procedure other than those directly specified by the instructor. Upon completing the evaluation, all evaluation and testing materials are to be returned to the individual administering the evaluation. The faculty or course instructor will make available a syllabus or course description which specifies course evaluation requirements.

Behavioral and Professional Evaluation (BPE)

Students need to demonstrate competency in technical skills as observed and evaluated throughout the didactic year. These skills are evaluated by means of examinations and competencies. Students also need to demonstrate social and behavioral skills. These skills are evaluated by means of the "Behavioral and Professional Evaluation" (BPE) process. The program faculty will complete the BPE twice throughout the didactic period. This allows for faculty assessment of student behavior, and for documenting strengths and weaknesses of each student. See the "Professional and Behavioral Evaluation of Student by Faculty (Example)" on the following page.

The student will complete a self-evaluation. The completed evaluation must be brought to the advisor meeting.

The faculty advisors will meet one-on-one with student advisees to provide feedback. If there are any problem areas identified, the faculty advisor will discuss specific steps for improvement. Such steps may include, but are not limited to referral to appropriate resources, developing a contract regarding behavioral modification, on-going advisory meetings and other means of assisting the student to improve problem areas. The form is reviewed with the student, signed and dated by both faculty member and the student, and filed in the student's record.

Faculty is here to help students succeed. Personal feedback and support are key elements in helping students to recognize areas of strength and of weaknesses. Technical skills must be integrated with interpersonal professional behavior for students to succeed as physician assistants.

FORM: Professional and Behavioral Evaluation: *Student Self-Assessment*

*Evaluate yourself on the following attributes. The maximum score per attribute is 5 points.
Honest assessment will help you focus on areas that may need improvement and will give you the opportunity to compare
yourself assessment to that of the faculty's assessment.*

ATTRIBUTE	POINTS <small>5 Pts/Attribute</small>	COMMENTS
Point Value: 5-Far Exceeds Expectations / 4-Exceed Expectations / 3-Meet Expectations / 2-Below Expectation / 1-Does Not Meet Expectations		
Work Ethic		
	(20)	
1. Recognizes limitations.		
2. Accepts responsibility for own actions.		
3. Completes assignments on time.		
4. Makes an effort to exceed expectations and maintain high personal standards.		
Deporment		
	(20)	
1. Demonstrates a positive attitude.		
2. Presents a professional demeanor.		
3. Demonstrates respect for faculty, staff and fellow students.		
4. Accepts and applies constructive feedback.		
Communication		
	(20)	
1. Participates actively in class, labs and assignments.		
2. Write ups are clear, and concise with correct grammar, spelling and medical terminology.		
3. Oral presentations are clear, and concise with correct medical terminology.		
4. Written and oral communication with faculty, staff and fellow students is professional and respectful.		
Time Management		
	(20)	
1. Attends class and all required activities		
2. Is on time for class, labs and all required activities.		
3. Uses time effectively.		

Supervised Clinical Practice

Please refer to the Clerkship Manual for the clerkship (rotation) syllabi. The seven required clerkship (rotation) sites are selected by Physician Assistant Institute core faculty. Students are assigned their clerkship (rotation) schedule by the Director of Clinical Education.

Any changes to the schedule must be approved by the Director of Clinical Education. Requests to arrange non-program selected site(s) /preceptor(s) must be made at least two months in advance of the clerkship (rotation).

Physician Assistant Institute - Technical Standards

Completion of a degree at the University of Bridgeport signifies the graduate is prepared for practice in their prospective field by meeting the technical standard requirements. Technical standards, as distinguished from academic standards, refer to the physical, cognitive and behavioral abilities required for satisfactory completion of curriculum. The essential required abilities include motor, sensory, communicative, intellectual, behavioral and social criteria. These standards are required by ARC-PA and are common to all programs. All candidates must possess the necessary intellectual ability and skills in observation, communication, motor and behavior to enter and successfully complete the program. (Adopted from: The Report of the Special Advisory Panel, on Technical Standards for Medical School Admissions, AAMC 1979; Key Foundations for Developing Educationally Effective and Legally Sound Access and Diversity Policies AAMC Professional Development Conference for Medical School Admissions Officers June 22, 2007.)

Observation

- Candidates must be able to observe visual presentations in the classroom and laboratory and at the patient bedside.
- Candidates must be able to observe patients closely and at a distance to observe the patient's condition and complete a patient exam.
- Candidates must be able to immediately comprehend and respond to auditory instructions or requests.

Communication

- Candidate must be able to speak, hear and observe patients to obtain pertinent information.
- Candidates must be able to communicate in a clear and effective manner with patients and their families both orally and in writing, using appropriate grammar, spelling, and vocabulary.
- Candidates must possess the skills of sensitivity and confidentiality in patient communication. They must abide by the HIPAA policy.
- Candidates must be able to communicate with the health care team effectively and efficiently.

Motor Skills

- Candidates must be able to elicit information on patient exam by palpation, auscultation, and percussion as well as carry out diagnostic maneuvers.
- Candidates must be able to examine and treat patients with coordination of muscular movements, equilibrium, and sensation.
- Candidates must be able to manipulate equipment and instruments for basic laboratory tests and procedures such as airway management, suturing, needle placement & IV, stethoscope & ophthalmoscope, tongue blades, gynecologic speculum and scalpel.
- Candidates must be able to transport themselves from room to room and location to location in an efficient manner to see patients.
- Candidates must have the physical stamina to complete both the didactic and clinical portions of the training program which includes sitting, standing, and moving from classroom to laboratory to hospital.

Intellectual Ability

- Candidates must possess problem solving ability, a skill demanded of physician assistants.
- Candidates must be able to collect, measure, organize, prioritize, analyze and assimilate data in a limited time frame. Information presented in lecture must be successfully applied in the clinical setting by the candidate.
- Candidates must be able to read and understand the medical literature and use this knowledge in problem solving and patient care.
- Candidates must be able to interpret x-rays and EKG readings.

Behavior

- Candidates must be able to use their intellectual ability and exercise good judgment in completing their responsibilities for the diagnosis and treatment of patients.
- Candidates must have the capacity to respond to emergencies in a calm and reasoned manner.
- Candidates must be able to develop a rapport with patients and their families and their colleagues.
- Candidates must be able to handle the physical, mental and emotional stress while functioning effectively.
- Candidates must demonstrate compassion, motivation, integrity, flexibility and a consciousness of social values.
- Candidates must be able to interact with a diverse population.
- Candidates must be able to accept criticism and modify behavior and practice as needed.
- Candidates must work cooperatively preserving relationships with other members of the health care team.
- Candidates must understand and apply ethical standards in practice.
- Candidates must demonstrate emotional stability at a level necessary to deliver sound patient care in all settings and to interact with interdisciplinary health care teams

Physician Assistant Institute - General Educational Objectives

History Taking & Performing Physical Examinations

Knowledge of:

- Pertinent historical information associated with selected medical conditions
- Risk factors for development of selected medical conditions
- Signs and symptoms of selected medical conditions
- Physical examination techniques
- Physical examination findings associated with selected medical conditions
- Appropriate physical examination directed to selected medical conditions
- Differential diagnosis associated with presenting symptoms or physical findings

Cognitive skills in:

- Conducting comprehensive and focused interviews
- Identifying pertinent historical information
- Performing comprehensive and focused physical examinations
- Associating current complaint with presented history
- Identifying pertinent physical examination information

Applying Basic Science Concepts

Knowledge of:

- Human anatomy
- Physiology/Biochemistry
- Pathophysiology
- Clinical Lab and Microbiology
- Clinical Genetics

Cognitive skills in:

- Recognizing normal and abnormal anatomy and physiology
- Relating pathophysiologic principles to specific disease processes
- Correlating abnormal physical examination findings to a given disease process
- Correlating abnormal results of diagnostic tests to a given disease process

Health Maintenance

Knowledge of:

- Epidemiology of selected medical conditions
- Early detection and prevention of selected medical conditions
- Relative value of common screening tests
- Appropriate patient education regarding preventable conditions or lifestyle modifications
- Healthy lifestyles
- Prevention of communicable diseases
- Immunization schedules and recommendations for infants, children, adults and foreign travelers
- Risks and benefits of immunization
- Human growth and development
- Human sexuality
- Occupational and environmental exposure
- Impact of stress on health
- Psychological manifestations of illness and injury
- Effects of aging and changing family roles on health maintenance and disease prevention
- Signs of abuse and neglect
- Barriers to care

Cognitive Skills in:

- Using counseling and patient education techniques
- Communicating effectively with patients to enhance health maintenance
- Adapting health maintenance to the patient's context
- Using informational databases

Using Laboratory & Diagnostic Studies**Knowledge of:**

- Indications for initial and subsequent diagnostic or laboratory studies
- Cost effectiveness of diagnostic studies or procedures
- Relevance of common screening tests for selected medical conditions
- Normal and abnormal diagnostic ranges
- Risks associated with diagnostic studies or procedures
- Appropriate patient education related to laboratory or diagnostic studies

Cognitive skills in:

- Using diagnostic equipment safely and appropriately
- Selecting appropriate diagnostic or laboratory studies
- Collecting diagnostic or laboratory specimens
- Interpreting diagnostic or laboratory studies results

Formulating Most Likely Diagnosis**Knowledge of:**

- Significance of history as it relates to differential diagnosis
- Significance of physical findings as they relate to diagnosis
- Significance of diagnostic and laboratory studies as they relate to diagnosis

Cognitive skills in:

- Correlating normal and abnormal diagnostic data
- Formulating differential diagnosis
- Selecting the most likely diagnosis in light of presented data

Clinical Intervention**Knowledge of:**

- Management and treatment of selected medical conditions
- Indications, contraindications, complications, risks, benefits and techniques for selected procedures
- Standard precautions and special isolation conditions
- Sterile technique
- Follow-up and monitoring of therapeutic regimens
- Conditions that constitute medical emergencies
- Indications for admission to or discharge from hospitals or other facilities
- Discharge planning
- Available community resources
- Appropriate community resources
- Appropriate patient education
- Roles of other health professionals
- End-of-life issues
- Risks and benefits of complementary and alternative medicine

Cognitive skills in:

- Formulating and implementing treatment plans
- Recognizing and initiating treatment for life-threatening emergencies
- Demonstrating technical expertise related to performing specific procedures

- Communicating effectively
- Using counseling techniques
- Facilitating patient adherence and active participation in treatment
- Interacting effectively in multidisciplinary teams

Pharmaceutical Therapeutics

Knowledge of:

- Mechanism of action
- Indications for use
- Contraindications
- Side effects
- Adverse reactions
- Follow-up and monitoring of pharmacologic regimens
- Risks of and for drug interactions
- Clinical presentation of drug interactions
- Treatment of drug interactions
- Drug toxicity
- Methods to reduce medication errors
- Cross reactivity of similar medications
- Recognition and treatment of allergic reactions

Cognitive skills in:

- Selecting appropriate pharmacologic therapy for selected medical conditions
- Monitoring pharmacologic regimens and adjusting as appropriate
- Evaluating and reporting adverse drug reactions

Physician Assistant Institute - Specific Competencies

At the completion of the didactic and clinical phases Physician Assistant Institute students will be able to demonstrate proficiency by performing the following skills, tasks and procedures (competencies).

Proficiency will be documented by the following means:

- Quizzes, tests and graded assignments during both the didactic and clinical phases of the program.
- Faculty observation of student lab skills, tasks and procedures including simulation labs.
- Clinical logging documenting preceptor supervised skills, tasks and procedures. While the logging documentation will quantify many of these competencies, a numerical number is not used as an indicator of proficiency. Proficiency will be based on the successful supervised completion of each skill, task or procedure.
- During the seventh academic term, each student will be required to successfully complete a summative evaluation in order to be eligible for graduation.

Competencies:

1. Obtain a comprehensive patient history from available sources, including:
 - ❖ Patient demographics
 - ❖ Chief complaint
 - ❖ History of present illness or injury
 - ❖ Past medical/surgical history
 - ❖ Family history
 - ❖ Psycho/Social history
 - ❖ Medications
 - ❖ Allergies
 - ❖ Review of systems
2. Obtain a problem focused history, as appropriate.
3. Utilize information from the patient history to formulate a differential diagnosis.
4. Perform a comprehensive physical examination.
5. Perform a problem focused physical examination, as appropriate.
6. Obtain and interpret vital signs.
7. Distinguish between normal and abnormal physical examination findings.
8. Demonstrate interpersonal communication skills to develop professional rapport with patients, families and other healthcare professionals.
9. Demonstrate knowledge of normal ranges of laboratory tests.

10. Order laboratory and other diagnostic tests including but not limited to:
 - ❖ Hematology
 - ❖ Microbiology
 - ❖ Chemistry
 - ❖ Serology
 - ❖ Urinalysis
 - ❖ Blood gas
 - ❖ ECG
 - ❖ Peak flow
 - ❖ Plain x-ray
11. Demonstrate knowledge of risks of laboratory and diagnostic tests.
12. Interpret laboratory and other diagnostic tests.
13. Analyze findings obtained through history taking, physical examination and interpretation of diagnostics studies to formulate an accurate diagnosis.
14. Demonstrate ability to properly triage patients with acute injury or illness.
15. Perform the following diagnostic procedures:
 - ❖ ECG
 - ❖ Peak expiratory flow
 - ❖ Visual acuity
 - ❖ Pap smear
16. Perform a pelvic exam including proper speculum, PAP smear, and culture technique.
17. Demonstrate digital rectal exam and the ability to test stool for occult blood using guaiac cards.
18. Demonstrate evidence based clinical decision making skills in the formulation of a treatment plan.
19. Discuss the risks/benefits and economic impact associated with diagnostic tests used in formulating a diagnosis, and medication/treatment choices used in the formulation of a treatment plan.
20. Properly organize and document through paper based or electronic based medical records to ensure that an accurate record of the patient encounter is created in compliance with current medical/legal standards.
21. Deliver accurate, concise oral presentations summarizing pertinent patient data.
22. Provide patient education regarding symptoms, physical examination findings, laboratory and diagnostic tests, treatment plans and discharge instructions.
23. Determine when referral to additional services is required.
24. Facilitate referral to additional healthcare services.
25. Provide patient education and counseling regarding normal development and aging patterns, health maintenance, disease prevention, screening techniques, immunizations and the risk/benefits of various life style choices.
26. Demonstrate knowledge of the Physician Assistant certification/recertification and licensing processes.

27. Demonstrate knowledge of Connecticut State guidelines regarding the recognition and reporting of child abuse, elder abuse and domestic violence.
28. Demonstrate professional integrity, honesty, dependability, respect for self and others, compassion, and an ability to protect patient confidentiality and trust at all times.
29. Demonstrate professional excellence, teamwork, and tolerance for diversity and community service.
30. Demonstrate proper breast exam technique and the ability to instruct the patient regarding regular monthly self-breast exam.
31. Demonstrate proper testicular exam technique and the ability to instruct the patient regarding regular monthly self-testicular exam.
32. Perform a venipuncture and collect blood samples.
33. Perform an arterial puncture and collect blood samples.
34. Establish peripheral vascular access.
35. Administration of IV fluids, medications, blood and blood products.
36. Collect stool, urine, sputum, throat, or wound drainage specimen for culture.
37. Perform injections including subcutaneous, intradermal, intravenous and intramuscular.
38. Administration of medication via the following routes:
 - ❖ Topical
 - ❖ Oral
 - ❖ Sublingual
 - ❖ Inhalation
39. Interpret intradermal skin test.
40. Insert a nasogastric tube.
41. Interpret an electrocardiogram.
42. Analyze spirometry readings.
43. Demonstrate proper technique for a lumbar puncture.
44. Insert and remove a Foley catheter.
45. Demonstrate the ability to utilize OSHA recommended Universal Precautions.
46. Demonstrate the ability to use aseptic technique and the ability to establish a sterile field.
47. Demonstrate proper wound care including skin closure using various suturing technique.
48. Apply casts and splints using proper materials and techniques.
49. Demonstrate competency in the interpretation of plain radiographs of the chest, abdomen, spine, and extremities.

50. Implementation of basic life support (CPR):

- ❖ Rescue breathing
- ❖ Chest compressions
- ❖ FBAO removal

51. Implementation of Advanced Cardiac Life Support (ACLS):

- ❖ Defibrillation
- ❖ Cardioversion
- ❖ Pacing

52. Demonstrate knowledge and skill of basic airway management:

- ❖ Oropharyngeal airway
- ❖ Nasopharyngeal airway
- ❖ Suction
- ❖ Bag valve mask ventilation
- ❖ Pocket mask ventilation

53. Demonstrate knowledge and skill in advanced airway management:

- ❖ Endotracheal Intubation
- ❖ Laryngeal mask airway (LMA)

54. Monitor patient progress and response to treatment.

Prior to completion of the Program, students must demonstrate competency in all the above skills, tasks and procedures without regard to gender, age, or socioeconomic background. It is expected that every graduate will be competent regardless of medical setting or patient acuity.

Physician Assistant Institute - Equipment

Students will be required to purchase the following items. We recommend that you do not purchase until after orientation as various purchase options will be discussed
(*Estimated Costs*)

■ Stethoscope with Bell (no cardiology scopes)	\$175.00
■ Otoscope/Ophthalmoscope (Highly Recommended: Heine)	\$495.00
■ Sphygmomanometer (adult cuff)	\$40.00
■ Tuning forks 128 and 512 Hz	\$25.00
■ Reflex Hammer	\$10.00
■ Eye chart Hand held	
■ Watch with seconds measurement	\$20.00

*The following items will be provided by the Program.

■ *White lab coat waist length with logo (replacement fee)	\$45.00
■ *Nametag (replacement fee)	\$25.00
■ *Dissecting Kit with hemostatic forceps	\$20.00
■ *Flexible measuring tape (60")	\$10.00
■ *Penlight	\$5.00

Physician Assistant Institute – Tuition, Fees, and Refund Policy

Tuition and Fees – refer to the University Website: www.bridgeport.edu

Professional Organizations and Student Society

Professional Organizations/Professional Contacts

- National Commission Certification of Physician Assistants (NCCPA) <http://www.nccpa.net>
- Physician Assistant Education Association (PAEA): <http://www.paeaonline.org>
- American Academy of Physician Assistants (AAPA) <http://www.aapa.org/>
- Connecticut Academy of Physician Assistants(CONNAPA) <http://www.connapa.org/>

The PA faculty encourages all students to become student members of the AAPA and ConnAPA.

Student Society

All students are members of the Bruce Fichandler Student Society.

Physician Assistant Institute – Curriculum

FIRST TERM	DESCRIPTION	CREDITS
MSPA 511: Anatomy I with Lab	This course is designed to provide an introduction to the functional anatomy of the human body. Students will have the opportunity to locate, identify, and dissect all major muscular, nervous, vascular, bony, and soft tissue structures using cadaveric specimens.	4
MSPA 521: Physiology/Biochemistry I	This course offers a fundamental and integrated approach to human physiology with emphasis on the study of the body's functional system from a medical perspective.	2
MSPA 526: Pathophysiology	This course offers a fundamental and integrated approach to human physiology with emphasis on the study of the body's functional system from a medical perspective.	2
MSPA 531: Introduction to Clinical Lab and Microbiology	This course will provide the student with advanced microbiology, virology and immunology to understand the complexities of infectious disease. Emphasis will be placed on clinically relevant pathogens, isolation and aseptic techniques, identification and treatment.	3
MSPA 556: Patient Education and Counseling	This course is a practical, evidence based approach to educate and counsel patients in order to improve lifestyle, increase adherence and reduce medical errors.	2
MSPA 551: History and Physical Exam I with Lab	This on-going course focuses on developing the skills of obtaining a comprehensive history and a problem focused history; performing a comprehensive screening exam and an appropriate problem focused exam; the ability to integrate and interpret the findings from these to create a foundation for further clinical evaluation. Emphasis is placed on identifying normal versus abnormal findings and on accurate and appropriate documentation.	3
MSPA 505: Information Literacy	This course provides students with the basic terminology, concepts and methods of research in order to be able to locate, evaluate and apply current evidence to clinical practice.	3
MSPA 541: Clinical Genetics	This course familiarizes students with concepts of cellular and molecular biology; different types of mutations and their effects; inheritance patterns; genetic testing techniques; counseling referrals and key resources with an emphasis on accurately creating and interpreting the pedigree in regards to disease identification and/or susceptibility, therapeutic options and future clinical applications of genetics in primary care.	2
MSPA 570: Introduction to Clinical Pharmacology	This course introduces the student to the basic principles of pharmacology, including mechanisms of action; absorption, distribution, metabolism, and excretion; pharmacokinetics; interactions with other drugs and with food; problems with special populations (prenatal, neonatal, and elderly); rational drug usage for clinical disorders (therapeutics): clinical measures; and toxicology.	1
Term Total: 22		

SECOND TERM	DESCRIPTION	CREDITS
MSPA 526: Pathophysiology	This course is designed to provide the basic pathophysiologic understanding of diseases and the resulting clinical presentation.	2
MSPA 512: Anatomy II with Lab	This course builds on Anatomy I investigating the functional anatomy of the human body by offering students the opportunity to locate, identify, and dissect all major muscular, nervous, vascular, bony, and soft tissue structures using cadaveric specimens.	4
MSPA 522: Physiology/Biochemistry II	This course builds on Physiology I to offer a fundamental and integrated approach to human physiology with emphasis on the study of the body's functional system from a medical perspective.	2
MSPA 552: History and Physical Exam II with Lab	This on-going course builds on H&P I in developing skills of obtaining a comprehensive history and a problem focused history; performing a comprehensive screening exam and an appropriate problem focused exam; the ability to integrate and interpret the findings from any of these to create a foundation for further clinical evaluation. Emphasis is placed on identifying normal versus abnormal findings and on accurate and appropriate documentation.	3
MSPA 571: Clinical Pharmacology I	This course builds on Introduction to Clinical Pharmacology with advanced principles of pharmacology, including mechanisms of action; absorption, distribution, metabolism, and excretion; pharmacokinetics; interactions with other drugs and with food; problems with special populations (prenatal, neonatal, and elderly); rational drug usage for clinical disorders (therapeutics); clinical measures; and toxicology.	2
MSPA 611: Clinical Medicine I with Lab	This ongoing body systems based course integrates all the skills and learning from the curriculum as related to medical problems encountered in the primary care setting. Emphasis is on the integration of anatomy, physiology, pathophysiology, microbiology, history and exam findings and diagnostic procedures in order to formulate a differential diagnosis; on ordering and interpreting diagnostic tests in order to develop a working diagnosis; and on developing and implementing treatment plans including as needed therapeutic procedures, pharmacology, referral, and patient education and counseling.	4
MSPA 632: Integrative Medicine and Practice I	This ongoing course exposes students to the philosophies, concepts, techniques and practice of a variety of alternative and complementary medicine.	1
MSPA 642: Medical Seminar	This ongoing course utilizes a variety of techniques designed to supplement and integrate content from all didactic courses, including but not limited to: small group interaction; problem based learning; case based learning; simulation lab; reflective discussion and literature critique.	2
Term Total: 20		

THIRD TERM	DESCRIPTION	CREDITS
MSPA 553: History and Physical Exam III with Lab	This on-going course builds on H&P I and II in developing skills of obtaining a comprehensive history and a problem focused history; performing a comprehensive screening exam and an appropriate problem focused exam; the ability to integrate and interpret the findings from any of these to create a foundation for further clinical evaluation. Emphasis is placed on identifying normal versus abnormal findings and on accurate and appropriate documentation.	4
MSPA 572 Clinical Pharmacology II	This course builds on Clinical Pharmacology I with more advanced principles of pharmacology, including mechanisms of action; absorption, distribution, metabolism, and excretion; pharmacokinetics; interactions with other drugs and with food; problems with special populations (prenatal, neonatal, and elderly); rational drug usage for clinical disorders (therapeutics); clinical measures; and toxicology.	2
MSPA 612: Clinical Medicine II with Lab	This ongoing body systems based course integrates all the skills and learning from the curriculum as related to medical problems encountered in the primary care setting. Emphasis is on the integration of anatomy, physiology, pathophysiology, microbiology, history and exam findings and diagnostic procedures in order to formulate a differential diagnosis; on ordering and interpreting diagnostic tests in order to develop a working diagnosis; and on developing and implementing treatment plans including as needed therapeutic procedures, pharmacology, referral and patient education and counseling.	8
MSPA 604: Professional Practice and Policy	This course incorporates the history, development, certification, licensure, reimbursement and key organizations of the PA profession as well as the role of the PA in public health and state and federal policy making.	2
MSPA 561: Health, Wellness and Nutrition Throughout the Lifespan	This course will emphasize disease prevention, health promotion during various stages of life with emphasis on the pediatric and geriatric population.	2
MSPA 603: Medical Ethics	This course presents the student with the four topic method of evaluation of Ethical issues. Each student will look at the ethical issue presented looking at Medical indications, patient preferences, quality of life and contextual features to provide a response to the ethical dilemma. The course will provide a foundation for the student to work through ethical dilemmas provided by the professor. During this course the student will identify and evaluate ethical issues of their own and touch upon options and solutions and provide the student with the ability to employ those methods throughout their career.	2
MSPA 633: Integrative Medicine and Practice II	This ongoing course exposes students to the philosophies, concepts, techniques and practice of a variety of alternative and complementary medicine.	2
MSPA 643: Medical Seminar II	This ongoing course utilizes a variety of techniques designed to supplement and integrate content from all didactic courses, including but not limited to: small group interaction; problem based learning; case based learning; simulation lab; reflective discussion and literature critique.	2

Term Totals: 24		
FOURTH TERM	DESCRIPTION	CREDITS
MSPA 613: Clinical Medicine III with Lab	This ongoing body systems based course integrates all the skills and learning from the curriculum as related to medical problems encountered in the primary care setting. Emphasis is on the integration of anatomy, physiology, pathophysiology, microbiology, history and exam findings and diagnostic procedures in order to formulate a differential diagnosis; on ordering and interpreting diagnostic tests in order to develop a working diagnosis; and on developing and implementing treatment plans including as needed therapeutic procedures, pharmacology, referral and patient education and counseling.	8
MSPA 620: Fundamentals of Surgery with Lab	This course presents the fundamentals of the approach to surgery and the surgical patient. Emphasis is on pre, intra and post-operative care; surgical skills and techniques; management of complications, and patient education and counseling.	4
MSPA 602: Information Literacy and Medical Writing	This course builds on Information Literacy I by integrating and applying those skills by requiring students to write in various scientific and medical formats.	2
MSPA 608: Global Health	This course offers the student the opportunity to investigate the impact of health issues in other countries and the interactive effect on all populations in terms of epidemiology, disease, disasters, economics, health initiatives, ethics and policy.	2
MSPA 634: Integrative Medicine and Practice III	This ongoing course exposes students to the philosophies, concepts, techniques and practice of a variety of alternative and complementary medicine.	2
MSPA 644: Medical Seminar III	This ongoing course utilizes a variety of techniques designed to supplement and integrate content from all didactic courses, including but not limited to: small group interaction; problem based learning; case based learning; simulation lab; reflective discussion and literature critique.	2
MSPA 573: Clinical Pharmacology III	This course builds on Clinical Pharmacology II with additional advanced case-based principles of pharmacology, including mechanisms of action; absorption, distribution, metabolism, and excretion; pharmacokinetics; interactions with other drugs and with food; problems with special populations (prenatal, neonatal, and elderly); rational drug usage for clinical disorders (therapeutics): clinical measures; and toxicology.	1
MSPA 651: Clinical Clerkship I	One of the core supervised clinical clerkships for the Physician Assistant student.	4
Term Total: 25		

FIFTH TERM	DESCRIPTION	CREDITS
MSPA 652: Clinical Clerkship II	One of the core supervised clinical clerkships for the Physician Assistant student.	4
MSPA 653: Clinical Clerkship III	One of the core supervised clinical clerkships for the Physician Assistant student.	4
MSPA 654: Clinical Clerkship IV	One of the core supervised clinical clerkships for the Physician Assistant student.	4
MSPA 644: Medical Seminar	This is a continuation of the didactic course. During this course, presented in the supervised clinical experience period, topics in Clinical Medicine, Integrative Medicine, Global Health and Medical Ethics are presented.	2
Term Total: 14		

SIXTH TERM	DESCRIPTION	CREDITS
MSPA 655: Clinical Clerkship V	One of the core supervised clinical clerkships for the Physician Assistant student.	4
MSPA 656: Clinical Clerkship VI	One of the core supervised clinical clerkships for the Physician Assistant student.	4
MSPA 698: Capstone Project	This is the capstone research project where the student is required to complete and submit their research paper of publishable quality to the faculty.	2
MSPA 645: Medical Seminar	This is a continuation of the didactic course. During this course, presented in the supervised clinical experience period, topics in Clinical Medicine, Integrative Medicine, Global Health and Medical Ethics are presented.	2
Term Total: 12		

SEVENTH TERM	DESCRIPTION	CREDITS
MSPA 657: Clinical Clerkship VII	One of the core supervised clinical clerkships for the Physician Assistant student.	4
MSPA 670: Clinical Clerkship VIII	An elective specialty supervised clinical experiences for the Physician Assistant student.	4
MSPA 680: Clinical Clerkship IX	A supervised clinical experience for the Physician Assistant student.	4
Term Total: 12		

CORE SUPERVISED CLINICAL CLERKSHIPS

All students are required to complete all of the seven core supervised clinical clerkships. The clinical clerkship sequence will be individually assigned to students.

Emergency Medicine - The Emergency Medicine clerkship gives the physician assistant student direct involvement and experience in a hospital Emergency Department setting. This will provide the student with practical clinical experience in the diagnosis, evaluation, and management of a wide range of emergent medical, orthopedic, traumatic, and surgical conditions. Students will participate in the care of pediatric and adult patients in all triage acuity classifications. This experience consists of a six week supervised clinical experience in an affiliated hospital emergency department designed to further develop the concepts of diagnosis and management acquired during the pre-clinical course-work and to develop decision-making and cognitive skills related to patient care in an emergency room. This course will also provide the student a chance to develop additional clinical psychomotor skills by performing routine basic procedures in a supervised setting. By the completion of the rotation, the student will have gained an appreciation for the delivery of emergency medical care as well as an understanding of the role of the PA in the Emergency Department setting.

Family Medicine - This six week clinical clerkship is designed to expose the student to a variety of common ambulatory care situations. Settings vary, but experiences are centered on primary care, general medicine, and family practice. Students are responsible for eliciting chief complaints, gathering pertinent historical data, and performing relevant physical examinations. Students are also expected to develop problem lists, diagnostic impressions and therapeutic plans. These are to be presented to the preceptor in an organized, thoughtful manner. Students are expected to attend conferences on primary care problems when offered and participate in other assigned activities.

Internal Medicine - This 6 week clerkship is designed to provide an opportunity for the student to build on previous didactic experience and begin to develop competence in clinical medicine. The student is exposed to patients with a wide group of acute and chronic medical conditions. This clerkship will emphasize skills in gathering historical data, examination of patients, and provide the opportunity to perform a variety of diagnostic and therapeutic procedures. Students will interpret laboratory, EKG, and a variety of radiology studies. Students will formulate treatment plans; participate in discharge planning and patient education.

Obstetrics and Gynecology - This six week clerkship is designed to provide the student with exposure to common prenatal and gynecological problems. Hospital and clinic settings offer the student a wide range of outpatient and/or inpatient experience. The student will become confident with the routine gynecological evaluation and patient education. The student may have the opportunity to participate in labor and delivery. Emphasis is placed on data gathering, differential diagnosis, patient management, maintenance of medical records, performance of diagnostic and therapeutic skills, follow-up care, and the provision of health education and counseling.

Pediatrics - This six week clerkship is designed to provide the student with exposure to common pediatric problems. Emphasis is placed on assessment and management of normal and abnormal growth and development, as well as acute and chronic disease states. The student will develop skills in obtaining historical information and examining the pediatric patient. While most of the experience will occur in the office setting, the student will have the opportunity to be involved on the pediatric inpatient setting also.

Psychiatry/Behavioral Medicine - This six week clerkship provides students experience in working with patients who have psychiatric, behavioral or substance abuse problems. Emphasis is placed on the recognition and management of these problems. The student will learn how to do a mental status exam and medically assess the patient to screen for non-psychiatric causes of the patient's clinical presentation. The student will be involved in treating patients with psychiatric as well as co-occurring disorders with alcohol, benzodiazepine or opiate dependence.

Surgery - This is a six week clerkship on an inpatient surgical service with hospital operating room experiences. The student is exposed to the concepts and principles which characterize the practice of medicine in general surgery, while participating in the pre- and post-operative evaluation and care of surgical patients. The role of the physician assistant student on the general surgical service includes performing the admission history and physical examination, monitoring and recording patient progress on daily rounds, performing and/or assisting with diagnostic and therapeutic procedures, assisting the surgeon in the operating room; participating in the post-operative care and management of patients, in addition to providing patient/family education and support.

Physician Assistant Institute – General Office Information

Program Office Hours:

The PA program office hours are 8:30 am to 4:30 pm (Monday through Friday).

Faculty Office Hours:

Appointments may be made through the program office at 203-576-2400.

Copy Machine, Fax and Telephone:

These are for PA program office staff and faculty.
Ask for assistance if copies are needed for program activities.
Personal copies may be charged a fee.

Program Contact Information

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Physician Assistant Institute
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Appendix A - Physician Assistant Institute – REMEDIATION POLICY

Advancement through the Program is based on the demonstration of the student's ability to master the content, skills and professional behaviors consistent with the University of Bridgeport's Physician Assistant Institute expectations. These expectations are delineated in the Student Handbook, in the 'Competencies for Physician Assistants' and in course and lecture objectives. The remediation process is based on the stated goals and objectives of the Physician Assistant Institute. The goal of the process is that the student may become a more effective learner, improve competency and professional performance, and retain and apply course content.

The goal of the remediation process is to assist the student to assess their approach, understanding, knowledge and application of medical knowledge. The student is expected to be accountable for his/her own academic, clinical and professional progress. It is the student's responsibility to seek assistance when experiencing personal, academic or clinical difficulty during the didactic and clinical periods. It is the course instructor/coordinator and/or advisor's responsibility to provide appropriate assistance and guidance following the outlined process.

A student is limited to one (1) remediation per course, per term except in the clinical medicine course where two (2) module remediations are allowed. After remediation the student is expected to have developed the necessary study skills and knowledge. The student may seek referral to University or private academic professional resources as needed.

Academic Remediation Policy and Procedure for Courses

(See Separate Remediation Policy and Procedure for the Clinical Medicine Courses)

- A student who receives less than 70% on an exam will be required to remediate by taking a remediation exam covering the same concepts and material.
- The student is encouraged to meet with the instructor prior to the remediation exam to assess time management, study skills, individual strengths and weaknesses and circumstances that may be interfering with the student's performance.
- The original exam grade and the remediation exam grade will be averaged for the final score. The final score cannot be higher than 75%.
- A student who receives a 'D' or lower in a course must repeat that course and earn a 'C' or higher.
 - Recognizing that the didactic and clinical courses are sequential and unique to the Program, this may require sitting out a year until that course is offered again.

Clinical Medicine and Lab I, II, and III Remediation Policy and Procedure

Clinical Medicine and Lab courses are comprehensive and presented in system based modules in accordance with the NCCPA Blueprint. These courses utilize outside clinicians and adjuncts. Recognizing the unique aspect of this course there is a separate remediation policy and procedure.

- Each module should have two exams or assessments.
- Only modules are remediated.
- A student may only remediate two modules per term.
- Any student, who receives below a 70% as a module grade, must remediate that module. Students are encouraged to meet with the instructor/coordinator before taking the module remediation exam. For remediation the student will be given an exam covering the concepts and materials from the module.
- The original module score and the module remediation exam score will be averaged together and will result in the final module grade up to 75%.
- Successful remediation can bring a student's grade to 75% but no higher.
- There is no remediation for individual module assessments (i.e. exams, quizzes, assignments or lab activities).
- There is no remediation for the final comprehensive clinical medicine exam.

Clinical Clerkship Remediation Policy and Procedure

There is no remediation for clinical clerkships. Failure to receive a C or better clerkship grade or receiving a failing end-of-clerkship evaluation from the preceptor may require repeating the clerkship. Repeating any clerkship will result in a delay of graduation.

Behavioral Remediation Policy and Procedure

The expectations of ethical and professional behaviors are delineated in the Student Handbook and the 'Competencies for Physician Assistants'.

- A student who demonstrates unprofessional behavior in academic work or in the classroom to peers, faculty or to mock or real patients will meet with the course instructor/coordinator. A plan of remediation will be developed. The instructor/coordinator will notify the student's advisor and Program Director of the meeting and remediation process and result.
- A student who violates ethical expectations will meet with the Program Director and a plan of action will be developed.
- A second observation of unprofessional behavior will require the student to meet with the Program Director and Medical Director and a plan of action will be developed.
- Such a plan of action may include dismissal from the Program.

Definitions

1. Good Standing: Status of a student who has met course requirements in a satisfactory manner and has demonstrated good professional behavior.
2. Warning: Status of a student whose performance in an academic course or clinical rotation places him/her in jeopardy of falling below the minimum stated standards, or who has exhibited questionable professional behavior.
3. Probation: Status of a student whose performance in an academic course or clinical rotation has fallen below the minimum stated standards, or has exhibited unacceptable professional behavior.
4. Dismissal: Action, whereby a student will be dismissed from the Physician Assistant Institute or University of Bridgeport due to failure to adhere to academic, clinical, and/or professional standards. Dismissal will occur after review of the student's academic, clinical and/or professional deficiency by the PA Faculty, the Program Director, the Progress and Promotion Committee and with approval of the Provost.

Dismissal

Students may be dismissed for failure to comply with academic, clinical, or professional standards.

1. A student fails to meet the academic standards.
2. A student receives a D grade (below 70%) in any didactic or supervised clinical practice.
3. A student fails to achieve the plans and outcomes as required in a remediation agreement.
4. A student's professional conduct violates the performance standards set forth in the Student Honor Code, state or federal law, or for moral turpitude, unprofessional behavior, criminal activity, or other reasons as defined by the University.
5. University of Bridgeport reserves the right to dismiss at any time a student who, in its judgment, is undesirable and whose continued enrollment is detrimental to him/herself or his/her fellow students or whose presence is disruptive to the learning environment or the orderly operation of the Institute or University.

Appendix B:

University of Bridgeport - Physician Assistant Institute Division of Health Sciences

Acknowledgment of Student Handbook

I have received a copy of the Physician Assistant Institute Student Handbook, have read its contents, and acknowledge understanding of the materials contained therein. I have read and understand the Academic and Behavior Policies for the University of Bridgeport Physician Assistant Institute. I acknowledge my personal and professional responsibility to comply with the requirements set forth by the University of Bridgeport in the UB Key and the Physician Assistant Institute Student Handbook.

Student's Name (print): _____

Student's Signature: _____ Date: _____