Disclaimer for Student Academic Policies and Procedures Handbook

This handbook does not constitute a contract, either expressed or implied, with the University of Colorado, the University of Colorado School of Medicine and/or the Child Health Associate/Physician Assistant Program. The Child Health Associate/Physician Assistant Program reserves the right at any time to change, delete or add to any of the provisions at its sole discretion and prior versions are void. Furthermore, the provisions of this document are designed by the University to serve as guidelines rather than absolute rules, and exception may be made on the basis of extenuating circumstances. In the event of a conflict between this and other documents, the most current version of this documents takes precedence.

The Student Academic Policies and Procedures Handbook is a living document, subject to change. Students can find the most recent version on the program webpage and are responsible for familiarizing themselves with the current iteration.

The most current version is found at:

http://www.ucdenver.edu/academics/colleges/medicalschool/education/degree_programs/PAProgram/currentstudents/Pages/StudentResources.aspx

Approved by the CHA/PA Promotions Committee on: April 1, 2017

Effective date of this document: June 1, 2017

General Information for Academic Policies

The University of Colorado School of Medicine (SOM) Child Health Associate/Physician Assistant Program (CHA/PA) aims to provide clear information to physician assistant students and faculty. The CHA/PA Academic Policies apply to all CHA/PA students. The requirements for promotion and graduation are set forth in this document. Other resources that contain valuable information that will not be repeated in this document include:

- University of Colorado Anschutz Medical Campus Course Book,
- The Child Health Associate/Physician Assistant (CHA/PA) documents:
  - The Clinical Handbooks

Policies for Physician Assistant Students

Physician Assistant students are required to comply with University of Colorado School of Medicine (SOM) rules and CHA/PA Program policies. The CHA/PA Program is committed to inform students of these policies and comply with policies of the University of Colorado including student privacy.
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Director’s Welcome

Welcome to the Child Health Associate/Physician Assistant Program, the Department of Pediatrics, the School of Medicine and the University of Colorado Denver Anschutz Medical Campus. This is an incredibly exciting time for you, the PA Program and the profession. We are confident that you will find that you have chosen an excellent program to launch your professional career.

The CHA/PA Program is a leader in medical education, having received numerous awards for excellence in education. The CHA/PA Program has introduced many innovative teaching strategies that have become an integral part of the School of Medicine curriculum including early introduction of clinical experience, problem-based learning, rural track training as well as psychosocial and evidence-based medicine. The CHA/PA educational program is dynamic, as we strive to be responsive to a rapidly changing health care environment. You will soon recognize that our campus is equally dynamic.

You are beginning a life-long journey as a Physician Assistant, joining over 1000 graduates who now provide important health care to our nation’s children and families. Over the next three years you will grow to appreciate that you have chosen a profession where you will never stop learning. The faculty is here to support you in this first phase of your journey and to help you master the skills you will need for life-long learning. Your success is important to us and we appreciate your choice of the CHA/PA Program.

Jonathan Bowser, MS, PA-C

Program Director
The Child Health Associate/Physician Assistant Program

Established in 1968 by Dr. Henry K. Silver, the Child Health Associate/Physician Assistant (CHA/PA) Program is a master’s level, primary care PA curriculum preparing graduates to provide comprehensive medical care for patients of all ages with expanded training in the care of infants, children and adolescents. The program graduated the first class in 1972 and was the first PA program to award a master’s degree in 1973. The Program has maintained continuous ARC-PA accreditation since 1972 and continuous funding from the Health Resources Services Administration Bureau of Health Professions for more than 25 years. In 2002, the CHA/PA Program became the first degree-granting program with expanded facilities at the Anschutz Medical Campus.

Although the Program continues an emphasis on pediatrics, its primary care curriculum prepares graduates to diagnose and treat illness in patients of all ages. Functioning within the university’s School of Medicine, the Program has gained national recognition for its innovative curriculum. Problem-based learning, evidence-based medicine and an extensive psychosocial medicine curriculum are successful components of the course of study. Clinical experience during the first year of training has been an integral part of the CHA/PA Program since its inception. The Program awards a professional master’s degree (MPAS-Pediatrics) which permits graduates to sit for the Physician Assistant National Certifying Exam.

Physician Assistants have functioned as colleagues of physicians and other allied health professionals, providing comprehensive health services, including not only the evaluation and treatment of medical disease, but also patient education and counseling, anticipatory guidance and management of behavioral, psychosocial and developmental disorders. Program graduates are employed in all areas of primary and subspecialty areas of practice including pediatrics, family medicine, internal medicine, orthopedics, inpatient (hospitalist) medicine, surgery, emergency medicine, urgent care, otolaryngology, allergy and asthma, neurology, neonatology, child protection and advocacy, and many other areas.

SECTION 1: OVERVIEW OF THE PROGRAM

1.1 Mission Statement
The mission of the Child Health Associate/Physician Assistant Program is to provide comprehensive physician assistant education in primary care across the lifespan, with expanded training in pediatrics and care of the medically underserved.

1.2 Vision Statement
The University of Colorado, School of Medicine Physician Assistant Program will be a leading educational program with a national reputation for excellence in innovative curriculum, research and scholarship, community engagement and clinical care.
1.3 Goals
Goal 1: Recruit qualified applicants who are prepared to be successful in a rigorous medical training program
Goal 2: Maintain a level of PANCE pass rates above the national average
Goal 3: Prepare graduates to practice in rural and underserved areas
Goal 4: Maintain a student attrition rate that is below the national average
Goal 5: Prepare graduates to practice in primary care setting

Current data regarding these goals can be found on the CHA/PA Program webpage.

1.4 CHA/PA Program Graduate Competencies
Upon graduation, CHA/PA students are expected to demonstrate competency in the areas identified below. Performance should be commensurate with that of a new practitioner. The CHA/PA program provides educational experiences to support student development of requisite knowledge, skills and attitudes.

PATIENT CARE
Patient care includes patient and setting-specific assessment, evaluation, and management. CHA/PA graduates must demonstrate the ability to provide compassionate, appropriate and effective care for health promotion, and disease prevention that is safe, of high quality and equitable.

CHA/PA graduates are expected to:
- Work effectively with physicians and other health care professionals to provide patient-centered care
- Demonstrate compassionate and respectful behaviors when interacting with patients and their families
- Obtain essential and accurate information about their patients
- Make decisions about diagnostic and therapeutic interventions based on patient information and preferences, current scientific evidence, and informed clinical judgment
- Develop and implement patient management plans
- Counsel and educate patients and their families
- Perform medical and surgical procedures essential to their area of practice
- Provide health care services and education aimed at disease prevention and health maintenance
- Use information technology to support patient care decisions and patient education

MEDICAL KNOWLEDGE
Medical knowledge includes the synthesis of pathophysiology, patient presentation, differential diagnosis, patient management, surgical principles, health promotion, and disease prevention. Physician assistants must demonstrate core knowledge about established and evolving biomedical and clinical sciences and the application of this knowledge to patient care in their area of practice. In addition,

1 Adopted 2012 by ARC-PA, NCCPA, and PAEA; adopted 2014 by AAPA –
Physician assistants are expected to demonstrate an investigative and analytic thinking approach to clinical situations.

CHA/PA graduates are expected to understand, evaluate, and apply the following to clinical scenarios:
- Evidence-based medicine
- Scientific principles related to patient care
- Etiologies, risk factors, underlying pathologic process, and epidemiology for medical conditions
- Signs and symptoms of medical and surgical conditions
- Appropriate diagnostic studies
- Management of general medical and surgical conditions to include pharmacologic and other treatment modalities
- Interventions for prevention of disease and health promotion/maintenance
- Screening methods to detect conditions in an asymptomatic individual
- History and physical findings and diagnostic studies to formulate differential diagnoses

PRACTICE-BASED LEARNING AND IMPROVEMENT
Physician assistants engage in critical analysis of their own practice experience, the medical literature, and other information resources for the purposes of self- and practice-improvement. Physician assistants must be able to assess, evaluate, and improve their patient care practices.

CHA/PA graduates must be able to evaluate their practice in the context of current scientific evidence and are expected to:
- Analyze practice experience and perform practice-based improvement activities using a systematic methodology in concert with other members of the health care delivery team
- Locate, appraise, and integrate evidence from scientific studies related to their patients’ health
- Apply knowledge of study designs and statistical methods to the appraisal of clinical literature and other information on diagnostic and therapeutic effectiveness
- Utilize information technology to manage information, access medical information, and support their own education
- Recognize and appropriately address personal biases, gaps in medical knowledge, and physical limitations in themselves and others

INTERPERSONAL AND COMMUNICATION SKILLS
Interpersonal and communication skills encompass the verbal, nonverbal, written, and electronic exchange of information. Physician assistants must demonstrate interpersonal and communication skills that result in effective information exchange with patients, patients’ families, physicians, professional associates, and other individuals within the health care system.

CHA/PA graduates are expected to:
- Create and sustain a therapeutic and ethically sound relationship with patients
- Use effective communication skills to elicit and provide information
- Adapt communication style and messages to the context of the interaction
- Work effectively with physicians and other health care professionals as a member or leader of a health care team or other professional group
- Demonstrate emotional resilience and stability, adaptability, flexibility, and tolerance of ambiguity and anxiety
- Accurately and adequately document information regarding care for medical, legal, quality, and financial purposes

**PROFESSIONALISM**

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

CHA/PA graduates are expected to demonstrate:
- Understanding of legal and regulatory requirements, as well as the appropriate role of the physician assistant
- Professional relationships with physician supervisors and other health care providers
- Respect, compassion, and integrity
- Accountability to patients, society, and the profession commitment to excellence and on-going professional development
- Commitment to ethical principles pertaining to provision or withholding of clinical care, confidentiality of patient information, informed consent, and business practices
- Sensitivity and responsiveness to patients’ culture, age, gender, and abilities of self-reflection, critical curiosity, and initiative
- Healthy behaviors and life balance
- Commitment to the education of students and other health care professionals

**SYSTEMS-BASED PRACTICE**

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

CHA/PA graduates are expected to:
- Effectively interact with different types of medical practice and delivery systems
- Understand the funding sources and payment systems that provide coverage for patient care and use the systems effectively
- Practice cost-effective health care and resource allocation that does not compromise quality of care
- Advocate for quality patient care and assist patients in dealing with system complexities
- Partner with supervising physicians, health care managers, and other health care providers to assess, coordinate, and improve the delivery and effectiveness of health care and patient outcomes
- Accept responsibility for promoting a safe environment for patient care and recognizing and correcting systems-based factors that negatively impact patient care
Apply medical information and clinical data systems to provide effective, efficient patient care
- Recognize and appropriately address system biases that contribute to health care disparities
- Apply the concepts of population health to patient care

1.5 CHA/PA Program Website – medschool.ucdenver.edu/paprogram
The CHA/PA Program maintains a website with information available regarding the curriculum, the academic policies, student resources, scholarships and valuable links. Check the website regularly for the most up-to-date information available.

SECTION 2: PROFESSIONALISM

2.1 Becoming a Professional
By entering the CHA/PA Program, students have made a conscience decision to become a professional. Professionals are highly educated individuals who practice within an ethical framework – as outlined by an oath or promise. The main components of professional behavior include honesty/integrity, reliability/responsibility, respect for others, compassion/empathy, self-improvement, self-awareness/knowledge of one’s limits, communication/collaboration skills, and altruism/advocacy.

Students within the CHA/PA Program, have the opportunity to represent the program in a professional manner in many settings - within the classroom, within the University, or within the community – each offering ways in which to demonstrate the skills of a professional. The Code of Ethics of the Physician Assistant Profession illustrates more clearly the standards to which students will be held (see Appendix IX for more information).

2.2 Professional Behavior
CHA/PA Students are held to a high standard of professional and ethical conduct through all years of the Physician Assistant Program. Professional behavior includes, but is not limited to:
- Patient Care – hold primary responsibility for the health, safety, welfare, and dignity of all humans; assume responsibility for all professional duties; maintain patient confidentiality.
- Timeliness – punctuality for class and clinic; timely submission of assignments, evaluations, patient documentation and other required paperwork.
- Participation – appropriate, constructive, non-derogatory participation in the classroom and clinic. (examples of appropriate participation may be found in individual course syllabi and the Clinical Handbook)
- Appearance – appropriate attire, hygiene and presentation. (examples of appropriate appearance may be found in individual course syllabi and the Clinical Handbook)
- Behavior – appropriate conduct, attentiveness, non-disruptive, preparation for class and clinic, courtesy, flexibility, and collaboration, support of one’s classmates.
- Respect – regard for patients, faculty, staff, colleagues, students, members of the health care team and others.
- Constructive Evaluation – seeking and accepting feedback in a mature manner to change behaviors, providing constructive feedback.
- Personal Accountability – accepts responsibility for actions and behaviors; demonstrates dependability; and acknowledging limitations.
- Self-reflection – willingness to examine one’s own strengths, weaknesses and biases.
- Professional behavior will be evaluated on a regular basis by the Student Promotions Committee, through review of clinical evaluations, and may be considered when course directors assign grades.
- Individual course directors have rules of classroom behavior specific to his/her course. Students are required to adhere to the standards set forth in each course syllabus.

2.3 Student Professional Development

Student professional development is considered on an individual basis each semester or as needed. The Student Promotions Committee completes a Professional Development Evaluation (PDE) for all first and second year students after each semester review. Those students meeting or exceeding expectations in all areas are notified via letter indicating expectations are being met. Those students who do not meet or exceed expectation in any area will have the opportunity to review his/her individual PDE with an academic advisor.

Third year students receive a copy of their preceptor evaluations forms, in which professionalism is a component. A PDE will be created for 3rd Year students if corrective action for professionalism is identified during the 3rd Year clinical experiences. Those students who do not meet expectation in any area will have the opportunity to review his/her individual PDE with an academic advisor.

As future health professionals, students should adhere to the highest standards of professionalism. Examples of unprofessional conduct include, but are not limited to the following:
- Misrepresentation of effort, credentials or achievement in the academic or clinical setting
- Any action that compromises the quality of patient care
- Violation of patient confidentiality
- Any conduct, both on and off campus, that interferes with the student’s ability to perform his/her professional duties or reflects poorly on the profession
- Disruptive or disorderly conduct in a classroom or clinical setting,
- Other conduct that falls below that which befits a health professional

When a student receives an unsatisfactory PDE, the Committee reviews that student’s entire academic record in detail and may impose probation or remedial action (refer to sections “Student Probation” and “Student Remediation”). The PDE may be referenced as part of the credentialing and privileges processes as well as in Program reference letters. Completed evaluations, letters of notification, and any recommendations for the corrective behavior is noted in the student file.

2.4 Student Professionalism Concerns

Professional conduct includes incidents that affect not only one’s ability to practice, but also the reputation of the CHA/PA Program and the image of its students. Student concerns related to professionalism will be brought forward to the Student Promotions Committee (See Section 4.1).

2.5 Student Communication with the Program

2.5a Modes of Communication

University email is the first line of communication with the Program. Email is checked during business hours. The student is required to check his/her University email daily.

The Clinical Team email address should be used for all clinical experience communication. The Clinical Team email address is Clinical-Team@ucdenver.edu.
Individual faculty and staff voicemail is checked during the work day.

The CHA/PA Program has a password-protected clinical website where clinical site information, syllabi, objectives and clinical handbooks are available. The post-rotation form is available on the clinical website to allow students to provide information on site parking, dress attire, etc. The website is located at: medschool.ucdenver.edu/paprogram. The sign-in is located at the bottom of the CHA/PA website.

- Username: University\username
- Password: Student University password

2.5b Timely Communication

Communication from students on weekends will be answered for emergent clinical issues only. For emergent clinical issues, please utilize the emergency phone number of 303-346-6966 (Joyce Nieman’s cell phone). Emergent is defined as life-threatening or a situation that is offensive or flagrant to the student.

Students should make every attempt to respond to emails within 2 business days unless stated otherwise in the email.

Faculty and staff will make every effort to respond to emails and voicemails within 2 business days.

2.5c Clinical Experience Communication

<table>
<thead>
<tr>
<th>Issue</th>
<th>Contact Person</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-Emergent rotation concerns</td>
<td>Clinical Team</td>
</tr>
<tr>
<td>Emergent need after business hours</td>
<td>Phone: 303-346-6966 (Joyce Nieman)</td>
</tr>
<tr>
<td>Emergent need during business hours</td>
<td>Phone: 303-724-7963</td>
</tr>
<tr>
<td>Inability to attend the clinical experience that day (injury, illness, family emergency)</td>
<td>First notify the preceptor and then notify the Clinical Team and Clinical Course Director</td>
</tr>
<tr>
<td>Preceptor illness or vacation</td>
<td>Clinical Team and Clinical Course Director</td>
</tr>
<tr>
<td>Needlestick, Exposure or Injury on a clinical experience</td>
<td>Seek medical attention and follow the algorithm on the Clinical Website then contact the Clinical Course Director.</td>
</tr>
</tbody>
</table>

2.5d Locating Students

All Physician Assistant students are required to keep current address and telephone numbers updated with the following two offices:

- The University of Colorado Anschutz Medical Campus Office of the Registrar and CU-SIS system
- The CHA/PA office

Contact information:

- Office of the Registrar:
  - Phone: 303.724.8059 Fax 303.724.8060
  - Email: student.services@ucdenver.edu
- CHA/PA Offices:
  - Phone: 303.724.7963x3 Fax: 303.724.1350
When to contact these offices:
- In the event of a permanent change to phone number or home address
- In the event of a temporary change to phone number and/or temporary place of domicile
- In the event of a change of name

In an emergency, a member from each of the two offices noted above will make every effort to contact a student—whether that is via phone or email. For non-emergent, daily contact, the CHA/PA Program uses University email as its official method of communication; therefore, students are required to check their University email on a regular basis.

2.6 Attendance

2.6a Didactic
Students are required to attend class and take examinations at scheduled times. Exceptions can be made for emergencies at the discretion of the course director. Unexcused absences may result in a lower grade for that test or course.

In the case of absence, students are expected to contact the Program (or Program faculty) promptly. Determination of excused absence will be left to the discretion of individual course directors. Valid reasons for requesting an excused absence include, but are not limited to, personal illness, family emergency or for religious observation. Those absences that are not pre-approved by individual course directors may be considered unexcused. Refer to individual syllabi for each course requirement.

2.6b Clinical
Students are required to attend clinic at scheduled times and work the hours set forth by the preceptor (minimum of 8 hours/day). For 3rd Year students this equates to >32 hours per week. The student’s clinic schedule can be found in Typhon. All requests for absences must be submitted to the Clinical Course Director prior to discussing this with the preceptor(s). Exceptions to this rule are acute illnesses or emergency situations for which the preceptor should be contacted first followed by the Clinical Course Director.

Definition of Clinical Absences:
An **Excused Absence** is an absence for which permission has been granted by the Clinical Course Director and the Preceptor. Excused absences are considered to occur in voluntary and involuntary situations as defined below:
- **Voluntary Absences**: An absence for an event or events such as personal appointments and family events. Voluntary absences are generally not permitted but unique circumstances must be submitted in writing to the Clinical Course Director within **10 business days** from the requested day(s) off. If accommodations can be made, an appropriate plan will be developed by the Clinical Course Director with or without assistance from the Clinical Team.
- **Involuntary Absences**: An absence for serious illness, jury duty and academic needs specified by the CHA/PA program (i.e., remediation). If a student has an illness or other
emergency, they must contact their preceptor(s) as well as the Clinical Course Director and the Clinical Team as soon as possible or prior to missing any time.

An **Unexcused Absence** is an absence for which permission has not been granted by the Clinical Course Director. Unexcused absences may be brought to the attention of the Student Promotions Committee and may result in a notation on the Professional Development Evaluation (PDE) or failure of the rotation.

**Plan for Excused Absences Approved by the Clinical Course Director:**

- **1st Year and 2nd Year Students**: If more than one clinical day is missed, the Clinical Course Director will work with the clinical team and if needed, the Student Promotions Committee, to create a remediation plan.

- **3rd Year Students**: If more than two clinical days are missed during a one-month rotation, the Clinical Course Director will work with the Clinical Team and if needed, the Student Promotions Committee, to create a remediation plan. If there is a pattern of absences through the semester or year, a remediation plan may be warranted.

**2.6c 3rd Year Considerations**

During 3rd Year Clinical Experiences, the student may be required to be in the Denver Metro Area during the 3rd Year for class meetings, composite photographs, graduation paperwork and 3rd Year comprehensive assessments. Students and preceptors will be notified of these excused absences.

- **Inclement Weather**: 3rd Year students are expected to attend clinic even if the Anschutz Medical Campus is closed. If the rotation site is open during inclement weather, the student must make every effort to attend. If the site closes due to weather, the student must notify the Clinical Course Director and the Clinical Team immediately. If the student will NOT be attending clinic, it is the student’ responsibility to contact the preceptor first to notify them that they will not be there and why. After contacting the preceptor, the student must email the Clinical Course Director to discuss make-up options.

- **Emergency or Illness**: If the student is ill and it would be inappropriate for the student to see patients, or if there is an emergency, the student must contact their preceptor. After contacting the preceptor, the student must email the Clinical Course Director to discuss make-up options.

- **Other Absence Requests**: If the student needs to miss clinic for any reason other than an acute illness or an emergency, the student must receive approval from the Clinical Course Director prior to approaching the preceptor. Requests must be submitted **10 business days** prior to the requested time off.

- **University Breaks/Holidays**:
  - 1st and 2nd Year students will be excused from clinic during the Anschutz Medical Campus Winter Break, Spring Break and Holiday days.
  - 3rd Year students are required to attend clinic during the Anschutz Medical Campus Winter Break, Spring Break and Holiday days.

- **Travel Time for Rural or Out-of-State Rotations**: Any travel time to or from rotations >100 miles from the Anschutz Medical Campus will be taken from the month for which that rotation occurs (e.g., Mary has a rotation in Nebraska for the month of July. Her
next rotation at Children’s Hospital Colorado begins August 1st. Mary may begin her rotation in Nebraska on July 3rd and complete her rotation on July 29th to allow her travel time. The amount of time depends on the distance of the site from campus – approximately 1-4 days total for travel (i.e., 100-200 miles (1 day); >200 miles (2 days). Discussion of travel needs must first occur with the Clinical Team followed by discussion with the Preceptor.

- **On-Call/Night Shifts**: On-call for responsibilities may be required for a rotation and the student must discuss the schedule with the preceptor at the beginning of the rotation. A rotation may require on-call nights or overnight shifts that end on the morning of the 1st of the following month. If so, the student may trade for another call day. But if the student works the early morning of the 1st of the month, they are responsible for communicating patient information to their successor before leaving. This may be done by chart notes or on rounds. The student will then need to report to their next rotation on the morning of the 1st (exceptions are travel time allotted for distant sites).

- **Job Interviews**: Scheduling a job interview during another clinical experience will not be approved. Job interviews must be scheduled during the student’s off-hours (i.e. during the vacation weeks or in the evening after clinic has finished).

### 2.6d Jury Duty

Students summoned to jury duty must notify the Course Director for a didactic course or the Clinical Course Director and the Preceptor for a clinical rotation overlapping their summons for jury duty. The student will contact the appropriate court to determine if they have been called for appearance.

If the student is called to appear for jury duty, they must notify the Course Director for a didactic course or the Clinical Course Director and the Preceptor for a clinical course. The student will need to provide the excused absence form from the court to the Course Director or Clinical Course Director verifying their attendance for jury duty.

If the student is not called to appear for jury duty, they must report to the required courses or clinical rotation site for that day.

If an exam is scheduled for the day the student is summoned to appear for jury duty, the student will follow the guidelines above and if called to appear for jury duty, the student will work with the Course Director and CHA/PA Program to reschedule the exam for a later date.

### 2.7 Clinical Experience Professional Requirements

#### 2.7a Preparation for Clinical Experiences

Students must study for clinical experiences. The student should make a commitment to read about patient encounters and ask for learning issues opportunities.

#### 2.7b Identification during Clinical Experiences

- **Name Tag and Badges**: A name tag identifying the student as a Physician Assistant Student must be worn at all times during the clinical experience. If a specific site requires additional identification, it is the responsibility of the student to comply. If separate badges are required at hospital sites, it is the responsibility of the student to complete paperwork necessary to obtain the required identification. It is the student’s
responsibility to return the badge to the site prior to departure and if not, the student assumes responsibility for fees associated with a lost badge.

- **Greeting Patients:** Students are required to identify themselves to patients by their name and by their CHA/PA student status (e.g., 1st Year PA student). The student must explain to patients their working relationship with the preceptor.

- **Signing Charts:** When a student signs a chart, they must identify their student status (e.g., PA-S3). The student signature on any official paperwork (e.g., charts, prescriptions) must be co-signed by their MD, DO, PA or NP preceptor.

2.7c **Student Supervision**
Students are supervised by licensed/board certified physicians, physician assistants or nurse practitioners at all times. Under no circumstances should a student in the CHA/PA Program be permitted to practice independent of direct supervision. The preceptor or designee with equal education and qualification must be on site.

Under no circumstances should the CHA/PA student be used as an employee of the practice or represented to the clientele as such. Students should not be used as clerical staff, medical scribes or research assistants (e.g. pharmaceutical trials).

2.7d **Professional Attire**
Dress code is business-casual attire. All necklines must be high enough not to expose the chest. Shoes must be closed at the toe. Jewelry is to be kept to a minimum. Pierced areas on the body should be free of ornament. Tattoos will be covered.

Student may be asked to wear scrubs at certain sites and white coats may be required. If scrubs are checked out to the student while on rotation, it is the student’s responsibility to return them once the rotation is complete and if they are not returned, the student assumes responsibility for fees associated with lost scrubs.

2.7e **Equipment**
Students are responsible for providing their own diagnostic equipment, pen with black ink, and any quick references (e.g., Harriet Lane Handbook).

2.7f **Clinical Passport**
Students are responsible for having their Clinical Passport with them at all rotations in case the site does not have necessary paperwork to facilitate a timely start to the rotation. This passport packet is available to the student through Typhon and includes the student’s:

- Malpractice Coverage
- Workers’ Compensation Coverage
- Letter of Good Standing
- Student Immunizations

2.8 **Substance Abuse and Respect for the Rights and Property of Others**
Other areas of professional conduct that the Student Promotions Committee may consider include substance abuse and respect for the rights and property of others.

2.8a **Substance Abuse**
Substance abuse compromises the student’s ability to learn and to practice as a health provider. Intoxication or being under the influence of legal or illegal drugs and/or alcohol in a clinical or classroom setting will not be tolerated. Students who have a problem with alcohol and/or other
substances should seek assistance from services available on campus or through the Colorado Physician Health Program (CPHP) (refer to Appendix II). In the event these behaviors affect academic performance, interprofessional relationships, patient care or clinical practice, the Student Promotions Committee may mandate evaluation by CPHP.

2.8b Respect for the Rights and Property of Others
Students should conduct themselves in a manner that recognizes the rights and property of others. Examples of inappropriate behavior include, but are not limited to the following:

- Theft
- Damage to University or personal property of others
- Disruption of educational or other activities on campus
- Illegal use of University facilities
- Harassment or physical assault
- Any other conduct that threatens the health or safety of others

In the event of illegal activity, the police department will be contacted and the Student Promotions Committee will be notified.

2.9 Health Insurance Portability and Accountability Act (HIPAA)

The Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule regulates the use and disbursement of individually identifiable health information and gives individuals the right to determine and restrict access to their health information. It requires that reasonable and appropriate technical, physical, and administrative safeguards be taken with electronic individually identifiable health information. Specifically, ensuring the confidentiality, integrity, and availability of all electronic protected health information we create, receive, maintain or transmit.

All students enrolled in degree programs in a University of Colorado Anschutz Medical Program must be HIPAA certified at University of Colorado when entering the Program. The HIPAA training is provided online, and information to access training will be provided at orientation. A score of 75% or better on the online HIPAA training course is a requirement prior to starting clinical rotations at the CHA/PA Program. Additional recertification will be required prior to the start of 2nd and 3rd year clinical rotations. Specific clinical sites may require additional training beyond the three trainings listed above.

HIPAA Training is completed through the University of Colorado Human Resources website and modules (SkillPort).

SECTION 3: CURRICULUM

3.1 The Academic Calendar
The first, second, and third year academic calendars are found on the University of Colorado Anschutz Medical Campus Office of the Registrar webpage.

3.2 CHA/PA Program Curriculum
The CHA/PA Program’s three-year curriculum is developed and implemented under the authority of the Dean of the School of Medicine following approval by the CHA/PA Curriculum Committee. The CHA/PA Student Academic Policies and Procedure Handbook, the Clinical Handbooks, and the University of
Colorado Anschutz Medical Campus Course Book contain details of the curriculum. The three-year, innovative curriculum of the University of Colorado PA program is designed to integrate clinical and basic sciences to prepare graduates with the knowledge, skills, and attitudes to practice medicine as part of the health care team.

The program curriculum on the website at medschool.ucdenver.edu/paprogram is the best source for updated curriculum information.

3.3 CHA/PA Curriculum Committee
The CHA/PA Curriculum Committee is composed of the CHA/PA Core Faculty and provides general oversight and evaluation of the curriculum. All new courses and changes to existing courses must meet the approval of this committee.

3.4 Didactic Class Schedules
Required classes and events for students may be scheduled by the CHA/PA Program between the hours of 8 AM and 5 PM Monday – Friday. Those times in which no course is scheduled are labeled as “Flex Time”. Flex Times are used by the CHA/PA Program for scheduling guest speakers, re-scheduling presentations that were previously cancelled, or incorporating topics that may enhance the didactic or clinical curricula. Because not all students attend clinic on the same days, CHA/PA faculty may utilize some clinic days to schedule events. The Program may schedule events during Flex Time on short notice and will notify students as quickly as possible.

3.4a Request for a schedule change
For student to request a schedule change to classes, exams, finals or other course-related activities, the following procedure must occur:

- The Class Representative will request a class schedule change directly to the Academic Coordinator.
  - The request for a change must be unanimously agreed upon by the class prior to contacting the Academic coordinator.
- The Academic Coordinator will review this request with the Didactic Services Coordinator for any potential calendar issues or scheduling conflicts.
- If no issues or conflicts, the Academic Coordinator will communicate back to the Class Representative that the change has been approved for any scheduling conflicts and will instruct the Class Representative to contact the Course Director to request the change.
- If the Course Director approves the change, the Class Representative will contact the Didactic Services Coordinator and the Academic Coordinator with the Course Director copied on the email to confirm the change.
- The Didactic Services Coordinator will update the student outlook calendar.

3.4b Scheduling of outside events
Student groups wishing to schedule events may do so before or after regularly scheduled class time (i.e. before 8 AM or after 5 PM) or over the lunch hour AND must receive approval from the CHA/PA Program Director prior to contacting guest lecturers. Once approved by the Program Director, students must work with the Academic Coordinator and Didactic Services Coordinator to reserve appropriate classroom locations for the event.
3.5 **Clinical Experience Schedule**

All Clinical Experiences will be assigned by the Clinical Team based on the Accreditation Review Commission on the Education for Physician Assistant (ARC-PA) Standards, CHA/PA Program Requirements and Track requirements. Students will have input into their experience placements through special requests and completing preference sheets. One-on-one meetings may occur with the Clinical Coordinator.

3.5a **Rotation Length/Dates**

- **First Year**
  One clinical experience in the fall and one (1) clinical experience in the spring. Clinical experiences occur on Tuesdays only and are 7 weeks in length (Session 1 or Session 2). The other 7 weeks of the semester will be utilized for didactic courses.

- **Second Year**
  Two clinical experiences in the summer semester, 1 clinical experience in the fall semester and 1 clinical experience in the spring semester. Clinical experience during the summer occurs daily for a 2-week duration. Clinical experiences during the fall and spring semesters occur on either Tuesdays or Fridays only and are 7 weeks in length (Session 1 or Session 2). The other 7 weeks will be utilized for didactic courses.

- **Third Year**
  Most rotations are one month in duration (some electives may be two weeks). All rotations are scheduled to begin on the first day of the month and end on the last day of the month. During the 3rd year, students are expected to follow the schedule set by their preceptors, which may include night or weekend shifts or call (See “Attendance” in Section 3: Professionalism for more information).

3.5b **1st Year Clinical Experience Track Requirements**

- For those students involved in the Pediatric Critical and Acute Care Longitudinal Experience, placement at Children’s Hospital Colorado will occur in the spring semester of the 1st Year.

3.5c **2nd Year Clinical Experience Track Requirements**

During the 2nd Year, there is one required clinical experience that must occur. This experience is primary care (i.e. general pediatrics, family medicine or general internal medicine) in the summer, fall or spring semester. The remaining three clinical experiences will depend on the student’s Track and can occur in a variety of settings including: primary care, adult specialty care and pediatric specialty care.

- For those students involved in the **Urban Underserved Track (UUT)**, an optional Urban Underserved Track experience in Costa Rica may be offered during the summer semester through the e track. Students who elect to do this experience need to work
with the Urban Underserved Track Director and the CHA/PA Clinical Course Director to schedule their two required 2 week clinical rotations around this experience. This experience does **not** count toward the two 2-week clinical rotation requirement in the summer semester. Registration and expenses will be coordinated with the Urban Underserved Track Director.

- For those students involved in the **Global Health Track**, the student will work with the School of Medicine Global Health Track coordinator and the CHA/PA Global Health Track Course Director to schedule an optional Global Health Track clinical experience or Global Health Track Elective Experience during the summer semester. This will take the place of one (1) required clinical experience in the summer semester.
- For those students involved in the **Rural Track**, an optional rural immersion week may be offered during the summer semester if available through the Rural Track. This is **not** a clinical experience but rather a Rural Track experience. Students will still be placed in two (2) clinical experiences in the summer semester.
- For those students involved in the **Pediatric Critical and Acute Care Longitudinal Experience**, the student will be scheduled in their Pediatric Critical and Acute Care experience at Children’s Hospital Colorado in the fall semester.
- For those students involved in the **LEADs Track**, the student will participate in a didactic project during the summer of the 2nd year. This is **not** a clinical experience but rather a LEADs Track Experience. Students will still be placed in two (2) clinical experiences in the summer semester.
- For those students who elect to and have been approved to have a clinical experience in **Guatemala**, the students will work with International Course Director and the Clinical Team to schedule this experience in the summer of the 2nd year.

### 3.5d International Clinical Experiences

International clinical experiences in Guatemala are available for all students. Global Health Track students have additional international opportunities in Nepal and Tanzania. International clinical experiences are elective clinical experiences. International clinical experiences other than those mentioned above cannot be approved as clinical experiences. An international rotation experience in Guatemala may be offered to students during the summer semester of the 2nd Year or during a 3rd Year clinical experience. All international clinical experiences will be coordinated under the direct assistance of Global Health Track Liaison/International Course Director. These rotations are subject to review and approval by the Student Promotions Committee.

The timing will be determined by the International Course Director and coordinated with the Clinical Team. Students will have the financial responsibility for tuition, travel (must purchase travel insurance), room/board, health and malpractice insurance (if required).

Students will not be allowed to attend clinical experiences that are deemed unsafe for travel by the State Department or the University of Colorado. Students must understand that monies are required as a deposit for guaranteed travel. This money may be forfeited if the political or health condition of the visiting country changes prior to the clinical experience.
The policy on Immunizations for International Travel can be found in Appendix V.

3.5e Clinical Experience Requests
Before considering a clinical experience request, the student must ensure that the potential preceptor/site does not pose a conflict of interest (see Definition of Preceptor-Student Relationship in the Clinical Handbook). If there is any potential for conflict of interest, the request should not be made.

- **Within the State of Colorado (Required or Elective)**
  
  If a student is interested in a clinical experience at a certain site or with a specific preceptor within the State of Colorado, the following protocol must be followed:
  
  o Refrain from contacting the site or preceptor until discussion with the Clinical Coordinator has occurred.
  
    - Complete the preference sheet provided by the Clinical Coordinator
    - Discuss preferences and interests during a one-on-one meeting with the Clinical Coordinator
    - If a meeting with the Clinical Coordinator has already occurred, an email request must be sent to the Clinical Team regarding the interest. Include the site name and/or preceptor name and discipline (e.g., internal medicine).

  A communication process will be determined based on previous Clinical Team interaction with the site and/or preceptor. A Contract Request Form may be necessary afterward.

- **Out-of-State (Required or Elective)**

  The student should only contact sites/preceptors where a personal relationship has previously been established. Students should not “cold-call” sites/preceptors or contact other PA Programs requesting clinical experiences.

  If a student is considering a clinical experience outside of Colorado, a completed Contract Request Form must be submitted to the Clinical Team. If the rotation is deemed appropriate, the Clinical Team will extend a courtesy call to the PA Program(s) in that state to ensure there is no conflict with their scheduling needs.

  The student is responsible for arranging transportation and housing for their out-of-state clinical experience.

  Some states require additional authorization or fees for an out-of-state student to complete a rotation. The student will accept responsibility for the fees and additional paperwork needs.

3.5f Contract Request Forms
The Contract Request Form is available on the CHA/PA Clinical Website.

- **Within the State of Colorado**

  For a clinical experience request within the State of Colorado, after following the process for requesting a clinical experience described in 3.5e, if a Contract Request
Form is deemed necessary by the Clinical Team, the student must submit a completed Contract Request Form to the Clinical Team.

If submitted, the student acknowledges and accepts that he/she is declining a CHA/PA clinical experience provided by the CHA/PA Clinical Team and this experience will be provided to another CHA/PA student in need. Should the clinical experience on the Contract Request Form not occur, the student acknowledges that a replacement experience may not be available and failure to complete the rotation during the assigned semester, may result in an extended program.

- **Out-of-State**

  For a clinical experience request out-of-state, the student must submit a completed Contract Request Form to the Clinical Team.

  If submitted, the student acknowledges and accepts that he/she is declining a CHA/PA clinical experience provided by the CHA/PA Clinical Team and this experience will be provided to another CHA/PA student in need. Should the clinical experience on the Contract Request Form not occur, the student acknowledges that a replacement experience may not be available and failure to complete the rotation during the assigned semester, may result in an extended program.

### 3.5g 3rd Year Requirements and Electives for All Students

- **Rural and Underserved Rotation Requirement**

  Each student is required to have one clinical experience occur in a rural setting and one clinical experience occur in an underserved setting regardless of the Track they are in.

  For rural clinical experience, AHEC housing is available for rural living accommodations. The student is responsible for arranging transportation to the rural clinical experience site and applying to AHEC for their rural living accommodations. Policies regarding AHEC housing can be found on the CHA/PA Clinical Website.

  When rural and underserved experiences are scheduled, they may be combined with other requirements (i.e., one month could be in a rural family medicine practice fulfilling both the rural and family medicine requirements, and another may be scheduled in an underserved pediatric practice, fulfilling the pediatric and underserved requirements). However, the rural and underserved program requirements cannot be combined during one clinical experience.

- **Vacation Requirement**

  Each student will choose a mandatory 2-week vacation date range that will coincide with their 2-week elective. The vacation date range will be either:

  - 1st – 15th of the respective month OR
  - 16th – end of the respective month

- **Elective Clinical Experiences**
Each student will have some freedom in requesting 3rd year elective clinical experiences. The number of elective clinical experiences available to a student depends on their respective Track.

An elective international rotation experience in Guatemala may be offered to students during their 3rd Year clinical experiences. All international clinical experiences will be coordinated under the direct assistance of the International Course Director. These rotations are subject to review and approval by the Student Promotions Committee.

3.5h Rotation Cancellation
If a preceptor/site must cancel a rotation prior to the start date, the student will have two options for scheduling of that rotation:

A. Accept the rotation selection that the Clinical Team can provide.
   - The Clinical Team will make every effort to secure a clinical rotation site/preceptor for the student. The student will not be required to find their own rotation unless they choose to do so (see #2).

B. Not accept the rotation selection from the Clinical Team and find their own rotation.
   - By choosing this option, the student agrees that if their chosen rotation cancels, does not meet requirements or cannot be arranged by an agreed upon date, the student may be placed on an extended program and delayed graduation.

3.5i Additional Clinical Rotation Experiences
Requests for additional clinical rotation experiences outside of the Program required clinical experiences, will not be accepted. This includes experiences that may constitute shadowing, observation or volunteer experiences at a clinical site.

3.6 The Course Director
The Course Director works with the CHA/PA Curriculum Committee to design the specific content and presentation of the course materials. He/she is expected to provide students with the overall objectives for the course. In addition, information regarding requirements of enrolled students and grading policies are presented at the onset of the course within the course syllabus. The Course Director has overall responsibility and authority of the content of his/her course. The Course Director reserves the right to lower a student’s grade based upon individual professional behavior.

For clinical rotations, the Clinical Course Director assigns the final grade after reviewing the evaluation(s) from the outside preceptor in addition to other clinical course requirements in “Clinical Experience Requirements for a Passing Grade”. The Clinical Course Director may consult with faculty, staff and/or the preceptor in causes where assessment is unclear.

3.7 Testing Policies and Procedures
The following are general procedures used for examinations:
- Exams shall be distributed to students in a classroom setting
- Proctoring will be at the discretion of the course director and may be administered by administrative staff or faculty
Scheduled test times will be adhered to
Exams will start and end as scheduled
Students are expected to take exams as scheduled. Exceptions may be made in the case of an emergency.
Should a clinical exam need to be rescheduled, the student may be responsible for additional costs incurred due to the rescheduling.
Exam keys may be made available for review only after all students have taken the exam.
Exam keys will be located at the CHA/PA Program reception desk with administrative staff for 1 week following the exam. Keys will be available for student review during CHA/PA Program office hours. After 1 week, students must contact Course Directors to request review of exam keys.
Grading and policy for challenging exam questions are determined by individual Course Directors and found in the course syllabi.

### 3.8 Grade Report Symbols

<table>
<thead>
<tr>
<th>Grade</th>
<th>Description</th>
<th>Grade Points per Credit Hour</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>&gt; 93.5%</td>
<td>4.00</td>
</tr>
<tr>
<td>A-</td>
<td>89.5--93.4%</td>
<td>3.70</td>
</tr>
<tr>
<td>B+</td>
<td>86.5—89.4%</td>
<td>3.30</td>
</tr>
<tr>
<td>B</td>
<td>83.5—86.4%</td>
<td>3.00</td>
</tr>
<tr>
<td>B-</td>
<td>79.5—83.4%</td>
<td>2.70</td>
</tr>
<tr>
<td>C+</td>
<td>76.5—79.4%</td>
<td>2.30</td>
</tr>
<tr>
<td>C</td>
<td>69.5—76.4%</td>
<td>2.00 (the lowest passing grade)</td>
</tr>
<tr>
<td>C- and D’s</td>
<td>Not awarded</td>
<td></td>
</tr>
<tr>
<td>F</td>
<td>0.0 grade points per credit hour*</td>
<td></td>
</tr>
<tr>
<td>P</td>
<td>No grade points per credit hour*</td>
<td></td>
</tr>
<tr>
<td>I</td>
<td>No grade points per credit hour*</td>
<td></td>
</tr>
<tr>
<td>NC</td>
<td>No grade points per credit hour*</td>
<td></td>
</tr>
<tr>
<td>W</td>
<td>No grade points per credit hour*</td>
<td></td>
</tr>
</tbody>
</table>

*See further explanation below*


### 3.9 Grade Report Symbol Information

#### 3.9a Fail (F)

A Fail (F) grade is given when a student demonstrates a major performance deficiency and will require a repetition of the entire course. The Fail grade is a permanent part of the university transcript. A physician assistant student with a failing grade is required to re-register for that course the next time the course is offered and achieve a grade of “C” or better. The subsequent grade will be added to the transcript. A failing grade will be brought to the Student Promotions Committee for further review.

A student may retake a failed course one time only. If the student receives a second failing grade after retaking the course, the Student Promotions Committee will review the students’ academic progress and may consider dismissal from the Program.

#### 3.9b Incomplete (I)
An Incomplete (I) is a grade indicating that work for the course has not been completed. This grade may be issued when a student has participated in a course but does not fulfill all requirements within the time allotted.

Once the student completes course requirements, the Course Director will submit a grade change form to the registrar’s office indicating the final course grade. In this instance, a letter or pass/fail grade will replace the Incomplete (I) as the official course grade. The official transcript will denote the final grade and indicate that the previous grade was an Incomplete (I).

The student will not be able to progress to the next level of training (e.g., 1st year to 2nd year, 2nd year to 3rd year, and 3rd year to graduation) if a grade of Incomplete (I) has been recorded and not rectified. This may result in an extended program and delayed graduation.

After one academic year from the end of the course, if the student has not completed the course requirements, the Incomplete (I) grade may be replaced by a grade of Fail (F). If the student receives a grade of Incomplete (I) and withdraws from the program prior to completing course requirements, the grade of Incomplete (I) remains a permanent part of the official student transcript.

3.9c Withdrawal (W)
Withdrawal (W) is a special symbol that is an indication of registration or grade status and is not assigned by the instructor.

- Withdrawal (W) The CHA/PA Program curriculum is built entirely on courses taken as prerequisites or as part of the program. Therefore, a physician assistant student may withdraw from a course only with permission of the Student Promotions Committee. In most instances, withdrawing from a course will result in withdrawing from the Program since all courses must be in sequential order. It is the student’s responsibility to obtain the necessary signatures from the instructor as well as the Registrar. A Withdrawal (W) notation is recorded on the student’s permanent record. Students who do not officially withdraw are subject to grades of Fail (F) for all course work.

3.10 Pass (P)/Fail (F) Courses
Pass/Fail courses count toward the degree, but a grade of Pass (P) does not affect the grade point average. A grade of Fail (F), however, will negatively affect the grade point average.

3.11 Drop/Add Procedure
Students will be allowed to drop and add courses within a period specified by the Registrar. This procedure most commonly applies to clinical experiences or didactic elective courses. Students seeking to drop or add a course after the specified period must obtain the Course Director’s permission. All courses dropped after the conclusion of the initial drop period appear on the permanent record with the grade of Withdrawal (W). After the 10th week, courses may not be dropped unless there are circumstances clearly beyond the student’s control (accident, illness, etc.…). In addition to the Course Director’s certification, the Program Director or his designee must grant approval to drop the course. There may be a fee associated with a drop/add if the change is made outside the specified drop/add period.

3.12 Online Course/Clinical Evaluations
3.12a Didactic Course Evaluations
Throughout the semester, students are required to evaluate each course, Course Director and guest lecturers/facilitators for that course. The course evaluations are completed online and are administered by the University’s Educational and Support Services. Anonymous compilation of the evaluations is provided to course directors, the Associate Director – Program Quality and the CHA/PA Leadership Team. Evaluations are reviewed and used to make improvements to individual courses as well as the overall curriculum. Therefore, constructive student feedback is extremely important in considering changes to curriculum.

Failure to complete student didactic course evaluations may result in the following:
- A warning from the Chair of the CHA/PA Evaluation Committee will occur for the first offense
- If student didactic course evaluations continue to not be completed for the following semesters, the student’s status will be brought to the Student Promotions Committee for notation on a Professional Development Evaluation (PDE) or documentation in the student’s file for professionalism concerns.

3.12b Clinical Experience Evaluations – Student Evaluation of the Preceptor
Students provide evaluations of clinical rotations using the online platform of Typhon. Constructive feedback is important in evaluation and continued use of clinical sites as well as in providing clinical site education. The student evaluation is due no later than 7 days following completion of the clinical experience.

Failure to complete student evaluation(s) of the preceptor may result in the following:
- A grade of Incomplete (I) for the clinical experience at the end of the semester (this is dependent on the deadline for end-of-semester grade submission to the Registrar’s office) AND/OR
- A warning from the Clinical Course Director will occur if the evaluation is submitted later than 7 days after the completion of the clinical experience for the first offense
- If evaluations continue to not be completed within 7 days for the following clinical experiences, the student’s status will be brought to the Student Promotions Committee for notation on a PDE or documentation in the student’s file for professionalism concerns.

Following the School of Medicine policy, preceptors may only request feedback if they have had three or more students over one academic year or over a total of five years. If they have had at least three students and request feedback, the CHA/PA Program would provide general information where all evaluative information is de-identified.

3.13 Clinical Experience Requirements for a Passing Grade
Grades are assigned by the Clinical Course Director. The Clinical Course Director may obtain advice and consultation from the Preceptor, the Clinical Team and/or the Student Promotions Committee. All clinical experiences are assigned Pass (P), Incomplete (I) or Fail (F) grades at the end of each semester. The following are requirements for a passing grade for 1st, 2nd and 3rd Year clinical experiences:
- Patient Logging
- Preceptor Assessment of Student (ORIME)
- Student Evaluation of Preceptor
- Additional requirements provided by the Clinical Course Director (Individualized Learning Plan – Goals in 3rd Year)
An incomplete (I) grade will be assigned if any of the items listed above for the clinical experience have not been received by the University of Colorado designated grade submission date.

3.13a Patient Logging
Patient logging for clinical experiences is completed through the Typhon tracking system. The student will be required to log their patient encounters during clinical experiences in the 1st, 2nd and 3rd year. Compliance with HIPAA is an absolute. Patient logging is monitored by the Clinical Course Director and is a component of the student’s clinical experience grade. The following are required with patient logging:

- Log all of the information that is “required” on the patient logging worksheet in Typhon
- Log ICD-10 codes starting in the summer of the 2nd year
- Complete logging within **7 days** after the completion of the clinical experience.
  - Failure to complete patient logging within **7 days** after the completion of the clinical experience may result in a warning for the first lapse followed by a notation on the student’s Professional Development Evaluation (PDE) for the second lapse. If late patient logging continues, the Student Promotions Committee may become involved for discussion of the student’s professionalism.
  - Students should review their Typhon graph printout with their preceptor(s) at the end of the rotation

3.13b Preceptor Assessment of the Student (ORIME)
The CHA/PA Program utilizes an assessment method for clinical experiences. The ORIME method allows a preceptor to assess student performance in a developmental approach. The assessment allows students to identify areas of improvement and strengths, guide their future educational goals, and provide a measure of their progression over three clinical years. A copy of the ORIME explanation can be found in Appendix III.

The preceptor assessment of the student is electronic and sent directly to the preceptor by the program through Typhon. If the preceptor prefers paper evaluation forms, the student should print out a pdf form and provide it to the preceptor. The pdf form is found on the CHA/PA website under “Preceptors”, “Preceptor Resources”.

It is the student’s responsibility to meet with the preceptor to review their performance midway through the clinical experience and arrange a time near the end of the clinical experience to meet and discuss the assessment.

The Preceptor Assessment of the Student is due in the CHA/PA office within **7 days** following the student’s clinical experience.

3.13c Student Evaluation of the Preceptor
(See above in “Clinical Experience Evaluation – Student Evaluation of the Preceptor”)

3.13d Other Requirement for 3rd Year Students: Individualized Learning Plan – Goals
An Individualized Learning Plan – Goals is due to the Clinical Course Director at the end of each semester (September 1st, January 1st and May 1st) for 3rd Year students. Information on this will be provided in the 2nd Year Professional and Clinical Practice IV course (MPAS 6804).

3.14 Student Formative Assessments
3.14a First Year Formative Clinical Assessment
The First Year formative clinical assessment is administered to 1st year CHA/PA students in the Spring of the first year. This is a clinical skill evaluation based upon program and professional competencies and is performed at the Center for Advancing Professional Excellence (CAPE) on the Anschutz Medical Campus. Following completion of the assessment, 1st Year CHA/PA students will meet with their academic advisor for formative feedback on the outcome of their assessment.

3.14b Second Year Formative Clinical Assessment
The Second Year formative clinical assessment is administered to 2nd year CHA/PA students in the Fall of the second year. This is a clinical skill evaluation based upon program and professional competencies and is performed at the Center for Advancing Professional Excellence (CAPE) on the Anschutz Medical Campus. Following completion of the clinical assessment, 2nd Year CHA/PA students will meet with their academic advisor for formative feedback on the outcome of their assessment and discuss areas for further study to prepare for the 2nd Year comprehensive clinical examination administered in the spring of the second year.

3.15 Second Year Summative Testing and Assessment

3.15a Second Year Comprehensive Clinical Assessment
The Second Year summative clinical assessment is administered to 2nd year CHA/PA students in the Spring of the second year. This is a clinical-skills evaluation that is based upon program and professional competencies.

Students must pass the Clinical Assessment before beginning third year courses.

In the event of a failing grade on the 2nd Year Comprehensive Clinical Assessment, the Second Year Comprehensive Clinical Assessment may be re-taken up to two (2) times. Failure to pass the Second Year Comprehensive Clinical Assessment after the third (3) attempt will result in dismissal from the Program.

The Student Promotions Committee reviews the student’s Second Year Comprehensive Assessment performance. If a student fails the Second Year Comprehensive Assessment, the Student Promotions Committee will determine whether remediation is appropriate. Remediation is determined on a case-by-case basis and is based upon individual student needs. Remediation may consist of a structured, individualized plan that will assist the student in successfully passing the Second Year Comprehensive Clinical Assessment. An extended program may be necessary in order to accommodate re-take examinations; an extended program will be necessary to accommodate individualized remediation.

The student may be responsible for costs associated with the remediation process.

3.15b Second Year Physician Assistant Clinical Knowledge Rating Assessment Tool (PACKRAT)
The Second Year Comprehensive Clinical Assessment is paired with a formative written examination known as the PACKRAT (Physician Assistant Clinical Knowledge Rating Assessment Tool) which students complete online. The PACKRAT does not have a pass/fail score. It is formative and designed to offer guidance to students in preparation for the clinical year.
Students must complete the PACKRAT exam in the timeframe indicated by the Program before proceeding to the third year. Results of each examination will be discussed with the student individually by their advisor, in order to inform students of their strengths and areas for improvement, to guide self-directed learning over the course of the third year.

3.16 Third Year Comprehensive Clinical and Written Assessment
Within the four months preceding the completion of the CHA/PA Program, the CHA/PA Program administers the Third Year Comprehensive Clinical and Written Assessment. This assessment is a two-part examination, consisting of a written examination and a clinical skills examination.

The two parts of the exam must each be passed in order to be eligible for Program graduation.

In the event of a failure, the student may re-take either portion of the exam up to two times. Failure to pass any portion of the Third Year Comprehensive Examination after the third attempt will result in dismissal from the Program.

The Student Promotions Committee reviews the student’s Third Year Comprehensive Assessments. A student who receives a failing score will have the opportunity to re-take the examination up to two (2) times. The Student Promotions Committee does not offer structured, individualized remediation plans for third year students receiving a failing score on either exam component. An extended program may be necessary in order to accommodate re-take examinations.

The student may be responsible for costs associated with the retake process.

Students do not receive feedback on performance for either of the 3rd summative examinations.

3.17 Working While in the Program
Students are discouraged, but not prevented from working while in the Program as it often interferes with professional boundaries. Alterations to course or clinical schedules will not be made for students who choose to work while in the Program.

SECTION 4: PROMOTION AND GRADUATION

4.1 The Student Promotions Committee
The Student Promotions Committee is charged by the School of Medicine with the maintenance of the academic and professional standards of the CHA/PA Program. The goal of the Student Promotions Committee is the success of each individual student. The committee has the responsibility to monitor student performance and assist students with academic and professional issues as they progress towards graduation.

The Student Promotions Committee is composed of all core CHA/PA Program faculty members with the Medical Director serving as a non-voting member. The Program Director acts as chair. Student academic and professional performance is reviewed at the end of each semester and on an as-needed basis. When evaluating student performance, the Student Promotions Committee takes into account grades and professional development evaluations (PDE) as specified in the “Student Grades” and “Student Professional Development” sections. Although each incident is considered on an individual basis, the Student Promotions Committee reviews the students’ entire academic and professional progress when making decisions.
A student may appear before the Student Promotions Committee or a Student Promotions Committee Subcommittee, either at the request of the student or the Student Promotions Committee, and may choose to be accompanied by an advocate from the School of Medicine Advocacy Office, a faculty member, or another student (See Appendix II).

Actions by the Student Promotions Committee may consist of, but are not limited to, recommending a professional development evaluation (PDE), placing a student on probation, remedial action, or dismissal. The Student Promotions Committee acts on requests for official non-medical leave of absence, official medical leave of absence, program leave and on requests to return to active status after an official leave of absence or program leave. The Student Promotions Committee may review and act on requests to change academic tracks, exemption from courses, and results of criminal background checks. The process to appeal decisions of the Student Promotions Committee is outlined under “Rights of Appeal”.

4.2 Student Grades
Course Directors report grades to the Registrar’s Office. Grades are reviewed each semester and failing or unsatisfactory grades are reported to the Student Promotions Committee. Unsatisfactory grades are defined as:

- One or more individual failing grades OR
- A cumulative GPA of less than 2.80

When a student incurs unsatisfactory grades, the Student Promotions Committee reviews that student’s entire academic record in detail and may impose probation or remedial action as described in the “Student Probation” and “Student Remediation” sections. Each student’s academic performance is considered on an individual basis each semester or as needed.

4.3 Academic Standing Definition
To remain in “Good Standing”, a student must receive a passing grade of “C” or higher in all courses, maintain an overall GPA of 2.80, pass all clinical rotations, and successfully complete requirements for annual promotion.

If the criteria for good standing are not met, the student will be considered “Not in Good Standing” and will be placed on probation. It is the responsibility of the student to know his/her academic status. Students not in good standing may not hold elected or appointed student leadership positions. Students “Not in Good Standing” may not participate in elective courses, including track curriculum, and may be subject to loss of scholarship funds.

4.4 Course Requirements, Electives and Tracks
The requirements for each year of the CHA/PA Program must be completed successfully before a student can begin the next years’ curriculum. All students have the same didactic and clinical course requirements for the CHA/PA curriculum in all three years.

Track students may have additional didactic and clinical requirements beyond the required curriculum of the program.

Students must maintain all requirements for clinical rotations including immunization/health screening, OSHA training, mask-fit testing, HIPAA training, drug screening, and BLS certification. Expenses associated with maintaining these requirements are the responsibility of the student.
4.5  Requirements for Annual Promotion

4.5a  First Year Requirements
The student must successfully complete all required first year courses and be in “Good Standing” before becoming eligible to begin second year courses.

4.5b  Second Year Requirements
The student must successfully complete all requirements, pass the Second Year Comprehensive Clinical Assessment, complete the PACKRAT written formative assessment, and be in “Good Standing” to begin third year courses. For more information on the Second Year Comprehensive Assessment, refer to “Second Year Summative Testing and Assessment”.

4.5c  Third Year Requirements
The student must successfully complete all requirements, pass the Third Year Comprehensive Clinical and Written Assessments, and be in “Good Standing” to complete the Program. For more information on the Third Year Comprehensive Clinical and Written Assessments, refer to “Third Year Comprehensive Clinical and Written Assessments”.

4.6  Requirements for Program Graduation
The student must successfully complete all requirements for the first, second and third year of the Program and be in “Good Standing” to graduate. Graduates will receive a Master of Physician Assistant Studies-Pediatrics degree.

4.7  Extended Curriculum
Students are expected to complete their course requirements as full-time students over three years. Any students failing to complete Program requirements in the initial three years will be considered on extended curriculum. This may occur in instances of an Official Leave of Absence, an Official Medical Leave of Absence, a Program Leave, remediation, or need for special accommodations. The graduation date for a student on extended Program will coincide with the end of the semester in which coursework is completed. The maximum time to complete the Program is 6 years from the time of matriculation.

4.8  Student Probation
The Student Promotions Committee may impose probation in instances of unsatisfactory grades or unprofessional behavior. Probation may be imposed by the Honor Council in instances arising from a Student Honor and Conduct Code violation. The length of probation is determined on a case-by-case basis, but may continue until graduation.

The Student Promotions Committee may impose conditions of probation including, but not limited to:

- Referral, evaluation and clearance by the Colorado Physician Health Program, student mental health, and/or an independent medical evaluation
- Office Leave of Absence, and/or
- Academic assistance.

A student who has demonstrated that they have met the requirements of the Student Promotions Committee will be returned to “Good Standing” by a vote of the majority of Committee members.

Students on probation:

- May not take elective didactic courses (Track);
➢ Are required to do all clinical course work at University of Colorado affiliated institutions or with preceptors in Colorado who are well known to the CHA/PA Program;
➢ May be subject to immediate dismissal upon receipt of a single deficient grade (F) or other violation of the terms of the probation;
➢ May not hold elected or appointed student leadership positions;
➢ May not graduate until academic status is returned to “Good Standing”.

4.9 Student Remediation

Students who have unsatisfactory grades, exhibit unprofessional behavior, or fail comprehensive exams, may have the opportunity to complete a remediation plan determined by the Student Promotions Committee and the appointed Remediation Team. The Committee may require remedial action, including, but not limited to, repeating a course and/or repeating a year or more of additional study in a subject area. In the latter instance, the student may be required to register for an Independent Study course in order to complete the additional student requirements. In addition, the committee may impose probation and/or an official leave of absence, separately or in combination with a remedial action.

An official non-medical leave of absence may be necessary to re-take the course(s) with the failing grades(s) due to the required course sequencing. In any of the above-mentioned instances, the student must complete all program requirements within a maximum of six (6) years from the time of matriculation. The student may be responsible for the cost of remediating coursework. Alternatively, the Student Promotions Committee may dismiss the student. The Student Promotions Committee considers each case individually.

A student participating in a remediation plan during summer semester will be placed on extended program, thereby delaying graduation. Due to the 3rd Year clinical seminar course, graduation, and university completion requirements, no clinical rotations will be initiated and/or completed during the month of May. Eligibility for graduation will be determined upon successful completion of remediation.

Any student participating in an academic remediation plan is eligible for tutoring. If the Student Promotions Committee mandates a tutor, related expenses are the responsibility of the Program.

4.10 Student Dismissal

Any student who, in the opinion of the Student Promotions Committee, is deemed unfit for practice of medicine may be immediately dismissed from the CHA/PA program without a term on probation. “Unfit to practice” includes, but is not limited to:
➢ Actions that indicate a direct threat is imminent and severe
➢ The student’s physical or mental health increases the probability of an adverse effect on him/herself, a peer, or a member of the public,
➢ Actions that are dishonest, unethical or considered egregious

The Student Promotions Committee may consider dismissal from the CHA/PA program when a student receives unsatisfactory grades, exhibits unprofessional behavior, or is unable to meet the programs technical standards (Appendix I).

Students on probation or on an extended curriculum due to remediation are subject to immediate dismissal upon receipt of failing grades, demonstrating unprofessional behavior, or violating the terms of probation.
Generally, students with one deficient grade in an academic year are not dismissed without a term of probation. Students who receive more than one deficient grade in a semester or are found in violation of the student conduct and honor code may be subject to dismissal.

4.11 Requests for Leave of Absence (LOA)

4.11a Official Non-Medical Leave of Absence (LOA)

A student requesting an Official Non-Medical LOA must submit a written petition to the Student Promotion Committee. See Appendix VI for a Request for an Official Leave of Absence Form. The Student Promotions Committee may grant a leave of absence for a maximum of one (1) year placing the student on an extended program.

If the request for an Official Non-Medical LOA is granted, a student will begin the Official Non-Medical LOA in “Good Standing” or “Not in Good Standing” as determined at the time of the LOA by the Students Promotions Committee defined in the section entitled “Academic Standing Definition”. The student’s academic work, including course examinations, clinical requirements and professional behavior prior to beginning an Official Non-Medical LOA, will be used in determining the student’s status at the time the LOA begins.

At the time the Official Non-Medical LOA is granted, the Student Promotions Committee will establish criteria for return. Upon receipt of a petition to return, the Student Promotions Committee will determine whether the student is eligible to continue the CHA/PA Program. Such a determination is based upon various factors including, but not limited to:
- The student’s status at the time the leave began,
- The student’s performance before taking the leave,
- Curricular or Program changes, if any, that occurred while the student was on leave

Additional requirements may be instituted due to changes in the program curriculum or policies since the leave began. An Official Non-Medical LOA for any reason may be granted for variable amounts of time, however, no more than two (2) one-year leaves may be granted; and all program requirements must be completed within the maximum time of six (6) years from the time of matriculation.

The two (2) one-year leave of absences may not be consecutive. If the student is not ready to return after a one (1) year Official Leave of Absence, the student must withdraw from the SOM Child Health Associate/Physician Assistant Program or be dismissed.

The Student Promotions Committee’s determination of the student’s status at the time of Official Non-Medical LOA begins is not appealable.

4.11b Official Medical Leave of Absence

A student requesting an Official Medical LOA must submit the following:
- A written petition to the Student Promotions Committee. See Appendix VI for a Request for Leave of Absence form
- Evidence from a licensed practitioner of medicine (MD/DO/PA/licensed mental health provider) that the student is under the care of the practitioner

If the request for an Official Medical LOA is granted a student will begin the Official Medical LOA “in good standing” or “not in good standing” as determined at the time of the LOA by the Students Promotions Committee defined in the section entitled “Academic Standing Definition”. The student’s academic work, including course examinations, clinical requirements and
professional behavior prior to beginning an Official Medical LOA, will be used in determining the student’s status at the time the LOA begins.

At the time the Official Medical LOA is granted, the Student Promotions Committee will establish criteria for return. Upon receipt of a petition to return, the Student Promotions Committee will determine whether the student is eligible to continue the CHA/PA Program. Such a determination is based upon various factors including, but not limited to:

- The student’s status at the time the leave began,
- The student’s performance before taking the leave,
- Curricular or Program changes, if any, that occurred while the student was on leave.

Additional requirements may be instituted due to changes in the program curriculum or policies since the leave began. A LOA for any reason may be granted for variable amounts of time, however, no more than two (2) one-year leaves may be granted; and all program requirements must be completed within the maximum time of six (6) years from the time of matriculation.

The two (2) one-year leave of absences may not be consecutive. If the student is not ready to return after a one (1) year Official Leave of Absence, the student must withdraw from the SOM Child Health Associate/Physician Assistant Program or be dismissed.

The Student Promotions Committee’s determination of the student’s status at the time of Medical Leave of Absence begins is not appealable.

4.11c Request to Return from an Official Non-Medical and Medical Leave of Absence

To request a return from an Official Non-Medical and Medical Leave of Absence, a student must submit:

- A written petition requesting return to the Program. A request for return from leave of absence form may be obtained from the student’s Academic Advisor.
- The Student Promotions Committee must receive the written request no later than 10 calendar days before the LOA ends.
- For a Medical Leave of Absence, documentation from a licensed practitioner of medicine (MD/DO/PA/licensed mental health provider) indicating the student is able to return to studies and clinical rotations.

If a student fails to submit a complete and timely petition to return to the Program, that student will be deemed permanently withdrawn from the Program and will not be permitted to reapply except through the standard application process described in “Rights of Reaplication”. If the Student Promotions Committee denies the student’s petition to return, the student may appeal that determination through the appellate process described in “Rights of Appeal”.

The Student Promotions Committee may request an independent medical evaluation if there is a question regarding the students need for medical leave or readiness to return to the program.

4.11d Program Leave

During the 3rd Year, a student may request a program leave for at least 2-week duration due to personal reasons. Student requesting a Program Leave must submit:

- Written documentation clarifying and supporting the necessity of the Program Leave
- Estimation of the amount of time they will be absent
- Acknowledgement of understanding of extended program and delayed graduation
A request for a Program Leave must be submitted to the student’s Academic Advisor. The academic advisor will provide the documentation to the Student Promotion Committee for discussion and approval. If approved, the student acknowledges and accepts that they will be placed on an extended program and delayed graduation which may be affected by clinical site availability and summative examination schedules.

To request a return from a Program Leave, a student must submit:

- A written petition requesting return to the Program. A request for return must be submitted to the student’s Academic Advisor.
- The Student Promotions Committee must receive the written request no later than 10 calendar days before the Program Leave ends.

No student on an official non-medical or official medical leave of absence may participate in CHA/PA program activities including, but not limited to, examinations, CHA/PA courses or student organization activities.

4.12 Track Change Requests
A student interested in leaving their track once track selection is complete, must submit a written petition to the Student Promotions Committee.

4.13 Exemption from Courses
In rare instances, a student may be granted an exemption from some required course(s) because of advanced knowledge or skill. A student must petition the appropriate Course Director and the Student Promotions Committee in order to be considered for an exemption from a course.

4.14 Need for Special Accommodations
It is the policy of the CHA/PA Program to provide reasonable accommodations to qualified students with a disability. Whether or not an accommodation is reasonable is determined on an individual basis. Students are encouraged to contact the Office of Disability Resources with any questions.

If an individual has special needs or concerns about course requirements or clinical rotations related to a physical or cognitive disability, the student should seek evaluation through the Office of Disability Resources. The Student Promotions Committee will review the accommodations recommended by the Office of Disability Resources in relation to the technical standards. Costs associated with evaluation are the responsibility of the student.

If an individual has special needs or concerns about course requirements or clinical rotations related to religious beliefs, cultural issues, or other issues, the student must contact the Student Promotions Committee.

4.15 Requests for Withdrawal
Any student may withdraw from the University of Colorado CHA/PA Program at any time by presenting such notice in writing to the Program Director. A student’s status at the time of withdrawal will establish whether the withdrawal is characterized as “Withdrawal in Good Standing” or “Withdrawal Not in Good Standing” (refer to “Academic Standing Definition”). The Student Promotions Committee determines the student’s withdrawal status. Students who withdraw must complete the appropriate
Withdrawal Form obtained from the Registrar. Students who withdraw retain the rights for reapplication as set forth in the “Rights of Reapplication” section of this document.

A student who withdraws from the CHA/PA Program prior to establishing an academic record (e.g. before receiving a grade for one or more courses) must reapply for admission through the usual admissions process as published by the Program.

4.16 Criminal Background Checks

As part of admission to the CHA/PA Program, all students are required to complete and pass a criminal background check prior to matriculation in accordance with the University Background Check Policy (http://www.ucdenver.edu/academics/colleges/medicalschool/facultyAffairs/clinicalfaculty/Documents/Volunteer and Trainee Policy.doc). A letter attesting to having passed this check is placed in the student’s academic file and is sent to clinical experience sites when requested. A student who has passed a criminal background investigation after admissions and prior to matriculation in the CHA/PA Program will not be re-investigated except under the following conditions:

- The student has not participated in the Program for more than one (1) year
- It is determined by the Program that another criminal background investigation is warranted
- A clinical experience site requires an additional, more current, criminal background check be performed prior to the start of a clinical experience

Current students are required to report any criminal charges to the CHA/PA Program Director within thirty (30) days for any of the following types of offenses:

- Any felony charge
- Charges for drug or alcohol use or distribution
- Charges for serious or violent crimes
- Charges related to moral turpitude

Repeat criminal background investigations will require a new consent/release form signed by the student prior to conducting the background investigation as well as the payment of the background check fee. Students who refuse to consent to additional criminal background investigations will be subject to discipline, up to and including dismissal from the Program. The Student Promotions Committee will review results of the criminal background investigation. The student may be subject to probation or dismissal, pending the results of the review.

SECTION 5: Student Honor and Conduct Code

Students must adhere to the CHA/PA Program Student Honor and Conduct Code

The health professions are based on a high degree of trust by the individuals they serve. Students entering the health professions have a particular obligation to conduct themselves at all times in a manner that reflects ethical and honest behavior. The purpose of an Honor Code is to create an atmosphere of mutual trust and respect among all members of the campus and medical community. This document outlines the nature of the Code and the means by which it is upheld.

5.1 Academic Honor and Conduct Code

Education at the University of Colorado Child Health Associate/Physician Assistant Program (CHA/PA) is conducted under the honor system. All students entering health professional programs should have
developed the qualities of honesty and integrity, and each student should apply these principles to his or her academic and subsequent professional career. All students are also expected to have achieved a level of maturity that is reflected by appropriate conduct at all times.

The Student Honor and Conduct Council reviews issues related to student academic dishonesty or unethical behaviors. In the event an issue does not clearly fall within the purview of either the Honor Council or the Student Promotions Committee, the Student Promotions Committee has the authority to determine which Committee (Honor Council or Promotions) will hear the matter. Issues related to professionalism will be referred to the Student Promotion Committee, while possible honor code violations will be reviewed by the Chair of the Honor Council.

The Committee will review cases alleging violations of the Honor and Conduct Code related to academic honesty, and unethical behavior. NOTE: Issues other than academic honesty that are related to a course grade or program progression will be referred to the Student Promotions Committee.

The type of conduct that violates the CHA/PA Program’s Student Honor and Conduct Code may include but is not limited to the following:

- Academic Dishonesty;
- Complicity with Academic Dishonesty;
- Plagiarism;
- Cheating;
- Fabrication and Falsification;
- Submission of the same work and/or paper more than once and for different classes;
- Misuse of Academic Materials;
- Redistribution, photocopying, photographing or otherwise reproducing exam content or keys; This applies to CAPE cases and may apply to simulated cases used in the classroom;
- Theft, damage, or destruction of property

5.2 Academic Honesty

Students should adhere to the highest standards of academic honesty and integrity. Examples of behavior that violate these standards include but are not limited to the following:

- Plagiarism, including improper use of web information;
- Cheating;
- Illegitimate possession and/or use of examinations;
- Fabrication and falsification;
- Multiple submissions;
- Misuse of academic materials and facilities;
- Complicity in academic dishonesty.

5.3 Reporting Violations of the Honor Code

The primary responsibility for reporting violations of the student honor and conduct code resides with the individual who has committed the violation. However, fellow students and members of the faculty and staff also share in this responsibility. Each student signs an agreement to adhere to the Honor and Conduct Code; therefore, all new violations must be reported. The acknowledgement form shall be placed in the student’s file.
5.4 Guidelines for Implementing the CHA/PA Program Honor Code

Members of the University community, including faculty and students, accept the responsibility to maintain the highest standards of intellectual honesty and ethical and professional conduct. All students in the CHA/PA Program have an obligation to familiarize themselves with the guidelines and procedures for implementing the CHA/PA Program Student Honor Code. Ignorance of the guidelines and procedures may not constitute an affirmative defense to a violation. All questions and/or concerns regarding guidelines and procedures should be directed to the Program administration.

The CHA/PA Program has developed the following guidelines and procedures to review alleged violations of the Student Honor and Conduct Code and to make recommendations concerning violations of the Code. The Chairperson will convene the CHA/PA Student Honor and Conduct Committee as necessary. The Student Honor and Conduct Committee shall follow these guidelines to the extent possible; however, the Student Honor and Conduct Committee reserves the right to modify these procedures if necessary based on extraordinary circumstances to be determined on a case-by-case basis.

5.4a Membership of the CHA/PA Student Honor and Conduct Committee

Voting members of the Student Honor and Conduct Committee will include three (3) faculty members, one of whom serves as a chairperson who shall only vote in circumstances where there is a tie, and two (2) students. An additional two (2) students will be elected to serve as alternates should a student member of the committee be unavailable. A minimum of two (2) faculty and two (2) students must be present for decision-making. Decisions of the Committee shall be reached based on a simple majority vote.

- Faculty members will be appointed to the committee by the Program Director. Each committee member will serve a **two-year term** with one new member appointed at the beginning of the academic year (Summer).
- Student members will be appointed or elected by their class. Efforts will be made to include students’ representative of different academic years. Student members will serve one-year terms and may be reappointed for a second term.
- The Chairperson will be one of the faculty members and will be appointed by the Program Director to serve a **one-year term**.

5.4b Procedures in Cases of Suspected Violation of the Student Honor and Conduct Code

Faculty, staff, and students are strongly encouraged to report alleged violations of the Student Honor and Conduct Code. The failure of a student to report an observed violation of the honor code may constitute a violation of the honor code in itself and may subject the observer to an honor code proceeding.

I. Any reasonable suspicion of a violation of the Student Honor and Conduct Code shall be reported to the **Chairperson** of the Student Honor and Conduct Committee and must be submitted in writing. Normally, disciplinary action will not be taken against the alleged violator until the Student Honor and Conduct Committee has deliberated. However, if the alleged violation threatens the welfare or safety of others, or is against the law, the Program Director of the CHA/PA Program will take appropriate action if necessary. This action may include immediate suspension.
II. When a party has evidence that a student has violated the Student Honor and Conduct Code, he/she may meet with the student to discuss the issue. The reporting party may seek the counsel of a neutral person such as the Campus Ombudsperson. The party shall give the student the opportunity to self-report to the Chairperson. If the student refuses to self-report, the party shall report the suspicion to the Honor Council Chairperson, as soon as possible.

III. The Chair of the Committee will review the complaint to determine whether the conduct in question would constitute a violation of the Honor Code. If the Chair determines that the conduct, if proven true, could constitute a violation of the CHA/PA Student Honor and Conduct Code, then the matter would receive full review. If the Chairperson determines that, even if true, the alleged acts would not constitute a violation of the CHA/PA Honor Code, then there will be no further review.

IV. When an alleged violation is referred to the Student Honor and Conduct Committee, the Chairperson will notify the student(s) of the allegations and the date of the scheduled hearing, in writing, within ten (10) calendar days of the date of referral to the Student Honor and Conduct Committee.

V. The Student Honor and Conduct Committee will hold a hearing:
   a. The hearing will be held, if possible, within thirty (30) calendar days of the student being notified of the alleged Student Honor and Conduct Code violation.
      i. The student shall have the opportunity to submit a written pre-hearing statement in response to the allegations.
      ii. The student shall have the opportunity to review any evidence against him/her prior to the hearing upon submission of a written request to the Chairperson.
   b. The student accused of violating the Student Honor and Conduct Code will be given an opportunity to present any evidence or witness he/she wishes during the hearing. The reporting party may either attend the proceedings in person or submit a statement of the incident in lieu of personally attending the hearing. The Student Honor and Conduct Committee may request witnesses to appear at the hearing and/or provide statements to the Student Honor and Conduct Committee; however, the Student Honor and Conduct Committee shall have no power to compel any individual to testify.
   c. The student may have a representative of her/his choice present at the hearing for advice and/or support during the proceedings. This representative may not speak on behalf of the student.
   d. If the student accused of violating the Student Honor and Conduct Code has been notified, in writing, of the date of the hearing and does not attend, for any reason, the hearing process will proceed in his or her absence.

VI. The Student Honor and Conduct Committee shall keep an adequate record of the hearing. The standard of proof in order for an Honor Code violation shall be the preponderance of the evidence. This means that it is more likely than not that the accused student violated the Student Honor and Conduct Code. The individual asserting that an Honor and Conduct Code violation has occurred has the burden of proving by a preponderance of the evidence that a violation has occurred.

VII. Following the hearing, the Student Honor and Conduct Committee will deliberate outside the presence of the parties or witnesses. Upon a majority vote, the
Committee will make its decision. Decisions may include but are not limited to the following actions:

a. Take no action against the student based on a finding of no violation
b. Place the student on disciplinary probation for a specified period
c. Suspend the student's registration at the University of Colorado, including extended studies, for a specified period
d. Recommend dismissing the student permanently from the University of Colorado CHA/PA Program.
   i. Recommendations of dismissal will be forwarded to the Student Promotions Committee for review and to render a decision.

VIII. If the Student Honor and Conduct Committee is unable to reach a majority opinion on whether the student violated the Student Honor and Conduct Code and what, if any, discipline should occur, the Chairperson will act as the tiebreaker.

IX. The hearing will be recorded, and the Student Honor and Conduct Committee shall keep a record of all documents associated with the case, as well as the action taken. All documents associated with the hearing will be kept in a secure file within the office of the Honor Council Chair.

X. In all cases, the student will be notified by certified U.S. mail of the Committee's decision within five (5) calendar days of the hearing.

XI. If the student wishes to appeal the decision in the case, the appeal along with the rationale for the appeal shall be submitted in writing to the Dean or his/her designee within seven (7) calendar days of the date of the letter notifying the student of the actions of the CHA/PA Student Honor and Conduct Committee has been sent by certified U.S mail.

XII. The Dean or his/her designee will review the decision of the Committee and the student's appeal and notify the student of her/his decision within thirty (30) calendar days of receiving the student's notice of appeal.

XIII. The Dean or his/her designee will only reverse or modify the findings and decision of the CHA/PA Student Honor and Conduct Committee if he/she concludes by a preponderance of the evidence that one of the following situations exists:

   a. New information regarding the student's alleged violation of the Student Honor and Conduct Code which was previously unknown to the student or the Committee is discovered;
   b. There was an error in the process that prevented the student from presenting relevant information to the Student Honor and Conduct Committee that could have materially changed the Student Honor and Conduct Committee’s decision;
   c. There is evidence that the Student Honor and Conduct Committee acted in an arbitrary or capricious manner.

The decision of the Dean or his/her designee is final.

XIV. If the student is suspended, expelled, or otherwise unable to continue his or her academic studies either temporarily or permanently because of disciplinary or other action, the Chair of the Honor Council shall notify the CU DENVER Registrar of the
change in the student’s academic status and order the Registrar to suspend the student’s registration.

Honor Council proceedings will be kept confidential to the extent practical and allowed by law. Information may be shared with the Program Director and/or the Student Promotions Committee if the Honor Council Chair determines it may affect the student’s education, or the education or safety of other students in the program.

SECTION 6: STUDENT RIGHTS

6.1 Rights for Appeals
All appeals are academic proceedings of the School of Medicine. All appeals must be submitted in writing to the appropriate appeal officer and must be submitted within the designated period for the appeal. Students will have an opportunity to present evidence to support their appeal. The student may be asked to appear before the Student Promotions Committee, School of Medicine Associate Dean for Student Affairs, or the Dean as part of the appeals review process. If this occurs, the student will be permitted to bring an advocate, but the advocate may not speak on behalf of the student. Actions by the Dean regarding readmission are not subject to reconsideration or appeal.

6.1a Appeal of Student Promotion Committee Decision
A student may appeal any adverse action taken by the Student Promotions Committee. Any student subject to appealable action by the Student Promotions Committee may request a reconsideration of that action by submitting a written request to the School of Medicine Associate Dean for Student Affairs no later than ten (10) calendar days from the date of the written notice of the Student Promotions Committee’s decision. The written appeal must be addressed to the Associate Dean for Student Affairs and delivered to the Office of Student Affairs and include all supporting facts and arguments. The appeal must cite the basis for the appeal and provide sufficient and detailed information to support the appeal. New evidence may not be presented in the appeals process unless the student can prove that it was unavailable during the prior decision and only with the approval of the School of Medicine Associate Dean for Student Affairs.

Failure to meet these conditions shall be sufficient cause to deny an appeal, in which case the finding(s) or sanction(s) of the previous decision shall be final. The School of Medicine Associate Dean for Student Affairs, or designee, shall make the determination as to whether these conditions have been met. If the conditions have been met, the Office of Student Affairs will forward the appeal to the Dean of the School of Medicine, or designee.

During the appeals process, the Dean will not reconsider the facts and statements upon which the original decision was based but will consider only:

- Whether new information regarding the status of the student has been discovered, previously unknown to the student or to the School of Medicine.
- Whether there is an allegation of discrimination as determined by the appropriate Institutional Office. *(allegations of discrimination will be forwarded to the appropriate University office for investigation)*
- Whether there is evidence of a procedural error in the Student Promotions Committee’s review that prejudiced the student’s ability to receive a fair decision, or
Whether there is evidence that the Student Promotions Committee acted in an arbitrary or capricious manner.

The Dean, or designee, may affirm or reject the Student Promotions Committee’s decision or refer the matter back to the Student Promotions Committee for further consideration. The Dean’s decision is final.

6.1b Appeal of a Failing (F) Grade

Each course director has overall responsibility and authority for his/her course. Only the course director may assign a grade for the course.

A student may appeal a course grade only in the instance of a failing (F) grade. The appeal may be submitted in writing to the Student Promotions Committee within 10 calendar days of notification of a failing (F) grade. The appeal must be addressed to the Chair of the CHA/PA Student Promotions Committee and delivered to the CHA/PA main office. The appeal request should include all supporting facts and arguments and must cite the basis for the appeal. In addition, the appeal must provide sufficient and detailed information to support the appeal. If these conditions have been met, the Chair of the Student Promotions Committee will forward the appeal to the Student Promotions Committee.

During the appeals process the Student Promotions Committee will consider the following:

- Whether new information regarding the student academic progress has been discovered, previously unknown to the student or course director
- Whether there is an allegation of discrimination as determined by the appropriate Institution (allegations of discrimination will be forwarded to the appropriate University office for investigation)
- Whether there is evidence of a procedural error in the course directors’ assignment of the final grade, or
- Whether there is evidence that the course director acted in an arbitrary or capricious manner.

The Student Promotions Committee may affirm or reject the Course Director’s decision or refer the matter back to the Course Director for further consideration. The Student Promotions Committee’s decision is final.

6.2 Rights of Reaplication

A student who withdraws after establishment of an academic record may reapply to the CHA/PA Program through the Student Promotions Committee once during the two academic years subsequent to the withdrawal. Information on the reapplication process may be obtained from the Program Director. The individual also has the right to apply to this or any other physician assistant school through the usual application process immediately upon withdrawal.

A student who is dismissed may reapply to the CHA/PA Program or any other physician assistant program through the regular admissions process immediately upon dismissal.

The rights of reapplication in the case of a student who withdraws prior to establishment of a record are reviewed in “Requests for Withdrawal”.
6.3 Student Right to Review Academic File
Any enrolled student may review his/her entire academic file. Inquiries to review personal academic files should be directed to the Program Director.

SECTION 7: CLINICAL POLICIES

7.1 Immunization and Health Screening Requirements
Students are responsible for maintain current immunization status and are required to follow Center for Disease Control (CDC) guidelines. Immunization requirements must be completed prior to the beginning of the first clinical rotation in the fall of 1st year and must remain current to continue clinical rotations. Updated tuberculosis screening and influenza vaccination is required yearly by designated deadlines. Failure to provide updated documentation of immunization and screening requirements will result in the cancelation of clinical rotations.

The cost of vaccines, yearly tuberculosis screening, or other requirements is the responsibility of the student and/or the student’s own health insurance. Students are advised to have insurance with adequate coverage for such expenses.

Additional immunizations may be required of those students planning to travel outside of the US for clinical experiences (see Appendix V)

7.1a University of Colorado Influenza Vaccination Policy

Policy Statement:
To protect students, patients, and employees from acquiring seasonal influenza disease and to help prevent the spread of influenza among patients, families, and the campus community, the University of Colorado School of Medicine requires that all students be vaccinated yearly for influenza. This policy applies to all currently enrolled students in the MD, PT, and PA programs.

Rationale:
In accordance with the University of Colorado Denver Administrative Policy, UC Denver Student Immunization Requirements and Compliance Policy, the School of Medicine may require yearly influenza vaccinations for all students. The CDC recommends yearly influenza vaccination as the first and most important step in protecting against flu viruses. All Health Care Workers and students in the health care professions should receive yearly vaccinations due to their exposure to those at high risk for complications from flu. Additionally, many of the University’s affiliated institutions and clinical sites are requiring documentation of annual vaccination of all Health Care Workers and students in their institutions.

Live attenuated influenza vaccine (LAIV) may only be given to non-pregnant healthy persons age 49 years and younger. Inactivated injectable influenza vaccine (TIV) may be administered to those for whom LAIV is contraindicated. TIV is preferred over LAIV for those who are in close contact with severely immunosuppressed persons when patients require protective isolation.

Procedure:
Students are required to provide proof of yearly influenza vaccination by October 1 to the designated individual within each program. If a clinical site requires influenza vaccination
documentation earlier than the designated deadline, students must comply with the earlier deadline requirement set by the clinical site.

Students will be responsible for obtaining the vaccine and the costs associated with receiving the vaccine.

Noncompliance with this policy may result in withdrawal or withholding of a student from clinical rotation(s), which may limit the student’s ability to graduate on time.

**Exemptions:**
Requests for exemptions may be granted under certain circumstances. **Students not receiving vaccination due to an approved exemption must still comply with any vaccination policy of each clinical site.**

Medical: A severe life-threatening allergy to eggs or other components of influenza vaccine is a contraindication for flu vaccination. Documentation from student’s primary health care provider is required.

Medical: A history of Guillain-Barre Syndrome within six weeks following a previous dose of influenza vaccine is considered a precaution. Documentation from student’s primary health care provider is required.

Religious: Exemptions for religious belief will be evaluated on a case-by-case basis. A written request and explanation are required.

### 7.2 TB Clearance

Per University of Colorado policies and procedures in addition to clinical site requirements, students are required to have their TB status checked yearly. Information on TB clearance can be found on the CHA/PA Clinical Website.

### 7.3 Infectious Diseases, Body Fluid and Needle-Stick Exposures

University of Colorado has adopted policies and procedures for dealing with exposure to infectious diseases including, but not limited to, HIV, hepatitis and tuberculosis. Students in the CHA/PA Program are required to adhere to these guidelines. Students should see immediate medical attention in the Emergency Room of the hospital where the work related incident occurs or through recommendations listed on the CHA/PA Clinical Website. Students must contact University Risk Management as well as the CHA/PA Program immediately after care is initiated.

University of Colorado has adopted policies and procedures for dealing with exposures. Students can find these policies and algorithms for treatment on the CHA/PA Clinical Website located at: [http://medschool.ucdenver.edu/paprogram](http://medschool.ucdenver.edu/paprogram).

Students in the CHA/PA Program are required to adhere to these guidelines.
OSHA Training is completed yearly through the University of Colorado Human Resources Website (SkillPort).

### 7.4 Drug Screens

The CHA/PA Program takes patient safety very seriously. Therefore, all students must submit to a 5-panel drug screen prior to starting the clinical experiences portion of their Program. A negative drug screen is required for participation in any clinical experience. This policy applies to all enrolled students in the MD, PT and PA degree programs.

A repeat 9-panel drug screen prior to entering the 3rd Year of the CHA/PA program is part of this requirement. Additional drug screen requirements for clinical rotations beyond the two described above, may be required prior to beginning a clinical rotation. Cost associated with additional drug screens is the responsibility of the student.

#### 7.4a University of Colorado School of Medicine Drug Screening Policy

**Policy Statement:**

The University of Colorado School of Medicine requires that all students submit to a drug screen prior to starting the clinical experiences portion of their Program in year 1, and a more comprehensive drug-screen prior to beginning year 3. A negative drug screen is required for participation in any clinical experience. This policy applies to all enrolled students in the MD, PT, and PA degree Programs.

**Rationale:**

All health care providers are entrusted with the health, safety and welfare of patients, have access to controlled substances and confidential information and operate in settings that require the exercise of good judgment and ethical behavior. Thus, an assessment of a student’s possible impairment that could diminish the student’s capacity to function in such a setting is imperative to promote the highest level of integrity in patient care.

Clinical facilities that serve as educational and training sites for students increasingly require drug screening for individuals who provide services within the facility and particularly for those individuals who provide patient care. Clinical rotations are an essential element of all curricula and are required of School of Medicine Students in the MD, PT, and PA degree programs. In addition, many licensing agencies require that individuals pass a drug screen as a condition of licensure and/or employment. It is thus in the interest of both students and the School of Medicine to identify and resolve potential issues where a student may not be allowed to participate in a clinical rotation due to the use of controlled or illegal substances.

The University of Colorado School of Medicine has the responsibility to attend to factors that may adversely affect the security of the clinical environment and thus increase liability exposure. As a result, the school seeks to enhance its scrutiny of the students involved in patient care activities and who are in clinical settings.

**Drug Screening Process:**

Students enrolled in the MD, PT, and PA Programs will receive information about the requirement for drug screening, deadlines for compliance, results reporting and associated fees from their respective educational program representatives. Students will be responsible for the
cost of the required drug screenings, either individually or through a student fee as determined by each program.

Students will receive specific instructions from their program representatives regarding the location of the designated vendor drug screen sites and Drug Screen Authorization document to submit to the vendor including authorization for results to be released to the designated individual in their educational program.

Results of the student drug screens will be reported electronically to the designated individual in the appropriate educational program, typically within two business days. The Medical Director of the designated vendor will conduct a review of the drug screen results to determine a passing or failing level. The information will be conveyed to the designated individual within the educational program. Students who receive a positive screen will be reviewed by the individual program. The individual program will review students who receive a positive screen either by a designated individual or a committee and any consequences will be communicated to the student in writing.

The student has the right to review the information reported by the designated vendor for accuracy and completeness and to request that the designated vendor verify that the drug screen results are correct. Prior to making a final determination, that may adversely affect the student, the Program will inform the student of his/her rights, how to contact the designated vendor to challenge the accuracy of the report, and the role of the designated vendor in any decisions made by the Program.

Drug screening results will be recorded in an internal database within each educational program and maintained only for the duration of study for each student.

Drug screen results may be reported to clinical rotation sites for clinical placements in compliance with contractual agreements.

If required by specific clinical site, a student may be required to submit to additional drug screening based on the contractual agreements with those clinical sites.

Any individual student may be required at any time to submit to immediate drug screening for cause. This may occur through the designated vendor or it is possible that a contract with a specific clinical training site may have specific requirements dictating the process, handling, and reporting of “for cause” drug screening of an individual student while the student is participating in a clinical rotation there.

Students who refuse to submit to any required drug screen will be dismissed from their program.

**Positive Drug Screening Results:**

Students who do not pass a required drug screen may face disciplinary action, including administrative withdrawal from courses, placement on a leave of absence, or dismissal from the Program. Students may be referred for evaluation and treatment through the Colorado Physicians Health Program (CPHP) or another designated program as a condition for remaining in the Program. Costs incurred are the responsibility of the student.
Students found to have a substance abuse problem that will likely pose a danger to patient care, as determined through the drug screening evaluation process, will be referred for independent evaluation and treatment at the student’s expense.

**Additional Policy/Procedure Information**

The School of Medicine takes patient safety very seriously. The Technical Standards for students require that all students be able to meet the physical and cognitive demands of the clinical setting as well as exhibit sound judgment at all times. Students who are seriously ill, injured or taking medications that impairs judgment (including but not limited to, lawfully prescribed medications and Medical Marijuana) may not be able to meet the Technical Standards, and therefore may not be suitable for the clinical environment where patient safety is the topmost concern. A determination of any conditions on a student’s ability to participate in clinical experiences or to otherwise proceed in the Program will be handled through a committee as determined by each program (MD, PT and PA).

Additionally, the School of Medicine is very concerned about alcohol and drug abuse. A student may be required to undergo evaluation and treatment through the Colorado Physicians Health Program (CPHP) or by another designated evaluation source in order to remain in the Program.

7.5 **TB Mask Fitting**

TB mask fitting for clinical experiences occurs in the fall of the 1st Year and the fall of the 2nd Year. This expense is included in the student fees.

7.6 **Definition of the Preceptor-Student Relationship**

The preceptor is an integral part of the teaching program. Preceptors will serve as role models for the student and, through guidance and teaching will help students’ perfect skills in history taking, physical examination, effective communication, physical diagnosis, succinct recording and reporting, problem assessment, and plan development including a logical approach to further studies and therapy.

The preceptor should maintain a professional relationship with the PA student and at all times adhere to appropriate professional boundaries. Social activities and personal relationships outside of the professional learning environment should be appropriate and carefully selected so as not to put the student or preceptor in a compromising situation. Contact through web-based social networking sites (e.g., Facebook, Twitter) should be avoided until the student fully matriculates through the educational program. If the preceptor and student have an existing personal relationship prior to the start of the rotation, a professional relationship must be maintained at all times in the clinical setting.

Healthcare providers who provide health services, including psychiatric/psychological counseling, to a PA student or his/her close family members have the potential to be in a conflict-of-interest situation. To that note, clinical educators are not allowed to complete an assessment for any students for whom they provide or have provided medical care to. They are also not allowed to assess students for whom they provide or have provided medical care to close family members. While the student may still rotate in a setting with a preceptor with a conflict of interest, the named preceptor for the rotation and the preceptor who completes the ORIME assessment must not have a conflict of interest. Students are
required to notify the Clinical Course Director of any potential conflict of interest situations to determine whether an alternative clinical site or clinical educator is warranted.

SECTION 8: OTHER POLICIES

8.1 University of Colorado Policy on Conflict of Interest between Health Care Professional Students and Industry Representatives.
The University of Colorado has created a policy regarding conflict of interest between health care professional students and industry representatives. Students must review the CHA/PA Clinical Website to become educated on this policy while out on clinical rotations.

8.2 Site Visits
A representative of the Program may be visiting the rotation site during the time a student is there. The purpose of a site visit is to monitor learning, assure that the rotation is appropriate for CHA/PA students, and identify areas for improvement. The site visit is intended to assess the learning environment, not to evaluate the student’s knowledge. Students are encouraged to discuss any concerns they have about a site with the Clinical Team immediately.

8.3 Additional Clinical Experience Costs
All expenses related to clinical experiences are the responsibility of the student (e.g., parking, use of scrubs, additional background checks, drug screens, rotation applications). These expenses should be anticipated and budgeted for prior to the beginning of the scheduled clinical experience.

8.3a Fingerprints
If required to have fingerprints for specific clinical experiences, the student must pay the additional fee for the AMC police to provide this service. Specific fingerprint cards are available from the Clinical Services Coordinator.

8.4 Participating in Community Service and Health Fairs
Outside of clinical rotations, the Program does not sanction or support students providing medical care or health screenings as health care providers. Students must be supervised in a clinical setting and are only covered by malpractice insurance and Workers’ Compensation when in Program-Assigned clinical experience or testing.

If the volunteer service is a part of the clinical experience and the student will be actively supervised, this should be discussed with the Clinical Course Director.

8.5 CHA/PA Program Convocation & University of Colorado Anschutz Medical Campus Commencement

8.5a CHA/PA Program Graduation
The CHA/PA Program Convocation occurs each year just prior to the official Memorial Day holiday. Attendance at this ceremony and taking the CHA/PA Oath are required of all Program
graduates. Petitions to be excused from the ceremony must be submitted in writing to the Student Promotions Committee and will be considered on an individual basis for extenuating circumstances only. The requirement to take the CHA/PA Oath will not be waived. Class members whose Program completion is delayed for any reason are invited to participate in the Convocation.

Students on extended program may be allowed to participate in the May Convocation. In the event participation is granted by the Student Promotions Committee, the student will not receive a diploma until all program requirements are successfully completed, and the student has graduated.

8.5b University of Colorado Anschutz Medical Campus Commencement
The University of Colorado Anschutz Medical Campus Commencement occurs the Friday prior to the Memorial Day weekend. This ceremony is highly encouraged, but not required. This is the official graduation date for the PANCE application.

8.5c Expenses related to Graduation
Students are responsible for expenses related to graduation including the purchase of the sitting fee for class composite photo and academic regalia (cap and gown).

8.6 Visitors and Guests

8.6a Non-CHA/PA Students
Only enrolled physician assistant students may participate in the required courses. In some courses, University of Colorado CHA/PA students and students from other professional schools are enrolled through a joint arrangement made by Course Directors and the CHA/PA Program.

8.6b Friends and Family
If a student has a friend or family member, who wishes to visit a particular lecture or small group, that student must have the Course Director’s permission before the visitor attends. In general, visiting is not encouraged.

8.7 Preparation for Certification
The Program will forward the student’s name and verification of the anticipated date of Program completion to National Commission on Certification of Physician Assistants (NCCPA). The student’s graduation date is used to determine their eligibility to sit for the Physician Assistant National Certifying Examination (PANCE). NCCPA will then send the student an application form, which they will need to complete and return to NCCPA.

Students are not permitted to take this exam until they have graduated. The earliest the student may take this exam is 7 days after their graduation date. The official graduation date is the Friday before Memorial Day.

All transactions with NCCPA are strictly the responsibility of the student. The student will need to authorize NCCPA to forward their numerical scores to the Colorado Board of Medical Examiners or the
State in which they plan to practice for their license. See [www.nccpa.net](http://www.nccpa.net) for more information and FAQs.

### 8.8 Preparation for Licensure

#### 8.8a Colorado Licensure

All transactions with the Colorado Board of Medical Examiners are strictly the student’s responsibility – not the Program’s responsibility. The Program will inform the Colorado Board of Medical Examiners (BME) of who has graduated and provide the required form(s) and a copy of the student’s diploma. Graduates will need to forward their Board scores and official transcripts directly to the Colorado BME for the application to be complete. See [www.dora.state.co.us/Medical/](http://www.dora.state.co.us/Medical/) for more information.

#### 8.8b Other State Licensure

For applications for licensure outside the state of Colorado, the student must provide the Didactic Services Coordinator with the required paperwork. See [www.aapa.org](http://www.aapa.org) for information related to licensure in other states.

### 8.9 CHA/PA Program Reference Request

Requests for a Program reference must be submitted in writing to the Program Director. Information about the student is obtained from the student’s official academic file (e.g. course evaluations, letters from preceptors, official correspondence, etc....) The CHA/PA letter is an historical summary and an evaluation of a graduate’s overall potential capability as an employee. It is used in response to letters requesting a reference. Students must supply written permission to release these letters.

The CHA/PA Program Reference Letter or Requests will include:

- The date of graduation;
- An assessment of performance during the didactic and clinical years;
- Selected quotations from clinical rotation evaluations (all preceptors are quoted directly);
- An overall evaluation of the student’s potential based on the preceding data.

### 8.10 CHA/PA Program Credentialing and Privileges Request

Requests for credentialing and privileges following graduation should be directed to the CHA/PA Program office. Requests will be provided within 10 business days.

Any requests requiring previous malpractice insurance information should be directed to Professional Risk Management. Please allow 30 days for a completed form.
APPENDIX I: Technical Standards

School of Medicine CHA/PA Program Technical Standards for Admissions, Promotion and Graduation

SECTION 1: Introduction

The University of Colorado Child Health Associate/Physician Assistant Program is a rigorous, three-year curriculum where students acquire the general knowledge, skills, attitudes and behaviors required for the practice of medicine, regardless of specialty. The CHA/PA Program considers it essential for all physician assistant graduates to have the ability to function in a variety of clinical situations and to provide a wide spectrum of patient care. Candidates for the degree of Master of Physician Assistant Studies must be able to independently demonstrate the capabilities to meet these minimum standards, with or without reasonable accommodation, for successful completion of degree requirements. As such, the following technical standards have been adopted for admission, promotion and graduation from the Program.

1.1 Standards

1.1a Observation
Observation includes the ability to perceive, using senses and mental abilities, the presentation of information through lectures, small groups and one-to-one interactions, demonstrations and experiments, and written and audiovisual materials. Observation necessitates the functional use of vision, hearing and somatic senses. A student must be able to directly observe a patient’s medical condition through history, physical examination, and interpretation of diagnostic studies. Examples of perceptual abilities include but are not limited to gross and microscopic studies of organisms, cadaver dissections, and various diagnostic tests such as interpretation of echocardiograms, digital and wavelength readings and graphic or radiographic images.

1.1b Communication
A student must be able to communicate effectively with patients, teachers and all members of the health care team. These communication skills require the ability to process all information, including recognition of the significance of non-verbal communications, mood, activity, and posture, with immediate assessment of information provided to allow for appropriate, well-focused follow-up inquiry. The student must be able to process and communicate information regarding the patient’s status accurately and in a timely manner to the physician supervisors and other members of the health care team as well as through appropriate and accurate documentation. Communication includes speech, hearing, reading, writing and computer literacy skills.

1.1c Motor
A student must have sufficient motor function to elicit information from patients by palpation, auscultation, percussion and other diagnostic maneuvers as well as to perform technical procedures involved in the practice of medicine and surgery. A student must possess sufficient motor skills to perform laboratory tests such as slide preparation and use of a glucometer. A student must be able to execute motor movements reasonably required to provide routine and emergency care to patients. Examples reasonably required of physician assistants are cardiopulmonary resuscitation, venipuncture, arterial blood draws, application of pressure to
stop bleeding, suturing, insertion of nasogastric tubes and urinary catheters, pelvic and rectal examinations, obstetrical maneuvers and opening of obstructed airways.

1.1d **Intellectual, conceptual, integrative and quantitative abilities**
A student must be able to solve problems involving measurement, calculation, analyzing, synthesizing and recalling materials, rapid problem-solving and rational thought. He/she must be able to synthesize knowledge and integrate the relevant aspects of a patient’s history, physical findings, and diagnostic studies. Students must be able to use this information to develop a diagnosis and to monitor treatment plans and modalities. In addition, a student must be able to comprehend three-dimensional relationships and to understand the spatial relationships of structures (e.g. macroscopic and microscopic structures). Overall, the student must be able to demonstrate independent decision-making skills.

1.1e **Behavior and social attributes**
A student must demonstrate full utilization of his/her intellectual abilities, the exercise of good judgment and the prompt completion of all responsibilities attendant to the diagnosis and care of patients. He/she must have the capacity for the development of mature, sensitive and effective relationships with patients. The student must be capable of responsive, empathic listening to establish rapport in a way that promotes openness on issues of concern and sensitivity to potential cultural differences. Additionally, a student must have an understanding of their own belief systems as well as others and maintain professional and caring behaviors in health care environments where beliefs or practices may be in conflict with his/her own. As a component of medical education, a student must be able to understand the basis and content of medical ethics and demonstrate ethical behavior. A student must be able to tolerate physically- and mentally-taxing workloads and function effectively under stress. A student must be able to adapt to a changing environment and display flexibility.

2.1 **Reasonable Accommodation**
It is the policy of the CU School of Medicine to provide reasonable accommodation to qualified students with a disability so they can meet these required technical standards. Whether or not a requested accommodation is reasonable will be determined on an individual basis through the Office of Disability Resources and Services.
Appendix II: University of Colorado Anschutz Medical Campus Student Services/Student Advocacy

SECTION 1: CHA/PA STUDENT SERVICES

1.1 Student Advisors

All students are assigned a core faculty member as their academic advisor. Advisors are available as a resource for the students in the achievement of academic and professional goals throughout the Program.

SECTION 2: AMC CAMPUS STUDENT SERVICES

2.1 Office of Disability Resources and Services (DRS)

CONTACT INFORMATION: (303) 724-5640

The Disability Resources and Services Office is the designated office that maintains disability-related records, determines eligibility for academic accommodation, determines reasonable accommodations and develops plans for the provision of such accommodations for students attending the University.

The staff encourages academically qualified students with disabilities to utilize all the appropriate accommodations. It is the policy of our institution of higher education not to discriminate against persons with disabilities in admissions policies and procedures or educational programs, services and activities.

2.2 Office of Discrimination and Harassment – Title IX

CONTACT INFORMATION: 1-844-CU-Title (288-4853)

The University of Colorado does not discriminate based on sex, gender or sexual orientation in its education programs or activities. Title IX of the Education Amendments of 1972, and certain other Federal and state laws, prohibit discrimination based on sex in all education programs and activities operated by the University (both on and off campus). Title IX protects all people regardless of their gender or gender identity from sex discrimination, which includes sexual harassment and sexual assault.

Title IX requires the University to designate a Title IX Coordinator to monitor and oversee overall Title IX compliance. The campus Title IX Coordinator is available to explain and discuss the student’s right to file a criminal complaint; the University’s complaint process, including the investigation process; how confidentiality is handled; available resources, both on and off campus; and other related matters.

Students may report allegations of discrimination or harassment to the Title IX Coordinator. Reports are confidential. Investigation reports may be forwarded to the Student Promotions Committee to determine if other action needs to be taken.

Campus Title IX Coordinator:
Nelia Viveiros, Title IX Coordinator
Notice of Nondiscrimination

The University of Colorado Denver | Anschutz Medical Campus does not discriminate on the basis of race, color, national origin, sex, pregnancy, age, disability, creed, religion, sexual orientation, gender identity, gender expression, veteran status, political affiliation or political philosophy in admission and access to, and treatment and employment in, its educational programs and activities. The University takes affirmative action to increase ethnic, cultural, and gender diversity; to employ qualified disabled individuals; and to provide equal opportunity to all students and employees.

2.3 Office of Diversity and Inclusion

CONTACT INFORMATION: (303) 724-8003

The mission of the Office of Diversity and Inclusion is to instill diversity into the institutional consciousness, reinforcing equity and inclusion through policies, practices and programs that prepare all faculty, students and staff for a multicultural world through the following values:

- Taking a holistic approach to student engagement
- Fostering a welcoming and inclusive environment for students, faculty, staff, administration and members of the community beyond the campus.
- Celebrating diversity
- Instilling a sense of belonging and empowerment
- Guiding mentorship and leadership by providing opportunities through networking and community involvement
- Continuing in cultural and social programming
- Promoting excellence and innovation
- Protecting an environment of equity, integrity, openness, mutual respect and trust

2.4 Office of Professionalism

CONTACT INFORMATION: (303) 724.4PRO (4776)
Professionalism@ucdenver.edu

The Office of Professionalism provides a resource to obtain a fair and equitable process and resolution for all matters pertaining to professionalism concerns or student mistreatment. Students may report allegations of unprofessionalism to this office via online reporting or email. Reports are confidential.

Barry H. Rumack, MD – Director, Office of Professionalism
Josette G. Harris, PhD – Associate Director, Office of Professionalism
2.5 Ombuds Office

CONTACT INFORMATION: (303) 724-2950
Melissa.Connell@ucdenver.edu or Lisa.Neale@ucdenver.edu.

The Ombudsperson is available to students, faculty and staff to help resolve problems or conflicts in an informal, confidential manner. This office operates outside the usual review or appeal process and is entirely independent of any other department. The Ombudsperson is impartial and will not take sides, but will help clarify issues and direct visitors to the appropriate resources.

- The Ombudsperson will listen, help to analyze the situation, identify and explain relevant university policies or procedures and will help to explore options with the visitor. Mediation services are also available. Because the Ombuds office is not involved in any formal procedures, it does not accept notice of any type on behalf of the University of Colorado Denver.
- Conversations with the Ombudsperson are confidential and the identity of any individual seeking the help of the Ombudsperson will not be revealed. Please note, however, that confidentiality will not be maintained if the person has either expressly authorized contact with other individuals or the situation involves imminent threat of harm or danger.
- Two Ombuds Offices service the University of Colorado Denver community:
  - For those on the Anschutz Medical Center Campus the Ombuds may be reached at 303.724.2950. The office is located in room 7005C in Building 500.
  - The Downtown Campus provides an Ombuds Office in the CU Denver Building in room 107P. The Ombuds may be contacted at 303.556.4493.
- Walk-ins are welcomed at either location; however, please note that the door may be locked to ensure the confidentiality of a visitor. For more information, please access the Ombuds website.

2.6 Student Mental Health Services

CONTACT INFORMATION: (303) 724-4716

The Student Mental Health Service provides comprehensive and confidential mental health services for all enrolled Anschutz Medical Campus students. Psychiatric issues treated include depression, anxiety/stress, bipolar disorder, drug and alcohol dependence, eating disorders, marital difficulties, family crisis and post-traumatic stress disorder. Treatment modalities include individual psychotherapy, couples counseling and/or medication.

- Waiting time is minimal
- Enrolled students are usually seen within 2-3 days
- Same-day emergency appointments are usually available.
- Initial consultation is always free
- Students can choose either on-going treatment with professionals on the Anschutz Campus or private practitioners in the local community
- CU Denver student insurance covers at least 20 visits/year (unlimited visits for certain diagnoses)
- No co-pay or co-insurance for students
- Students with other insurance are referred to an appropriate provider in the community.
SECTION 3: STUDENT ADVOCACY

3.1 School of Medicine Advocacy Office

CONTACT INFORMATION: (303) 724-8036

The Student Advocacy Office exists to facilitate the medical education, personal and career development of every student within the School of Medicine. The first area of expertise of the Advocacy Office is general counseling. The Associate Dean for Student Advocacy, is available to give completely confidential “off the record” advice regarding course work, specialty training and/or personal problems. In addition, they can recommend a wide variety of highly experienced and interested individuals to provide general and specific advice regarding professional goals, participation in research, tutoring, personal matters, and student wellness.

The Advocacy Office also coordinates many programs that can provide general or specialized mentoring possibilities. If students have any questions on matters not discussed above, the office is happy to help find the correct resources for students.

The Associate Dean for Student Advocacy will provide advocacy for students at meetings of the Promotions Committee or Honor Council. If the student faces academic or other difficulties, the School of Medicine Advocacy Office will always be available to advise students and help them present his/her point of view and proposed solutions in whatever forum he/she wishes.

SECTION 4: OTHER STUDENT SERVICES

4.1 COLORADO PHYSICIAN HEALTH PROGRAM (CPHP)

CONTACT INFORMATION: (303) 860-0122; 899 Logan Street, Suite 410, Denver, CO

The Colorado Physician Health Program (CPHP) is a nonprofit organization, independent of other medical organizations and the government. CPHP provides the peer assistance services for licensed physicians and physician assistants of Colorado. CPHP also has training program contracts to serve Resident, Medical Students and Physician Assistant Students.

CPHP clients have assured confidentiality as required by law or regulation. Peer assistance services aid individuals who have any problems that would affect ones’ health such as emotional, psychological or medical problems. For example, CPHP assists its clients with medical and/or psychiatric conditions (e.g. Alzheimer’s disease, HIV infection, depression or substance abuse) as well as psychosocial conditions (e.g. family problems or stress related to work or professional liability difficulties). CPHP provides diagnostic evaluation, treatment referral, as well as treatment monitoring and support services. CPHP believes that early intervention and evaluation offer the best opportunity for a successful outcome and preventing the health condition from needlessly interfering with medical practice.
## Appendix III: ORIME Clinical Assessment Explanation

<table>
<thead>
<tr>
<th>Professional Role</th>
<th>Level of Student</th>
<th>Description of Role</th>
</tr>
</thead>
</table>
| O – “Observer”    | • Most 1st Year CHA/PA Students  
                   | • 2nd Year CHA/PA Students in surgical or specialty practice | • The learner is not participating in direct patient care; rather they are observing the preceptor in most aspects of healthcare delivery. |
| R – “Reporter”    | • Some 1st Year CHA/PA Students by the end of their first year (May)  
                   | • All 2nd Year CHA/PA Students | • The learner can accurately gather and clearly communicate facts to the preceptor.  
                                  |                                 | • Mastery of performing a history and physical exam.  
                                  |                                 | • Can recognize normal and abnormal findings.  
                                  |                                 | • Confidence to label a new problem  
                                  |                                 | • Answers the “what” questions as they relate to patient care. |
| I – “Interpreter” | • Advanced 2nd Year CHA/PA Students for common problems  
                   | • All 3rd Year CHA/PA Students – Early in the 3rd Year | • The learner begins to prioritize identified problems.  
                                  |                                 | • Development of differential diagnosis.  
                                  |                                 | • Using clinical findings and diagnostic studies to help support a diagnosis.  
                                  |                                 | • Answer the “why” questions as they related to patient care. |
| M – “Manager”     | • All 3rd Year CHA/PA Students – Late in the 3rd Year | • The learner should be able to provide at least 3 reasonable options in their diagnostic and therapeutic plans.  
                                  |                                 | • Answers the “how” questions for getting things done. |
| E – “Educator”    | • Highly advanced 3rd Year CHA/PA - Students at the end of their training | • The learner will define important questions to study and differentiate current evidence.  
                                  |                                 | • Shares leadership within a team.  
                                  |                                 | • Learns from one’s own experience to become an educator. |
### Appendix IV: Professional Development Evaluation Form

**Professional Development Evaluation Form**  
**Child Health Associate/Physician Assistant Program**

<table>
<thead>
<tr>
<th>Student:</th>
<th>Date</th>
<th>Sem./Yr:</th>
</tr>
</thead>
</table>

#### ALTRUISM

1. **General Behavior**

<table>
<thead>
<tr>
<th>Meets Expectation</th>
<th>Needs Improvement</th>
<th>Unable to evaluate</th>
</tr>
</thead>
</table>

**Expected Behavior:** Concerned first with the best interests of others

#### ACCOUNTABILITY

2. **Appropriate Work Ethic**

<table>
<thead>
<tr>
<th>Meets Expectation</th>
<th>Needs Improvement</th>
<th>Unable to evaluate</th>
</tr>
</thead>
</table>

**Expected Behavior:** Meets commitment for all assigned tasks at an appropriate level

3. **Responsivity to Correction**

<table>
<thead>
<tr>
<th>Meets Expectation</th>
<th>Needs Improvement</th>
<th>Unable to evaluate</th>
</tr>
</thead>
</table>

**Expected Behavior:** Accepts responsibility for errors or failure and makes corrective changes when appropriate

#### EXCELLENCE

4. **Initiative/Independence**

<table>
<thead>
<tr>
<th>Meets Expectation</th>
<th>Needs Improvement</th>
<th>Unable to evaluate</th>
</tr>
</thead>
</table>

**Expected Behavior:** Takes initiative and attempts to solve problems independently before seeking additional assistance

5. **Understanding Limitations**

<table>
<thead>
<tr>
<th>Meets Expectation</th>
<th>Needs Improvement</th>
<th>Unable to evaluate</th>
</tr>
</thead>
</table>

**Expected Behavior:** Understands own limitations and seeks help appropriately

#### DUTY

6. **Attitude/Enthusiasm**

<table>
<thead>
<tr>
<th>Meets Expectation</th>
<th>Needs Improvement</th>
<th>Unable to evaluate</th>
</tr>
</thead>
</table>

**Expected Behavior:** Embraces work with a positive attitude

7. **Attendance/Promptness**

<table>
<thead>
<tr>
<th>Meets Expectation</th>
<th>Needs Improvement</th>
<th>Unable to evaluate</th>
</tr>
</thead>
</table>

**Expected Behavior:** Freely accepts the commitment to attend and be prompt
### HONOR/INTEGRITY

8. Professional Behavior  
| Meets Expectation | Needs Improvement | Unable to evaluate |

*Expected Behavior:* Fair, truthful and straightforward in all dealings

---

### RESPECT FOR OTHERS

9. Individual Professional Demeanor  
| Meets Expectation | Needs Improvement | Unable to evaluate |

*Expected Behavior:* Demonstrates respect and sensitivity for others

---

10. Appropriate Classroom/Group Behavior  
| Meets Expectation | Needs Improvement | Unable to evaluate |

*Expected Behavior:* Demonstrates appropriate classroom behavior and enhances the collegial atmosphere

---

**Comments:**

---

**Signature:**  
**Date:**

The above signature acknowledges my receipt of the CHA/PA professional development evaluation form.

*Adapted from “Project Professionalism”, American Board of Internal Medicine, 1996.*
Appendix V: Student Immunization for International University Travel Policy

ADMINISTRATIVE POLICY STATEMENT

Policy Title: Student Immunization for International University Travel

Brief Description: The policy outlines the CHA/PA program statement regarding immunization prior to University-sanctioned experiences internationally.

Effective: January 6, 2014
Approved by: Jonathan Bowser
Last Reviewed/Updated: February 5, 2017
Applies to: CHA/PA Faculty & Students

Reason for Policy: The CHA/PA program has determined that students who travel internationally for clinical and other learning experiences require immunization for vaccine-preventable diseases in order to protect their health. This determination and the following policy are in accordance with ARC-PA Standard 4th edition A3.07

I. POLICY:

All CHA/PA students who will travel internationally on clinical and/or other learning experiences that have been approved by the university and/or CHAPA program shall be required to provide proof of vaccination to the program at least 2 weeks prior to beginning their experience. The vaccinations required for the specific country or region in which the student will travel, will be determined by International Course Director or his/her designee, according to the current recommendations posted on the CDC website under the section Traveler’s Health, For Clinicians (www.cdc.gov)

The CHA/PA program will not mandate malaria prophylaxis for students traveling to malaria-endemic regions, however the program highly recommends that students follow the CDC recommendations and those of their health care providers regarding malaria prophylaxis.
Appendix VI: Official Leave of Absence Request Form

Steps to complete:

1) If requesting a Leave of Absence, complete all information on page 1 of this document.
2) Submit the request for review by the Student Promotions Committee. The form may be submitted via your faculty advisor.
3) If the request is approved, the student must garner signatures from the interdepartmental offices listed on page 2. This process is to ensure that both you and the appropriate institutional representatives understand and have discussed potential consequences of this leave.
4) Complete the student signature area and return the form to the Program Director.
5) Refer to the Academic Policies and Procedures - for a review of the Official Non-Medical and Medical Leave of Absence Policy.

Student Last Name, First M.I Student ID Date

____________________________________________________________________________________

Forwarding Address/Phone/Email

Current MPAS Status: Year 1 ☐ Year 2 ☐ Year 3 ☐ Class of: 20____

Term/s LOA Requested: Summer ☐ Fall ☐ Spring ☐ 20____

Student is responsible for informing the Program, in writing, regarding intentions, within ten (10) days from the end of the term of the LOA. Student will automatically be withdrawn from the Program if the student does not communicate with the Program within this time period.

If you will be attending another school, which institution? ______________________________________________

When do you intend to return to the PA Program? Summer ☐ Fall ☐ Spring ☐ 20____

Leave of Absence Information and Criteria

• Leaves are granted for a maximum of 1 year.
• Reason for Leave of Absence: Non-Medical* ☐ Medical** ☐
• Attach a written statement containing an explanation for requesting an Official Leave of Absence.

*If requesting an Official Non-Medical LOA, please indicate the reason (circle one):
Research Educational Family Responsibilities Military Other

** If requesting an Official Medical LOA, include evidence from a licensed practitioner (MD/DO/PA/NP/mental health provider) that he/she is receiving care. The Promotions Committee may request an independent evaluation.

Have you been on a LOA during any other terms? Yes ☐ No ☐
If yes, please indicate term and year: Summer ☐ Fall ☐ Spring ☐ 20____

Are you registered for any class/es during the semester/s you are requesting a LOA? Yes ☐ No ☐
Interdepartmental Signatures

Financial Aid Coordinator (Please have Financial Aid sign off **FIRST**)  Date

Bursar’s Office  Date

Student Insurance  Date

Student Signature

I understand that if I am registered for classes, it is my responsibility to officially drop these classes by completing a drop/add form* and return it to the CHA/PA Program Director. I understand if I request a LOA after the designated drop/add period, I am responsible for full payment of tuition. Upon completion of this form, it is my responsibility to submit it to the Program Director for school records.

Student Signature  Date

Signature indicates an understanding of the contents of this document. Please make and retain a copy of the signed sheet for your records.

*Drop/add forms may be obtained from the Didactic Services Coordinator of the CHA/PA Program

For Program use only:

Date request reviewed: _____________________

Student Academic Standing:  “in good standing”  □  “not in good standing”  □

Request Status:  Approved  □  Attendance to resume no later than: _____________________  Date

Not Approved  □  *if not approved, please attach explanation

Signature: ____________________________________________  Date ______________

Student Promotions Committee Chair, or designee
APPENDIX VII: CHA/PA Program Directory

SECTION 1: CHA/PA PROGRAM CONTACT INFORMATION

Mailing Address:
CHA/PA Program, F543
13001 E. 17th Place, Room E7019
Aurora, CO  80045

Main Phone Number:       Fax Number:
(303) 724-7963                 (303) 724-1350

Program Office Hours:
8:00 AM – 4:00 PM Monday – Thursday
8:00 AM – 3:00 PM Friday

SECTION 2: CORE FACULTY

PROGRAM DIRECTOR
Jonathan Bowser, MS, PA-C
Associate Professor, Pediatrics
(303) 724-1349
jonathan.Bowser@ucdenver.edu
LEADS Track CHA/PA Course Director
Leadership Team

MEDICAL DIRECTOR
Tai Lockspeiser, MD
Associate Professor, Pediatrics
tai.lockspeiser@childrenscolorado.org
Leadership Team

ASSOCIATE PROGRAM DIRECTOR – EDUCATIONAL STRATEGY
Rebecca Maldonado, MS, PA-C
Associate Professor, Pediatrics
(303) 724-1359
rebecca.maldonado@ucdenver.edu
Leadership Team
ASSOCIATE PROGRAM DIRECTOR – PROGRAM QUALITY
Jacqueline (Jackie) Sivahop, MS, PA-C
Associate Professor, Pediatrics
(303) 724-1341
jacqueline.sivahop@ucdenver.edu
Leadership Team

ASSISTANT PROGRAM DIRECTOR - ASSESSMENT
David Eckhardt, MS, PA-C
Assistant Professor, Pediatrics
(303) 724-1347
david.eckhardt@ucdenver.edu
Pediatric Critical and Acute Care Longitudinal Experience Course Director

ACADEMIC COORDINATOR
Amy Akerman, MPAS, PA-C
Instructor, Pediatrics
Faculty
(303) 724-1334
amy.akerman@ucdenver.edu
Global Health Track CHA/PA Course Director and International Course Director

CLINICAL COURSE DIRECTOR
Tanya Fernandez, MS, PA-C
Instructor, Pediatrics
Faculty
(303) 724-1345
tanya.fernandez@ucdenver.edu

CLINICAL SITE EDUCATOR
Joyce Nieman, MHS, PA-C
Associate Professor, Pediatrics
(303) 724-7288
joyce.nieman@ucdenver.edu
Rural Health Track CHA/PA Course Director

CURRICULUM DESIGN MANAGER
Kirsti Broadfoot, PhD
Associate Professor, Family Medicine
kirsten.broadfoot@ucdenver.edu
Leadership Team
FACULTY
Kevin Bogart, MPAS, PA-C
Assistant Professor, Pediatrics
Faculty
(303) 724-1339
kevin.bogart@ucdenver.edu

Rachel Byrne, MS, PA-C
Instructor, Pediatrics
Faculty
(303) 724-1337
rachel.byrne@ucdenver.edu

Claudia Luna-Asturias, LGSW
Instructor, Pediatrics
(303) 724-1348
claudia.luna-asturias@ucdenver.edu
Urban Underserved Track CHA/PA Course Director

SECTION 3: ASSOCIATED FACULTY
Michael Hall, PhD
Instructor of Physiology and Biophysics
(303) 724-1335
michael.hall@ucdenver.edu

SECTION 4: CHA/PA PROGRAM STAFF

CLINICAL COORDINATOR
Janice Baker, MHR
(303) 724-1336
janice.s.baker@ucdenver.edu

DIRECTOR OF ADMISSIONS AND COMMUNICATIONS
Kay Denler
(303) 724-1340
kay.denler@ucdenver.edu

ACADEMIC SUPPORT
Liz Gray
(303) 724-7963
liz.gray@ucdenver.edu
DIDACTIC SERVICES COORDINATOR
Kimberly (Kim) Kucera
(303) 724-1343
kimberly.kucera@ucdenver.edu

CLINICAL SERVICES COORDINATOR
Jennifer (Jenny) Smidt
(303) 724-8792
jennifer.smidt@ucdenver.edu

BUSINESS SERVICES PROFESSIONAL
Angela (Angie) Vondra, MBA
(303) 724-1346
angela.vondra@ucdenver.edu
APPENDIX VIII: CHA/PA Program Information

SECTION 1: HISTORY OF THE CHA/PA PROGRAM

Dr. Henry K. Silver – Our Founder

Henry K. Silver, MD was born in Philadelphia, PA. He attended high school, college and medical school in California. He completed a pediatric internship at the University of California San Francisco (UCSF) and a pediatric residency at the Children's Hospital of Philadelphia. He was an Assistant Professor of pediatrics at UCSF before he moved to Yale University School of Medicine where he rose to the rank of Associate Professor. In 1957, he moved to the University of Colorado School of Medicine as Professor and Vice Chair of Pediatrics. He was director of the Child Health Associate (now the Child Health Associate/Physician Assistant) Program from 1968-1991. Dr. Silver was a recognized expert in general pediatrics, pediatric endocrinology and growth. The Silver Syndrome, a syndrome of failure to grow, bears his name. He was one of the early pioneers in the recognition of child abuse and neglect, understanding the implications these syndromes had on normal growth in children. He was the senior editor of the Handbook of Pediatrics and Current Pediatric Diagnosis and Treatment and two other books as well as well over 100 articles in the medical literature. He also served as Associate Dean for Admissions for the MD program where he brought an emphasis on diversity to the selection of students.

Among Dr. Silver’s many awards is the prestigious Institute of Medicine Gustav O. Lienhard Award for outstanding achievement in improving health and services in the United States. In the early and mid-1960s, he recognized that there were many children not receiving medical care and he developed three programs to address this problem. These included the Pediatric Nurse Practitioner Program (1965 – with Loretta Ford, RN, PhD), the Child Health Associate Program (1968) and the School Nurse Practitioner program (1970). The University of Colorado PNP program is generally recognized as the basis for the entire nurse practitioner profession. In a letter dated November 1, 1981 Dr. Eugene Stead acknowledged Dr. Silver’s important contributions that led to the establishment of the PA profession. He said, “Your statement about the chronology is correct. The demonstration that you could effectively use nurse practitioners was one of the happenings that led to the establishment of the Duke PA Program”.

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The CHA/PA Program was the first and remains the only PA Program with expanded curriculum regarding the health care needs of children. Dr. Silver recognized the need to document the educational, legal and health care ramifications of these new professions. He and his colleagues published multiple articles on these topics as well as documenting the competency, efficiency and effectiveness of the Child Health Associate (PA). Dr. Silver died of cancer at the age of 72 in 1991.

SECTION 2: STUDENT ORGANIZATIONS OF THE CHA/PA PROGRAM

2.1 Silver Society

Silver Society is the CHA/PA Program chapter of the Student Academy of the American Academy of Physician Assistants (SAAAPA). Silver Society provides a way for students to get involved with peers, the PA profession, and the community. These interactions can serve many purposes, such as helping to meet other students in a social atmosphere; working to educate others about the PA profession; improving the community with projects the society implements; or enhancing one’s own leadership skills. Between classes, studying, work and rotations, it is very difficult to remain current on issues affecting PA students and the profession. Student societies can provide a steady ground for students in the Program by encouraging them to interact through educational and social programs.

Our student society, named after founder Henry K. Silver, strives to accomplish the above goals and additionally promotes the Physician Assistant profession, community involvement, fundraising, and student social events. Membership in the Silver Society is encouraged of all students and requires small membership dues each year. Multiple officer and committee positions are available to all students. Officers are required to be members of the American Academy of Physician Assistants (AAPA).

The Silver Society has been involved in several activities including PA week celebrations, children’s literacy activities, Halloween and Thanksgiving parties for patients at Children’s Hospital Colorado, volunteering at the Ronald McDonald House and Denver Rescue Mission, and many more community service activities. In addition, the Silver Society has effectively participated in promoting the PA profession and diversity through recruitment activities and health promotion presentations at local schools.

In addition to participating in community projects and volunteer activities, the Silver Society is well represented at the American Academy of Physician Assistants Annual Conference. At the conference, the students have the opportunity to compete in the National Student Challenge Bowl, participate in the Assembly of Representatives (the SAAAPA governing body), and participate in the Host City Campaign and philanthropic projects. Students participate in all of the AAPA conference activities and begin to network with their Physician Assistant colleagues.

These are just a few of the highlights of the many projects and exciting opportunities awaiting students as part of the Silver Society. The faculty and staff encourage all students to become active as students in the Physician Assistant profession.

2.2 CHA/PA Program Student Association and Executive Council
All students of the program are members of the CHA/PA Program Student Association. This group works closely with Silver Society to ensure representation and interaction of the CHA/PA Program students with UC Denver campus and within the community. The Executive Council of the Association consists of representative officers who are elected by the individual classes and hold dual office as Silver Society officers. The Executive Council is responsible for representing student interests and fostering communication within the student body and other organizations.
APPENDIX IX: The Physician Assistant Profession

In the early 1960s, it became obvious that there were declining numbers of general practitioners and physicians began to move away from rural areas. Dr. Charles Hudson first conceptualized the physician assistant. In 1965, Dr. Eugene A. Stead, Jr., instituted a two-year education and training program for physician assistants at Duke University.

Physician Assistants (PAs) are health care professionals licensed to practice medicine with physician supervision. Within the physician/PA relationship, physician assistants exercise autonomy in medical decision-making and provide a broad range of diagnostic and therapeutic services. A PA’s responsibilities may also include education, research, and administrative services.

PAs are educated and trained in intensive education programs accredited by the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA). The American Academy of Family Physicians, the American Academy of Pediatrics, the American Academy of Physician Assistants, the American College of Physicians, the American College of Surgeons, the American Medical Association, and the Physician Assistant Education Association all cooperate with the ARC-PA as collaborating organizations to establish, maintain, and promote appropriate standards of quality for entry level education of physician assistants.

PAs are educated in the medical model and work closely with physicians, augmenting and complementing the physician role. Education consists of classroom and laboratory instruction in the basic medical and behavioral sciences (such as anatomy, pharmacology, pathophysiology, clinical medicine, and physical diagnosis), followed by clinical rotations in internal medicine, family medicine, surgery, pediatrics, obstetrics and gynecology, emergency medicine, and geriatric medicine.

Upon graduation, PAs take a national certification examination developed by the National Commission on Certification of Physician Assistants (NCCPA) in conjunction with the National Board of Medical Examiners. The Board of Directors of NCCPA includes members at large and representatives from American Academy of Family Physicians, American Academy of Pediatrics, American Academy of Physician Assistants, American College of Emergency Physicians, American College of Physicians, American College of Surgeons, American Hospital Association, American Medical Association, American Osteopathic Association, Association of American Medical Colleges, Physician Assistant Education Association, Federation of State Medical Boards of the U.S., U.S. Department of Defense, U.S. Department of Veterans Affairs. Graduation from an accredited physician assistant program and passage of the national certifying exam are required for state licensure.

A number of postgraduate PA programs have also been established to provide practicing PAs with advanced education in medical specialties.

The responsibilities of a physician assistant depend on the practice setting, education and experience of the PA, and on state laws and regulations. Physician assistants can take medical histories, perform physical examinations, order and interpret laboratory tests, diagnose and treat illnesses, perform procedures and counsel patients and families.
SECTION 1: CERTIFICATION OF PHYSICIAN ASSISTANTS

As the concepts of new health practitioners gained acceptance, state legislatures began to turn their attention to formulating statutes to incorporate these professionals into the framework of the health care delivery system. The development of a nationally standardized mechanism for evaluating PA proficiency became desirable, particularly in those states that mandated that health care providers could practice only after their credentials had been reviewed by the appropriate regulatory agency.

With this in mind, and with the cooperation of the American Medical Association, the National Board of Medical Examiners began to develop a national certifying examination for physician assistants in 1972. The original members of the newly formed independent National Commission on Certification of Physician Assistants (NCCPA) included representatives from:

- American Academy of Family Physicians
- American Academy of Pediatrics
- American Academy of Physician Assistants
- American College of Emergency Physicians
- American College of Physicians
- American College of Surgeons
- American Hospital Association
- American Medical Association
- Association of American Medical Colleges
- Federation of State Medical Boards of the U.S.
- National Medical Association
- Physician Assistant Education Association (formerly APAP)
- U.S. Department of Defense

The NCCPA is charged with assuring the public that physician assistants are competent. This is accomplished through entry level and recertification examinations and acquisition of continuing medical education. Current certification requirements for physician assistants include:

- Graduating from an accredited physician assistant program
- Obtaining a passing score on the Physician Assistant National Certifying Examination (PANCE)
- Completing approved continuing medical education and a self-assessment or quality improvement project every two years
- Obtaining a passing score on the Physician Assistant National Recertification- Examination every ten years.

In summary, the PA profession is committed to ensuring the highest quality of health care by following an organized plan of program accreditation, certification of graduate competency and continuing medical education.
SECTION 2: THE PHYSICIAN ASSISTANT CODE OF ETHICS

The American Academy of Physician Assistants recognizes its responsibility to aid the profession in maintaining high standards in the provision of quality and accessible health care services. The following principles delineate the standards governing the conduct of physician assistants in their professional interactions with patients, colleagues, other health professionals and the public. Realizing that no code can encompass all ethical responsibilities of the physician assistant, this encumbrance of obligations in the Code of Ethics is not comprehensive and does not constitute a denial of the existence of other obligations, equally imperative, though not specifically mentioned.

- **Physician Assistants** shall be committed to providing competent medical care assuming as their responsibility the health, safety, welfare and dignity of all humans.
- **Physician Assistants** shall extend to each patient the full measure of their ability as dedicated, empathetic health care providers and shall assume responsibility for skillful and proficient transactions of their professional duties.
- **Physician Assistants** shall deliver needed health care services to health consumers without regard to sex, age, race, creed, and socioeconomic and political status.
- **Physician Assistants** shall adhere to all state and federal laws governing informed consent concerning the patients’ health care.
- **Physician Assistants** shall seek consultation with their supervising physician, other health providers, or qualified professionals having special skills, knowledge or experience whenever the welfare of the patient will be safeguarded or advanced by such consultation. Supervision should include ongoing communication between the physician and physician assistant regarding the care of all patients.
- **Physician Assistants** shall take personal responsibility for being familiar with and adhering to all federal/state laws applicable to the practice of their profession.
- **Physician Assistants** shall provide only those services for which they are qualified via education and/or experiences and by pertinent legal regulatory process.
- **Physician Assistants** shall not misrepresent in any manner, either directly or indirectly, their skills, training, professional credentials, identity, or services.
- **Physician Assistants** shall uphold the doctrine of confidentiality regarding privileged patient information, unless required to release such information by law or such information becomes necessary to protect the welfare of the patient or the community.
- **Physician Assistants** shall strive to maintain and increase the quality of individual health care service through individual study and continuing education.
- **Physician Assistants** shall have the duty to respect the law, to uphold the dignity of the physician assistant profession and to accept its ethical principles. The physician assistant shall not participate in or conceal any activity that will bring discredit or dishonor to the physician assistant profession and shall expose without fear or favor, any illegal or unethical conduct in the medical profession.
- **Physician Assistants**, ever cognizant of the needs of the community, shall use the knowledge and experience acquired as professionals to contribute to an improved community.
- **Physician Assistants** shall place service before material gain and must carefully guard against conflicts of professional interest.
Physician Assistants shall strive to maintain a spirit of cooperation with their professional organizations and The Physician Assistant Profession Oath

SECTION 3: THE PHYSICIAN ASSISTANT PROFESSIONAL OATH

Physician Assistant Professional Oath

I pledge to perform the following duties with honesty and dedication:

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

These duties are pledged with sincerity and upon my honor.

SECTION 4: PHYSICIAN ASSISTANT PROFESSIONAL ORGANIZATIONS

4.1 American Academy of Physician Assistants (AAPA)
2318 Mill Road, Suite 1300
Alexandria, VA 22314-1552
703/836-2272
http://www.aapa.org/
The American Academy of Physician Assistants is the largest professional organization of physician assistants in the United States of America. It was founded in 1968 and currently has approximately 39,000 members. The AAPA’s mission is to promote quality, cost-effective, accessible health care, and to promote the professional and personal development of physician assistants. The Academy is the official organization of the physician assistant profession and is recognized as such by other medical associations and federal, state, and local governments. The Academy maintains liaison relationships with the American Academy of Family Physicians, American Medical Association, American Academy of Pediatrics, American Academy of Orthopedic Surgeons, and others.

Some of the activities and services of the AAPA provides are the following:

- Offer continuing medical education for PAs
- Help ensure proper regulations, utilization, and reimbursement of physician assistants
- The only organization representing physician assistants and students in all specialties and employment situations
- Committed to strengthening and promoting the PA profession, physician-PA team, national and international healthcare systems, constituent organizations (state and specialty organizations), and diversity and leadership within the PA profession.
- Provides liaisons with other medical profession organizations (AMA, AAP, ACOG, etc.)
- Membership provides a multitude of benefits including discounted conference fees; free journals and prescribing references; professional information including salary profiles, census data, and profession entry information; scholarship opportunities; leadership and networking opportunities; membership benefits for insurance discounts, credit services and travel discounts

The governing body of the AAPA is the House of Delegates. The AAPA House of Delegates meets annually to adopt legislation and policy proposed by 10 standing committees, four councils, the constituent chapters, the Board of Directors, the Student Academy, the Physician Assistant Education Association, the Caucus Congress, and officially recognized specialty organizations. The Academy Board of Directors consists of 13 officials. Other AAPA bodies include the Physician Assistant Foundation, which grants scholarships to deserving PA students; Society for the Preservation of PA History, which records PA history; and a Political Action Committee, which supports federal candidates friendly to the PA profession.

AAPA student membership fees are available on the website. This one-time fee expires four months after graduation.

4.2 Student Academy of the American Academy of Physician Assistants

2318 Mill Road, Suite 1300
Alexandria, VA 22314-1552
703/836-2272
Email: students@aapa.org
https://www.aapa.org/Student_Membership.aspx
The Student Academy of the American Academy of Physician Assistants (SAAAPA) is a unique part of AAPA, as it was established in 1978 with its own bylaws, a Student Board of Directors, and a legislative and policy-making body. SAAAPA’s members consist of the registered student society at each accredited PA program. The students’ voices can be heard through their student society representative to the Student Academy’s Assembly of Representatives (AOR), SAAAPA’s legislative and policy-making body. The AOR meets for two days each year at the AAPA annual conference.

In addition to representing students at the regional and national level, SAAAPA is very involved with the community. Every year, SAAAPA, working with the PA Foundation, reaches out to the community through philanthropic projects to help needy populations and promote physician assistants and physician assistant students in a positive light. Every year, a charity is chosen in the AAPA conference host city for fundraising and volunteer projects. In addition to helping charities, some of the funds raised by students are donated to create a SAAAPA student scholarship each year. Student societies can also apply for grants through the Foundation to help continue their work on the cause of the year. This is a tremendous opportunity to interact with physician assistant students from across the country.

The Student Academy does not have individual members. Student members join AAPA. SAAAPA’s members consist of the members of the registered student society (Silver Society) at each accredited PA program.

4.3 Physician Assistant Specialty Organizations and Caucuses

PA Specialty organizations and caucuses consist of PAs, PA residents and students, as well as individuals who share a common interest in individual specialties and interests. These organizations are independent but affiliated with AAPA. Many of these organizations offer student benefits, including scholarships. For more information and membership information for individual specialty organizations, visit the AAPA website at:

https://www.aapa.org/co/

4.4 Physician Assistant Education Association

The Physician Assistant Education Association (PAEA) is the only national organization in the United States representing physician assistant (PA) educational programs. As such, PAEA’s core purpose is to improve the quality of health care for all people by fostering excellence in physician assistant education. Our mission fosters faculty development, advances the body of knowledge that defines quality education and patient-centered care and promotes diversity in all aspects of physician assistant education.

PAEA represents all accredited PA programs across the United States. The Association also sponsors membership categories for individuals who are not currently employed at member PA programs, but who have an interest in PA education, and for institutions that may be in the process of becoming accredited programs or whose personnel may wish to stay informed about PAEA activities or PA education.
PAEA has developed a number of resources and services in line with its mission that provide opportunities for PA faculty and student development and help members stay abreast of activities within PAEA and the PA educational community. PAEA also created and maintains the Central Application Service for PAs (CASPA), by which prospective applicants complete one secure online application to be sent to the PA programs of their choice. This application service has been available to PA programs and prospective students since 2001.

PAEA, sometimes in conjunction with other PA organizations, supports grant programs for faculty and students, provides resources to its member programs for testing students (PACKRAT), and publishes aids to PAs who need to recertify (Comprehensive Review for the Certification and Recertification Examinations). Twice each year, PAEA sponsors educational sessions, some of which offer continuing medical education credit for its faculty members, in addition to workshops for special categories of faculty that are presented in various regions throughout the country.

The Association dedicates itself to PA education and educators and is known as the voice for PA education. PAEA advocates for its member programs with the other PA organizations, networks with individuals and groups that are interested in PA education or that are considered to have a stakeholder interest in PAEA, and represents PA education and member programs on issues that range from accreditation to funding from the federal government.

4.5 Colorado Academy of Physician Assistants

4582 S. Ulster St., Suite 201
Denver, CO 80237
Phone: (303) 770-6048
Fax: (303) 771-2550
Email: contact@coloradopas.org
www.coloradopas.org

The Colorado Academy of Physician Assistants (CAPA) is a member organization representing Colorado PAs. CAPA is the AAPA constituent organization that represents Physician Assistants in Colorado. The Colorado Academy of Physician Assistants represents physician assistants in the state, promotes the physician assistant profession within the state, and furthers the education of its members.

The Colorado Academy of Physician Assistants (CAPA) was established in 1976 to promote the PA profession to Colorado’s lay and medical community, offer community health education projects, offer continuing medical education for PAs, and to help ensure proper regulation and utilization of PAs in Colorado.

Today, CAPA represents Colorado PAs before the State Legislature and the Board of Medical Examiners, as well as monitoring their decisions and disseminating information. CAPA also provides information to the Colorado Medical Society, local medical societies, and insurance companies.

CAPA’s membership includes more than 500 PAs who are widely distributed across the state, working in
both primary care and specialty areas. A Board of Directors that acts on behalf of the membership governs the organization.

CAPA is a constituent chapter of the American Academy of Physician Assistants (AAPA), the nationally recognized organization representing the PA profession. The CAPA membership annually elects delegates to serve in the AAPA's House of Delegates and attend the AAPA Annual Convention.

CAPA offers members, including student members, a number of benefits. CAPA holds a summer and winter conference which, in addition to three days of speakers on a variety of health topics, offer a great opportunity to network with working PAs. CAPA dinners occur several times a year at restaurants around the Denver area and are free to all members. There are also leadership opportunities to work with the CAPA Board of Directors and CAPA committees on issues facing Colorado PAs.

Student Membership dues to CAPA are a one-time fee for students and can be found on their website. The membership application is available on their website at www.coloradopas.org.