“A Tradition of Excellence, A Mission of Service”

Physician Assistant Program
Student Handbook
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WELCOME

Welcome to the Canisius College Physician Assistant Program. Our goal is to make you feel like a respected and successful member of the Canisius College Physician Assistant Program during your entire educational experience. We also hope to grow your desire to serve in the Jesuit vision and mission with a focus on caring for the underserved. Canisius College has a long history of excellence and leadership in the community and beyond, with a tradition of promoting human excellence, social justice, and acceptance.

The purpose of this handbook is to provide you with guidelines for policies, procedures and information that you will need to be a successful graduate of the Physician Assistant Program. These policies and procedures are the basis for decision-making with regard to student matters and a foundation for your learning experience. This handbook should be considered an adjunct to Canisius College Graduate policies and procedures. All college policies regarding performance, progress and retention, financial aid, waivers and withdrawals, and timeframe for completion of the program can be found here: https://www.canisius.edu/sites/default/files/%2A/2018-2019_graduate_catalog_final.pdf

Every physician assistant student is responsible for adhering to the policies and procedures contained in the Physician Assistant Studies Handbook. Upon admission to the program, the student is expected to read and review all policies. In addition, a copy of the Confidentiality Policy and Verification of Receipt of the Graduate Student Handbook, and agreement to comply with all policies, must be signed and returned to the Academic Program Coordinator. Any questions or concerns can be brought to the attention of the Academic Program Coordinator or Program Director.

Again, welcome to Canisius College Graduate Physician Assistant Studies Program.

Aimee Larson, MPAS, PA-C
Program Director, Physician Assistant Studies
GENERAL INFORMATION

Program Information:

Program Director, Clinical Assistant Professor:
Aimee Larson, MPAS, PA-C 716-888-8552 larson8@canisius.edu

Medical Director:
Paul Anain, MD 716-888-8550 anainp@canisius.edu

Academic Program Coordinator:
Sandy McKenna, MS 716-888-8553 mckennas@canisius.edu

Didactic Education Coordinator, Clinical Assistant Professor:
Andrew Case, MS, PA-C 716-888-8555 case7@canisius.edu

Clinical Education Coordinator, Clinical Assistant Professor:
Donna Anderson, MPAS, PA-C 716-888-8554 ander124@canisius.edu

Pharmacotherapeutics/Medical Sciences Coordinator, Associate Professor:
Kimberly Bernosky, MA, PhD 716-888-8556 bernoskk@canisius.edu

Interprofessional Education/Simulation Coordinator:
William “Fritz” Sticht 716-888-8557 stichtw@canisius.edu

Clinical Skills Coordinator, Clinical Assistant Professor:
TBD

Clinical Assistant Professor, Physician Assistant Studies:
TBD

Program Main Phone: 716-888-8550

Program Fax: 716-888-8551

Program Email: pastudies@canisius.edu

Program Website: https://www.canisius.edu/academics/programs/physician-assistant-studies
College Information:

School Closing/Delays: 716-888-3130
Student Counseling Services: 716-888-2620
Student Health: 716-888-2610
Public Safety: 716-888-2330
Financial Aid: 716-888-2600
Student Records: 716-888-2990
ITS Help Desk: 716-888-8340
MISSION
The Canisius College Physician Assistant Department is built upon the central mission of eliminating healthcare disparity and improving the health and wellbeing of underserved communities by developing competent, compassionate clinicians who discern a purpose of service, mindfulness, and leadership in both their community and profession.

VISION
The Canisius College Physician Assistant Program will be a leader in the development of competent, compassionate clinicians and leaders for our profession, with a strong foundation in Jesuit values.

PROGRAM DESCRIPTION
The goal of the Canisius College Physician Assistant Program is to foster a culture of team-based learning by utilizing innovative educational strategies, creating a supportive learning environment, and developing a curriculum centered in primary care with a special focus on addressing the needs of underserved. Students will be presented with learning objectives that emphasize the need to work as a team to solve a problem, with the understanding that the answers to each problem are not always clearly defined. Graduates of our program will be confident and proficient in a wide variety of skills in multiple areas of medicine. This includes the ability to retrieve all pertinent information, assess and examine patients using appropriate tools, and develop a sound management plan. In addition, students will be educated in multiple areas of professional development with a focus on social justice and community education.

PROGRAM GOALS
1. Development of culturally and ethically competent PAs: The program is committed to inspiring graduates to work in medically underserved communities as reflected in graduate survey responses, preceptor evaluations of clinical students, and clinical placements.
   a. At least 20% of each graduating class reflect work in underserved communities or with underrepresented populations
   b. Students will receive an average of 3.5 out of 5 for preceptor evaluation of student’s cultural awareness and sensitivity.
   c. The program requires each student to perform at least one clinical rotation in a setting that cares for underserved or disadvantaged patients. Compliance will be reflected in our clinical placement data annually.
2. Curriculum development: The program strives to develop a curriculum that provides adequate foundation of knowledge and skills required for entry-level practice as a Physician Assistant. 
   a. Mean class-specific performance value of 80% or higher on summative written and practical exams 
   b. Mean class-specific performance value of 80% or higher on preceptor evaluations and end-of-rotation exams 
   c. End-of program surveys: 80% or more of students agree or strongly agree that program provided adequate knowledge for entry-level practice. 
   d. At least 80% of employers will agree that Canisius graduate PAs were well prepared for clinical practice 

3. National certification exam: Students will be prepared to successfully pass the national certifying examination on first attempt, with a program benchmark of first time pass rates higher than the national average. 

4. Accreditation: Achieve Provisional Accreditation status by demonstrating strong student preparation, and consistently evaluating and improving overall program performance. Retain accreditation through ongoing program assessment and improvement through Continued Accreditation status. 

5. Program and College Mission: Create students who are passionate about Jesuit values of service and leadership through strong support of the community and the profession. 
   a. At least 85% of each cohort will actively participate in local, regional, or national community service efforts throughout their training at Canisius College and beyond. Community service includes activities such as organized free health screenings, work with food banks, disaster relief efforts, and working closely with disadvantaged youth to promote the health professions. 
   b. A minimum of 90% of students and graduates will maintain active membership in their local, state, or national physician assistant associations/organizations as evident on graduate surveys. All Canisius College PA students are required to hold membership with the New York State Society of Physician Assistants (NYSSPA) throughout training, and strongly encouraged to maintain membership with the American Academy of Physician Assistants (AAPA) 

CURRICULUM DESIGN 

The curriculum design, offered in didactic and clinical components, is based on the concepts of adult-centered learning and professional education. Emphasis is placed on mastery of
knowledge, skills, and attitudes required by the graduate to practice effectively as a PA. The didactic curriculum offers multiple modalities for learning which include self-directed study, lecture, integrated clinical cases, hands-on skill development, and laboratory experiences. These modalities assist students in developing the necessary skills to be self-directed life-long learners who effectively apply what they learn in the clinical setting. The clinical curriculum provides core primary care and other learning experiences where students apply knowledge and skills in a variety of patient care settings under the supervision and mentoring by licensed health care providers. Students will be required to participate in at least one clinical experience in an underserved setting.

PROGRAM INSTRUCTIONAL MODEL

The Canisius College PA Program is offered on a full-time basis only. The length of the program is seven semesters (27 months), delivered in consecutive order. The first 12 months will be spent in the classroom setting, with periodic exposure to the clinical setting. The second 15 months will be spent on clinical rotations, with eight core required rotations and two electives offered. Didactic content will be delivered in a modular format, following each body system from the basic sciences through clinical medicine, diagnostic medicine, and therapeutics. Delivery of content includes in-person lecture time, study of online preparatory materials, clinical emersion, skill demonstration, and simulation. Independent study and preparation is a critical component of this program as an adult learner. Inter-professional learning opportunities are also integrated throughout the curriculum. Students must demonstrate successful completion of each module and course in the order delivered in order to progress in the program. This is explained further on page 28.

Since the PA program will use computer technology in the delivery of the curriculum, all PA students must be computer literate. The Canisius College PA program has implemented an online medical library, use of the D2L learning management system, online assessments, and online journals in the instruction of this program. Students must provide their own laptop, iPad, or other computer technology to participate in this program. Technology support in the use of computer-based learning tools is available to students through the Center for Online Learning (COLI) as well as Information Technology Support (ITS).

NEW GRADUATE COMPETENCIES

Competencies are knowledge, skills, and behaviors expected of the PA student at the end of the program and before entrance into PA practice.
Graduates of the Canisius College Physician Assistant Program will be able to:

1. Demonstrate content knowledge
   - Understand the basic sciences of anatomy, physiology and pathology and apply knowledge in the diagnosis and treatment of disease.
   - Understand the principles of pharmacotherapeutics to apply in the treatment of patients.
   - Elicit a detailed history and perform a thorough physical exam in order to accurately diagnose and treat patients.
   - Utilize effective verbal and non-verbal communication skills to elicit information from a patient.
   - Understand the principles of public health and incorporate health promotion and disease prevention into patient care practice.

2. Display adequate and appropriate skills and dispositions
   - Understand how to order and interpret appropriate diagnostic tests in a cost efficient manner to aid in treatment of patients.
   - Formulate an appropriate differential diagnosis to accurately diagnosis and manage a patient utilizing the history and physical exam findings.
   - Perform or assisting in performance of diagnostic and therapeutic procedures.
   - Implement patient management plans, including referrals to other healthcare professionals or agencies, to provide ongoing quality care.
   - Apply appropriate clinical reasoning and medical decision-making when providing care for a patient while also empowering the patient in the process.
   - Manage acute and chronic patient conditions by providing appropriate pharmacotherapeutic, non-pharmacotherapeutic, preventive, and continuous care.

3. Consistently display professionalism
   - Understand how to accurately present and document patient information to other healthcare professionals and in the patient medical record.
   - Organize and lead inter-professional medical or surgical teams to improve patient outcomes.
   - Participate effectively as a member of an interdisciplinary healthcare team.
   - Understand the limitations of a practicing physician assistant and appropriately see guidance when needed.
   - Maintain current understanding of medical standards of practice and critically evaluate medical literature for ongoing medical education.
   - Become familiar with the history of the PA profession, development, current trends, and political/governing issues that affect PA practice.
• Apply information systems/technology to monitor and improve patient care and health care delivery systems.
• Accurately perform an oral presentation of a patient case to include referral of patient to a medical specialty if indicated.
• Display a level of professionalism and respect for others that represents the Canisius College and the PA profession.
• Advocate for the PA profession

4. Show an understanding and appreciation for cultural competence

• Understand medical and social issues of patients of all backgrounds, particularly of the underserved, and provide compassionate and competent care without bias.
• Demonstrate personal and professional adaptability in treating patients from all social, economic, and religious backgrounds and adjust treatment plans accordingly.
• Serve the local community in areas of medical disparity and advocate for social justice and equality.
• Maintain patient confidentiality and apply ethical principles when practicing medicine.

5. Understand the importance of lifelong learning

• Engage in lifelong learning, cura personalis, and service to others.
• Demonstrate willingness to teach future PA students, as well as performing quality community and patient health education.
• Practice evidence-based medicine and life-long learning to better understand and keep up-to-date on current medical practices and guidelines

TECHNICAL STANDARDS FOR PA STUDENTS

Students in the Physician Assistant (PA) Program must have the ability to perform skills in the following categories: observation, communication, motor, intellectual, and behavior/social. All students must meet all technical standards upon matriculation and throughout enrollment in PA coursework. The PA Program, in accordance with Federal and New York State law, is committed to equal opportunity and a nondiscriminatory environment for all persons. No qualified person with a disability shall be excluded from admission, participation, or benefits. No student of faculty member will be subjected to discrimination solely due to his or her disability. It is the responsibility of the applicant or student with disabilities to provide supporting documentation and to request those accommodations that he/she feels are reasonable and are needed to execute the essential requirements described within this document. Students are encouraged to meet with a professional in Accessibility Support to discuss the
accommodations and to become familiar with the procedures prior to signing this student handbook.

Observation and Sensory:
The student must be able to observe demonstrations in the basic sciences, perform clinical laboratory diagnostic tests, utilize patient monitoring devices, interpret diagnostic images and reports, and examine patients for the purposes of assessment and diagnosis accurately. The student must have the ability to discern and comprehend spatial relationships of structures, and must be able to assess all areas of the body through inspection and palpation. The student must be able to perceive the presence of abnormalities in a specific body system such as masses, lesions or inflammation, and must also be capable of perceiving the signs of disease through use of all sensory tools (e.g.: vision, hearing, smell, touch) throughout the comprehensive head to toe physical examination of the patient. The process of physical assessment includes, but is not limited to, information that is derived from observation and palpation of body areas, palpable changes in various organs and tissues, and auditory information such as patient voice, and heart/lung/bowel/vascular sounds.

Communication:
The student must be able to communicate in English clearly, efficiently and effectively with instructors, fellow students, patients and caregivers, physicians and other members of the healthcare team verbally and in written formats. These communication skills require the ability to examine all information provided, conduct a well-focused follow-up inquiry, and relay relevant feedback in the oral and written communication format. Students must be able to communicate in a group setting in an effective and constructive way to facilitate optimal learning and care of the patient. Additionally, students must be able to recognize barriers to effective communication based on differences of language, religion, social status, education status, or other factors, and find the best way to communicate with patients and their families in a way that is clear, concise, and fosters confidence in the plan of care. Effective communication also relies on the student’s ability to use appropriate judgment in seeking supervision and consultation in a timely manner. Finally, students must learn to clearly, efficiently, and thoroughly document all aspects of the patient care process including chief complaint, history of illness, examination findings, testing results, assessment, and care plan.

Motor:
The student must have sufficient motor function to effectively move themselves and others in order to perform physical examinations and to provide medical care and treatment. During clinical coursework and in eventual practice, the student must demonstrate motor skills related to patient physical examination and performing testing or treatment procedures. Additionally, the student must be able to physically ensure the safety of themselves and patients at all times, including meeting the acceptable standards of universal precaution and sterile technique.
Students will need to demonstrate physical ability and skill in tasks such as suturing, splinting, injections, joint manipulations, removing foreign bodies from skin, flushing eyes, ears, or wounds, performing digital pelvic or rectal examinations, and more. Many of these procedures require fine motor skills and relative strength.

**Intellectual:**

The student must have the cognitive abilities necessary to master relevant content in the basic sciences and clinical courses at sufficient breadth and depth determined by the PA profession. These skills may be described as the ability to comprehend, memorize, analyze, and apply learning material. The student must be able to develop reasoning, problem-solving, and decision-making skills appropriate to the practice of medicine. Additionally, the student must be able to recognize the limits of his/her ability, request assistance when necessary, and create a professional development plan based on their individual needs.

**Behavioral and Social Attributes:**

The student must demonstrate personal attributes of caring, integrity, and cultural competence. The student must possess the emotional health and stability required for full application and use of their intellectual abilities, the exercise of good judgment, the prompt and effective completion of all responsibilities under stress, and to adapt to a clinical environment that may change rapidly without warning and/or in unpredictable ways. The student is expected to interact with others in a respectful and responsible manner at all times. The student must be able to accept and respond to constructive criticism and resolve conflicts in a socially acceptable and professional manner. Additionally, students must continually demonstrate ability to self-assess, self-correct, and self-direct; to identify needs and sources of learning, and to continually seek new knowledge and understanding. Students will also be expected to understand the Jesuit philosophies of Canisius College and apply these philosophies to the learning process and in clinical practice.

**PROFESSIONALISM**

Physician Assistant students are expected to consistently demonstrate professional behaviors such as follows:

1. Punctuality for lecture, classroom, and clinical laboratories.
2. Consistent preparation for lecture, classroom, and clinical laboratories.
3. Completion of assignments within allotted parameters.
4. Positive relationships with peers, faculty, patients, and staff.
5. Compliance with the clinical dress code.
6. Acceptance and incorporation of faculty, preceptor, and peer feedback.
7. Adherence to policies and standards established in Canisius College and Physician Assistant Program student handbooks.

8. Respect for peers, faculty, patients and staff. This includes behavior in the classroom or clinical setting. Disruptive behavior is defined as any behavior that would be reasonably construed as substantially interfering with learning or patient care (e.g. frequently leaving the classroom during lectures, interrupting fellow students or instructors, using foul language, using personal cell phones during instruction or class discussion, etc.)

9. Refraining from prejudicial behavior.

10. Avoiding use of derogatory language regarding the program, preceptors, or peers on social setting (including social media).

11. Compliance with drug and alcohol policies of Canisius College.

12. Maintenance of a safe environment for the patient in the clinical setting.

It is important to remember you are a part of a larger community and a reflection of Canisius College and the Physician Assistant program at all times, including your personal time and social behavior. Failure to perform in a safe, effective, and professional manner while a student of the Canisius PA program may result in dismissal from the program. If a student violates this policy, depending on the severity of violation (minor, moderate, and major), the instructor retains the right to offer the student a friendly reminder to adhere to the policy or issue a written citation based on the violation observed. Any student who exhibits recurrent violations of policies/procedures will be subject to a formal hearing by the PA Program Progress and Retention Committee (program faculty) to address the student’s behavior and create a corrective action plan. Corrective action may include remediation in professional development, deceleration, or dismissal from the program. Additionally, a professionalism rating rubric will be used to assign points toward the final grade for each course, and can be found in Appendix 4 of this handbook.

Respect for Patients and Peers

All students are expected to introduce/identify themselves to patients, family members, and other health professionals during rotations, and interact in a professional manner at all times. This will be assessed for adequacy and consistency as part of the preceptor evaluation and final grade. Violations of procedure on rotations follow the same policy and procedure for all instruction as previously outlined.

Attendance Policy-Didactic

Regular class attendance is expected and necessary to be successful in this rigorous academic program. Absence of even one lecture or course can result in reduction of academic and professional performance. It is the responsibility of the student to report absences from class to the course instructor and Didactic Coordinator. Students may miss one (1) academic day per
semester without formal excuse. Any medical absences exceeding one (1) academic day must be excused with written documentation of a medical provider (MD, DO, PA, and NP). Absences for non-medical purposes that extend beyond one (1) academic day must be discussed with the course instructor or Didactic Coordinator, and requested documentation or formal excuse requirements will be determined. Failure to produce requested documentation may result in a loss of professionalism points. It is the professional responsibility of the student to meet with course instructors to reschedule any exams or assignments missed during absences. This should be done in advance of absence when scheduled, or immediately upon return from emergency/unexpected absence. Faculty are not required to reschedule any examinations for students who are tardy or absent from a test without appropriate accommodations made by the student. Failure to make up work on the part of the student may result in a zero (0) grade for that test/assignment and possible loss of additional professionalism points.

Attendance Policy-Clinical Rotations

Attendance and timeliness is required for all clinical rotations. Students are not permitted to miss more than one day of clinical time during each clinical rotation unless the preceptor or Clinical Coordinator has granted prior approval. The student must notify the Clinical Coordinator and preceptor/clinical site if absence occurs. If the absence is scheduled or anticipated, the same policies apply as above. Any absence from class or clinical experience that lasts greater than one (1) day will require a medical note or other written excuse to be provided to the Program Director upon return to learning. Any time missed from clinical rotations in excess of one day must be made up at the convenience and discretion of the Clinical Coordinator and preceptor. Failure to complete all assignments missed regardless of reason, will result in a score of zero (0) for that assignment and potentially unsatisfactory grade or failure of the rotation.

Dress Code

Students are expected to maintain a professional appearance at all times when in the learning environment. This pertains to both classroom and rotation settings. Students are expected to be neat, clean and well groomed. Hair should be appropriate in style and color for professional practice. Nails must be neat, trimmed and of appropriate length to allow for patient assessment and care. Wearing of perfumes, colognes, or body sprays is not permitted in the classroom, labs, or on rotations. Artificial nails are strictly prohibited in skills sessions for labs and all clinical settings. Body art and tattoos are to be covered to best of ability while in the clinical setting as well. Provocative attire such as short shorts/dresses/skirts, see-through clothing, mid-drift tops, or offensive artwork is never permitted in the classroom or clinical setting. During student rotations or early clinical exposure days, students are not permitted to wear jeans, shorts, sandals, clogs, sneakers, or open toed shoes. Male students are required to wear a button-up shirt and tie for all rotations unless otherwise instructed by their preceptor (see below). Female
students must wear slacks or skirts that fall at or below the knee, and appropriate blouse or sweater.

Students will be required to wear a short, consultation-length white laboratory coat and student ID badge in all clinical settings with exception of the operative room as designated by the clinical facility. If a student is required to wear alternative uniform on a clinical rotation (e.g. scrubs), (s)he must wear student ID badge on left collar of uniform for easy recognition by patients, family, and staff at facility.

Preceptors will be informed of the dress code and appropriate student identification policies in the Preceptor Handbook. Preceptors are expected to communicate any special instructions for dress (scrubs, footwear, jewelry restrictions, etc.) based on the clinical experience using the Clinical Tracking tool in Exxat. Students will be assessed on their final evaluation for professionalism, including appropriate dress and use of required student ID at all times. If a student arrives for a clinical rotation without the appropriate identification and attire, the preceptor will be authorized to send the student home for that clinical day or allow the student to utilize another acceptable form of identification to distinguish them from other professionals.

The Clinical Coordinator may make exceptions when office/hospital policy differs from the above. Students will be expected to follow facility rules for attire as it pertains to specific clinical experiences (e.g. scrubs, removal of white lab coat, etc.). Clinical supervisors and preceptors reserve the right to dismiss a student from clinical site for inappropriate dress or appearance. Such action may result in remediation with program, further professional education, and/or annotation in student record. Repeated offenses will result in loss of adequate clinical training and likely dismissal from the PA program.

Social Media Policy

Social media is defined as mechanisms for communication designed to be disseminated through social interaction, created using easily accessible and scalable publishing techniques. 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 include but are not limited to Twitter, Snapchat, Facebook, Instagram, LinkedIn, Wikipedia, Flickr, YouTube, and blogs. Students must represent Canisius College, the PA program, and all clinical rotation sites in a fair, accurate and legal manner.

1. Students may not post confidential or proprietary information about the college, staff, students, clinical facilities, patients, or others with whom students have contact within the role of a Canisius College student.
2. Students must be mindful of copyright and fair use and must not violate intellectual property rights.
3. No marks, such as logos and graphics of Canisius College, clinical facilities, or the PA program may be used on personal social media sites without express permission.
4. During clinical rotations, use of cell phones, tablets, PDA’s and other devices employed for social media will be used only as authorized by preceptor and in accordance with agency policies.
5. No personal phone conversations or texting are allowed at any time while in patient areas or in the classroom.
6. Use of computers (PDAs, Notebooks, etc.) during class shall be restricted to note taking and classroom activities.
7. Students may not record (audio or video) professors, guest speakers, or fellow students for personal or social media use without the expressed permission of the faculty, guest, or fellow student.

Canisius College Core Values and Policies

Students of the Canisius College Physician Assistant program are considered members of the Canisius College community as a whole, and are expected to adhere to the mission, vision, policies, and procedures of the college. This includes a deep understanding and reflection of the core values of Canisius College:

Canisius College is committed to the following values that emerge from our Catholic, Jesuit mission to guide all of our decisions and actions:

• Cura personalis, care and respect for the whole person, and a holistic approach to education.
• A dedication to the pursuit of magis, excellence, service, and innovation.
• Principled leadership and personal accountability.
• An individual and institutional responsibility to work for social justice and transform suffering and injustice in the world.
• A deep respect for the natural world, and a commitment to its responsible stewardship.

ACADEMIC INTEGRITY AND INTELLECTUAL HONESTY

The Canisius College Physician Assistant Program adheres to the Code of Academic Integrity defined in the Canisius College Policies Manual. This can be found in full at: http://catalog.canisius.edu/undergraduate/academics/academic-policies/code-academic-integrity/ and as listed below.

Mission and Pledge

The Canisius College community is dedicated to academic excellence and is, therefore, committed to establishing and maintaining an atmosphere of trust. All members of the
community agree and pledge to exercise complete integrity in their academic work. Academic integrity is the foundation of true intellectual growth; it demonstrates respect for oneself and for others.

The students, faculty and administration of Canisius College understand their responsibility for maintaining academic integrity to be both individual and collective. Fulfilling this responsibility requires us to uphold high standards in our own conduct and to exercise fairness towards each other. All instances of academic dishonesty are a breach of community standards. Students, administrators and staff, course instructors and their representatives are expected to report violations of the Code of Academic Integrity.

All members of the Canisius College community are committed to administering the Code of Academic Integrity in a manner consistent with our mission: to teach responsibility, to foster learning and to care for the intellectual and ethical development of the whole person.

Violations of the Code of Academic Integrity shall be dealt with in a manner that is just to all parties and contributes to the learning process. Sanctions shall be shaped by the belief that infractions are not simply occasions for punishment, but are opportunities for learning and for improving the ethical standards of the individual and the community.

The Code of Academic Integrity automatically binds all Canisius College students. As a reminder and reinforcement of the ideals this code embodies, course instructors are asked to place a pledge in the course syllabus. Students, in turn, are asked to carefully consider and sign the pledge, which reads:

“As a member of the Canisius College Community I understand and will uphold the standards for academic behavior as stated in the Code of Academic Integrity.”

**ACADEMIC STANDARDS OF PERFORMANCE**

Successful completion of each area of this program is defined as follows:

- A minimum of 70% (B) grade on individual assessments or assignments
- A minimum of 80% (B) overall grade for each course and for overall program GPA
- A “pass” for a pass/fail course (such as with the Interprofessional Collaborative Practice series)
- An average of 3 out of 4 on the professionalism rubric for each course
- Completion of all required clinical competencies as indicated by the Clinical Education Coordinator
GRADING POLICY-DIDACTIC COURSES

The quality-point average indicates the student’s general scholastic average and is a measure of the quality of his or her work, just as credit hours are the measure of its extent. Points are assigned as follows for each semester hour completed. The grading policy for Physician Assistant studies at Canisius College is as follows:

<table>
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<th>Letter Grade</th>
<th>Quality Points</th>
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Final grades are available on the MyCanisius portal at the conclusion of each semester. If an official grade report is needed for any reason, contact the Student Records office to request a grade report.

Final course grades cannot, in normal circumstances, be altered after they have been recorded on the student academic record. Should an exceptional reason occur that would justify a late grade change, the faculty member can submit to the Dean a request to change a student’s recorded grade within the following time frame:

- The end of the spring semester following a course taken in the fall
- The end of the fall semester following a course taken in the summer
- The end of the fall semester following a course taken in the spring

GRADING POLICY-CLINICAL ROTATIONS

Students will receive a grade for each clinical rotation based on the following breakdown:

- 60% = End-of-Rotation evaluation (completed by preceptor)
- 30% = End-of-Rotation exam (taken during on-campus seminar days)
- 10% = History and Physical write up (for one patient case on each rotation)

The end-of-rotation preceptor evaluation uses a Likert scale to score performance on each learning outcome. Students must receive a 3.0 for each outcome to be considered proficient in
that outcome and minimum of 3.0 total score to successfully pass each rotation. The Likert score for each rotation will be converted to a letter grade for transcript purposes based on the following scale:

3.8-4.0 = A  
3.5-3.8 = A-  
3.3-3.5 = B+  
3.0-3.3 = B  
Below 3.0 = Failure of the rotation

In order to receive an overall passing grade, the student must meet the specific outcomes of the course as above, and demonstrate safe clinical practice and sound medical decision making.

Safe clinical practice is defined as:

1. Performs assessments, diagnostic testing, differential diagnoses and therapeutic interventions consistent with generally accepted conventional practice.
2. Takes appropriate actions to correct, minimize and/or prevent risk to patient.

Unsafe clinical practice is defined as behavior that places the patient or staff in either physical or emotional jeopardy. Physical jeopardy is the risk of causing physical harm. Emotional jeopardy is the creation of an environment of anxiety, distress or uneasiness for the patient or family. Unsafe behavior may be a single occurrence of a very serious nature or may be a pattern of behavior involving unacceptable risk, and may result in failure of a rotation regardless of scores for individual learning outcomes.

If at any time during the clinical practicum a student demonstrates unsafe or unprofessional clinical behavior, the student is subject to immediate review by the faculty. The outcome of the review may be a recommendation of immediate dismissal from the program or recommendation of a remedial plan that would include a behavioral contract, specifying the specific outcomes that the student must achieve to receive a passing final grade.

**APPEAL OF A COURSE GRADE**

Occasions may arise when a student does not agree with the grade he or she has received in a course. When this happens, the question of whether the grade should be reconsidered is addressed in two stages.

**Part A) The initial stage in the grievance procedure is as follows:**

The student first contacts the course instructor to discuss the grade in question within four weeks of the start of the semester (regular academic session) immediately following that in which the
grade was awarded. If the instructor agrees that the grade in question was inaccurate, a grade change is processed by the instructor.

If the student and the instructor cannot agree on the appropriateness of the grade in question, the student may contact the chair of the instructor’s department, in writing, within ten working days after the meeting with the instructor. If a mutually agreeable decision is made through mediation conducted by the chair, the instructor will submit the agreed upon grade and the process is completed. If there is no outcome that is mutually acceptable to the student and the instructor, the process may continue. If the instructor is also the chair, then Step 2 is omitted and the process goes to step 3.

The student may appeal the decision to the appropriate associate dean’s or his or her designates office within ten working days after the mediation process is complete. The associate dean shall collect written views and other pertinent material from the involved instructor, student and chair, as well as consult with any other individuals deemed necessary. The associate dean shall render the decision whether the grade should be reconsidered.

The decision of the associate dean or his or her designate to reconsider or not to reconsider the grade in question is final. If the decision is to reconsider the grade, the procedure outlined in Part B below is followed. If the decision is not to reconsider the grade, the original grade cannot be changed. Cases which are referred to the procedure in Part B can be withdrawn only with the consent of the student, instructor, department chair and associate dean, and after first informing all parties involved.

Part B) The final stage in the grievance procedure is as follows:

If the associate dean feels that the reconsideration of the grade in question is appropriate, a panel of tenured faculty who have not been involved in the process described above is formed from the department in question. The panel must be formed within ten days of the associate dean’s decision. If the department does not have a minimum of four members, it will be expanded to include all the tenured members of the departments within the division (Natural Science, Social Science, Humanities, Business or Education) of which the department in question is a member.

A three-member panel will be selected as follows:

- The associate dean, faculty member and student involved will each select one member of the panel from the designated pool.
- The panel will review all appropriate material and make a determination about the grade change. This review must be completed within thirty days of the formation of the panel. The panel has the authority to assign a grade for the course in question. That grade may be the same grade as assigned by the instructor or a higher or lower grade, according to the panel’s judgment. The student and the instructor will be informed of the panel’s
decision and, when applicable, the authorized grade change will be submitted to the registrar.

The decision of the panel may be appealed by the original instructor or the student to the vice president for academic affairs only in the following extraordinary circumstances:

1. The grade grievance procedure was not followed.
2. Prejudice was manifested against either the student or the instructor.
3. New, relevant information was introduced.

The appeal must be brought within thirty days of the panel’s decision. The burden of proof for the appeal rests with the individual bringing the appeal.

If the Vice President for Academic Affairs believes that the decision of the panel should be reviewed, a three-member appeal panel will be appointed from the pool of tenured faculty as described in Part B: the vice president, the faculty member and the student involved will each select one member. No member of the original panel may serve on the appeal panel. The appeal panel will follow the procedure in Part B, including completion of its task within thirty days of the formation of the panel. The decision of the appeal panel is final.

REMEDIATION

Students with less than a 70% (C) on an individual assignment or assessment, overall GPA below 3.0 or course grade below 80% (B) at any time during the program will be assigned to academic remediation. Students may also request remediation or additional instructional assistance in areas they may be successfully passing but feel they could use additional support.

Remediation Plan

Academic advisors are assigned to each student upon matriculation and are responsible for ensuring adequate academic support for each student. This will include a signed contract outlining the area(s) of concern, a clear plan for improvement, designation of responsible faculty member or instructor, and bi-weekly meeting with responsible instructor. Follow-up meetings with program academic advisor must show evidence of successful completion of remediation in order for the student to move forward with training.

Remediation Timeline

The Program will provide the appropriate tools for remediation within 7 days of identifying a delinquency. Students will be reassessed no longer than 30 days after remediation begins depending on the area of concern and remediation plan. Remediation plans will be developed by the instructor or principal faculty designated to that area of study and reviewed with Program
Director for adequacy. The plan will be signed by the faculty and student responsible for execution of the plan as well as the Program Director. Once remediation plan is satisfactorily completed, the student, faculty member, and Program Director will sign completed statement, and this will be placed in the student file.

Successful Completion

Successful completion is defined as the ability to provide adequate knowledge and improvement in the area of concern. This may include meeting minimum standard on repeat written testing, verbalization of understanding of material to instructor or faculty, or demonstration of professional development. If the student does not demonstrate adequate ability to improve academically, or personal lack of participation or accountability, the student may face deceleration or dismissal from program. If the student is showing adequate improvement or ability to successfully complete program requirements, ongoing support will be offered, with a set advisement schedule coordinated with faculty advisor and Program Director. If the student fails to agree to a reasonable remediation plan as outlined by faculty or Program Director, the student is subject to dismissal.

Remediation Policy for Didactic Year

During the didactic year, failure to obtain at least 70% on any examination or assignment will necessitate a meeting between the student and the course instructor to review the material that was missed and to identify any areas of weakness. The expectation is for the student to meet with the course instructor within 1 week of a failed examination or assignment. Once the course instructor identifies areas of weakness, additional assignments will be given to the student with the expectation that they meet with the course instructor a second time. During this meeting, the student is expected to demonstrate competency of the material in an oral conversation format. This demonstration will be graded and averaged with the initial course grade, and this new grade will be posted. If this new grade continues to fall below the minimum 80% expectation, the student will be required to meet with the instructor and Program Director to discuss further remediation options. This may include deceleration based on overall performance and ability to repeat material without disruption to ongoing learning commitments.

Students scoring below 70 will complete a written remediation of questions missed addressing the keyword (main element) for each question missed. Then the student will also retake the examination and must pass the examination with a score of at least 80%. The original score will be averaged with the new score and recorded as final.

Students who earn a final course grade of 75 – 79% will be allowed to take a competency exam within 1 week after the course ends. This may result in a delay of scheduled college breaks. The competency examination content will be based on the course objectives, but the format and questions will be delivered at the discretion of the course instructor. If a student receives a grade of 80% or higher on the competency exam, he/she will then receive the average of the
initial grade and competency exam grade as the final score. Only one competency examination per course, per semester, will be given to each student. If this new grade continues to fall below the minimum 80% expectation, the student will be required to meet with the instructor and Program Director to discuss further remediation options. This may include deceleration based on overall performance and ability to repeat material without disruption to ongoing learning commitments. An overall GPA of 3.0 (80%) must be achieved in each course to be eligible to move on in the program.

**Remediation Policy for Clinical Year**

Students must receive a minimum of 80% on the rotation evaluation and end-of-rotation (EOR) exam for successful completion of each rotation. If a student fails a rotation or an EOR exam, the student will begin a remediation plan with the Clinical Education Coordinator and academic advisor. Students who fail an EOR exam once will be provided with additional support materials and allowed to repeat the EOR exam. Failure of the repeated end-of-rotation exam a second time will necessitate a repeat of the entire rotation. Failure of any one rotation based on preceptor evaluation and/or performance on the EOR exam will result in repeat of that rotation as one of the electives. Failure of two rotations may result in deceleration or dismissal from the program as decided by the Progress and Retention Committee. If a student exhibits a wide range of clinical deficiencies during the mid-rotation evaluation for any rotation, the student will be withdrawn from the rotation and will be required to meet with the Clinical Coordinator and academic advisor to develop a remediation plan reviewing areas of weakness and clinical content for the remainder of the clinical period. The student must pass this intensive review with written test and OCSE conducted by the PA faculty in order to move on to their next rotation. Failure to successfully complete the remediation plan may result in deceleration or dismissal from the program based on overall performance.

**STUDENT PROBATION**

Students admitted in good academic standing who fail to achieve a minimum overall GPA of 3.0 for the PA program, despite remediation, will be placed on program academic probation. These students must re-establish good academic standing by bringing their overall GPA to at least 3.0 within two consecutive semesters. Once a student returns to good academic standing, they must maintain a 3.0 GPA 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 may be dismissed from the program.

The Canisius College PA Program reserves the right to place a student on probation at any time during the classroom or clinical phase of education for any concern involving academic issues, behavioral or personal issues, or lack of professionalism. Duration and terms of probation are determined by the PA Progress and Retention Committee and submitted for final approval to the
Program Director. This is designed to assure each student meets competencies and requirements for this program while allowing for remediation and successful completion of the program. Failure to adequately address probationary causes and terms for removal of probation status will result in dismissal from the program.

DECELERATION

Students who receive a grade below a “B” in more than one required course or rotation within the program, despite efforts for remediation, will be decelerated. The program Student Progress Committee will develop a recommended deceleration plan to include successful completion of current and future work along with a newly set graduation date. This will be presented to the Program Director for final approval. The deceleration plan will be reviewed and signed by the student in a face-to-face meeting with the Program Director. A copy of the deceleration plan will become part of the student file.

Students are only allowed to repeat and replace two course grades per PA program policy. Assignment of grades in the didactic curriculum is the responsibility of the individual instructor, and assignment of clinical grades is the responsibility of the preceptor and the Clinical Education Coordinator. 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 made in accordance with program Student Progress Committee recommendations. An appeal can be made to the Dean of Education and Human Services after all program procedures are followed and a decision is rendered. The Dean’s decision will be final.

STUDENT DISMISSAL

Canisius College and the Physician Assistant Program reserve the right to dismiss a student at any time if circumstances of a legal, moral, ethical, or academic nature justify such action. Consideration of due process and opportunity for reasonable remediation will be made when appropriate. A review will be conducted by the program Student Progress Committee, and formal recommendations will be made to the Program Director. The program director will email and send a letter to the student immediately upon dismissal, and report this decision to the Dean and Registrar’s office. The student will be required to follow up with the Registrar’s office for further procedures.

Appeals of program decisions can be made to the Dean of Education and Human Services for final decision. The following terms are used as a general policy for Canisius College, and the program reserves the right to implement additional policy and procedures for dismissal.
1. Academic probation: When a student’s grade point average falls beneath the level indicated in the grading policies on page 20, he/she is placed on academic probation — a serious warning that the student’s academic record with the program is unsatisfactory. It is generally not advisable for students on academic probation to take part in extracurricular activities. Probation for two successive semesters will result in automatic academic dismissal from the college.

2. Academic dismissal: Academic dismissal results from any one of the following:
   a. Falling below the grade point average indicated on page 20.
   b. Failing two or more courses in a single semester.
   c. Being placed on academic probation for two successive semesters.

3. Professional behavior dismissal: Students may be dismissed in the recommendation of the Student Progress Committee and approval by the Program Director for professional behaviors that violate program and/or college policies. This includes, but is not limited to:
   - Substance abuse violation
   - Committal of a felony crime
   - Repeated professional behavior violations in the classroom or clinical setting
   - Unsafe practices that result in injury to the student, their colleagues, an instructor, or a patient.

Dismissed students may not enroll in any division of the college and must wait at least six months before applying for readmission.

WITHDRAWAL/LEAVE OF ABSENCE

In the event that a matriculated student in the PA Program encounters a situation that requires a prolonged absence from the program, that student may either withdraw from the program or request a leave of absence. A request for a leave of absence must be submitted in writing to the Program Director with sufficient information to explain the situation. In the event that the student is ill or otherwise indisposed, the written requirement may be waived, or the Program Director may initiate the action independently. A leave of absence is generally not permitted during the didactic phase of training due to the nature of the curriculum. In special circumstances, students may be allowed to take a leave of absence during the clinical rotations and complete their training on a specified timeline with their current cohort, or in alignment with the following cohort. This will be established in discussion with the Program Director. Students will typically not be permitted to miss/repeat more than two clinical rotations before being recommended for deceleration.

If the request for leave is deemed reasonable and appropriate for the circumstance, and if the student is in good academic standing at the time, the Program Director, in consultation with the
program faculty, may grant the leave. Otherwise, the Program Director may, at his/her discretion, deny the leave, recommend that the student withdraw from the program, or may recommend that the student be dismissed from the program. Conditions will be determined individually according to the merits of each case.

A student who is granted a leave of absence is expected to complete all missed work upon return to the program. See Graduate Catalog sections on Continuous Enrollment and Withdrawal.

The Program Director, in consultation with the program’s Student Progress Committee, may recommend that a student take a leave of absence to complete certain remedial work that is deemed necessary to allow the student to succeed in the program.

Students who are seeking permission for leave or withdrawal from the program must:

- Write a letter to the Program Director indicating reason for requested leave or withdrawal and tentative plans for return
- Meet with the Program Director to discuss request
- Report to the Registrar’s office to receive guidance on formal procedures for leave or withdrawal from the college.

If a leave of absence is granted for a period of time equivalent to two or more semesters, the student must notify the Program Director, in writing, of intent to return. In cases where the leave of absence is for medical reasons, the student must also provide documentation from his/her health-care provider verifying that the medical/surgical condition has resolved and that the student is cleared to return to studies. Unless prior arrangements are made with the Program Director, this notification must be accomplished prior to the beginning of the semester preceding the return if the program is expected to guarantee that a space will be available for the student. The program may require the student to repeat the criminal background check and/or urine drug screen as a condition to re-matriculate. This will be at the student’s expense.

Upon return to the program, the Program Director may require the student to demonstrate clinical competencies (e.g., history, physical examination techniques, and surgical skills) and/or take a didactic competency exam. The student must receive a 75% or higher in both of these evaluation procedures in order to advance in the curriculum. The student may also be required to repeat courses and participate fully in program activities with the new cohort. Upon return to the PA Program, the student will be subject to any revisions or additions to the Program curriculum, policies or procedures.

Students must complete all aspects of the program within 42 months of matriculation with exception of students who decelerate in the program. Students who are unable to complete the program within this timeframe may reapply to the program to begin from day one of the didactic phase.
GRADUATION REQUIREMENTS

Students must demonstrate successful completion of each course with a minimum of 80% to progress through each phase of the program, including all clinical rotations. All courses must be taken in order as designated in the program course catalog, and students will not be exempt from any courses based on prior experience. Students must maintain an overall GPA of 3.0 to be approved for graduation.

A summative evaluation will occur in the Capstone course at the end of this program to assess the overall clinical readiness of the student by evaluating core knowledge through a written exam, and clinical acumen through a series of objective structured clinical examinations (OSCE). The summative program assessment includes:

Summative written examination

This is a 200-question final exam covering all aspects of didactic training. Students must achieve an 80% or higher on this exam to be considered eligible for graduation. This exam will be taken after the PANCE Prep Course and PAKRAT as a final gauge of students’ clinical preparedness.

Summative skills examination

- OSCE 30 minute
- OSCE 15 minute
- Simulation case

Masters project presentations

The Master’s project is a poster presentation based on a thorough and appropriate literature review on a topic related to primary care. This presentation is meant to provide data supporting patient education in this area of primary care. Poster presentations should be of a quality and content that is worthy of presentation at a professional conference or seminar, or as a community outreach tool. Posters will be presented to the campus community in addition to preceptors and didactic instructors.

In addition to passing all required didactic and clinical courses as well as summative evaluations, students must be in good standing with Canisius College to be eligible for graduation from the PA program.

STUDENT ADVISEMENT

Students will be assigned a faculty advisor upon matriculation and will typically remain with that advisor until graduation. Since the curriculum is pre-programmed, individual academic advising is not necessary for selecting core courses. Advisors will assist with selection of
elective clinical rotations if requested by the student. Advisors will meet with their advisees near or at the end of every semester. Students may also choose to meet with their faculty advisors if they would like to discuss an issue at any time by appointment. Students and advisors are also expected to:

1. Be proactive in communicating with his/her advisor.
2. Schedule a meeting with his/her advisor within 1 week if placed on academic or professional alert or warning.
3. Seek immediate assistance from his/her advisor if experiencing academic difficulties or any other issues.
4. Make and keep appointments to meet with his/her faculty advisor regarding academic ability and progress.
5. Actively participate in all advising meetings.

COURSE EVALUATION AND SELF-ASSESSMENT

The Canisius College PA Program prides itself in providing an exceptional, transformative learning experience for our students. This includes routine evaluation of the success of our students and our education programs. We believe it is best to evaluate our success with strong consideration of the student perspective. Students will be asked to complete a course evaluation as well as a faculty evaluation at the end of each semester. Students will also be required to complete self-assessment tools at the end of each semester and clinical rotation to evaluate strengths as weaknesses as they progress through the program. This can be a very valuable tool for assessing needs for improvement and helping your faculty and preceptors gauge needs to improve teaching and support.

CLINICAL ROTATION POLICY/PROCEDURE

Rotations may be taken in any order as assigned by the Clinical Education Coordinator. All students must complete the eight required rotations and two elective rotations. Electives may involve a second rotation in one of the core 8 areas or may be in a specialty area, research, or health administration. Students will be encouraged to identify their preferred rotation locations, but this does not guarantee placement. Students are not permitted to make rotation arrangements without permission of the Clinical Coordinator, and are not expected to make their own clinical arrangements.

Rotations must be completed at a site that has been pre-approved by the program within a 60-mile radius, with the exception of some pre-approved clinical locations out of the area on a one-time basis per student. An affiliation agreement must already be in place or being pursued by the
program in order to serve as a rotation placement. This is to ensure the safety and adequacy of the clinical site as determined by a program principal faculty member during an on-site visit.

For each rotation, students are expected to be in the clinical setting for a minimum of 35 hours per week. At the end of each rotation, and midway through the eight-week rotations (every four weeks), students will return to campus for Clinical Seminar. During this week, students will take their end-of-rotation (EOR) written examinations and OSCEs, participate in grand rounds presentations, and have lectures and presentations in varying professional topics. Students are also encouraged to schedule time with their academic advisors, address remediation or additional training needs, and work with their student teams on master’s research and writing projects. In addition to time spent in the clinical setting, students are also expected to spend a minimum of 5 hours per week in independent study or other assignments as assigned by the preceptor. On-call hours and grand rounds are also considered to be requirements of each rotation if applicable.

CLINICAL ROTATION TRANSPORTATION/HOUSING/COMMUNICATIONS

The clinical curriculum of the program is offered at hospitals and other clinical facilities primarily throughout the region within a 60-mile radius of Canisius College. However, students may be assigned to one rotation outside the immediate commuting area at a pre-approved site. Students must provide their own reliable transportation to clinical sites and classroom activities and must have a valid driver’s license. Students are responsible for their own housing during all phases of the program. The program will attempt to assist with identification of housing when a student is assigned to a remote clinical site.

A significant amount of communications to students is handled via email, D2L, and EXXAT®. Students are required to check their email at least every 24 hours, and course announcements on a regular basis and no less than three (3) times per week. Failure to do so is a violation of the professional conduct code and may result in loss of professionalism points. The program will only communicate by email to the student’s official Canisius College account.

Students are responsible for reviewing course materials for clinical rotations on EXXAT® for every rotation. Routine and other program related clinical year announcements will be maintained on the EXXAT® dashboard for students. During the clinical curriculum students must log onto EXXAT® on a daily basis to access clinical education and evaluation materials and to record patient encounters.

At any time during the clinical year when something happens unexpectedly that may impact you, the clinical site, preceptor or a patient, you should consult with the Clinical Coordinator or Academic Program Coordinator. If you have an urgent situation, contact one of those two designees by phone. Contact information is provided at the beginning of this document. One
example of an unexpected situation is a needle stick or bloodborne exposure, personal accident or injury, or family emergency.

STUDENT EMPLOYMENT

While not prohibited, students are strongly discouraged from having outside employment for the duration of their PA education. Program expectations and deadlines will not be altered to meet needs of outside employment. A conflicting work schedule will not be considered just cause for a change in rotation assignment or schedule, and employment will not be considered an acceptable excuse for violation of the attendance policy outlined in the section on Attendance. If a student does find it necessary to work, they are encouraged to speak with their faculty advisor or the Program Director regarding any conflicts or concerns. Employment should not interfere with a satisfactory level of student performance in program activities.

Students will not be required or permitted to perform any work for the department as part of their education, including primary instruction of any course. Students may be occasionally allowed to assist with aspects of instruction at the discretion of faculty. This includes sharing knowledge, skills, or laboratory demonstrations that students have prior experience with. This also applies to any clinical setting. Students are not to substitute for clerical or other medical staff during any clinical rotations. A potential conflict of interest may occur when a clinical training site is also the student’s place of employment. In such cases, the student will be reassigned. In no cases will a student’s training overlap with employment. When a student is employed outside the program, he/she must not identify himself/herself as a physician assistant student or wear identification as such. If a student is asked to perform duties outside of the clinical learning experience at any time, they must notify the Program Director immediately.

SUBSTANCE ABUSE/DRUG SCREENING

In accordance with the Canisius College commitment to providing a healthy and productive educational environment and the Drug-Free Schools and Communities Act Amendments of 1989, it is the policy of Canisius College to annually inform the campus community about the college’s policies on drugs and alcohol and about the health risks associated with their use.

The abuse of alcohol and the use of illegal drugs by members of the Canisius community are incompatible with the goals of an academic institution. In order to ensure that alcohol and illegal drugs do not interfere with the goals of the college, substance abuse programs have been developed which apply to the college as both an educational institution and a workplace. The programs are designed to:
• Establish and enforce clear policies for employees and students that promote an educational environment free from the abuse of alcohol and illegal drugs.
• Educate all members of the campus community about the health risks associated with the use of illegal drugs and the abuse of alcohol.
• Create a campus environment that promotes and reinforces healthy, responsible living and respect for community and campus standards and regulations.
• Provide a reasonable level of care for individuals experiencing chemical use and abuse problems through counseling, treatment and referral.

Canisius College prohibits the unauthorized possession, use, manufacture, distribution, or sale of alcoholic beverages by its employees or students on its property or as part of any of its activities. Further, while on its property or as part of any college activity, students are prohibited from using drugs, possessing drugs or drug paraphernalia and from selling or otherwise distributing drugs. This includes during clinical rotation time.

Violations of these policies will result in immediate sanctions consistent with the college’s employee and student disciplinary procedures, college policies and regulations, and local, state and federal law. This may include but is not limited to counseling, mandatory participation in an appropriate rehabilitation program, fines, participation in community service, loss of certain campus privileges, and/or referral for prosecution. Student disciplinary action may include the applicable disciplinary sanctions described above and/or suspension or expulsion from the residence halls or the college. The Canisius College Student Handbook, available in the Griff Center, Old Main 013, and on MyCanisius provides a complete listing of rules of the Community Standards and of the student disciplinary procedures.

The college’s Alcohol and Drug Prevention Program is reviewed annually by the Office of Student Life to determine effectiveness and to implement changes (if needed) to ensure that the College’s disciplinary sanctions are consistently enforced. The college’s review includes a determination as to: (a) the number of drug- and alcohol-related violations and fatalities occurring on the Canisius college campuses or as part of college-sanctioned activities that are reported to campus officials; and, (b) the number and types of sanctions the college imposed on students and employees as a result of such violations or fatalities.

In cases of suspected drug abuse, the program has the right to request that the student submit to a random drug screen through a qualified agency. Students will be referred to the Student Life office for evaluation of a possible violation of community standards. This includes initial screening by a drug and alcohol counselor, and mandatory lab testing. The cost of drug testing is the responsibility of the student and must be performed before the student is permitted to progress in the program. Failure to consent to drug screen or a positive test will result in appropriate actions by the Program up to and including dismissal from the Program and the college. If a clinical preceptor suspects use of drugs or alcohol during clinical rotations, the Clinical Education Coordinator will be contacted for immediate action, and the student will be
sent home or to a medical clinic under direct care of the Clinical Coordinator or a designated party, and further evaluation and treatment is required. This may result in removal from the rotation, remediation, and repeat of the rotation at a later time, or dismissal from the program.

In addition to the campus and health options, several local agencies provide confidential help. They are as follows:

- Alcoholics Anonymous: 853-0388; http://www.aa.org/
- Al-Anon: 856-2520 (supporting family and friends) www.al-anon.org
- Crisis Services Addiction hotline: 831-7007; http://crisisservices.org
- Kids Escaping Drugs: 827-9462; www.ked.org
- Substance Abuse Treatment Helpline: 1 800-662-HELP; http://findtreatment.samhsa.gov (a referral service)
- National Council on Alcoholism (NCA): 1 800-NCA-CALL (a referral service)
- National Institute on Drug Abuse (NIDA): 1 800-729-6686; www.nida.nih.gov (a referral service to cocaine abuse centers)

BACKGROUND CHECKS

All prospective students must completely disclose any unsealed criminal records. The criminal background check is a mandatory prerequisite for matriculation into the professional program. Matriculation is contingent upon a successful criminal background check. The criminal background check is not a component of the application or interview process and is not conducted or reviewed until after an applicant is conditionally accepted to the program. However, on the Centralized Application Service for Physician Assistants (CASPA) application, students are requested to truthfully disclose any previous academic, felony, misdemeanor, and licensure infractions. Additionally, The Joint Commission on Accreditation of Health Care Organizations (JCAHO) requires “information on criminal background according to law, regulation, and organizational policy’ on all employees, students, and volunteers”. Students are subject to criminal background checks in order to meet clinical placement requirements. Any discrepancy between criminal background reported on the Central Application Service for Physician Assistants (CASPA) applications and criminal background check is grounds for immediate dismissal. Students are responsible for all costs associated with background checks.

HEALTH INSURANCE

Students enrolled in the Physician Assistant program are required to have their own health insurance. Proof of insurance must be uploaded in the student health portal annually. Health services are offered on a limited basis at the student health office on campus, but any additional
health care needs will need to be arranged and paid for by the student. This does include payment for any mandatory screening or immunization for the program. Students are encouraged to contact the student health office on campus prior to any testing or vaccinations to check eligibility for free or discounted services when needed.

HEALTH CARE FOR STUDENTS

Student Health services are available to all graduate students currently enrolled and attending classes, both full time and part time. Graduate students seeking care in Student Health are required to submit a medical history and consent to treat form. This form is available on myCanisiusHealth or in the Student Health office.

MyCanisius Health is your web based health portal offering 24/7 access to Student Health and health information. From myCanisiusHealth, you can

- Schedule your health center appointment
- Read messages from the college physicians and nurses
- Update your health insurance information and scan up a copy of your insurance card
- Review self care tips and educational materials
- Scan completed health forms to Student Health

Staffed by a physician and registered nurses daily, Student Health treats non-life threatening injuries and illnesses that do not require emergency room treatment at a hospital. Below is a list of some of the common conditions treated in Student Health:

- Flu
- Cough and Sore throats
- Sinus infections
- Headaches
- Earaches
- Nausea/Vomiting/Diarrhea
- Mono
- Minor burns
- Nose bleeds
- Skin infections
- Back pain
- Muscle strains and sprains
- Rashes
- Cuts/bites/insect stings

Below is a list of some of the services provided in Student Health:
• Nebulizer treatments
• On-site lab testing such as strep throat, influenza, urine testing, mono testing and glucose screening
• Loan crutches
• Write prescriptions
• Free over-the-counter medications
• Health education
• Referrals to specialists

The faculty and staff of the PA program are not permitted to provide medical care or medical advice to students at any time. This includes adjunct instructors, clinical preceptors, and guest lecturers. Exceptions will be made in emergencies only, and students will be required to follow up with a non-faculty or unaffiliated health care provider after emergency care is rendered. Faculty and affiliated instructors may provide advice on where to seek care or resources without bias, but are also not permitted to give medical advice to a student for their personal or family care at any time.

HEALTH REQUIREMENTS

The health requirements for the Physician Assistant program are to assure that the student:

1. Maintains a level of personal health necessary to complete the course of studies and ultimately to perform the duties of a professional advanced practice provider.
2. Is free of any illness or disease that may endanger the health and welfare of themselves and others.

The pre-clinical physical examination shall include a complete physical examination administered by a certified physician or physician assistant with verified evidence of the following: current negative tuberculin skin test (PPD) or Quantiferon Gold TB test (this is preferred) within previous 12 months. Subsequent TB testing must be done every 12 months while the student is enrolled in the program or suspected exposure occurs. If the TB test has converted to a positive, a chest x-ray is required, and the student must follow up at the Erie County Medical Center (ECMC) TB clinic. Students must be cleared by the ECMC clinic prior to returning to the clinical setting. Students with a history of a positive PPD test must complete a “Tuberculosis Symptom Screening Questionnaire” annually. If there are any positive findings on the questionnaire a repeat chest x-ray or Quantiferon Gold TB test is required, with follow-up as appropriate.

Immunization for diphtheria, tetanus, and pertussis within the previous ten years; immunization for measles, mumps, rubella, and varicella OR documented laboratory immunity. Influenza vaccine is required each year for the current flu season. The deadline date to receive the
influenza vaccine is Oct 15th of each flu season during student tenure at Canisius College. Students who are unable to receive influenza vaccine will be required to contact each clinical preceptor to inform them of inability to receive influenza vaccine and adhere to specific site policies for this while on clinical rotations, to include possible use of a surgical mask while in direct patient contact. In addition, students are required to submit proof of Hepatitis B immunization. The program will advise all students of changes in immunization requirements based on the current CDC recommendations, and how to meet requirements to continue training.

The following are the official CDC Guidelines for Immunization of Health Care Workers:

**Healthcare workers include physicians, nurses, emergency medical personnel, dental professionals and students, medical and nursing students, laboratory technicians, pharmacists, hospital volunteers, and administrative staff.**

<table>
<thead>
<tr>
<th>Vaccine Recommendations in Brief</th>
<th>Recommendations in brief</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Hepatitis B</strong></td>
<td>If you don’t have documented evidence of a complete hepB vaccine series, or if you don’t have an up-to-date blood test that shows you are immune to hepatitis B (i.e., no serologic evidence of immunity or prior vaccination) then you should</td>
</tr>
<tr>
<td></td>
<td>• Get a 3-dose series of Recombivax HB or Engerix-B (dose #1 now, #2 in 1 month, #3 approximately 5 months after #2) or a 2-dose series of Heplisav-B, with the doses separated by at least 4 weeks.</td>
</tr>
<tr>
<td></td>
<td>• Get an anti-HBs serologic test 1-2 months after the final dose.</td>
</tr>
<tr>
<td><strong>Flu (Influenza)</strong></td>
<td>Get 1 dose of influenza vaccine annually.</td>
</tr>
<tr>
<td><strong>MMR (Measles, Mumps, &amp; Rubella)</strong></td>
<td>If you were born in 1957 or later and have not had the MMR vaccine, or if you don’t have an up-to-date blood test that shows you are immune to measles or mumps (i.e., no serologic evidence of immunity or prior vaccination), get 2 doses of MMR (1 dose now and the 2nd dose at least 28 days later). If you were born in 1957 or later and have not had the MMR vaccine, or if you don’t have an up-to-date blood test that shows you are immune to rubella, only 1 dose of MMR is recommended. However, you may end up receiving 2 doses, because the rubella component is in the combination vaccine with measles and mumps. For HCWs born before 1957, see the MMR ACIP vaccine recommendations.</td>
</tr>
<tr>
<td><strong>Varicella (Chickenpox)</strong></td>
<td>If you have not had chickenpox (varicella), if you haven’t had varicella vaccine, or if you don’t have an up-to-date blood test that shows you are immune to varicella (i.e., no serologic evidence of immunity or prior vaccination) get 2 doses of varicella vaccine, 4 weeks apart.</td>
</tr>
<tr>
<td><strong>Tdap (Tetanus, Diphtheria, Pertussis)</strong></td>
<td>Get a one-time dose of Tdap as soon as possible if you have not received Tdap previously (regardless of when previous dose of Td was received).</td>
</tr>
</tbody>
</table>
### Vaccine Recommendations in Brief

<table>
<thead>
<tr>
<th>Vaccines</th>
<th>Recommendations in brief</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Get Td boosters every 10 years thereafter.</td>
</tr>
<tr>
<td></td>
<td>Pregnant HCWs need to get a dose of Tdap during each pregnancy.</td>
</tr>
<tr>
<td>Meningococcal</td>
<td>Those who are routinely exposed to isolates of <em>N. meningitidis</em> should get one dose.</td>
</tr>
</tbody>
</table>

The most recent recommendations for Tuberculosis (TB) screening for health care workers is as follows:

<table>
<thead>
<tr>
<th>Category</th>
<th>2005 Recommendation</th>
<th>2019 Recommendation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baseline (preplacement) screening and testing</td>
<td>TB screening of all HCP, including a symptom evaluation and test (IGRA or TST) for those without documented prior TB disease or LTBI.</td>
<td>TB screening of all HCP, including a symptom evaluation and test (IGRA or TST) for those without documented prior TB disease or LTBI (<strong>unchanged</strong>); individual TB risk assessment (<strong>new</strong>).</td>
</tr>
<tr>
<td>Postexposure screening and testing</td>
<td>Symptom evaluation for all HCP when an exposure is recognized. For HCP with a baseline negative TB test and no prior TB disease or LTBI, perform a test (IGRA or TST) when the exposure is identified. If that test is negative, do another test 8–10 weeks after the last exposure.</td>
<td>Symptom evaluation for all HCP when an exposure is recognized. For HCP with a baseline negative TB test and no prior TB disease or LTBI, perform a test (IGRA or TST) when the exposure is identified. If that test is negative, do another test 8–10 weeks after the last exposure (<strong>unchanged</strong>).</td>
</tr>
<tr>
<td>Serial screening and testing for HCP without LTBI</td>
<td>According to health care facility and setting risk assessment. Not recommended for HCP working in low-risk health care settings. Recommended for HCP working in medium-risk health care settings and settings with potential ongoing transmission.</td>
<td>Not routinely recommended (<strong>new</strong>); can consider for selected HCP groups (<strong>unchanged</strong>); recommend annual TB education for all HCP (<strong>unchanged</strong>), including information about TB exposure risks for all HCP (<strong>new emphasis</strong>).</td>
</tr>
<tr>
<td>Evaluation and treatment of positive test results</td>
<td>Referral to determine whether LTBI treatment is indicated.</td>
<td>Treatment is encouraged for all HCP with untreated LTBI, unless medically contraindicated (<strong>new</strong>).</td>
</tr>
</tbody>
</table>

Students are obligated to follow the 2019 recommendations at this time.

The student must provide proof of the above-mentioned requirements to the Academic Program Coordinator at least 2 weeks before start of the didactic phase and 4 weeks prior to clinical
rotations. All health documents must be uploaded in the Student Health Portal and will be tracked through the Banner system by the health office. The Program will NOT have access to any student health documents, but will be informed of the status of completion for all required health forms. Health documents may be provided to clinical experience sites upon request. Students who do not submit proof of health requirements by these deadlines will not be permitted to start classes or clinical rotations, and will be subject to deceleration or dismissal. Canisius College health support, policies, and forms can be found at: https://www.canisius.edu/student-experience/student-support-services/student-health

The program does NOT permit waivers of any immunizations or health screenings with exception of proven allergy to the influenza vaccines. This is outlined above. Given the risks associated with direct patient contact and close contact with colleagues during training, the program will require complete compliance with CDC recommendations at all times.

EXPOSURE TO INFECTIOUS/ENVIRONMENTAL HAZARDS

The purpose of this policy is to provide a protocol for action when a student is exposed to hazardous materials including blood, bodily fluids, hazardous waste, chemicals, etc. during their clinical training. The Centers for Disease Control and Prevention (CDC) definition of blood and body fluid exposure is defined as:

A percutaneous injury (e.g., a needle stick or cut with a sharp object), or contact of mucous membranes, or non-intact skin (e.g. when the exposed skin is chapped, abraded, or afflicted with dermatitis) or when contact with intact skin is prolonged or involving an extensive area with blood, tissues, or other body fluids to which universal precautions apply, including: a) semen, vaginal secretions, or other body fluids contaminated with visible blood, because these substances have been implicated in the transmission of HIV infection; b)cerebral spinal fluid, synovial fluid, pleural fluid, peritoneal fluid, pericardial fluid, and amniotic fluid, because the risk of transmission of HIV from these fluids has not been determined...; and c) laboratory specimens that contain HIV.

In addition to infectious disease, ergonomic, and workplace violence issues, workers in healthcare settings encounter a number of other workplace hazards. These include chemicals (e.g., sterilants), hazardous drugs (e.g., antineoplastic drugs), materials that cause allergic reactions (e.g., latex), and physical agents (e.g., radiation). As students entering the medical environment for training, it is important for you to be familiar with common health workplace hazards. There is a quick link for OSHA information on this at: https://www.osha.gov/SLTC/etools/hospital/

If you suspect you have been exposed to any of these hazards, you must report to your preceptor and the Clinical Education Coordinator for further instructions.
**Student Responsibility**

It is the responsibility of the student to **immediately report** the exposure incident to her/his preceptor and faculty course instructor, as certain interventions are most effective when initiated promptly. In addition, the student is expected to report the exposure incident according to the clinical agency’s policy, and to seek access to post exposure evaluation and treatment as per the agency’s policy when appropriate (agency’s policy may include emergency treatment in the ER). If an exposure occurs on campus in the classroom setting, campus security will be notified and will generate the appropriate incident report. Students will then be required to seek care at Erie County Medical Center (ECMC) emergency department for appropriate protocol. If an exposure occurs in a clinical setting where facilities are not available for the prompt evaluation and treatment of an exposure, it is the student’s responsibility to immediately notify the Clinical Education Coordinator and preceptor, and seek care at ECMC emergency department within 24 hours of exposure.

**Blood/Body Fluid Testing**

An agency representative considering both the exposure and the student’s immunity status should base all testing on the initial risk evaluation. It is recommended that hepatitis B and hepatitis C virus testing be performed as indicated by the clinical agency where the exposure occurred, or the designated facility where the student was evaluated and treated, or at a laboratory of the student’s choice. It is recommended that HIV testing of the student be performed at a location where the results of testing will remain confidential between the student and the testing site. It is the student’s right to choose the testing site. Testing for HIV and hepatitis B and C infection should be done at the time of exposure and for specific intervals thereafter, as recommended by the CDC. This testing is at the expense of the student.

**Record Keeping**

Information about the exposure incident will be kept in a secure locked file in the office of the Program Director. The results of HIV testing will not be reported to, nor kept by the College. It is recommended that all HIV testing results remain the confidential property of the student. The student health office will be consulted for updated policy and procedure with every exposure to ensure adequate care of the student.

**EMOTIONAL AND MENTAL WELLBEING**

Some students are affected by personal crises, while other students experience stress or face other issues such as alcohol and substance dependency. Canisius College and the PA Program faculty and staff are committed to identifying and supporting students who are in apparent need of assistance with mental or emotional wellbeing. Students are encouraged to refer to the student counseling services section of the Canisius website at:
Students are also encouraged to seek confidential assistance from the Canisius College counseling center at 716-888-2620 or PA faculty at any time.

It is the responsibility of students to report any concerns of imminent danger to a fellow student to 911, campus security, or PA faculty/staff. Stay Calm & Follow These Emergency Guidelines:

How to Interact with a Distressed Student

- Stay calm. Find someone to stay with him or her while calls are made to helping resources.
- If a student directly threatens himself, herself, or someone else or otherwise behaves dangerously, immediate attention is needed. Call Public Safety: 716.888.2330 (24 hours), or the Police: 911. Public Safety will contact a counselor.
- Stay with the student, or have someone stay with the student, until help arrives.

If you believe that you or another student is:

- potentially suicidal and/or homicidal or
- has been raped or physically assaulted, or
- in your judgment, should be seen the same day for an emergency assessment

Call the Counseling Center at 716.888.2620 immediately. Inform the receptionist that you need immediate assistance. The receptionist will inform you which counselor is available and what time you and/or the student should arrive at our office. For after-hours emergencies, contact Public Safety at 716.888.2330.

Imminent Danger

If you believe that you or another student is imminently homicidal or suicidal, (i.e., you believe that you or the student is quite likely to hurt himself/herself or someone else), call Public Safety at 716.888.2330 or the Buffalo Police at 911, and request an officer's presence immediately.

Crisis Services can also be contacted at any time at:

- Buffalo & Erie County: 716-834-3131
- 24 Hour Addiction Hotline: 716-831-7007
- Kids Helpline: 716-834-1144 or 1-877-KIDS-400
- Chautauqua County Hotline: 1-800-724-0461
- 24 Hour Erie County Domestic Violence Hotline: 716-862-HELP
- For Shelter: 716-884-6000
- 24 Hour NYS Domestic & Sexual Violence Hotline: 1-800-942-6906
STUDENT SAFETY

Student safety during both didactic and clinical training with the Canisius College PA program is of the utmost importance. While you are living and or attending class on the Canisius College campus, safety policies and procedures are dictated and enforced by the Public Safety office.

The Department of Public Safety is established to protect and serve the educational environment of Canisius College, protecting the campus and the surrounding neighborhood from the threat of physical harm, property damage and disruptive activity. We continuously strive to build and maintain a high level of cooperation between the campus community, the neighborhood surrounding the campus and the Department. Additionally, our close relationship between the Department and other Law Enforcement Agencies assists us in providing regulatory and other services as we assist in the attainment of the overall goals of the College.

The primary services of the Department of Public Safety include:

- Enforcement of Federal, State and Local statutes,
- Enforcement of Canisius College ordinances,
- Crime prevention initiatives through education,
- Emergency services for the injured and ill,
- Traffic and parking supervision,
- Fire prevention, and
- Miscellaneous safety services.

Information regarding public safety at Canisius College can be found on the college website at: https://www.canisius.edu/student-experience/student-support-services/public-safety

The program is also responsible for ensuring the safety of students while on their clinical rotations. Preceptors are instructed to provide orientation to all safety and security measures for their clinical site during student orientation within the first 2 days of clinical training. The sites will be visited by principal faculty at least twice annually, and preceptors will be asked to provide this safety orientation for the program faculty member visiting the site. As a portion of the student evaluation of each clinical rotation, students will be asked to rate the orientation they received, including safety and security measures. If the student or principal faculty do not feel the safety and security measures of any clinical site are clear or adequate, that site will no longer be used for clinical training. If a student does not feel safe or secure at any point during their time on campus or clinical rotations, they are to notify the Program Director of principal faculty immediately and the program will take immediate action to ensure the student's safety. This may include reporting to campus security or local law enforcement in addition to removing the student(s) from the unsafe scenario.
REQUIRED EQUIPMENT

Students will be required to purchase the following medical equipment:

1. Oto/ophthalmoscope set (Welch Allyn full size 3.5-volt diagnostic set with traditional ophthalmoscope preferred)
2. Stethoscope (cardiology-grade)
3. Sphygmomanometer (blood pressure cuff)
4. Tuning fork
5. Reflex hammer
6. Penlight
7. Tape measure for patient use
8. Name tag (college issued)
9. White lab coat (short, consultation-length only. Students are not permitted to wear 3/4 or full length laboratory coats at any time during clinical rotations)

The Program will provide suggestions and quicklinks for items to purchase.

REQUIRED READING MATERIALS

The majority of all learning resources will be offered in an online subscription through AccessMedicine, and will be available to all students through 90 days after graduation. Students will be responsible for purchasing any other required reading for coursework throughout PA program. Any recommended reading materials can be purchased or obtained at the discretion of the student, and is highly encouraged. Required and recommended readings lists will be available prior to and during the course of classroom and clinical work. Please be sure to refer to the booklist prior to each semester. Faculty are not responsible for acquiring reading or required equipment or materials for students. These materials are selected by PA Program faculty based on years of clinical and academic experience, and solely for the benefit of PA student education. This includes all Physician Assistant National Certification Examination (PANCE) study and testing materials.

BLS/ACLS CERTIFICATION POLICY

Students enrolled in the PA program must be certified in Cardiopulmonary Resuscitation and Basic Life Support for health care providers by the American Heart Association prior to their clinical training. The program will also require students to be certified in Advanced Cardiac Life Support (ACLS) and Pediatric Advanced Life Support (PALS) certification. These courses will be offered as part of the didactic curriculum. Students who carry a current certification in any of these courses, that will not expire prior to the end of their clinical rotations, may be exempt from these certifications at the discretion of the Program Director.
HARRASSMENT/DISCRIMINATION POLICIES

Canisius College and the Physician Assistant Program take pride in offering a diverse and transformative learning environment free of prejudice, discrimination or harassment. There is a zero tolerance policy regarding discrimination based on gender, age, sexual orientation or identity, veteran status, race, religion, disability, or any protected characteristics addressed by the College’s Anti-Discrimination/Harassment Policy at: https://wiki.canisius.edu/display/HR/Volume+II%3A+2.1+General+Institutional+Policies#Volu meII:2.1GeneralInstitutionalPolicies-2.1.1Anti-DiscriminationandHarassmentPolicy

Students are encouraged to express ideas and thoughts freely and without prejudice, in a respectful and constructive manner. Any evidence of discrimination or harassment on the part of a student or faculty member will result in disciplinary actions and possible dismissal from the program and the College in accordance with Canisius College guidelines. Students are encouraged to review harassment and discrimination policies outlined under “Community Standards” and “General Policies” in the Canisius College Student Handbook, and to seek information on referral for support through Canisius College Student Services at: https://www.canisius.edu/student-support-services. This includes procedures for filing a report or claim against a student or faculty member for unlawful behavior on or off campus. Students are strongly encouraged, but not required, to seek counseling with the PA Program Director in the event of harassment or discrimination on the part of a PA program faculty member, clinical preceptor, or student without fear of repercussion. The Canisius College Title IX Coordinator will also assist with filing a grievance with the college or the program. Our Deputy Title IX Coordinators for Students are individuals who complete ongoing training regarding Title IX policies, procedures, and resources. These individuals are available to answer questions regarding campus procedures, but are primarily trained to serve as Title IX Lead Investigators or Hearing Panel Coordinators. Further information can be found at: https://www.canisius.edu/title-ix-coordinator

STUDENT GRIEVANCE POLICIES AND PROCEDURES (NON-ACADEMIC)

It is the policy of Canisius College to extend the right to any enrolled student or recognized student organization of the college to file a grievance in writing in accordance with the procedures and guidelines set forth in this Policy.

An action or decision is grievable pursuant to this Policy only if it involves a misapplication or misinterpretation of college policy, standard, regulation, or procedure, or a violation of state or federal law. This Policy may not be used to grieve:

- Claims based on purchases or contracts;
• Claims against a college employee on matters that are unrelated to the employee’s job or role at the college
• Student disciplinary decisions, since this is addressed via the Community Standards
• Formal complaints of harassment or discrimination, since there is a separate reporting and resolution policy for them
• Where any other college standard, policy or procedure could have been used for the matter being grieved (e.g., Grade Grievances, FERPA grievances, etc.)

Any other concern will be treated as a complaint and students are invited to express their viewpoints in an appropriate manner to any college official. Upon request from any student, the vice president for student affairs will provide guidance about the appropriate system for redress of a particular complaint.

The procedures set forth below may be used by individuals bringing a grievance (“grievant”) who are enrolled as students at Canisius College. The grievant must have experienced the perceived misapplication or misinterpretation of college policy, standard, regulation, or procedure, or violation of state or federal law; a grievance cannot be filed on behalf of another person. The existence of this Policy does not prohibit a grievant from also filing claims in other forums to the extent permitted by national, state or local law or applicable accrediting agencies.

The formal resolution process described below must be initiated within 60 business days of the decision, action, or events giving rise to the grievance. The Senior Associate Dean of Students (SADOS) may extend this time limit at his or her discretion if good cause is shown.

Informal Resolution

Before proceeding to the formal resolution process, the grievant is expected to have discussed the concern with the person they allege to have caused the grievance (the “respondent”). This requirement may be waived if the grievant has a reasonable basis for believing that such a discussion could result in physical injury, severe emotional distress, retaliation, or discrimination. If the respondent does not respond to the grievant’s attempts at discussion, or if an equitable solution cannot be found, the case will proceed through the formal resolution process outlined below.

Formal Resolution

If informal resolution is not successful, the complainant should file a written request for review with the SADOS. The request must:

• Provide the names of all respondents
• List the law or college policy, standard, procedure, etc. that has allegedly been misapplied or misinterpreted, if known
• State how the decision or action was unfair and/or harmful to the grievant
• State how the respondents are responsible for the action or decision
• State the requested remedy.

The SADOS will review the request. If it is clear that the grievance has not been filed within the
time limit, or pertains to a matter not applicable under this Policy, or comes from a person
without the right to issue a complaint, the SADOS will dismiss the case and notify the grievant
in writing.

If the grievance is not dismissed, the SADOS will review the information provided, gather any
additional information required, and formulate a decision within 15 business days of receipt of
the request. If the respondent is the SADOS, the vice president for student affairs will appoint
another college administrator to issue a decision. Once a decision has been made, it will be
recorded for the college record, and the grievant and respondent(s) will be notified of the
decision in writing.

Final Appeal

If the resolution provided by the SADOS is not satisfactory to the grievant or respondent, that
person may file a request for reconsideration via a final appeal. Such a request must be
submitted in writing to the vice president for student affairs within 5 business days of receipt of
the original decision.

The vice president for student affairs will review the information provided concerning the
grievance, the request for reconsideration, and details regarding the grievant’s desired remedy.
The vice president for student affairs will issue a final decision within 15 business days of
receiving the request for reconsideration. The vice president for student affairs’ decision may
include one of the following options:

• A determination that the complaint was valid
• A determination that the complaint was not valid
• A modification of the remedy proposed by the SADOS

The vice president for student affairs will forward his or her decision to the grievant, respondent
and the SADOS. The vice president for student affairs’ decision is final and cannot be appealed.

COMMUNITY SERVICE

In the spirit of the Jesuit mission of Canisius College and our program mission and goals,
students are required to perform at least three community service activities during the first six
semesters of the program. Community service can be done individually, in groups, or as a
cohort. Examples of quality community service include community health drives, service at the
City Mission or food bank, mentoring of middle school or high school students with support for
health professions, campus or community beautification and clean-up, volunteer with campus ministry, etc. The community service tracking tool will be provided and tracked by your student advisor. Students may only be excused from required community service with written permission from the Program Director.
CONFIDENTIALITY POLICY/ HIPAA AGREEMENT

HIPAA stands for “Health Insurance Portability and Accountability Act”. Although this legislative act includes a wide subject range relating to health insurance, a main focus of this legislative act is the protection, security, and privacy of patients’ medical records. Canisius College has a legal and ethical responsibility to safeguard the privacy of patients and to protect the confidentiality of their health and social information.

While participating in clinical education experiences, students will have access to information that must remain confidential. Patients have the right to privacy and confidentiality of their medical information.

No patient information may be disclosed (verbally or in writing) to unauthorized persons such as friends, family, or other patients. Any request by the patient to release medical information must be handled by the appropriate agency representative. No student will accept responsibility to release patient information.

Students will not discuss patient information in public areas of an agency or outside of the agency. These areas may include offices, if discussions in the office may be overheard by other patients. The student’s obligation to keep information confidential continues after the clinical experience concludes.

Students will not leave medical charts in unrestricted areas of the agency. Under no condition may samples of documentation containing any identifying information, such as evaluations, discharge summaries, results of diagnostic tests or letters to physicians be removed from the premises of the healthcare facility/agency.

Any activity that is in violation of this agreement will be reported to the appropriate clinical and academic supervisor.

By signing this document, I understand and agree that I have read and will comply with all of the terms of the above policy. I am aware that my individual clinical site will have a Confidentiality Policy and I agree to honor its terms.

___________________________________           _______________________________
Student Name (please print clearly)                        Verifying Faculty Name

____________________________________         _______________________________
Student Signature                                                     Faculty Signature

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VERIFICATION OF RECEIPT AND UNDERSTANDING OF HANDBOOK

I have read and understand the contents of the Physician Assistant Studies Student Handbook and the Canisius College Student Handbook, and I agree to comply. I am aware that failure to comply with any of the policies or regulations outlined in either handbook may result in dismissal from the program in addition to any further action by Canisius College.

___________________________________
Student name (please print clearly)

___________________________________               ________________________
Student signature                                                          Date signed

___________________________________               ________________________
Program Director Signature                                         Date signed