



RUSH University Medical Center

College of Health Sciences

Department of PA Studies

**PA Program Class of 2025
Student Handbook**

2023-2024



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Introduction

Welcome to the RUSH University Physician Assistant (PA) Program!

This handbook describes the policies and procedures specific to the PA Program and applies to all students, faculty, and staff of the program. It should be used as a supplement to other RUSH University catalogs, which can be found here: [RUSH University Catalog 2022-2023](#) and [College of Health Sciences \(CHS\) Catalog 2022-2023](#).

The information contained in this handbook does not supplant or replace any other University or CHS policies. There is a handbook that outlines clinical year policies and procedures that students will receive at the beginning of their second and third years. Additional policies related to specific courses may also exist and are described as appropriate in related course materials. The policies described in these handbooks apply to all students and faculty.

RUSH Mission, Vision, and Goals Statements

PA Program Mission

The RUSH University PA program mission is to educate advanced health care providers to practice evidence-based medicine with competence, professionalism, and compassion driven by academic excellence and service to diverse communities.

PA Program Vision

The RUSH University PA Program strives to be a national leader in educating exceptionally qualified PAs to transform clinical and professional practice.

PA Program Goals

1. Prepare PAs to practice interprofessional, patient-centered care
2. Promote leadership, service, and advocacy to the profession
3. Provide enhanced training opportunities to students in various areas of clinical practice
4. Prepare PAs who use evidence-based methods to plan, develop, and deliver high quality, cost-effective healthcare
5. Promote an environment of diversity, equity, inclusion, and cultural humility

The PA Program is also dedicated to fulfilling the mission, vision, and values of the College, the University, and the Health System.

College of Health Sciences Mission

The Mission of the College of Health Sciences is to advance the quality and availability of health care through excellence in education, research and scholarship, service, and patient care. The college promotes the values of diversity, access, and inclusion in all of its endeavors.

College of Health Sciences Vision

The College of Health Sciences at RUSH University will be a world-class school of allied health sciences whose programs are recognized as among the best in the United States.

College of Health Sciences Diversity Statement

The College of Health Sciences at RUSH University supports an environment that values individuals and encourages engagement. Respecting multiple experiences and perspectives will serve to challenge all individuals to learn from each other. By promoting diversity, inclusion and intellectual exchange, we will not only mirror society as it is, but also model society as it should and can be.

College of Health Sciences Diversity Statement (continued)

Diversity encompasses the range of human differences, including but not limited to race, ethnicity, gender, gender identity, sexual orientation, age, socioeconomic status, physical ability, cognitive, linguistic, or psychosocial abilities, religious or ethical values system, national origin, and political beliefs. Inclusion is involvement and empowerment in which the inherent worth and dignity of all people are recognized. As an inclusive college, we will promote and sustain a sense of belonging, as well as value and respect the talents, beliefs, and backgrounds of all individuals.

RUSH University Mission

RUSH University provides outstanding health sciences education and conducts impactful research in a culture of inclusion, focused on the promotion and preservation of the health and well-being of our diverse communities.

RUSH University Vision

The RUSH learning community will be the leading health sciences university committed to transforming health care through innovative research and education.

RUSH Health System Mission

The mission of RUSH is to improve the health of the individuals and diverse communities we serve through the integration of outstanding patient care, education, research, and community partnerships.

RUSH Health System Vision

RUSH will be the leading academic health system in the region and nationally recognized for transforming health care.

RUSH Health System Values

RUSH's core values — innovation, collaboration, accountability, respect and excellence — are the roadmap to our mission and vision.

These five values, known as our I CARE values, convey the philosophy behind every decision a RUSH employee makes. RUSH employees also commit themselves to executing these values with compassion. This translates into a dedication — shared by all members of the RUSH community — to providing the highest quality patient care.

RUSH University
PA Program Performance on Goals
Update 2022

The RUSH University PA Program uses its mission as the foundation for its goals and is the basis for assessing our program's performance. The following is a review of the program's goals, the assessment mechanism used to evaluate the program's achievement in attaining its goals, and performance outcome data to support our program's success in achieving its goals through the graduating Class of 2021:

Goal 1 - Prepare PAs to practice interprofessional, patient-centered care

Assessment Mechanisms: Evaluation of the program's curriculum, simulation lab, co-curricular training activities, outcome performance data, graduate surveys, and employment data.

Performance Outcome:

- PA students are integrated into IPE 502, RUSH's highly-rated interprofessional education course.
- Multiple didactic courses– PHA 512, PHA 513, PHA 525, PHA 533, and PHA 535 – reinforce training in principles of patient-centered communication.
- Coursework, simulation-based training, and standardized patient encounters reinforce student learning of patient-centered care throughout the curriculum.
- Students work on interprofessional teams during clinical rotations.
- Clinical preceptors consistently give positive feedback on students' knowledge, communication, collaboration, and skills.
- RUSH PA graduates are employed throughout the country in various professional settings, including HRSA-designated medically underserved communities.

Goal 2 - Promote leadership, service, and advocacy to the profession

Assessment Mechanisms: Evaluation of participation in PA Program Student Society and RUSH's community service activities, service hour logs, IAPA/AAPA representation, participation in Challenge Bowl at state/national conferences, and graduate engagement activities.

Performance Outcome:

- Students typically exceed the annual minimum 12 hours of service activity requirement.
- Students hold leadership positions both within the program and at the University.
- Students are members of both the Illinois Academy of Physician Assistants and the Student Academy of the American Academy of Physician Assistants and actively participate in legislative decision-making and advocacy activities.
- Two students per year are offered a Grainger Scholarship, which promotes service to underserved communities in Chicago.
- RUSH PA graduates are engaged and give back to the program and profession through guest lecturing, precepting, mentorship, and program committee membership.

Goal 3 - Provide enhanced training opportunities to students in various areas of clinical practice.

Assessment Mechanisms: Evaluation of advanced rotation placement growth, types and locations of clinical rotations, participation in simulation curriculum, participation in global health trips

Performance Outcome:

- Students complete 30 weeks of advanced clinical rotations during the program's third year.
- Students are consistently placed in one of their top three choices for advanced clinical rotations.
- Students complete a longitudinal simulation curriculum that provides hands-on skills training, ultrasound practice, and high-fidelity simulated patient cases.
- Students complete three elective rotations in an area of their choice during clinical rotations.
- Students annually participate in Global Health trips to the Dominican Republic with primary care and surgical teams.
- Students complete longitudinal training on substance use disorders.
- Students meet all performance requirements and demonstrate the acquisition of increasing skills and knowledge as they progress through the program.

Goal 4 - Prepare PAs who use evidence-based methods to plan, develop, and deliver high-quality, cost-effective healthcare.

Assessment Mechanisms: course grades, final preceptor evaluations

Performance Outcome:

- Students complete a longitudinal research curriculum culminating in a master's research project and presentation.
- Clinicians educate and train students using evidence-based and best-practice methods, and training includes considerations of both quality and cost of care.

Goal 5 - Promote an environment of diversity, equity, inclusion, and cultural humility

Assessment Mechanisms: Evaluation of curriculum and courses, participation in PA Student Society, and RUSH community service and engagement activities.

Performance Outcome:

- Students complete Psychosocial Medicine and Public Health and Epidemiology courses emphasizing cultural awareness, humility, and inclusiveness.
- Students volunteer with various community service programs through the RUSH Community Services Initiative program (RCSIP).
- Students attend RUSH's regularly sponsored DEI presentations and activities.
- The PA Student Society class officers include up to two Diversity Chairs, who develop diversity, equity, and inclusion opportunities for PA and other university students.

Institutional and Program Accreditation

RUSH PA Program Accreditation Status

The Accreditation Review Commission on Education for the Physician Assistant (ARC-PA) accredits PA programs. The ARC-PA has granted Accreditation-Continued status to the PA Program sponsored by RUSH University. Accreditation-Continued is an accreditation status granted when a currently accredited program complies with the ARC-PA Standards.

Accreditation remains in effect until the program closes or withdraws from the accreditation process or until accreditation is withdrawn for failure to comply with the Standards. The approximate date for the next validation review of the program by the ARC-PA will be March 2024. The review date is contingent upon continued compliance with the Accreditation Standards and ARC-PA policy.

The accreditation status of the RUSH University PA Studies Program is public information, and the program will make its accreditation status known to prospective applicants, students, and the general public through appropriate program publications, the program web site, or upon request.

RUSH University Accreditation

RUSH University is accredited by the Higher Learning Commission (HLC), a regional accrediting agency that accredits degree-granting post-secondary educational institutions in the North Central region, which includes 19 states. In its accreditation process, HLC assesses the academic quality and educational effectiveness of institutions and emphasizes institutional structures, processes, and resources.

RUSH University has been accredited by the Higher Learning Commission (HLC) of the North Central Association of Colleges and Schools since 1974. The HLC has reaffirmed RUSH's accreditation status through 2028-2029.

Additionally, all health care practice or administration degree programs offered by RUSH University are accredited by their respective governing body.

General Program Information

Program Curriculum

The RUSH University PA Program is part of the College of Health Science's Department of PA Studies. The program offers a 30-month graduate curriculum, culminating in a Master of Science (MS) in Physician Assistant Studies. The curriculum is divided into three components. The first year involves 12 months of didactic course work comprised of lectures, laboratory work, hands-on learning experiences, and independent study.

The second year of the program begins clinical training, consisting of 8-week rotations in Internal Medicine and General Surgery, and 4-week rotations in Family Medicine, Emergency Medicine, Obstetrics and Gynecology, Pediatrics, Behavioral Health, and Long-Term-Care/Rehabilitation medicine. Students are also provided with two 4-week elective rotations in an area of their choosing. Rotations are hands-on learning experiences where students apply the knowledge gained in the didactic year towards patient care. Clinical rotations occur in both inpatient and outpatient settings. While on rotation, students are expected to work a minimum of 32-hours per week and will participate in all patient care activities, which may include taking call, admitting patients, and participating in all scheduled learning activities, such as Grand Rounds, Return to Campus events, Medication-Assisted Treatment Curriculum, and Simulation Sessions.

The third year of the program provides advanced clinical training. This consists of six months of rotations in a single specialty, which will allow students to enhance their medical knowledge and patient care skills. Students are also provided one opportunity for an in-state elective rotation during the third year. Opportunities for advanced clinical rotations are continuously expanding; the program currently offers rotations in a variety of areas in both medical and surgical practices. As in second year rotations, students are expected to work a minimum of 32 hours per week in various patient care activities as assigned as well as participate in all scheduled learning activities. An elective rotation is also included. The third year also provides students with leadership development opportunities and a board review course.

The sequencing and site placement of rotations is made at the sole discretion of the PA faculty. Sites within a 90-mile or 90-minute drive, without traffic, are considered reasonable boundaries for site placement. More information regarding clinical rotations is provided before students embark on their second year and can be found in the clinical year handbooks.

As part of the master's component of the curriculum, students are expected to become proficient in reviewing, analyzing, and applying current research literature towards effective, evidence-based clinical decision-making. Students are introduced to research and statistical methods in the first year of the program and these concepts are reinforced throughout the program. To showcase research competence, students develop a master's research project. For this project, students work with a faculty mentor to identify an issue of clinical interest and create a research proposal. Students conduct a literature review, formulate a research question, and create study methodology to investigate their research question. For the final component of the master's research project, students create a poster and present their research proposal to classmates and members of the faculty. The primary goal of this project is to familiarize students with the components of research through the creation of their own unique project.

PA Curriculum Sequence

Note: Changes to the course sequence may occur at the discretion of the PA Program and may be implemented at any time.

Program Year 1 Didactic Courses

Term I - Summer Semester

Credit Hours (16)

PHA 510	Human Physiology	2
PHA 511	Human Anatomy	4
PHA 512	History & Physical Examination	3
PHA 513	PA Professional Practice	2
PHA 514	Clinical Medicine I	5

Term II - Fall Semester

Credit Hours (17)

PHA 520	Principles of Clinical Pharmacology I	3
PHA 521	Research & Statistics	2
PHA 522	Diagnostic Reasoning I	2
PHA 523	Public Health and Epidemiology	2
PHA 524	Clinical Medicine II	6
PHA 525	Principles of Advanced Practice I	2
IPE 502	Interprofessional Patient Centered Teams	0

Term III - Spring Semester

Credit Hours (19)

PHA 530	Principles of Clinical Pharmacology II	3
PHA 532	Diagnostic Reasoning II	2
PHA 533	Psychosocial Medicine	2
PHA 534	Clinical Medicine III	6
PHA 535	Principles of Advanced Practice II	2
PHA 536	Emergency and Surgical Medicine	2
CHS 605	Ethics in Healthcare	2
IPE 502	Interprofessional Patient-Centered Care	0

Total Credit Hours for Year 1:

52-Total Credit Hours

Program Year 2 Core Clinical Rotations Sample rotation sequence, individual schedules will vary.

<i>Term I - Summer Semester</i>	<i>Credit Hours</i>
PHA 581 Family Medicine	4
PHA 582 Internal Medicine I	4
PHA 583 Internal Medicine II	4
PHA 584 General Surgery I	4
<i>Term II - Fall Semester</i>	<i>Credit Hours</i>
PHA 585 General Surgery II	4
PHA 586 Obstetrics and Gynecology	4
PHA 587 Pediatrics	4
PHA 588 Behavioral Health	4
<i>Term III - Spring Semester</i>	<i>Credit Hours</i>
PHA 589 Long Term Care/Geriatrics	4
PHA 590 Emergency Medicine	4
PHA 591 Elective I	4
PHA 592 Elective II	4
Total Credit Hours for Year 2	48

Program Year 3 Advanced Practice Rotations

<i>Term I - Summer Semester</i>	<i>Credit Hours</i>
PHA 593 - Advanced Clinical Practice I	15
PHA 595 - Master's Research Project I	1
<i>Term II - Fall Semester</i>	<i>Credit Hours</i>
PHA 594 - Advanced Clinical Practice II	15
PHA 596 - Master's Research Project II	1
Total Credit Hours for Year 3	32
PA Program Total Credits for 30 Months	132

Course Descriptions

Program Year I

SUMMER

PHA 510 – Human Physiology (2 credit hours)

This lecture-based course will present a comprehensive and advanced review of organ systems, including human physiologic function, regulation, and integration as a basis for understanding the complex interaction of specific body systems and their relationship to disease. Commonly occurring pathophysiologic processes will be introduced to prepare students for more in-depth learning about specific disease states and patient presentations in subsequent courses.

Pre-requisite for PHA 510: none

Co-Requisite for PHA 510: Concurrent enrollment in PHA 511

PHA 511 – Human Anatomy (4 credit hours)

This course provides students with a thorough understanding of the principles of functional and applied human anatomy necessary for the practice of clinical medicine. The course is driven primarily by the laboratory (small group) sessions with lectures given to prepare students for the lab and provide supplementary information.

Pre-requisite for PHA 511: none

Co-Requisite for PHA 511: Concurrent enrollment in PHA 510

PHA 512 – History & Physical Examination (3 credit hours)

This course is designed to teach PA students the proper techniques for patient assessment. This course covers how to conduct an effective medical interview, how to document clinical findings in the medical record, and how to perform a physical exam. Both the comprehensive and problem focused medical history formats will be discussed and students will practice proper documentation using the SOAP note format. Students will learn how to perform a comprehensive physical examination and to recognize the normal examination findings associated with each organ system. The course will also introduce students to common pathological PE findings, and to interpret the significance of these findings to diagnosing disorders. Finally, students will learn to accurately record PE findings as part of a patient medical record. The course material will be presented sequentially in an organ-system basis.

The course will present techniques to facilitate accurate and efficient data collection, to foster effective patient communication, and to develop appropriate patient centered responses to different patients in the clinical setting. Developing skills to effectively educate, counsel, and influence patient behaviors will also be discussed.

Pre-requisite for PHA 512: none

Co-Requisite for PHA 512: none

PHA 513 – PA Professional Practice (2 credit hours)

This two-credit course will introduce and familiarize students with the issues of importance affecting PA practice and the profession.

Topics include the history and development of the PA profession, professionalism and professional behavior, the physician-PA relationship, PA scope of practice and professional regulations, including licensure, certification and recertification, PA program accreditation, and PA professional organizations. The course also introduces students to legal issues in healthcare regarding PA practice, including practice ethics, patient confidentiality regulations, professional liability, billing and reimbursement, quality assurance, and risk management.

Pre-requisite for PHA 513: none

Co-Requisite for PHA 513: none

PHA 514 – Clinical Medicine I (5 credit hours)

This is the first in a three-part course series designed to provide an intensive study of the principles essential to the practice of primary care medicine. Lectures will discuss the etiology, pathophysiology, clinical presentation, diagnostic evaluation, and management principles of various diseases in the following topic categories: introduction to pharmacology, genetics, otolaryngology, general pediatrics, infectious diseases, hematology, immunology, orthopedics, and rheumatology. Lectures, readings, case study analysis, and discussion of specific disorders in each category will provide an understanding of the key clinical concepts relevant to disease diagnosis and patient care.

Pre-requisite for PHA 514: none

Co-Requisite for PHA 514: Concurrent enrollment in PHA 510, PHA 511, and PHA 512

FALL

IPE 502 – Interprofessional Patient Centered Teams (0 credit hours)

IPE 502 will introduce students to the four Interprofessional Educational and Collaborative Practice (IPEC) domains: Values/Ethics, Roles/Responsibilities, Teams/Team work, and Communication. Students will use experiential team-based learning to apply knowledge, skills, and values of the IPEC competencies.

Pre-requisite for IPE 502: none

Co-Requisite for IPE 502: none

PHA 520 – Principles of Clinical Pharmacology I (3 credit hours)

This is the first in a two-part course series designed provide students with an intensive study of the principles OF pharmacology and pharmacotherapeutics required for patient care. Emphasis in the course is placed on the applications of pharmacological principles in primary care medicine.

This course is organ system-based; the topics discussed will mirror the major organ systems covered in Clinical Medicine II. Pharmacological principles discussed in this course include principles of pharmacology and drug action; pharmacokinetics and dynamics; drug dosage calculation; the usage profile for major classes of clinically important drugs, including indications, contraindications and side effects, and dosing and administration; principles of drug selection, and assessment of therapeutic efficacy and outcome.

Pre-requisite for PHA 520: Successful completion of PHA 510, PHA 511, and PHA 514

Co-Requisite for PHA 520: Concurrent enrollment in PHA 524

PHA 521 – Research and Statistics (2 credit hours)

This blended course is designed to discuss the different components and terminology of research, as well as various research models ranging from the highly quantitative to broad qualitative methods. The course will provide a practical approach to research planning through the logical sequence of developing a research proposal pertaining to the research interests of individual students.

Formulation of research questions, hypotheses, literature search techniques, ethical issues and the writing of the research proposal/final research reports and the dissemination of research findings will be discussed. This course is designed to provide the first-time researchers with the skills to undertake research and to write up proposals and final reports in areas of their choice.

Pre-requisite for PHA 521: none

Co-Requisite for PHA 521: none

PHA 522 – Diagnostic Reasoning I (2 credit hours)

This is the first in a two-part course series designed to develop students' skills in clinical problem solving and promote application of knowledge gained throughout PA school for use in patient assessment and management, and formulating patient care plans. In class, students will be presented with clinical case scenarios, which they must analyze and make decisions relevant to patient evaluation and management. Students are encouraged to apply their medical knowledge and to utilize sound,

clinically based texts and online references to derive clinical assessment plans and facilitate case analysis.

The goal of this course is to develop students' clinical critical thinking and problem-solving skills, including utilizing previously learned information and recognition of how to find necessary information to fill knowledge gaps.

Pre-requisite for PHA 522: Successful completion of PHA 512 and PHA 514

Co-Requisite for PHA 522: Concurrent enrollment in PHA 520 and PHA 524

PHA 523 – Public Health and Epidemiology (2 credit hours)

This course is an introduction to principles and practices of population health in the U.S. healthcare system, focusing on the Chicago metropolitan area and Chicago Medical District as an exemplar microcosm to represent the larger health system paradigm. The course will discuss issues related to healthcare access, population health trends, and current topics in public health policy and healthcare reform. Additionally, the role of social determinants of health on disease management is explored as a tool for reviewing health outcomes in the U.S. Course discussions will explore the influence of race, class, gender, immigration, and social status on health care policy. These discussions are designed to provide students with various lenses through which to analyze current and emerging public health policies, practices, and healthcare outcomes.

Pre-requisite for PHA 523: none

Co-Requisite for PHA 523: none

PHA 524-Clinical Medicine II (6 credit hours)

This is the second in a three-part course series designed to provide students with an intensive study of the principles essential to the practice of primary care medicine. Lectures will discuss the etiology, pathophysiology, clinical presentation, diagnostic evaluation, and management principles of various diseases in the following topic categories: gastroenterology, hepatology, nutrition, cardiology, pulmonology; nephrology, urology, and corresponding pediatric specialties. Lectures, readings, case study analysis, and discussion of specific disorders in each category will provide an understanding of the key clinical concepts relevant to disease diagnosis and patient care.

Pre-requisite for PHA 524: Successful completion of PHA 514

Co-Requisite for PHA 524: Concurrent enrollment in PHA 520 and PHA 522

PHA 525 – Principles of Advanced Practice I (2 credit hours)

This is the first of a two-part course series designed to introduce and familiarize students with the skills and knowledge needed for clinical practice. Through large and small group discussions and activities, part I the course series will focus on approaches to patient-centered communication, establishing therapeutic relationships, and the delivery of comprehensive patient education.

Pre-requisite for PHA 525: Successful completion of PHA 512, and PHA 514

Co-Requisite for PHA 525: Concurrent enrollment in PHA 524

SPRING

CHS 605 – Introduction to Ethics in Health Care: Interdisciplinary Perspectives (2 credit hours)

This interdisciplinary course will introduce students to foundational theories of health care ethics, ethical decision-making frameworks, legal and professional standards in health care ethics, institutional and interprofessional ethical constraints, and major ethical issues facing health care professionals. Students will have the opportunity for case analysis and discussion with students from other professions with which they will someday be practicing. Course content will include lecture, online content, case analysis, and discussion.

Pre-requisite for CHS 605: none

Co-Requisite for CHS 605: none

IPE 502 – Interprofessional Patient Centered Teams

IPE 502 will introduce students to the four Interprofessional Educational and Collaborative Practice (IPEC) domains: Values/Ethics, Roles/Responsibilities, Teams/Team work, and Communication. Students will use experiential team-based learning to apply knowledge, skills, and values of the IPEC competencies.

Pre-requisite for IPE 502: none

Co-Requisite for IPE 502: none

PHA 530 – Principles of Clinical Pharmacology II (3 credit hours)

This is the second in a two-part course series designed provide students with an intensive study of the principles OF pharmacology and pharmacotherapeutics required for patient care. Emphasis in the course is placed on the applications of pharmacological principles in primary patient care.

This course is organ system-based; the topics discussed will mirror the major organ systems covered in the Clinical Medicine III. Pharmacological principles discussed in this course include principles of pharmacology and drug action; pharmacokinetics and dynamics; drug dosage calculation; the usage profile for major classes of clinically important drugs, including indications, contraindications and side effects, and dosing and administration; principles of drug selection, and assessment of therapeutic efficacy and outcome.

Pre-requisite for PHA 530: Successful completion of PHA 520 and PHA 524

Co-Requisite for PHA 530: Concurrent enrollment in PHA 534

PHA 532 – Diagnostic Reasoning II (2 credit hours)

This is the second in a two-part course series designed to develop students' skills in clinical problem solving and promote application of knowledge gained throughout PA school for use in patient assessment and management, and formulating patient care plans. In class, students further refine their patient care skills through case analysis and discussion. The format of the course is similar as PHA 522 – Diagnostic Reasoning I, where students will be presented with clinical case scenarios that they must analyze and make decisions relevant to patient evaluation and management. The cases in this term present more complex diagnostic and management issues than in the previous course.

The goal of this course is to further develop students' clinical critical thinking and problem-solving skills, including utilizing previously learned information and recognition of how to find necessary information to fill knowledge gaps.

Pre-requisite for PHA 532: Successful completion of PHA 520, PHA 522, and PHA 524

Co-Requisite for PHA 532: Concurrent enrollment in PHA 530 and PHA 534

PHA 533 – Psychosocial Medicine (2 credit hours)

This two-credit course will explore the psychosocial aspects of patient care to help students develop a greater understanding of the dynamic between one's own and patient's attitudes, biases, and values and the impact these have on one's medical practice, patient relationships, and communication. The course discusses basic counseling and patient education skills necessary to help patients and families cope with illness and injury and to modify behaviors as needed to adhere to therapeutic management plans and improve outcomes. Topics discussed in the course will address the intersection of culture, faith, religion, and sexuality and these forces' impact on attitudes regarding health, wellness, and patient care.

Pre-requisite for PHA 533: none

Co-Requisite for PHA 533: none

PHA 534 – Clinical Medicine III (6 credit hours)

This is the third in a three-part course series designed to provide students with an intensive study of the principles essential to the practice of primary care medicine. Lectures will discuss the etiology, pathophysiology, clinical presentation, diagnostic evaluation, and management principles of various diseases in the following topic categories: neurology, psychiatry, endocrinology, obstetrics and gynecology, geriatrics, preventative medicine, and corresponding pediatric specialties. Lectures,

readings, case study analysis, and discussion of specific disorders in each category will provide an understanding of the key clinical concepts relevant to disease diagnosis and patient care.

Pre-requisite for PHA 534: Successful completion of PHA 520 and PHA 524

Co-Requisite for PHA 534: Concurrent enrollment in PHA 530 and PHA 532

PHA 535 – Principles of Advanced Practice II (2 credit hours)

This is the second of a two-part course series designed to introduce and familiarize students with the skills and knowledge needed for clinical practice. Through large and small group discussions and activities, the course will cover higher order skills such as the approach to communicating patient information, medication selection, dosing and prescription writing, auscultation labs, clinical documentation, and order selection and writing.

Pre-requisite for PHA 535: Successful completion of PHA 512, PHA 524, and PHA 525

Co-Requisite for PHA 535: Concurrent enrollment in PHA 534

PHA 536 – Emergency and Surgical Medicine (2 credit hours)

This two-credit course will provide students with an introduction to the diagnosis and management of diseases and conditions encountered in emergency and urgent care settings. Students will also be introduced to surgical concepts needed to assess patients and provide care in surgical settings. Emergency Medicine lectures will discuss the role of triage, assessment, and management of commonly encountered medical, surgical, and environmental emergencies across the lifespan. Surgical lectures will discuss general surgical concepts. Pre- and post-operative patient assessment and care management will be emphasized.

Pre-requisite for PHA 536: Successful completion of PHA 514 and PHA 524

Co-Requisite for PHA 536: Concurrent enrollment in PHA 534

Program Year II Courses - Core Clinical Rotations Descriptions

Individual rotation schedules will vary

PHA 581 – Family Medicine (4 credit hours)

During this clinical experience in family medicine, students see patients, perform assessments and formulate care plans under the supervision of a physician, PA or advanced practice nurse. Comprehensive, longitudinal care is stressed. Common problems are reviewed, and the responsibilities of a primary care PA are observed and taught. Principles of health, wellness, prevention, recognition and treatment of substance abuse, and chronic disease management and chronic care are introduced in the clinical setting. Patient assessment and management are reviewed to include the generation of a differential diagnosis, and oral presentation of patient data to the supervising physician and appropriate referral of patients.

Prerequisite for PHA 581: Successful completion of all first-year PA program courses

PHA 582 – Internal Medicine I (4 credit hours)

This is the first of a two-part clinical experience designed to introduce students to the practice of internal medicine. Through participating directly in-patient care, students will learn to evaluate and manage a variety of clinical problems. Students further develop their skills in history taking and physical examination and review pathophysiologic principles as a guide to caring for patients.

Students will develop an understanding of relationships between disease states and the patient from the medical, social, and emotional points of view. The team approach allows students the opportunity to actively work toward the goals of quality patient care while reinforcing medical principles. Patient assessment and management are reviewed to include the generation of a differential diagnosis, oral presentation of patient data to the supervising physician and appropriate referral of patients.

Prerequisite for PHA 582: Successful completion of all first-year PA program courses

PHA 583 – Internal Medicine II (4 credit hours)

This second clinical practice rotation is designed to immediately follow Internal Medicine I. The rotation will reinforce student's understanding of internal medicine concepts through practice in an internal medicine subspecialty. Students will further develop their clinical diagnostic and patient management

skills through direct participation in obtaining patient histories and performing physical examinations, developing, and implementing patient care plans, and engaging with other members of the clinical team in a variety of patient care activities.

Prerequisite for PHA 583: Successful completion of all first-year PA program courses

PHA 584 – General Surgery I (4 credit hours)

This is the first of a two-part clinical experience designed introduce students to the principles of preoperative, operative, and postoperative care, diagnosis of surgical disease, indications for surgery, recognition and response to surgical emergencies, and the physiological principles of surgery are presented. Technical experience is provided in the operating rooms. Lectures and/or conferences provide additional direct contact with other members of the interprofessional healthcare team.

Prerequisite for PHA 584: Successful completion of all first-year PA program courses

PHA 585 – General Surgery II (4 credit hours)

This second clinical practice rotation is designed to immediately follow General Surgery I and reinforce general surgery concepts through the practice of a surgical subspecialty. Students will continue their exposure to the principles of preoperative, operative, and postoperative care, diagnosis of surgical disease, indications for surgery, recognition and response to surgical emergencies, and the physiological principles of surgery are presented. Technical experience is provided in the operating rooms. Lectures and/or conferences provide additional direct contact with other members of the interprofessional healthcare team.

Prerequisite for PHA 585: Successful completion of all first-year PA program courses

PHA 586 – Obstetrics and Gynecology (4 credit hours)

This clinical rotation experience will introduce students to patient health maintenance and education needs in the obstetrics and gynecological setting. Students will learn the identification and management principles of conditions unique to women, including normal psychological changes across the lifespan, pregnancy, infertility, gynecologic oncology, family planning, and psychosomatic disorders. Basic, common procedures in obstetrics and gynecology will also be covered.

Prerequisite for PHA 586: Successful completion of all first-year PA program courses

PHA 587 – Pediatrics (4 credit hours)

This clinical rotation experience will allow students to learn the principles and practice patient care from birth to adolescence through direct patient care. Students will learn basic pediatric assessment, diagnosis, treatment, and appropriate referral. The rotation will also provide exposure to developmental milestones, routine immunizations, common childhood illnesses, infant/child safety, and patient/parent education. Seminars, conferences, lectures, and case presentations provide additional learning experiences.

Prerequisite for PHA 587: Successful completion of all first-year PA program courses

PHA 588 Behavioral Health (4 credit hours)

This clinical rotation provides students with experience in the diagnosis and management of patients with psychiatric disorders. Emphasis is on the primary care approach to behavioral health management, including recognition of the biological, psychological, and social/environmental factors that impact patient care, and pharmacologic and behavioral therapy approaches to disorder management.

Prerequisite for PHA 588: Successful completion of all first-year PA program courses

PHA 589 – Long-Term-Care/Geriatrics (4 credit hours)

This clinical rotation provides students with experience in long term care/geriatrics, with a focus on rehabilitative medicine, geriatric medicine, and the care of patients with chronic and/or terminal disease. The rotation also introduces students to physical therapy, occupational therapy, and rehabilitation of patients with physical, psychological, and social disabilities.

Prerequisite for PHA 589: Successful completion of all first-year PA program courses

PHA 590 – Emergency Medicine (4 credit hours)

This clinical rotation provides students with experience in all areas of the emergency department under supervision of attending physicians, PHA or advanced practice nurses. Students will perform histories and physical examinations, record their findings and discuss patients with assigned preceptors. Students will learn the assessment, diagnosis, and treatment of common emergency room disorders, and will formulate diagnoses and treatment plans while considering specific factors pertinent to the setting, such as time, patient risk and cost.

Prerequisite for PHA 590: Successful completion of all first-year PA program courses

PHA 591 – Elective Rotation I (4 credit hours)

The Elective I rotation will provide students with the opportunity for in-depth study in a clinical practice area of their interest. Rotations may take place in various medical or surgical practice areas, as approved by the Director of Clinical Education. Students are expected to provide patient care under the supervision of the preceptor. Learning experiences should include taking histories and performing physical exams, formulating a differential diagnosis, assessment, and treatment plan. Experiences may also include performing common procedures in the specific area of practice or going to the operating room (if applicable).

Prerequisite for PHA 591: Successful completion of all first year PA program courses

PHA 592 – Elective Rotation II (4 credit hours)

The Elective II rotation will provide students with a second opportunity for in-depth study in a clinical practice area of their interest. Rotations may take place in various medical or surgical practice areas, as approved by the Director of Clinical Education. Students are expected to provide patient care under the supervision of the preceptor. Learning experiences should include taking histories and performing physical exams, formulating a differential diagnosis, assessment, and treatment plan. Experiences may also include performing common procedures in the specific area of practice or going to the operating room (if applicable).

Prerequisite for PHA 592: Successful completion of all first year PA program courses

Program Year III Course Description – Advanced Clinical Rotations

SUMMER

PHA 593 – Advanced Clinical Practice I (15 credit hours)

This course is the first part of a two-course series in an advanced area of PA practice. This course consists of a 15-week rotation in a single, focused area of advanced PA clinical practice. Students will select from several areas of medicine or surgery as they are available. Availability of advanced practice clinical areas and locations are determined by the Director of Clinical Education. Advanced clinical rotations will generally require a minimum of 40 contact hours per week.

Advanced clinical practice students will acquire an in-depth knowledge of the care and treatment of patients with in a single focused area while maintaining their study in general, primary care medicine. Students are expected to work with all members of the healthcare team and will be supervised by physicians, PA, or nurse practitioner preceptors at all times. Students may work in an outpatient setting, inpatient setting, emergency room, or operating room. Students are required to attend various clinical education conferences as determined by the clinical preceptor. Educational goals include mastering of history and exam skills, cost-effective and safe laboratory and radiology choices, detailed differential diagnosis, and independent formulation of assessments and plans. Student may be expected to work days, nights, and/or weekends. Call may be required.

Prerequisite for PHA 593: Successful completion of second year PA rotations.

PHA595 – Master’s Research Project I (1 credit hour)

This is the first of a 2-part course sequence that will integrate the critical thinking, application of research data analysis, and presentation skills taught throughout the program in a formative research capstone project. Students are expected to apply knowledge obtained from the PHA521 Research and Statistics, and participation in journal club activities in the development of their project.

Students will work with an assigned faculty advisor to develop a clinical research question and gather, analyze, and critique relevant research literature related to the proposed question to develop an extensive literature review paper. Students will use this information in the next part of the course sequence to prepare a master’s capstone project designed to develop a potential original research study.

Prerequisite for PHA 595: Successful completion of PHA 521 – Research and Statistics

FALL

PHA 594 – Advanced Clinical Practice II (15 credit hours)

This course is the second of a two-part course series and consists of a 15-week rotation in a single, focused area of advanced PA clinical practice. Students will select from several areas of medicine or surgery as they are available. Availability of advanced practice clinical areas and locations are determined by the Director of Clinical Education. Advanced clinical rotations will generally require a minimum of 40 contact hours per week.

Advanced clinical practice students will acquire an in-depth knowledge of the care and treatment of patients with in a single focused area while maintaining their study in general, primary care medicine. Students are expected to work with all members of the healthcare team and will be supervised by physician, PA, or nurse practitioner preceptors at all times. Students may work in an outpatient setting, inpatient setting, emergency room, or operating room. Students are required to attend various clinical education conferences as determined by the clinical preceptor. Educational goals include mastering of history and exam skills, cost-effective and safe laboratory and radiology choices, detailed differential diagnosis, and independent formulation of assessments and plans. Student may be expected to work days, nights, and/or weekends. Call may be required.

Prerequisite for PHA 594: Successful completion of PHA 593 – Advanced Clinical Practice I

PHA 596 – Master’s Research Project II (1 credit hour)

This is the second of a 2-part course sequence that will integrate the critical thinking, application of research data analysis, and presentation skills taught throughout the program in a formative research capstone project. Students are expected to apply knowledge obtained from the PHA521 Research and Statistics, and participation in journal club activities in the development of their project. Students will work with an assigned faculty advisor to develop a feasible clinical research project based on the research question and literature review developed in PHA 595. Students will then prepare a master’s capstone paper and presentation based on their original research study design.

Prerequisite for PHA 596: Successful completion of PHA 595 – Master’s Research Project I.

Graduation Requirements

In order to receive the degree of Master of Science in Physician Assistant Studies, students must:

1. Satisfactorily complete all required curricular course and assessment activities
2. Maintain the program's standards of satisfactory performance (See Academic Performance)
3. Demonstrate competencies appropriate for a new graduate PA (see Appendices K - N)

Additionally, students must meet the following requirements:

1. Always maintain a 3.0 or higher GPA throughout the curriculum
2. Adhere to the program's ethical behavior and professionalism standard
3. Pass all global formative and summative assessments
4. Successfully complete a Master's Research Project
5. Discharge all financial commitments
6. Return in good working order all borrowed and loaned materials

Tuition and Estimated Program Costs

The PA Program charges a flat tuition fee, by term, based on the 30-month curriculum. There are no additional fees associated with attending RUSH.

Tuition for the 2023-2024 academic year is \$106,454. The total tuition amount is evenly divided across each term of the program, equal to \$13,307 per term.

Estimated cost information is provided for planning purposes only.

For more information about financial aid, visit <https://www.rushu.rush.edu/rush-experience/student-services/office-student-financial-aid>. Individual financial need is based on personal preferences and circumstances.

To determine your specific financial aid needs, speak with a representative in the Office of Financial Aid at: **(312) 942-6256**, or email them at: financial_aid@RUSH.edu.

Estimated Costs	First Year	Second Year	Third Year
Books, Equipment, and Tuition:	\$1,407.00 \$39,921.00	\$500.00 \$39,921.00	\$500.00 \$26,614.00
ESTIMATED TOTALS:	\$41,328.00	\$40,421.00	\$27,114.00

***Note: Estimated cost of attendance, excluding Living Allowance, based on current rates. Contact the Office of Financial Aid for Living Allowance allocations for 2023-2024*

All costs are subject to change without notice; tuition is subject to change at a rate of 2-5% annually.

Tuition refund information is available at: [Tuition Refund and Waivers, Office of Financial Affairs](#)

PA Program Scholarships

RUSH University and the College of Health Sciences offer limited scholarship awards to incoming students in the PA program, and award amounts vary annually. In 2022, the College of Health Sciences awarded over \$255,000 in scholarships to incoming PA students, benefiting more than one-third of the class. The following is a list of the PA Program's scholarships:

PA Program Scholarship - a merit- and need-based scholarship to offset the cost of tuition. Total award amount is approximately \$150,000 annually. Merit is determined by undergraduate performance, and need is determined by FAFSA.

CHS Diversity Scholarship - a College of Health Sciences award to promote diversity recruitment for all programs. Award amount is equivalent to the total cost of tuition and is divided among eligible candidates. This scholarship is awarded based on need and meeting underrepresented minority (URM) in healthcare requirements. RUSH University currently defines URM in healthcare as Black/African American, Hispanic/Latin, Native American, and Hawaiian/Pacific Islander.

Grainger Scholarship - a competitive scholarship award to promote leadership and service. Successful awardees must design a community service project that aims to aid an underrepresented or underserved community in the Chicago area. With the guidance of faculty and institutional leaders, awardees will implement and collect outcomes data on their project. Scholarship application information is provided upon admission to the program. The award amount is \$40,000 to two to three incoming students annually.

For more information regarding scholarships, contact the College of Health Sciences Admissions Office at chs_admissions@rush.edu.

Students may also be eligible and apply for non-RUSH scholarships. Students are encouraged to apply for non-RUSH scholarships; however, external funds awarded to students may impact the total amount of funding available to them through RUSH scholarships. Students are encouraged to discuss external scholarship awards with the Office of Financial Aid prior to accepting funding.

For information regarding general financial aid options, contact the Office of Financial Aid at: financial_aid@rush.edu or (312) 942-6256.

RUSH PA Program Performance on the NCCPA Certification Examination

Graduation Class	2016	2017-1	2017-2	2018	2019	2020	2021	2022
Number of First-Time Takers	28	32	30	29	29	28	29	23 <i>As of 03/23</i>
First-Time Pass Rate	100%	94%	100%	100%	100%	93%	100%	91%
National Pass Rate	96%	97%	97%	98%	93%	95%	93%	Pending August 2023

The program's overall first-time taker pass rate since 2013 is 98%

The program's overall PANCE pass rate is 100%

PA Program Faculty and Staff

The following is the contact information of the PA principal faculty and staff.

Regina Chen, MS, PA-C, L. Ac., Dipl. C.H. Chair Assistant Professor Office: 1021F AAC Phone: (312) 942-2068 Email: regina_chen@rush.edu	Jessica Vlaming, MS, PA-C PA Program Director Director of Clinical Education Assistant Professor Office: 1027 AAC Phone: (312) 942-9068 Email: jessica_vlaming@rush.edu
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PA Program Policies

Students enrolled in the PA Program are subject to all applicable policies, rules, and regulations of RUSH University and its administrative departments, the CHS, and the PA Program. The following regulations are either programmatic additions to other University policies, or applications of University policies in the PA Program. The policies in this handbook do not supplant any University or CHS policies. Students are advised to refer to the RUSH University Catalog for additional applicable policies where applicable.

Academic Calendar

Classes and activities during the first year of the program are scheduled in accordance with the RUSH academic calendar, available here: [RUSH University Academic Calendar](#).

During the second and third years of the program, required rotation activities do not adhere to the posted academic calendar to facilitate clinical training.

Students are expected to adhere to their appropriate schedule as assigned by the program. The program will provide the didactic and clinical year schedules to students as far in advance as possible. Last minute schedule changes may be needed based on rotation availability. Regardless of year of the program, students will be registered for courses according to the posted RUSH academic calendar.

Academic Performance – Standards and Progression in the Program

The PA Program is committed to providing a high-quality education that produces exceptional clinicians. In order to maintain our high educational standards, we adhere to the following standards of academic performance:

Grading Scale

89.5 – 100	=	A
79.5 – 89.4	=	B
69.5 – 79.4	=	C
69.4 or below	=	F

Satisfactory Academic Performance

Satisfactory performance is defined as passing each course and maintaining a cumulative grade point average (GPA) of 3.0 or better at all times throughout the program. The following outlines the process of evaluating academic performance in the didactic year. Clinical year performance standards and their assessment are outlined in the supplemental clinical year program handbook.

Obtaining a final course grade of “B” or above in the following didactic courses is required without exception (regardless of overall GPA) to remain in satisfactory academic standing in the program:

- PHA 510 – Human Physiology
- PHA 511 – Human Anatomy
- PHA 512 – History and Physical Examination
- PHA 514, PHA 524, and PHA 534 – Clinical Medicine I-III (respectively)
- PHA 522 and PHA 532 – Diagnostic Reasoning I & II (respectively)
- PHA 520 and PHA 530 – Principles of Clinical Pharmacology I & II (respectively)

Satisfactory academic performance also includes continuous demonstration of professionalism and ethical conduct. Students are expected to comply with the program’s professionalism policy as set forth in this handbook (see PA Professionalism and Professional Behavior Policy). Students are also expected to adhere to the student conduct standards and maintain academic honesty as set forth in the RUSH University Student Honor Code (see Appendix B), the RUSH Statement on Academic Honesty (see Appendix C), and the CHS Guide for Professional Conduct (see Appendix D). Students may progress through the program only if they maintain satisfactory professional conduct and academic performance at all times.

Assessment of academic performance is done continuously throughout the program. Satisfactory academic progress is assessed through the successful completion of all coursework, curricular activities, and clinical rotations. In addition to ongoing student assessment processes, at the end of each phase of the curriculum, there is a formal evaluation process to determine the student's eligibility to progress through the program. This process is known as the Formative Evaluation at the end of the first two years, and the Summative Evaluation at the end of the third year (See Cumulative Competency Assessment).

A student's performance must meet satisfactory performance standards in order to progress through each year of the program. Information on program progression is discussed in the Cumulative Competency Assessment section.

Any performance that does not meet the above criteria is deemed unsatisfactory academic performance.

Unsatisfactory Academic Performance

Unsatisfactory performance is defined as meeting any of the following criteria:

- Failure to obtain a final grade of a "B" in the required didactic courses
- Failure to obtain a passing score on any clinical rotation
- Failure to attain a cumulative GPA of 3.0 at the end of each term throughout the program
- Failure to maintain an overall cumulative 3.0 GPA
- Failure to satisfactorily pass any component of any cumulative competency assessment activity
- Failure to comply with either the Program or the University policies

The faculty are committed to supporting students and helping them identify and address performance challenges during their education in preparation for their future PA careers. We use a three-step approach to recognize, address, and remediate performance issues. The designations used are Concern, Warning, and Probation. These designations are internal to the program and are used to track student performance deficiencies. Receiving these designations does not affect a student's standing in the university.

Concern

Concern indicates that a student has performance deficiencies in a course. Students will receive a notification of Concern from the course director outlining the deficiencies. Students are encouraged to meet with the course director and their faculty advisor on how to correct the issue(s). If there are no further performance issues, the student will be removed from Concern at the end of the term. Students may also receive a notice of Concern if they are passing all course assessments, but their aggregate course grade is not projected to meet the final course grade with a minimum of 80% in required courses.

Warning

Warning indicates that a student has continued performance deficiencies and requires supplemental remediation and assessment to ensure proficiency. For the definition of remediation, see page 46 of the PA Program Handbook. If the student is successful in remediation, no further action is taken. The student will remain on Warning for one subsequent term and will be monitored by faculty. If a student is placed on Warning and has subsequent performance issues, they will progress to Probation, as described below.

Probation

Probation indicates that a student has significant and ongoing issues maintaining expected performance standards and continued remediation and monitoring are required to help the student meet the expected level of performance. A student may also be placed on Probation for an egregious policy violation. If a student is placed on Probation, they must demonstrate an ability to consistently meet program performance standards to be removed from Probation and progress through the program. All terms of Probation will be outlined in the Probation letter. The student will remain on Probation for the remainder of the academic year, pending the successful completion of all program assignments and assessments.

The following is an outline of actions taken if a student encounters academic performance issues during the first year of the program:

1. Completion of Remediation

- If a student fails any single assessment, they will be required to meet with the course director and remediate the assessment. The method of remediation is determined at the discretion of the course director.
 - If the student is unable to pass the remediation, they will be placed immediately on Probation without a notice of Concern or Warning and will be required to meet with faculty to discuss further remediation plans.

2. Placement on Concern

- A student will receive a notice of concern if they demonstrate challenges meeting the program's performance standards.
 - If a student fails a major assessment such as an examination or OSCE, the student will be required to complete a remediation, as described above, and will also receive a letter of Concern at that time. The student will meet with the course director to discuss study habits and strategies for improvement so that they may identify and implement changes to their approach to studying and completing assignments and assessments.
 - Additionally, if a course director identifies that a student has other performance deficiencies in their course, such as receiving marginally passing scores on multiple assessments, they may send students a notice of Concern at their discretion. Some examples of indications for Concern are as follows:
 - Failure of one exam or OSCE with a score less than 70%.
 - Passing all exams with the minimum score of 70% but aggregate course grade is not projected to meet the minimum of 80% in required courses.
 - Failure of multiple quizzes or written assignments in a course.
- If the student successfully completes the remediation and/or the performance issue resolves without incident, no further action is taken. The student will remain on Concern for the duration of the current term and will be removed from Concern to progress to the following term.

3. Placement on Warning

- If after receiving a notice of Concern, a student fails a subsequent assessment in any course during the same term, they will receive a written notice of Warning and will be required to meet with the

Director of Academic Education or designated faculty. Warning indicates that the student has performance concerns requiring additional evaluation, intervention, and monitoring.

- If the student successfully completes the remediation and the performance issue resolves without incident, no further action is taken. The student will remain on Warning for the duration of one subsequent term, and if there are no further performance issues, they will be removed from Warning.

4. Placement on Probation

- If after receiving a notice of Warning, a student fails a subsequent assessment or fails to maintain satisfactory academic performance, they will be placed on Probation and notified in writing of their status change.
- The faculty will notify the program's Progress and Promotions Committee of the student's status, and a remediation plan will be developed and provided to the student in writing.
- If the student successfully completes the remediation plan, they will remain on Probation for the remainder of the didactic year. If they have no subsequent performance issues and meet satisfactory academic performance at the end of the year, they will be removed from probation and may progress to the clinical year.
 - Of note, when a student is removed from Probation at the end of the didactic year, they will remain on Concern during the clinical year so that faculty can closely monitor their performance on clinical rotations.
- Under some circumstances, a student on Probation may demonstrate satisfactory performance progress but still have incomplete remediation activities at the end of a term. In such cases, the faculty may deem the student eligible for progression to the next year of program while remaining on Probation. In such cases, the student's Probation status will not change despite progression through the curriculum. Eligibility for advancement through the curriculum is at the discretion of the faculty and the Progress and Promotions Committee and will be clearly outlined in the terms of the student's Probation letter.
- If a student who is removed from Probation has subsequent performance deficiencies, the student will be immediately placed back on Warning, and the Progress and Promotions Committee may be convened to determine the need for additional support or intervention.
- If a student is on Probation and their performance issues are ongoing and unresolved despite remediation efforts, the student will remain on Probation, will be denied permission to progress, and may be subject to dismissal from the program. The faculty will convene the Progress and Promotions Committee to determine further action.
- If a student has an egregious lapse in either academic performance or professionalism they may be placed immediately on Probation without prior notice of Concern or Warning, regardless of prior academic performance or cumulative GPA. If the lapse in academic or professional performance is severe, a student may be denied permission to progress and may be subject to dismissal from the program, without opportunity for remediation, regardless of prior academic performance or cumulative GPA. The Progress and Promotions Committee will evaluate such incidents on a case-by-case basis.
- Recommendations for remediation are at the discretion of the faculty and Progress and Promotions Committee. Remediation may include, but is not limited to, additional assignments, additional assessments, recommendation for counseling, or referral for evaluations. If offered, Remediation must be completed within the time frame designated by the Progress and Promotions Committee.

- Probation remains in effect until the student receives official notification of their status change in writing.

Situations in which a student will be placed directly on Probation are included (but not limited to) the examples below. In some cases, students may skip Concern or Warning status and be placed directly on probation.

- Failure of more than two assessments in a term, either in a single course or in more than one course
- Failure of an assessment and its remediation
- Failure of a course or failure to achieve an 80% in courses that require it
- Three professionalism violations (see below)
- An egregious lapse in professionalism or academic integrity

Other cases will be evaluated on a case-by-case basis at the discretion of the faculty.

Students will receive written notification of their change in status (Concern, Warning, or Probation), which will become part of the student's program record. Receiving a notice of either Concern, Warning, or Probation does not reflect on the student's RUSH University transcript. Upon receipt of the notice, the student must meet with their academic advisor as soon as possible to identify challenges and discuss potential solutions to remediate their performance.

Professionalism and Professional Behavior

Students in the program are expected to always behave in a manner which conveys the highest degree of personal, moral, and intellectual integrity. PA students are expected to demonstrate their professional capacity by treating one another and others with respect, being reliable in all program activities, communicating effectively in both written and oral forms, accepting personal responsibility for one's actions, and exhibiting knowledge of their limitations.

As noted in the above section, Academic Performance – Standards and Progression, throughout all phases of the program, students are continuously evaluated regarding their professional and ethical behavior. Each year students will receive a Professionalism Assessment filled out by faculty, attached as Appendix G. For more information regarding the program's policy on professionalism, refer to the **PA Professionalism and Professional Behavior Policy** below. Students are also expected to adhere to the criteria contained in the CHS Guide to Professional Conduct, (**Appendix D**). More information on the CHS Guide to Professional Conduct is available in the [CHS Catalog](#).

The following is an outline of actions taken if a student encounters professionalism issues during the first year of the program:

- At the first occurrence of a professionalism issue, the student will be notified and informed that subsequent issues will constitute a professionalism violation. Repeated violations to our professionalism policy will be addressed in the following sequence:
 - If a student commits a professionalism violation, they will be notified by program faculty in writing. Further actions will be determined on a case-by-case basis depending on the nature of the violation. Students may be required to meet with faculty to discuss a plan for remediation.
 - If a student commits a second professionalism violation at any time during the remainder of the year, they will be required to meet with the Director of Academic Education and they will receive a written Professionalism Assessment that will become a part of their program record. Students will also be placed on concern at this time.
 - If a student commits a third professionalism violation during the remainder of the year, they will be placed on probation immediately and will be required to meet with the Director of Academic Education and/or the Program Director to discuss further steps and remediation. The Progress

and Promotions Committee will be notified. The same terms as listed above for probation apply to a student who is placed on probation for professionalism reasons.

For more information regarding University and CHS dismissal policies, refer to the Student Academic Appeal and Grievance Procedures policies in the 2021-2022 RUSH University Catalog, available here: [Office of the Registrar](#).

The following are additional definitions and criteria regarding unsatisfactory academic performance:

- If the faculty determines that a student has failed to maintain satisfactory academic performance at any point during the curriculum, the student will receive a notice of Concern, Warning, or Probation as appropriate (see section on Unsatisfactory Academic Performance) above, and, if deemed necessary, the Progress and Promotions Committee will be convened to determine further action.
- Any student at risk for receiving a final grade of below a “B” in any course will receive a notice of concern detailing performance needed to successfully pass the course.
- A student is at risk for dismissal from the program, regardless of their prior performance evaluation and/or cumulative GPA, if any of the following occurs:
 - Their term GPA falls below a 3.0
 - They receive a final course grade of “F” in any course
 - They receive a final course grade below a “B” in Anatomy, Clinical Medicine, History and Physical Examination, Principles of Clinical Pharmacology, Diagnostic Reasoning
- A student is at risk for dismissal from the program, regardless of their prior performance evaluation and/or cumulative GPA, if they violate any of the following: the PA Program's Professionalism and Professional Behavior Policy; the RUSH academic honesty policy; the RUSH University Student Honor Code; or the RUSH University Drug and Alcohol-Free Campus policy.
- If a student has an overall GPA above a 3.0 and receives a final course grade of “C” in a course other than the required “B” grade courses, they will receive a notice of Concern regarding unsatisfactory academic performance. If a student receives an additional final course grade of “C” at any time during the program, they are subject to dismissal from the program, regardless of their prior performance evaluation and/or cumulative GPA in the program.
- If a student receives a final course grade below a “B” in Physiology, Anatomy, Clinical Medicine, History and Physical Examination, Principles of Clinical Pharmacology, Diagnostic Reasoning, or physiology, they will be placed directly on Probation, regardless of their prior performance and/or cumulative GPA. The student must remediate the course for a final grade of “B” or higher before progressing in the program. Failure to successfully remediate the course places the student at jeopardy for dismissal from the program.

If any of the above conditions occur, the Progress and Promotions Committee will be convened to determine further action.

PA students are expected to maintain all performance standards consistently. The faculty will make every effort to identify, assist, and remediate any student who demonstrates difficulties in attaining expected performance standards. If all usual and reasonable remediation efforts are exhausted and the student is still unable to maintain satisfactory academic performance, the recommendation will be made to dismiss the student from the program, regardless of prior academic performance, final course grade, or cumulative GPA.

Program Dismissal

A recommendation for dismissal from the program may be made if a student consistently fails to demonstrate the ability to sustain the academic and/or professional performance standards of the program. This determination is made in accordance with our obligation to maintain the standards of the profession and the public's safety. Specifically, a recommendation for dismissal from the program may be made under the following circumstances:

- If a student is unable to maintain expected academic performance despite reasonable remediation and counseling, including, but not limited to, failing multiple examinations, failing a remediation activity, failing a preceptor evaluation, or failing to comply with professionalism standards
- If a student continues to have performance issues while on probation
- If the student has an egregious lapse in either academic or professional performance, or violates RUSH policy regarding conduct and behavior

Additionally, if a student who successfully remediates and is removed from probation has a subsequent incident of unsatisfactory academic performance, a recommendation for dismissal from the program may be made without further opportunity for remediation.

For more information regarding University dismissal policies, refer to the Academic Appeals and Rules of Governance policies provided in the [RUSH University Catalog](#).

Advising

Each student is assigned a PA faculty advisor. Students are required to meet with their advisor for routine advising once per term but can request to meet with their advisor at any time. The student is expected to initiate the required advising session; additional sessions may be initiated by the student or faculty advisor as needed. Prior to routine advising meetings, students will be asked to fill out a pre-advising meeting form in order to guide the discussion with their advisor.

Students are strongly encouraged to meet with their faculty advisor to discuss any concerns or issues that may impact their performance or progression through the program. Students must comply with faculty requests to meet with their advisor in a timely manner.

Routine advising discussions focus on two areas – review of the student's academic progress and counseling on professional development. Advisors are also a resource for exploring issues regarding rotations and to explore employment strategies following graduation.

If a student has challenges maintaining acceptable academic performance during the program, the advisor is the student's primary resource for guidance and assistance. The advisor will work with the student to identify potential sources of academic difficulty and will assist the student in overcoming those difficulties. Advising may entail referral to other counseling and support services available through the University.

In addition to the PA faculty advisor, students are encouraged to meet with Course Directors for any concerns related to a specific course.

Attendance

Attendance in the program is on a full-time basis only. Students entering the PA program must complete the curriculum in its entirety. Advanced standing or transfer credit is not awarded in the program, regardless of previous professional or academic experience.

Attendance and punctuality to all program-related activities (whether in person or virtual) is expected of all students. Class attendance and punctuality are criteria within the standards of professional behavior (see PA Professionalism and Professional Behavior Policy). Both the volume and the pace of instruction in the program require attendance in all classes for academic success. Students are expected to arrive on time for all activities. If tardiness is unavoidable, enter the room quietly. Absences or disruptions to class due to late arrival will not be tolerated.

Attendance (continued)

During the academic year, if a student must miss class due to illness or other unexpected event, the absence will be excused if reasonable effort is made to notify the program in an appropriate manner prior to the absence. Both the course director and the Director of Academic Education should be notified prior to the start of class. Notification should be made by email and should include the nature of the problem and the expected number of classes to be missed. The Director of Academic Education will notify the rest of the faculty of the student's absence and accommodations may be made to provide the student with lecture information.

If a student requires more than one day's absence due to illness or other unexpected event, they must contact the Director of Academic Education at the first possible opportunity to determine reasonable arrangements for missed classes. They may also be required to provide documentation from a healthcare provider to excuse them from class.

Weddings, family vacations, preventative dental appointments, going out of town, retirement parties, etc. are NOT considered excused absences, and a personal day must be used in order to miss class (see section on Personal Days below). These are considered unexcused absences. Unexcused absences also apply to leaving class early without prior approval. Unexcused absences are considered professionalism violations and may result in missed coursework for which the student might not receive credit.

In addition to the PA Program's professionalism policy, each course has specific attendance requirements that students must follow. For absences of any kind, students may be required to complete make-up work at the discretion of the course director.

Failure to adhere to the attendance policies of a course may result in percentage point deductions from the course grade, regardless of any other performance indicators in the course.

Personal Days

The Program recognizes that "life happens" outside of PA school and that certain matters are beyond the control of a student. Therefore, during the first year, students are allowed to take two (2) personal days each term to use if they wish, at their discretion. To use a personal day, students must notify the Director of Academic Education at least two (2) weeks in advance of the needed personal day. Personal days are approved at the discretion of the faculty. Violations of the personal day policy constitute professionalism violations and may result in loss of subsequent personal days. Students may be excused for necessary medical appointments and in some cases, do not need to use a personal day for such, but all requests must be made in advance to the Director of Academic Education.

As students are expected to participate in all assessment activities, personal days cannot be used on the day of an examination, a scheduled student presentation, a simulation activity, during Crash Course, or any other activity involving required attendance.

Half-day requests will not be accepted; if a student needs to take time for any reason, they must take the entire day.

Personal days cannot be saved and batched across terms to create extended time off during the term.

Religious Holiday Time Off

Students requiring time off for religious holidays should inform the faculty of the need as soon as possible upon admission to the program. The student should also provide a schedule of religious holiday time off needs at the beginning of each academic year.

Class and Clinical Hours

The faculty considers 8:00 AM – 5:30 PM, Monday through Friday as available class time. Students should plan their schedule accordingly. Making personal appointments during normal class hours is not permitted. Students who must miss class for any reason, including urgent medical appointments, must obtain approval from the course faculty in advance (see Attendance section above).

The faculty makes every effort to provide students with an accurate schedule of classes; however, changes occur frequently in the schedule. Many of the lecturers are clinicians with busy practices. Occasionally, the responsibilities of patient care take precedence over lecturing, resulting in changes to the lecture schedule. Rescheduling lectures may require adding classes to empty time slots in the schedule; therefore, not all unscheduled time is "free time". While every effort will be made to minimize schedule changes, the program requests that students BE FLEXIBLE regarding the class schedule! Refer to the attendance section above regarding requests for time off before scheduling any other activities during scheduled class time.

Throughout the program, course-related activities may occur during non-class hours and off the main campus. These activities may include occasional weekends and evenings and may require additional travel time as well. If the activity involves the entire class, the dates and times will be posted on the class schedule and details for these activities will be presented at the start of the relevant term. If the activity involves individual or small groups of students, information regarding scheduling and other details will be provided as appropriate.

If a student has a schedule conflict with any course activity, they must notify faculty as soon as possible to request an excused absence and arrange a makeup session. However, not all academic activities can be made up. As a PA student, attendance at course activities should be a priority over personal activities.

Class Officers

The student government of the PA Program is called the RUSH PA Student Society and is comprised of several Class Officer roles. Class Officers take on important, additional leadership roles and responsibilities. They facilitate communication among their cohort, between classes, and in interactions with the larger community both at RUSH and beyond. Class Officers are elected by their cohort annually during the summer term. Most officer roles continue through the duration of the program. A list of the Class Officer positions, responsibilities, and terms of participation are discussed during the summer term.

Any student who wishes to hold an officer position must be in good academic standing and passing all coursework at the time of elections, and for the duration of the program. In the event a class officer is unable to maintain their duties and responsibilities, or falls behind in their studies, the vacant seat will be filled in a manner deemed appropriate by the remaining officers and the program's Student Society faculty advisor.

Clinical Rotation Assignments

All clinical rotations are assigned based on preceptor availability. Details regarding clinical rotation assignments are in the Clinical Handbooks and will be provided to students during the Spring term.

The PA Faculty have the sole responsibility for securing sites for clinical rotation placement. Students may recommend a new site for clinical affiliation but are not required to provide their own sites for rotation placement. Recommending a new site for clinical affiliation does not guarantee that an affiliation with that site will be in place in time for the student placement at the requested rotation.

Community Service

RUSH and the PA Program are committed to providing service to our community, as set forth in our Mission Statements. Throughout the program, students are expected to develop and participate in various community service activities in the PA Program, the University and throughout the Chicago area.

The PA Program requires that each student completes at least twelve (12) hours per academic year of approved community and/or professional service – eight (8) of which must be service to the community. Examples of activities that may be used to meet this requirement include participation in community health fairs, participation in RUSH organized and approved service activities, participation in PA Program admissions recruitment and interviews, and participation in community health education events. In addition to RUSH and PA Program sponsored service activities, students may participate in appropriate events that serve the community. Note the following criteria regarding participation in service activities:

- Participation in any service activity must not conflict with class or other program related activities. Requests for time off from class or rotation to participate in service activities are not permitted.
- For all activities not sponsored by RUSH or the PA Program, students should notify the program and obtain approval to participate from the Faculty Advisor for Student Activities, prior to attending the event itself.
- For every service event, students should complete and submit a PA Program Professional and Service Documentation Log form (see **Appendix E**). This form must be submitted within 2 weeks of completion of the service activity. Students will not receive credit for their service activity if the forms are not submitted in a timely manner.
- The Service Documentation Log must contain the event name, date, hours served, and contact name / information for the event organizer or supervisor as available. The student will be required to attest on their form that the information submitted is true and accurate as to their completed service hours.
- Refer to the Student Community Service and Engagement Activities Handbook for detailed information. Any questions regarding the service requirement should be directed to the Faculty Liaison.

Copyright and Use of Materials

Educational materials include, but are not limited to, course syllabi, course objectives, lecture handouts, readings, assignments. All PA program materials are protected under state and federal copyright law.

The materials provided by the program are for students' personal study purposes only. Copying, sharing, or distributing the materials in any manner without specific and express approval of the author and/or course director is considered an act of academic dishonesty and a violation of RUSH's Academic Honesty and Student Conduct policy. This includes sharing electronic or print copies of the materials or posting materials online. Students who fail to comply with this standard are liable for copyright infringement and subject to disciplinary action.

Course Evaluation Procedures

Evaluations for each course take place at the end of every term or rotation. Additionally, students are asked to evaluate individual guest speakers throughout all phases of the program. Student evaluations provide valuable information regarding program performance and help the faculty improve the program.

Course evaluations are administered through the CHS Dean's Office using the IDEA Survey tool. Evaluations are anonymous, and faculty will only be provided with a class compliance rate. Compliance reports only identify response rates and will not contain information regarding respondents or the content of student evaluations.

Individual speaker evaluations may be administered through various platforms of the faculty choosing. Preceptor evaluations are done through the program's clinical rotation management system.

Students are expected to complete all course, instructor, and preceptor evaluations, in a timely manner

in an honest, professional, and constructive manner. This is an important skill, and is part of professional behavior as a PA.

Course Sequencing and Deceleration

Students are required to complete all courses in the PA curriculum as posted and must take them as a cohort in the prescribed sequence. There is no mechanism for part-time attendance in the program. Students are batch registered by faculty for all the courses they are required to take each term, and do not need to register individually.

Students may not be able to register for courses if there is a hold placed on their account due to late tuition payments or incomplete student requirements such as annual training modules. All holds will need to be addressed prior to registering and may result in delayed registration for the term. Students registering after the regular registration period ends will accumulate additional fees as outlined by the Registrar's Office. Students are responsible for any late fee incurred due to late registration. Not registering on time is also considered a violation of professionalism and the student may be subject to being placed on academic probation as well as being withheld from continuing clinical rotations until the matter is resolved.

Under extraordinary circumstances, a student may require deviation from the proscribed course sequence, while remaining a student in the program (see section on Leave of Absence below). This is known as deceleration. Requests for deceleration are considered on a case-by-case basis and are granted at the sole discretion of the faculty in consultation with the Progress and Promotions Committee.

Course Syllabus and Other Learning Materials

The faculty will provide students with a syllabus and other relevant materials related to each course at the beginning of each term via Canvas, the University learning management system. The syllabus provides information regarding the course goals and objectives, teaching methods, lecture topics, required readings, lecture learning objectives, and grading criteria. The syllabus identified Course Director is responsible for covering course topics or assigning self-study related to course content. The Course Director is the final arbiter in all matters concerning course grading. Lecture and learning materials are distributed at the discretion of the Course Director and lecturers.

Cumulative Competency Assessment

At the end of each year, students are cumulatively evaluated for their eligibility to progress to the next stage of the program.

Assessment Process Overview

The Formative Evaluation process determines the students' eligibility to progress through each phase of the program. The Summative Evaluation process determines the students' eligibility to graduate from the program. The PA faculty conducts both the Formative and Summative evaluations. Both evaluations assess the following areas of student competency:

- Academic performance
- Clinical skills development – e.g., physical examination skills, clinical procedures, etc.
- Knowledge and skills integration
- Research activities
- Community service participation
- Professionalism

The competencies and skills students are expected to acquire during their training at RUSH are identified in the Terminal PA Program Learning Competencies (**Appendix K**) and PA Program Graduate Functions and Tasks (**Appendix L**).

In both the Formative and Summative Evaluations, the student's advisor serves as the primary attester to the student's progress through the program, although all interactions between the student with the faculty and/or the administration are considered in the process.

Only students in satisfactory academic standing are evaluated for progression. Generally, students on probation at the end of the academic year are not eligible for progression until remediation is successfully completed. If the student is successful in the remediation, they may progress “with concern”, or potentially remain on internal probation in the next phase of the program.

Under some circumstances, a student on probation may demonstrate satisfactory performance progress but still have incomplete remediation activities at the end of a term. In such cases, the faculty may deem the student eligible for progression to the next year of program while remaining on probation. In such cases, the student's probation status will not change despite successful progression through the curriculum. Eligibility for advancement through the curriculum is at the faculty's sole discretion.

In addition to all academic and/or clinical assessments, other standardized assessment activities will be used to assess competency and skill acquisition. Examples of other assessment methods include, but are not limited to, objective structured clinical examination (see section on OSCE), standardized examinations, and standardized clinical skills assessments. A copy of the forms used to conduct the Formative and Summative evaluations is attached as **Appendix F**.

The Formative Evaluation

The first formative evaluation takes place at the end of the didactic year to determine a student's eligibility to progress to the clinical year. Assessment of student eligibility is based on the direct, observed, or reported interactions of the student with core faculty, adjunct and guest instructors, and the administrative staff throughout the didactic year. The following definitions are used to describe progression eligibility:

- Eligible to progress to clinical rotations without reservation
- Eligible to progress to clinical rotations with areas of concern, or for improvement
- Ineligible to progress to clinical rotations

The second formative evaluation takes place at the end of the first clinical year of training, to determine a student's eligibility to progress to the advanced training portion of the curriculum. Assessment of student eligibility to progress to the third year is based on direct, observed, or reported interactions of the student with the preceptors and their staff, and the PA faculty throughout the clinical year. The following definitions are used to describe progression eligibility:

- Eligible to progress to advanced clinical rotations without reservation
- Eligible to progress to advanced clinical rotations with areas of concern, or for improvement
- Ineligible to progress to advanced clinical training

If areas for improvement are identified, the student will be advised of the recommendations prior to starting rotations and monitored for progress throughout the clinical year. If the student is judged to be ineligible for progress, the Progress and Promotions Committee will be convened for further evaluation and remediation recommendation.

The Summative Evaluation

The summative evaluation for eligibility to graduate takes place at the end of the Third Year. Eligibility is based on performance on a global evaluation of the student's skills and knowledge at the end of the program, as well as review of the direct, observed, or reported interactions of the student with the core faculty, preceptors, and their staff. For the clinical year summation, students are considered eligible for graduation only if the faculty recommendation is without reservation.

Objective Structured Clinical Examination (OSCE)

Evaluating the student's clinical knowledge, clinical skills, and patient assessment is a critical component of the formative evaluation process. The program uses a standardized patient evaluation format known as Objective Structured Clinical Examination (OSCE) to assess competence in these areas. The OSCE evaluates the student's competency in the following: communication skills, history and physical assessment, diagnostic evaluation capacity, and therapeutic management development. The

OSCE requires the student demonstrate their global mastery and synthesis of materials in each year of the program.

An OSCE will be administered at the end of each year of the program. The OSCE is considered a high stakes assessment. Passing performance is required to progress through the curriculum, and to progress to the next phase of the program. Students must successfully pass the OSCE to demonstrate they have sufficient skills to care for patients. Students are expected to score above the minimal passing score established by the program for the exam. Failure to achieve a passing score indicates the student has a deficit of required clinical knowledge and skills. If a student does not pass the OSCE, they will have an opportunity to remediate the exam for a satisfactory performance score. Failure to achieve a passing score on an OSCE constitutes grossly unsatisfactory academic performance, and the student may be recommended for placement on probation, regardless of their previous performance evaluations or cumulative GPA in the program.

If a student fails the OSCE evaluation, they must remediate the exam to progress to the next phase of the program. Additionally, students requiring remediation may be required to forfeit their scheduled break or vacation to accommodate remediation activities. Details regarding the timing of remediation are discussed on an as-needed basis.

Discrimination and/or Harassment of Students

RUSH is committed to preventing harassment of any type in the institution, and the PA Program has a zero-tolerance stance towards acts of discrimination by or towards any of its students. The program strictly adheres to the University's policies on the reporting and handling of any complaint of discrimination or harassment related to its students. Under these policies and procedures, harassment of a sexual nature, as well as harassment related to age, ancestry, color, disability (as defined by Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act), gender, gender identity and/or expression, marital or parental status, national origin, pregnancy, race, religion, sexual orientation, veteran's status, or any other category protected by federal or state law, is prohibited.

The RUSH policies include protections for, and prohibit retaliation against, an individual making a complaint or supplying information about a complaint. They also incorporate protections for a person who considers themselves accused in bad faith.

All complaints and concerns about conduct that may violate this Policy (including retaliation for reports made pursuant to this Policy) should be filed with RUSH's Title IX Coordinator:

Nancee Hofheimer, Title IX Coordinator, RUSH University Medical Center

Nancee_b_hofheimer@rush.edu

Confidential reports can also be made through the RUSH Hotline at (877) 787-4009 or via the RUSH web reporting tool at <https://secure.ethicspoint.com/domain/media/en/gui/56889/index.html>. The RUSH policy on harassment and/or discrimination, and is located here: [Sexual Assault and Harassment Prevention](#)

Drug Free Campus and Workplace

RUSH University Medical Center maintains compliance with the Drug Free Schools and Communities Act (DFSCA) and all members of the RUSH community are expected to comply with these standards at all times, regardless of state and local laws governing social practice. Violations of this policy will be handled on a case-by-case basis, consistent with RUSH policies and practices. The full policy is posted as **Appendix I**.

Use of Electronic Devices During In-Person Class

All mobile phones must be powered off or silenced during class. Students may not disrupt class to respond to messages except during emergencies. Disrupting class for personal communications is considered a violation of professionalism.

The use of portable devices in class should be for note-taking related to the current course topic only. Students should refrain from web surfing, texting, instant messaging, mobile messaging from a laptop, or emailing during class – these activities are considered professionalism violations. Recurrent violation of this policy constitutes a violation of professionalism.

Emergency Communication

In an emergency, if anyone outside the University needs to reach a student, they should call the Program Coordinator at the phone number provided. The program staff will attempt to forward a message to the student. The program does not give out student contact or location information to anyone, regardless of circumstances, without prior written permission from the student.

Emergent communication between the Program and students after class hours is by email. Students are expected to check their email at least once a day for notices such as class cancellations or other announcements during non-class hours.

Examination Procedures and Policies

The primary mechanism of student assessment throughout the program are examinations. Exams are predominately taken on campus via computer-based test taking applications. Questions are predominately multiple choice, but some courses will utilize other types of questions in assessments. These policies apply to any assessment – examination or quiz. Note the following policies regarding the program's testing procedures.

Taking Exams

- Exams in the PA program are electronic. Some exams may be given in person on-campus, and some will be proctored remotely. Course directors will provide information about examinations at the beginning of each term. Detailed instructions will be provided regarding exam procedures. Exams will be taken on students' personal devices, unless they take place on campus in the testing center.
- Only a pen or pencil and one blank sheet of paper is allowed at the students' workspace. If the exam occurs on campus, the program will provide scratch paper. You must leave your scratch paper with the testing exam proctor or destroy the paper in front of the remote proctor prior to exiting the exam.
- Food and drink are not allowed during exams.
- The use of programmable calculators, cell phone calculators, or any other electronic device is prohibited during an exam.
- All books and notes must be placed away from the student at either at the front or rear of the examination room for the duration of the exam.
- Students are expected to work without taking breaks during exams. Except in cases of emergency, only one student at a time is allowed, with the exam proctor's permission, to leave the room for any reason during an exam. If you need to leave the room during an exam, indicate so quietly to the proctor and wait to be acknowledged before leaving the room. If the exam is remote, students must not leave their workspace until they have completed the exam.
- Proctors will not answer questions related to understanding or interpreting exam material.
- Students should notify the proctor if there is a technical problem with the exam.
- If a remote proctor is used, you may be recorded during the examination as part of the monitoring process. Recordings are the sole property of the PA Program and be used only for verification of students' behavior during a scheduled examination.
- Upon completing an on-campus exam, unless otherwise instructed, students must exit the exam room quietly and with minimal disruption to the remaining test takers.

Exam Scoring

- Electronic exams are scored via the assigned test platform.
 - Questions that are unanswered receive no points. Electronic exams cannot be retrieved once submitted. Students should ensure the correct and accurate completion of the exam form before submitting for scoring.

Missed Exams

- Except in cases of illness or emergency, the student must provide the Course Director at least one- week advance notice if requesting to take an exam at a date other than as scheduled. Requests to defer exams are granted at the sole discretion of the Course Director.
- If a student must miss an exam due to illness or other unforeseen catastrophic event, they must notify either the Course Director and the Director of Academic Education of the absence at the earliest possible time in advance of the exam start time. The student will be asked to provide documentation for the absence, in the form of a clinical evaluation note for illness, or other paperwork as indicated.
- Students may notify the program of absence from an exam either through the faculty's work phone or email. If the Course Director or Director of Academic Education is not available by phone, the student should leave a voice mail message outlining the nature of the emergency and the best way to contact the student.
- Make-up exams are approved and given at the sole discretion of the Course Director. Students must take make-up examinations as scheduled or risk a zero grade for the missed exam.
- If a student misses an exam due to illness or other unforeseen event, they are required to make up the exam at the earliest reasonable time upon returning to class, at the discretion of the Course Director.
- Except under extraordinary circumstances, it is not acceptable to notify the Course Director or program faculty of a missed exam after the scheduled start time.
- Failure to notify the Course Director and Director of Academic Education of a missed exam in a timely and appropriate manner before the exam takes place will result in a score of zero on the exam.

Late Arrival to Exams

- If a student arrives late to any exam, they may be allowed to take the exam, at the discretion of the proctor. Late arriving students will not be given additional time to complete the exam.
- Students should notify the program by phone or email if they know they will be late to an exam.
- Late arriving students should be as quiet and undistruptive as possible taking their place in an exam.

Reviewing Exams

- Exam reviews are provided at the discretion of each course director to give students the opportunity to learn from questions they may have answered incorrectly. Reviews may include a discussion of difficult exam questions or topics that scored low overall. Occasionally, the course director may choose to provide printed individual exam reports to students. Exam reviews are not opportunities for students to debate exam content or the wording of questions.
- Challenges to exam questions are not allowed during the review.
- Exam reviews will be scheduled at the discretion of the faculty after all students have completed an exam and the faculty has completed their validation review of the scores.
- During an exam review:
 - No one is allowed to leave the room with an exam or computer scored answer sheet.
 - Students must return their exam report to faculty when finished reviewing.
 - Students are not allowed to copy or reproduce exam materials in any manner. Personal notes may not be taken regarding exam content.
 - Students are only allowed access to their own test scores and answer sheets.

Exam Validation Review and Rescoring

For each exam, the Course Director reviews all questions prior to posting the exam scores. Questions answered incorrectly by 60% or more of the class are reviewed for accuracy. Exam rescoring may occur based on this review, at the discretion of the Course Director.

Exam Score Posting

- Posted exam scores are final. Scores are posted on Canvas by 5pm the next business day following the exam. If there is a delay in releasing the scores, students will be notified by the faculty.
- Cumulative course grade information is posted on Canvas.

Failed Exams and Exam Remediation

- For any examination during the academic year, the minimum passing score is a 70%.
- Any student who receives an exam score of less than 70% on any exam must arrange for remediation with the Course Director within one week of the score posting. The timing, content, and methods of the exam remediation are at the sole discretion of the Course Director.
- Only one remediation attempt is allowed per exam. If a student fails to successfully remediate an exam, they will fail with the original exam score and will be placed on probation for further action as described in this Handbook.
- Successful remediation does not change the original exam score but will allow the student to continue with the course. Students must successfully remediate a failed exam in order to continue in the course.
- Any failed examination must be remediated within the period designated by the Course Director to continue in the course. Failure to remediate an exam in a timely manner constitutes unprofessional behavior and may result in the student being placed on probation.
- If a student fails a final examination, they may be required to forfeit scheduled breaks or vacation to accommodate remediation activities.
- Exam remediation is intended to allow students who fail an exam to demonstrate their understanding of course materials to successfully continue in the program. However, students are expected to learn material sufficiently and develop their test taking skills such that they can pass all exams when they are given. Failing more than one exam in any class in a term constitutes unsatisfactory academic performance, which places the student on probation. Refer to the Academic Standards section regarding probation.

Exam Procedure Violations

- Failure to adhere to the examination procedure policies, inappropriate behavior or cheating on an exam, or discussing and revealing exam content to current or future students constitutes a violation of the program policy on professionalism.
- Cheating during examinations is not tolerated. If a student is suspected of inappropriate behavior or cheating during an exam, she/he will be asked to forfeit their exam. The incident will be referred to the Progress and Promotions Committee for review and further action.
- Violators are subject to placement on probation and possibly dismissal from the program. The exam proctor and/or Course Director is the final arbiter of inappropriate behavior during an exam or exam review session. The assessment of the exam proctor and/or Course Director regarding a student's testing behavior is final.

Grade Assignments

Course grades will be assigned according to the policies set forth in each course syllabus.

Under extraordinary circumstances, if a student is unable to complete the required course or rotation work within the designated time frame, they may be granted an extension to complete all assigned work and duties. Extensions will result in the granting of a course grade of incomplete, or "I". An incomplete grade is given solely at the discretion of the Course Director or Directors of Academic or Clinical Education (as appropriate) upon careful consideration of the circumstances affecting the student's ability to complete assigned tasks on a timely basis. If an incomplete grade is given, it must be remediated within a pre-determined time frame set forth by the faculty. If the student successfully completes all required tasks and assignments, the incomplete grade will be converted to a final course grade according to the grading criteria for that subject. Failure on the part of the student to complete the required work on time, or in a satisfactorily passing manner will result in the incomplete grade converting to an "F" and the student is subject to probation and possibly dismissal from the program.

Grievances, Complaints, and Student Appeals

All issues or concerns related to PA Program courses or activities should be first directed to the respective Course Director. All clinical rotation issues should be addressed with the Director of Clinical Education or the course director. If the student's issue is not resolved at the course level, the matter should be referred to the Director of Academic or Clinical Education, as appropriate. If the issue remains unresolved, the chain of command within the PA department requires the matter be brought next to the Program Director, then Department Chair, as appropriate.

If the matter in question cannot be resolved at the Chair level, it will be directed to the Program's Progress and Promotions Committee for further consideration. This committee will either resolve the matter in question to the student's satisfaction or instruct the student on available mechanisms for appeal as described in the RUSH University Catalog. The CHS Student Academic Appeal and Grievance Procedures can be found in the Academic Appeals and Rules of Governance policies provided in the CHS Catalog and found here: [Student Academic Appeal and Grievance Procedures](#).

Non-academic issues or concerns can be addressed to either the Director of Academic or Clinical Education, as appropriate, or directly to the Program Director or Department Chair. Additionally, RUSH University has a procedure to address non-academic issues. Information regarding RUSH's Non-Academic Complaint Procedures can be found at: <https://www.RUSHu.RUSH.edu/student-disclosure-information/institutional-information/complaint-resolution>

In the case where a student feels their complaint would be best handled through formal procedures, RUSH University offers a process for students to confidentially submit their formal complaints through the Student Complaint Portal. The Student Complaint Portal can be located at: <https://secure.ethicspoint.com/domain/media/en/gui/56889/index.html>.

Certain complaints have specific procedures, such as regarding Title IX sexual misconduct, harassment or grade appeals. Under circumstances where a student files a formal complaint through the Student Complaint Portal requiring a specific procedure or contact person, the complaint will automatically be routed to the appropriate area for additional review and follow-up. The University's goal is to make it seamless for students to file a complaint, regardless of if the student is not exactly sure where the complaint should be filed. Please review the [Student Complaint Portal FAQs](#) for additional information. Students should also refer to their University student handbook or their specific academic program guidebook for certain procedures.

Student complaints can also be submitted anonymously, however students should keep in mind that there are inherent limitations with the University conducting a thorough investigation if the complaint is submitted anonymously.

Incoming Student Screening

On admission to the program, students are required to obtain and document health and background status clearance in order to attend classes and care for patients. Health screening entails documentation of immunity to major communicable diseases, for personal and public health safety. The program adheres to the CDC standards on vaccinations for health care workers, available here:

<http://www.cdc.gov/vaccines/adults/rec-vac/hcw.html>.

For more information regarding the program's screening clearance requirements, see **Student Health Policies**. The program also requires each student complete a criminal background check and drug screening on file at the time of registration for class. The drug screen is repeated each year of the program. Students are responsible for the cost of these screenings.

Criminal background check clearance is a common requirement for student placement at clinical rotation sites. If a student has a history of any misdemeanor or felony conviction, they should disclose these activities in their applications, or as soon as possible upon admission to the program. Positive results in the criminal background check will be handled on a case-by-case basis, depending on the nature of the charges and its outcome. Students with a history of a felony conviction are not guaranteed availability of clinical placement, which may compromise their ability to complete the program.

Documentation of negative drug screening is also an increasingly common requirement for clinical placement, and is consistent with RUSH's zero-tolerance, drug free campus and workplace policy. Students with a positive drug screen at any time during enrollment in the program will be advised on a case-by-case basis and will be subject to action in accordance with the policies described in the Student Catalog.

Leave of Absence

If a student requires a leave of absence from the program for any reason, they must first petition the Program Director for the leave. The terms of the student's leave, as well their return to the program after a leave of absence must be arranged prior to the student's beginning the leave, and agreed to in writing, by both the student and the Program Director. Permission to take a leave of absence is granted at the sole discretion of the Program Director. Per RUSH University policy, the maximum length of time that will be approved for a single leave is three consecutive terms. Students needing to be gone longer than three consecutive terms will need to petition for an exception to the policy or will need to withdraw.

Requests for an extended leave of absence may significantly hinder a student's progress through the program, and delay graduation. Depending on the duration of leave, it may not be possible for the student to remain in good standing in the program and may require the student withdraw from the program. If an extended leave is granted, this may require deceleration from the program's proscribed course sequence, delaying the time to graduation beyond the program's expected 30-month duration. Students who take a leave of absence from the program may incur additional fees and/or tuition costs for which the student is solely responsible. Any student considering a leave of absence or deceleration should consult with financial aid to determine how the situation may affect them financially. Arranging for consultation with financial aid is the responsibility of the student and should take place before any final decision is made or any agreement signed.

The student is required to complete the appropriate Leave of Absence forms, available on the University's website under the Registrar section, including acquiring the appropriate signatures from the required University entities, such defined on the form. Changes to the terms of the student's return to the program after a leave of absence must be arranged with, and at the sole discretion of, the Program Director on case-by-case basis.

Mandatory Training Modules

Students at RUSH University are required to complete electronic training modules annually through the RUSH Learning Hub on topics including, but not limited to, Compliance and HIPAA Privacy, Infection Prevention and Control, Fire Safety, Cybersecurity Awareness, Emergency Management, and Sexual Harassment Prevention. Students must complete all modules by the deadline, or they will have a hold placed on their student account and be unable to register for courses.

Medical Liability Insurance

RUSH University medical liability insurance coverage applies to those learning opportunities assigned to a student by the PA Program as part of training in the PA curriculum. Coverage is not in effect and does not cover student activities associated with outside employment, volunteer work, or observational activities not required or assigned by the PA Program.

The RUSH medical liability insurance only applies if a student participates in a PA Program-approved activity. Students should not accept invitations to work with, observe, or shadow a clinician unless the program has approved the activity and/or assigned the student to that activity.

Patient Information Confidentiality

The Health Insurance Portability and Accountability Act (HIPAA) privacy and security rule creates a framework to ensure the safety, security and integrity of all patient medical record information. This includes all forms of patient record information, whether in electronic and paper file formats, and all health care information communication, whether electronic, written or verbal. The goals of the privacy and security rule are to:

- Protect and enhance patient rights by providing access to and controlling inappropriate use of health care information.
- Improve health care quality by maintaining trust between patients, providers, and payers.
- Improve efficiency and effectiveness of care delivery by creating a national framework for the privacy, confidentiality, and security of patient information, whether held electronically or in paper.

Protecting the privacy, confidentiality, and electronic security of patient information is of utmost importance at RUSH. The institution is committed to maintaining patient confidentiality and understands the sensitivity of patient information. All RUSH University students are expected to complete annual HIPAA Privacy and Security education. To review the University's HIPAA policy, see the 2023-2024 [RUSH University Catalog](#).

Physician Assistant National Certification Examination

The National Commission on Certification for the Physician Assistant (NCCPA) administers the PA National Certification Examination (PANCE) and maintains the certification status for all PAs in the United States. In order to obtain individual state licensure, all PAs must take and pass the PANCE examination. Adhering to the NCCPA's certification standards ensure that all PAs in the country maintain minimum competency for practice.

The program offers many opportunities for students to develop test-taking skills and take practice exams. Additionally, the program's curriculum and assessment standards are based on the NCCPA's Content Blueprint for the PANCE. The Content Blueprint covers both the organ systems and diseases, and the knowledge and skills areas required to pass the PANCE. The program offers a board review course at the conclusion of the program for each cohort.

Because of the evolving nature of the Content Blueprint, students should regularly check the NCCPA website for updates to the PANCE Blueprint, which can be accessed [here](#).

Physician Assistant Clinical Knowledge Rating and Assessment Tool

The Physician Assistant Clinical Knowledge Rating and Assessment Tool (PACKRAT) is an electronic examination developed by the PAEA to help students assess their preparedness for passing the PANCE. Studies have shown that the PACKRAT is a strong predictor of pass/fail performance on the PANCE. The exam also provides students with objective data to evaluate their medical knowledge and general didactic preparedness.

The PACKRAT is 4 hours long and contains 225 multiple-choice questions. The content directly parallels that of the Exam Content Blueprint for PANCE, and covers all topics related to primary care medicine.

As part of the program's general educational mission, and to facilitate students' preparation for the PANCE, the program offers the PACKRAT at the end of each year of the program. The last PACKRAT is administered just prior to graduation.

Performance on the PACKRAT offers students a standardized measure by which to evaluate their acquisition of medical knowledge and examination performance capacity. It is offered as a study guide for students in preparation for the PANCE. Although the outcome of the PACKRAT is not tied to any progression standard in the program, it is a useful tool to predict PANCE performance.

Professional Organization Membership

Students are strongly encouraged to sustain membership and participation in PA professional organizations while in the program and for the remainder of their career. Membership provides critical support for these organizations' political and professional advancement activities. Students will have the opportunity to become actively involvement in these organizations.

The Program provides student membership in both the AAPA and IAPA during enrollment, as well as encourages any student leadership roles in these organizations. A list of PA professional organizations and their contact information is available below.

Professionalism and Professional Behavior

Students in the program are expected to always behave in a manner which conveys the highest degree of personal, moral, and intellectual integrity. PA students are expected to demonstrate their professional capacity by treating one another and others with respect, being reliable in all program activities, communicating effectively in both written and oral forms, accepting personal responsibility for one's actions, and exhibiting knowledge of their limitations.

As noted above in the above section, Academic Performance – Standards and Progression, students are continuously evaluated regarding their professional and ethical behavior. Throughout all phases of the program students are evaluated on their professionalism at minimum each year, based on the criteria in the Professionalism Assessment Form (**Appendix G**). For more information regarding the program's policy on professionalism, refer to the PA Professionalism and Professional Behavior Policy below. Students are also expected to adhere to the criteria contained in the CHS Guide to Professional Conduct, (**Appendix D**). More information on the Professional Conduct is available in the 2020-2021 [RUSH University Catalog](#).

Academic Honesty

Students in the program are expected to approach all assignments with the highest level of academic and intellectual honesty. With the vast amount of information available through electronic and other media, we must acknowledge, through proper citation, the originators of any print, electronic, or oral presentation used in our work. All assignments must be the student's own work and must properly cite when another author's work is used.

It is considered academic dishonesty to represent another's work as one's own, or to collaborate in such falsification in others. Activities such as plagiarizing, cheating, inappropriate testing behavior, unauthorized use of RUSH computer hard- or software or permitting others to use your work for such

ends, are all forms of academic dishonesty. It is also dishonest to misrepresent yourself or your role to patients, their families and loved ones, or preceptors.

Academic dishonesty falls within the purview of the PA Professionalism and Professional Behavior Policy. Please refer to the policies on Academic Performance regarding the handling of violations of professional behavior.

PA Professionalism and Professional Behavior Policy

Professionalism relates to the expected intellectual, ethical, behavioral, and attitudinal attributes necessary to perform as a health care provider. Students in the PA program are expected to behave ethically and professionally, and in a manner appropriate to a clinician-in-training through all phases of the program.

All students in the PA Program are expected to adhere to the ethical codes set forth in the following Professionalism Policy. Additional professionalism policies as stated in either program courses or the clinical entity may also apply. All students at RUSH are also expected to adhere to the RUSH University Statement on Academic Honesty and the CHS Guide for Professional Conduct (See **Appendices C and D**).

Additionally, PA students are required to behave according to the Guidelines for Ethical Conduct for the PA Profession, published by the American Academy of Physician Assistants, available [here](#). (See **Appendix N**)

Professionalism Policy for All PA Program Activities

The PA Program believes that professionalism is an important quality of being a PA student and future practicing clinician. In addition to satisfying the grading criteria as specified in each individual course or rotation syllabus, the student must pass a professionalism component in order to successfully pass each course. The lecturers, faculty, and staff of the program evaluate student professionalism at all times throughout the program on a pass-fail basis.

Criteria to be evaluated in the professionalism component will include, but not be limited to, the following areas:

- Honesty and academic integrity
- Attendance and punctuality
- Appropriate behavior in all University and PA program activities
- Preparedness for class, presentations, and other assignments
- Respectful and appropriate interaction with lecturers, faculty, staff, preceptors, and fellow students
- Respectful behavior in all clinical settings towards patients, their family, and their loved ones
- Ability to work effectively as a team member on group assignments, projects, and in the clinical setting
- Respectful attitude towards the faculty, staff, preceptors, and peers
- Handling of complaints and disputes including the following of established protocols and chain of command
- Communication skills
- Response to all communication requests, such as emails and phone calls, in a timely manner
- Student work ethic
- Appearance and attire appropriate to place and situation as defined by faculty
- Compliance with departmental and University policies and procedures

Program Completion Deadline

As outlined in the Leave of Absence section, students are expected to complete the program within its proscribed 30-month curriculum. If a student is on an approved decelerated curriculum, the maximum amount of time a student may remain in the program is one year beyond the expected program duration, or 42 months. Failing to complete the program within the maximum time allotted will result in an academic withdrawal from the program. Students at risk of failing to complete the program must meet with the Program Director to develop a plan to successfully complete the program.

Program-Supported Student Travel

As part of promoting learning and professional development, students may be invited to attend conferences and professional meetings as a representative of the Program. Examples of such activities include but are not limited to attending state and local PA professional meetings as the RUSH student liaison, conference presentation of lectures, research, or posters, and participating in the AAPA national Student Challenge Bowl competition. The program strongly encourages participation in such activities and will help support student involvement whenever possible. Based on annual budget availability, the program may supplement registration, travel, and accommodations to students on a case-by-case basis. Program funds may not be used to support student participation in medical mission trips. More information regarding student activity funds is available through the program class officers and the faculty liaison to the class.

Progress and Promotions Committee

The Progress and Promotions Committee consists of the core faculty members of the PA Program, excluding the Program Director and Department Chair. Other CHS faculty and practicing PAs from both within and outside RUSH University are also included. The Committee oversees all matters of student performance during the program. In the event a student fails to make satisfactory progress in any area of the program, the Progress and Promotions Committee is convened to identify the source of the student's difficulty and to consider remediation strategies for the student to overcome challenges and succeed in the program. The student's faculty advisor or another representative may act as the student advocate in these meetings.

The Committee's remediation recommendations will be discussed with the student by their faculty advisor, the Program Chair, or other designee as determined by the Committee. If the student fails to make satisfactory academic progress despite remediation, and the Committee finds no reasonable expectation of a successful remediation of the situation, the Committee may recommend that the student be dismissed from the program. For more information regarding dismissal policies, refer to the Academic Appeals and Rules of Governance policies in the [RUSH University Catalog](#). The final decision regarding dismissal rests with the Dean of the CHS, as discussed in the College of Health Sciences Policies and Procedures for the RUSH University Rules for Governance

The Progress and Promotions Committee also conducts the formative evaluations at the end of phases I and II of the program to assess students' eligibility to progress to the next year of study, and the summative evaluation conducted at the end of the program to approve the student for graduation (see **Cumulative Competency Assessment**).

Readmission to the Program

If a student is unable for whatever reason to proceed through the published curriculum sequence, he/she may petition the Program Director to withdraw from the program. At the time of withdrawal, the student may appeal for readmission to the program at the start of the following academic year without reapplication to the program through CASPA. The option for readmission to the program is granted at the discretion of the Program Director and the Progress and Promotions Committee. The following procedure is required:

- If a student cannot proceed with the program but wishes to reenter in the next year's class cohort, they must meet with the Program Director to determine if readmission is a viable option. At this meeting, the student must present compelling evidence of their capacity for academic success if allowed to reenter the program the following year.

- If a readmission option is granted, a student contract will be made, stating the reasons for the withdrawal and any terms for possible readmission as agreed upon by the student and the Program Director. The contract will also outline a reasonable timeframe by which the student may reapply to the program. Both the student and the Program Director must sign their agreement to the contract. One copy will be given to the student and one copy will be placed in the student's program record.
- By January of the planned year of return, the student must petition for readmission by submitting a letter of intent declaring their readiness to reenter the program to the Program Director. In some cases, the student may be required to resubmit an application through CASPA for consideration with other new applicants in the admission cycle.
 - In addition to stating their readiness to reenter the program, the letter of intent should also describe and provide documentation of the outcome of any of activities required in the terms for readmission. This may include remedial course work grades or medical health clearance documentation.
- The decision regarding readmission is subject to the approval of the Program Director and the Progress and Promotions Committee.
- The student will be informed in writing of the decision whether or not readmission is granted prior to the start of the academic year. The student must complete all customary procedures for entry into the program, including submission of transcripts, completion of health and drug screening, and completion of a criminal background check, in a timely manner before the start of classes, and regardless of prior admission screening status.
- Any student who is dismissed from the program, or who voluntarily withdraws and requires more than one class cycle beyond their departure to return to the University must re-apply and be re-accepted in the usual manner and on the same basis as any new applicant. Information on the CHS Guide to Readmission is available in the 2022-2023 [RUSH University Catalog](#). Students who voluntarily withdraw from the program, regardless of academic standing at the time of leaving the program, have no guarantee of reinstatement to the program.

Remediation

Remediation is the program's process to help students improve their performance. Remediation can occur for either academic or professionalism issues. If a student fails any assessment (test, quiz, assignment), they must remediate to demonstrate understanding of the material. In the case of professionalism issues, any student who receives a professionalism evaluation will be given the opportunity to devise a remediation plan for their behavior moving forward. The process of remediation involves providing students with additional assistance in acquiring expected knowledge and/or skills related to the learning materials in the program or the program's professionalism standard. Examination remediation is the process of providing additional time and assistance to learn subject matter and allowing the student to demonstrate their knowledge in another examination.

Remediation in the program can take many forms, depending on the student's needs, and is available at the discretion of the faculty.

Safety Incidents

Any incident that affects patient, student, or staff well-being, or a patient's care, must be reported to the program immediately. Incidents occurring during the didactic year should be reported to the Director of Academic Education. Incidents occurring during the clinical year should be reported to the preceptor and the Director of Clinical Education. Filing a hospital incident report may also be required, depending on the issue and the policy of the particular institution involved. Incidents involving gross errors in judgment or practice on the part of the student may constitute grounds for dismissal from the program. In the event the incident involves a hazardous exposure, refer to the **Hazardous Exposure Incidents** policy on page 46 of this handbook on appropriate steps to take.

Scheduled Vacation and Breaks

As noted under the Academic Calendar section, during the didactic year, the program adheres to the RUSH University academic calendar, with vacations and breaks as posted on the Registrar's Office calendar.

If a student is failing at the end of a course, or fails a formative assessment evaluation, and requires remediation at the end of the term, the faculty reserves the right to use scheduled vacation and break time to administer the required remediation.

During the clinical rotations, breaks are determined at the discretion of the PA Program and the student preceptor.

Social Media

RUSH maintains a strict policy regarding the use of its name, logo, trademark, and image in any form of social media. Students, faculty, and employees are not permitted to use the RUSH name, refer to, make statements on behalf of RUSH, or represent themselves as an agent of RUSH without express advance permission from the Department of Marketing and Communications. This relates to all publicly accessible forms of communication via the internet, including but not limited to: wikis; video-sharing Web sites such as YouTube; on-line social networks such as Facebook, Instagram, Snapchat, Twitter, Vine, and LinkedIn; social bookmarking sites such as Digg and Delicious; or any other form of on-line publishing, including blogs, discussion forums, newsgroups and e-mail distribution lists. For more information, refer to the complete RUMC policy on social media (**Appendix H**).

Students are not permitted to refer to or identify patients or their protected health information in any social media forums or other non-RUSH electronic communications. Similarly, students should not refer to faculty, clinical rotation sites, preceptors, or other program associates on any social media forums.

Always keep in mind that you are personally responsible for the content you publish on-line, and that what you publish on blogs, wikis, or other forms of user-generated media can never be truly erased or deleted. Failure to adhere to this policy constitutes an egregious lapse in professionalism and will require disciplinary action.

Student Attire and Identification

Students in the PA Program are expected to maintain a professional appearance for all program-related activities. Professional appearance demonstrates respect and creates a positive image of RUSH PA students to colleagues, faculty, hospital staff, administration, and patients. The following are further guidelines regarding the program's dress code.

In general, student appearance is expected to be clean and neat. Students may choose to wear either scrubs or business casual clothes. All clothing should not be wrinkled and should fit appropriately. For any activity involving delivering a presentation to the class or patient contact (actual or simulated), student dress should be business casual unless scrubs are otherwise indicated. University-issued photo ID must be worn and visible at all times.

Students must wear a short white lab coat for all activities involving actual or simulated patient contact. The coat must, at minimum, have the RUSH logo patch on the left chest. Students on clinical rotations must wear the PA Program-issued short white lab coat with the PA Program patch affixed to the upper left arm sleeve.

Additional details can be found in the dress code policy statement and guidelines in **Appendix J** of this handbook.

Student Wellness Center

RUSH University provides offers students access to professional counseling, at no charge, for a variety of concerns ranging from academic problems to issues of personal development. Students may seek guidance on a wide range of personal issues that may be affecting their health and academic performance. Students may voluntarily seek the services of the counseling center at any time. Additionally, the PA program faculty may recommend the wellness center to students. Information regarding student wellness center resources can be found [here](#).

The Center for Clinical Wellness maintains strict standards of privacy and confidentiality. No information about an individual student is released to anyone, inside or outside the University, without the prior consent of the student. No student contact with the Wellness Center becomes a part of any other University record.


Students who wish to utilize the Center for Clinical Wellness, should follow the contact pathways below:

Wellness Pathways






You can reach a behavioral health professional 24/7 for support, as well as establish care at the Center for Clinical Wellness.


How to use:

- Email 2323@page.rush.edu
- Call 312-942-6000, ext. 2323
- Use the [online paging directory](#), and search "2323" under ID



Wellness Pathways

"I am in danger/crisis." If you or someone you know is at risk of harming themselves or others, call 911 immediately.	 
"I need support now." Call/text the Rush Wellness Assistance Program. You can connect with support immediately — 24/7. <i>*Powered by Perspectives</i>	
"I am overwhelmed and unsure what to do." Page the Rush Center for Clinical Wellness 24/7. Your page will be responded to within 60 minutes.	
"I want Wellness to support me or my department." Schedule an appointment with the Rush Center for Clinical Wellness now. For scheduling questions or other needs, email RushWellness@rush.edu .	



Student Health Policies

Students are responsible for maintaining their personal health and are required to have health insurance to cover the cost of all necessary medical care throughout the program, including hazardous exposure incidents regardless of the location in which the exposure occurs. Refer to the RUSH University Catalog for information regarding compliance with mandatory health insurance policies and the University sponsored health insurance program. The program's student health policies are aligned to comply with CDC, state, and RUSH guidelines, as applicable.

Program director and faculty, medical directors, and instructors are not permitted to act as healthcare providers or offer healthcare services to students, except in an emergency in which no other healthcare providers are available.

Accommodations

Being a PA requires certain cognitive, motor, communication, and behavioral capacities. The minimum expected capacity in these domains are expressed in the Technical Standards for PA Students (**Appendix O**). Students who wish to request an accommodation to meet the Technical Standards must contact the RUSH Office of Student Accessibility Services for information on the accommodation process. Information on accommodations for students with accessibility needs is available [here](#).

Hazardous Exposure Incidents

In the event of hazardous material exposure at any phase of training during the program, students must adhere to the University protocol outlined below. Note, the program does not cover expenses incurred as a result of hazardous exposure incident.

Procedures for Hazardous Exposure Incidents

Exposure Incident Definition: Eye, mouth, mucous membrane, non-intact skin contact, or parenteral exposure to blood or potentially infectious or hazardous materials, that results from the performance of a duty related to a student's educational program.

Procedure at RUSH University Medical Center

- Wash injured area with soap and water. If eyes, nose, or mouth, use water only.
- Immediately report the incident to your preceptor / course instructor.
- Immediately call and then report to Employee and Corporate Health Services (ECHS), 4th floor Atrium, 312-942-5878.
 - If the ECHS is not available, leave a message reporting the incident. Include your name, student ID, and a contact number for a staff member to contact you. YOU MUST report the incident to ECHS AS SOON AS POSSIBLE to ensure you are cared for appropriately.
- If ECHS is closed, immediately report to the RUSH Emergency Room (ER), RUSH Tower, 1st floor, 312- 947-0100. Please bring your student ID or indicate that you are a student and not an employee. If student is seen in ER, the student must report to ECHS on the next business day.
- Supply ECHS or ER nurse/physician with the following information on the source: (a) name, (b) date of birth, (c) medical record number, (d) known medical diseases (Hepatitis B, HIV), and (e) patient room number. All information is recorded confidentially in the Blood/Body Fluid Exposure Record.
- Students will be counseled or treated as deemed appropriate by ECHS or ER personnel.
- Return to ECHS or to consultants as directed for follow-up lab work and treatment as indicated.

Procedure Off Campus

If an exposure incident occurs off campus, follow the protocol at your facility and contact the RUSH ECHS at 312-942-5878 AS SOON AS POSSIBLE to report the incident. Follow-up care should be received at ECHS or at consultants as directed by ECHS.

Health Insurance

Students are required to carry personal health insurance at all times during the program. In addition to providing coverage in the event of a health issue, the student's health insurance will be used to cover expenses if a hazardous exposure incident occurs in the clinical setting. Neither RUSH nor the PA Program will cover the cost of evaluation and management if a hazardous exposure event were to occur during the program.

Students who do not carry a personal policy must purchase coverage through the University. More information regarding acquiring health insurance during enrollment is available [here](#).

Immunizations

The PA program requires that each student have medical clearance from their healthcare provider and a record of immunization currency on file before they register for classes. RUSH University and the PA Program adhere to the CDC and State of Illinois standards on vaccinations for health care workers. Information on the CDC guidelines are available here: <http://www.cdc.gov/vaccines/adults/rec-vac/hcw.html>. The State of Illinois guidelines are available here: <https://dph.illinois.gov/topics-services/prevention-wellness/immunization.html>.

The program requires students have documented immunity to each of the following:

- Measles, Mumps, Rubella
- Tetanus, Diphtheria, and Pertussis
- Hepatitis B via the three-vaccination series (must document both having undergone the vaccination series and immunity)
- Varicella (Chicken Pox, either by occurrence or vaccination)

Providing a vaccination history is not sufficient to document immunity. Students must have titer test results that prove immunity. Waivers for non-conversion are reviewed on a case-by-case basis, in accordance with the RUSH Employee Health standards.

In addition to documenting immunity to the above, students must document the following:

- Tuberculosis status annually, by a negative Quantiferon-TB Gold test, a 2-step PPD test, or a negative chest x-ray, as appropriate.
- Influenza vaccination within the year prior to program matriculation date. Thereafter, students must comply with RUSH's annual influenza vaccination policy.
- Meningitis conjugate booster immunization after 16 years of age
- COVID-19 vaccination
- Valid exemption, as indicated

Certain rotations may also require that students update their health records prior to starting clinical rotations at that site. The program will inform students of any necessary procedures to meet such requirements in advance of the start of clinical rotations. Students must comply with all clinical rotation site health maintenance requirements to remain in good standing in the program. The program will not change rotation assignments based on personal immunization preferences.

Student health records are confidential and will remain on file through CastleBranch. However, each student is required to sign a release of information that permits the program to provide affiliated clinical practice sites, agencies, and preceptors proof of the student's health status, as needed.

Student Employment During the Program

The following guidelines apply to students regarding employment while in the PA program:

- The PA Program maintains an intense curriculum that demands a great deal of time, effort, and energy. It is important that students maintain personal balance and allow sufficient time for social activities, recreation, and rest. Therefore, students are not permitted to work enrolled in the program.
- During the clinical phases of the program, several factors make it even more difficult to maintain employment. The requirements of the rotations and the variability of both the hours and location of the rotations prohibit students from working during their clinical rotations.
- Students should not accept any form of payment for the tasks they perform while on clinical rotations.
- While on clinical rotations, students may not provide services within the preceptor's practice apart from those rendered for their educational value and as part of the clinical instruction experience. Students may not receive monetary compensation for work performed within the preceptor's practice.

- Students should not perform any services outside of those appropriate for a PA student in training, regardless of the student's prior professional or academic background. This includes but is not limited to substituting for instructional or clinical faculty or performing staff clerical or administrative duties.
- Students of the PA Program are not permitted to participate in the RUSH University work-study program.
- Students are not allowed to work for the PA program or its clinical agents in any capacity.

Employment and Career Services

The University's Office of Student Life and Engagement offers career resources support, helping students active in the job search process with counseling on creating resumes, cover letters, and personal statements and offers job search strategies and interviewing techniques. More information about these services can be found [here](#).

During the third year of the program, the program will provide information and training in professional development and seeking employment through seminar presentations on such topics as conducting a job search, interviewing skills, and negotiating salaries and benefits.

University Student Services

RUSH University provides a wide range of services to its students. Students are encouraged to use the services as needed.

Below is a partial list of the student services available on campus. Students are directed to the University website: www.RUSHu.RUSH.edu/ and to the Student Handbook for more information.

- Bookstore
- Career services
- Check cashing and ATMs
- Computer resources
- Copy machines & quick copy center
- Diversity/equal opportunity/affirmative action
- Financial aid
- General education resources
- Honor societies
- Housing
- Library
- Lockers
- McCormick Educational Technology Center (METC)
- Media services
- Parking
- Registrar
- Security
- Shuttle bus services
- Student affairs
- Student counseling center
- Student health insurance
- Study space
- Transcripts

Important RUSH Phone Numbers

RUSH University Center for Clinical Wellness 312-942-3687
RUMC Campus Security 312-942-5678
RUMC Emergency Room 312-947-0100
RUMC Employee & Corporate Health Services 312-942-5878

PA Professional Organizations

The American Academy of Physician Assistants (AAPA) / The Student Academy of the AAPA (SAAAPA)

The AAPA is the national organization representing the PA profession. The Academy's purpose is to promote the professional and personal development of its members and to promote the interests of the profession. Students are encouraged to join the national organization.

SAAAPA is the organization of chartered student chapters of the AAPA. Each accredited PA program is eligible to charter and maintain a student organization. Students are encouraged to work with a faculty advisor to establishing a SAAAPA chapter at RUSH University.

American Academy of Physician Assistants
2318 Mill Road, Suite 1300
Alexandria, VA 22314
Phone: (703) 836-2272
Websites: AAPA: <http://www.aapa.org/> SAAAPA: SAAAPA

The Illinois Academy of Physician Assistants (IAPA)

The constituent chapter of AAPA for PAs in Illinois. Student involvement in the state academy is strongly encouraged.

Illinois Academy of Physician Assistants
100 East Washington Street Springfield, IL 62701
Phone: (217) 528-9970
Website: <http://http://www.illinoispa.org>

The Physician Assistant Education Association (PAEA)

The national organization of PA educational programs. It was formed in 1972 for the purpose of enhancing the quality of education offered by PA Programs.

Association of Physician Assistant Programs
655 K Street NW, Suite 700
Washington, DC, 20001-2385
Phone: (703) 548-5538
Website: <http://www.paeaonline.org/>

The National Commission on the Certification of Physician Assistants (NCCPA)

Develops and administers the national certification examination, awards certification, monitors continuing medical education, and administers the periodic recertification examinations for Physician Assistants.

National Commission on the Certification of Physician Assistants
12000 Findley Road, Suite 200
Duluth, Georgia, 30097-1409
Phone: (678) 417-8100
Website: <http://www.nccpa.net>

PA PROGRAM HANDBOOK APPENDICES

APPENDIX A
RUSH University College of Health Sciences
TOEFL POLICY
Effective 2017

TOEFL for International Applicants

If your native language is not English, you need to prove that you are proficient in English by submitting a satisfactory score on the Test of English as a Foreign Language examination as part of your application.

TOEFL Score Minimums

To prove English proficiency, you need one of the following minimum scores:

- Internet version: 88 total, 18 on each section
- *Paper version: 570 total, 55 on each section
- Computer version: 230 total, 20 on each section

*** Beginning October 2017, the paper-based test will be replaced with the paper-delivered test and a minimum score of 18 in each section of reading, writing, and listening is required.**

How to Submit Your Score

Use institution code 1676 to send your score report to RUSH University. The admissions office must receive your official score report prior to when admission decisions are made for your program.

Waiver for U.S. Graduates

You may request a waiver of the TOEFL exam requirement if you have graduated from high school or successfully completed a higher education degree program (Associate degree or higher) in the United States or one of its English-speaking protectorates.

You will need to provide proof of receipt of a high school or college diploma from an accredited institution in the United States or one of its English-speaking protectorates.

Mail waiver requests to the following address:

Dina Batlivala
Director, Marketing & Admissions
RUSH University
College of Health Sciences
Armour Academic Center
600 S. Paulina St., Suite 1001
Chicago, IL 60612

APPENDIX B

RUSH University Student Honor Code
I pledge that my academic, research, and/or clinical work will be of the highest integrity.
I shall neither give nor receive unauthorized aid; I shall not represent the work of others as my own;
I shall not engage in scientific misconduct; and I shall treat all persons with the greatest respect and dignity, just as the ethical codes of RUSH University Medical Center and my future profession demand.
I recognize that behaviors that impede learning or undermine academic, research, and clinical evaluation, including but not limited to falsification, fabrication, and plagiarism, are inconsistent with RUSH University values and must be reported.

Implementation of the Honor Code

This Honor Code (hereafter referred to as the Code) sets the standards for expected professional behavior within the University and the Medical Center. Commitment to this Code is a shared responsibility of all faculty, staff, and students within the RUSH University community to ensure the highest standards of behavior, whether in the classroom, the laboratory, or in the clinical setting, and to ensure that education obtained at RUSH provides a sound foundation for each student's future success as an academic, scientific, or healthcare professional.

Code Enforcement

Any violations of this Code or suspicion of student or academic misconduct should be reported to the student's college for further review in accordance with the procedures specified by that college. Each college will be expected to set standards for addressing Honor Code violations and cases of misconduct in a fair and consistent manner that best fits their respective student population. Students refusing to sign must submit a letter to their dean's office explaining why, and adherence to the Code is required for matriculation, whether or not the document has been signed. The Code may also be enforced for off-campus actions when the student is representing themselves as a member of the University.

Commitment

By signing below, I affirm my commitment to this Code and pledge to act with integrity and adhere to the RUSH University values of Innovation, Collaboration, Accountability, Respect, and Excellence. I understand that this signed document becomes part of my permanent record, and I must uphold the letter and spirit of this Code throughout my RUSH education.

Student Signature

Date

Printed Name

College

APPENDIX C

RUSH University Statement on Academic Honesty

Academic Honesty and Student Conduct

RUSH University students and faculty belong to an academic community with high scholarly standards. As essential as academic honesty is to the relationship of trust fundamental to the educational process, academic dishonesty violates one of the most basic ethical principles of an academic community and will result in sanctions imposed under the University's disciplinary system.

Examples of conduct that would subject a student to disciplinary action include but are not limited to:

- All forms of academic dishonesty including but not limited to: cheating; plagiarism; collusion; gaining or seeking unfair advantage in relation to any work submitted; helping others to gain an unfair advantage; removing examination materials from a secure examination area; the unauthorized downloading or copying of examinations that are given online; fabricating assigned academic work, including clinical assessments, and presenting them as authentic; facilitating academic dishonesty; unauthorized examination behavior
- Obstruction or disruption of teaching, research, administration, clinical practice and community outreach or other University/Medical Center activities
- Falsification of student records, transcripts or financial aid forms or applications
- Theft of or damage to University/Medical Center property or the property of a member of the University/Medical Center community
- Threatened or physical abuse of any person or action that threatens or endangers the safety of others
- Misrepresentation, falsification, alteration, or misuse of the University/Medical Center documents, records or identification, or research data
- Unauthorized use or entry of University/Medical Center facilities
- Conviction of a crime deemed serious enough to render the student unfit to pursue his or her profession
- Conduct that is inconsistent with the ethical code of the profession the student is preparing to enter
- Unlawful use or possession of controlled substances on the Medical Center campus
- Unauthorized possession or concealment of firearms or other weapons on Medical Center premises at any time
- Attempting to gain access to another's email or computer account, username, or password
- Knowingly setting off false fire, safety, or security alarms
- An accusation of student and/or faculty academic dishonesty or misconduct made in bad faith

APPENDIX D

CHS Guide to Professional Conduct

Professionalism relates to the intellectual, ethical, behavioral, and attitudinal attributes necessary to perform as a health care provider or manager. As it applies to his or her professional role, the student will be expected to:

Attend

- Demonstrate awareness of the importance of learning by asking pertinent questions, identifying areas of importance in practice and reporting and recording those areas.
- Avoid disruptive behavior in class, laboratory and clinical or practicum rotations, such as talking or other activities that interfere with effective teaching and learning.

Participate

- Complete assigned work and prepare for class, laboratory, and clinical or practicum objectives prior to attending.
- Participate in formal and informal discussions, answer questions, report on experiences, and volunteer for special tasks and research.
- Initiate alteration in patient care techniques when appropriate via notification of instructors, staff and physicians.

Dependability and Appearance

- Attend and be punctual and reliable in completing assignments with minimal instructor supervision.
- Promote a professional demeanor by appropriate hygiene, grooming and attire.

Communicate

- Demonstrate a pleasant and positive attitude when dealing with patients and co-workers by greeting them by name, approaching them in a non-threatening manner, and setting them at ease.
- Explain procedures clearly to the patient.
- Ask patients how they feel and solicit patient comments regarding the patient's overall condition and response to assessment and/or therapy.
- Communicate clearly to staff and physicians regarding the patient status, utilizing appropriate charting, oral communication and the established chain of command.
- Demonstrate a pleasant and positive attitude when dealing with co-workers, instructors, faculty, nurses and physicians.

Organize

- Display recognition of the importance of interpersonal relationships with students, faculty, and other members of the health care team by acting in a cordial and pleasant manner.
- Work as a team with fellow students, instructors, nursing staff and the physician in providing patient care.
- Organize work assignments effectively.
- Collect information from appropriate resources.
- Correlate care to overall patient condition.
- Adapt care techniques to overcome difficulties.
- Devise or suggest new techniques for patient welfare or unit efficiency.

Be Safe

- Verify identity of patients before initiating therapeutic action.
- Interpret written information and verbal directions correctly.
- Observe and report significant changes in patient's condition promptly to appropriate person(s).
- Act to prevent accidents and injury to patients, personnel and self.
- Transfer previously learned theory and skills to new/different patient situations.
- Request help from faculty/staff when unsure.
- Comply with hospital and university guidelines for performance.

Examples of critical errors in professional conduct and judgment include:

- Failure to place the patient's welfare as first priority.
- Failure to maintain physical, mental, and emotional composure.
- Consistent ineffective, inefficient use of time.
- Failure to be honest with patients, faculty, and colleagues.
- Scholastic dishonesty in any form.
- Failure to follow the RUSH University Medical Center Code of Conduct.

Suspected violations of the Professionalism Policy will be handled in accordance with the professionalism standards outlined in the University handbook. Violators of this policy may be placed on probation and may be denied permission to continue in the program.

APPENDIX E

RUSH University College of Health Sciences

Student Community Service and Engagement Activities Documentation Form

As a requirement for graduation, each student must complete at least twelve (12) hours per academic year of approved community and/or professional service – eight (8) of which must be service to the community. Activities that may be used to meet this requirement include community health fairs or screenings, community service events, approved professional service and/or continuing education activities, PA program recruitment or other promotional activities, assistance with delivery of seminars, lectures, workshops and related community or professional education activities.

Each student must provide documentation of their participation in approved activities by filling out the following form:

Student Name: _____ Service hours acquired: _____

The student listed above has acquired professional and/or community service by participating in the following activity (please describe in detail):

Title of Activity: _____ Date: _____

Approved by¹: _____ Date: _____

Verified by²: _____ Date: _____

1 Participation in activities should be pre-approved by the Faculty Liaison for Student Community Service and Engagement Activities or other designated program faculty member

2 Satisfactory completion of the activity must be verified by a designated faculty member or community professional service activity provider or coordinator.

APPENDIX F

RUSH University Physician Assistant Program First Year Formative Evaluation

Student Name:
Evaluation Date:

	Meets	Does Not Meet	Comments
Academic Performance			
Passing performance in all academic courses			
Passing performance in IPE course			
Maintenace of overall GPA of 3.0			
Completion of medical terminology course			
Completion of PACKRAT			
Professional Skills			
Passing performance on history OSCE			
Passing performance on physical exam OSCE			
Completion of skills crash course			
Completion of BLS/ACLS certifications			
Passing performance on first year OSCE			
Community Service			
Completion of 12 hours of service			
Professionalism			
Adherence to attendance policy			
Demonstration of attitudes and behaviors appropriate for a first year PA student			
Demonstration of professional communication with classmates and faculty			
If applicable, adherence to professionalism assessment and contract			

Overall Assessment		
Was professionalism evaluation completed for student?	Y / N	
Was student on Concern or Probation during first year? If yes, please document if student meets criteria to be removed from Concern or Probation.	Y / N	
Can student progress to second year? Please note any concerns.	Y / N	
Additional Comments		

APPENDIX F

RUSH University Physician Assistant Program Second Year Formative Evaluation

Student Name:
Evaluation Date:

	Meets	Does Not Meet	Comments
Academic Performance			
Passing performance on all preceptor evaluations			
Passing performance on all end-of-rotation examinations			
Passing performance on all assignments and presentations			
Completion of PACKRAT			
Professional Skills			
Passing performance on station OSCE			
Passing performance on second year OSCE			
Completion of simulation curriculum			
Community Service			
Completion of 12 hours of service			
Professionalism			
Adherence to attendance policy			
Demonstration of attitude and behaviors appropriate for a second year PA student			
Demonstration of professional communication with classmates and faculty			
Completion of EXXAT patient, procedure, and duty hours logging			
Completion of EXXAT preceptor and site evaluations			

Completion of competency self-evaluations			
If applicable, adherence to professionalism assessment and contract			
Overall Assessment			
Was professionalism evaluation completed for student?	Y / N		
Was student on Concern or Probation during second year? If yes, please document if student meets criteria to be removed from Concern or Probation.	Y / N		
Can student progress to third year? Please note any concerns.	Y/N		
Additional Comments			

APPENDIX F

RUSH University Physician Assistant Program Third Year Summative Evaluation

Student Name:
Evaluation Date:
Expected Date of Graduation:

	Meets	Does Not Meet	Comments
Academic Performance			
Passing performance on all preceptor evaluations			
Passing performance on all third-year examinations			
Passing performance on all assignments and presentations			
Passing performance on master's research project			
Completion of PACKRAT			
Professional Skills			
Completion of cadaver skills lab			
Passing performance on third year OSCE			
Completion of simulation curriculum			
Community Service			
Completion of 12 hours of service			
Professionalism			
Adherence to attendance policy			
Demonstration of attitude and behaviors appropriate for a third year PA student			
Demonstration of professional communication with classmates and faculty			
Completion of EXXAT patient, procedure, and duty hours logging			
Completion of EXXAT preceptor and site evaluations			

Completion of SUD curriculum			
If applicable, adherence to professionalism assessment and contract			
Overall Assessment			
Was professionalism evaluation completed for student?	Y / N		
Was student on Concern or Probation during third year? If yes, please document if student meets criteria to be removed from Concern or Probation.	Y / N		
Can student progress to graduation? Please note any concerns.	Y/N		
Additional Comments			

APPENDIX G

RUSH University PA Program Professionalism Assessment

Student Name			
Year in the Program	PA-S1	PA-S2	PA-S3
Evaluation Date			
Setting			

Directions: This evaluation is designed to assist students and faculty in assessing professional development. Please check the box of the most appropriate positive or negative behavior. If a negative behavior is chosen at any time, please include comments.

Communication and Self-Improvement	
<i>Positive Behaviors</i>	<i>Negative Behaviors</i>
Displays a respectful and positive attitude towards others	Often has a disrespectful or negative attitude towards others
Communicates clearly and effectively	Has difficulty communicating with peers, faculty, or other members of the healthcare team
Recognizes their own limitations as a student	Has overstepped their boundaries with peers, faculty or other members of healthcare team
Accepts feedback and results of evaluation activities in a positive manner and makes changes appropriately	At times confrontational, argumentative, or accusatory when given poor results or constructive criticism
Takes responsibility for their own actions	Makes excuses or blames others for their own actions
Aware of their own verbal and non-verbal body language	Often makes inappropriate facial expressions or displays inappropriate body language
Responds to staff and faculty emails within 24-48 hours when a response is requested	Does not respond to emails, or requires follow-up emails to be sent
Comments (if <u>any</u> negative behavior is chosen, please include specific comments):	

Honesty, Ethics, and Dependability	
<i>Positive Behaviors</i>	<i>Negative Behaviors</i>
Completes assigned tasks and responsibilities without prompting	Fails to meet deadlines or needs reminders to complete tasks
Is on time and prompt for all academic and clinical sessions	Is often late, absent, or does not follow the absence notification policy
Actively participates in class without obvious distractions	Appears disengaged and distracted during class
Prepares adequately for all didactic and clinical coursework/activities	Is often unprepared for didactic or clinical coursework/activities
Projects a professional image to peers, faculty, patients, and other members of the healthcare team	Is unprofessional in attire and/or mannerisms towards others
Conducts themselves in an ethical, moral, and legally sound manner	Ethical or moral conduct was unacceptable on at least one occasion
Attributes work appropriately, with proper use of references and citations	Incorrectly or inconsistently references work
Adheres to institutional HIPAA patient confidentiality policies	Does not adhere to patient confidentiality or HIPAA policy
Comments (if <u>any</u> negative behavior is chosen, please include specific comments):	

Ability to work with other members of the Team	
<i>Positive Behaviors</i>	<i>Negative Behaviors</i>
Allows others to express their opinions	Is insensitive to the needs or opinions of others
Remains respectful and open-minded to other perspectives	Is disrespectful and/or closed-minded at times
Always actively participates as an equal member of the healthcare team	Only participates when prompted or not at all
Is accepting of cultural differences and/or diverse populations	Is insensitive to cultural differences and/or diversity issues
Comments (if <u>any</u> negative behavior is chosen, please include specific comments):	

Clinical Judgment, Presentation, and Organization	
<i>Positive Behaviors</i>	<i>Negative Behaviors</i>
Makes decisions based on factual information	Makes decisions based on inappropriate or incorrect information
Demonstrates rationale for decisions made	Is not able to identify reasons or rationale for their choices
Delivers information in a thorough, organized, and concise manner at all times	Is often disorganized and scattered in delivery of information
Always documents accurately in the patient's medical record and healthcare team materials	Often makes mistakes and errors in documentation in the patient's medical record or healthcare team materials
Budgets time efficiently to meet peers, faculty, and/or preceptor expectations	Demonstrates issues with time management and/or fails to meet faculty or preceptor expectations
Is able to prioritize multiple commitments appropriately	Cannot prioritize commitments and often is scrambling to meet deadlines
Comments (if <u>any</u> negative behavior is chosen, please include specific comments):	

Faculty's comments and plan of action (if applicable):

Student's Comments:

Student's signature and date:

Faculty's signature and date:

Appendix H Social Media Policy



Policy

Title	Social Media
Policy Number	OP-0362
PolicyType	Operational
Category	Leadership
Subcategory1	
Subcategory2	
Subcategory3	
Approval Date	10/1/2017
Contact	thurston_hatcher@rush.edu, social media manager
Applies To	
Purpose	
Executive Summary	Rush relies not only on the strong formal competencies of its employees, students and contractors, but also on the trust and support of the communities it serves. While we encourage open communication both internally and externally in all forms, we expect and insist that such communication does not demean our enterprise, violate our patients' or students' privacy and trust, or breach the fiduciary obligations of employment. Personal communications that include information about business or clinical operations at Rush, or about any of its patients, are always forbidden and may support grounds for immediate action in accordance with Rush policy, as well as federal, state and local regulations.
Definitions	
Equipment	
Information	.
Policy	The following policy applies to all employees, students and contractors of Rush University Medical Center and covers all publicly accessible communications via the internet relating to Rush, Rush University Medical Center, Rush Oak Park Hospital, Rush University and their affiliates (hereinafter referred to as "Rush"). This includes, but is not limited to, wikis; video-sharing websites such as YouTube and Vimeo; online social networks such as Facebook, Twitter, LinkedIn, Instagram, Pinterest and Snapchat; social bookmarking sites such as Reddit; or any other form of online publishing, including blogs, discussion forums, newsgroups and email distribution lists.

Guidelines	
Responsibility and Procedure	<p>All Rush employees, students and contractors:</p> <ol style="list-style-type: none"> 1. Know and follow the Rush Code of Conduct and all other organizational policies. Do not let your online activity interfere with your work commitments to Rush. 2. You are personally responsible for the content you publish online. Be mindful that what you publish on blogs, wikis or any other form of user-generated media may never truly be erased or deleted. 3. You may not make public statements on behalf of Rush in letters to the editor, blog comments, discussion boards or any other social media forums for sharing thoughts and opinions. If, for some reason, you must indicate your association with Rush in a personal online communication, write in the first person, identify yourself by stating your first and last name, state your role at Rush, and use a disclaimer that makes it clear that you are speaking for yourself and not on behalf of Rush. You may use a disclaimer such as the following: "The postings on this site are my own and do not necessarily represent Rush's positions, strategies or opinions." 4. Do not use Rush's logo or trademarks or make endorsements of any kind unless you have received approval from the Department of Marketing and Communications. 5. You may not use "Rush" in your username or handle if you are not operating an official Rush social media account. 6. You may not use Rush's name or Rush's resources, including computer equipment, in relation to any political campaign or candidate. 7. Do not disclose Rush's confidential or other proprietary information to any third party, and certainly do not post Rush's confidential or other proprietary information on any social media or other public website. 8. Never identify patients or share their protected health information in social media forums or any other non-Rush electronic communications. 9. Ensure that all communications in social media forums comply with relevant Rush policies regarding privacy and confidentiality of student records. 10. Respect copyright, trademarks and other intellectual property rights of others. For example, just because you were able to pull an image or logo off a web page does not mean you are authorized to republish that image or logo on a different site. 11. Do not cite or reference vendors, clients or suppliers without their approval. When you do refer to a vendor, client or supplier, where possible, link back to the source. 12. When contributing content in an online forum, do not use ethnic slurs, racial epithets, personal insults or obscenity, or engage in any offensive conduct. You should also show proper consideration for others' privacy and for topics that may be considered objectionable or inflammatory, such as politics and religion.

For questions about Rush policy in general, talk to your supervisor. View

policies online at inside.rush.edu, where you will find a searchable database of operational policies and procedures for Rush.


- Code of Conduct (HR-E 01.00)
- [Student Conduct, Rush University Catalog](#)
- Harassment (HR-E 02.00)
- Code of Ethical Behavior (OP-0207)
- Obtaining Consent Regarding Rush University Students (AD-0006)
- Rush General Consent Form for Photographing, Videotaping or Audiotaping (form; copies available in print shop)
- Photo, Video and Sound Recording (OP-0419)
- [Privacy, Confidentiality and FERPA](#)
- HIPAA Privacy Policy (HP-0002)
- HIPAA Security Policy (HS-0001)
- Notice of Privacy Practices (HP-0008)
- Disclosure of Patient Health Information (OP-0142)
- Employee Access to Patient Information (OP-0032)
- Release of Information to the News Media (OP-0002)
- Use of Rush Name and/or Logo (OP-0313)
- Prohibition of Making Political Contributions or Attempting to Influence Legislation (CC-E001)

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Archive Flag	No

Content Type: Policy

APPENDIX I

Drug and Alcohol-Free Campus Policy

		Policy Title: HR-A 08.00 Drug and Alcohol Free Campus Policy		Former Policy Number:	
Document Owner: Adam Michelman			Approver(s): Adam Michelman		
Date Created: 12/19/2022		Date Approved: 12/19/2022		Date Updated: 12/19/2022	
				Review Due: 12/19/2025	
Applies To: RUMC <input checked="" type="checkbox"/> RUMG <input checked="" type="checkbox"/> ROPH <input checked="" type="checkbox"/> RCMC <input checked="" type="checkbox"/> RCH <input checked="" type="checkbox"/> ROPPG <input checked="" type="checkbox"/> RCMG <input checked="" type="checkbox"/>					

Printed copies are for reference only. Please refer to the electronic copy for the latest version

Rush complies with all applicable state and federal laws concerning drugs and alcohol in the workplace, including the requirements of the Drug Free Schools and Communities Act (DFSCA) and the Drug Free Workplace Act. In accordance with the DFSCA, Rush shall review its compliance efforts on a biennial basis to measure effectiveness and to ensure that the standards of conduct and conduct sanctions have been consistently enforced. All members of the Rush Community are encouraged to review the information on the following pages. This information is distributed annually as part of mandatory training and provided to students, faculty and staff on an ongoing basis during student, faculty and staff orientations and meetings. Distribution shall occur by a combination of techniques, including but not limited to, U.S. mail, electronic transmission, within registration and/or orientation materials, as a learning management system modules, on Blackboard, and/or by personal distribution during classes or meetings.

In keeping with the mission, vision and core values of Rush, and in recognition of its obligation to protect the safety, health and well-being of its students, faculty, staff, patients, visitors, and volunteers, Rush prohibits the unlawful distribution, dispensing, usage, sale, storage and/or possession of alcohol and/or illicit drugs on its premises or while performing Rush business excluding exceptions for moderate alcohol consumption at approved Rush functions.

In addition, all faculty and staff (including student employees and contractors) are prohibited from reporting for work or working while in an impaired state. If a faculty or staff member is impaired by prescription medication, taken according to a doctor's order, to the point that it affects their ability to perform the essential functions of their job, they must immediately inform their supervisor prior to starting work.

Rush reserves the right to test students, faculty and staff for alcohol and/or drugs under certain circumstances as described within this policy (Refer to Section 8.01d.). Testing for the presence of alcohol will be conducted by analysis of breath, saliva and/or blood; testing for the presence of the metabolites of drugs will be conducted by the analysis of urine, blood, hair and/or saliva, at Rush's discretion.

This policy applies to all students, all faculty and all staff (including agency or contract employees) and is a condition of enrollment and employment which all students, faculty and staff agree to by accepting admission or employment and continuing to attend and/or work at Rush.

8.01 POLICY VIOLATIONS AND CONDUCT SANCTIONS

a. Drugs. The illegal manufacture, distribution, dispensing, use, sale, storage and/or possession of controlled substances on Rush property or while performing Rush business is strictly prohibited. Use of a medication if prescribed in another person's name is strictly prohibited. Storage of any drug on Rush premises without authorization (except for drugs for which a student, faculty or staff member has a current prescription) is strictly prohibited. For safety reasons, such personal prescriptions must be safely stored. Further, diverting medications from Rush for one's own personal use, sale, dispersion or distribution is also a violation of this policy. Students, faculty or staff engaged in such prohibited conduct will be subject to discipline including, but not limited to any, or a combination, of the following: mandatory referral to a treatment program via the Rush Employee Assistance Program (EAP), progressive disciplinary action, last chance agreements, focused professional practice evaluations, expulsion or termination, in



Policy Title: HR-A 08.00 Drug and Alcohol Free Campus Policy		Former Policy Number:	
Document Owner: Adam Michelman		Approver(s): Adam Michelman	
Date Created: 12/19/2022	Date Approved: 12/19/2022	Date Updated: 12/19/2022	Review Due: 12/19/2025
Applies To: RUMC <input checked="" type="checkbox"/> RUMG <input checked="" type="checkbox"/> ROPH <input checked="" type="checkbox"/> RCMC <input checked="" type="checkbox"/> RCH <input checked="" type="checkbox"/> ROPPG <input checked="" type="checkbox"/> RCMG <input checked="" type="checkbox"/>			

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accordance with Rush student, faculty and staff disciplinary policies and processes. Under certain circumstances, prohibited conduct may also be reported to appropriate law enforcement officials and/or to the Illinois Department of Financial and Professional Regulation. Furthermore, violations by students may be referred to the appropriate committee within each college for additional review and adjudication.

This policy does not prohibit employees from the lawful possession and use of prescribed medications. Employees have the responsibility, however, to consult with their doctors or other licensed health care professionals about the effect of prescribed medications on their ability to meet job demands in a safe manner, and to promptly disclose any work restrictions or impairment due to prescribed medications taken according to a doctor's order to their manager or Employee Health Services. Employees will not be required, however, to disclose underlying medical conditions, impairments or disabilities to their manager or to Human Resources ("HR") unless specifically directed to do so by their doctors or other licensed health care professionals, such as the Employee Health Services.

b. Alcohol. The distribution, dispensing, use, storage and/or possession of alcohol on Rush property or while performing Rush business, excluding moderate consumption in approved areas and at approved functions, is strictly prohibited. Students, faculty and staff engaged in such prohibited conduct will be subject to discipline including, but not limited to any, or a combination, of the following: mandatory referral to a treatment program via the EAP, progressive disciplinary action, last chance agreements, focused professional practice evaluations, expulsion or termination, in accordance with Rush student, faculty and staff disciplinary policies and processes. Under certain circumstances, prohibited conduct may also be reported to appropriate law enforcement officials and/or to the Illinois Department of Financial and Professional Regulation. Furthermore, violations by students may be referred to the appropriate committee within each college for additional review and adjudication.

c. Conviction while enrolled or employed. Any student, faculty or staff member who is convicted of a violation of a criminal drug statute while enrolled or employed at Rush must report the conviction within five (5) calendar days. Students must report the conviction to the Dean of their College (or designee), and faculty and staff must report it to their immediate manager and to Human Resources. Failure to report the conviction could result in discipline, including expulsion or termination.

d. Testing. Refusal to authorize the collection of a sample (including signing a consent form indicating consent to testing and release of results to Rush), refusal to provide a specimen for testing upon request from a Rush official, or purposefully refusing to avail oneself (i.e., leaving the premises after being asked to test, or failing to report to the testing area) for testing is prohibited and is viewed as testing positive for drugs or alcohol. Similarly, failure to produce an appropriate amount of urine for testing, after a period of three (3) hours is also viewed as a positive test for drugs or alcohol. In addition, switching, adulterating, altering or tampering with any sample, or in any way failing to comply with Rush rules regarding testing is strictly prohibited and will be treated as a positive result. Positive results are subject to discipline including, but not limited to any, or a combination, of the following: mandatory referral to a treatment program via the EAP, progressive disciplinary action, last chance agreements, focused professional practice evaluations, expulsion and/or termination. Rush reserves the right to increase or decrease frequency of testing based on mission, need, availability of resources and experience in the program consistent with the commitment to maintain a drug and alcohol free campus. The following testing or searches may be conducted:



Policy Title: HR-A 08.00 Drug and Alcohol Free Campus Policy		Former Policy Number:	
Document Owner: Adam Michelman		Approver(s): Adam Michelman	
Date Created: 12/19/2022	Date Approved: 12/19/2022	Date Updated: 12/19/2022	Review Due: 12/19/2025
Applies To: RUMC <input checked="" type="checkbox"/> RUMG <input checked="" type="checkbox"/> ROPH <input checked="" type="checkbox"/> RCMC <input checked="" type="checkbox"/> RCH <input checked="" type="checkbox"/> ROPPG <input checked="" type="checkbox"/> RCMG <input checked="" type="checkbox"/>			

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1. Pre-employment/Post-offer testing. Applicants will be scheduled for a drug test as soon as reasonably possible after they receive and accept an offer of employment from Rush. (Refer to Section 8.04 for more information). Agency and Contract employees may be subject to this screening depending on the specific terms of their agreement.

2. Reasonable suspicion. (Refer to Section 8.05 and the Procedures for Drug and Alcohol Testing for more information.) If an individual is reasonably suspected of violating this Policy, they may be asked to submit to a search or inspection. Searches may be conducted of pockets, lockers, wallets, purses, briefcases, lunchboxes, desks, and work stations. Refusal to consent to a requested search will be subject to discipline up to and including termination.

3. Testing under the Last Chance Agreement. Testing may be required as part of follow-up to counseling, treatment or rehabilitation as coordinated with the EAP and/or delineated in a last chance agreement or a focused professional practice evaluation. (Refer to the Procedures for Drug and Alcohol Testing for more information.)

e. Prohibited substances. Substances for which students, faculty and staff are tested may include, but are not limited to: alcohol, drugs, depressants (barbiturates), stimulants (amphetamines), PCP, cocaine, narcotics (opiates, such as heroin, morphine, Oxycontin and codeine), Fentanyl, Methadone, cannabis and other cannabinoids (e.g. hashish), Benzodiazepines (such as Librium or Valium), hallucinogens, legally obtainable drugs which have not been legally obtained and/or are being abused, and prescription or over-the-counter drugs which have actual or potential mind- or performance-altering effects such that they may render the employee unfit for duty, and which have not been reported to management in accordance with Section 8.01a of this policy. Also encompassed by this definition are substances not sold as drugs or medicine but used for mind- or performance-altering effect, as well as synthetic analogs of a legally restricted or prohibited drug, devised to circumvent drug laws (including "designer drugs"). Rush recognizes that certain states and municipalities allow the use of cannabis and/or medicinal cannabis. Illinois' medical cannabis law permits an individual with a qualifying debilitating medical condition to register as a medical cannabis patient and avoid civil and criminal penalties under state law for certain medical uses of cannabis. Likewise, recreational cannabis law in Illinois permits an adult (21 years of age or older) to use cannabis and avoid civil and criminal penalties under state law.

However, in accordance with Illinois and federal law and in order to maintain a safe, efficient and effective workforce, Rush employees may not use, distribute to another person, divert, or possess cannabis on Rush property, working on company time or while operating company equipment (including vehicles). Rush also prohibits employees from reporting to work under the influence of, or in any way impaired by cannabis; as determined in Rush's sole discretion to the fullest extent permitted by applicable law. See section 8.05.

f. Failure to comply with EAP, Last Chance Agreement, or Focused Professional Practice Evaluation. Failure to attend the EAP for consultation and assessment after a mandatory referral following a verified positive drug or alcohol test, and/or failure to adhere to an agreed upon action plan, last chance agreement, or focused professional practice evaluation is strictly prohibited and is subject to discipline up to and including expulsion or termination.

8.02 LEGAL SANCTIONS

Reference Number: 193



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Use of illicit drugs by any person is illegal under both state and federal statutes. Use of alcohol by persons under 21 years of age is illegal under state law. Penalties for conviction under state and federal law include incarceration and fines. Property used in connection with illegal drugs may be confiscated. Federal student loans and grants may be denied to those convicted of a violation of a criminal drug statute.

8.03 HEALTH RISKS

Rush recognizes both alcohol and drug abuse as potential health, safety, and security problems. Rush expects students, faculty and staff to assist in maintaining a learning and work environment free from the effects of alcohol and drug abuse.

The use of illicit drugs and the abuse of alcohol and prescription drugs have potential adverse health consequences that may be permanent. These consequences include disorders and dysfunctions that affect the central nervous system, reproductive functioning, cardiovascular and pulmonary systems, and endocrine functioning. Specifically, there are both short- and long-term effects on cognition, memory, retention, information processing, coordination, and athletic and academic performance. The use of illicit drugs and the abuse of alcohol also affect emotional equilibrium, mental well-being, and the ability to make critical decisions. Such use also impairs judgment, which in turn increases one's vulnerability and risk-taking behaviors. Not only can these effects be damaging to an employee's own health and productivity, they have the ability to negatively impact the health and safety of co-workers.


8.04 PRE EMPLOYMENT/POST OFFER TESTING

Following a bona fide offer of employment, pre-employment drug testing is required. A negative drug screen is a requirement for all job applicants before beginning employment.

All applicants tentatively selected for employment will receive notification that they are required to submit to a test for drug use prior to beginning employment/appointment. Applicants will also be notified that employment/appointment at Rush is contingent upon a negative drug test result.

Testing process. Applicants shall be directed to Employee Health Services for pre-hire drug screening. Applicants will be informed by Employee Health Services at each location regarding the specific Rush organization's rules surrounding drug screening requirements and time allowed to complete the screening (if applicable). Applicants who fail to adhere to facility-specific requirements satisfied in a timely manner risk the withdrawal of their offer of employment. If a delay of greater than 90 days occurs between the date of the drug test and the scheduled start date, the employee will be required to re-test before being allowed to begin work.

1. Failure to appear for testing, unless authorized by Recruitment, will be considered refusal to participate in testing and will result in the cancellation of an offer of employment/appointment. In addition, a candidate's employment/appointment eligibility will be suspended for 12 months.
2. A finding that a urine, blood or other specimen has been adulterated, switched or tampered with will result in the cancellation of an offer of employment/appointment. In addition, a candidate's employment/appointment eligibility will be suspended for 12 months.

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3. At Rush's discretion, a finding of a diluted urine specimen may result in mandatory retesting which must be completed within 24 hours of notification by Rush and a second diluted finding may result in ineligibility for hire for 12 months.
4. Applicants shall be advised of the opportunity to submit medical documentation that may support a legitimate use for a detected drug and that such information will be reviewed by the Medical Review Officer (MRO) to verify legitimate use or the presence of an illegal or prescription drug. Such verification must be submitted to the MRO within the timeline provided, at their discretion.
5. Rush will withdraw the contingent employment/appointment offer to any applicant with a verified positive test result, and such applicant may not reapply for a period of 12 months. The applicant will be informed by their recruiter that a confirmed presence of an illegal drug in the applicant's test sample precludes Rush from hiring the applicant.
6. In certain instances and for various reasons (i.e., a lost or questionable sample), Employee Health Services (or the external testing facility) may require a repeat test of the urine specimen. The retest must be completed within 24 hours of notification.

8.05 REASONABLE SUSPICION TESTING FOR IMPAIRMENT

If a Rush official has reason to believe that an individual is impaired in the work or learning environment, Rush has the right to require a student, faculty or staff member (including contractors) to submit to a drug or alcohol test and refusal to do so may result in immediate expulsion or termination of employment.

Indications for a reasonable suspicion of impairment include but are not limited to:

- a. Direct observation of alcohol or illegal drug use and/or the physical symptoms of impairment or being under the influence, including, but not limited to:
 1. alcohol or marijuana odor;
 2. slurred speech;
 3. glazed or glassy eyes;
 4. drowsiness;
 5. disorientation;
 6. balance, coordination or dexterity problems;
 7. serious concentration difficulties;
 8. wide variations and/or unexplained changes in mood or demeanor;
 9. unexplained disappearances from the work area/site;
 10. a pattern of abnormal conduct, erratic behavior, or mood swings.
- b. Situational events which by themselves create a reasonable suspicion of alcohol or illegal drug use or being under the influence, including, but not limited to:
 1. missing medication/narcotics on unit or area of responsibility, where the individual had access, and circumstances support suspicion;
 2. an accident, incident or injury occurring under unusual or suspicious circumstances
 3. arrest or conviction for a drug-related offense, or the identification of the person as the focus of a criminal investigation into illegal drug possession, use or trafficking;

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4. Information either provided by reliable and credible sources or independently corroborated newly discovered evidence that the individual has tampered with a previous drug or alcohol test.

8.06 REPORTING REQUIREMENTS

- a. An employee with information about another employee should report to their manager or director if they have knowledge of any condition or action which reasonably indicates the following:
 1. An employee may have impairment, intoxication or addiction to habit forming drugs and is unable to meet the job demands;
 2. An employee poses a hazard to the safety or welfare of others; or
 3. An employee unlawfully possesses, uses, distributes or diverts habit-forming drugs from Rush for such employee's own use or benefit.
- b. Employees are required to report known or suspected incidents of drug diversion by employees, and/or contracted staff to their manager, Director of Pharmacy or a designated Diversion Specialist.
- c. Employees who divert medication will be reported to the Illinois Department of Professional & Financial Regulation and any other state or federal agency, in accordance with applicable rules and regulations.

8.07 RUSH EMPLOYEE ASSISTANCE PROGRAM (EAP)

Students, faculty and staff are encouraged to voluntarily seek help if they are experiencing drug and/or alcohol problems. The EAP (powered by ComPsych® GuidanceResources®) provides appropriate resources to support rehabilitation. However, participation in a rehabilitation program does not excuse compliance with Rush rules, policies, or procedures.

- a. Function. The EAP plays an important role in preventing and resolving drug use or alcohol abuse by providing students, faculty and staff with an opportunity for appropriate assistance. In addition, the EAP provides educational materials and information to students, faculty and staff. The EAP will refer individuals to appropriate treatment and rehabilitative facilities, follow-up with individuals during the rehabilitation period to track their progress, and encourage successful completion of the program.
- b. Responsibilities. The EAP is available to:
 1. Provide counseling, assistance and referrals to students, faculty and staff who seek treatment or whose drug tests have been verified positive, and monitor the individuals' progress through treatment and rehabilitation;



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2. Provide needed education and training to Rush managers on types and effects of drugs, symptoms of drug use and impact on performance and conduct, relationship of the EAP to drug testing, and related treatment, rehabilitation, and confidentiality issues;
 3. Ensure that confidentiality of test results and related medical treatment and rehabilitation records are maintained according to Rush policy.
- c. Referrals. The EAP is staffed by licensed clinical professionals who respect confidentiality and offer quality and cost-effective referrals for rehabilitation.
- d. Cost. The initial EAP assessment, consultation, and follow up appointments are available without cost to Rush students, faculty and staff. Further assessment and rehabilitative costs may be covered by medical insurance plans. Individuals are responsible for the payment of any cost not covered by their chosen medical plan.

8.08 TRAINING PROGRAMS

Managerial training is recommended for all managers and may be presented as a separate course, or be included as part of an ongoing managerial training program. Training may be provided as soon as possible after a person assumes managerial responsibility. Failure to receive such training, however, shall not invalidate otherwise proper reasonable suspicion testing.

ADDITIONAL DOCUMENTS (CLICK ATTACHMENTS TAB TO DOWNLOAD)

1. Drug Screen Testing Request & Follow Up Testing
2. Safety Event
3. Procedures for Reasonable Suspicion Testing

APPENDIX J

RUSH University PA Program Dress Code Guidelines

Students in the PA Program are expected to maintain a professional appearance for all program-related activities. Professional appearance demonstrates respect and creates a positive image of RUSH PA students to colleagues, faculty, hospital staff, administration, and patients. The following are further guidelines regarding the program's dress code.

In general, student appearance is expected to be clean and neat. Students may choose to wear either scrubs or business casual clothes to class. All clothing should not be wrinkled and should fit appropriately. For any activity involving delivering a presentation to the class or patient contact (actual or simulated), student dress should be business casual unless scrubs are otherwise indicated. Please note the following specific guidelines regarding student dress:

- Students are required to have their RUSH University ID badge on and clearly visible at all times. The University provides students with their RUSH ID badge at orientation.
- Scrub tops and pants must match and be clean, not wrinkled, and with intact hems. Scrub pants may be worn with a RUSH logo or plain long-sleeve half or quarter zip top instead of a scrub top. No t-shirts without scrub tops may be worn. No brand or outside hospital logos should be on scrubs or clothing.
- Business casual attire includes collared or button-down shirts, blouses, sweaters, pants, appropriate length dresses or skirts
- Inappropriate clothing, in any setting, includes sweatshirts, sweatpants, tight shirts, tops with logos or hoods, leggings, shorts, jeans
- Shoes – All footwear in both didactic and clinical year activities must be closed-toe. During clinical rotations, shoes should also be comfortable enough to allow hours of walking and/or standing
- Hair – during any patient care activity, hair should be pulled back so that it does not interfere with patient care or safety
- Jewelry – jewelry may be worn if it does not interfere with patient care or safety. With the exception of earrings, body piercings should be discrete. All jewelry must be removed in the operating room setting
- Cosmetics – strong perfume or cologne should not be worn in clinical settings
- Hygiene – nails should be kept short. Acrylic or fake nails may not be worn during the clinical year. Clean personal hygiene must be maintained at all times
- Tattoos – to the extent possible, tattoos should be covered

Additional attire will be required for the following purposes:

- **Physical examination lab:** loose/baggy clothing to facilitate practicing physical examinations, including shorts, tank tops, and sports bras. A patient gown and drape will be provided for use in lab.
- **Anatomy lab:** a separate set of scrubs dedicated to the anatomy lab that should not be worn in other settings, any color
- **Standardized patient encounters:** business casual, with a short white coat and student ID

Students must wear a short white lab coat for all activities involving actual or simulated patient contact. The coat must, at minimum, have the RUSH logo patch on the left chest. Students on clinical rotations must wear the PA Program-issued short white lab coat with the PA Program patch affixed to the upper left arm sleeve.

For an additional resource on business casual attire guidelines, refer to the Virginia Tech, Division of Student Affairs website: http://career.vt.edu/job-search/presenting_yourself/attire/business-casual.html

APPENDIX K

RUSH University PA Program Terminal PA Program Learning Competencies

The terminal learning outcomes describe the competencies expected of all graduates of the RUSH University Physician Assistant (PA) Program. Upon completion of the program, graduates will demonstrate:

- a. The ability to comprehend, evaluate, and apply information relevant to PA practice.
- b. Technical proficiency in skills necessary for clinical practice.
- c. Behaviors and interpersonal communication skills consistent with the professional standards of the PA profession.

The criteria for terminal learning outcome assessment are:

Core Medical Knowledge

1. Knowledge of medical science concepts in anatomy, physiology, pathophysiology, and pharmacology
2. Knowledge of the etiologies, risk factors, epidemiology, and clinical manifestations of medical conditions across the lifespan
3. Application of knowledge relevant to medical practice in the patient care setting
4. Ability to analyze, critique, report, and apply clinical research literature in clinical practice
5. Ability to utilize current and emerging research in the medical literature to make evidence-based patient care decisions

Critical Thinking and Application of Clinical Knowledge

1. Ability to formulate comprehensive and accurate differential diagnoses and develop management plans appropriate to a patient's clinical presentation
2. Derive problem lists and treatment plans appropriate to patient care needs
3. Manage acute and chronic conditions in medicine and surgery across the lifespan
4. Implement, assess, and modify treatment plans as required in the course of patient management.

Procedural Competency

1. Perform detailed and accurate history and physical examinations, order, perform, interpret diagnostic studies, and appropriately record medical data.
2. Perform diagnostic and therapeutic procedures in order to evaluate and treat both routine and life threatening medical and surgical problems.
3. Perform comprehensive and problem-focused physical examinations as clinically indicated.
4. Accurately order and interpret diagnostic tests.
5. Identify indications, contraindications and risks to procedures and diagnostic studies

Professionalism

1. Act in a manner that exemplifies good judgment, honesty, intelligence, respect for others, and a clear commitment to the health and well-being of their patients.
2. Function as integral members of the interprofessional healthcare team, providing high quality patient care in collaboration with other team members.
3. Provide care to diverse patient populations in ambulatory, inpatient, and long-term care settings.
4. Convey professionalism, ethical integrity, caring, and compassion in all interactions with patient and colleagues
5. Consistently adhere to regulatory guidelines governing professional practice

Communication

1. Counsel and educate patients across the lifespan regarding problem-oriented conditions and health maintenance.
2. Initiate and follow up on patient referrals to specialty healthcare providers as indicated in a timely manner
3. Able to take a medical history appropriate to ambulatory, inpatient, and long-term care settings and across the life span, and to effectively record clinical encounters in documentation platforms
4. Communicate clinical thinking in a clear, understandable, and timely manner to patients and their families, physicians and other clinical colleagues, and clinical support staff.

Systems-based Practice

1. Demonstrate leadership through participation in community service, academic, and professional enhancement activities
2. Work as an effective member of a health care team in the practice of medicine
3. Utilize current and evolving best practices in the care of patients that incorporates multi-variable considerations, such as benefits, risks, technology, and costs.
4. Assume roles of leadership in clinical practice and professional advocacy for the advancement of the PA profession

Student Performance Assessment Methods:

The PA Program uses various assessment methods to monitor student progress during the program, and to determine students' preparedness for graduation. Some evaluation processes, such as course examinations, are ongoing and continuous. Other assessments, such as summative and formative evaluations and OSCEs, are periodic.

Using a combination of assessment formats throughout all phases of the curriculum allows the faculty to assess both students' acquisition of knowledge and skills, as well as their ability to synthesize, integrate, and utilize their knowledge and skills in patient care.

The following are some of the key components of our assessment methods.

Methods of Ongoing and Continuous Assessment:

Weekly faculty review of student course and clinical rotation performance and adherence to professionalism guidelines

Performance feedback from preceptors

Program examinations – written, oral, participation in case discussions, and other observational activities

Methods of Periodic Assessment:

OSCE performance Formative evaluations Summative evaluation PACKRAT performance

Evaluation of student participation in leadership and service activities

Terminal Performance Assessment:

PANCE performance scores Employment rates

Employer satisfaction report

The goals of assessment are to:

1. Evaluate student competence to care for patients and practice medicine Identify areas of program strengths and weakness regarding student learning
2. Identify students requiring remediation in order to meet expected program standards Identify curricular strengths and weakness to improve student outcomes

APPENDIX L

RUSH University Physician Assistant Program

Graduate Functions and Tasks

Program graduates are expected to function in a capacity commensurate to an entry-level physician assistant and to demonstrate clinical knowledge, patient care skills, and professional behavior consistent with the standards of the profession and employer expectations.

The types of knowledge and skills graduates are expected to possess include:

Clinical Knowledge

1. Demonstrate the ability to take a medical history appropriate to ambulatory, inpatient, and long term care settings and across the life span
2. Derive problem lists, differential diagnoses, and treatment plans appropriate to a patient's clinical presentation
3. Implement, assess, and modify treatment plans as required in the course of patient management
4. Make clinical decisions based on sound interpretation and application of information available in research literature and other valid data sources

Patient Care Skills

1. Perform comprehensive and problem-focused physical examinations as clinically indicated.
2. Accurately order and interpret diagnostic tests
3. Recognize indications and contraindications for diagnostic and therapeutic procedures
4. Use appropriate techniques in the performance of clinical procedures
5. Refer patients to specialty providers in a timely and appropriate manner
6. Utilize best practices to maintain patient confidentiality and safety in all areas of clinical practice

Professional Behavior

1. Communicate clinical thinking in a clear and understandable manner to patients and their families, physicians and other clinical colleagues, and clinical support staff.
2. Utilize current and evolving best practices in the care of patients that incorporate multi-variable considerations, such as benefits, risks, technology, and costs.
3. Work as an effective member of a health care team in the practice of medicine.
4. Assume roles of leadership in clinical practice and professional advocacy for the advancement of the PA profession.
5. Convey professionalism, ethical integrity, caring, and compassion in all interactions with patient and colleagues.
6. Participate in activities of service to the community and profession.

APPENDIX M

RUSH University Student Learning Objectives

Graduates of RUSH University will be able to do the following upon completion of their studies:

- Demonstrate critical inquiry and reasoning required by their respective professional disciplines
- Communicate in an effective and respectful manner in the practice of their profession
- Demonstrate scholarship and understanding of research principles
- Integrate ethical principles in professional activities
- Collaborate within interprofessional teams by practicing leadership
- Integrate information technology to improve health outcomes
- Demonstrate the ability to work effectively in a diverse and global society

APPENDIX N

NCCPA Competencies for the Physician Assistant Profession

HP-3700.4.3 Competencies for the PA Profession [Adopted 2005, amended 2013, reaffirmed 2010, 2018, amended 2021]

Competencies for the Physician Assistant (PA) Profession

(Adopted 2005, amended 2012, 2021)

Introduction

This document defines the specific knowledge, skills, and attitudes that physician assistants (PA) in all clinical specialties and settings in the United States should be able to demonstrate throughout their careers. This set of competencies is designed to serve as a roadmap for the individual PA, for teams of clinicians, for health care systems, and other organizations committed to promoting the development and maintenance of professional competencies among PAs. While some competencies are acquired during the PA education program, others are developed and mastered as PAs progress through their careers.

The PA professional competencies include seven competency domains that capture the breadth and complexity of modern PA practice. These are: (1) knowledge for practice, (2) interpersonal and communication skills, (3) person-centered care, (4) interprofessional collaboration, (5) professionalism and ethics, (6) practice-based learning and quality improvement, and (7) society and population health. The PA competencies reflect the well-documented need for medical practice to focus on surveillance, patient education, prevention, and population health. These revised competencies reflect the growing autonomy of PA decision-making within a team-based framework and the need for the additional skills in leadership and advocacy.

As PAs develop greater competency throughout their careers, they determine their level of understanding and confidence in addressing patients' health needs, identify knowledge and skills that they need to develop, and then work to acquire further knowledge and skills in these areas.

This is a lifelong process that requires discipline, self-evaluation, and commitment to learning throughout a PA's professional career.

Background

The PA competencies were originally developed in response to the growing demand for accountability and assessment in clinical practice and reflected similar efforts conducted by other health care professions. In 2005, a collaborative effort among four national PA organizations produced the first Competencies for the Physician Assistant Profession. These organizations are the National Commission on Certification of Physician Assistants, the Accreditation Review Commission on Education for the Physician Assistant, the American Academy of PAs, and the Physician Assistant Education Association (PAEA, formerly the Association of Physician Assistant Programs). The same four organizations updated and approved this document in 2012.

Methods

This version of the *Competencies for the Physician Assistant Profession* was developed by the Cross-Org Competencies Review Task Force, which included two

representatives from each of the four national PA organizations. The task force was charged with reviewing the professional competencies as part of a periodic five-year review process, as well as to “ensure alignment with the *Core Competencies for New PA Graduates*,” which were developed by the Physician Assistant Education Association in 2018 to provide a framework for accredited PA programs to standardize practice readiness for new graduates.

The Cross-Org Competencies Review Task Force began by developing the following set of guiding principles that underpinned this work:

1. PAs should pursue self- and professional development throughout their careers.
2. The competencies must be relevant to all PAs, regardless of specialty or patient care setting.
3. Professional competencies are ultimately about patient care.
4. The body of knowledge produced in the past should be respected, while recognizing the changing healthcare environment.
5. The good of the profession must always take precedence over self-interest.

The task force reviewed competency frameworks from several other health professions. The result is a single document that builds on the *Core Competencies for New PA Graduates* and extends through the lifespan of a PA’s career.

The competencies were drawn from three sources: the previous [Competencies for the Physician Assistant Profession](#), PAEA’s [Core Competencies for New PA Graduates](#), and the Englander et al article [Toward a Common Taxonomy of Competency Domains for the Health Professions and Competencies for Physicians](#) which drew from the competencies of several health professions.¹ The task force elected not to reference the source of each competency since most of these competencies were foundational to the work of multiple health professions and are in the public domain. The task force acknowledges the work of the many groups that have gone before them in seeking to capture the essential competencies of health professions.

1. Englander R, Cameron T, Ballard AJ, Dodge J, Bull J, Aschenbrener CA. Toward a common taxonomy of competency domains for the health professions and competencies for physicians. *Academic Medicine*. 2013 Aug 1;88(8):1088-94.

Competencies

1. Knowledge for Practice

Demonstrate knowledge about established and evolving biomedical and clinical sciences and the application of this knowledge to patient care. PAs should be able to:

- 1.1 Demonstrate investigative and critical thinking in clinical situations.
- 1.2 Access and interpret current and credible sources of medical information.
- 1.3 Apply principles of epidemiology to identify health problems, risk factors, treatment strategies, resources, and disease prevention/health promotion efforts for individuals and populations.
- 1.4 Discern among acute, chronic, and emergent disease states.

- 3.2 Elicit and acknowledge the story of the individual and apply the context of the individual's life to their care, such as environmental and cultural influences.
- 3.3 Interpret data based on patient information and preferences, current scientific evidence, and clinical judgment to make informed decisions about diagnostic and therapeutic interventions.
- 3.4 Develop, implement, and monitor effectiveness of patient management plans.
- 3.5 Maintain proficiency to perform safely all medical, diagnostic, and surgical procedures considered essential for the practice specialty.
- 3.6 Counsel, educate, and empower patients and their families to participate in their care and enable shared decision-making.
- 3.7 Refer patients appropriately, ensure continuity of care throughout transitions between providers or settings, and follow up on patient progress and outcomes.
- 3.8 Provide health care services to patients, families, and communities to prevent health problems and to maintain health.

4. Interprofessional Collaboration

Demonstrate the ability to engage with a variety of other health care professionals in a manner that optimizes safe, effective, patient- and population-centered care. PAs should be able to:

- 4.1 Work effectively with other health professionals to provide collaborative, patient-centered care while maintaining a climate of mutual respect, dignity, diversity, ethical integrity, and trust.
- 4.2 Communicate effectively with colleagues and other professionals to establish and enhance interprofessional teams.
- 4.3 Engage the abilities of available health professionals and associated resources to complement the PA's professional expertise and develop optimal strategies to enhance patient care.
- 4.4 Collaborate with other professionals to integrate clinical care and public health interventions.
- 4.5 Recognize when to refer patients to other disciplines to ensure that patients receive optimal care at the right time and appropriate level.

5. Professionalism and Ethics

Demonstrate a commitment to practicing medicine in ethically and legally appropriate ways and emphasizing professional maturity and accountability for delivering safe and quality care to patients and populations. PAs should be able to:

- 5.1 Adhere to standards of care in the role of the PA in the health care team.
- 5.2 Demonstrate compassion, integrity, and respect for others.
- 5.3 Demonstrate responsiveness to patient needs that supersedes self-interest.
- 5.4 Show accountability to patients, society, and the PA profession.
- 5.5 Demonstrate cultural humility and responsiveness to a diverse patient populations, including diversity in sex, gender identity, sexual orientation, age, culture, race, ethnicity, socioeconomic status, religion, and abilities.

- 5.6 Show commitment to ethical principles pertaining to provision or withholding of care, confidentiality, patient autonomy, informed consent, business practices, and compliance with relevant laws, policies, and regulations.
- 5.7 Demonstrate commitment to lifelong learning and education of students and other healthcare professionals.
- 5.8 Demonstrate commitment to personal wellness and self-care that supports the provision of quality patient care.
- 5.9 Exercise good judgment and fiscal responsibility when utilizing resources.
- 5.10 Demonstrate flexibility and professional civility when adapting to change.
- 5.11 Implement leadership practices and principles.
- 5.12 Demonstrate effective advocacy for the PA profession in the workplace and in policymaking processes.

6. Practice-based Learning and Quality Improvement

Demonstrate the ability to learn and implement quality improvement practices by engaging in critical analysis of one's own practice experience, the medical literature, and other information resources for the purposes of self-evaluation, lifelong learning, and practice improvement. PAs should be able to:

- 6.1 Exhibit self-awareness to identify strengths, address deficiencies, and recognize limits in knowledge and expertise.
- 6.2 Identify, analyze, and adopt new knowledge, guidelines, standards, technologies, products, or services that have been demonstrated to improve outcomes.
- 6.3 Identify improvement goals and perform learning activities that address gaps in knowledge, skills, and attitudes.
- 6.4 Use practice performance data and metrics to identify areas for improvement.
- 6.5 Develop a professional and organizational capacity for ongoing quality improvement.
- 6.6 Analyze the use and allocation of resources to ensure the practice of cost-effective healthcare while maintaining quality of care.
- 6.7 Understand how practice decisions impact the finances of their organizations, while keeping the patient's needs foremost.
- 6.8 Advocate for administrative systems that capture the productivity and value of PA practice.

7. Society and Population Health

Recognize and understand the influences of the ecosystem of person, family, population, environment, and policy on the health of patients and integrate knowledge of these determinants of health into patient care decisions. PAs should be able to:

- 7.1 Apply principles of social-behavioral sciences by assessing the impact of psychosocial and cultural influences on health, disease, care seeking, and compliance.
- 7.2 Recognize the influence of genetic, socioeconomic, environmental, and other

determinants on the health of the individual and community.

7.3 Improve the health of patient populations

7.4 Demonstrate accountability, responsibility, and leadership for removing barriers to health.

APPENDIX O

AAPA Guidelines for Ethical Conduct for the Physician Assistant Profession (Adopted 2000, amended 2004, 2006, 2007, 2008, reaffirmed 2013)

Introduction

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

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

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

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

Beneficence means that PAs should act in the patient's best interest. In certain cases, respecting the patient's autonomy and acting in their best interests may be difficult to balance.

Nonmaleficence means to do no harm, to impose no unnecessary or unacceptable burden upon the patient.

Justice means that patients in similar circumstances should receive similar care. Justice also applies to norms for the fair distribution of resources, risks, and costs.

Physician assistants are expected to behave both legally and morally. They should know and understand the laws governing their practice. Likewise, they should understand the ethical responsibilities of being a health care professional. Legal requirements and ethical expectations will not always be in agreement. Generally speaking, the law describes minimum standards of acceptable behavior, and ethical principles delineate the highest moral standards of behavior.

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

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

Statement of Values of the Physician Assistant Profession

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

The PA and Patient

PA Role and Responsibilities

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

The principal value of the physician assistant profession is to respect the health, safety, welfare, and dignity of all human beings. This concept is the foundation of the patient–PA relationship. Physician assistants have an ethical obligation to see that each of their patients receives appropriate care. PAs should be sensitive to the beliefs and expectations of the patient. PAs should recognize that each patient is unique and has an ethical right to self-determination.

Physician assistants are professionally and ethically committed to providing nondiscriminatory care to all patients. While PAs are not expected to ignore their own personal values, scientific or ethical standards, or the law, they should not allow their personal beliefs to restrict patient access to care. A PA has an ethical duty to offer each patient the full range of information on relevant options for their health care. If personal moral, religious, or ethical beliefs prevent a PA from offering the full range of treatments available or care the patient desires, the PA has an ethical duty to refer a patient to another qualified provider. That referral should not restrict a patient's access to care. PAs are obligated to care for patients in emergency situations and to responsibly transfer patients if they cannot care for them.

Physician assistants should always act in the best interests of their patients and as advocates when necessary. PAs should actively resist policies that restrict free exchange of medical information. For example, a PA should not withhold information about treatment options simply because the option is not covered by insurance. PAs should inform patients of financial incentives to limit care, use resources in a fair and efficient way, and avoid arrangements or financial incentives that conflict with the patient's best interests.

The PA and Diversity

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

Nondiscrimination

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

Initiation and Discontinuation of Care

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

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

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

Informed Consent

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

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

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

Confidentiality

Physician assistants should maintain confidentiality. By maintaining confidentiality, PAs respect patient privacy and help to prevent discrimination based on medical conditions. If patients are confident that their privacy is protected, they are more likely to seek medical care and more likely to discuss their problems candidly.

In cases of adolescent patients, family support is important but should be balanced with the patient's need for confidentiality and the PA's obligation to respect their emerging autonomy. Adolescents may not be of age to make independent decisions about their health, but providers should respect that they soon will be. To the extent they can, PAs should allow these emerging adults to participate as fully as possible in decisions about their care. It is important that PAs be familiar with and understand the laws and regulations in their jurisdictions that relate to the confidentiality rights of adolescent patients. (See the section on Informed Consent.)

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

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

The Patient and the Medical Record

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

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

Disclosure

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

Care of Family Members and Co-Workers

Treating oneself, co-workers, close friends, family members, or students whom the physician assistant supervises or teaches may be unethical or create conflicts of interest. For example, it might be ethically acceptable to treat one's own child for a case of otitis media but it probably is not acceptable to treat one's spouse for depression. PAs should be aware that their judgment might be less than objective in cases involving friends, family members, students, and colleagues and that providing "curbside" care might sway the individual from establishing an ongoing relationship with a provider. If it becomes necessary to treat a family member or close associate, a formal patient-provider relationship should be established, and the PA should consider transferring the patient's care to another provider as soon as it is practical. If a close associate requests care, the PA may wish to assist by helping them find an appropriate provider.

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

Genetic Testing

Evaluating the risk of disease and performing diagnostic genetic tests raise significant ethical concerns. Physician assistants should be informed about the benefits and risks of genetic tests. Testing should be undertaken only after proper informed consent is obtained. If PAs order or conduct the tests, they should assure that appropriate pre- and post-test counseling is provided. PAs should be sure that patients understand the potential consequences of undergoing genetic tests – from impact on patients themselves, possible implications for other family members, and potential use of the information by insurance companies or others who might have access to the information. Because of the potential for discrimination by insurers, employers, or others, PAs should be particularly aware of the need for confidentiality concerning genetic test results.

Reproductive Decision Making

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

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

End of Life

Among the ethical principles that are fundamental to providing compassionate care at the end of life, the most essential is recognizing that dying is a personal experience and part of the life cycle. Physician Assistants should provide patients with the opportunity to plan for end-of-life care. Advance directives, living wills, durable power of attorney, and organ donation should be discussed during routine patient visits.

PAs should assure terminally ill patients that their dignity is a priority, and that relief of physical and mental suffering is paramount. PAs should exhibit non-judgmental attitudes and should assure their terminally- ill patients that they will not be abandoned. To the extent possible, patient, or surrogate preferences should be honored, using the most appropriate measures consistent with their choices, including alternative and non-traditional treatments. PAs should explain palliative and hospice care and facilitate patient access to those services. End of life care should include assessment and management of psychological, social, and spiritual or religious needs.

While respecting patients' wishes for treatments when possible, PAs also must weigh their ethical responsibility, in consultation with supervising physicians, to withhold futile treatments and to help patients understand such medical decisions.

PAs should involve the physician in all near-death planning. The PA should only withdraw life support with the supervising physician's agreement and in accordance with the policies of the health care institution.

The PA and Individual Professionalism

Conflict of Interest

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

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

Professional Identity

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

Competency

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

Sexual Relationships

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

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

Gender Discrimination and Sexual Harassment

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

- Such conduct has the purpose or effect of interfering with an individual's work or academic performance or creating an intimidating, hostile or offensive work or academic environment, or
- Accepting or rejecting such conduct affects or may be perceived to affect professional decisions concerning an individual, or
- Submission to such conduct is made either explicitly or implicitly a term or condition of an individual's training or professional position.

The PA and Other Professionals

Team Practice

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

Illegal and Unethical Conduct

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

Impairment

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

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

PA–Physician Relationship

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

Complementary and Alternative Medicine

When a patient asks about an alternative therapy, the PA has an ethical obligation to gain a basic understanding of the alternative therapy being considered or being used and how the treatment will affect the patient. If the treatment would harm the patient, the PA should work diligently to dissuade the patient from using it, advise other treatment, and perhaps consider transferring the patient to another provider.

The PA and the Health Care System Workplace Actions

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

PAs as Educators

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

PAs and Research

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

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

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

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

PAs as Expert Witnesses

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

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

The PA and Society

Lawfulness

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

Executions

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

Access to Care / Resource Allocation

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

Community Well-Being

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

Conclusion

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

Appendix P
RUSH University College of Health Sciences
Technical Standards

The following are the universal technical standards that apply to all clinical training students in the RUSH University College of Health Sciences. These standards apply to all students enrolled in the Physician Assistant Program.

PA Program Technical Standards

RUSH University is committed to diversity and to attracting and educating students who will make the population of health care professionals representative of the national population.

Our core values — ICARE — Innovation, Collaboration, Accountability, Respect and Excellence, translate into our work with all students, including those with disabilities. RUSH actively collaborates with students to develop innovative ways to ensure accessibility and creates a respectful accountable culture through our confidential and specialized disability support. RUSH is committed to excellence in accessibility; we encourage students with disabilities to disclose and seek accommodations.

The following technical functions are required of all students enrolled in the Physician Assistant Program.

Acquire Information

- Acquire information from demonstrations and experiences in courses such as lecture, group, and physical demonstrations.
- Acquire information from written documents and computer systems (e.g., literature searches & data retrieval).
- Identify information presented in accessible images from paper, slides, videos with audio description, and transparencies.
- Identify information presented in images from paper, slides, videos, and transparencies.
- Recognize and assess patient changes in mood, activity, cognition, verbal, and non-verbal communication.

Use and Interpret

- Use and interpret information from assessment techniques/maneuvers. Use and interpret information related to physiologic phenomena generated from diagnostic tools.

Motor

- Possess psychomotor skills necessary to provide or assist in holistic Physician Assistant care and perform or assist with procedures and treatments.
- Practice in a safe manner and appropriately provide Physician Assistant care and assessment in emergencies and life support procedures and perform universal precautions against contamination.

Communication

- Communicate effectively and sensitively with patients and families.
- Communicate effectively with faculty, preceptors, and all members of the healthcare team during practicum and other learning experiences.
- Accurately elicit information including a medical history and other information to adequately and effectively evaluate a population's, client's or patient's condition.

Intellectual Ability

- Measure, calculate, reason, analyze, and synthesize data related to diagnosis and treatment of patients and populations.
- Exercise proper judgment and complete responsibilities in a timely and accurate manner according to the "program name" role.

- Synthesize information, problem solve, and think critically to judge the most appropriate theory, assessment, or treatment strategy.

Behavioral

- Maintain mature, sensitive, effective relationships with clients/patients, families, students, faculty, staff, preceptors, and other professionals under all circumstances.
- Exercise skills of diplomacy to advocate for patients in need.
- Possess emotional stability to function under stress and adapt to rapidly changing environments inherent to the classroom and practice settings.

Character

- Demonstrate concern for others, integrity, accountability, interest, and motivation are necessary personal qualities.
- Demonstrate intent and desire to follow the RUSH University and Physician Assistant Code of Ethics.

The technical standards delineated above must be met with or without accommodation. Students who, after review of the technical standards, determine that they require accommodation to fully engage in the program, should contact the Office of Student Accessibility Services [here](#), to confidentially discuss their accommodations needs. Given the clinical nature of our programs time may be needed to implement accommodations. Accommodations are never retroactive; therefore, timely requests are essential and encouraged.