



The University of Alabama at Birmingham

***Clinical and Diagnostic Sciences
Physician Assistant Studies Program***

**2021-2022
STUDENT HANDBOOK**



UAB//SHP

UAB SCHOOL OF HEALTH PROFESSIONS
CLINICAL AND DIAGNOSTIC SCIENCES
PHYSICIAN ASSISTANT STUDIES PROGRAM
2021-2022 ACADEMIC HANDBOOK



8/9/2021

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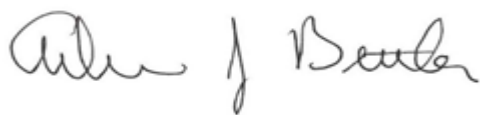
Date



08/12/2021

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8/19/20

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Date

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INTRODUCTION

DEAN'S WELCOME MESSAGE

Welcome to the University of Alabama at Birmingham School of Health Professions! We are pleased you chose to join one of our many excellent programs, which in combination have established us as a national leader in health professions education.

We are home to one of the largest health professions schools in the nation with more than 30 programs at the certificate, baccalaureate, master's, and doctoral levels, with more than 2,000 undergraduate and graduate students enrolled.

Moving into a post-COVID environment is a new start for everyone in health care, and you are in the best place to begin your personal journey toward joining this dynamic field. We are all committed to providing you a world-class education, and to support your pursuit of knowledge and your strong desire to serve others as a healthcare professional.

The pandemic has challenged all of us in many ways, and your entry into one of our professional programs demonstrates one of the most precious personal qualities one can have: resilience. That resilience has brought you here today and will continue to serve you well during your journey at UAB.

We recognize that healthcare needs - even outside of a pandemic - are constantly changing. That is why we continue to add innovative programs to our academic portfolio, and to enhance and revitalize ongoing programs. We also offer graduate programs you will only find in Alabama at UAB, such as Genetic Counseling, Nuclear Medicine and Molecular Imaging, Low Vision Rehabilitation, Healthcare Quality and Safety, doctoral-level Rehabilitation Science, and Biomedical and Health Sciences.

Our degrees and programs are fully accredited by their respective professional organizations. This means you will be eligible for licensure, national certification or registration and enjoy being in high demand within the job market. Our first-time student exam pass rate on many credentialing exams is an astounding 98 percent or higher.

Graduating from the School of Health Professions means you will acquire an esteemed degree, have a host of job opportunities in healthcare – an industry that continues to grow rapidly – and be well prepared to make a difference in your community. And, we look forward to maintaining our relationship with you when you join our alumni community.

Our alumni give advice to current students that is worth repeating: “learn your craft, be a better professional for your patients, be open minded to future possibilities, and remember to have a healthy work/ life balance”.

I look forward to seeing you grow in your respective field and watching you become the leader we know you can be.

A handwritten signature in dark ink, appearing to read "Andrew J. Butler". The signature is fluid and cursive, with the first name "Andrew" and last name "Butler" clearly distinguishable.

Andrew J. Butler, PhD, FAPTA

OVERVIEW OF THE SCHOOL OF HEALTH PROFESSIONS

A leader in federally funded research, the UAB School of Health Professions (SHP), is one of the largest academic institutions of its type in the United States and currently boasts several nationally ranked programs. What began in the 1950's as a collection of training programs in various para-professional disciplines has grown into an internationally recognized center of academic excellence.

The SHP initially took shape in 1969 as UAB gained autonomy within the University of Alabama System. Originally christened the School of Community and Allied Health Resources (SCAHR), the school incorporated the School of Health Services Administration and the Division of Allied Health Sciences from the College of General Studies with parts of the Department of Public Health and Epidemiology from the medical school. An innovative facility designed to meet the growing needs of the health care industry, the SCAHR was divided into four academic divisions that functioned like regular academic departments: Health Services Administration, Public Health and Environment, Allied Health Sciences, and the Regional Technical Institute for Health Occupations.

Throughout the 1970's and 80's the school's offerings were amended to reflect the changing health care industry. As a result of the changes, SCAHR became the School of Public and Allied Health (SPAHE). Next it became the School of Community and Allied Health (SCAH) and later the School of Health Related Professions (SHRP). During this time, the school added several new areas of study including a nationally ranked program in Nutrition Sciences. Through the leadership and guidance of early visionaries, the school experienced unparalleled success, which continues to date.

Today, the School of Health Professions is comprised of more than 30 programs – at the certificate, baccalaureate, master's and doctoral levels – across five academic departments: Clinical and Diagnostic Sciences, Health Services Administration, Nutrition Sciences, Occupational Therapy, and Physical Therapy. The school is housed in three buildings, the Susan Mott Webb Nutrition Sciences Building, the Learning Resource Center Building, and the School of Health Professions Building (SHPB).

With more than 2,200 faculty, staff, and students, SHP is one of six schools comprising the world-renowned UAB Academic Health Center. Students have access to vast academic resources, state-of-the-art facilities, and progressive research.

SHP is proud of many accomplishments including:

- U.S. News & World Report ranks SHP programs in the nation's top 25
- Research funding is over \$14 million and growing
- The school is at the top of the list in research funding from the National Institutes of Health for schools of its type and has been either first or second in funding received since 1969

Under the current leadership of Dean Andrew Butler, the school has never been stronger, or better positioned as a national leader in health professions education.

SCHOOL OF HEALTH PROFESSIONS CONTACT INFORMATION

In addition to your program director and program faculty, the following individuals may be able to provide assistance with questions and issues related to your school and program activities.

Kristin Chapleau, Director of Student Services and Advising

205-996-4721; kjohnsto@uab.edu

Mary Foster, Dean Butler's Executive Assistant

205-934-5149; fostermg@uab.edu

Samantha Giordano-Mooga, PhD, Director of Undergraduate Honors Program

205-996-1399; sgiordan@uab.edu

Donna Slovensky, PhD, Senior Associate Dean for Academic and Faculty Affairs

205-934-1679; donnaslo@uab.edu

Kevin Storr, Director of Communications

205-934-4159; storr@uab.edu

Lee Test, Director of Academic and Faculty Operations

205-975-8034; lttest@uab.edu

Marci Willis, Director, Learning Resource Center

205-934-9472; mbattles@uab.edu

SECTION 1 – SCHOOL AND UNIVERSITY INFORMATION

ACADEMIC CALENDAR

All dates related to registration, payments of tuition and fees drop/add dates, other administrative requirements, and official school holidays are recorded on the UAB Academic Calendar available at www.uab.edu/academiccalendar.

ACADEMIC INTEGRITY CODE

The University established a new Academic Integrity Code effective August 23, 2021. This Code, which applies to undergraduate, graduate, and professional students as well as all academic activities, defines academic misconduct and outlines procedures for breaches of the code. Policies are established for resolution of charges of academic misconduct, and these processes are managed by the Academic Integrity Coordinator (AIC). In the School of Health Profession, the AIC is the Senior Associate Dean for Academic and Faculty Affairs, Dr. Donna Slovensky. Dr. Slovensky's office is located in SHPB 660. The full text of the Academic Integrity Code is available at:

https://www.uab.edu/compliance/images/FINAL_Academic_Integrity_Code__2021-June-22.pdf

ADVISING

Undergraduate student advising is provided through the Student Services and Advising unit, which is housed in the SHPB 230 suite of offices, near the elevators on the 2nd floor. Walk-ins are accepted, but appointments are preferred. Contact information for individual advisers is listed below.

Kristin Chapleau, Director of Student Services and Advising - 205-996-4721; kjohnsto@uab.edu

Carla Crews-McGirt, Academic Advisor II – 934-4194; ccrewmc@uab.edu

Eileen Hatfield, Academic Advisor II - 205-934-4185; mehatfie@uab.edu

Rachel Mars, Academic Advisor II – 205-996-0867; rmars@uab.edu

Adam Pinson, Academic Advisor II – 205-975-4194; apinson@uab.edu

Graduate student advising is provided through the SHP graduate programs.

ASKIT

AskIT is the technology help desk for faculty, staff, and students. They provide free support via telephone, email, or in-person. You will be asked to supply your BlazerID when you request assistance.

Phone: (205) 996-5555 Email: askit@uab.edu Website: https://uabprod.service-now.com/service_portal

ATTENDANCE

Class attendance is expected in all SHP programs. Specific class, laboratory or clinical site attendance requirements may be more stringent than university guidelines. Refer to the program requirements in this handbook and in course syllabi for policies. The UAB policy for undergraduates follows.

The University of Alabama at Birmingham recognizes that the academic success of individual students is related to their class attendance and participation. Each course instructor is responsible for establishing policies concerning class attendance and make-up opportunities. Any such policies, including points for attendance and/or participation, penalties for absences, limits on excused absences, total allowable absences, etc., must be specified in the course syllabus provided to students at the beginning of the course term. Such policies are subject to departmental oversight and may not, by their specific prescriptions, negate or circumvent the accommodations provided below for excused absences.

The University regards certain absences as excused and in those instances requires that instructors provide an accommodation for the student who misses assignments, presentations, examinations, or other academic work of a substantive nature by virtue of these excused absences. Examples include the following:

Absences due to jury or military duty provided that official documentation have been provided to the instructor in a timely manner in advance.

Absences of students registered with Disabilities Services for disabilities eligible for "a reasonable number of disability-related absences" provided students give their instructors notice of a disability-related absence in advance or as soon as possible.

Absences due to participation in university-sponsored activities when the student is representing the university in an official capacity and as a critical participant, provided that the procedures below have been followed:

Before the end of the add/drop period, students must provide their instructor a schedule of anticipated excused absences in or with a letter explaining the nature of the expected absences from the director of the unit or department sponsoring the activity.

If a change in the schedule occurs, students are responsible for providing their instructors with advance written notification from the sponsoring unit or department.

Absences due to other extenuating circumstances that instructors deem excused. Such classification is at the discretion of the instructor and is predicated upon consistent treatment of all students. In these instances, instructors must devise a system for reasonable accommodation including, for example, policies allowing for dropped exams/quizzes, make-up exams, rescheduling of student classroom presentations or early or later submission of written assignments.

AWARDS AND HONOR SOCIETIES

All students in the School of Health Professions are eligible for consideration for the following awards or society memberships.

- Alfred W. Sangster Award for Outstanding International Student – This award is presented annually to an international student in recognition of his or her academic and non-academic achievements.
- Alpha Eta Society – The UAB Chapter of this Society recognizes students registered in the final term of a baccalaureate or graduate health professions program. Inductees must have a cumulative grade point average of 3.0 (4.0 = A), and be in the upper 10% of their program. Nominations are made by program directors in spring and summer terms.
- Cecile Clardy Satterfield Award for Humanism in Health Care – This award is made annually to recognize one outstanding student for humanitarianism, professionalism, and commitment to health care. Nominations are coordinated by program directors, but may also be made by faculty, students, patients, or preceptors.
- Charles Brooks Award for Creativity – This award is made annually in recognition of creative accomplishments such as written publications or artistic contributions which complemented the student's academic activities. Nominations are made by program directors.
- Dean's Leadership and Service Award – Presented to a maximum of three outstanding SHP students annually, this award recognizes leadership to the School, UAB, and the community. Nominations are made by program directors or faculty.
- Phi Kappa Phi – This is the oldest, and most selective, all-discipline honor society in the nation. Membership is by invitation to the top 7.5% of junior students and the top 10% of seniors and graduate students. Nominations are made by program directors.

Please refer to the program section of this handbook for awards and honors available to students in individual programs.

BACKGROUND CHECK

SHP students in clinical programs are required by policy, to undergo a background check using the school's approved vendor, CastleBranch <https://discover.castlebranch.com/>, at the time of program admission, and again, prior to placement in a clinical rotation. In addition, some sites are requiring the social media background check. This package code is different than the initial package code given. Instructions for requesting the background check and appropriate consent forms are provided to students by their programs. Please refer to the policy section of this handbook for the policy statement.

BLAZERID / BLAZERNET / EMAIL

BLAZERID: All students receive a unique identifier, the BlazerID, established at: www.uab.edu/blazerid. Your BlazerID is required for accessing BlazerNET and other campus resources. To activate one's BlazerID, select "Activate Accounts."

BlazerNET is the official portal of the UAB information network and is accessible from any Internet-accessible computer, on- or off-campus. Access BlazerNET from UAB home page www.uab.edu then choose UAB Quicklinks.

Email: uab.edu Monitor your email regularly. Your UAB email is the official communication medium for courses, news, information and announcements. UAB student email is provided through Microsoft

Office 365, a cloud based system. Students have 50 GB of email space and 25 GB of free file 1 TB storage.

BLAZER EXPRESS

The UAB Blazer Express Transit System provides transportation throughout the UAB campus. With a valid UAB ID badge, students can enjoy fare-free bus transportation. All buses are ADA-accessible and can seat approximately 35 riders. For an updated schedule, route maps, and hours of operation please go to www.uab.edu/blazerexpress/.

BOOKSTORE

There is one bookstore located on the UAB campus, offering a wide variety of products and services to students, including online purchasing and shipping. The bookstore stock UAB memorabilia and college wear in addition to all required textbooks and course material.

UAB Barnes and Noble Bookstore

Location: 1400 University Blvd, 35233

Hours: M – F 8:00 a.m. – 5:00 pm.; Sat Closed; Sun Closed

Telephone: (205) 996-2665 Website: <https://uab.bncollege.com/shop/uab/home>

CAMPUS ONECARD

The UAB OneCard is the official university identification card. It is used for personal identification, for entry to campus events and the recreation center, for library checkout, and other UAB services. It also serves as a declining balance card for the UAB meal plans and for Blazer Bucks accounts. Additional information is available at www.uab.edu/onecard.

CAMPUS MAP

UAB's campus map can be found at the following: www.uab.edu/map/

CANVAS LEARNING MANAGEMENT SYSTEM

The Canvas Learning Management System is the platform used for managing instructional materials online. Canvas course sites are accessed through BlazerNET or at www.uab.edu/elearning/canvas. Students should monitor their course sites routinely for communication from faculty and manage course assignments.

COUNSELING SERVICES

The Counseling and Wellness Center offers no cost, confidential counseling for UAB students related to physical, emotional, social, intellectual, or spiritual concerns. The Center is located in Student Health Services at 1714 9th Ave. South. For more information, call 205-934-5816 or <https://www.uab.edu/students/counseling/>

COVID-19 PRECAUTIONS

The COVID-19 pandemic necessitated many changes in our academic and administrative operating practices. While we anticipate a return to regular operations in fall term 2021, we remind students that certain precautions are still recommended. These recommendations include:

- **Masking - masking is required in all UAB spaces.**
- If you are not vaccinated, we highly encourage you to obtain the COVID vaccine – students may receive the vaccine at no cost through Student Health Services, at walk-up clinics, or through UAB Medicine. Scheduling information is available at <https://www.uab.edu/uabunited/covid-19-vaccine>
- If you are vaccinated, please upload an image of your vaccination card through the Student Health Patient Portal at https://studentwellness.uab.edu/login_directory.aspx.
- Students who experience COVID symptoms should not come on campus or clinical sites and should contact Student Health immediately for further instruction.
- Maintain hand hygiene with frequent handwashing and disinfectant solutions.
- Clean your work areas with disinfectant solution regularly.
- Eat only in designated spaces. Student may consume water in classrooms but should comply with any restrictions on food and other beverages that may be in place.
- Official information about COVID-19 and University guidelines is available at: <https://www.uab.edu/uabunited/>

DIVERSITY, EQUITY AND INCLUSION (DEI)

The mission of DEI is to “... champion equity and inclusion and, in particular, to advocate for inclusive excellence and equity so that UAB students, faculty, staff, community partners and friends can flourish and excel.” Inspired by “... what we value, what we learn from research and what we teach and share with the world.” DEI’s goal is “... to inspire our people to take a courageous step to inspire equity and inclusive excellence throughout our state, nation and world, every day.” Dr. Paulette Patterson Dilworth is the Vice President responsible for the activities of this office. Information: <http://www.uab.edu/dei/>

DISABILITY SUPPORT SERVICES (DSS)

“DSS provides an accessible university experience through collaboration with UAB partners. These partnerships create a campus where individuals with disabilities have equal access to programs, activities, and opportunities by identifying and removing barriers, providing individualized services, and facilitating accommodations.”

“DSS serves as the university-appointed office charged with providing institution-wide advisement, consultation, and training on disability-related topics which include legal and regulatory compliance, universal design, and disability scholarship.”

To apply for accommodations, contact DSS. **Note:** *You must have your Blazer ID and password.*

Telephone: (205) 934-4205 or (205) 934-4248 (TDD) Fax: (205) 934-8170
Email: dss@uab.edu Website: www.uab.edu/students/disability/

DRUG SCREENING

By policy, SHP students in programs requiring fieldwork/internship placement are required to undergo a routine drug screen using the school's approved vendor, CastleBranch, www.castlebranch.com, at the time of program admission and again prior to placement in a clinical rotation. Instructions for requesting the drug screen and appropriate consent forms will be provided to students by their programs. Please refer to the policy section of this handbook for the school and university policy statements. If you have questions, please contact (205) 934-4194 or shp@uab.edu or visit room 230 in the School of Health Professions Building. For more information visit: [Students - School of Health Professions | UAB](#)

EMERGENCIES

Report suspicious or threatening activity to the UAB Police Department immediately. Law officers are available 24 hours, seven days a week. Also, more than 300 emergency blue light telephones connected directly to the police dispatch are located throughout campus.

UAB Police: Dial 911 *from a campus phone* or call: 934-3535; 934-HELP (4357); or 934-4434

Emergencies affecting campus are communicated via the following:

Weather & Emergency Hotline: (205) 934-2165 • University home web page: www.uab.edu

- Webpage: www.uab.edu/emergency
- Announcements on BlazerNET
- Twitter@UABALERT: www.twitter.com/uabalert
- facebook.com/UABALERT
- Cell phone messages and SMS text - register for B-ALERT notices via <https://idm.uab.edu/ens/b-alert>

FERPA

The Family Educational Rights and Privacy Act (FERPA) of 1974 provides protection for all educational records related to students enrolled in an educational program. Information about your rights and protection of your records is available at the following sites:

<https://sa.uab.edu/enrollmentservices/ferpa/>; If you have questions or concerns about FERPA issues, you may email FERPA@uab.edu, or contact (205) 934-4194 or shp@uab.edu.

FINANCIAL AID

The Office of Financial Aid is located at 1700 University Blvd., Lister Hill Library, Room G20. Hours of Operation are from 8:00 am to 5:00 pm Monday thru Friday. Phone: (205) 934-8223; Fax: (205) 975-6168. Additional information can be located on the website www.uab.edu/students/paying-for-UAB.

FOOD SERVICES

Dining facilities available on campus closest to the SHP buildings include the Commons on the Green – located on the Campus Green, south of 9th Avenue and the Campus Recreation Center. Vending machines are located in the basement of the Learning Resource Center and on the 6th floor of the Webb Building. Additional information about meal plans and campus dining facilities is available at www.uab.edu/dining.

GRADUATE SCHOOL

The UAB Graduate School offers doctoral programs, post-master's specialist programs, and master's level programs. Graduate programs in SHP are coordinated through the Graduate School and students must adhere to the Graduate School policies and procedures. Graduate School information for current students is available at www.uab.edu/graduate/.

GRADUATION

All students must complete an application for degree six months prior to graduating and not later than the deadline in the academic calendar. <https://www.uab.edu/commencement/faqs>. The University holds commencement every semester. Check the commencement website for the most current information: <https://www.uab.edu/commencement/>

MEDICAL CLEARANCE

SHP students in programs that are on campus (not fully online), are required to receive medical clearance at the time of program admission. UAB Student Health Services utilizes a secure web-based process for the storage of required documents accessed through BlazerNET. More information is available at the Student Health Services website: www.uab.edu/students/health/medical-clearance/immunizations.

IMMUNIZATION POLICY

To provide a safe and healthy environment for all students, faculty and staff at the University of Alabama at Birmingham (UAB), first-time entering students, international students and scholars, and students in clinical programs, provide proof of immunization against certain diseases: <https://www.uab.edu/policies/content/Pages/UAB-AD-POL-0000086.aspx>

INSURANCE WAIVERS

To ensure that all students have adequate health care coverage, including ongoing primary and specialty care, the University of Alabama at Birmingham (UAB) requires all eligible students to have major medical health insurance. Students can provide proof of their own private coverage or be enrolled in the Student Health Insurance Plan (SHIP). The SHIP is a 1-year commercial policy provided by United HealthCare and is re-negotiated annually. This policy is a comprehensive health insurance policy at an affordable cost that is specifically designed to meet the needs of UAB Students. If you are required to have insurance but have sufficient coverage on another plan and wish to opt out of the SHIP, you are required to submit a waiver to Student Health Services at the beginning of every semester. More information including submitting a waiver can be found at this website: <https://www.uab.edu/students/health/insurance-waivers/waivers>

HIPAA TRAINING

The Health Insurance Portability and Accountability Act includes significant requirements for protecting individual privacy of health information. All students in the School of Health Professions must complete

an online tutorial and be tested on HIPAA regulations at the time of program admission. A BlazerID is required to access the training site, located at www.uab.edu/learningsystem. Compliance with the training requirement is monitored monthly.

INSTITUTIONAL REVIEW BOARD FOR HUMAN USE (IRB)

Student researchers must comply with all requirements for protection of human subjects. Detailed information is available on the IRB website www.uab.edu/irb

INTELLECTUAL PROPERTY

Intellectual property refers to an asset that originated conceptually, such as literary and artistic works, inventions, or other creative works. These assets should be protected and used only as the creator intends. Training materials defining inventor status, patent criteria, and other intellectual property issues is available at www.uab.edu/research/administration/offices/OSP/Pages/Training.aspx.

LACTATION CENTERS

Through the work of the UAB Commission on the Status of Women, the University has provided several lactation centers for students, faculty, and staff across the campus. Locations of the centers are available at <https://www.uabmedicine.org/-/lactation-consultants-help-moms-navigate-breastfeeding-journey>. The School of Health Professions' lactation room is in the Susan Mott Webb Nutrition Sciences Building at 1675 University Boulevard, room 219A. Female students enrolled in the School of Health Professions have access to the room via their student ID/OneCard. If you cannot access the room, contact the building administrator, Andrew Eaton at (205) 934-4133.

LIBRARIES AND LEARNING RESOURCE CENTER

UAB's libraries house excellent collections of books, periodicals, microforms, and other media. have online remote access to catalogs and online collections. Computers are available for student use during regular hours of operation. <https://library.uab.edu/locations>

SHP Learning Resource Center (LRC)

The School of Health Professions Learning Resource Center (LRC) provides a unique set of enterprise solutions that promote an exciting, intriguing and innovative learning environment. It provides a state-of-the-art media studio; audio/visual support; and information technology management of public, classroom and testing labs. Web: <http://www.uab.edu/lrc/>

Located: 1714 9th Avenue S. Phone: (205) 934-5146 Email: shplrc@uab.edu

Hours: Monday – Thursday 7:00 am – 8:00 pm; Friday 7 am – 5:30 pm;

Saturday - closed; Sunday - closed

Lister Hill Library of the Health Sciences

This is the largest biomedical library in Alabama, and one of the largest in the south. Located across the crosswalk from the School, the LHL has extension libraries in

University Hospital and The Kirklin Clinic. Dedicated librarians hold “office hours” in the Learning Resource Center weekly.

Location: 1700 University Boulevard

Website: <https://library.uab.edu/locations/lister-hill>

Phone: (205) 934-2230

Mervyn H. Sterne Library

A collection of more than one million items supporting teaching and research in the arts and humanities, business, education, engineering, natural sciences and mathematics, and social and behavioral sciences.

Location: 913 13th Street South

Website: <https://library.uab.edu/locations/sterne>

Phone: (205) 934-6364 (Reference) (205) 934-4338 (User Services)

ONESTOP STUDENT SERVICES

If you have questions or need assistance with an academic or administrative process, the UAB OneStop is where to go! Advisers will help you solve your problem or do the legwork for you if another UAB resource is needed. OneStop is located in the Hill Student Center 1400 University Blvd. You may contact the OneStop office by phone or email at (205) 934-4300; 855-UAB-1STP; (855) 822-1787; onestop@uab.edu. Additional information is available at www.uab.edu/onestop.

PARKING

Student vehicles must be registered with UAB Parking and Transportation Services, located at 608 8th Street South. The office is open Monday – Friday from 7:30 a.m. – 5:00 p.m. Parking is allocated on a first-come, first-served basis. Parking fees are established by location, payable by semester or year, and are billed to the student’s account. Additional information is available at www.uab.edu/parking.

PATIENT CARE PARTNERSHIP

Students in health professions programs learn general information about the health care industry as well as knowledge and skills specific to their chosen profession. The American Hospital Association (AHA) (www.aha.org) is an excellent resource for industry information. One role fulfilled by the AHA is that of patient advocate. The Patient Care Partnership brochure (link below) outlines rights and responsibilities of patients during hospital stays.

www.aha.org/aha/issues/Communicating-With-Patients/pt-care-partnership.html.

PLAGIARISM AND TURNITIN

Plagiarism is academic misconduct that will result in a grade of zero and may result in dismissal from the School of Health Professions and UAB (see Grievance Procedures for Violations of Academic Standards). All papers submitted for grading in any SHP program may be reviewed using the online plagiarism monitoring software. Please note that all documents submitted to *Turnitin.com* are added to their database of papers that is used to screen future assignments for plagiarism.

RECREATION CENTER

The campus Recreation Center, located at 1501 University Blvd, Birmingham, AL 35294, is open to faculty, staff, students, and their families. A valid student identification card or membership card is required for access. Facilities include basketball courts, racquetball courts, weight rooms, swimming pools, exercise rooms, and indoor track. Check the website for information about hours and services at www.uab.edu/campusrecreation.

SCHOLARSHIPS: BLAZER SCHOLARSHIP MANAGEMENT AND RESOURCE TOOL (B-SMART)

The SHP has several scholarship opportunities for students enrolled in SHP programs. The Scholarship Committee, comprised of faculty and administrators, review and select awardees.

Scholarships available to students in any SHP program are the following:

Carol E. Medders Endowed Scholarship – Funding for students enrolled in a graduate program in the School of Health Professions. Awards are based on academic achievement and unmet financial need.

Ethel M. and Jessie D. Smith Endowed Nursing and Allied Health Scholarship – Funding for students enrolled in SHP programs with GPA 3.0 or above and unmet financial need. Student must be a resident of the state of Alabama at the time of enrollment.

Lettie Pate Whitehead Foundation Scholarship – Funding for female students from selected states (AL, FL, GA, LA, MS, NC, SC, TN) enrolled in SHP programs. Award amounts are variable and are based on unmet financial need.

National Alumni Society Dean's Scholarship – Funding from the UAB National Alumni Society for two scholarships per year, one to a graduate student and one to an undergraduate student.

Sandra Dunning Huechtker Endowed Memorial Award – Funding for students enrolled in SHP program with GPA 3.0 or above and unmet financial need.

SHP Dean's Scholarship – Funding to recruit or retain outstanding students. Awards are based on academic achievement, and unmet financial need.

You may visit the Blazer Scholarship Management and Resource Tool (B-SMART) to apply <http://www.uab.edu/students/paying-for-college/>. Many programs in SHP also have scholarships available to currently enrolled students in those programs. Please see the program section of this handbook for that information.

SOCIAL MEDIA

Social media can serve as useful communication tools. However, health professions students should use the forums judiciously. The School's official sites are the following:

- Twitter: https://twitter.com/uab_shp?lang=en
- Facebook: www.facebook.com/UABSHP
- YouTube: www.youtube.com/uabshp
- Vimeo: <http://vimeo.com/uabshp>
- LinkedIn: [UAB SHP LinkedIn](http://www.linkedin.com/company/uabshp)
- Website: www.uab.edu/shp

The School's Academic Affairs Committee published the following guidelines:

The Academic Affairs Committee proposes the following for social networking vehicles. Online communities like provide opportunities to share and explore interests that enrich the higher education learning experience. However, use them with discretion. UAB social media users are expected to act with honesty, integrity, and respect for others.

Professional Use - Only UAB employees authorized by their departments may use social networking Web sites to conduct University business. The authorized employee/position will serve as the point of contact for the web site. In keeping with University policy¹, the authorized employee may post on a social network profile: the University's name, school, department, and/or unit information, a University email address or University telephone number for contact purposes, or post official department information, resources, calendars, and events. The employee should use care that any personal opinions or opposition to the University either by direct statement or perception not be published.

General Use - The following guidelines are strongly suggested:

1. Use networking sites legally and appropriately. Consider your personal obligation as a citizen of the university. Use proper conduct in your posts regarding the university and your colleagues/fellow students.
2. Consider the use of a student, staff or faculty member to monitor any departmental social pages. All parties need to understand the guidelines presented.
3. Remember, you cannot ensure who does and does not have access to your information. Any text or photo placed online is available to anyone in the world – even if you limit access to your site.
4. Information that you post online may continue to stay on the World Wide Web even after you erase or delete that information from your profiles or blog. Do not post anything that could reflect negatively on you, your family, your friends, and the university.
5. Do not post any confidential or sensitive information online.
6. By agreeing to the terms of use, online communities have your permission to republish your content worldwide and share information with advertisers, third parties, law enforcement, and others.
7. You are legally responsible for your posts on the social networking sites. Be discreet, respectful, and as accurate/factual as you can be in any comments or content you posted online.
8. Potential employers, admissions officers, and scholarship committees often search social networking sites to screen candidates. Your profile will be a part of how others know you.

STUDENT ADVOCACY, RIGHTS AND CONDUCT (SARC)

Student Advocacy, Rights and Conduct (SARC) is responsible for upholding the integrity and purpose of the university through the fair and consistent application of policies and procedures to students' behavior to ensure a community that respects the dignity and right of all persons to reach their highest potential. SARC delivers programs and services in order to promote student safety and success, the

pursuit of knowledge, respect for self and others, global citizenship, personal accountability and integrity, and ethical development. More about SARC can be found here: [Student Advocacy, Rights & Conduct - Student Affairs - News | UAB](#) The UAB student conduct code may be accessed online: [Student Conduct Code \(uab.edu\)](#).

STUDENT HEALTH SERVICES

The University provides prevention, counseling, and treatment services to students through Student Health Services located at 1714 9th Avenue South. The clinic is open from 8:00 a.m. – 5:00 p.m. Monday – Thursday; 9:00 a.m. – 5:00 p.m. Friday, but is closed between noon and 1:00 p.m. daily. Detailed information about services and operating practices is located on the SHS website at www.uab.edu/studenthealth. Appointments may be scheduled by calling 205-934-3580.

TUITION AND FEES

Tuition and fees for the University are published annually under the “Current Students” tab of the UAB website. They may be paid through BlazerNET. There are two tuition rates: Alabama resident (in-state) and Non-resident (out-of-state). Currently, non-resident students who register for online course sections pay resident tuition. Non-resident tuition is charged for on-site courses such as: clinical practicums, independent study courses, and project courses. SHP programs have specific fees attached to programs, courses or laboratories. See the school fees at <https://www.uab.edu/students/paying-for-college/detailed-tuition-and-fees>

Payment deadlines for each semester are published on the official academic calendar and on the UAB website at www.uab.edu/whentopay/. Please note that failure to meet payment deadlines can result in being administratively withdrawn from courses.

WEATHER

Severe weather situations that may affect the safety of students, faculty, and staff are communicated through the same channels as other emergencies. Severe weather precautions are published at www.uab.edu/emergency/preparedness. Other information sources include:

<ul style="list-style-type: none">• Webpage: www.uab.edu/emergency	<ul style="list-style-type: none">• B-ALERT system: www.uab.edu/balert
<ul style="list-style-type: none">• Hotline: (205)- 934-2165	<ul style="list-style-type: none">• WBHM Radio (90.3 FM)

WITHDRAWAL FROM COURSE / PROGRAM

Withdrawal from a course or from your program is an official process and should be discussed with your academic advisor and / or program director. Most programs in the School are full-time and the curricula specifically sequenced. Withdrawal from a course may risk your wait time to register for the class again. You might have to wait for a full year before resuming enrollment in the program. Withdrawals are made through the UAB registration system via the Student Resources tab in BlazerNET. Notice of program withdrawal should be given in writing to the program director. Please refer to the following link

for additional information on withdrawal guidelines: <https://www.uab.edu/students/one-stop/classes/add-drop-and-withdrawal-policy>

SECTION 2 – SHP AND UAB POLICIES

SCHOOL OF HEALTH PROFESSIONS POLICIES

BACKGROUND CHECK AND DRUG SCREEN

POLICY

With the exceptions noted below, students admitted to clinical programs in the School of Health Professions (SHP) will complete a routine drug screening and criminal background check using the vendor(s) with which the School has a current agreement for those services. These screenings should be completed prior to the end of the first term of enrollment. A second routine drug screening and criminal background check using the approved school vendor, or a vendor required by the assigned clinical facility, will be completed prior to placement in a clinical rotation. Any required additional screenings, and/or those specified by waived programs, will be at the discretion of the program.

Students enrolled in SHP programs requiring an internship or other site placement as a component of degree requirements will complete a learning module in the campus learning management system by the end of the first semester of enrollment. They will submit the results of a drug screening and criminal background check from an approved vendor, prior to the end of the semester, immediately preceding the semester for which the internship or site placement occurs.

- School-negotiated fees for these screenings will be the responsibility of the student.
- Students who have completed the screenings as a condition of enrollment in a previous SHP program, are waived from the requisite unless the current program of enrollment also includes an internship or clinical placement component for degree completion.
- Drug screening and background check results performed by an approved vendor, within the most recent twelve months, may fulfill the SHP requirement.
- The rules and regulations governing individual placement sites may include additional provisions and/or more stringent guidelines which supersede this policy. Fees for these screenings are the responsibility of the student.
- Should you fail the drug screening or your background check contains issues that may prevent you from receiving or sitting for licensure, a representative from the Office of the Senior Associate Dean for Academic and Faculty Affairs will contact you. Depending upon the outcome, you may be dismissed from the program. See your program's guidelines regarding specific consequences.

Programs requiring a background check and drug screening by the end of the first semester of enrollment and again, prior to clinical placement are the following:

Doctor of Physical Therapy

Occupational Therapy Doctorate – (entry level)

Master of Science in Biotechnology

Master of Science in Clinical Laboratory Science
Master of Science in Genetic Counseling
Master of Science in Health Administration (Residential)
Master of Science in Health Physics
Master of Science in Nuclear Medicine Technology
Master of Science in Nutrition Sciences – Dietetic Internship Clinical Track
Master of Science in Nutrition Sciences – Dietitian Education Program
Graduate Certificate in Dietitian Education
Master of Science in Nutrition Sciences – Prior Learning Clinical Track
Master of Science in Occupational Therapy – (entry level)
Master of Science in Physician Assistant Studies

Programs requiring the background check and drug screening learning module during the first semester of enrollment, a criminal background check and drug screening by the end of the semester immediately preceding clinical placement or internship are the following:

Bachelor of Science in Health Care Management
Bachelor of Science in Biomedical Sciences
Bachelor of Science in Biobehavioral Nutrition and Wellness Major

*Programs waived from the Background Check and Drug Screening requirement are the following:

Doctor of Philosophy in Administration Health Services – all concentrations
Doctor of Philosophy in Rehabilitation Sciences
Doctor of Science in Healthcare Leadership
Graduate Certificate in Biotechnology Regulatory Affairs
Graduate Certificate in Clinical Informatics
Graduate Certificate in Health Care Quality and Safety
Graduate Certificate in Low Vision Rehabilitation
Master of Science in Health Administration (International and Executive tracks)
Master of Science in Health Care Quality and Safety
Master of Science in Health Informatics
Master of Science in Healthcare Simulation
Master of Science in Nutrition Sciences - Research Track
Master of Science in Nutrition Sciences – Lifestyle Management and Disease Prevention Track

Attachments:

- ☐ Procedure for Criminal Background Check and Drug Screening
- ☐ Student Instructions
- ☐ Consent to Drug Testing and Release of Drug Test Results
- ☐ Consent to Criminal Background Check and Release of Results

Note: Replaces Criminal Background Check and Drug Screening Policy 2012

* Students enrolled in exempt programs who participate in a course(s) incorporating community, corporate or other high impact, out-of-classroom activities such as service learning, capstone projects or other hands-on learning experiences, may be required by placement sites to submit background check and drug screening results. Students are responsible for the fees associated with such screening

Attachment 1: Procedure for Criminal Background Check and Drug Screening

1. Program directors (or designees) provide all accepted students with instructions for completing a background check and drug screening.
2. Students request the specified package on the approved SHP vendor website and pay the required fees.
3. Assigned designee(s) in the SHP Office for Student Recruitment, Engagement and Success (OSRES) review and provide compliance reports for programs.
4. In the event a report reveals information which may prevent a student from being placed in a clinical rotation or internship site or potentially makes them ineligible for professional certification or licensure, the OSRES contacts the individual student to discuss the implications of said information in the report. If such information exists, the student must acknowledge in writing their decision to continue in the program's didactic phase with the understanding that a degree cannot be awarded without completion of required clinical practice or internship placement.
5. Prior to clinical placement, program directors (or designees) will provide students with instructions to complete a repeat background check and drug screening. In addition, some sites require a social media background check. The package code for this is different than the initial drug screen and background package code. If a vendor is specified by the placement site or preceptor, the preceptor (or designee) will provide students with instructions.
6. Students will follow the instructions provided by sites or placements if they go beyond those of the School.
7. Students are responsible for fees required for screenings.
8. OSRES designee discusses with individual students implications for information which may inhibit placement at a clinical or internship site.
9. Students provide preceptors or internship supervisors with the required information from the results of their background check and drug screening reports.

Attachment 2:



STUDENT INSTRUCTIONS FOR UNIVERSITY OF ALABAMA AT BIRMINGHAM SCHOOL OF HEALTH PROFESSIONS

About CastleBranch.com

CastleBranch is a secure platform that allows you to order your background check & drug test online. Once you have placed your order, you may use your login to access additional features of CastleBranch, including document storage, portfolio builders and reference tools. CastleBranch also allows you to upload any additional documents required by your school.

Order Summary

Required Personal Information

- o In addition to entering your full name and date of birth, you will be asked for your Social Security Number, current address, phone number, and e-mail address.

Drug Test (LabCorp or Quest Diagnostics)

- o Within 24-48 hours after you place your order, the electronic chain of custody form e-chain will be placed directly into your CastleBranch account. This e-chain will explain where you need to go to complete your drug test.

Payment Information

- o At the end of the online order process, you will be prompted to enter your Visa or MasterCard information. Money orders are also accepted, but will result in a \$10 fee and additional turn-around-time.

Place Your Order

Go to: www.castlebranch.com and enter package code:

AH01 - Background Check and Drug Test

You will be required to enter your program under "Student Information" classification

You will then be directed to set up your CastleBranch profile account.

View Your Results

Your results will be posted directly to your CastleBranch profile account. You will be notified if there is any missing information needed in order to process your order. Although 95% of background check results are completed within 3-5 business days, some results may take longer. Your order will show as "In Process" until it has been completed in its entirety. Your school's administrator can also securely view your results online with their unique username and password. If you have any additional questions, please contact the Service Desk at 888.723.4263 x 7196 or visit the website to submit your question at: <https://www.castlebranch.com/contact-us>.

Attachment 3

UAB School of Health Professions

Consent to Drug Testing and Release of Drug Test Results

For and in consideration of my participation in clinical education experiences, I understand that I will be required to submit to drug testing as a prerequisite to my assignment to a clinical site. I hereby consent to be tested for drugs and consent to the release of any such drug test results to the Office of academic and Faculty Affairs, my Program Director, and the subsequent release of such drug test results to the clinical site to which I am assigned.

I understand that any clinical site to which I am assigned has the right to require additional drug testing as a condition of my placement. I hereby consent to any facility-required drug testing and consent to the release of such drug test results to my Program Director.

Student's Signature

Date

Signature of Parent/Legal Guardian
(required only if student is under 19)

Date

Attachment 4

UAB School of Health Professions

Consent to Criminal Background Check and Release of Results

For and in consideration of my participation in clinical education experiences, I understand that I will be required to submit to a criminal background check as a prerequisite to my assignment to a clinical site. I hereby consent to have a criminal background check and consent to the release the results to the Office of Academic and Faculty Affairs, my Program Director, and the subsequent release of the results to the clinical site to which I am assigned.

I understand that any clinical site to which I am assigned has the right to require additional background check as a condition of my placement. I hereby consent to any facility-required background check and consent to the release of the results of the check to my Program Director.

Student's Signature

Date

Signature of Parent/Legal Guardian
(required only if student is under 19)

Date

COVID-19 CAMPUS ENTRY

UAB is committed to making our campus among the safest in America as students return at the right time and under the right conditions.

- Students admitted to the School of Health Professions will follow university guidelines for COVID-19 entry found at: [Students Overview - United | UAB](#)
- Guidelines include wearing a mask while on campus; maintaining proper social distancing; washing hands often; cleaning and disinfecting frequently touched objects and surfaces; and completing required training and reporting tasks.
- All UAB students coming to campus for the fall semester 2021 will have access to a free COVID-vaccination through Student Health Services. See information at <https://www.uab.edu/uabunited/covid-19-vaccine>
- Vaccinated students should upload an image of their vaccination card through the Student Health Patient Portal at https://studentwellness.uab.edu/login_directory.aspx.
- Prior to placement in clinical settings, SHP students will follow the UAB School of Health Professions Plan/Checklist for Students entering Clinical Experiences.

EMERGENCY PLAN - SHPB

https://www.uab.edu/shp/home/images/PDF/SHPB_BUILDING_EMERGENCY_PLAN_2019.pdf

FINAL COURSE GRADE APPEAL PROCESS

www.uab.edu/shp/home/images/PDF/grievance_procedures.pdf

PLAGIARISM

www.uab.edu/shp/home/images/PDF/Plagiarism_Policy.pdf

Please note that all papers submitted for grading in any SHP program may be reviewed using the online plagiarism monitoring software, Turnitin.com. All documents submitted to Turnitin.com are added to their database of papers used to screen future assignments for plagiarism.

UAB POLICIES

CLASSROOM BEHAVIORS

ATTENDANCE / ABSENCE (UNDERGRADUATE)

<http://catalog.uab.edu/undergraduate/progresstowardadegree/#enrollmenttext>

HEALTH

AIDS AND HIV INFECTION

www.uab.edu/policies/content/Pages/UAB-HS-POL-0000252.aspx

BODY FLUID EXPOSURE

www.uab.edu/humanresources/home/employeehealth/reportingexposures

IMMUNIZATIONS

www.uab.edu/policies/content/Pages/UAB-AD-POL-0000086.aspx

SUBSTANCE USE/ABUSE

ALCOHOLIC BEVERAGES, USE AND CONSUMPTION

www.uab.edu/policies/content/Pages/UAB-AD-POL-0000071.aspx

DRUG FREE CAMPUS (GENERAL POLICY)

<https://www.uab.edu/policies/content/Pages/UAB-UC-POL-0000804.html>

NONSMOKING

www.uab.edu/policies/content/Pages/UAB-HS-POL-0000110.aspx

TECHNOLOGY GUIDELINES

COMPUTER AND NETWORK RESOURCES (ACCEPTABLE USE)

www.uab.edu/policies/content/Pages/UAB-IT-POL-0000004.aspx

COMPUTER SOFTWARE COPYING AND USE

www.uab.edu/policies/content/Pages/UAB-IT-POL-0000028.aspx

INCLUSIVENESS

EQUAL OPPORTUNITY AND DISCRIMINATORY HARASSMENT

www.uab.edu/policies/content/Pages/UAB-BT-POL-0000052.aspx

RESEARCH AND SCHOLARLY ACTIVITIES

ACADEMIC INTEGRITY CODE

https://www.uab.edu/compliance/images/FINAL_Academic_Integrity_Code_2021-June-22.pdf

ETHICAL STANDARDS IN RESEARCH AND OTHER SCHOLARLY ACTIVITIES

www.uab.edu/policies/content/Pages/UAB-RA-POL-0000263.aspx

PATENT (INTELLECTUAL PROPERTY)

www.uab.edu/policies/content/Pages/UAB-RA-POL-0000115.aspx

FIREARMS, AMMUNITION, AND OTHER DANGEROUS WEAPONS

www.uab.edu/policies/content/Pages/UAB-HR-POL-0000257.aspx

Note: Additional university policies may be located by searching the UAB Policies and Procedures Library available online at www.uab.edu/policies/Pages/default.aspx.

SECTION 3 – DEPARTMENTAL INFORMATION

OVERVIEW OF THE PROFESSION

Physician Assistants (PAs) are healthcare professionals licensed to practice medicine under the supervision of a physician. Individual state laws define the scope of practice and prescribing authority of Physician Assistants. In general, most states authorize PAs to prescribe controlled and non-controlled substances and perform any task delegated to them by a supervising physician. To be eligible for licensure, PAs must graduate from an Accreditation Review Commission on Education for the Physician Assistant, Inc. (ARC-PA), accredited Physician Assistant program, and pass the Physician Assistant National Certification Examination (PANCE).

The Physician Assistant, functioning under the supervision of the physician, is expected to perform appropriately delegated tasks autonomously. Yet, the Physician Assistant will always remain under the guidance and counsel of a physician.

DESCRIPTION AND OVERVIEW OF THE PHYSICIAN ASSISTANT STUDIES PROGRAM

The UAB Physician Assistant Studies Program is a 115 credit-hour, 27-month, Master of Science in Physician Assistant Studies Program. It was founded in 1967 and accepted its first class of Master's degree students in 2005.

The Mission of the PA program is to attract and train culturally diverse individuals with the knowledge, skills, and judgment needed to provide *competent and compassionate* healthcare to all. This mission is consistent with the mission of the School of Health Professions, in which we work together to educate health professionals that will improve the healthcare services of the citizens of Alabama. The PA program and UAB are dedicated to excellence in teaching, research, scholarship, and community service.

Accreditation

The Accreditation Review Commission on Education for the Physician Assistant, Inc. (ARC-PA) accredits the UAB Physician Assistant Studies Program as an entry-level Physician Assistant educational program.

Term of Enrollment

Fall semester

Degree Conferred

Master of Science in Physician Assistant Studies (MSPAS) degree

Professional Certification

Graduates are eligible to apply for the certification examination sponsored by the National Commission on Certification of Physician Assistants (NCCPA).

The University of Alabama at Birmingham (UAB) is committed to the policy that all persons shall have equal access to its programs, facilities, and employment without regard to race, color, religion, national origin, sex, age, sexual orientation, disability or veteran status.

ORGANIZATION OF THE PROGRAM

The UAB Physician Assistant Studies Program is a graduate-level program located within the Department of Clinical & Diagnostic Sciences (CDS), in the School of Health Professions (SHP).

School of Health Professions

Dean: Andrew J. Butler, PhD, MPT, MBA

Department of Clinical and Diagnostic Sciences

Department Chair: Kathy Nugent, PhD

Physician Assistant Studies Program

Program Director: M. Tosi Gilford, MD, PA-C

Medical Director: Donald Reiff, MD

Associate Medical Director: Rowell S. Ashford, II, MD

PA PROGRAM PRINCIPAL FACULTY



M. Tosi Gilford, MD, PA-C

Program Director
Assistant Professor

Department of Clinical & Diagnostic Sciences
1716 9th Avenue South, SHPB 482
Birmingham, AL 35294
(205) 934-6941
tgilford@uab.edu

Dr. Tosi Gilford joined the UAB Physician Assistant Studies Program in March of 2015. She is a Family Practice physician who is originally from Los Angeles, CA. She completed her undergraduate studies at California State University Dominguez Hills in Carson, CA; receiving a BS in Public Administration with a Health Services concentration. She received a second BS degree in Health Sciences, as well as a Physician Assistant Certificate from Charles R. Drew University of Medicine & Science in Los Angeles, CA. After graduating from PA school, she moved to Birmingham, AL, where she practiced for one year as an Internal Medicine PA-C at Princeton Baptist Medical Center. She then went on to further her education and received a Doctorate of Medicine from Windsor University School of Medicine, and completed her Family Medicine residency at The University of Alabama at Birmingham - Selma Family Medicine Program.

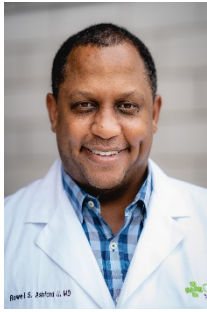


Donald Reiff, MD

Medical Director
Professor

Department of Clinical & Diagnostic Sciences
Kracke Building, KB 110
(205) 975-3030
dreiff@uabmc.edu

Dr. Reiff is a graduate of Georgetown University School of Medicine in Washington, DC. He completed his residency in General Surgery at The University of Alabama at Birmingham in 2003, and currently serves as the Associate Medical Director of the Trauma/Burn Intensive Care Unit at UAB University Hospital. He is a Professor in the Department of Surgery and currently serves as the Chief Medical Officer of the UAB Health System.



Rowell S. Ashford II, MD
Associate Medical Director
Assistant Professor

Department of Clinical & Diagnostic Sciences
1716 9th Avenue South, SHPB 482
Birmingham, AL 35294
rashford@uab.edu

Dr. Rowell S. Ashford II is a Board-Certified OB/GYN who has been in practice for 21 years providing care for medically underserved communities in the Birmingham area. He is originally from Arizona, where he attended Arizona State University for his undergraduate degree in Microbiology. He attended The University of California at San Francisco for medical school and subsequently The University of Alabama at Birmingham for his OB/GYN residency training. After completing his medical education, he worked at Cooper Green Hospital for 13 years providing care for the low-income residents of Jefferson County. In 2013, when Cooper Green Hospital closed, Dr. Ashford joined the Baptist Health Centers physician group. In 2018, Dr. Ashford joined Cahaba Medical Care, which is a Federally Qualified Health Center (FQHC) charged with providing medical care for uninsured and underinsured individuals. Dr. Ashford's medical interests include robotic surgery, healthcare disparities and increasing participation of minority populations in clinical trials.



Cody Black, MHS, PA-C
Director of Academic Education
Assistant Professor

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(205) 934-7563
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Mr. Black joined the faculty in December of 2019. He obtained a Bachelor of Science degree in Psychology from the University of Alabama at Birmingham (UAB) in 2008 and earned a Master of Health Science degree in Physician Assistant Studies from the University of South Alabama in 2010. Mr. Black has been in PA education since 2013. He is committed to providing a foundation of knowledge that will help to develop the necessary skills needed for our students to advance in the PA profession. Mr. Black has practiced clinically in the settings of urgent care, internal medicine and sleep medicine. He has also served on the Physician Assistant Education Association (PAEA) Exam Development Board since 2017.



Wei Li, PhD
Associate Professor

Department of Clinical & Diagnostic Sciences
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(205) 996-2656
wli@uab.edu

Dr. Wei Li has more than 10 years' experience in educating medical professionals. In his career of medical education, he has taught a variety of subjects including anatomy, clinical medicine, evidence-based medicine, general biology, genomics, physiology, pathology, and patient evaluation. He has experience with both undergraduate and graduate level studies, as well as performing outcomes research. In addition, he has served as an active reviewer and editor for several professional journals including the Journal of Alzheimer's Disease, Journal of Diabetes, Journal of Brain Imaging and Behavior, and The American Journal of the Medical Sciences.



Dina DeMarco, MS, PA-C
Assistant Professor

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(205) 996-2656
ddemarco@uab.edu

Ms. DeMarco joined the Physician Assistant Studies Program in July of 2020. She is an alumna of A.T. Still University Physician Assistant Program, graduating in 2004 with a Master of Science in Physician Assistant Studies. Since graduating, she has dedicated herself to mastering the art of first-assisting, and has more than 15 years' experience of practicing as a multispecialty surgical PA across the country. Ms. DeMarco's clinical experiences have afforded her an opportunity to train utilizing several highly specialized surgical techniques including advanced maxillofacial reconstruction, robotic laparoscopy, C-sections, advanced hepatobiliary surgery, and advanced laparoscopy. Surgical skills mastered while practicing in these areas, along with those obtained while working in clinic, in the hospital and in critical care settings, provides her with a strong foundation to help train the next generation of physician assistants who are ready to transition to practice in any surgical subspecialty upon graduation. Ms. DeMarco has served as an adjunct faculty and preceptor for the University of Utah, George Washington University, Idaho State, and Touro University PA Programs.



Heather F. Neighbors, MSPAS, PA-C

Director of Clinical Education

Assistant Professor

Department of Clinical & Diagnostic Sciences

1716 9th Avenue South, SHPB 487

Birmingham, AL 35294

(205) 975-0342

hneighbors@uab.edu

Mrs. Heather Neighbors joined the faculty in August of 2018. She is a graduate of the UAB Surgical Physician Assistant Studies Program and completed her studies in 2008. She received her Bachelor of Arts degree in History from Auburn University in 2004. Upon graduating from the PA program, Mrs. Neighbors joined a Vascular Surgeon in private practice in Birmingham, where she practiced for ten years. While working in the operating room of multiple hospitals in Birmingham, Mrs. Neighbors recognized the vital importance of clinical training and experience. This knowledge motivated her to join the faculty as the Director of Clinical Education. Mrs. Neighbors is committed to the education of our future Physician Assistants and is motivated to help provide the best didactic and clinical training to our students, using the wealth of knowledge she brings from her years of clinical experience.



Jana Villanueva, MSPAS, PA-C

Clinical Coordinator

Assistant Professor

Department of Clinical & Diagnostic Sciences

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Birmingham, AL 35294

(205) 996-2911

janav@uab.edu

Mrs. Villanueva joined the faculty in November of 2019. She received her Bachelor of Science degree in 2009 from Bryan College in Dayton, TN and earned a Master of Medical Science degree in Physician Assistant Studies in May of 2014 from Wake Forest School of Medicine, in Winston-Salem, NC. Prior to joining the faculty, Mrs. Villanueva practiced for 3 years as a primary care PA. While providing medical care at Wake Forest Family and Community Medicine and in the Student Health Clinic at High Point University, she also served as a preceptor, where she helped to train students in the practice of medicine. Mrs. Villanueva has a passion for teaching, mentorship and providing medical care to the underserved. She is also committed to being a champion to the PA profession, by providing didactic and clinical instruction to our future clinicians, through evidence-based patient care and inquiry-based learning.

ADMISSION POLICIES

Admission with Contingencies

A student who has not completed either a Baccalaureate degree or the full complement of pre-requisite courses at the time of application and selection may be provisionally admitted to the program, contingent on successful completion of these courses ***by the first day of the fall semester of classes***. *Failure to do so will result in revoking the offer of admission to the student and/or dismissal from the PA program and the Graduate School.*

Advanced Placement Policy

Advanced placement is not permitted by the PA program. No student may omit or waive any of the required didactic year courses or clinical year rotations.

Credit for Prior Learning Experiences

The PA program does not grant advanced placement nor is credit given for prior experiential learning. Credit is not offered for prior experiential learning or courses provided by another PA program.

ESSENTIAL REQUIREMENTS

Fundamental tasks, behaviors, and abilities are necessary to successfully complete the academic and clinical requirements of the program, and to satisfy licensure/certification requirements. Students requesting disability accommodations must do so by submitting a disability accommodation request in writing to the Office of Disability Support Services (DSS). *Requests must be submitted each semester.*

TECHNICAL STANDARDS

UAB PA Technical (Performance) Standards

Revised 2018

Students should be aware that the PA program requires that all students demonstrate the technical skills needed to complete the entire PA program curriculum. These skills include the ability to think critically, communicate effectively, utilize computerized information technology, and possess the visual, auditory and motor skills needed to evaluate and treat patients effectively.

Students who are not able to demonstrate the required technical skills needed to successfully complete the PA may be dismissed from the program until such time that they can demonstrate technical skill proficiency. *A reasonable attempt will be made by the PA program to accommodate students with disabilities, as required by the Federal Disabilities Act.*

Minimum Technical (Performance) Standards

Critical Thinking: Students must possess the intellectual capabilities required to complete the full curriculum and achieve the level of competence delineated by the faculty. Critical thinking requires the

intellectual ability to measure, calculate, synthesize, and analyze a large and complex volume of medical and surgical information. Students in the program must also be able to perform applicable demonstrations and experiments in the medical sciences.

Computer Technology Skills: Students must be able to utilize computerized information technology to access and manage on-line medical information, participate in computerized testing as required by the curriculum, conduct research, prepare multimedia presentations, and participate in the management of computerized patient records and assessments.

Communication Skills: Students must be able to speak clearly and effectively in order to elicit and relay medical information. They must also be able to communicate effectively and legibly in writing.

Visual Ability: Students must have the visual acuity needed to evaluate a patient during a physical exam and perform a wide range of technical procedures involved in the practice of medicine and surgery.

Hearing and Tactile Ability: Students must have the motor and sensory functions needed to elicit information from patients by palpation, auscultation and percussion, as well as perform a wide range of technical procedures involved in the practice of medicine and surgery.

Motor and Fine Skills: Students must be able to execute the physical movements required to maneuver in small places, calibrate and use equipment, position and move patients, and perform the technical procedures involved in the practice of medicine and surgery.

Interpersonal Ability: Students must possess a wide range of interpersonal skills, including but not limited to: (1) the emotional health required for management of high stress situations while maintaining their full intellectual abilities; (2) the ability to exercise good judgment; (3) the ability to complete all assigned patient care responsibilities; (4) the ability to manage time (show up on time, begin and complete tasks on time); (5) the ability to develop a mature, sensitive and effective relationship with medical colleagues, clinical and administrative staff, patients and families; (6) the ability to identify, use, understand, and manage emotions in positive ways to relieve stress, communicate effectively, empathize with others, overcome challenges and diffuse conflict; and (7) the ability to recognize your own emotional state and the emotional states of others, and engage with people in a way that draws them to you.

REGISTRATION

It is the responsibility of the student to register for the appropriate courses each semester. **No student will be able to attend classes or clinical sites without being properly registered.**

Web Registration

Students may register via the web, any time after their assigned time, up to, and prior to the last working day before classes begin. BlazerNET is available 24/7; however, the Add/Drop function within Registration

Tools will end when the open registration period closes. *Students experiencing difficulty with BlazerNET should call the Registrar's Office or email registrar@uab.edu.*

Follow these steps to register using BlazerNET:

1. Access BlazerNET with your web browser, then log in with your BlazerID and strong password
2. Click on the Student Resources tab
3. View the Registration Tools channel. Select either Look Up Classes to gather CRNs or Add or Drop Classes if you already have the course reference numbers
4. Register for the appropriate course by clicking the checkbox to the left of the course on the Look Up Classes screen or by submitting the CRNs in the blocks on the Add or Drop Classes page
5. Please make sure your course schedule states "Web Registered" and that you can view all of your classes on the Student Detail Schedule page. A BlazerNET Registration Guide is available on the Student Resources tab if you need more assistance

Late Registration (Add/Drop Classes)

Starting with the first day of regular classes, a late registration fee will be charged. If you begin registration during the late registration period, additional steps are necessary.

CLASSROOM AND LAB SUPPLIES

Students are required to purchase medical equipment for use during the curriculum. The program has a limited number of instruments, including stethoscopes, ophthalmoscopes, scissors, hemostats, and surgical instruments available for loan should a need arise. Students will be liable for the cost of replacing loaned instruments if they are lost or stolen.

SCHOLARSHIPS AND LOANS

All students enrolled at UAB are eligible to apply for financial aid. To be considered, a completed application must be on file at least 45 days before the beginning of the term in which financial assistance is requested. Because many financial aid programs have limited funding, students are advised to contact the UAB Financial Aid Office and complete the application process by May 1st for fall semester aid. More information is available by contacting UAB Office of Financial Aid Office, Lister Hill Library, Room G40, 1700 University Boulevard, at (205) 934-8223.

Students should note that scholarships and loans do not change the total amount of money students are eligible to receive. Loan and scholarship money simply exchanges unsubsidized money (loans) for subsidized money (scholarship or free money), thus reducing how much money students have to pay back following completion of their education.

Federal Scholarships and Loans

Some of the educational loans and grants available from the federal government can be found on this website: <https://studentaid.ed.gov/sa/types/loans>

National Health Service Corps (NHSC)

Information can be found at: <http://nhsc.hrsa.gov/>

Indian Health Service (IHS)

Information can be found at: <http://www.ihs.gov/>

Military

Check with appropriate military website for more information on their scholarship programs

Please consult the UAB Financial Aid Office website for more information regarding student loans at:

<https://www.uab.edu/students/paying-for-college/financial-aid>.

PA Scholarships

Mr. & Mrs. Elbert H. Purser Endowed Scholarship: The Purser Scholarship was established in 1979 and subsequently endowed in 1983 through a gift from the Elbert H. Purser Trust. Applicants must be admitted to or enrolled in the UAB Physician Assistant Studies Program and must be natives or permanent residents of the state of Alabama. Selection is made by a committee of PA program faculty and annual awards are determined based on the availability of funds.

PA Loans

Henry L. Laws Loan: A loan for any first or second year student in good standing who exhibits financial need. May be awarded only once and amounts vary according to need. This loan is established and supported by alumni.

Academic Common Market

The Academic Common Market is an interstate agreement among selected southern states for sharing academic programs at both the baccalaureate and graduate level. Participating states are able to make arrangements for their residents who qualify for admission to enroll in specific programs in other states on an in-state tuition basis, if a comparable program is not available in the home state. Contact your state coordinator for more information: www.sreb.org.

RESOURCES**American Academy of Physician Assistants (AAPA) Information Center**

950 North Washington Street

Alexandria, VA 22314-1552

www.aapa.org | (703) 836-2272

National Commission on Certification of Physician Assistants (NCCPA)

12000 Findley Road, Suite 1000

Johns Creek, GA 30097-1409

<http://www.nccpa.net> | (678) 417-8100

Physician Assistant Education Association (PAEA)

300 N. Washington Street, Suite 710

Alexandria, VA 22314-2544

www.paeaonline.org

Alabama Society of Physician Assistants (ASPA)

P.O. Box 1900

Montgomery, AL 36102-1900

www.myaspa.org | (334) 315-6112

CURRICULUM

The PA program follows the UAB academic calendar. The final schedule for each class will be posted in the course syllabus, found in the course site in the learning management system (Canvas), on the first day of class for the semester.

Students attend classes on the UAB campus during the first 4 semesters of enrollment. The didactic phase of the curriculum consists of both biological sciences and clinically-related courses. All courses are required and must be successfully completed with a minimum grade of “C” (70%) in all PA courses AND an overall cumulative 3.0 GPA in all PA program course work, *prior to beginning the clinical phase of training.*

ASSESSMENTS AND EVALUATIONS

Grading Scale for the Didactic Year

The PA program utilizes the following grading scale for all didactic courses:

A = 90 - 100%

B = 80 - 89%

C = 70 - 79%

F = ≤ 69% * *The program does not award a grade of “D”*

Grading Scheme for the Clinical Year

The PA program utilizes a pass/fail grading scheme for all clinical courses, which is outlined in the Clinical Year Academic / Grading Policies section of the Student Handbook.

DIDACTIC CURRICULUM

Fall I	Semester Hours (18)
PA 601 Human Gross Anatomy and Lab	4
PA 602 Medical Physiology	4
PA 605 Clinical Pathology	4
PA 610 Clinical Laboratory Medicine	3
PA 615 Introduction to the Profession	1
CDS 505 Professional Skills Development	1
GC 535 Medical Genetics Across the Lifespan	1
Spring I	Semester Hours (16)
PA 603 Pharmacology I	3
PA 606 Clinical Medicine I	6
PA 608 Surgical Disease I	3
PA 611 History and Physical Examination	3
PA 616 Electrocardiography	1
Summer I	Semester Hours (17)
PA 604 Pharmacology II	3
PA 607 Clinical Medicine II	6
PA 609 Surgical Disease II	3
PA 613 Surgical Techniques	3
PA 619 Fundamentals of Clinical Research	2
Fall II	Semester Hours (14)
PA 614 Operating Room Techniques	2
PA 617 Applied Behavioral Medicine	3
PA 618 Risk Management	1
PA 620 Analysis of Professional Literature	2
PA 634 Simulated Clinical Concepts	2
PA 635 Special Populations in Medicine	2
HCM 530 Healthcare Delivery and Reimbursement	2
TOTAL DIDACTIC YEAR	65 Hours

Didactic Course Prerequisites

The PA program has a set (lock-step) course schedule for each semester. Enrollment in courses offered in each semester of the program requires successful completion of all courses offered in the preceding semester, with a final grade of “C” (70%) or better. Because of the program’s inability to teach courses out of their established sequence, students who fail to successfully complete a course in a given term will be decelerated and will be allowed to retake the course when it is taught the following year.

Course	Prerequisite Course Completion
PA 604 Pharmacology II	PA 603 Pharmacology I
PA 606 Clinical Medicine I	PA 601, PA 602, PA 605, PA 610
PA 607 Clinical Medicine II	PA 606 Clinical Medicine I
PA 608 Surgical Disease I	PA 601 Human Gross Anatomy and Lab
PA 609 Surgical Disease II	PA 608 Surgical Disease I
PA 613 Surgical Techniques I	PA 601 Human Gross Anatomy and Lab
PA 614 Operating Room Techniques	PA 613 Surgical Techniques
PA 620 Literature Evaluation	PA 619 Fundamentals of Clinical Research
PA 698 Presentation of Research Project	PA 620 Literature Evaluation

Didactic Year Objectives

Upon completion of the didactic year, Physician Assistant students will be able to perform the following tasks and functions:

- Demonstrate knowledge of human anatomy, physiology, and pathology of disease.
- Demonstrate proficiency in performing a complete history and physical examination.
- Demonstrate knowledge of the evaluation and management of common diseases and disorders encountered in general medicine, pediatrics, women’s health, and psychiatry.
- Demonstrate knowledge of the evaluation and management of common diseases and disorders encountered in general surgery, cardio-thoracic surgery, plastic surgery, neurosurgery, pediatric surgery, and orthopedic surgery.
- Demonstrate a proficiency in the basic surgical skills necessary to function as a Physician Assistant, including knot-tying, suturing, minor invasive procedures, first assisting, catheterization, and wound care.
- Demonstrate knowledge of medical literature databases, literature searches, clinical research designs, basic medical statistics, and interpretation of medical literature.
- Demonstrate an ability to order and interpret laboratory tests, x-rays, electrocardiograms, and other diagnostic studies in primary care medicine and surgery.
- Demonstrate proficiency in CPR and ACLS management of acutely ill patients.
- Demonstrate knowledge of infection control, universal precautions, quality assurance, and safety issues utilized in hospital settings.

- Demonstrate knowledge of the history of the PA profession, medical malpractice, enabling legislation, medical practice guidelines, medical ethics, and professional behavior.
- Demonstrate knowledge of professional behavior, and an appropriate level of sensitivity to socioeconomic and human rights issues, including appropriate management of patients irrespective of religion, race, gender, disability, socioeconomic level, and sexual preference.
- Demonstrate knowledge of PA professional limitations.
- Demonstrate a commitment to life-long professional growth and medical education.

Goals of the Didactic Curriculum

- Students will obtain a thorough knowledge of physiology, anatomy, neuroanatomy, pathology, and pharmacology.
- Students will become proficient at taking a complete medical and surgical history and performing a complete physical examination.
- Students will obtain knowledge of the evaluation and management of common disorders in general medicine, pediatrics, women's health, and psychiatry.
- Students will obtain knowledge of the evaluation and management of common disorders in general surgery, cardio-thoracic surgery, plastic surgery, neurosurgery, pediatric surgery, and orthopedic surgery.
- Students will become proficient in the technical skill necessary to function as Physician Assistants, including knot-tying, suturing, minor invasive procedures, first assisting, catheterization, and wound care.
- Students will become familiar with medical literature databases and literature searches, clinical research designs, basic medical statistics, and interpretation of medical literature.
- Students will become CPR and ACLS Certified and capable of assessing and managing the acutely ill patient and interpreting 12-lead electrocardiogram and rhythm strips.
- Students will obtain a thorough knowledge of infection control, universal precautions, and safety issues in the hospital setting.
- Students will become familiar with medical malpractice issues, enabling legislation, practice guidelines, medical ethics, and appropriate professional behavior.

CLINICAL CURRICULUM

Spring II	Semester Hours (17)
PA 621 Clinical Service I	4
PA 622 Clinical Service II	4
PA 623 Clinical Service III	4
PA 624 Clinical Service IV	4
PA 642 Senior Seminar I	1
Summer II	Semester Hours (18)
PA 625 Clinical Service V	4
PA 626 Clinical Service VI	4
PA 627 Clinical Service VII	4
PA 629 Clinical Service IX	4
PA 643 Senior Seminar II	1
PA 698 Presentation of Research Project	1
Fall III	Semester Hours (15)
PA 630 Clinical Service X	4
PA 631 Clinical Service XI	4
PA 632 Clinical Service XII	4
PA 644 Senior Seminar III	3
TOTAL CLINICAL YEAR	50 Hours
TOTAL CURRICULUM HOURS	115 Hours

CLINICAL YEAR COURSES

To maximize the students' experience during their clinical rotation, we feel it necessary to complete the entire rotation without disruption.

Required Core Rotations

Seven, 4-week rotations are required in the following disciplines: Emergency Medicine, Family Medicine, Internal Medicine, Women's Health, Psychiatry, Pediatrics, and General Surgery.

Required Elective Surgical Rotation

One, 4-week rotation is required in a surgical elective. *Students who are enrolled in the dual degree MSPAS/MPH program will be required to complete their internship hours during their elective rotation.*

Additional Required Elective Rotations

Three, 4-week rotations of the student's choice are allowed based on rotation availability. Possible elective rotations include but are not limited to: Additional core rotation (at a different site), Orthopedics,

Cardiovascular Surgery, Thoracic Surgery, Neurosurgery, Trauma Surgery, Plastic Surgery, Urology, Inpatient Medicine, Dermatology, Oncology, Endocrinology, Neonatology, Cardiology, Palliative Medicine, or other approved specialty area.

Clinical Year Prerequisites

To enter the clinical year, students must have obtained the following:

- A minimum grade of a “C” in all PA didactic courses AND an overall 3.0 GPA in all PA program course work. *No graduate school course work other than that obtained in the PA program will be considered and factored into the GPA.*
- ***Students will not be able to enter the clinical year on academic probation.***
- Maintain enrollment in a comprehensive health insurance program while matriculating through the PA program.
- Prior to entering the clinical year, students will be required to provide documentation that the following vaccines are current and up-to-date: MMR, Tdap, Hepatitis B, Varicella, meningococcal, and tuberculosis. A complete list of immunization requirements can be found at: <https://www.uab.edu/students/health/medical-clearance/immunizations/level-3b>.
- Prior to entering the clinical year, students will be required to complete a background check and drug screen. This MUST be completed by the end of the prior semester (fall term). If it is not completed, students will not be allowed to begin their clinical rotations.
- Must have a current BLS and ACLS Certification that does not expire until after graduation.

Clinical Year Objectives

Upon completion of the clinical year, students will be able to perform the following tasks and functions at the level of a practicing Physician Assistant:

- Demonstrate proficiency in obtaining and recording patient assessments including a complete medical history and physical exam, daily progress review, pre-operative and post-operative assessments, and discharge summaries.
- Demonstrate a high level of competency in the technical skills needed to perform as a PA.
- Demonstrate an appropriate level of professional behaviors, including a respectful and caring attitude toward patients and a willingness to function as a cooperative member of the healthcare team.
- Demonstrate an understanding of, and adherence to, the clinical limitations of a PA.
- Demonstrate the knowledge required to order and interpret common diagnostic studies.
- Demonstrate the knowledge needed to establish a diagnosis and/or differential diagnosis for common medical and surgical disorders.
- Demonstrate the knowledge and skills needed to establish a treatment plan for common medical and surgical diseases and disorders.
- Demonstrate the ability to assist the surgeon in all delegated tasks, including first-assisting, wound closure, hemostasis, suture tying, and other invasive procedures.
- Demonstrate proficiency in recording Progress/SOAP Notes, Procedure Notes, Daily Orders, Discharge Summaries, Operative Notes, Pre-operative Orders, and Post-operative Orders.
- Demonstrate an adequate level of knowledge to recognize and refer (to their supervising physician) complicated medical and surgical problems that are beyond the capabilities of a PA.

- Demonstrate the knowledge required to counsel patients about common surgical and medical diseases and disorders.
- Demonstrate the knowledge and fortitude needed to conduct their personal and professional lives in a legal and ethical manner.
- Demonstrate a working knowledge of quality assurance and management.
- Demonstrate an appropriate level of sensitivity to socioeconomic and cultural and human rights issues, including the appropriate management of patients irrespective of religion, race, gender, disability, socioeconomic level, and sexual preference.
- Demonstrate an ability to properly evaluate and participate in medical research.
- Demonstrate a commitment to life-long professional growth and medical education.

Goals of the Clinical Curriculum

- Students will become proficient at obtaining and recording patient assessments, including performing a complete medical history and physical exam, and writing progress notes, pre-operative and post-operative assessments, and discharge summaries.
- Students will develop a high level of competency in the technical skills needed to perform as a surgical and primary care Physician Assistant.
- Students will demonstrate the ability to manage common medical problems by developing a differential diagnosis, ordering and interpreting diagnostic evaluations, developing treatment plans, counseling patients, and making appropriate referrals.
- Students will demonstrate appropriate professional behavior, including the demonstration of a courteous and caring attitude toward patients, family and staff, and an ability to function as a cooperative member of the healthcare team.
- Students will demonstrate an understanding and adherence to the legal limitations of the role of a Physician Assistant.

PA PROFESSION COMPETENCIES

Physician Assistant Education Association (PAEA) Competencies for the Physician Assistant Profession

(Originally adopted 2005; revised 2012)

(Adopted 2012 by ARC-PA, NCCPA, and PAEA; Adopted 2013 by AAPA)

Preamble

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

Introduction

While some competencies will be acquired during formal PA education, others will be developed and mastered as physician assistants progress through their careers. The PA profession defines the specific knowledge, skills, attitudes, and educational experiences requisite for physician assistants to acquire and demonstrate these competencies. The clinical role of PAs includes primary and specialty care in medical and surgical practice settings. Professional competencies for physician assistants include the effective and appropriate application of medical knowledge, interpersonal and communication skills, patient care, professionalism, practice-based learning and improvement, and systems-based practice. Patient-centered, physician assistant practice reflects a number of overarching themes. These include an unwavering commitment to patient safety, cultural competence, quality health care, lifelong learning, and professional growth. Furthermore, the profession's dedication to the physician-physician assistant team benefits patients and the larger community.

Medical Knowledge

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, physician assistants are expected to demonstrate an investigative and analytic thinking approach to clinical situations. Physician assistants are expected to understand, evaluate, and apply the following to clinical scenarios:

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

Interpersonal & Communication Skills

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

- Create and sustain a therapeutic and ethically sound relationship with patients
- Use effective communication skills to elicit and provide information
- Adapt communication style and messages to the context of the interaction
- Work effectively with physicians and other health care professionals as a member or leader of a health care team or other professional group

- Demonstrate emotional resilience and stability, adaptability, flexibility, and tolerance of ambiguity and anxiety
- Accurately and adequately document information regarding care for medical, legal, quality, and financial purposes

Patient Care

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

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

Professionalism

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

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

Practice-Based Learning

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

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

Systems-Based Practice

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

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

STUDENT GOALS AND RESPONSIBILITIES

Student Responsibilities to the Program

- To be an active participant in all learning activities and to seek out additional learning opportunities when appropriate.
- To assist fellow students, faculty, and preceptors by freely sharing personal knowledge and skills.
- To take responsibility for realizing your full potential as a student and medical professional.

- To develop a cooperative and constructive relationship with program faculty, students, clinical preceptors, and patients.
- To maintain the highest standards of personal behavior and ethical conduct.
- To schedule sufficient time for preparation for the Physician Assistant National Certifying Examination (PANCE).
- To follow all policies and procedures as outlined in syllabi, memos, and the student handbook.
- To notify the program in a timely manner of any problem that has the potential of interfering with academic performance or functioning in didactic and clinical settings.
- To abide by the Physician Assistant Code of Ethics.

Program Responsibilities to the Student

- To provide the highest quality PA education to all students enrolled in the program.
- To meet or exceed all educational standards defined by the Accreditation Review Commission on Education for the Physician Assistant, Inc. (ARC-PA).
- To review and upgrade the quality of education that the program provides to students through a program of ongoing and comprehensive self-assessment and improvement.
- To recruit, maintain, and support the highest quality faculty and preceptors for purposes of providing students with the highest quality education.
- To properly orient, counsel, and educate students throughout the entire curriculum without regard to the student's age, religion, race, color, sex, national origin, sexual orientation, or disability that is unrelated to academic performance.
- To maintain malpractice coverage for all students enrolled in the program.
- To comply with SHP and Graduate School policies regarding student evaluation, remediation and dismissal.

ACADEMIC PROBATION, DISMISSAL, AND WITHDRAWAL

The PA program requires that students maintain good academic standing to progress in the curriculum. Good academic standing is defined as:

- Achieve a final grade of "C" or better in all didactic coursework within the MSPAS program AND
- Maintain an overall cumulative GPA of ≥ 3.0 in the MSPAS program AND
- Earn ≤ 4 final grades of "C" during the didactic phase of the MSPAS program AND
- Earn a passing grade in all clinical-year courses

Remediation Policy for Didactic Year

During the didactic year, failure to obtain at least 70% on any examination or assignment will necessitate remediation. The goal of remediation is to assist students in identifying areas of weakness or deficiencies in knowledge, skills, and/or behaviors, and provide a structured process in which these deficiencies can be addressed, prior to reassessment of the remediated material. Upon failure of an examination or assignment, students are required to meet with the course director to review material that was missed. Once identified, various measures including exam review, counseling, review of additional resources, and tutoring will be utilized to support the student as they work diligently to overcome the noted deficiencies. Upon completion of the remediation assignment/activity, the student is expected to meet with the course

director a second time to reassess the subject matter, skills, or behaviors intervened. During this meeting, the student is expected to demonstrate competency of the material in written or oral format. *The failed grade will be recorded in the grade book.* The remediation assignment will be documented; however, it will not be graded.

Academic Probation

A student who fails to maintain an overall GPA of 3.0 during the didactic year will be placed on academic probation. The student must re-establish good academic standing by bringing their overall GPA to at least 3.0 *within two consecutive semesters.* ***Students who do not accomplish this level of performance will be dismissed from the program.*** Additionally, once a student returns to good academic standing, they must maintain an overall GPA of 3.0 for the remainder of the program.

A minimum GPA of 3.0 is required to progress to the clinical year. ***Students who do not accomplish this level of performance prior to starting the clinical year, will be dismissed from the program.***

Course Failure and Competency Exams

Students who earn a final grade of < 60% in any didactic course will be dismissed from the program due to failure of a course.

If a student receives more than one “F” at any time during the didactic curriculum or fails two rotations during the clinical curriculum, they will be dismissed from the program, regardless of the student’s overall GPA. The Program Director will send an official letter notifying the student and Graduate School of their dismissal, and a copy will become part of the student file.

Students who earn a final course grade of 60 - 69% will be allowed to take a competency exam within 2 weeks after the course ends (this may necessitate an “I” (incomplete) in the course). Content matter of the competency examination will be at the discretion of the course instructor. *If a student receives a grade of 70% or higher on the competency exam, he/she will then receive the lowest possible passing grade for the course (70% = C).* Students who do not pass the competency exam will be dismissed from the program. ***Students will not be permitted to take more than 2 competency exams during the didactic curriculum, which includes the initial fall, spring, and summer semesters of the didactic year.***

Remediation Policy for the Clinical Year

If a student fails a rotation or an end-of-rotation exam, the student will have to repeat and pass the rotation or the end-of-rotation exam. Failure of the repeated end-of-rotation exam will necessitate a repeat of the rotation and retesting. ***Failure of two clinical rotations will result in dismissal from the program.***

If a student exhibits substantive clinical deficiencies during any rotation, the student will be withdrawn from the rotation and will be required to complete an additional course titled “Special Topics” to remediate the specific clinical deficiencies. The student must pass this intensive review course conducted by the PA faculty, in order to return to their clinical rotations.

Deceleration

The MSPA program does not provide academic deceleration as a component of academic intervention or remediation.

Dismissal

Students may be dismissed from the PA program for academic and/or nonacademic misconduct, or for failure to make satisfactory academic progress. The Program Director will send an official letter notifying the student and Graduate School of their dismissal, and a copy will become part of the student file.

Satisfactory academic progress is defined as maintaining a final course grade of “C” or better in all courses, AND maintaining an overall cumulative GPA of ≥ 3.0 , AND earning ≤ 4 final grades of “C” during the didactic phase of the curriculum AND, earning a passing grade in all clinical-year courses.

Academic misconduct is defined as, abetting, cheating, plagiarism, fabrication, or misrepresentation.

Nonacademic misconduct is defined as sexual misconduct, inappropriate behavior, disruption of University or classroom activities, or professional misconduct.

Assignment of grades in the didactic curriculum is the responsibility of the individual instructor. Appeal of the grade can be made according to the grade appeal process (refer to the [Grievance Procedures for Violations of Academic Standards](#)). The Program Director’s decision will be final. If the Program Director is the course instructor, appeal can be made to the Department Chair and this decision will be final.

Withdrawal

A student who wishes to voluntarily withdraw from the Physician Assistant Studies Program must notify the Program Director before the withdrawal is officially made. The student must submit a written statement in the form of an official business letter. The statement must include their intent to withdraw from the PA program, including an effective date of their withdrawal. The student must also schedule a face-to-face or phone meeting with the Program Director to discuss their plans to withdraw. Once the student meets with the Program Director, the official UAB withdrawal is made by the student through UAB One Stop Student Services, <https://www.uab.edu/students/one-stop/>. *NOTE: Students who voluntarily withdraw from the program will be required to restart the program with the next cohort the following year. This will require students to register for courses taken during the previous year.*

Students should refer to the Institutional Refund Policy for refunds on tuition and fees. The institutional refund policy may be found at the following website: <http://www.uab.edu/policies/content/Pages/UAB-FA-POL-0000091.aspx>.

Those who withdraw for medical reasons may appeal to the Provost to grant an exception to the Institutional Refund Policy. More details regarding the exceptions may be found at the following website: <http://www.uab.edu/students/one-stop/policies/exceptions-to-academic-policy/academic-policy-appeal>. *NOTE: Failure to attend class does not constitute a formal notice of withdrawal.*

LEAVE POLICY

Didactic year students will be eligible for personal leave in the event of: individual illness, death or severe illness in an *immediate* family member, jury duty, military duty, or a similar *personal crisis resulting in more than three consecutive days of absence*. With the exception of an unexpected personal illness, students must obtain prior written approval for personal leave from the Program Director and the course instructor. Students requesting a leave of absence must meet with the Program Director to discuss the leave. Students must complete a “Request for Personal Leave of Absence” form and when meeting with the Program Director, develop a leave plan to be signed by both parties. A copy of the signed form and the signed leave plan will become part of the student file.

The following rules apply to personal leave, remediation after personal leave, and withdrawal from the program:

1. Students may be granted up to one week of personal leave.
2. *Absences greater than one week require remediation or withdrawal from the term.*
3. Remediation should be completed within the same semester. If this is not possible, an “I” will be reported to indicate that the student has performed satisfactory in the course but, due to unforeseen circumstances, has been unable to finish all course requirements. Students who receive an “I” for a course should note that in many instances, the student will not be allowed to register for the following semester’s courses because many courses in the curriculum have pre-requisites that require successful completion of the previous semester’s courses. Students should also note that because of the limited resources of the program, many courses cannot be repeated until the following year when they are normally scheduled. Students are referred to this manual’s section on “Didactic Course Pre-requisites” for a listing of course pre-requisites.
4. Students who return to the program after remediation will have to demonstrate continued proficiency in the courses they have previously completed in the program. This may be accomplished by sitting-in on courses and passing a comprehensive exam with a grade of 70% or better. Exam content and timing will be determined by the course instructor.
5. To be re-admitted after dismissal from the PA program, students will have to present convincing evidence to the faculty and the Graduate School that the reason for the dismissal has been completely resolved and the student is now likely to perform at the level required by the PA program and the Graduate School. *The student will be required to register as a new student and may be required to complete the entire curriculum from the beginning.*

EMPLOYMENT POLICY

Students are discouraged from working during the didactic year and are PROHIBITED from working during the clinical year. ***Any student on academic probation is prohibited from working during the didactic year.***

DRESS CODE DURING THE DIDACTIC YEAR

Students will be required to dress in either business casual attire or scrubs, unless otherwise advised by the faculty.

PROFESSIONAL CONDUCT

Student's professional conduct will be assessed throughout the PA program curriculum.

The Department of Clinical & Diagnostic Sciences expects that all students:

1. Attend class and be attentive, engaged and respectful.
2. Be on-time for all commitments (class, clinics, appointments, etc.).
3. Thoughtfully complete and submit all assignments by the due date.
4. Use proper grammar in written and oral assignments.
5. *Use proper grammar and email etiquette in all emails to faculty, clinics, classmates, etc.* Do not use "text speak."
6. Present an appearance that is not distracting to others and reflects a professional image as defined in the Dress Code Policy.
7. Be courteous in the use of electronic devices: pagers, cell phones, and laptops. Your device should be on silent/vibrate when in lecture, lab, and clinic.
8. Treat individuals with respect, including while using social media. ***Bullying of any kind will not be tolerated on social media or within the classroom.***
9. Comply with applicable laws, regulations, and policies.
10. Profanity is not allowed at any time.
11. Use confidential information responsibly and do not violate a patient's rights.
12. Acknowledge and appropriately manage conflicts of interest.
13. Conduct and present yourself in such a manner that reflects the high professional standard set forth by the Department of Clinical & Diagnostic Sciences and the School of Health Professions.

Professional conduct and interpersonal relationships will be assessed at the completion of each semester during the didactic year, utilizing the Professional Performance Evaluation Form below. Professionalism during the clinical year will be assessed utilizing the Preceptor Evaluation.

PROFESSIONAL PERFORMANCE EVALUATION

Professional skills and attitudes are essential components of the UAB MSPAS Program. During the didactic curriculum, students are expected to meet standards in all areas listed below, *with at least a score of 3 in all categories.*

If a student receives an unsatisfactory response (score of 1) in any category, they will be required to complete an individualized remediation action plan. (ARC-PA 5th Ed. B2.19)

Student Name:	Semester:			
Faculty Advisor Name:	Date:			
Rating Scale: 4 - Superior 3 - Consistently Meets Expectations 2 - Inconsistently Meets Expectations 1 - Unsatisfactory * A score of 1 (Unsatisfactory) in any category, requires remediation				
PROFESSIONAL RESPONSIBILITY AND INTERPERSONAL RELATIONSHIPS	4	3	2	1
Maintains professionalism in dress and attire in all settings.				

Attends required activities and arrives on time.				
Demonstrates reliability, dependability and completes tasks fully and on time.				
Conducts self in an ethical manner; demonstrates honesty, consideration and respect towards faculty, staff and peers.				
Displays a positive attitude, enthusiasm and attentiveness in all academic settings.				
Displays positive behavior and maintains composure during adverse interactions or situations.				
Communicates effectively, and in a professional manner (including verbal and written forms of communication).				
Demonstrates good interpersonal skills, cooperation and engagement in team settings.				
Demonstrates self-awareness and accepts responsibility for educational challenges and self-learning.				
Demonstrates the ability to receive, integrate and utilize feedback from faculty and instructors.				
Recognizes and maintains appropriate boundaries with faculty.				
Relates to peers, professors and others in a manner consistent with stated professional standards outlined in the Student Handbook.				
Demonstrates cooperation and collaboration when working with faculty and those in positions of authority.				
Demonstrates appropriate self-control (such as anger control, impulse control) in interpersonal relationships with faculty, peers and others.				
Respects cultural or personal differences when interacting with peers, including those related to age, sex, race, ethnicity, national origin, religion, sexual orientation, disability, language, and socioeconomic status.				

PA PROFESSION CODE OF ETHICS

Adapted from the American Academy of Physician Assistants (AAPA)

(Adopted 2000, amended 2004, 2006, 2007, 2008, reaffirmed 2013)

PAs are trained and educated similarly to physicians, and therefore share similar diagnostic and therapeutic reasoning. Physician-PA practice can be described as delegated autonomy. Physicians delegate duties to PAs, and within those range of duties, PAs use autonomous decision-making for patient care. This team model is an efficient way to provide high-quality medical care. In rural areas, the PA may

be the only healthcare provider on-site, collaborating with a physician elsewhere through telecommunication.

Introduction

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

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

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

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

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

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

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

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

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

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

Statement of Values of the Physician Assistant Profession

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

The PA and Patient

PA Role and Responsibilities

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

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

PAs are professionally and ethically committed to providing nondiscriminatory care to all patients. While PAs are not expected to ignore their own personal values, scientific or ethical standards, or the law, they should not allow their personal beliefs to restrict patient access to care. A PA has an ethical duty to offer each patient the full range of information on relevant options for their health care. If personal moral,

religious, or ethical beliefs prevent a PA from offering the full range of treatments available or care the patient desires, the PA has an ethical duty to refer a patient to another qualified provider. That referral should not restrict a patient's access to care. PAs are obligated to care for patients in emergency situations and to responsibly transfer patients if they cannot care for them.

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

The PA and Diversity

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

Nondiscrimination

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

Initiation and Discontinuation of Care

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

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

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

Informed Consent

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

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

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

Confidentiality

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

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

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

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

The Patient and the Medical Record

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

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

Disclosure

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

Care of Family Members and Co-workers

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

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

Genetic Testing

Evaluating the risk of disease and performing diagnostic genetic tests raise significant ethical concerns. PAs should be informed about the benefits and risks of genetic tests. Testing should be undertaken only after proper informed consent is obtained. If PAs order or conduct the tests, they should assure that appropriate pre- and post-test counseling is provided.

PAs should be sure that patients understands the potential consequences of undergoing genetic tests – from impact on patients themselves, possible implications for other family members, and potential use of the information by insurance companies or others who might have access to the information. Because of the potential for discrimination by insurers, employers, or others, PAs should be particularly aware of the need for confidentiality concerning genetic test results.

Reproductive Decision Making

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

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

End of Life

Among the ethical principles that are fundamental to providing compassionate care at the end of life, the most essential is recognizing that dying is a personal experience and part of the life cycle.

PAs should provide patients with the opportunity to plan for end of life care. Advance directives, living wills, durable power of attorney, and organ donation should be discussed during routine patient visits.

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

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

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

The PA and Individual Professionalism

Conflict of Interest

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

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

Professional Identity

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

Competency

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

Sexual Relationships

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

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

Gender Discrimination and Sexual Harassment

It is unethical for PAs to engage in or condone any form of gender discrimination. Gender discrimination is defined as any behavior, action, or policy that adversely affects an individual or group of individuals due to disparate treatment, disparate impact, or the creation of a hostile or intimidating work or learning environment.

It is unethical for PAs to engage in or condone any form of sexual harassment. Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, or other verbal or physical conduct of a sexual nature when:

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

The PA and Other Professionals

Team Practice

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

Illegal and Unethical Conduct

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

Impairment

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

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

PA-Physician Relationship

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

Complementary and Alternative Medicine

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

The PA and the Health Care System

Workplace Actions

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

PAs as Educators

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

PAs and Research

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

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

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

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

PAs as Expert Witnesses

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

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

The PA and Society

Lawfulness

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

Executions

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

Access to Care / Resource Allocation

PAs have a responsibility to use health care resources in an appropriate and efficient manner so that all patients have access to needed health care. Resource allocation should be based on societal needs and policies, not the circumstances of an individual patient–PA encounter. PAs participating in policy decisions

about resource allocation should consider medical need, cost-effectiveness, efficacy, and equitable distribution of benefits and burdens in society.

Community Well Being

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

Conclusion

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

SOCIAL MEDIA POLICY AND GUIDELINES

Merriam-Webster defines social media as forms of electronic communication (such as websites for social networking and microblogging) through which users create online communities to share information, ideas, personal messages, and other content (such as videos). Social media is commonly thought of as a group of internet-based applications that allow for the creation and exchange of user-generated content. Examples of social media networks include but are not limited to Twitter, Snapchat, Facebook, TikTok, Instagram, LinkedIn, Flickr, YouTube, podcasts, and blogs.

Students enrolled in the UAB MSPAS Program are expected to adhere to the standards of conduct listed below, in both the didactic and clinical settings of their academic experience. Policies respecting conflict of interest, as well as applicable policies and guidelines for interacting with other students, faculty, patients, preceptors, etc., apply to online activities in the context of social media platforms, just as they do in personal face-to-face interactions. Students must take full responsibility for what they post to social media sites and are reminded that they must represent the UAB PA program in a respectful and ethical manner, whether on campus, in the community, or at clinical practice sites.

It is the student's responsibility to familiarize themselves with the following guidelines, and they are expected to adhere to these guidelines throughout the didactic and clinical year.

1. When posting content to social media sites, students must use good judgment and respect privacy laws.
2. Do not include confidential information about the University, including faculty, staff, other students, or patients, when posting content.

3. Do not post content that may be *perceived* as threatening, sexual, obscene, a violation of intellectual property rights or privacy laws, or seen as otherwise injurious or illegal.
4. Representing your personal opinions as being endorsed by the University or any of its partners is strictly prohibited.
5. UAB, nor the PA program logo or name, may be used to endorse any opinion, product, private business, cause, or political candidate.
 - a. Should the UAB or PA program logo be present in any social media content, the content should reflect the ethics and standards that are upheld by the program, the University, and the PA profession.
6. Refrain from posting information and conducting activities that may violate local, state or federal laws and regulations.
 - a. If you are unsure whether certain content is protected by privacy or intellectual property laws, you should contact your faculty advisor or the Program Director for clarification.
7. Do not post information, photos or videos that will reflect negatively on you, the PA program, the SHP, your clinical rotation sites, preceptors, or UAB.
8. It is strongly advised to avoid participation in activities or special interest groups that may cause harm or have a negative impact on the reputation of UAB and the services it offers.
 - a. If you have questions regarding activities that may potentially violate this policy, please seek advisement from your faculty advisor or the Program Director.
9. Perusing through social media sites during didactic instruction or while completing clinical rotation hours is strictly forbidden (i.e. scrolling through Facebook, Instagram, Twitter, Snapchat, TikTok, etc., when your attention should be completely focused on your academic experiences).
10. Posting material that is unlawful, obscene, defamatory, threatening, harassing, abusive, slanderous, hateful, or embarrassing to any person or entity is strictly forbidden.
11. Do not post content that may be *perceived* as derogatory, offensive, disrespectful, or disparaging remarks about the University, PA program, faculty, staff, fellow students, patients, preceptors, or clinical practice sites. This causes an erosion of trust and demonstrates unprofessional behavior.
12. Personal identifiable information that can be used to locate someone offline, including but not limited to photographs, specific locations, patient identifiers, job setting or ID badges, phone numbers, home or local addresses, birth dates, and e-mail addresses, should not be posted.
13. In an effort to ensure student safety and protect their liability while rotating at clinical practice sites, it is recommended that students do not post information such as the following:
 - a. "I will be out of town ..." (Posts such as these notify others when your home will be vacant, leaving your residence vulnerable).
 - b. "I'm so tired I can't keep my eyes open ...," etc. (If a patient were to be injured during your care and the above post was discovered, serious legal ramifications may ensue, and you could also potentially be dismissed from the PA program secondary to non-academic misconduct).
14. Students are strictly forbidden from "friending" patients, preceptors or caregivers on social media. Students in patient care roles should not initiate or accept friend requests except under preexisting circumstances such as a situation where a friendship pre-dates the professional relationship.

15. The UAB PA program discourages preceptors from initiating “friend” requests with students they oversee. Similarly, the PA program prohibits students from accepting “friend” requests from preceptors. Either of these activities have the potential to negatively impact the student’s grade and can obscure the barrier between personal and professional boundaries.
16. The UAB PA program also strictly prohibits text messaging between students and patients. Texting is an abbreviated form of communication with great potential for miscommunication. More importantly, patient confidentiality may be compromised in this setting as well.
17. Do not disclose confidential information about any clinical rotation site, its professionals or patients. It is also unprofessional to discuss personal opinions about a clinical site and/or its patients and staff.
18. Under current law, it is forbidden to disclose any personal health information, including images of patients, or discuss patient cases utilizing any social network or digital media.
 - a. Such conduct would be in direct violation of HIPAA guidelines.
 - b. All students receive HIPAA training while enrolled in the University and through their clinical practice sites as well.
19. We recommend being respectful and professional in your relationships with the clinical practice sites in which you rotate at. This includes employees, medical suppliers, other healthcare professionals, community health centers, community partners, alumni, patients and their families.
- 20. When using social media, conduct and present yourself in such a manner that reflects the high professional standards set-forth by the PA Program.**

Please be mindful that whatever you post as a student, will define how the outside world “perceives” you to be in clinical practice. Employers and hospitals routinely use social media to research new candidates during the hiring and credentialing process. Professionalism is such an important aspect of one’s career, and it only takes one misguided post using bad judgement and a single action from a student to ruin their own reputation, and that of the PA program as well.

Students are expected to follow all of the guidelines listed above, while posting on social media. Violation of any of the guidelines noted above may result in a verbal warning, written warning, suspension, or dismissal from the program. Interpretation of the above guidelines are *subjective* in nature. As such, the level of recourse will be at the discretion of the PA program faculty and Program Director. Remember, your posts are available for EVERYONE to see, PERMANENTLY!

ACADEMIC MISCONDUCT

<https://www.uab.edu/students/one-stop/policies/academic-honor-code>

NON-ACADEMIC MISCONDUCT

<http://www.uab.edu/students/sarc/images/documents/non-academic-student-code-of-conduct-policy.pdf>

GUIDELINES FOR MANAGING STUDENT MISCONDUCT

The policies and regulations of the Physician Assistant Studies Program are intended to facilitate learning and provide a working relationship based on trust, self-discipline, and respect for the rights of others. Depending on the gravity of a student infraction, the program will generally work through a "progressive disciplinary" process. This means that the least severe level of discipline applicable to the situation will be explored before invoking more harsh levels of discipline. The goal of progressive discipline is to improve a student's performance, while at the same time documenting the efforts of the program faculty in the event of discharge. The following are the standard progressive disciplinary steps:

ORAL WARNING: The first step in most disciplinary actions is an oral warning. This may be given by a Course Director, Director of Academic Education, Director of Clinical Education, Program Director, or clinical preceptor for substandard performance, poor class attendance, and other types of minor offenses or misconduct that occur for the first time. Program staff will keep notes of oral warnings in the student file. These notes are official documents of the University of Alabama at Birmingham and may become part of the student's UAB record, based on need.

WRITTEN WARNING: A written warning may be given by a Course Director, Director of Academic Education, Director of Clinical Education, Program Director, or clinical preceptor for substandard performance, poor class attendance, misconduct, and other types of more serious offenses or events that occur after the first oral warning. *A written warning may be given instead of an oral warning for first-time gross misconduct or major offenses.* All written warnings will be addressed to the student in memorandum format. If there has been a prior oral warning given to the student, it will be referenced in the first written warning. The student will be asked to sign the written warning as proof of having received it. A signed copy of all written warnings will be placed in the student's official, permanent record. If the student refuses to sign the written warning, it will be noted and the unsigned copy will be placed in the student file. *A student who receives more than one written warning during a 24-month period (whether or not the initial warning(s) resulted in probation and/or suspension) may be academically dismissed from the program, without proceeding through the remaining steps in the disciplinary process.*

SUSPENSION: *Continued* substandard performances, poor class attendance, insubordination, misconduct, and other serious offenses or behavioral problems may result in a suspension from the program. *Suspension may occur after the first written warning for any major offense or as the first step if the infraction is considered serious.* Students arrested and charged with a felony, if not discharged, may, at the option of the program, be suspended pending disposition of the case. All suspension notices will be given to the student in writing by the program and will be placed in the student's official, permanent record. Administrative suspension will be adopted when it is believed that normal performance or safety would be affected or when program staff needs time to gather information for determining the specific disciplinary action that needs to be taken.

DISMISSAL: *Continued* substandard performance, poor performance, insubordination, misconduct, and other serious offenses or behavioral problems *that continue after other disciplinary actions have been*

taken may result in dismissal from the Physician Assistant Studies Program. Dismissal also may occur immediately and without notice. The Program Director and Department Chair must approve the recommendation for dismissal. A student who receives one written warning during a 24-month period may be dismissed from the program without proceeding through all the remaining steps in the disciplinary process (that is, imposed probation and/or suspension). Dismissal will occur after a careful review of the case with the Program Director and Department Chair.

STUDENT GRIEVANCE PROCEDURE

ACADEMIC GRIEVANCE PROTOCOL

The UAB Physician Assistant Studies Program is in compliance with the School of Health Profession's Policy for Grievance Procedure of Violations of Academic Standard. Please refer to the following link to the Graduate Handbook for the complete policy: [UAB Graduate Handbook](#)

NONACADEMIC GRIEVANCE PROTOCOL

When the persons directly involved cannot settle complaints on non-academic matters, a written complaint should be forwarded to the PA Program Director. If the Program Director is unsuccessful in resolving the complaint, it will be forwarded to the Department Chair for further consideration. For specific information concerning the procedures and processes for non-academic complaints and grievances, contact Dr. Tracee Synco.

PROCEDURE FOR STUDENT APPEAL OF A DISCIPLINARY ACTION

https://www.uab.edu/shp/home/images/PDF/grievance_procedures.pdf

STUDENT RECORDS POLICY

The PA program maintains student records indefinitely.

SECTION 5 – PROGRAM INFORMATION REGARDING THE CLINICAL YEAR

GUIDELINES AND INFORMATION FOR CLINICAL PRECEPTORS

One of the most important components of the Physician Assistant Studies Program is the education provided by volunteer clinical preceptors. Participation as a clinical preceptor is greatly appreciated and essential to the education and training of a Physician Assistant student.

The purpose of the clinical year is to bring students into contact with knowledgeable practitioners who are willing to help them learn the art and science of surgery and medical care through a “hands on” approach. Preceptors are encouraged to review the following information and guidelines concerning aspects of clinical education and evaluation.

PRECEPTOR RESPONSIBILITIES

- Orient students at the onset of the rotation with practice/facility policies and review your expectations of the student and rotation-specific objectives provided by the PA program
- Supervise, demonstrate, teach, and observe clinical activities to aid in the development of clinical skills and ensure proper patient care
- Provide students with an appropriate learning environment in which they will have a variety of patient encounters and learning experiences
- Direct students toward patients with problems and illnesses common to the community and within the realm of Physician Assistant practice
- Delegate to the student increasing levels of responsibility for clinical assessment and management as appropriate to the student’s experience and expertise
- Participate in the evaluation of clinical skills and medical knowledge through the following:
 - Direct supervision, observation, and teaching in the clinical setting
 - Evaluation of both oral presentations and written documentation
 - Assignment of outside readings and research to promote further learning
- Provide ongoing, constructive feedback to the student regarding their clinical performance
- Complete a final evaluation of the student’s performance and promptly return the end-of-rotation evaluations to the program
- Dialogue with faculty during site visits to evaluate student progress and promptly notify the PA program of any circumstances that might interfere with the accomplishment of the above goals or diminish the overall training experience
- Avoid placing students in a position of authority or responsibility that exceeds their level of knowledge or skill

Completed student evaluation forms should be electronically submitted via eValue. Forms can also be *emailed or faxed* to:

UAB Physician Assistant Studies Program
Attention: Heather Neighbors, PA-C, Director of Clinical Education
1720 2nd Avenue South SHPB 487
Birmingham, AL 35294 - 1212 Fax: (205) 975-3005

STUDENT RESPONSIBILITIES TO THE PROGRAM

- To actively participate in rotational learning activities and seek-out additional learning opportunities when appropriate.
- To work towards realizing their full potential as a student and medical professional.
- To follow all policies and procedures defined by the preceptor, the program, and the clinical site.
- To develop a cooperative and constructive relationship with program faculty, students, clinical preceptors, and patients.
- To maintain the highest standards of professional behavior and ethical conduct.
- To notify the program in a timely manner of any problem that could potentially interfere with the student's academic performance.
- To schedule sufficient time to prepare for End-of-Rotation Exams (EOR) and the Physician Assistant National Certifying Examination (PANCE).
- To refine history and physical examination skills, as specified by the clinical preceptor.
- To enter pertinent data for each assigned patient on a daily basis in the patient logging system.
- To enhance and reinforce theoretical knowledge and practical medical skills through:
 - Utilization of appropriate reading and reference materials.
 - Attendance at grand rounds, medical conferences, and other related seminars.

STUDENT RESPONSIBILITIES TO CLINICAL PRECEPTORS

- Ensure attendance is timely
- Attend clinical rotations as scheduled by the preceptor, in addition to grand rounds, lectures, and conferences, if made available to the student
- Obtain detailed histories and physical exams, develop a differential diagnosis, formulate an assessment and plan through discussion with the preceptor, present findings through oral presentations, and document findings in the EMR
- Contribute to the efficiency and effectiveness of the preceptor's clinical practice by performing all delegated tasks in a timely and competent manner
- Display professional behavior that enhances the preceptor's practice and reflects positively on the Physician Assistant profession
- Inform preceptors in a timely manner of individual needs, concerns, or problems that have the potential of interfering with the delivery of patient care or the effectiveness of the preceptor's practice
- Maintain an open line of communication and meaningful dialogue between fellow students, program faculty, preceptors, and members of the medical team
- To be sensitive to the demands placed on clinical preceptors, including complicated aspects of patient care, continuing education, community service, research, and the training of a wide range of students

PROGRAM RESPONSIBILITIES

- Orient preceptors and students to the policies and procedures of the clinical year
- Develop and maintain clinical rotation sites that affords students a quality educational experience
- Evaluate student rotations through regular site visits and open communication with clinical preceptors
- Provide malpractice coverage for students during rotations
- Attempt to anticipate student problems before they arise, and provide support, guidance, and encouragement to students throughout the clinical year
- Provide seminars that augment clinical experiences and increase the student's medical and surgical knowledge and technical skills

CREDIT FOR PRIOR CLINICAL LEARNING EXPERIENCES

Credit for prior clinical experience, including credit from another physician assistant program, is not accepted.

GRADUATION REQUIREMENTS

Graduation from the Physician Assistant Studies Program requires the following:

1. Maintain an overall cumulative GPA of 3.0 for the Graduate School.
2. Maintain a cumulative GPA of at least a 3.0 for all didactic coursework in the UAB PA program.
3. Completion of all didactic courses and clinical rotations within the UAB PA program with a grade of "C" (70%) or better.
4. Continued demonstration of appropriate professional behavior while matriculating through the didactic and clinical year.
5. Completion of PA Master's Project (PA 698).
6. Successful completion of the program's summative evaluation, including passing the summative exam with a grade of 70% or better, and passing the summative OSCE with a grade of 80% or better.
7. Completion of all financial and administrative obligations to The University of Alabama at Birmingham.

CLINICAL YEAR SCHEDULE

The clinical year is comprised of 44 weeks of clinical rotations, including 28 weeks of required general medicine rotations, 8 weeks of required surgical rotations (4 weeks general surgery and 4 weeks surgical elective), and 8 weeks of elective rotations.

2021 CLINICAL YEAR ROTATION CALENDAR

Rotation	Course Title	Dates	Academic Term
1	PA 621	January 11 - February 5	Spring
2	PA 622	February 8 - March 5	Spring
3	PA 623	March 8 - April 2	Spring
4	PA 624	April 5 - April 30	Spring
5	PA 625	May 10 - June 4	Summer
6	PA 626	June 7 - July 2	Summer
7	PA 627	July 5 - July 30	Summer
8	PA 629	August 2 - August 13 *	Summer
8	PA 629	August 23 - September 3 *	Fall
9	PA 630	September 6 - October 1	Fall
10	PA 631	October 4 - October 29	Fall
11	PA 632	November 1 - November 26	Fall

** Note: For the 2021 clinical calendar only, rotation #8 (PA 629) is divided between the summer and fall semesters.*

2022 CLINICAL YEAR ROTATION CALENDAR

Rotation	Course Title	Dates	Academic Term
1	PA 621	January 10 - February 4	Spring
2	PA 622	February 7 - March 4	Spring
3	PA 623	March 7 - April 1	Spring
4	PA 624	April 4 - April 29	Spring
5	PA 625	May 9 - June 3	Summer
6	PA 626	June 6 - July 1	Summer
7	PA 627	July 4 - July 29	Summer
8	PA 629	August 1 - August 26	Summer
9	PA 630	September 5 - September 30	Fall
10	PA 631	October 3 - October 28	Fall
11	PA 632	October 31 - November 25	Fall

CLINICAL YEAR PRINCIPLES AND RULES

Rotation Schedule:

1. Students are required to submit their rotation schedule to the Director of Clinical Education, *by the end of the first week of each rotation.*
2. Students should contact the preceptor prior to the start of every rotation. This should occur *approximately 1 week prior to the start of the rotation.*
3. On the first day of the rotation, students should meet with the preceptor to determine the rotation schedule and duties. Rotation objectives should be reviewed at this time and mutual expectations discussed. *This is the student's responsibility.*
4. As a general rule, students should adhere to the same schedule as the preceptor. ***However, no less than 40 hours and no more than 70 hours of clinical work per week is allowed.*** Exceptions may occur during the rotation. If this occurs, the student should contact the Director of Clinical Education.
5. For the Emergency Room rotation, *a minimum of 160 hours must be worked. The student's schedule **MUST** include a combination of weeknight shifts (11p-7a or 7p-7a), weekend night shifts (Fri, Sat, and Sun from 11p-7a or 7p-7a), and evening shifts (3-11p).* To ensure each student has an adequate combination of the above-mentioned shifts, you MUST submit your rotation schedule to the Director of Clinical Education by the end of the first week of the rotation. If the student's schedule does not reflect an adequate combination of shifts, the Director of Clinical Education will contact the facility to request a change in the student's schedule.

Attendance:

1. Students must notify the Director of Clinical Education and preceptor of all absences during the rotation. *This should include both the student's absence and preceptor's scheduled time off.*
2. *All absences must be approved by the Director of Clinical Education and by the preceptor*
3. Below is a list of excused absences recognized by the Department of Clinical and Diagnostic Sciences and UAB:
 - a. Absences due to jury or military duty, provided that official documentation has been provided to the instructor in a timely manner in advance.
 - b. Absences of students registered with Disabilities Services for disabilities eligible for "a reasonable number of disability-related absences," provided students give their instructors notice of a disability related absence in advance or as soon as possible.
 - c. Absences due to religious observations provided that students give faculty written notice prior to the drop/add deadline of the term.

Expected Conduct:

1. Students should acquaint clinic staff and hospital officials of their schedule and expected duties. The preceptor will provide information about the degree to which this procedure is necessary.
2. As a general rule, students should be actively engaged in clinical duties by the second week of the rotation. Failure to become actively engaged by the second week should prompt a call to the Director of Clinical Education for advice.

3. Students must work under the direct supervision of a licensed Physician, Physician Assistant, Nurse Practitioner, or Nurse Mid-wife in all clinical settings.
4. Students are not allowed to independently evaluate patients, establish a diagnosis, order laboratory or special studies, or carry-out treatment plans without the direct supervision or oversight of their preceptor. No patient should be discharged without consultation with the preceptor.
5. Students are prohibited to receive compensation for the services they provide during their rotations.
6. Students are prohibited to represent themselves as employees of the facility during their clinical year.
7. PA students do not work for the program in any capacity.
8. Students cannot be used as a substitution for clinical or administrative staff in the program office or at clinical sites.
9. Students cannot be used as a medical scribe at any clinical site.
10. ***The program has a strict policy against students being employed during their clinical year, this is PROHIBITED per PA program policy.***
11. Students must always represent themselves as a Physician Assistant student and must never represent themselves as a Certified Physician Assistant.
12. ***Off-duty socializing with preceptors and office staff is discouraged.*** It is considered unethical to develop a romantic or sexual relationship with a patient, preceptor, or office staff member, and *sexual misconduct may result in dismissal from the program.*
13. *Students must immediately report all needle sticks and accidental exposures.* See Bodily Fluid Exposure Guidelines on page 87.
14. Students have the right to refuse an order if they believe that it will jeopardize patient care. If an order is refused; however, the Director of Clinical Education should be immediately notified.
15. *If a class is scheduled on campus during your rotation, attendance is mandatory.* If the student is absent from class, this will count as a full personal day. All absences must be approved by the Director of Clinical Education.
16. Acceptance of gifts, trips, hospitality, or other items from any hospital or office personnel (including your preceptor) is prohibited.

Responsibilities:

1. Students should complete the rotation objectives to the maximum extent possible, while recognizing that all stated objectives and technical procedures may not be completed given the variability of student capabilities, preceptor schedules, and patient loads.
2. As a general rule, students should devote approximately 2 hours per day to completing the reading objectives. *This is the student's responsibility.*
3. ***Patient tracking is a requirement for accreditation.*** Therefore, students must maintain and update their clinical tracking logging system and submit it at the conclusion of each rotation. ***As a rule, students should have 100 patient-contacts logged each rotation.***

Evaluations:

1. Students should schedule a mid-rotation conference with the preceptor to review their progress and discuss potential concerns.
2. Students should schedule an end-of-rotation meeting with the preceptor to review their performance and fill-out the Student Performance Evaluation. Although the preceptor may prefer to complete the form in private, students should attempt to determine if a major problem exists prior to leaving the rotation site. *This is the student's responsibility.*

STUDENT CONDUCT

Students are guests of each rotation site and should create a positive impression of themselves, the program, and the Physician Assistant profession. Discretion and professional behavior is required. Student interactions should be courteous and respectful to all persons. *All student evaluation forms contain "Professional Manner" objectives that must be met to successfully complete the rotation.* Included are objectives in truthfulness, punctuality, dependability, proper patient rapport, good professional relations, and awareness of professional limitations. ***An unsatisfactory grade ("U") in any of these objectives will result in a failing grade for the rotation and possible dismissal from the program.***

No alcoholic beverages or illicit drugs are to be consumed during working hours or while on call. *If a student is found intoxicated during working or call hours, they may be dismissed from the program.* Students are reminded that the use of illicit drugs is a violation of University policy and will be addressed by university officials.

ADDRESS AND PHONE NUMBER CHANGES

The Physician Assistant Studies Program requires that each student provide the program with a copy of their current address and telephone number. Changes or corrections to a student's name, address, or telephone number must also be made through One Stop Student Services <https://www.uab.edu/students/one-stop/>.

ASSIGNMENT OF CLINICAL ROTATIONS

Prior to beginning the clinical year, students will be given an opportunity to state their preference for elective clinical rotations. The PA program reserves the right to approve or disapprove any requested rotation. Once a tentative schedule has been established, students will also be given an opportunity to request two changes prior to finalizing of the rotation schedule. Requests for change will be granted or rejected based on preceptor availability, program needs, and rotation availability. *The program maintains the right to make rotation changes when necessary to allow for unexpected situations.* Although an effort will be made to solicit student volunteers for out-of-town rotations, *students should be aware that they may be required to travel to distant rotation sites when the clinical schedule requires it.* Students are prohibited from completing a clinical rotation at a prior employment site.

REQUESTS FOR ROTATION CHANGES

Requests for rotations changes will be determined by the following policies:

1. Students may make a request for up to two changes after the first draft is given.
2. Approval of changes are ultimately at the discretion of the Director of Clinical Education.
3. Students will have three days to make changes. After the three-day time period, clinical changes will be made by the Director of Clinical Education (depending if the change is available) and the final schedule will be published.
4. No requested changes will occur after the final clinical schedule is published, *unless approved by the Director of Clinical Education.*

CLINICAL ROTATION REASSIGNMENT

The Director of Clinical Education and program faculty carefully screen all clinical preceptors utilized by the program. Unfortunately, this process cannot predict whether a student and preceptor will experience personality problems and an inability to work together. In the event that a personality problem should arise (ex. personality differences, offensive interactions, or socio-cultural conflicts), a student may request reassignment to another rotation. When this occurs, the Director of Clinical Education and the Program Director will evaluate the request and make a determination that the student should either be reassigned or be required to complete the rotation.

If a student is reassigned to another rotation, but the rotation schedule does not allow for an alternate rotation site, *the student will be given a grade of incomplete ("I") and will be required to complete the rotation requirements at the end of the clinical year* (the student will not be responsible for additional tuition in this situation).

USE OF OUTSIDE ROTATIONS

At the program's discretion, students may participate in a clinical rotation with a preceptor who is not directly affiliated with the program. However, the following rules will apply:

1. Students are only allowed to schedule two "outside rotations" during the clinical year.
2. The program reserves the right to deny any request for an outside rotation.
3. "Outside rotations" are permitted in rotations 3-9 of the clinical year only.
4. "Outside rotations" are restricted to elective rotations only.

Students who elect to complete an "outside rotation" are responsible for completing and submitting all required paperwork for that rotation, which includes:

1. Hospital credentialing requirements.
2. Verification of student immunizations.
3. Verification of instruction in universal precautions and blood-borne pathogens.
4. Verification of CPR/ACLS training.

All required paperwork must be completed *two full clinical rotations prior* to the scheduled outside rotation. Example: If the student's rotation is in rotation 7, the signed paperwork is due on the last day of rotation 4. Failure to complete this requirement will result in a denial of permission. If this occurs, another

rotation will be assigned or the student will have to “sit out” the month and complete the elective rotation in the month following graduation (the student will be responsible for additional tuition in this situation). *Students are responsible for finding their own housing and paying for additional expenses incurred while attending the “outside rotation.”*

While attending an “outside rotation,” students are responsible for completing all required coursework. This includes, but is not limited to, obtaining notes and lecture materials, switching assigned presentation time slots with peers, and making up any missed quizzes or assignments. Students must return to Birmingham, AL to take the end-of-rotation exam on its scheduled date or arrange with the Director of Clinical Education a proctor to oversee a make-up test using a secure computer.

ANTI-NEPOTISM POLICY

Students will not be allowed to request that a family member (mother, father, sibling, grandparent, or significant other) or prior employment site serve as their preceptor. If requested by the student, the site will not be approved by the Director of Clinical Education. The potential that a personal relationship will interfere with the educational process is too great.

FRATERNIZATION

Students may not engage in consensual romantic relationships with a patient, staff member, preceptor, or other person in a position to supervise, grade, evaluate, or influence the academic progress or employment of a student. If a student does engage in a consensual romantic relationship with any of the noted individuals, they will be subject to disciplinary action and may be dismissed from the program. Off-duty socializing with preceptors and office staff is discouraged. It is considered unethical to develop a romantic or sexual relationship with a patient, preceptor, or office staff member, and sexual misconduct may result in dismissal from the program.

BACKGROUND AND DRUG SCREEN

You are required to complete a background check and drug screen immediately prior to the start of the clinical year. This MUST be completed by the end of the prior semester (fall term). If it is not completed, the student will not be allowed to begin their clinical rotations.

RELEASE OF INFORMATION

A “Release of Information Form” will be placed in the student's file for prospective employer use.

DRESS CODE FOR CLINICAL ROTATIONS

Students will be required to dress in either business casual attire or scrubs, unless otherwise advised by the clinical preceptor.

LIABILITY INSURANCE

Liability insurance is provided to all clinical year students through the University of Alabama at Birmingham Professional Liability Trust Fund. Additional liability insurance may be obtained through the UAB Office of Risk Management and Insurance. For more information about the insurance policy call (205) 934-5382.

To request verification of coverage, please email requests to: INSURANCE@UABMC.EDU or PLTF@UABMC.EDU. Please note, we do not maintain claims history information on students.

LOCKERS

Approximately 10-12 full-size lockers are available for student use during the clinical year at UAB Hospital. The lockers are located in the Senior Student Lounge on the 16th floor of Jefferson Towers, University Hospital.

LOUNGE (UNIVERSITY HOSPITAL)

A lounge is available to clinical year PA students in room 1647, on the 16th floor of Jefferson Towers, University Hospital, phone number (205) 934-3605. A code is required to enter the lounge, which may be obtained from Canvas or from the Director of Clinical Education. For security purposes, do not inform others of the code.

Note that text books, journals, and other forms of program property should remain in the lounge. *Program property that is lost, stolen, or defaced will be the responsibility of the entire class.* It is also the student's responsibility to maintain cleanliness of this lounge.

MEALS

Some clinical sites provide free meals to students, which the program neither requires nor requests. Note that refreshments within physician lounges are off-limits to students, unless specifically offered by physician preceptors.

UAB STUDENT / VISITING SCHOLAR CLINICAL ROTATION BLOOD / BODY FLUID EXPOSURE GUIDELINES

(Updated 8/22/2017)

This guideline outlines recommended actions following any blood/body fluid exposure to UAB enrolled students or visiting scholars during a clinical rotation.

Students and scholars may be exposed to blood/body fluids in the course of their clinical duties at a UAB facility or at a non-UAB facility where a student is involved in a practical experience for credit at UAB. As all blood and body fluids are considered infectious, regardless of the perceived status of the source

individual, all students and scholars must follow OSHA guidelines for universal precautions to prevent contact with blood or body fluids at clinical rotation sites. This includes use of gloves, eyewear, and protective clothing, as well as proper care of sharp objects and other precautionary measures. These guidelines are printed on UAB Medicine safety cards; students should keep a safety card with them and consult it in the event of exposure.

Definitions:

For purposes of this guideline,

1. A **“student”** is defined as any student enrolled at UAB in a clinical (non-research) setting.
2. A **“visiting scholar”** is any student, graduate student, post-doctoral student, instructor, or practitioner participating in UAB clinical (non- research) activities for a short-term period.
3. An **“exposure”** is generally defined as a **percutaneous injury** (e.g., a needle stick or cut with a sharp object) or contact of **mucous membrane** or **non-intact skin** with **blood, tissue, or body fluids**, whether or not there is visible blood.

Procedure:

In the case of any needle stick injury or other accidental blood/body fluid exposure, students and scholars should **immediately** take appropriate measures as follows:

1. **Remove and properly dispose of all contaminated personal protective equipment.** Wash the exposed area thoroughly with soap and running water. Use antibacterial soap if possible. If blood/body fluid was splashed in the eye(s) or mucous membrane, flush the affected area with running water for 15 minutes. Remove and dispose of contacts if worn.
2. **It is mandatory for students to report all exposures to the host institution and UAB Employee Health as soon as they occur.**
 - Contact UAB Employee Health, **Monday-Friday 7am-4:30pm (closed 12pm-1pm) at 205-934-3675.**
 - **After hours, between 12pm-1pm on weekdays, on weekends, holidays** and in case the department is closed due to inclement weather, **call Hospital Paging at 205-934-4311 and ask for the Needle stick Team Member on call.**
3. ***It is mandatory for students to report all exposures to your preceptor, clinical supervisor, and UAB program faculty member (Director of Clinical Education) as soon as they occur.***
4. **It is mandatory that an incident report be filed at the host institution (if applicable) and at UAB by the student’s program faculty member (<https://riskmgmt.hs.uab.edu/incident.html>). UAB Employee Health can assist the student with questions or concerns.**
5. **It is mandatory that the student or visiting scholar gather the following information:**
 - a) Identify the HIV, Hepatitis B and Hepatitis C status of the source patient. If a source patient’s serological status is unknown, the student, scholar, or preceptor/clinical supervisor should contact the source patient’s attending physician and request that the physician obtain a specimen for STAT serologic testing. Recommended testing of the source patient includes a **Rapid HIV, HBsAg, and HCV antibody**. It is critical to ensure that the hosting institution draws labs from the source patient in a timely manner (**within 2-4hours**). The student should report the results of the serology testing to UAB Employee Health immediately.

- If serologic testing cannot be obtained on the source patient, seek guidance from the host institution and call UAB Employee Health for further instructions. (See Employee Health contact number and after hours information noted below).
 - If the source patient's Rapid HIV, HBsAg, and HCV antibody is negative, it is **not** recommended (per CDC guidelines) for the student or scholar to have baseline or follow-up serology drawn. **Do Not** go to the ER unless immediate medical attention due to injury from the exposure is necessary.
- b) If the exposure warrants blood work from the student or scholar due to **positive serology** results from the source patient, baseline serologic and vaccination evaluation of the student or scholar should include the following:
- **HIV Antibody, HCV Antibody** and any additional labs, as determined by the healthcare provider of the host institution or after consultation with UAB Employee Health, should be drawn.
 - **Hepatitis B vaccination** and **Hepatitis B titer** status. If unknown an HBsAb and HBsAg should be drawn.
 - **Tetanus** vaccination status.

After taking appropriate immediate measures as outlined above, students or scholars should seek further evaluation and care based on where the incident occurred:

1. For exposures occurring **on the UAB campus (UAB Hospital, Kirklin Clinic, UAB outpatient clinics, non-research labs) or at any institution within a 60-mile radius of the UAB campus. It is mandatory that the student or visiting scholar:**
 - a) Report to UAB Employee Health Monday-Friday (**7:00 am- 4:00 pm**), located on the 1st floor, UAB Spain Wallace S123 (**205-934-3675**). The department is **closed 12pm-1pm** for lunch.
 - b) **After 4:00 pm, between 12pm-1pm, on weekends, holidays,** and in case the Employee Health Department is closed due to inclement weather, **call Hospital Paging (205-934-3411) and ask the operator to page the Needle stick Team Member on call. Report to UAB Employee Health the next business day.**
 - c) Continue to communicate with Employee Health regarding all follow-up care.
2. For exposures occurring **at a non-UAB hospital or clinic greater than a 60-mile radius from UAB campus it is mandatory to:**
 - a) Inquire about the institution's exposure policy. If the host institution or physician's office offers to provide medical care and recommended testing, have an initial evaluation and follow-up performed there in accordance with the host institution's policy. **Continue to communicate with Employee Health regarding all follow-up care.**
 - b) If the host institution refuses to provide medical care and recommended testing, notify UAB Employee Health at (**205-934-3675**) immediately for further instructions and contact your program faculty member to complete a trend tracker incident report at <https://riskmgmt.hs.uab.edu/incident.html>. You may be required to report to a local emergency room for initial treatment and/or medical treatment in case of injury.
 - c) If the hosting facility provides initial treatment, but refuses to provide long-term follow-up care, gather all completed documentation, serologic results from post-exposure,

including the patient's lab work, and notify UAB Employee Health. UAB Employee Health will provide the long-term follow-up care at no charge.

It is very important for blood/body fluid exposures to be reported according to the current guidelines. All students or scholars in a clinical (non-research) placement will be covered for costs incurred in assessing and/or treating potential or actual exposures providing they adhere to this procedure as outlined. This includes costs incurred for any appropriate services rendered (e.g., ER evaluation, including but not limited to lab work, post-exposure prophylactic therapy, immunizations provided onsite or during follow-up at UAB Employee Health), whether on campus or at a non-UAB hospital or clinic.

For treatment costs incurred at or outside of a UAB facility, please forward all invoices/bills (**must be detailed/itemized**), documentation of exposure/incident report as soon as they are received to:

UAB Hospital Employee Health

Suite SW123

619 19th Street South

Birmingham, AL 35249

Phone: 205-934-3675

Fax: 205-975-6900

For questions, UAB Employee Health may be reached by phone at **205-934-3675** during normal business hours or by email at employeehealth@uabmc.edu.

ATTENDANCE POLICY

INCLEMENT WEATHER DAYS

*Clinical-year students are expected to make every effort to attend clinical rotations **regardless of the weather**.* If inclement weather prevents a student from completing their rotation responsibilities, students are required to notify both their rotation service and the Director of Clinical Education of their absence.

ATTENDANCE DURING THE CLINICAL YEAR

As a general rule, students should keep the same hours as their assigned preceptor and should work between 40 and 70 hours per week. If this is not possible, students should contact the Director of Clinical Education. Note that student hours will often include night shifts, weekends, and participation in medical rounds.

PERSONAL DAYS

Each student is allowed 5 personal days during the clinical year. The following policies govern the use of personal days:

- **No more than 2 days can be used on any one rotation without having to make up the time.**
- Any request for a half-day will be counted as a full day.

- If a student chooses to use a personal day, no make-up days will be required, if the absence does not exceed the allotted amount of personal days.
- ***Absences that exceed the allotted amount of personal days will require make-up days at the rate of one day for each missed day.***
- The Director of Clinical Education and the preceptor *must be informed prior to* the date of the expected absence.
- It is the student's responsibility to submit a signed "Personal Leave of Absence" form. All forms must be approved by the preceptor and Director of Clinical Education, *prior to the scheduled absence.*
- *Students must use a personal day for any unexpected illnesses.*
- Personal days can be used for any personal reason including but not limited to death of a loved one, family trips, weddings, interviews, review courses, medical appointments, etc.
- ***Personal days may not be taken on scheduled test days (end of rotation test days).***
- *Once five personal days have been taken, all subsequent absences will be deemed an "unexcused absence" and students will be required to submit documentation regarding the circumstances of their absence. Please note, this may result in remediation or dismissal from the program. (Please see excused absence policy above).*

Note: Students must obtain written permission from the Program Director prior to any absence from the program for more than five days.

EXCUSED ABSENCES

For absences to qualify as an excused absence, students must obtain explicit written permission from the Director of Clinical Education and the preceptor PRIOR to the absence. The only exceptions to this policy are critical personal illness and unforeseen, unavoidable incidents (i.e. car accidents or breakdowns). In these cases, students will have to use a personal day for the absence.

Specific policies pertaining to excused absences include:

- Students must notify both the Director of Clinical Education and the preceptor once the decision not to attend the clinical site has been made.
- Leaving a voice mail with the Director of Clinical Education's office is acceptable; however, an email should be sent as well.
- Documentation regarding the absence will be required.
- Absences due to religious holidays *recognized by the University will be excused*, provided students give faculty advanced *notice*.
- Excused absences that are less than 2 days will not require any make-up time or make-up assignments.
- Excused absences may not exceed five consecutive days. *Absences that exceed a total of five consecutive days will be considered a "personal leave" (see Personal Leave of Absence Policy).*
- Absences of 2-4 days on any given rotation will result in the student receiving a grade of "I" (Incomplete) and the student will be required to make-up this time at a rate of one day per number of days absent. The missed time will be made up the following semester after the last clinical rotation of the clinical year.

- In the above mentioned case, a site will be chosen at the discretion of the Director of Clinical Education. *Once the missed time is completed, the student will be assigned a final grade without deduction.* If this deficiency is not completed or the rotation is unsuccessfully completed, a grade of “F” (Fail) will be earned, which may result in dismissal from the program.
- Failure to follow the rules stated above will result in an un-excused absence.

UNEXCUSED ABSENCES

An unexcused absence is any absence during the clinical year that *does not have prior approval of both the preceptor and Director of Clinical Education.* This also includes failure to inform the Director of Clinical Education or the clinical site of the absence. An unexcused absence will result in a time deficiency or disciplinary action as described below:

- Deficiency of the missed time will result in forfeiting two personal days for each missed clinical day. Example: If you have one unexcused absence resulting in missing one clinical day, you will be docked a total of 3 personal days. One day for the absence and 2 penalty days in which you forfeit.
- Personal counseling by program faculty and a letter of reprimand will be placed in the student file.
- Depending on the nature of the absence and availability of clinical sites, the student will be assigned to complete the deficiency within the same specialty service as the absence.
- In the event a clinical site is not able to accommodate this time, the student may be assigned to another clinical site at the discretion of the Director of Clinical Education.
- The student will receive a grade of “I” for the rotation. Once the preceptor has documented successful completion of the rotation, the grade will be changed to reflect the earned grade on the rotation. If this deficiency is not completed or the rotation is unsuccessfully completed, a grade of “F” will be earned, *which may result in dismissal from the program.*
- Deficiencies may be completed on weekends (if the clinical preceptor agrees and there is sufficient work to be done during the weekends). Otherwise, this time will be completed the next semester following the last scheduled rotation of the clinical year.
- In special circumstances, the program may arrange for completion of a deficiency during University breaks, with the approval of the Associate Dean.
- *The second occurrence of an unexcused absence of any length will result in a faculty review of the student, and either rescheduling of clinical rotation days for the unexcused absence, repeating the clinical rotation, or dismissal from the program.*

PERSONAL LEAVE OF ABSENCE

Any absence of more than five consecutive days will require the student to take a personal leave from the program. Students will be eligible for a personal leave in the event of a severe illness or death/critical illness of an *immediate* family member. The following policies govern personal leaves of absence:

- It is the student’s responsibility to submit a signed “Personal Leave of Absence” form. This form must be approved by the Program Director.
- Personal leave in excess of 4 weeks may result in administrative withdrawal from the program. The decision to administratively withdraw a student will be made by the Program Director. If the student was in good standing prior to withdrawal, they may be given the option to re-enter the

program. Credit for coursework completed prior to the leave will be determined at the discretion of the Program Director.

- If a student is granted a personal leave, no deduction in personal days will result.
- Days missed due to personal leave will be made up by the schedule established by the Director of Clinical Education.
- *Make-up days for personal leave will extend into one additional semester of graduate school, in order for the student to complete the clinical year requirements.* Students will receive a grade of "I" for all rotations affected by the leave of absence. Following successful completion of the deficient rotation(s), the grade will be changed to reflect the earned grade on the rotation without deduction.

PRECEPTOR VACATIONS / ILLNESS

In the event that a preceptor takes a vacation or becomes ill during a clinical rotation, the student is required to ***immediately*** notify the Director of Clinical Education. When possible, arrangements will be made for the student to complete the rotation at another clinical site. If this is not possible, the student will be given an "I" and will be required to complete the rotation the following semester. ***Under no circumstances should a student attempt to make their own arrangements for completion of the rotation.***

Failure to notify the Director of Clinical Education of a preceptor's absence may result in the student receiving disciplinary action, as described in the Unexcused Absence Policy.

JURY DUTY / MILITARY DUTY

Clinical time lost due to jury duty or military duty must be made up at a rate of one day for each missed day. Make-up days will occur as soon as possible, but days may be deferred until the last rotation of the clinical year or will be required to be completed the following semester. Students may utilize up to 5 personal days to fulfill completion of clinical rotation requirements. *Note that the two weeks of annual training required for Reserve Forces and National Guard may be waived during the clinical year.* Students are encouraged to seek this waiver. If this does not occur, the two weeks must be made up.

OFF-ROTATION CLINICAL EXPERIENCE

Under no circumstances should a student leave an assigned rotation in preference for a clinical experience that is not under the supervision of their assigned preceptor. In the event that a student is given the opportunity to participate in a clinical experience that is not under the supervision of the assigned preceptor, the student must notify the Director of Clinical Education and the assigned preceptor. Permission to participate in off-rotation clinical experience must be obtained from the Director of Clinical Education and the preceptor. Failure to do so will result in an unexcused absence.

CLINICAL YEAR ACADEMIC POLICIES

GRADING POLICY

Clinical rotation grades are based on preceptor evaluations, End-of-Rotation exams (EOR), completion of the patient logging system, ROSH exams, SOAP notes, cased-based learning, Objective Structured Clinical Examinations (OSCE) encounters, End-of-Semester exams, PACKRAT II exam, and the summative exam.

The grading scheme assigned to all assignments scheduled during the clinical year is outlined below. This information is also summarized in the Clinical Services and Senior Seminar Syllabi located in the Clinical Services Canvas Modules.

Preceptor Evaluations

Students must earn a score of at least 80% to receive a passing grade for the preceptor evaluation.

- If a student earns less than an 80% or receives an Unsatisfactory (U) on any of the Professional Standards, they will fail the rotation and be required to repeat the rotation.
- Any student who earns a rating of Below Average (BA) on the preceptor evaluation will be required to meet with the DCE.
- *It is the student's responsibility to submit or confirm submission of preceptor evaluations at the completion of each rotation.*
- Failure to secure a preceptor evaluation by the end of the semester will result in a grade of "I" for the rotation. *Per UAB policy, any unresolved "I" by the end of the subsequent semester will result in a grade of "F" for the rotation.*
- Items marked NA/NO (not applicable/didn't observe) on the evaluation forms will not enter into calculation of the final grade.
- Students who wish to have additional preceptor evaluations considered in calculation of the rotation grade must receive prior approval by the Director of Clinical Education. The Director of Clinical Education has the right to either accept or reject additional evaluations when calculating the final grade.

End-of-Rotation Exams

*Each student is required to take an end-of-rotation exam upon completion of every core rotation. Exams are scheduled on the last Friday of each core rotation, unless otherwise specified. *Personal days may not be taken on any "call-back" day (scheduled on the last Thursday and Friday of each clinical rotation).**

The program utilizes standardized EOR exams provided by the Physician Assistant Education Association (PAEA) through the Exam Driver platform.

- EOR exams will be taken at time of completion of each core rotation, to include the following:
 - Family Medicine, Internal Medicine, Emergency Medicine, Behavioral Medicine, Women's Health, Pediatrics, and General Surgery.
- To advance to the next scheduled clinical rotation, students must earn a passing grade for each core EOR exam.

- The following grading scale will be used to determine individual student performance on EOR exams:
 - 80 - 100% = Pass
 - 70 - 79% = Pass with required remediation
 - < 70% = Fail
- If a student earns a grade between 70% - 79%, they will be required to meet with the Clinical Coordinator or Director of Clinical Education (DCE) and complete a required remediation assignment based on their exam keyword feedback.
- If a student fails an EOR exam, they will be required to meet with the Clinical Coordinator or DCE and complete a remediation assignment based on their exam keyword feedback. The student will also be assigned topic-related questions using a standardized question bank to aid in closure of knowledge gaps. The student is required to successfully pass a retake EOR exam within a time period defined by the Clinical Coordinator or DCE.
 - If a student earns a 70% or higher on the retake EOR exam, they will be allowed to progress in the clinical year and receive a passing grade for the rotation.
 - If a student fails the retake EOR exam, the student will fail the rotation and will be required to complete the rotation at the earliest time permitted by the clinical schedule.
- If a student receives a grade less than 70% on any subsequent EOR exam AND on a second retake EOR exam, the student will be dismissed from the program due to failing 2 rotations in the clinical year.

E*Value Case Logs and Time Tracking

Clinical tracking information is required for all rotations. Entering this information requires computer access. It is recommended that tracking information be entered daily. If the student does not have computer access, then the student may download data from the second floor computer lab of the Learning Resource Center (LRC) before and after Senior Seminar.

- Students are responsible for logging all patient encounters and hours worked each day of the rotation.
- Students are required to log a minimum of 100 patient encounters throughout the course of each rotation.
- Logs are due by 11:59 pm, the Sunday after completion of the rotation. Example: If the last day of your rotation falls on Friday, the patient log must be completed by 11:59 on Sunday, as the next rotation will start the following Monday.
- *Please advise the Director of Clinical Education by the second week of the rotation, if you anticipate not being able to meet the minimum required patient encounters.*
- If a student fails to submit the required logs for the assigned rotation (patient encounters and time logs), they will not be permitted to progress to the next rotation until submission is complete.
- Please note, this may delay the start of the next scheduled rotation and delay the date of program completion.

SOAP Note Submissions

Each student will be required to complete a virtual case on either Aquifer or Case X and submit a SOAP note for faculty review.

- A defined rubric for the SOAP note will be published in the learning management system
- The following grading scale will be used to determine individual student performance for SOAP note submissions:
 - 65 - 75 Points = Pass
 - 60 - 64 Points = Pass with required remediation
 - < 60 Points = Fail
- If a student earns between 60 - 64 points, they will be required to meet with the Clinical Coordinator or DCE to review their submission and discuss noted deficiencies.
- If a student earns a grade of less than 60 points, the student will fail the assignment and be required to remediate with the Clinical Coordinator or DCE. The student will also be required to complete a second virtual case and submit a SOAP note for review.

Case-Based Learning Activities

- Students are required to participate in case-based learning activities throughout the clinical year.
- Students will be placed in groups to complete two case scenarios. Students will submit a SOAP note per case in Canvas, by 5 PM on the day the cases are completed.
- Faculty will review the submitted SOAP notes using the posted SOAP Note Rubric, located in Canvas. Failure to submit the assigned SOAP notes or failure to include all necessary components of the SOAP note will result in a *group remediation assignment* that must be completed by Sunday at 5 PM prior to starting the next rotation. *Group members will not be allowed to start the next rotation until the assignment is deemed complete by faculty.*

Standardized Question Bank Exams (Core Rotations)

Students will be required to take rotation-specific practice exams in tutor mode and score at least a 70% to earn a passing grade. Students will have unlimited attempts to score a grade of at least 70%.

Standardized Question Bank Exams (Elective Rotations)

Students will be required take personalized practice exams in tutor mode and score at least a 70% to earn a passing grade. Student will have unlimited attempts to score a grade of at least 70%.

End of Semester Examinations

- Consists of a 120-question multiple choice exam at the end of each semester during the clinical year.
- The following grading scale will be used to determine individual student performance on end of semester exams:
 - 80 - 100% = Pass
 - 70 - 79% = Pass with required remediation
 - < 70% = Fail

- If a student earns a grade between 70% - 79%, they will be required to meet with the Clinical Coordinator or Director of Clinical Education (DCE) and complete a required remediation assignment based on topics missed on the exam.
- If a student fails an end of semester exam, they will be required to meet with the Clinical Coordinator or DCE and complete a remediation assignment based on topics missed on the exam. The student is required to successfully pass a retake exam that will be created utilizing a standardized question bank, based on the identified gaps in knowledge. The student will have 2 additional attempts to score a grade of at least 70%. *If a student fails the end of semester exam after the final attempt, they will be required to enroll in a 3-credit hour Special Topics course the following term, at which time they will undergo a semester of focused-remediation led by the faculty.*

Formative Objective Structured Clinical Examinations (OSCE)

- Each student will be required to complete a *formative* OSCE during the spring and summer semester of the clinical year.
- The following grading scale will be used to determine individual student performance on the *formative* OSCE:
 - 80 - 100% = Pass
 - 70 - 79% = Pass with required remediation
 - < 70% = Fail
- Failure of an OSCE:
 - If a student earns a grade of < 70% on the *formative* OSCE, the student will fail the assignment and will be required to remediate with the Clinical Coordinator or Director of Clinical Education (DCE).
 - Remediation will consist of completing an OSCE self-reflection form, reviewing the recorded OSCE event with a faculty member, and completing another OSCE in the Office of Standardized Patient Encounters (OSPE).
- If a student earns a grade between 70% - 79%, they will be required to remediate with the Clinical Coordinator or DCE.
 - Remediation will consist of completing an OSCE self-reflection form, reviewing the recorded OSCE event with a faculty member, and discussing strategies for improvement.

Summative Objective Structured Clinical Examinations (OSCE)

- Each student will be required to complete a *summative* OSCE during the final semester of the clinical year.
- The following grading scale will be used to determine individual student performance on the *summative* OSCE:
 - 80 - 100% = Pass
 - < 80% = Fail

- Failure of an OSCE:
 - If a student earns a grade of < 80% on the *summative* OSCE, the student will fail the assignment and will be required to remediate with the Clinical Coordinator or Director of Clinical Education (DCE).
 - Remediation will consist of completing an OSCE self-reflection form, reviewing the recorded OSCE event with a faculty member, and completing another OSCE in the Office of Standardized Patient Encounters (OSPE).

PACKRAT II Examination

- Students are required to complete the PACKRAT II exam during the final semester of the clinical year.
- This exam is part of the program's summative assessments and will be used to help students identify any area(s) of concern, prior to taking the PANCE.

Summative Examination

- Students will take a 150-question multiple choice exam at the end of the clinical curriculum, during PA 644.
- The following grading scale will be used to determine individual student performance on the summative exam:
 - 80 - 100% = Pass
 - 70 - 79% = Pass with required remediation
 - < 70% = Fail
- If a student earns a grade between 70% - 79%, they will be required to meet with the Clinical Coordinator or Director of Clinical Education (DCE) and complete a required remediation assignment based on topics missed on the exam.
- If a student fails the summative exam, they will be required to meet with the Clinical Coordinator or DCE and complete a remediation assignment based on topics missed on the exam. The student is required to successfully pass a retake exam that will be created utilizing a standardized question bank, based on the identified gaps in knowledge. The student will have 1 additional attempt to score a grade of at least 70%. *If a student fails the summative exam after the final attempt, they will be required to enroll in a 3-credit hour Special Topics course the following term, at which time they will undergo a semester of focused-remediation led by the faculty.* The student will be advised that this will delay their graduation by 1 semester.

SUMMATIVE EVALUATION OF STUDENT KNOWLEDGE

Summative evaluations will be given during the final semester of the clinical year and will consist of a summative OSCE, a summative multiple-choice examination, and the PACKRAT II exam. To be cleared for graduation, students will be required to earn a grade of 70% or better on the summative exam and an 80% or better on the summative OSCE. Failure to pass the summative exam or OSCE will require remediation until the student is able to successfully complete the assessments.

FACULTY SITE VISITS

Site visits will be conducted by the Director of Clinical Education (or any faculty member of the PA program) on an annual basis during the clinical year. A site visit may consist of a face-to-face, electronic (Skype/Zoom), or telephone meeting with the preceptor and/or with the student. After each visit, a Site Visit Report will be filed in the program's office.

GRADUATION

APPLICATION FOR DEGREES

Students planning to graduate are required to file an application for their degree with the UAB Graduate School, at least six months prior to completion of their degree requirements. (Please see the University's website for deadline dates). There is a fee to cover the cost of the diploma.

CLINICAL YEAR HONORS AND AWARDS

Clinical-year students who have demonstrated superior scholastic achievement may be recognized through a series of annual School of Health Professions (SHP) awards, including the:

1. *Dean's Leadership and Service Award*: Presented to outstanding SHP students for scholarship, leadership, and service to SHP and to UAB.
2. *Cecile Clardy Satterfield Award for Humanism in Health Care*: Presented to an outstanding student in recognition of achievements for humanitarianism in the clinical portion of a SHP educational program.
3. *Alfred W. Sangster Award*: Presented to an outstanding international student enrolled in one of SHP's programs.
4. *Charles Brooks Award for Creativity*: Presented in recognition of creative and innovative accomplishments of a SHP student.
5. *Margaret K. Kirklin Award for Excellence*: Presented to graduating seniors who have attained outstanding academic achievement, maintaining a cumulative overall 4.0 GPA, throughout their enrollment in the Physician Assistant Studies Program.

PHYSICIAN ASSISTANT CERTIFICATION EXAM (PANCE)

INITIAL CERTIFICATION

To obtain the PA-C designation (Physician Assistant-Certified), students must pass the Physician Assistant National Certifying Exam (PANCE). Administered several times during the year, the PANCE is a multiple-choice exam that is comprised of 360 questions that assesses basic medical knowledge. Preregistration is required and students are responsible for arranging a time to take the exam. The program encourages students to take the PANCE immediately after graduation, and students may choose from over 300 Sylvan Technology Center testing sites located throughout the country. *Please note, there are several blackout dates for testing that are scheduled at the end of each year. Therefore, students are encouraged to check for available testing dates at the sites of their choosing.*

After passing the PANCE, Physician Assistants are issued an NCCPA Certificate, entitling them to use of the PA-C designation until the expiration date printed on the certificate (approximately two years). For additional information, please contact NCCPA at:

National Commission on Certification of Physician Assistants (NCCPA)

12000 Findley Road, Suite 100

Johns Creek, GA 30097-1409

info@nccpa.net | Phone: (678) 417-8100

MAINTENANCE OF CERTIFICATION

The initial certification marks the beginning of a ten-year certification cycle. To maintain the (PA-C) certification at the conclusion of this cycle, Physician Assistants must follow a three-part process that involves documentation of continuing medical education (CME), submission of re-registration materials, and successful completion of the national Physician Assistant Re-certification Exam (PANRE). Additionally, during each two-year period of the ten-year cycle, PAs must complete a minimum of 100 hours of CME and submit evidence of this to NCCPA. PAs must also pay a re-registration fee to NCCPA. Every ten-years of the certification cycle, PAs must successfully pass a PANRE re-certification exam.

STATE LICENSURE / REGISTRATION

The state of Alabama requires continuing education hours (CME) to maintain certification. If students plan to practice in another state, they need to contact that state board of medical licensure for recertification specifics.

PROFESSIONAL ORGANIZATIONS

The American Academy of Physician Assistants (AAPA)

AAPA is the national organization that represents Physician Assistants in all specialties and all employment settings. Founded in 1968, the Academy has a federated structure of 57 chartered chapters representing PAs in all 50 states, the District of Columbia, Guam, and the federal services. Membership also includes Physician Assistant students and supporters of the profession. For more information contact AAPA at:

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

The Alabama Society of Physician Assistants (ASPA)

Founded in 1975, ASPA members are located throughout the state. Members receive the ASPA newsletter/journal, special rates for ASPA CME conferences, invitations to CME dinner meetings, as well as other networking opportunities. For more information contact ASPA at:

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