



**Master of Physician Assistant Studies  
Program  
Student Handbook 2017-2018**

**Louisiana State University Health Sciences Center  
Master of Physician Assistant Studies Program  
School of Allied Health Professions**

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## **WELCOME**

Welcome to the LSUHSC-New Orleans Master of Physician Assistant Studies (PA) Program. The faculty and staff look forward to participating in your education. While you are a student here, please take advantage of all of the excellent experiences offered in the School of Allied Health Professions (SAHP).

This handbook provides important information relating specifically to the PA program. You will find the SAHP Student Handbook and the LSUHSC-NO General Catalog/Bulletin to be the official source of student related policies and procedures. You can access this information at the following sites:

<http://catalog.lsuhs.edu/>  
<http://alliedhealth.lsuhs.edu/admin/docs/StudentHandbook.pdf?version1.0>

### **Student Responsibility**

Students are responsible for adhering to all policies/procedures, rules, regulations and other information listed in the General Section of the LSUHSC-NO Academic Catalog/Bulletin, the School of Allied Health Professions Section of the Catalog/Bulletin and this Handbook. Details can also be found in the Chancellor's Memorandum # 56. The link is listed below:

<http://www.lsuhs.edu/administration/cm/cm-56.pdf>

### **Program Vision Statement**

The LSUHSC-New Orleans Master of Physician Assistant Studies Program will be a leader in the education of competent, compassionate, healthcare providers providing access to care for the people of Louisiana.

### **Program Mission**

The Mission of the LSUHSC-New Orleans Master of Physician Assistant Studies Program is to recruit and educate individuals of the highest quality from diverse backgrounds to provide evidence-based, patient-centered healthcare to the people of Louisiana.

### **Program Goals**

The LSUHSC-New Orleans Master of Physician Assistant Studies Program is committed to:

- Recruit highly qualified applicants for enrollment as students in the LSUHSC-New Orleans Physician Assistant Program
- Obtain accreditation-continuing status, develop and maintain a standard of excellence for the program
- Develop and maintain a curriculum that promotes a 90% or better graduation rate for students entering the LSUHSC-New Orleans Physician Assistant Program

- Develop and maintain a curriculum that produces a PANCE rate first-time pass rate above the national average.

### **Program Overview**

The LSUHSC-New Orleans Master of Physician Assistant Studies Program (MPAS) is a 29 month, full time, professional program designed to prepare qualified candidates for healthcare service. PAs are highly qualified healthcare providers who are prepared through an extremely rigorous academic and clinical curriculum to practice medicine in partnership with physicians.

The PA educational program is modeled on the medical school curriculum, and the course of study is focused and intense. The training PAs receive prepares them to work as part of a physician-led team committed to providing comprehensive healthcare.

The LSUHSC-New Orleans Master of Physician Assistant Studies Program focuses on preparing healthcare providers who will augment and extend healthcare provided by physicians. The program emphasizes the unique physician-physician assistant team concept of providing accessible, affordable, quality healthcare.

### **The Pre-Clinical Educational Experience**

Medical educators have declared that professional healthcare institutions must prepare students to be self-directed, life-long learners. These skill sets contribute to the development of an effective, efficient and caring healthcare provider. The Association of American Medical Colleges (AAMC) also concluded that teaching everything is an unattainable goal.

Healthcare education schools should be responsible for providing a learning environment appropriate for the attainment of most knowledge, skills, and attitudes and for encouraging a lifelong commitment to continued learning. The use of non-traditional teaching methods, such as standardized patients, problem-based learning and case-based learning enhances knowledge acquisition by providing a clinical context for factual learning.

Adult learning theory supports the theory that students tend to be more motivated to learn when concepts presented in lectures and readings are supplemented with actual or simulated patient encounters that illustrate those concepts and bring them to life. For students in the PA program's first year of training, these exposures to patient care help to prepare them for the roles they will assume during their clinical year of training, and thus bridge the gap between the two years.

In addition to sharing current facts and specific techniques, the program is committed to assisting the student in developing their problem-solving skills. The program faculty continually seeks methods to decrease the time spent in a purely lecture-oriented format through use of problem solving approaches to education, such as: Small group interaction, and the use of standardized patient examinations and reflective writing (South University, 2011).

**The LSUHSC-NO faculty expect PA students to assume a greater responsibility for their education by participating actively in their educational process.** Written learning objectives provide students with clear guidelines for learning. Testing is accomplished on a unit (chapter, systems) basis for most courses and emphasis is placed on clinical application.

**The burden of learning falls heavily on the student. Students are expected to come to class prepared; having completed the assigned reading, and ready to explore concepts at a practical level.**

Students are respected by the faculty as adult learners who take responsibility for completing all assigned tasks and seeking help when needed. This approach to education helps prepare students for their future roles as competent healthcare professionals.

## **LSUHSC-NO SCHOOL OF ALLIED HEALTH PROFESSIONS POLICY**

### **Nondiscrimination**

The policies of the Health Sciences Center are stated in the *LSUHSC-NO Catalog/Bulletin*:  
<http://catalog.lsuhs.edu/>

**Family Educational Rights and Privacy Act (FERPA).** The entire document can be accessed at:

[http://catalog.lsuhs.edu/content.php?catoid=6&navoid=1161&hl=Ferpa&returnto=search#Family Education Rights and Privacy Act](http://catalog.lsuhs.edu/content.php?catoid=6&navoid=1161&hl=Ferpa&returnto=search#Family_Education_Rights_and_Privacy_Act)

### **Student Health and Student Counseling**

LSUHSC-NO provides students with excellent Student Health services. All information regarding Student Health issues can be found at:

<http://catalog.lsuhs.edu/>

or

<http://www.lsuhs.edu/orgs/studenthealth/>

### **Safety**

LSUHSC-NO provides for the safety of faculty, staff, students, and patients through policies, procedures, and education.

<http://catalog.lsuhs.edu/>

### **Student Conduct**

The LSUHSC School of Allied Health Professions has specific Student Conduct policies. The policies of the SAHP are presented in the *LSU Health Sciences-New Orleans Center Catalog* and the *SAHP POLICY AND PROCEDURES RELATED TO STUDENT CONDUCT*. Students are expected to be familiar with all of this information and should pay particular attention to attendance, grading, dismissals, and scholastic requirements.

<http://alliedhealth.lsuhs.edu/admin/docs/StudentHandbook.pdf?version1.0>



## Schedules

The academic calendar for the PA Program may be different from that published in the *Catalog* and so is provided to students by the Program.

## Emergency Preparedness Plan – LSUHSC-New Orleans Master of Physician Assistant Studies Program

In the event of an emergency situation, LSU Health Sciences Center-New Orleans administration has the capability to transmit pertinent information through the mediums of websites, phone trees, e-mail and text messaging to the entire spectrum of students, faculty and staff. The entire LSUHSC-NO policy regarding emergencies should be reviewed. The policy can be found at:

<http://911.lsuhscc.edu/eas/>

## DEPARTMENTAL POLICIES

### A. ACADEMIC POLICY

All courses in each semester are prerequisite for the following semester and for continued enrollment.

In all courses, **a portion of the student's grade is termed professional behavior or class participation.**

**Criteria used to determine this grade include class attendance, student attitude, contribution to creating a learning atmosphere in the course, submitting written assignments on time, quality of discussion concerning topics contained in outside readings or other assignments, proper attire, and interpersonal relationships with faculty members and classmates. This portion of the student's grade also includes professionalism.**

A student matriculating in the LSUHSC-NO Master of Physician Assistant Studies Program will find that the expectations, requirements, and responsibilities of the clinical graduate program far exceed those of undergraduate school. The following sections outline some of the students' academic responsibilities and the process by which students are evaluated and the curricular objectives carried out.

### Statement of Requirements and Notification of Progress

At the start of each course, students will be informed, in writing, of the standard performance expected of them by the faculty of that course (syllabus). The standard of performance includes how grades are derived, and a description of the student's responsibilities in the course such as attendance at classes, laboratories and other course activities. A current syllabus outlining these requirements will be filed with the Program Administrative Assistant for placement on the shared Program drive.

## Promotion

**All of the following criteria must be met satisfactorily** for a student enrolled in the Master of Physician Assistant Studies Program to be eligible for promotion to the next academic year or graduation:

- Satisfactory completion of all course work and requirements specified for the academic level.
- Fulfilling all requirements established by the faculty of each course within the academic year.

## Remediation Process-Didactic Phase

The remediation process is designed to help faculty identify and assist students who may experience academic or professional difficulty. The process is proactive, with the goal of identifying at risk students as early as possible. The LSUHSC-NO Master of Physician Assistant Studies Program uses the following process to identify and remediate students deemed at risk.

- Identification
  - **The student is expected to be proactive and notify the instructor/coordinator if there are knowledge deficits**
  - The instructor/coordinator/small group leader, Academic Coordinator or Faculty Advisor identifies the at-risk student through weekly faculty reports, exam grades, and advisory sessions.
- Evaluation and Assessment
  - Identified students will be referred to their course coordinator or Faculty Advisor for assessment of root causes. Referrals to campus assistance programs may be instituted (Student Health, the Office of Student Affairs or other practitioners).
- Plan Development
  - The faculty advisor, the student and/or any other parties will design a remediation plan. Clear expectations will be documented and a contract for remediation developed. The Program Director will then review the contract with the Faculty Advisor and student, placing the contract in the student's program file. Depending on the action needed, a time line will be initiated for review of student progress.
- Plan Implementation
  - The Faculty Advisor and student will receive a copy of the contract and begin remediation.
  - The student will be informed of all available resources for remediation.
- Plan Evaluation
  - Depending upon the remediation needed, an evaluation instrument may be prepared to assess the student's progress. The Academic Director and the Faculty Advisor may collaborate to design an appropriate tool to assess progress.

Evidence of compliance of mastery of remediated knowledge deficit will be placed in the student file with the contract

**All students will be required to remediate exam failures (grades below 70%).** The goal of this policy is to help the student identify and master the material, not to improve the numerical grade. The course instructor or coordinator will be responsible for coordinating the remediation plan for the particular exam.

### **Departmental Requirements for Graduation**

- Satisfactory completion of all course work and requirements specified in the curriculum with a final cumulative GPA of 3.0 or greater.
- No more than 12 hours of “C” credit will be applied to the MPAS degree. **If at any time, the student accrues greater than 12 hours of “C” credit, the student will be dropped from the rolls of the program.**
- Approval and recommendation by the faculty of the PA Program for conferring of the degree, Master of Physician Assistant Studies.
- Satisfactory status concerning obligations to the LSU System.
- Meet all LSUHSC-NO Graduation Requirements
- <http://catalog.lsuohsc.edu/>

### **Statement of Satisfactory Academic Progress**

A student who is allowed to continue enrollment in the PA Program is considered making satisfactory academic progress. A student not satisfactorily completing all course requirements will go through a full review by the faculty and a decision will be made regarding possible disciplinary or remedial actions that will be taken.

If a student’s performance is considered to be marginal or below minimal course standards for any course, the student’s faculty advisor and/or a member of the core faculty may arrange for a personal conference with the student involved to discuss deficiencies observed and to begin the **Remediation Process**.

### **Academic Dismissal**

If the core faculty concludes that a student should be dismissed because the student has failed to meet academic requirements satisfactorily, a recommendation for dismissal will be sent to the Dean of SAHP.

### **Student Grade Appeals**

Please refer to SAHP Official Policy regarding Grade Appeals found at:

<http://alliedhealth.lsuohsc.edu/admin/docs/StudentHandbook.pdf?version1.0>

### **Disciplinary Action**

For a student who has engaged in cheating, unprofessional conduct, or other improper behavior, **occurring within or outside the confines of the teaching program**, dismissal or other specified disciplinary action may be recommended after review by the Associate Dean for

Academic Affairs and/or a committee convened by the Associate Dean for Academic Affairs for that purpose.

Accusations against students are to be submitted in writing to the Associate Dean for Academic Affairs to be managed as specified in the LSUHSC School of Allied Health Professions Handbook. <http://alliedhealth.lsuhsu.edu/admin/docs/StudentHandbook.pdf?version1.0>

## **B. STUDENT LEAVE POLICY**

### **Leave of Absence**

A leave of absence for a short period of several days or one week may be granted to a student in good standing, subject to the discretion of the Dean, because of illness or other appropriate reasons. Students taking short-term leave of absence of less than one week must make acceptable arrangements with the faculty involved for completion of course work and other assignments which will be missed. Leave of absence of a longer duration may be granted students in good standing for reasons of a personal nature or to participate in a special program of research or other activity designed to augment the student's academic training. Specific arrangements must be made on an individual basis with the Dean and Program Director before beginning a leave of absence.

The University policy governing the processing of leave of absences are applicable and are described in the general information section of the catalog.

<http://catalog.lsuhsu.edu/content.php?catoid=6&navoid=1168&hl=leave&returnto=search#Leave of Absence>

### **Withdrawal**

Students are permitted to withdraw from the Master of Physician Assistant Studies Program at any time.

If a student who has voluntarily withdrawn wishes to be considered for readmission to the program, he/she must file an application for readmission through CASPA in a following application cycle.

This application will be considered with *all other applicants* in the applicant pool.

### **Readmission Process**

Students who have voluntarily withdrawn or who have been dismissed from the Program may elect to apply for readmission as a new student in the general applicant pool.

## **C. GRADING AND EVALUATION OF PERFORMANCE POLICY**

### **Grading**

In each course in the curriculum, the student's performance is evaluated by examination as well as other means, and a grade is submitted to the SAHP's Office of Student Affairs and, from there, to the Office of the Registrar, within a two week period after completion of the course.

The single final grade to be assigned to a student on completion of the course work is determined by considering all important attributes of that student's performance in the course.

A descriptive comment concerning student performance in the areas of knowledge, deportment, interpersonal relationships, attitude toward course work, and other factors which, in the opinion of the course faculty, are important to the student's future role as a physician assistant, is recorded for all courses. **Such descriptive comments become a part of the student's permanent record.**

**SAHP Grade Policy may be found at:**

<http://alliedhealth.lsuhsac.edu/admin/docs/StudentHandbook.pdf?version1.0>

### **Program Grade Policy**

The LSUHSC-NO PA Program holds students to the highest standards of professional knowledge acquisition. To assure excellence in the provision of healthcare, the Program adheres to the following standards:

**"A"** is given to all students whose quality of performance is considered to be excellent and who have demonstrated a degree of understanding and ability which is considered above the level of adequacy required for passing status.

**"B"** signifies that all work in a given course has been completed at a level above the minimal requirement but below that of "A."

**"C"** is indicative that minimal requirements for completion of the course work have been met. In the event a student earns a C in a course, the course instructor should alert the faculty advisor for that student. The faculty will discuss the matter in a convened meeting and notify the student according to program procedures, and begin the **Remediation Process.**

**"F"** is the grade assigned to students who are considered to be inadequate in meeting the minimum course requirements and have demonstrated a degree of deficiency which makes them ineligible to be promoted, or to continue in the program.

- A grade of temporary significance which may be issued by the Physician Assistant Program but which is not recorded on the student's permanent record is **"I"**(Incomplete).

A grade of **"I"** (Incomplete) is assigned when, for reasons beyond the student's control or because of some acceptable circumstance, the student has been unable to complete the course requirements in the usual time or manner. This grade does not imply a deficiency on the part of the student. On completion of the required course work, the grade of **"I"** will be changed to an appropriate grade as described above.

Students with Incomplete status in a course must finish all required work in a manner specified by the Program. Conversion of **"I"** to **"F"** follows the timeline set by the University and Registrar. See above policy regarding **"F"** course grades.

Letter grades are assigned on the basis of the following distribution:

**90 - 100% A**

**80 - 89.99% B**

**70 - 79.99% C**

**<69.99% F**

**Appeal of Final Grades** – As per the LSUHSC-NO Catalog, the School of Allied Health Professions Policy for Appeal of Final Grades is as follows:

<http://alliedhealth.lsuhs.edu/admin/docs/StudentHandbook.pdf?version1.0>

#### **D. STUDENT ATTENDANCE POLICY**

##### **General Attendance**

As stated in the LSUHSC Catalog, **“Students are expected to attend all scheduled appointments in each course. Determination of the number of absences which may be interpreted as excessive, rests with the Department, and is subject to approval by the Dean.”**

Excessive absence, regardless of the cause thereof, may be construed as sufficient reason for considering a student as academically deficient. Determination of the number of absences which may be interpreted as excessive rests with the department.

Promptness and attendance are mandatory for **all** classes and laboratory sessions. **Each unexcused** absence can result in the **loss of points in the course** in which the class or laboratory session was missed.

An excused absence includes (but is not limited to) illness, accident, medical emergency or death in the immediate family.

**Scheduled appointments of a routine nature are not excused.** Other reasons for class/lab absences may be deemed as excused absences at the discretion of the instructor/class director.

**Regardless of the reason for the excused absence, the student who is going to be absent or tardy from a class or a laboratory session shall notify the instructor prior to that class or lab.**

An absence occurs when a student misses all or part of any **one** scheduled class or lab session. Approval of an **excused absence** is by the director of the course in which the absence occurred.

**Tardy** means that the student arrives after the class or laboratory session has started. When a student comes to class more than five minutes after the class has started, the student shall write and deliver a note of explanation to the mailbox of the course director by the end of the day. The instructor can then decide whether it constitutes an excused/unexcused absence.

**Attendance and promptness are also mandatory during all clinical assignments.** Absences from any clinical assignments are not permitted. A student who is going to be absent or tardy from a clinical assignment must notify the Clinical Coordinator **and** the clinical instructor as

early as possible. Attendance at all scheduled examinations is mandatory (see policy for Examinations).

An excused absence for the didactic portion of the program must fall into one of the following categories: approved leave, sick/bereavement leave or professional leave.

- Approved Leave: Sick/bereavement leave – no > 3 days (for members of immediate family)
- Professional Leave – at the discretion of the principle faculty, students may be allowed to attend professional meetings if participating in the meeting.

Leave requests will be denied if any tests, quizzes, projects, patient laboratories, student presentations, etc., are scheduled on the day for which leave is requested. Course Directors may also designate other specific class periods as “required.”

**NO** leave may be taken on days when the student is assigned to a clinical site.

**Approval for absence from courses taught outside the Department (pharmacology, physiology, etc.) must be obtained from the Physician Assistant course coordinator. The approval will be given to the student’s faculty advisor and placed in the student’s file.**

#### **Attendance for Examination and Testing**

Attendance at all scheduled examinations is mandatory. A student who is unable to take any particular scheduled and required examination is expected to notify (by phone or in person) the course director (and the Departmental course coordinator in cases of courses taught outside the Department) AT ONCE.

The reason for your absence must subsequently be submitted in a letter to the course coordinator (and course director). **A student who does not appear for a regularly scheduled examination may, at the discretion of the Department, be allowed to take a make-up exam, which may be an essay or an oral examination.**

Before a make-up examination will be given, a student absent from an examination because of illness must have in writing, from his/her physician, an explanation of the illness that justifies his/her absence on the exam day.

All make-up examinations must be taken no later than one week after the student returns to class, **or** as scheduled by the course director. Absence from an examination for any other reason must be excused by the course director before the time of the scheduled examination. Unexcused absence from an examination results in a score of ZERO for that exam.

- Absolutely no communication of any type between students will be allowed during an examination.
- Each student must complete the examination prior to leaving the room.

- The student will be permitted to have at his/her desk only those materials necessary for completing the examination.
- Unprofessional conduct of any kind, including **cheating on examinations, plagiarism, cheating in any class exercise or unprofessional conduct in classes, laboratories or in the clinical setting will subject the offending student to disciplinary action.** This action may include dismissal from the program (See the *SAHP POLICY AND PROCEDURES RELATED TO STUDENT CONDUCT*).
- The student's signature on all examination papers indicates that he/she is abiding by the following:
- **Pledge: "I have neither received nor given any assistance on this examination, nor have I seen anyone else do so nor will I communicate anything about an examination (includes any format written, practical, oral, etc.) with anyone other than LSUHSC Physician Assistant academic faculty and that doing so will be considered unprofessional conduct which will be reported to the faculty for review".**

#### E. GENERAL DEPARTMENTAL POLICIES

- Students **must** purchase required texts.
- Students are **required** to purchase the following items at the beginning of the Program (specifics to be given in orientation)
  - Short white lab jackets
  - Penlight
  - a tape measure
  - a reflex hammer
  - a stethoscope
  - a sphygmomanometer
  - Other items may be required in specific courses.
  - Otoscope/ophthalmoscope
- Each student is assigned a faculty advisor who may be contacted by the student as needed.
- It is required that the student schedule a counseling session with his/her advisor each semester. **It is the student's responsibility to make appointments with his/her advisor as needed.** In addition to the student's assigned advisor, all other members of the faculty are available for consultation.
- The calendar of scheduled classes for the Program may vary from the School of Allied Health Professions or other LSUHSC academic calendars published elsewhere. Students should contact the Program for information concerning the actual dates of holidays, and when classes begin/end, etc.
- Due to the disruptive nature of cell phones and pagers, all cell phones and pagers must be turned off or kept in the silent/quiet mode during all class periods and during all patient care times (observations, clinical internships. If you are expecting an emergency-type call, place cell phone/pager on the silent mode. Leave the room before answering it. Also, prior to the beginning of class, inform the faculty that you may be leaving the room due to a potential emergency call.



- Cell phones are not to be utilized in any form or purpose during an examination. If you are expecting an emergency phone call during an examination, inform the proctor of the exam and you may leave your phone with the proctor on silent or vibrate to receive the call. At this point you may leave your exam with the proctor and leave the room to use your cell phone. Your exam will be returned to you upon re-entering the examination room.
- Students who need “Reasonable Accommodations” through the ADA should contact the Department Head and the Associate Dean for Academic Affairs.

Americans with Disabilities Act

If you have any questions/concerns about the Americans with Disabilities Act or specific questions about students with disabilities you may contact:

E. Dugan, Ph. D

Associate Dean for Academic Affairs

504-568-4244

E-mail: [emart3@lsuhsc.edu](mailto:emart3@lsuhsc.edu)

All inquiries are kept in strict confidence in compliance with federal rules and regulations.

## F. EMPLOYMENT

Due to the exacting requirements of the **Physician Assistant curriculum**, it is unwise for students to expect to meet their expenses by outside work. The School does not specifically forbid such additional duties but does definitely discourage them.

The *Program*, furthermore, **reserves the right to indicate that such work be discontinued**, if in opinion of the faculty, it interferes with the satisfactory completion of prescribed academic activities (**see LSUHSC Catalog/Bulletin**).

## G. STUDENT ATTIRE

Students are required to wear attire which conforms to the image of the professional physician assistant. The Health Sciences Center, and specifically the PA Program, is a patient-care setting where patients, other professionals, and the general public form an impression of us which is based on our appearance and conduct.

Being neatly dressed and well-groomed is exemplary of professional behavior and is required at all times. Safety and comfort concerns for both the patient and clinician also drive the need for dress modifications in the professional setting.

The trunk region **MUST** be covered at all times. This includes classroom and clinical situations. **Classroom attire –Specific LSUHSC-NO PA Program polo shirts and cotton twill skirts/slacks is the expected attire for male and female students.**

Students are **not permitted to wear** shorts, cut-offs, hats, jeans, capris, clothing with rips/tears, halter tops, t-shirts, flip-flops, sandals, short skirts, jeans, or warm-up style (athletic wear, sweat, yoga) pants, or leggings, or tights in the classroom during normal working hours.

Faculty members may require specific dress for a specific class related to activities during class that supersede departmental dress code. Instructors will inform students of specific dress codes and subsequent enforcement policies for those classes. Uniform attire **MUST** be CLEAN and PRESSED.

**Specific requirements:** Clothing should allow for free movement during patient care and should not be tight, short, low cut or expose undergarments. Pant legs should not be form fitting (no skinny or straight leg pants, leggings). Socks must cover the ankles.

**Jewelry-** Watches, engagement, wedding and class rings are permissible.

Earrings- No more than 2 pair per ear. No dangling or overly large ear wear permitted.

No excessive jewelry

No other visible body piercing permitted.

**Nails-** Well groomed, clean. In clinical situation- no artificial nails or polish permitted.

**Tattoos/Body art-** Students may not exhibit tattoos at any time.

**Perfume/Scents-** No excessive use of personal scents, after shave, shampoo, etc. is permitted.

**Hair-** should be neatly groomed, clean and arranged in a manner that permits optimal patient care.

Facial hair must be neatly groomed and clean at all times.

**LSUHSC-NO ID - must** be worn at all times. **This includes classroom and clinical situations.**

**Professional Attire:** A white student (short) coat must be worn at all times in the clinical setting with the proper

LSUHSC-NO PA program badge and ID. The coat must be clean, free of stains, rip, tears, and pressed.

**Shoes-** No open-toed shoes are allowed in patient care areas.

**History and Physical Lab-** Students will be required to wear loose fitting t-shirts and shorts for use in the lab. Female students will also need to purchase a well-fitting sports bra. Athletic shoes will be required for this lab.

**Clinical preceptors, faculty, or other clinical supervisors reserve the right to ask a student who is inappropriately attired to leave and return appropriately dressed.**

**Clinical attire** – this applies to dress to be worn during clinical work or during class visits to different clinical settings. Minimally appropriate clinical attire consists of LSUHSC- NO PA Program polo shirts, cotton twill, full length slacks, and flat shoes with closed heels and toes.

The students are responsible for contacting their clinical instructors in advance for any other dress requirements that clinic might have (e.g., lab coats, neckties, scrubs, etc.). Any specific clinic dress code requirements supersede the LSUHSC PA Program dress code while at that facility.

**Laboratory attire** – the above noted attire is required for all physician assistant laboratory settings. In order to expose the spine for observation, palpation, etc., females should wear a sports bra with a back strap of no more than two inches in width.

Students should obtain several sets of lab clothes so that one set is at school at all times. The lab instructor may have other specific instructions for lab attire in a specific lab (e.g., must wear low, closed and stable shoes, etc.).

Students in lab attire should remain in the laboratory except when going to and from the dressing room or student lounge.

Students should not go into the reception room or stand in the halls while dressed in laboratory attire. Students may come to school or leave school in their lab clothes if the lab session begins or ends the day. If the lab ends the morning session and then begins the afternoon session and students wish to go to the cafeteria, they may keep their lab clothes on as long as they are appropriately covered. Lab attire needs to be covered any time the student leaves the floor with the attire on.

On days when students are on campus but not in the SAHP or in the PA Department (e.g., studying at the library) they may dress in casual but appropriate clothes (e.g., jeans, sweat pants, etc.).

**Enforcement** – if an instructor believes that a student is not dressing appropriately in his or her class or lab, the instructor will meet with the student privately. If a subsequent dress code violation occurs, the student will meet with the Program Director. Consequences of a third violation will be at the discretion of the Program Director.

## H. COMPUTER USAGE

### Computer Room

Computers in the computer rooms MUST be used carefully and with courtesy for all students. The following are rules for using Departmental, School, or Health Sciences Center computers:

- The person to use a computer last is responsible for appropriately shutting it down before he/she leaves the Department.
- No food or drinks may be near the computers for obvious reasons.

- No one may change the programs or layout of the computer without written approval of the Program Director or Business Manager.
- No one may load or download any programs without written approval of the Program Director.
- No one should be using the computer who has not been trained in its specific use.
- Only professional uses of the Internet or other programs will be allowed.
- E-mail sending/receiving is allowed. However, if you want to keep your mail you must save it to your own device or print it out, and erase it from the hard drive.

### **Laptop Computer Use**

You will receive a separate written policy on computer use, however, due to its importance; some of that information is reiterated here:

Computers may be used in the classroom or laboratories for school class-related activities only. **Students found to be using their computers during class for non-class related activities will be excused from the classroom and reported to the Program Director's office, Dean's Office, and/or appropriate designee.**

In addition, students should not communicate (e-mail, instant message, blog, etc.) with others (including professors) during class time or review other lectures or materials other than that being covered in the class in which they are participating. Students found doing so will be reprimanded.

Students failing to comply with this policy will be reported to the Dean's Office, Program Director and/or appropriate designee for disciplinary action (including the respective promotions committee) and may be subject to dismissal from continuing their education at the SAHP. It may also be the decision of the promotions committee or faculty member to prohibit the student from utilizing their laptop during designated classes for a designated period of time.

### **Email Use**

While faculty, students, and staff are strongly encouraged to sign up for and use E-mail, its use must be related to Health Sciences Center business communications.

The use of electronic mail should be consistent with the instructional, research, public service, and administrative goals and mission of the Health Sciences Center. Incidental and occasional personal use of electronic mail may occur when such use does not generate a direct cost to the Health Sciences Center.

### **Prohibited use of E-mail**

- Personal use that creates a direct cost for the Health Sciences Center is prohibited.

- The Health Sciences Center's electronic mail resources shall not be used for personal monetary gain or for commercial purposes that are not directly related to Health Sciences Center business.
- **Sending copies of documents or including the work of others in electronic mail communications in violation of any law, including copyright laws, is prohibited.**
- "Snooping" (i.e., obtaining or attempting to access) the files or electronic mail of others, or capturing or attempting to capture and "open" the electronic mail of others, except as required in order for authorized employees to diagnose and correct delivery problems, is prohibited.
- Use of electronic mail to harass or intimidate others, threaten, or to interfere with the ability of others to conduct Health Sciences Center business is prohibited.
- Use of electronic mail systems for any purpose that is restricted or prohibited by laws or regulations is prohibited.
- Unauthorized "Spoofing" (i.e., constructing an electronic mail communication so it appears to be from someone else) is prohibited.
- "Spamming" (i.e., sending unsolicited E-mail to lists of people you do not know) is prohibited. Bulk mailing is almost always considered Spam and places considerable stress on the E-mail system. Bulk mailings can be selectively used for Health Sciences Center related information but must be approved at a level appropriate to the scope of the mailing and the mailing must be handled in such a way that the E-mail systems are not adversely impacted. For example, it would be appropriate that a mailing to all of the School of Allied Health Professions be approved by the Dean's office. The mailing would be carried out in such a way as to avoid causing damage or disruption to the mail system. Authorized bulk mailings will be identified by the inclusion of the statement: "This message has been authorized by LSU Health Sciences Center administration for mass distribution as a service to our faculty, staff, and students."
- **Sending or forwarding chain-letters is prohibited.** Most E-mail messages that ask you to forward it on to others fall into this category, including virus warnings.

**Violations:** Violation of this policy in any part may be sufficient grounds for disciplinary action and/or termination. Disciplinary action may include dismissal of computer privileges on an individual basis, or in extreme cases, dismissal from the Program.

#### **I. USE OF LABORATORY SPACE DURING AND OUTSIDE SCHEDULED CLASS TIME**

The laboratory classroom in the PA Program is available to faculty, staff, and students for educational purposes. Those classes which are scheduled to meet in the Lab have priority for the use of the space and anyone wanting to use the lab during this class time must have the permission of the class instructor.

If the lab appears vacant, those persons wishing to use the lab or its equipment must first obtain permission from the Department. If the lab is scheduled to be vacant, PA department faculty, staff, and students may use the lab for educational purposes, with the faculty and staff having priority over student use.

All persons who use the laboratory must maintain the appearance of the space and return any items to their original location after use.

**No eating or drinking is allowed in the lab or in the classrooms.** No eating is allowed during lectures or other classroom or laboratory activities. No storage of food or drink is allowed on shelves, countertops, or cabinets.

Eating and drinking in the Human Development Center is restricted to the student lounge and areas without carpeting.

To protect the equipment from tears or marks, no shoes are to be worn on the examination tables. All students using the lab must be dressed appropriately according to the LSUHSC -NO PA Program Student Manual.

## **J. COMPLAINTS WITHIN & OUTSIDE OF DUE PROCESS**

**Due process for reporting complaints are as follows:**

- If the complaint is from an individual:
  - The individual should report the complaint to their respective faculty advisor.
  - The faculty advisor may suggest options for handling the complaint or simply forward the complaint to the faculty or department head.
  - If, for some reason, the individual student feels that he/she can't report to his/her faculty advisor, then the student should direct the complaint to the class liaison for the respective class who will then forward the complaint to the department head or faculty.
  - If, for some reason, the individual student feels that he/she can't report to either the faculty advisor or the class liaison (or if they are the same individual) then the student should report the complaint to the department head directly.
- If the complaint is from a class as a whole:
  - The class should report the complaint to their respective class president.
  - The class president may suggest options for handling the complaint or simply forward the complaint to the faculty liaison for the respective class.
  - If, for some reason, the class president feels that he/she can't report to the class faculty liaison for the respective class then the class president should report the complaint to the department head directly.
- Feedback regarding individual faculty or courses should be directed to student evaluations of teaching which are made available at the end of every course.

**Procedures for handling a complaint outside of the realm of due process:**

- When possible, the Program Director will discuss the complaint directly with the party involved within 14 business days. If at all possible, the matter is reconciled at this point.

A letter from the Program Director acknowledging the resolution of the complaint will be filed with the complaint and a copy sent to the complainant.

- If dissatisfied with the discussion with the Program Director, or if the complaint is against the Program Director, the involved party may submit a written complaint to the Dean of the SAHP. The Program Director will meet with each party separately and may schedule a joint appointment with the two parties in order to attempt to resolve the issue. A letter outlining the resolution by the Dean shall be filed with the complaint in the Department Head's office.
- If the party feels that additional complaint is necessary, then the last line of complaint is to the Vice-Chancellor of Academic Affairs or the Chancellor of the Health Sciences Center depending on the nature of the complaint.

## **GENERAL INFORMATION FOR THE PHYSICIAN ASSISTANT STUDENT**

### **Essential Functions and Technical Standards**

The SAHP in New Orleans is in compliance with the Americans with Disabilities Act and has determined that certain technical standards must be met by prospective candidates and students. A candidate for the MPAS degree must possess aptitude, abilities, and skills in the five areas discussed below. Reasonable accommodation will be made for otherwise qualified persons with disabilities. All individuals must be able to perform independently; therefore, third parties cannot be used to assist students in accomplishing curricular requirements in the five skill areas specified below.

The physician assistant master of health science degree (MPAS) signifies that the holder is prepared for entry into the practice of medicine. It follows that the graduate must have the knowledge, skills and abilities to function in a broad variety of clinical situations and to render a wide spectrum of patient care. It is essential for good patient care to require minimum standards for the education of the physician assistant.

In the education of PA students, the University must judge not only the scholastic accomplishments but also considers the student's current physical and emotional status, cumulative and progressive disability and drug-induced impairments that may pose obstacles to the safe application of the student's knowledge and skills or prevent effective interaction with patients.

PA students are reviewed individually and on a case-by-case basis using the factors listed below. In accordance with University policy and as delineated by federal and Louisiana law, the University does not discriminate in admissions, educational programs or employment against any individual on the basis of that individual's disability and will make good faith efforts at providing reasonable accommodation as required.

LSUHSC-NO PA students must possess the intellectual ability to learn, integrate, analyze and synthesize data. They must have functional use of the senses of vision, hearing, equilibrium and taste. Their exteroceptor (touch, pain and temperature) and proprioceptor (position, pressure, movement, stereognosis and vibratory) senses must be sufficiently intact to enable them to carry out all the activities required to complete the activities described below. PA students must have sufficient motor function capabilities to meet the demands of the PA program and the demands of the total patient care.

Students in the LSUHSC-NO PA Program must possess ability, aptitude and skills in these areas: observation, communication, motor, intellectual, behavioral/social and physical demands.

## TECHNICAL STANDARDS

This description defines the capabilities that are necessary for an individual to successfully complete the LSUHSC-NO PA curricula.

**Observation and Sensation:** The PA student must possess sufficient visual, auditory, and tactile sensation to receive appropriate information in the classroom, laboratory, and other educational and clinical settings. Sensation must be satisfactory to receive verbal and nonverbal communications from patients and others, and to perform inspection, auscultation and palpation techniques during the physical examination.

**Communication:** The PA student must be able to speak, hear, and observe patients, family members, and other clinicians. This includes expressive and receptive modes of verbal, nonverbal, and written communication. The student must have the ability to accurately assess receptive communication in order to make appropriate and timely responses. The student must be able to communicate attentively, effectively, and sensitively to others.

**Motor Functions:** Students must have sufficient strength and coordination to perform the activities required of a physician assistant. These include but are not limited to performing a physical examination utilizing diagnostic instruments and techniques in palpation and percussion. Students must have sufficient stamina to sit, stand, and move within classroom, laboratory, examination rooms, treatment rooms, and operating rooms for long periods of time. The student must have sufficient coordination to move about patient care environments, and sufficient dexterity to use common medical instruments. Students must be able to arrange for transportation between educational and clinical settings.

**Intellectual Capability:** Clinical problem solving and reasoning requires these intellectual abilities and encompass those to accurately measure, calculate, reason, analyze, integrate, learn, and retain information and make decisions in a timely manner. Students must be able to comprehend two and three-dimensional structures, and must be able to understand diagnostic testing and treatment regimens.



**Behavioral and Social Attributes:** Individuals must possess the emotional health required for the appropriate use of their intellectual and mental abilities, including logical thinking, good judgment, impulse control, empathy, interest, and motivation. These abilities should be sufficient to assure the development and maintenance of therapeutic relationships with patients and those who care for them. Individuals must be able to maintain emotional health despite stress, uncertainty, and physically taxing workloads and to adapt to changing situations while handling the responsibilities associated with medical education and patient care.

LSUHSC-NO will consider for admission, progression, and graduation individuals who demonstrate the knowledge and the ability to perform or learn to perform the skills described in this document. Individuals will be assessed not only on their scholastic accomplishments, but also on their physical and emotional capacities to meet the requirements of the school's curriculum and to graduate as skilled and effective practitioners of medicine. **Therefore, the following technical requirements apply:**

The ability to observe and participate in experiments in the basic sciences

- The ability to analyze, synthesize, extrapolate, solve problems, and reach diagnostic and therapeutic judgments in a timely manner
- The sufficient use of the senses of vision, hearing and the somatic sensation necessary to perform a physical examination
- The ability to establish and maintain professional relationships with patients, faculty, and peers
- The ability to communicate effectively, both orally and in writing, with patients, and colleagues
- The ability to perform routine laboratory tests and diagnostic procedures
- The ability to perform appropriately in emergency situations
- The ability to display good judgment in the assessment and treatment of patients

***These technical standards are identical to the technical standards required of students matriculating in the LSUHSC-NO School of Medicine, and conform to the LCME accreditation standards.***

## PERFORMANCE REQUIREMENTS

The following document outlines some examples of the demands and performance requirements required of the LSUHSC-NO PA student. (Examples included are not limited to training opportunities offered at the LSUHSC-NO program).

### Typical Mental Demands

**The LSUHSC-NO Master of Physician Assistant Studies student must possess the ability to:**

- Process, retain, comprehend, integrate, analyze, synthesize, and apply a large volume of data related to the art and science of medicine, including legal, ethical, and moral concepts
- Be present during long hours in the following settings: classrooms, laboratories, clinical settings, and self-directed study situations and environments
- Respond appropriately and in a timely manner to constructive faculty feedback
- Effectively communicate through written and verbal communication skills
- Participate in educational activities that include tests, examinations, demonstrations, simulations, presentations, written communication skills, and frequent and exacting evaluations
- Demonstrate the ability to gather patient data and report, perform the physical examination, conduct patient assessment and evaluation, formulate a treatment plan, and perform patient education

### Typical Physical Demands

**The LSUHSC-NO Master of Physician Assistant Studies student must possess:**

- Full range of body motion including assisting patient movement, manual and finger dexterity, and eye-hand coordination
- Normal visual and hearing acuity
- Physical capacity to stand and walk for extended hospital and clinic visits, and during frequent and prolonged patient and professional interactions
- Physical capacity to sit for long periods during classroom and laboratory experiences
- Capability to work in physically and mentally stressful situation with long and irregular hours and with exposures to communicable diseases and body fluids

### Typical Working Conditions

**The LSUHSC-NO Master of Physician Assistant Studies student must be able to:**

- Work in clinical and classroom environments with exposure to frequent to communicable diseases, toxic substances, ionizing radiation, medicinal

preparations, hostile individuals, and other such conditions common to the medical and surgical environments

- Interact with diverse patient populations of all ages with a range of acute and chronic medical and surgical conditions

### **Student Performance Requirements**

**The LSUHSC-NO Master of Physician Assistant Studies student will be required to perform in the following situations:**

- Medical, surgical, pediatric, obstetric/gynecologic, and other primary care medicine settings (inpatient and out-patient) at both campus and off-campus locations
- Didactic and clinical education and training
- Invasive and non-invasive procedures
- Pre-, intra-, and post-operative activities
- Emergency care

**The LSUHSC-NO Master of Physician Assistant Studies student will be required to:**

- Demonstrate a professional ethical demeanor and understanding of medical ethics and medical-legal concepts
- Display an ability to perform for long hours (physical and mental stamina)
- Complete demanding didactic and clinical evaluations, examinations, etc.
- Perform at the level determined and required by the faculty
- Participate in community and/or professional service activities
- Complete other responsibilities and tasks as assigned or required

### **TASKS, SKILLS AND COMPETENCIES**

This is a summary of major tasks, skills, competencies, and technical procedures offered during the LSUHSC-NO PA Program. This listing includes major concepts and techniques but is not limited to all experiences and opportunities presented during matriculation at the LSUHSC-NO PA program.

#### **Subjective Data Gathering and Utilization**

**The LSUHSC-NO Master of Physician Assistant Studies graduate should be able to:**

- Take a complete medical history
- Perform a comprehensive physical exam
- Order and interpret complete basic laboratory work (CBC, urinalysis, gram stain etc.)
- Obtain a history, gather patient data, and perform a physical examination in a reasonable period of time

- Identify data from the history and physical examination which is relevant to the patient's illness
- Synthesize all abnormal data collected in the data base into a separate problem or a collection of problems
- Develop a list of problems and properly separate them into active and inactive groups in a reasonable period of time
- Refine problems to the maximum extent possible with consistent accuracy and state clearly the overall goal for each problem
- Develop accurate therapeutic plans for each problem that are relevant to the resolution of the patient's problems
- Write thorough progress notes that include subjective and objective information as well as an assessment and plan
- Write and record accurate progress notes within a reasonable period of time
- Possess a general knowledge of pathophysiology of common diseases and disposition of patients

### **Objective Data Collection**

**The LSUHSC-NO Master of Physician Assistant Studies graduate should be able to perform, order, and interpret:**

- Routine and special radiographs (chest, abdomen, skull, skeletal, etc) studies
- Chemistry studies and fluid and electrolyte balance
- Hematology studies
- Culture results
- Electrocardiographic interpretations
- Abnormal laboratory/diagnostic data

### **Counseling and Patient Education**

**The LSUHSC-NO Master of Physician Assistant Studies graduate should be able to:**

- Provide counseling and patient education for problems and procedures, methods of treatment in a manner consistent with the understanding of the patient population and medical practice
- Assist individuals and families in identifying strengths to resolve their problems
- Inform individuals and families about available community resources
- Counsel parents and families on child rearing
- Counsel individuals and families about addictions and methods to cope with addictions
- Provide sex education
- Provide proper information and assistance to terminally ill patients
- Counsel and assist patients who are suffering from stress, depressions or losses (job, divorce, death of a loved one, etc.)
- Provide information about common medical problems and explain laboratory, x-ray, and surgical procedures

- Provide information on preventative measures for communicable diseases
- Provide information on healthy lifestyles and intervention/modification for at-risk behaviors.

### **Technical Skills**

**The LSUHSC-NO Master of Physician Assistant Studies graduate should be able to perform the following technical skills:**

- Venipuncture
- Arterial punctures
- IV catheterization
- Urinary catheterization
- Aseptic technique
- Wound care and closure of lacerations
- Immunizations (children and adult)
- Collection of various cultures (blood, sputum, urine, CSF)
- Vision screening
- Splint and cast applications
- KOH prep
- Explanation of procedures to patient, parent, and family
- Instruction about prescribed medication and other therapies
- Cardiopulmonary resuscitation (CPR)
- Advanced cardiac life support (ACLS)
- Emergency response to adverse reactions following administration of parenteral or any medication
- Mini-mental status examination
- Administration of local anesthesia
- Control of external hemorrhage
- Removal of superficial foreign bodies of the skin, ear and eye
- Glucometer readings (optional)
- Tissue biopsy (optional)

### **Other Skills: Assist in surgery**

- Identify and use appropriate surgical instruments
- Demonstrate appropriate operating room conduct
- Suture/Staple
- Dress wounds

### **Other Skills: Management of emergency situations**

- Cardiac arrest
- Respiratory distress
- Burns

- Hemorrhage and hemorrhagic shock
- Trauma
- Anaphylaxis
- Ingestion of toxic substances
- Myocardial infarction
- Acute abdomen
- Septic joint
- Urinary tract infection
- Wound infection

**Other Skills: Critical evaluation**

- Locate and retrieve medical literature
- Discuss practice implications
- Apply ethical decision-making skills
- Apply the Physician Assistant Code of Ethics
- Read medical literature on an on-going basis
- Discuss current and controversial medical knowledge with colleagues and physicians
- Critically evaluate new medical knowledge

**LSUHSC-NO PHYSICIAN ASSISTANT GRADUATE - FUNCTIONS AND TASKS**

Upon successful completion of the LSUHSC physician assistant training program and under the supervision of a physician, the **graduate physician assistant** will be able to:

- Utilize a systems approach to understand the rationale for the physical examination, integrating knowledge acquired in anatomy and physiology with the findings upon examination of the patient.
- Perform initial and follow-up evaluation of patients of various age groups in any setting, to elicit a detailed and accurate history, perform an appropriate physical examination, to order appropriate laboratory and special studies, and record and present pertinent data, including interpretive recommendations in a problem-solving manner meaningful to the physician.
- Perform or assist in the performance of laboratory, special and related studies relevant to patient need and practice capabilities e.g. blood studies, urinalysis, ECG.
- Perform appropriate therapeutic procedures for the evaluation and treatment of a patient's problem in a manner delineated by the supervising physician and that the PA is competent to perform.
- Formulate treatment plans and communicate patient treatment in a manner consistent with the supervising physician's direction by standing orders, protocols, treatment regimens, or otherwise.
- Instruct and counsel patients regarding physical and mental health, including matters such as nutrition, illness, treatment, normal growth and development, health promotion, disease prevention, and lifestyle risk factors for the patient's age and sex with an awareness of and sensitivity to cultural diversity in the patient population.

- Perform the following functions in hospital setting: patient work-ups, patient rounds, recording patient progress notes, accurately and appropriately transcribing, transmitting or executing standing orders and other specific orders at the direction of the supervising physician, and compiling and recording detailed progress reports and narrative case summaries.
- Provide pre-operative evaluation and management, assist in surgery, and provide post-operative evaluation and management for inpatient and outpatient surgical problems and procedures.
- Deliver or assist in the delivery of services, including the review and monitoring of treatment and therapy plans, to patients requiring initial or continuing care in any setting approved by the supervising physician to include office, hospital, nursing home, extended care facilities, etc.
- Be a case manager and team leader, coordinating patient care, databases, records, and outcome measurements.
- Interact with community, regional, and state medical and social services and resources to facilitate and ensure patient care and continuity of care.
- Interact with the community at large by ongoing service to the community.
- Continue the educational process of lifelong learning to include continuing medical education, interpretation of the medical literature, adaptation of advancements to practice, and the application of research techniques and designs to interpret medical and patient data.
- Demonstrate an awareness and sensitivity to the cultural and ethical issues in today's practice of medicine, and possess sense of responsibility to medically underserved communities.

## **COMPETENCIES FOR THE PHYSICIAN ASSISTANT PROFESSION**

*(Originally adopted 2005; revised 2012)*

### **PREAMBLE**

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

This document was updated in 2012 and then approved in its current form by the same four organizations.

## **INTRODUCTION**

This document serves as a map for the individual PA, the physician-PA team, and organizations committed to promoting the development and maintenance of professional competencies among physician assistants. While some competencies will be acquired during formal PA education, others will be developed and mastered as physician assistants progress through their careers. The PA profession defines the specific knowledge, skills, attitudes, and educational experiences requisite for physician assistants to acquire and demonstrate these competencies.

The clinical role of PAs includes primary and specialty care in medical and surgical practice settings. Professional competencies for physician assistants include the effective and appropriate application of medical knowledge, interpersonal and communication skills, patient care, professionalism, practice-based learning and improvement, and systems-based practice.

Patient-centered, physician assistant practice reflects a number of overarching themes. These include an unwavering commitment to patient safety, cultural competence, quality health care, lifelong learning, and professional growth. Furthermore, the profession's dedication to the physician-physician assistant team benefits patients and the larger community.

## **PHYSICIAN ASSISTANT COMPETENCIES**

### **Medical Knowledge**

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

- evidence-based medicine
- scientific principles related to patient care
- etiologies, risk factors, underlying pathologic process, and epidemiology for medical conditions
- signs and symptoms of medical and surgical conditions
- appropriate diagnostic studies
- management of general medical and surgical conditions to include pharmacologic and other treatment modalities
- interventions for prevention of disease and health promotion/maintenance
- screening methods to detect conditions in an asymptomatic individual
- history and physical findings and diagnostic studies to formulate differential diagnoses



## **Interpersonal & Communications Skills**

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

Physician assistants are expected to:

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

## **Patient Care**

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

Physician assistants are expected to:

- work effectively with physicians and other health care professionals to provide patient-centered care
- demonstrate compassionate and respectful behaviors when interacting with patients and their families
- obtain essential and accurate information about their patients
- make decisions about diagnostic and therapeutic interventions based on patient information and preferences, current scientific evidence, and informed clinical judgment
- develop and implement patient management plans
- counsel and educate patients and their families
- perform medical and surgical procedures essential to their area of practice
- provide health care services and education aimed at disease prevention and health maintenance
- use information technology to support patient care decisions and patient education

## **Professionalism**

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

Physician assistants are expected to demonstrate:

- understanding of legal and regulatory requirements, as well as the appropriate role of the physician assistant

- professional relationships with physician supervisors and other health care providers
- respect, compassion, and integrity
- accountability to patients, society, and the profession
- commitment to excellence and on-going professional development
- commitment to ethical principles pertaining to provision or withholding of clinical care, confidentiality of patient information, informed consent, and business practices
- sensitivity and responsiveness to patients' culture, age, gender, and abilities
- self-reflection, critical curiosity, and initiative
- healthy behaviors and life balance
- commitment to the education of students and other health care professionals

### **Practice-based Learning & Improvement**

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

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

### **Systems-based Practice**

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

- effectively interact with different types of medical practice and delivery systems
- understand the funding sources and payment systems that provide coverage for patient care and use the systems effectively
- practice cost-effective health care and resource allocation that does not compromise quality of care
- advocate for quality patient care and assist patients in dealing with system complexities

- partner with supervising physicians, health care managers, and other health care providers to assess, coordinate, and improve the delivery and effectiveness of health care and patient outcomes
- accept responsibility for promoting a safe environment for patient care and recognizing and correcting systems-based factors that negatively impact patient care
- apply medical information and clinical data systems to provide effective, efficient patient care
- recognize and appropriately address system biases that contribute to health care disparities
- apply the concepts of population health to patient care

*Adopted 2012 by ARC-PA, NCCPA, and PAEA Adopted 2013 by AAPA*

## PHYSICIAN ASSISTANT PROFESSIONAL ORGANIZATIONS

### AMERICAN ACADEMY OF PHYSICIAN ASSISTANTS

#### **AAPA Mission**

AAPA leads the profession and empowers our members to advance their careers and enhance patient health.

#### **AAPA Vision**

PAs transforming health through patient-centered, team-based medical practice

### VALUES OF THE AMERICAN ACADEMY OF PHYSICIAN ASSISTANTS

**Leadership and Service:** We inspire a shared vision to lead the profession, emphasize service to our members and enhance the ability of PAs to serve patients and their communities.

**Unity and Teamwork:** We embrace the strength of our members and constituent and partner organizations to speak with one voice for the profession and work together to transform health.

**Accountability and Transparency:** We listen, deliver results, take ownership for our actions and operate in an environment of openness and trust.

**Excellence and Equity:** We commit to the highest standards and seek to eliminate disparities and barriers to quality healthcare.

## Strategic commitments to the PA profession in partnership with our constituent organizations

**Foster PA Excellence:** We will promote and facilitate PA excellence through integrated professional development and coordinated advocacy.

**Optimize PA Practice:** We will identify, evaluate, and promote best practice models that increase PA impact on health, maximize PA value and enhance PA satisfaction.

**Grow the PA Profession:** We will work to elevate PA roles, recognition and respect, and support increasing the number and diversity of PAs.

## PHYSICIAN ASSISTANT EDUCATION ASSOCIATION (PAEA)

The Physician Assistant Education Association (PAEA) is the only national organization in the United States representing physician assistant (PA) educational programs. Currently, all of the accredited programs in the country are members of the Association. PAEA provides services for faculty at its member programs, as well as to applicants, students, and other stakeholders.

The Association was founded in 1972 as the Association of Physician Assistant Programs. Member programs voted to adopt the current name in 2005.

### Mission

PAEA's mission is to pursue excellence, foster faculty development, advance the body of knowledge that defines quality education and patient-centered care, and promote diversity in all aspects of physician assistant education.

To accomplish its mission, PAEA seeks to:

- Encourage and assist programs to educate competent and compassionate physician assistants
- Enhance programs' capability to recruit, select, and retain well-qualified PA students
- Support programs in the recruitment, selection, development, and retention of well-qualified faculty
- Facilitate the pursuit and dissemination of research and scholarly work
- Educate PAs who will practice evidence-based, patient-centered medicine
- Serve as the definitive voice on matters related to entry-level PA education, nationally and internationally.

- Foster professionalism and innovation in health professions education
- Promote inter-professional education and practice
- Forge linkages with other organizations to advance its mission.

**Vision Statement**

To improve the quality of health care for all people by fostering excellence in physician assistant education

**Value Statement**

We uphold the values of collegiality, scholarship, excellence, service, diversity, ethical behavior, integrity, and respect

**LOUISIANA ACADEMY of PHYSICIAN ASSISTANTS**

In December of 1977 a group of seven military PAs from Fort Polk, Louisiana and one civilian PA trying to obtain privileges from the State Board of Medical Examiners, held their first organizational meeting with the hope of forming the Louisiana Academy of Physician Assistants. By March of 1978, the LAPA had formed and in October of that year, LAPA had incorporated.

Those early meetings were attended by about a dozen PAs who saw the future of our profession in Louisiana. Over the years, the organization grew, laws were challenges and rules were rewritten. PAs were allowed to start practice outside of the military, government or public service arenas and the numbers gradually grew. In 2004, the state legislature passed Louisiana's Prescriptive Authority Act.

There are now over 300 licensed PAs in Louisiana and those numbers are growing. The annual CME conference draws 150-200 registrants to who come to enjoy the good weather, superb educational events and the eclectic nightlife of the French Quarter. The LAPA currently has over 350 members and the Academy continues to work with and for the PAs of Louisiana (From the LAPA Website, 2015).

You can get more information about LAPA at:

<http://www.ourlapa.org/>

**Vision**

The vision of the Louisiana Academy of Physician Assistants is to promote and provide excellent quality medical services to all citizens of the state through growth and utilization of physician assistants as an integral part of the Physician-Physician Assistant Team.

**Mission Statement**

The mission of the Louisiana Academy of Physician Assistants, in association with the American Academy of Physician Assistants, is to promote physician assistants in their professional pursuit of excellence and to strengthen their role in health care delivery through public education, continuing medical education, physician education, member services, physician assistant student involvement, and legislative efforts.

## **NATIONAL COMMISSION ON CERTIFICATION OF PHYSICIAN ASSISTANTS**

NCCPA is the only certifying organization for physician assistants in the United States. Established as a not-for-profit organization in 1974, NCCPA is dedicated to assuring the public that certified physician assistants meet established standards of clinical knowledge and cognitive skills upon entry into practice and throughout their careers.

All U.S. states, the District of Columbia and the U.S. territories have decided to rely on NCCPA certification as one of the criteria for licensure or regulation of physician assistants. As of Dec. 31, 2014, there were approximately 102,000 certified PAs.

### **NCCPA Purpose**

To provide certification programs that reflect standards for clinical knowledge, clinical reasoning and other medical skills and professional behaviors required upon entry into practice and throughout the careers of physician assistants.

### **NCCPA Passion**

NCCPA is dedicated to serving the interest of the public. We do so with a passionate belief that certified PAs are essential members of the health care delivery team who provide millions access to more affordable, high quality health care.

## **ACCREDITATION**

The Accreditation Review Commission on Education for the Physician Assistant (ARC-PA) is the accrediting agency that protects the interests of the public and PA profession by defining the standards for PA education and evaluating PA educational programs within the territorial United States to ensure their compliance with those standards.

The ARC-PA is an independent accrediting body authorized to accredit qualified PA educational programs leading to the professional credential, Physician Assistant (PA). Accreditation is a process of quality assurance that determines whether the program meets established standards for function, structure and performance. The ARC-PA does not accredit any academic degree awarded by the sponsoring institution of the PA program.

The ARC-PA encourages excellence in PA education through its accreditation process by establishing and maintaining standards of quality for educational programs. It awards accreditation to programs through a peer review process that includes documentation and periodic site visit evaluation to substantiate compliance with the Accreditation Standards for Physician Assistant Education. The accreditation process is designed to encourage sound educational practices and innovation by programs and to stimulate continuous self-study and improvement.

In addition to establishing educational standards and fostering excellence in PA programs, the ARC-PA provides information and guidance to individuals and organizations regarding PA program accreditation.

### Mission

The ARC-PA is the recognized accrediting agency that protects the interests of the public, including current and prospective PA students, and the PA profession by defining the standards for PA education and evaluating PA educational programs within the territorial United States to ensure their compliance with those standards.

### Philosophy

- High quality education for all physician assistants best serves the interests of both the public and the PA profession
- Continual self-study is the foundation for improving quality in the content and processes of education

PA program accreditation must:

1. be voluntary, private, and non-governmental
2. encourage efforts toward maximal educational effectiveness
3. be built on mutual trust among all parties involved
4. be devoid of conflict of interest
5. assure due process

The ARC-PA derives its identity from:

1. its history
2. its involvement with other accreditation organizations
3. its collaborating organizations
4. the PA profession

### The role of the ARC-PA is to:

1. establish educational standards utilizing broad-based input

2. define and administer the process for comprehensive review of applicant programs
3. define and administer the process for accreditation decision-making
4. determine if PA educational programs are in compliance with the established standards
5. work collaboratively with its collaborating organizations
6. define and administer a process for appeal of accreditation decisions

## Goals

The ARC-PA will:

- foster excellence in PA education through the development of uniform national standards for assessing educational effectiveness
- foster excellence in PA programs by requiring continuous self-study and review
- assure the general public, as well as professional, educational, and licensing agencies and organizations, that accredited programs have met defined educational standards for preparing PAs for practice
- provide information and guidance to individuals, groups, and organizations regarding PA program accreditation

Association of Specialized and Professional Accreditors (ASPA)

The ARC-PA is a member of ASPA, and as such, subscribes to its code of ethics as posted on the ASPA web site.

Source: [www.arc-pa.org](http://www.arc-pa.org).

The ARC-PA Accreditation Standards (4th edition) can be reviewed at:

[http://www.arc-pa.org/acc\\_standards/](http://www.arc-pa.org/acc_standards/)

## LSUHSC-NO Master of Physician Assistant Studies Professional Curriculum

### EDUCATIONAL OBJECTIVES

Instructional objectives and competencies are statements of the proficiency, knowledge, and aptitude a student is expected to achieve at the end of a course of study. An objective thus specifies an intended outcome as a result of the learning experience. The purposes of educational objectives are:

- To facilitate an increase in student achievement;
- To assist in curriculum planning and achievement;
- To improve assessment techniques; and
- To foster a commitment to lifelong learning



Students learn in an objective-oriented, competency-based curriculum that provides exposure to great amounts of information and learning activities. The program's educational objectives are designed to help direct student learning and mastering of knowledge and skills.

Objectives are stated in terms of desired behavioral patterns, and have been classified into three domains: cognitive, affective, and psychomotor.

The cognitive domain includes those objectives related to the recall of knowledge and are constructed to encourage the development of intellectual abilities and skills.

The affective domain includes those educational objectives designed toward altering the students' emotions, e.g. degree of acceptance or rejection of an entity.

The psychomotor domain addresses various motor skills that require neuromuscular coordination.

## **PROFESSIONALISM**

### **GUIDELINES FOR ETHICAL CONDUCT FOR THE PHYSICIAN ASSISTANT PROFESSION**

*(Excerpt from AAPA website; Adopted 2000, amended 2004, 2006, 2007, 2008, reaffirmed 2013)*

#### **Introduction**

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

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

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

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

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

**Nonmaleficence** means to do no harm, to impose no unnecessary or unacceptable burden upon the patient. Justice means that patients in similar circumstances should receive similar care.

**Justice** also applies to norms for the fair distribution of resources, risks, and costs. Physician assistants are expected to behave both legally and morally.

They should know and understand the laws governing their practice. PAs are expected to behave both legally and morally. They should know and understand the laws governing their practice. Likewise, they should understand the ethical responsibilities of being a health care professional.

Legal requirements and ethical expectations will not always be in agreement. Generally speaking, the law describes minimum standards of acceptable behavior, and ethical principles delineate the highest moral standards of behavior.

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

The following sections discuss ethical conduct of PAs in their professional interactions with patients, physicians, colleagues, other health professionals, and the public. The "Statement of Values" within this document defines the fundamental values that the PA profession strives to uphold.

These values provide the foundation upon which the guidelines rest. The guidelines were written with the understanding that no document can encompass all actual and potential ethical responsibilities, and PAs should not regard them as comprehensive.

### **Statement of Values of the Physician Assistant Profession**

- Physician assistants hold as their primary responsibility the health, safety, welfare, and dignity of all human beings.
- Physician assistants uphold the tenets of patient autonomy, beneficence, nonmaleficence, and justice.
- Physician assistants recognize and promote the value of diversity.
- Physician assistants treat equally all persons who seek their care.
- Physician assistants hold in confidence the information shared in the course of practicing medicine.
- Physician assistants assess their personal capabilities and limitations, striving always to improve their medical practice.

- Physician assistants actively seek to expand their knowledge and skills, keeping abreast of advances in medicine.
- Physician assistants work with other members of the health care team to provide compassionate and effective care of patients.
- Physician assistants use their knowledge and experience to contribute to an improved community.
- Physician assistants respect their professional relationship with physicians.
- Physician assistants share and expand knowledge within the profession.

## **The PA and the Patient**

### **PA Role and Responsibilities**

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

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

PAs are professionally and ethically committed to providing nondiscriminatory care to all patients.

While PAs are not expected to ignore their own personal values, scientific or ethical standards, or the law, they should not allow their personal beliefs to restrict patient access to care. A PA has an ethical duty to offer each patient the full range of information on relevant options for their health care. If personal moral, religious, or ethical beliefs prevent a PA from offering the full range of treatments available or care the patient desires, the PA has an ethical duty to refer a patient to another qualified provider.

That referral should not restrict a patient’s access to care. PAs are obligated to care for patients in emergency situations and to responsibly transfer patients if they cannot care for them.

PAs should always act in the best interests of their patients and as advocates when necessary. PAs should actively resist policies that restrict free exchange of medical information.

For example, a PA should not withhold information about treatment options simply because the option is not covered by insurance. PAs should inform patients of financial incentives to limit care, use resources in a fair and efficient way, and avoid arrangements or financial incentives that conflict with the patient’s best interests.

## **The PA and Diversity**

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

### **Nondiscrimination**

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

### **Initiation and Discontinuation of Care**

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

A PA and supervising physician may discontinue their professional relationship with an established patient as long as proper procedures are followed. The PA and physician should provide the patient with adequate notice, offer to transfer records, and arrange for continuity of care if the patient has an ongoing medical condition.

Discontinuation of the professional relationship should be undertaken only after a serious attempt has been made to clarify and understand the expectations and concerns of all involved parties.

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

### **Informed Consent**

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

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

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

## **Confidentiality**

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

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

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

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

## **The Patient and the Medical Record**

PAs have an obligation to keep information in the patient's medical record confidential. Information should be released only with the written permission of the patient or the patient's legally authorized representative. Specific exceptions to this general rule may exist (e.g., workers compensation, communicable disease, HIV, knife/gunshot wounds, abuse, and substance abuse).

It is important that a PA be familiar with and understand the laws and regulations in his or her jurisdiction that relate to the release of information. For example, stringent legal restrictions on release of genetic test results and mental health records often exist.

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

### **Disclosure**

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

### **Care of Family Members and Co-workers**

Treating oneself, co-workers, close friends, family members, or students whom the physician assistant supervises or teaches may be unethical or create conflicts of interest. PAs should be aware that their judgment might be less than objective in cases involving friends, family members, students, and colleagues and that providing —curbside care might sway the individual from establishing an ongoing relationship with a provider.

If it becomes necessary to treat a family member or close associate, a formal patient-provider relationship should be established, and the PA should consider transferring the patient's care to another provider as soon as it is practical. If a close associate requests care, the PA may wish to assist by helping them find an appropriate provider.

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

### **Genetic Testing**

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

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

### **Reproductive Decision Making**

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

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

### **End of Life**

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

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

PAs should assure terminally-ill patients that their dignity is a priority and that relief of physical and mental suffering is paramount. PAs should exhibit non-judgmental attitudes and should assure their terminally-ill patients that they will not be abandoned.

To the extent possible, patient or surrogate preferences should be honored, using the most appropriate measures consistent with their choices, including alternative and non-traditional treatments. PAs should explain palliative and hospice care and facilitate patient access to those services.

End of life care should include assessment and management of psychological, social, and spiritual or religious needs. While respecting patients' wishes for particular treatments when possible, PAs also must weigh their ethical responsibility, in consultation with supervising physicians, to withhold futile treatments and to help patients understand such medical decisions.

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

## **The PA and Individual Professionalism**

### **Conflict of Interest**

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

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

### **Professional Identity**

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

### **Competency**

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

### **Sexual Relationships**

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

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



## **Gender Discrimination and Sexual Harassment**

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

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

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

## **The PA and Other Professionals**

### **Team Practice**

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

### **Illegal and Unethical Conduct**

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

### **Impairment**

Physician assistants have an ethical responsibility to protect patients and the public by identifying and assisting impaired colleagues. —Impaired means being unable to practice medicine with reasonable skill and safety because of physical or mental illness, loss of motor skills, or excessive use or abuse of drugs and alcohol. PAs should be able to recognize impairment in physician supervisors, PAs, and other health care providers and should seek assistance from appropriate resources to encourage these individuals to obtain treatment.

## **PA-Physician Relationship**

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

### **Complementary and Alternative Medicine**

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

### **The PA and the Health Care System**

#### **Workplace Actions**

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

#### **Managed Care**

The focus of managed care organizations on cost containment and resource allocation can present particular ethical challenges to clinicians. When practicing in managed care systems, physician assistants should always act in the best interests of their patients and as an advocate when necessary.

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

#### **PAs as Educators**

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

#### **PAs and Research**

The most important ethical principle in research is honesty. This includes assuring subjects' informed consent, following treatment protocols, and accurately reporting findings. Fraud and dishonesty in research should be reported so that the appropriate authorities can take action. Physician assistants involved in research must be aware of potential conflicts of interest. The patient's welfare takes precedence over the desired research outcome.

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

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

### **PAs as Expert Witnesses**

The physician assistant expert witness should testify to what he or she believes to be the truth. The PA's review of medical facts should be thorough, fair, and impartial. The PA expert witness should be fairly compensated for time spent preparing, appearing, and testifying. The PA should not accept a contingency fee based on the outcome of a case in which testimony is given or derive personal, financial, or professional favor in addition to compensation.

### **The PA and Society**

#### **Lawfulness**

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

#### **Executions**

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

#### **Access to Care/Resource Allocation**

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

## Community Well Being

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

## Conclusion

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

## PROFESSIONAL DEVELOPMENT AND BEHAVIOR – LSUHSC-NO PA PROGRAM

Professional behaviors and attitudes, including effective communication and interpersonal skills, ethical decision-making, respect for diversity and values of others, and a fundamental respect for human dignity, are viewed as essential for competent and effective practice within the health care professions. These characteristics will be considered by the faculty in determination of course grades and a student's eligibility for graduation.

Any student whose behavior in class or at a required clinical assignment or other program related and sanctioned activities is found to be deficient in one or more of these areas may be subject to academic review on the recommendation of faculty.

## Professionalism Development – LSUHSC-NO Physician Assistant Studies

**Each semester** the student will be provided feedback on professional development. Small group leaders will provide ratings and comments on your professional behavior in the classroom, laboratory, and/or clinical areas. Upon entering the program, you, your advisor, and the Program Director will enter into a contractual agreement that provides for evaluation of your professional development and behavior on a semester basis. **These professional behaviors will be assessed in every course.**

Major areas of professionalism:

- Is punctual and completes assignments on time
- Notifies faculty member ahead of time of absence and reason for it
- Accepts responsibility for own action
- Is able to problem solve

- Demonstrates flexibility
- Demonstrates self-confidence and self-assurance
- Is able to cooperate with classmates
- Recognizes and handles frustration in a non-disruptive and constructive manner
- Is able to modify behavior in response to feedback
- Is able to receive constructive criticism
- Respects classmates, staff, faculty, and patients
- Holds medical information in confidence
- Demonstrates ethical behavior
- Demonstrates compassion, empathy and humaneness
- Overall, is developing appropriately given stage in the program

**Identification** The LSUHSC-NO PA student should wear an appropriate lab jacket (short length). The white coat should be clean and pressed. LSUHSC-NO PA students are provided with an official LSUHSC-NO badge that displays their photograph and identifies them by name and as a student. During the didactic phase of the curriculum, the student must wear their badge to all classes and activities. During the clinical year, students must wear their white coat and badge at all times while providing patient care except in areas requiring sterile attire.

**Professional Etiquette** (Computers, Cell Phones and PDA's) Computers in the classroom environment will be used for note taking or instructor approved activities only. **Web surfing, instant messaging, texting, etc. are not allowed. Cell phone and pagers should either be switched off or kept in the silent mode during class sessions. Text messaging or taking calls during class or clinic is not allowed.** The student is required to provide the department with a reliable contact number (pager or cell phone) at all times.

**Breaks** Students should take advantage of formal breaks offered by the instructor during lengthy classes. **Only in rare instances, should it be necessary for a student to leave and return to the classroom.**

**Punctuality** Students must be on time to class and must stay the entire session. If the student is going to be late or needs to leave early, arrangements should be made with the instructor prior to class. See absentee section for more information.

**Visitors** The LSUHSC has a no guest policy. This is in keeping with the LSUHSC-NO policy that states that students who are not enrolled in the course may not audit or attend classes.

**Conversations** If students have questions, they should ask them at appropriate times, and should avoid talking and participating in other conversations during classes.

## **GENERAL INFORMATION FOR NEW STUDENTS**

### **STUDENT HANDBOOK - UPDATE POLICY**

This is the official student handbook for the Physician Assistant Program LSUHSC-NO. Since dates and material are subject to change periodically, the most current copy will be maintained on the PA web site,

<http://alliedhealth.lsuhschool.edu/pa/default.aspx>

This information is not intended to substitute or replace the official documents of the LSUHSC-NO or the LSU System.

### **NEW STUDENT INFORMATION AND ORIENTATION**

Information for new students is available at the following website:

<http://alliedhealth.lsuhschool.edu/Admin/StudentAffairs.aspx>

New students should complete required tasks before orientation, e.g., background checks, immunizations, non-disclosure forms, etc.

### **DIDACTIC CLASS SCHEDULES**

Didactic class schedules are prepared and distributed each semester. Because of the complexity of the schedule and numbers of persons involved in teaching courses, they are usually published just prior to the beginning of the each semester, but are subject to change.

### **TEXTBOOKS AND EQUIPMENT**

Prices on equipment, textbooks, supplies, fees, and tuition are approximate and subject to change without notice.

The LSUHSC-NO Bookstore can be accessed at:

<http://www.lsuhschool.edu/administration/ae/hsb.aspx>

#### **Textbooks**

Each semester, the LSUHSC-NO Bookstore (located on campus), will have a list of required and recommended textbooks for courses. This information is also noted in the course syllabi (posted on Moodle and distributed first day of class).

#### **Equipment and Instruments**

Each student will be required to have the following basic set of equipment and supplies, in addition to bringing protective apparel to classes and rotation assignments, e.g., eyewear, aprons, gloves, masks, etc. The LSUHSC-NO Bookstore has sufficient quantities of the required items. The bookstore is an excellent resource for purchasing items because of their location on campus and their repair/replacement policies. If you decide to purchase —used items used from other students, remember to secure warranties with original purchase receipts. A third alternative is to utilize other companies.

**The Patient Assessment course coordinator will discuss equipment purchase with you early in semester. Please do not purchase any equipment prior to enrollment.** When bought through

the bookstore, equipment may have warranties that will not apply to equipment purchased elsewhere.

- Sample List of Equipment (a specific, recommended list will be given upon matriculation):
- Welch-Allyn Diagnostic Set
- Pocket Pen Light
- Otoscope insufflator bulb
- Pocket Eye Chart
- Stethoscope
- Percussion Hammer
- Tuning Forks – (1) 512 cps and (1) 128 cps weighted
- Bag (optional)
- Sphygmomanometer
- Safety Glasses
- Other: T-shirt and long shorts for labs (available at LSUHSC-NO bookstore), short white coat
  - (3) must have departmental patch
- Smart Phone with Data Package\*
- Laptop Computer\* \* to assure access to testing when enrolled in SOM courses, the students must purchase the LSUHSC required laptop computer.

<http://alliedhealth.lsuhs.edu/Administration/SAHPNotebookPolicySpring2010%20Final.pdf>

### **Academic Advisors**

Students are assigned and teamed with a faculty member who serves as the student's advisor and liaison to the program, SAHP, and LSUHSC-NO during his/her matriculation in the program.

The purposes of the faculty advisor system are to:

- serve as a professional role model for the student
- act as a resource for both academic and personal concerns and advise students on self-directed learning
- chart the student's progress through the program, providing help and guidance
- assist the student in defining personal career goals

### **Director's Hour**

This weekly meeting is scheduled for students to meet with the program director and other faculty. The sessions are used to inform students about special program events, schedules, announcements, etc. In addition, the event serves as a forum for students to provide feedback to the program about the curriculum, testing, and other department issues as well as to accomplish various administrative tasks such as instructor evaluations, etc. During the clinical year, Director's Hour is scheduled as an end of the rotation activity. **Attendance is mandatory.**

### **Security Clearance**

Program students must successfully complete several security background checks. The first background check must be completed prior to enrollment through a LSUHSC-NO approved provider. Applicants selected for matriculation will be notified of the specific details. Regarding misdemeanors or felonies, even if indicated that a record is expunged, the information is still discoverable during a background check. **Any omission or errors are considered falsification of the application, and this could result in negative clearance and dismissal from the program.**

A negative clearance, however, will not necessarily preclude matriculation; but a conviction of a felony offense may result in ineligibility to receive licensure in Louisiana. Cases are considered on an individual basis by the state licensing agency. Students also must successfully complete an extended background check through a LSUHSC-NO contractor prior to clinical rotations. **The background checks are student expenses.**

### **Letters of Reference**

Each faculty member has his or her own preference about how they handle reference requests. Most prefer an email or personal request in writing with sufficient lead time (at least two weeks), and instructions such date and format of the letter.

When making a request, students should be mindful of tone and wording of request, include the full name of the scholarship and its overall purpose and guidelines, summary of pertinent comments from clinical preceptor evaluations, and an updated student profile or resume.

The Program Director completes the evaluation form for state licensure as well as reviews most employment/hospital checks.

### **Grade Rounding Policy**

The LSUHSC-NO program adheres strictly to a no rounding of grades.

There will be **no rounding of individual components of a course grade or the average of the final grade.**

### **MPAS Academic Performance Standards**

Please refer to the School of Health Professions Bulletin for information on academic policies such as withdrawal policy, academic performance standards, good standing, probation, and dismissals. It is noted that grades of B or better may be required in specific courses, and students should refer to course syllabi for details.

<http://alliedhealth.lsuhs.edu/Admin/docs/StudentHandbook051915.pdf>

### **PROCEDURE FOR REVIEWING GRADES**

#### **Access to Student Records**

The Family Educational Rights and Privacy Act (**FERPA**)

<http://catalog.lsuhs.edu/content.php?catoid=6&navoid=1161&hl=FERPA&returnto=search>



Students have the right to review information from their academic record. Any student who wishes to review information from his/her educational file shall submit a written request to the custodian of student records in the appropriate office. The custodian shall, within 45 days, grant the request in writing by notifying the student of the time and place at which the record may be reviewed.

In the LSU School of Allied Health Professions, the custodian of student records is the Director of the Office of Student Affairs. For review of student departmental records, the department head is to be contacted. He/she will advise the student of the official custodian. The Registrar is to be contacted directly for educational records maintained in that office.

## **CLINICAL (MPAS-II) YEAR**

### **Clinical Schedules**

The clinical rotation schedule has been planned with special consideration and concentration on the needs of the students, faculty, and clinical sites. The program adheres to its schedule after publication annually in the spring semester; however, it is subject to change.

Students selected for the physician assistant program at LSUHSC-NO must complete all didactic and clinical rotations at program-affiliated sites.

No international rotations are allowed, and no exceptions will be made.

**During the clinical year, students must plan for the expense of rotations away from campus (e.g., living expenses, transportation, etc.).**

### **Clinical Year Testing and Orientation MPAS-II**

Clinical year (MPAS-II) testing, seminar, and orientation sessions are one or two days in length and scheduled at the end of each rotation. Final exams, competency testing, enrichment learning activities, rotation orientations, and other administrative tasks are planned for these periods.

It is the student's responsibility to check with the department for exact dates, times, and locations as well as participate in all activities.

All students, regardless of assignments or test schedules, must attend these mandatory sessions to take care of administrative and testing matters.

### **Competency Testing and Standardized Exams**

MPAS-I and MPAS-II students are required to sit for standardized exams (Packrat), a review examination for the NCCPA certification examination. The program pays for the testing prior to matriculation in the clinical year.

Periodically during the clinical year, students are administered competency examinations (physical examinations, OSCE's, exams, etc.). This enables the student to gain a better

understanding of his/her knowledge base and areas for study for the upcoming certification exam.

These examinations also help the program identify deficiencies and/or weak areas so that remediation may be offered.

### **Patient Contact Tracking System**

To insure students are offered essential and necessary kinds of experiences during the training program and to consistently monitor student clinical contacts, the department leases a computerized tracking system. The system monitors and tracks student contacts in MPAS-II clinical activities. The log reports on patient's age, gender, ethnicity; clinical site, diagnosis, and student encounter level. The system is not only beneficial to faculty in enhancing student educational activities, but provides students with multiple reports comparing rotations and profiling patient contact while a student for learning and employment purposes. In order to successfully pass clinical components, the log must be completed and submitted by the last day of the clinical assignment. Students will be assessed a fee for this system (approximately \$85 and is subject to change).

### **Late Policy**

Failure to turn in rotation assignments (CAT, case studies, etc.) on the due date stated in the rotation syllabus will result in a late penalty as specified in the Clinical Year Handbook and/or clinical syllabus for the rotation.

### **Criteria for Clinical Rotations**

The Clinical Coordinator and the Program Director approve all rotations.

**All aspects of the student's program performance will be considered with faculty decisions concerning rotations, including, but not limited to grades and professional and ethical conduct. All didactic courses must be successfully completed prior to rotations.**

The student must be ACLS-certified prior to going to clinical rotation sites, and have completed all necessary compliance training, health and security screenings. Many sites require proof of completion of training, e.g., HIPPA, ACLS, etc. and verification or completion of background checks, urine drug screens, immunization records, etc.

**The student must pass all rotations without problems and with a grade of "C" or better and maintain a "B" level (3.0) of performance while on rotations. Problems with clinical performance, professionalism, or ethical behaviors may, depending on their severity, result in dismissal. No more than 12 hours of "C" credit will be applied toward the degree of MPAS.**

### **SUMMARY OF ROTATION GUIDELINES**

These guidelines help insure proper practice activities for MPAS-II students, define expectations of MPAS-II students for supervised clinical practice and demeanor, and allow for a pragmatic approach to clinical education and training that provides an optimum opportunity for learning.

The points listed below are considered "major" points and are not inclusive or exclusive to requirements listed elsewhere. Long hours and hard work are not considered problems.

### Daily Schedule

- Students are expected to keep the same schedule as the primary clinical supervisor (MD/DO or PA or NP).
- The student schedule is determined by the clinical preceptor's (supervisor's) schedule.
- **Vacation for students is not allowed.** If a supervisor is away from the practice for more than one-half day, the student **must** contact the program's Clinical Coordinator immediately.
- If the student is found to be off-site when the student is expected to be onsite by the coordinator or other faculty, it may result in disciplinary action. The student may be given an incomplete or failing grade for not meeting the requirements of the rotation.

### Student Role

- Students **cannot** be utilized to replace clinicians or clerical staff at clinical assignments.

### Evaluation

- Students must seek feedback from their preceptor and be counseled on their performance.
- Students are responsible for and must obtain a mid-rotation evaluation from the preceptor and send a copy to the Clinical Coordinator.
- Evaluations should be honest and as accurate as possible. If an unsatisfactory grade is deserved, then it should be given with documentation.
- Students can be required to complete didactic exercises (case studies, case reports, research papers, written topic reports, literature searches, etc.) as part of supervised clinical practice rotations.

### Professionalism

- Students represent the LSUHSC-NO PA Program, the SAHP, and the physician assistant profession.
- Students are expected to conduct themselves in a professional manner at all times.
- Problems with demeanor and professionalism are as serious as poor clinical performance and should be brought to the attention of the Clinical Coordinator as soon as possible.
- If there are problems between students and clinical supervisors, they should be handled as quickly as possible and/or brought to the attention of the Clinical Coordinator as soon as possible.
- Students are responsible for checking LSUHSC-NO email messages and Moodle announcements **daily**.
- No assignments will be made for rotations that involve direct contact and evaluation by members of the respective student's family (by kinship, adoption, or marriage).
- **Students may not supply their own clinical sites or preceptors for program rotations.**

Emergencies, special requests, and special issues are considered on an individual basis. Decisions made by the appropriate rotation coordinators or Clinical Coordinator do not set a precedent for subsequent decisions.

### **ROTATION EVALUATIONS AND REMEDIAL ASSIGNMENTS**

Evaluation components are defined in each syllabus under that section and/or noted on the summary grade sheet. If the student is unclear about the evaluation or grading mechanisms, it is his/her responsibility to seek clarification from the coordinator. If the rotation is not successfully passed, the student may be subject to academic dismissal.

**Failure of the Clinical Rotation** A student will fail the rotation and will be subject to dismissal if: (1) the overall rotation average (grade) is less than 70, or (2) a pass/fail component is not successfully passed.

### **COURSE DESCRIPTIONS AND DEGREE PLANS**

Curriculum and course descriptions for students in the Physician Assistant Program are found on the Program website and in the LSUHSC-NO Academic Catalog/Bulletin.

### **LICENSURE AND CERTIFICATION**

#### **Certification**

To attain the PA-C designation, a candidate must be a graduate of an accredited PA training program **and** successfully pass the Physician Assistant National Certifying Exam (PANCE). PANCE is a multiple-choice test that assesses basic medical and surgical knowledge. For the most up-to-date information on certification and recertification and exam/application windows, check the web site (<http://www.nccpa.net/>).

There is a 7-day eligibility requirement after graduation before actual exam date.

#### **Louisiana Licensure**

Information regarding the specific requirements for licensure in the State of Louisiana can be found at:

<http://www.lsbme.la.gov/index-licensure.html>

### **TUITION AND FEES INFORMATION**

Information regarding the Tuition and Schedule for the PA Program are provided on the Program website and in the LSUHSC-NO Academic Catalog/Bulletin. **Tuition and fees are subject to change.**

## Acknowledgment of Receipt of Student Handbook

I have read the *Student Manual* of the LSUHSC-NO Master of Physician Assistant Studies Program AND the *School of Allied Health POLICY AND PROCEDURES RELATED TO STUDENT CONDUCT*, Louisiana State University Health Sciences Center and the Departmental Technical Standards. I understand and agree to abide by the regulations as stated.

CONSENT for laboratories: As a student in the Physician Assistant Program, I understand that I will be required to participate in laboratory activities on multiple occasions in order to complete course work. These activities will usually be performed by fellow students after demonstration by an instructor or may be performed on me as a subject by an instructor.

I also understand that, if I have any condition for which the activity would be contraindicated, e.g., chronic illness, injury, pregnancy, etc., I must inform the respective faculty member and not put myself or others at risk.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Students will not be considered officially enrolled until this sheet is signed and placed in their files**

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### OPTIONAL:

Due to the highly specialized nature of the profession, there are occasions when interested persons, e.g., clinical instructors, prospective employers, etc., need information (e.g., academic and clinical strengths and weaknesses) concerning students.

In order to expedite this process, I, \_\_\_\_\_ (name), give my consent to allow faculty of the Department to release either in writing or verbally, any information regarding my performance as a student.

Signature \_\_\_\_\_

Date \_\_\_\_\_

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### OPTIONAL: CONSENT FOR PHOTOGRAPHY, INTERVIEW, AND/OR

RECORDINGI, \_\_\_\_\_, hereby grant permission to LSU Health Sciences Center to photograph, video tape, record, or interview me for print or broadcast media use, for use in LSU Health Sciences Center publications, or for use in teaching by LSU Health Sciences Center faculty.

I hereby transfer to LSU Health Sciences Center all rights and claims I have, or in the future may acquire, with respect to such photographs, video recordings, audio recordings, and/or written materials, agreeing that same shall be the sole and absolute property of LSU Health Sciences Center. I hereby relieve and release LSU Health Sciences Center from any and all claims whatsoever, and for any and all kinds of remuneration for use of such materials.

Signature \_\_\_\_\_ Date \_\_\_\_\_

## HELPFUL CONTACT INFORMATION

Site	Location	Telephone	Website
<b>PA Program</b>	411 S. Prieur St, 2 <sup>nd</sup> Floor New Orleans, LA 70112	Phone: 504-556-3420 Fax 504-556-3421	<a href="http://alliedhealth.lsuhs.edu/pa/default.aspx">http://alliedhealth.lsuhs.edu/pa/default.aspx</a>
<b>Bookstore</b>	433 Bolivar Street New Orleans, LA 70112	Phone: 504-568-2504 Fax: 504-568-2121	<a href="http://www.lsuhs.edu/administration/ae/hsb.aspx">http://www.lsuhs.edu/administration/ae/hsb.aspx</a>
<b>Bulletin/Catalogue</b>			<a href="http://catalog.lsuhs.edu/">http://catalog.lsuhs.edu/</a>
<b>Associate Dean for Academic Affairs</b>	E. Dugan, Ph. D. 1900 Gravier Street, Rm. 6A20 New Orleans, LA 70112	Phone: 504-568-4246 Fax: 504-568-4249	<a href="http://alliedhealth.lsuhs.edu/Admin/AcademicAffairs.aspx">http://alliedhealth.lsuhs.edu/Admin/AcademicAffairs.aspx</a> E-mail: <a href="mailto:enmart3@lsuhs.edu">enmart3@lsuhs.edu</a>
<b>Office of Student Affairs</b>	Ms. Yudi Cazanans, Director, SAHP 1900 Gravier Street, Rm. 6B16 New Orleans, LA 70112	Phone: 504-568-4253 Fax: 504-568-3185	<a href="http://alliedhealth.lsuhs.edu/Admin/StudentAffairs.aspx">http://alliedhealth.lsuhs.edu/Admin/StudentAffairs.aspx</a>  Email: <a href="mailto:ydelga@lsuhs.edu">ydelga@lsuhs.edu</a> <a href="mailto:sahpsa@lsuhs.edu">sahpsa@lsuhs.edu</a>
<b>CAP</b>	Clinical Education Building 1542 Tulane Avenue, 8th Fl. Office 866 New Orleans, LA 70112	Phone: 504-568-8888	<a href="http://www.lsuhs.edu/orgs/campushealth/cap.aspx">http://www.lsuhs.edu/orgs/campushealth/cap.aspx</a>
<b>Student Housing</b>	1900 Perdido St New Orleans, LA 70112	Phone: 504-568-6260	<a href="http://www.lsuhs.edu/administration/ae/reshall.aspx">http://www.lsuhs.edu/administration/ae/reshall.aspx</a>
<b>Registrar</b>	Resource Center Bldg. Room, 1 <sup>st</sup> Floor 433 Bolivar Street New Orleans, LA 70112	Phone: 504-568-4829	<a href="http://www.lsuhs.edu/registrar/">http://www.lsuhs.edu/registrar/</a>
<b>Student Financial Aid</b>	Resource Center Bldg. Suite 215 433 Bolivar Street	Phone: 504-568-4820	<a href="http://www.lsuhs.edu/financialaid/">http://www.lsuhs.edu/financialaid/</a>

	New Orleans, LA 70112		
<b>Student Health</b>	7 <sup>th</sup> floor Lions Bldg. 2020 Gravier Street, New Orleans, LA 70112 Hours: 8:00 am to 4:30 pm (M-F)	Phone: 504- 525-4839 Fax: 866- 814-9706 <b>Student Health Clinics are located at:</b> 3700 St. Charles Ave. Phone: 504- 412-1366	<a href="http://www.lsuhs.edu/orgs/studenthealth/">http://www.lsuhs.edu/orgs/studenthealth/</a>
<b>Wellness Center</b>	450-A S. Claiborne Avenue New Orleans, LA 70112	Phone: 504- 568-3700	<a href="http://www.lsuhs.edu/administration/Wellness/">http://www.lsuhs.edu/administration/Wellness/</a>
<b>Parking</b>	Resource Center Building 433 Bolivar Street, Room 158 Hours: 8:00 am to 4:30 pm (M-F)	Phone: 504- 568-4884	<a href="https://www.lsuhs.edu/administration/ae/parking.aspx">https://www.lsuhs.edu/administration/ae/parking.aspx</a>
<b>Human Resources</b>	433 Bolivar Street, 6th Floor, New Orleans, LA 70112.		<a href="http://www.lsuhs.edu/administration/hrm/">http://www.lsuhs.edu/administration/hrm/</a>
<b>Library John P. Isché (Main) Library</b>	Resource Center Bldg. 433 Bolivar St. 3rd floor New Orleans, LA 70112	Phone: 504- 568-6100	<a href="http://www.lsuhs.edu/library/">http://www.lsuhs.edu/library/</a>
<b>PAY PAW</b>			<a href="http://www.lsuhs.edu/administration/ae/paypaw.aspx">http://www.lsuhs.edu/administration/ae/paypaw.aspx</a>
<b>IT Help</b>		New Orleans Campus Helpdesk: 504-568- HELP	IT Support group email <a href="mailto:ahnopcsupport@lsuhs.edu">ahnopcsupport@lsuhs.edu</a>
<b>NOPD</b>	1300 Perdido St, New Orleans, 70112	Phone 504- 658-4000	<a href="http://www.nola.gov/GOVERNMENT/NOPD">http://www.nola.gov/GOVERNMENT/NOPD</a>
<b>EMERGENCY</b>	University Police 425 S. Roman Street, Room 301	<b>EMERGENCY</b> <b>568-8999</b> Downtown Campus)	<a href="http://www.lsuhs.edu/alerts/">http://www.lsuhs.edu/alerts/</a> <a href="https://www.lsuhs.edu/administration/vcaca/emergency.aspx">https://www.lsuhs.edu/administration/vcaca/emerge ncy.aspx</a>

	New Orleans, LA 70112		Non-emergency (504) 568-8270
<b>Medical Emergency</b>		911	<b>After</b> being released by the 911 operator, call the University Police at <b>568-8999</b>
<b>Weather Emergency</b>			<a href="http://911.lsuhsu.edu/EAS/TextEmailFAQs.aspx">http://911.lsuhsu.edu/EAS/TextEmailFAQs.aspx</a>
<b>American Academy of Physician Assistants (AAPA)</b>	2318 Mill Road, Suite 1300 - Alexandria, VA 22314	Phone: 703- 836-2272 Fax:703- 684-1924	<a href="https://www.aapa.org/">https://www.aapa.org/</a>
<b>Louisiana Academy of Physician Assistants (LAPA)</b>	PMB 177 9655 Perkins Road, Suite C Baton Rouge, LA 70810	Phone: 888- 687-5272 (888-OUR- LAPA)	<a href="http://www.ourlapa.org/">http://www.ourlapa.org/</a>  Email: <a href="mailto:info@ourlapa.org">info@ourlapa.org</a> This e-mail address is being protected from spambots. You need JavaScript enabled to view it
<b>ARC-PA</b>	12000 Findley Road, Suite 150, Johns Creek, Georgia 30097	Phone: 770- 476-1224; Fax: 770- 476-1738	<a href="http://www.arc-pa.org/">http://www.arc-pa.org/</a>
<b>PAEA</b>	655 K Street NW Suite 700, Washington, DC 20001	Phone: 703- 548-5538 (main)	<a href="http://www2.paeaonline.org/index.php?ht=d/sp/i/102638">http://www2.paeaonline.org/index.php?ht=d/sp/i/102638</a>  Email: <a href="mailto:info@paeaonline.org">info@paeaonline.org</a>
<b>NCCPA</b>	12000 Findley Road Suite 100, Johns Creek, GA 30097-1409	Phone: 678- 417-8100 Fax: 678- 417-8135	<a href="http://www.nccpa.net/">http://www.nccpa.net/</a>
<b>LSBME</b>	630 Camp Street, New Orleans LA 70130	Phone: 504- 568-6820	<a href="http://www.lsbme.la.gov/">http://www.lsbme.la.gov/</a>