University of Colorado Anschutz Medical Campus

Child Health Associate/Physician Assistant Program

School of Medicine

Student Academic Policies and Procedures

Academic Year 2020-2021
Disclaimer for Student Academic Policies and Procedures Handbook

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

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

The most current version is found at:

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

Approved by the CHA/PA Promotions Committee on: April 1, 2020

Effective date of this document: June 1, 2020

General Information for Academic Policies

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

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

Policies for Physician Assistant Students

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

Director’s Welcome...............................................................................................................................................8

The Child Health Associate/Physician Assistant Program.................................................................9

SECTION 1: OVERVIEW OF THE PROGRAM......................................................................................................10

1.1 Mission Statement
1.2 Vision Statement
1.3 Goals
1.4 CHA/PA Graduate Competencies
1.5 CHA/PA website
1.6 Equal Opportunity and Non-Discrimination

SECTION 2: PROFESSIONALISM......................................................................................................................12

2.1 Becoming a Professional
2.2 Professional Behavior
2.3 Student Professional Development
2.4 Student Professionalism Concerns
  2.4a Social Media
2.5 Communication with the Program
  2.5a Modes of Communication
  2.5b Timely Communication
  2.5c Clinical Experience Communication
  2.5d Locating Students
2.6 Attendance
  2.6a Didactic
  2.6b Clinical
  2.6c 3rd Year Considerations
  2.6d Jury Duty
2.7 Clinical Experience Professional Requirements
  2.7a Preparation for Clinical Experiences
  2.7b Identification during Clinical Experiences
  2.7c Student Supervision
  2.7d Professional Dress Code Expectations
  2.7e Equipment
  2.7f Clinical Passport
2.8 Substance Abuse and Respect for the Rights and Property of Others
  2.8a Substance Abuse
  2.8b Respect for the Rights and Property of Others
2.9 Health Insurance Portability and Accountability Act (HIPAA)
2.10 Working While in the Program
2.11 Teacher-Learning Agreement
  2.11a Guiding Principles
  2.11b Relationships between Student and Teachers
2.11c Conflict of Interest between Faculty and Students
2.11d Teacher-Learner Agreement

SECTION 3: CURRICULUM

3.1 The Academic Calendar
3.2 CHA/PA Program Curriculum
3.3 CHA/PA Curriculum Committee
3.4 Course Schedules
  3.4a Request for a schedule change
  3.4b Scheduling of outside events
3.5 Clinical Experiences Schedule/Student-Preceptor Relationship
  3.5a Rotation Length/Dates
  3.5b 1st Year Clinical Experience Track Requirements
  3.5c 2nd Year Clinical Experience Track Requirements
  3.5d International Clinical Experiences
  3.5e Clinical Experience Requests
  3.5f Contract Request Forms
  3.5g 3rd Year Requirements and Electives for all students
  3.5h Rotation Cancellations
  3.5i Additional Clinical Rotation Experiences
3.6 Block, Thread and Non-Clinical Experience Course Directors
3.7 Testing Policies and Procedures
3.8 Grade Report Symbol Information
  3.8a Pass (P)
  3.8b Fail (F)
  3.8c In Progress (IP)
  3.8d Incomplete (I)
    3.8d(1) Block, Threads, and Non-Clinical Courses
    3.8d(2) Clinical Experience Courses
  3.8e Pass with Remediation
  3.8f Withdrawal (W)
  3.8g Grading Schema
3.9 Drop/Add Procedure
3.10 Online Course/Clinical Evaluations
  3.10a Didactic Course Evaluations
  3.10b Clinical Experience Evaluations – Student Evaluation of the Preceptor
3.11 Clinical Experience Requirements for a Passing Grade
  3.11a Patient Logging
  3.11b Assessment of Student Progression
  3.11c Student Evaluation of the Preceptor
  3.11d Other Requirements for 3rd Year Students – Individualized Learning Plan - Goals
3.12 First and Second Year Student Assessments
  3.12a First Year Formative Assessment
  3.12b Second Year Formative Assessment
3.13 Third Year Comprehensive Clinical and Written Assessment
   3.13a End-of-Program Written Exam
   3.13b End-of-Program Clinical Exam

SECTION 4: PROMOTION AND GRADUATION

4.1 The Student Promotions Committee
4.2 Student Performance
   4.2a Failure of a Course
   4.2b Academic Standing
4.3 Course Requirements, Electives and Tracks
4.4 Requirements for Annual Promotion
   4.4a First Year Requirements
   4.4b Second Year Requirements
   4.4c Third Year Requirements
4.5 Requirements for Program Graduation
4.6 Extended Curriculum
4.7 Academic Probation
4.8 Student Remediation
4.9 Student Dismissal
4.10 Requests for Leave of Absence (LOA)
   4.10a Official Non-Medical Leave of Absence
   4.10b Official Medical Leave of Absence
   4.10c Request to Return from an Official Non-Medical and Official Medical Leave of Absence
   4.10d Program Leave
4.11 Track Change Requests
4.12 Need for Special Accommodations
4.13 Requests for Withdrawal
4.14 Criminal Background Checks

SECTION 5: STUDENT HONOR AND CONDUCT CODE

5.1 Academic Honor and Conduct Code
5.2 Academic Honesty
5.3 Reporting Violations of the Honor Code
5.4 Guidelines for Implementing the CHA/PA Program Honor Code
   5.4a Membership of the CHA/PA Student Honor and Conduct Committee
   5.4b Procedures in Cases of Suspected Violation of the Student Honor and Conduct Code

SECTION 6: STUDENT RIGHTS

6.1 Rights for Appeals
   6.1a Appeal of Student Promotion Committee Decision
   6.1b Appeal of a Failing (F) Grade
6.2 Rights of Reapplication
6.3 Student Right to Review Academic File

SECTION 7: CLINICAL POLICIES

7.1 Immunization and Health Screening Requirements
   7.1a University of Colorado Influenza Vaccination Policy

7.2 TB Clearance

7.3 Exposure to Infectious Diseases, Body Fluid and Needle-Stick

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

7.5 TB Mask Fitting

7.6 Workers’ Compensation and Medical Malpractice Insurance
   7.6a Malpractice
   7.6b Workers’ Compensation
   7.6c Health Insurance

SECTION 8: OTHER POLICIES

8.1 University of Colorado Policy on Conflict of Interest between Health Care Professional Students and Industry Representatives

8.2 Site Visits

8.3 Additional Clinical Experience Costs
   8.3a Fingerprints

8.4 Participating in Community Service and Health Fairs

8.5 CHA/PA Program Convocation and University of Colorado Anschutz Medical Campus Commencement
   8.5a CHA/PA Program Graduation
   8.5b University of Colorado Anschutz Medical Campus Commencement
   8.5c Expenses Related to Graduation

8.6 Visitors and Guests
   8.6a Non-CHA/PA Students
   8.6b Friends and Family

8.7 Preparation for Certification

8.8 Preparation for Licensure
   8.8a Colorado Licensure
   8.8b Other State Licensure

8.9 CHA/PA Program Reference Request

8.10 CHA/PA Program Credentialing and Privileges Request

8.11 Student Privacy

8.12 Security Table for AMC and Clinical Sites

APPENDIX I: Technical Standards

APPENDIX II: UC/Anschutz Medical Campus Student Services/Student Advocacy

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

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

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

Jonathan Bowser, MS, PA-C
Program Director
The Child Health Associate/Physician Assistant Program

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

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

Physician Assistants have functioned as colleagues of physicians and other allied health professionals, providing comprehensive health services, including not only the evaluation and treatment of medical disease, but also patient education and counseling, anticipatory guidance and management of behavioral, psychosocial and developmental disorders. Program graduates are employed in all areas of primary and subspecialty areas of practice including pediatrics, family medicine, internal medicine, orthopedics, inpatient (hospitalist) medicine, surgery, emergency medicine, urgent care, otolaryngology, allergy and asthma, neurology, neonatology, child protection and advocacy, and many other areas.
SECTION 1: OVERVIEW OF THE PROGRAM

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

1.2 Vision Statement
The University of Colorado, School of Medicine Physician Assistant Program will be a leading educational program with a national reputation for excellence in innovative curriculum, research and scholarship, community engagement and clinical care.

1.3 Goals
Goal 1: Recruit qualified applicants who are prepared to be successful in a rigorous medical training program
Goal 2: Maintain a level of PANCE pass rates above the national average
Goal 3: Prepare graduates to practice in rural and underserved areas
Goal 4: Maintain a student attrition rate that is below the national average
Goal 5: Prepare graduates to practice in primary care settings

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

1.4 CHA/PA Program Graduate Competencies

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

Patient Care
Provide patient-centered care that is compassionate, appropriate, and effective for the treatment of health problems (core clinical presentations) and the promotion of health.

Medical Knowledge or “Knowledge for Practice”
Demonstrate knowledge of established and evolving biomedical, clinical, epidemiological and social-behavioral sciences, as well as the application of this knowledge to patient care.

1 Adopted from ARC-PA, NCCPA, PAEA; AAPA, AAMC Core Competencies, University of Colorado School of Medicine and Englander et al.
Practice-Based Learning & Improvement
Demonstrate the ability to investigate and evaluate one’s care of patients, to appraise and assimilate scientific evidence, and to improve patient care based on continuous self-evaluation and life-long learning.

Interpersonal & Communication Skills
Demonstrate interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families, and health professionals.

Professionalism
Demonstrate a commitment to carrying out professional responsibilities and an adherence to ethical principles.

Systems-Based Practice
Demonstrate an awareness of, and responsiveness to, the larger context and system of health care, as well as the ability to call effectively on other resources in the system to provide optimal health care.

Interprofessional Collaboration
Demonstrate the ability to engage in an interprofessional team in a manner that optimizes safe, effective patient and population centered care.

Personal & Professional Sustainability
Demonstrate the qualities required to sustain lifelong personal and professional balance.

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

1.6 Equal Opportunity and Non-Discrimination
(Adapted from the CUSOM Policies and Procedures)

The University of Colorado CHA/PA Program and the School of Medicine is committed to equal opportunity, including opportunity for individuals with disabilities. The CHA/PA Program does not discriminate on the basis of, race, color, national origin, sex, age, disability, creed, religion, sexual orientation, gender identity, gender expression, veteran status, political affiliation or political philosophy in admission and access to treatment and employment in its educational programs and activities. To learn more about CU’s Diversity and Inclusion department and programs: http://www.ucdenver.edu/about/departments/odi/diversymatters/Pages/default.aspx
SECTION 2: PROFESSIONALISM

2.1 Becoming a Professional
By entering the CHA/PA Program, students have made a conscience decision to become a professional. Professionals are highly educated individuals who practice within an ethical framework – as outlined by an oath or promise. The main components of professional behavior include honesty/integrity, reliability/responsibility, respect for others, compassion/empathy, self-improvement, self-awareness/knowledge of one’s limits, communication/collaboration skills, and altruism/advocacy. Students within the CHA/PA Program have the opportunity to represent the program in a professional manner in many settings - within the classroom, within the University, or within the community – each offering ways in which to demonstrate the skills of a professional. The Code of Ethics of the Physician Assistant Profession illustrates more clearly the standards to which students will be held (see Appendix IX for more information).

2.2 Professional Behavior
CHA/PA Students are held to a high standard of professional and ethical conduct through all years of the Physician Assistant Program. Professional behavior includes, but is not limited to:

- Patient Care – hold primary responsibility for the health, safety, welfare, and dignity of all humans; assume responsibility for all professional duties; maintain patient confidentiality.
- Timeliness – punctuality for class and clinic; timely submission of assignments, evaluations, patient documentation and other required paperwork.
- Participation – appropriate, constructive, non-derogatory participation in the classroom and clinic. (examples of appropriate participation may be found in course syllabi)
- Appearance – appropriate attire, hygiene and presentation. (examples of appropriate appearance may be found in individual course syllabi and the Clinical Handbook)
- Behavior – appropriate conduct, attentiveness, non-disruptive, preparation for class and clinic, courtesy, flexibility, and collaboration, support of one’s classmates.
- Respect – regard for patients, faculty, staff, colleagues, students, members of the health care team and others.
- Constructive Evaluation – seeking and accepting feedback in a mature manner to change behaviors, providing constructive feedback.
- Personal Accountability – accepts responsibility for actions and behaviors; demonstrates dependability; and acknowledging limitations.
- Self-reflection – willingness to examine one’s own strengths, weaknesses and biases.
- Professional behavior will be evaluated on a regular basis by the Student Promotions Committee, through review of clinical evaluations, and may be considered when course directors assign grades.
- Individual course directors have rules of classroom behavior specific to his/her course. Students are required to adhere to the standards set forth in each course syllabus.
2.3 Student Professional Development: Academic Warnings and PDEs

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

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

As future health professionals, students should adhere to the highest standards of professionalism. Examples of unprofessional conduct include, but are not limited to the following:

- Misrepresentation of effort, credentials or achievement in the academic or clinical setting
- Any action that compromises the quality of patient care
- Violation of patient confidentiality
- Any conduct, both on and off campus, that interferes with the student’s ability to perform his/her professional duties or reflects poorly on the profession
- Disruptive or disorderly conduct in a classroom or clinical setting
- Other conduct that falls below that which befits a health professional

When a student receives an academic warning in the form of a corrective PDE, the Student Promotions Committee reviews that student’s entire academic record in detail and may further impose probation and remedial action (refer to sections “Student Probation” and “Student Remediation”). At the conclusion of the semester for which the academic warning in the form of a corrective PDE was given, the Student Promotions Committee will again review the student’s entire academic record in detail and decide on one of the following:

- If the professionalism concern was corrected with no further breaches, the academic warning in the form of a corrective PDE will be removed from the student’s file and will not be noted on future evaluations, letters of notification, or credentialing and privileges materials.
- If the professionalism concern was not corrected or further professionalism breaches occur during the semester, the Student Promotions Committee may impose probation and remedial action. Probation and remedial action will be noted and remain in the student file and may be referenced as part of the credentialing and privileges processes as well as Program reference letters.

2.4 Student Professionalism Concerns

Professional conduct lapses includes incidents that affect not only one’s ability to practice, but also the reputation of the CHA/PA Program and the image of its students. Student concerns related to professionalism will be brought forward to the Student Promotions Committee (See Section 4.1).
2.4a Social Media
Students are prohibited from posting any patient information to social media platforms without the written consent of the patient or patient’s guardian. This written consent must be readily available for review by University entities.

Students are prohibited from taking photographs of patients including photographs of a patient’s body area except in the following circumstances:

- Written consent has been obtained from the patient or patient’s guardian and is readily available for review.
- The photographs are being taken from the student’s cell phone with the patient’s consent and knowledge for the purpose of medical management. Furthermore, the patient is being photographed with a HIPAA-compliant electronic health record phone application.

Any breaches in patient confidentiality through the posting or sharing of photographs or patient information will be brought forth to the University of Colorado HIPAA-Compliance Office, Risk Management, Legal Counsel, School of Medicine, and the site for which the breach occurred. Breaches may result in immediate dismissal from the Program.

Students are expected to know how to protect their own privacy, those of their classmates, faculty, staff, and other colleagues and limit how, when, where and with whom information is shared (adapted from Eastern Michigan University PA Program Social Media Policy).

2.5 Student Communication with the Program

2.5a Modes of Communication
University email is the first line of communication with the Program. Email is checked during business hours. The student is required to check his/her University email daily.

The Clinical Team email address should be used for all clinical experience communication. The Clinical Team email address is Clinical-Team@cuanschutz.edu.

Individual faculty and staff voicemail is checked during the work day.

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

- Username: University\username
- Password: Student University password
2.5b  **Timely Communication**

For students who experience serious issues while on rotation, outside of normal office hours, please contact the emergency number 303.346.6966 (Joyce Nieman’s cell phone). Of note, please send a text message identifying yourself before placing the call. Examples of serious situations include: abusive treatment, injury on rotation, fear for personal safety, etc.

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

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

2.5c  **Clinical Experience Communication**

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

2.5d  **Locating Students**

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

- The University of Colorado Anschutz Medical Campus Office of the Registrar and CU-SIS system
  - Phone: 303.724.8059 Fax 303.724.8060
  - Email: student.services@ucdenver.edu

- The CHA/PA office
  - Phone: 303.724.7963x3 Fax: 303.724.1350

**When to contact these offices:**

- In the event of a permanent change to phone number or home address
- In the event of a temporary change to phone number and/or temporary place of domicile
- In the event of a change of name

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

2.6 Attendance

2.6a Didactic

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

In the case of absence, students are expected to contact the Program (or Program faculty) promptly. Determination of excused absence will be left to the discretion of individual course directors. Valid reasons for requesting an excused absence include, but are not limited to:

- personal illness
- family emergency
- religious observations (refer to Appendix VII – “Observance of Religious Holidays”).

If a student is absent from class, the student will need to obtain notes from their classmates and/or Canvas. Recording of lectures or online conferencing during didactic sessions will not be permitted.

Those absences that are not pre-approved by individual course directors may be considered unexcused. Refer to the course syllabi for course requirements.

Definition of Didactic Absences:
An Excused Absence is an absence for which permission has been granted by the Course Director or Student Promotions Committee. Examples of Excused Absences include:

- Involuntary Absences: An absence for serious illness, jury duty and academic needs specified by the CHA/PA program (i.e., remediation). If a student has an illness or other emergency, they must contact the Course Director as soon as possible or prior to missing any time.

- Administrative Absence: An absence granted by the Student Promotions Committee for an administrative need such as involvement as a Student Officer or Teaching Fellow in the Physician Assistant Education Association (PAEA) or the American Academy of Physician Assistants (AAPA).

An Unexcused Absence is an absence for which permission has not been granted by the Course Director or the Student Promotions Committee. Unexcused absences may be brought to the attention of the Student Promotions Committee and may result in an academic warning in the form of a Professional Development Evaluation (PDE) or may result in a lower grade.

2.6b Clinical
Students are required to attend clinic at scheduled times and work the hours set forth by the preceptor.

- **1st Year and Second Year** – approximately 8 hours/day
- **3rd Year students** – approximately 8 hours/day
  - If a 3rd Year student is in a clinical experience that does not meet ≥32 hours per week of direct patient care, the student must notify the Clinical Team immediately.

The student’s clinic schedule can be found in Typhon.

Requests for changes in clinical placements (including the days of the week) will not be approved, unless the preceptor is requesting the change. Approval of changes in a clinical placement is at the sole discretion of the Clinical Course Director and may not be appealed. All requests for absences and change of clinical days (all Years) must be submitted to the Clinical Course Director prior to discussing this with the preceptor(s) (see below).

- Exceptions to this rule are acute illnesses or emergency situations for which the preceptor should be contacted first followed by the Clinical Course Director.
- Requests for changes in clinical schedules due to religious observations must be arranged in advance with the Clinical Team (see Appendix VII – “Observance of Religious Holidays”).

**Definition of Clinical Absences:**

An **Excused Absence** is an absence for which permission has been granted by the Clinical Course Director and the Preceptor. Excused absences are considered to occur in voluntary and involuntary situations as defined below:

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

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

An **Unexpected Preceptor Absence** is an absence necessitated by an unexpected change in the preceptor’s schedule or due to preceptor illness/leave. Students will not be responsible for
making up a missed day due to an unexpected preceptor absence and the absence will be considered if the Clinical Team is notified within 24 hours of the cancellation.

It is the student’s responsibility to notify the Clinical Team of any absences (voluntary, involuntary, or preceptor-driven). Failure to do so may result in an academic warning in the form of a PDE or failure of the rotation.

Plan for Excused Absences Approved by the Clinical Course Director:

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

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

2.6c 3rd Year Considerations

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

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

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

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

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

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

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

- **Job Interviews**: Scheduling a job interview during another clinical experience may be approved by the Clinical Course Director, if requested per the excused absence policy, and at the Clinical Course Director’s discretion (based on the student’s absence requests, pattern of absences and rotation/clinical site at the time of the request)

### 2.6d Jury Duty

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

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

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

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

### 2.7 Clinical Experience Professional Requirements

#### 2.7a Preparation for Clinical Experiences

Students must study for clinical experiences. The student should make a commitment to read about patient encounters and ask for learning opportunities.
2.7b Identification during Clinical Experiences

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

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

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

2.7c Student Supervision

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

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

2.7d Professional Dress Code Expectations:

On clinical experiences, students are expected to adhere to the following dress code expectations:

- Wear the blue CU PA student name tag at all times *(ARC-PA Standard B3.01)*
- Business Casual Attire:
  - **Men**:
    - Dress slacks (khaki, gabardine, wool or cotton pants, neatly pressed)
    - Sweater or collared, long-sleeve, button-down shirt (pressed) with or without a tie (if in doubt, dress formal until you have an idea of how others dress in the office)
    - Dark Socks
    - Dress Shoes
    - Belt
  - **Women**:
    - Knee-length or longer skirt or dress
    - Slacks (khaki, corduroy, twill or cotton)
    - Blouse, sweater/cardigan, twinset
    - Jacket (optional)
- Hosiery (optional)
- Closed toe shoes (no sandals or peep-toe shoes)
- White coats and scrubs may be required by the setting/site/preceptor
- Unacceptable attire includes:
  - Polo shirts, T-shirts, tank tops
  - Jeans or shorts
  - Athletic wear
  - Flip-flops, open-toed shoes
  - Un-kept articles of clothing
- All tattoos must be covered
- Piercings/body jewelry should be minimal and unobtrusive
  - Some sites will ask you to remove your jewelry
- No artificial nails
  - Some sites do not allow for colored nail polish
- Hair must be neatly groomed
  - Some sites do not allow for non-natural hair colors

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

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

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

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

2.8a **Substance Abuse**
Substance abuse compromises the student’s ability to learn and to practice as a health provider. Intoxication or being under the influence of legal or illegal drugs and/or alcohol in a clinical or classroom setting will not be tolerated. Students who have a problem with alcohol and/or other substances should seek assistance from services available on campus or through the Colorado Physician Health Program (CPHP) (refer to Appendix II). In the event these behaviors affect academic performance, interprofessional relationships, patient care or clinical practice, the Student Promotions Committee may mandate evaluation by CPHP.
2.8b  Respect for the Rights and Property of Others
Students should conduct themselves in a manner that recognizes the rights and property of others. Examples of inappropriate behavior include, but are not limited to the following:

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

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

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

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

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

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

Students must not be required to work for the Program (A3.04)
Student must not substitute for or function as an instructor or faculty for the Program (A3.05)
Students must not substitute for or function as clinical or administrative staff (A3.05b)
2.11 Teacher-Learner Agreement (Adapted from the CUSOM Policies and Procedures)
The University of Colorado CHA/PA Program holds in high regard professional behaviors and attitudes, including altruism, integrity, respect for others and a commitment to excellence. All members of the CHA/PA program and medical school community, including students, faculty, residents, fellows, staff, and administrators are held to high standards in these areas. Effective learning is best fostered in an environment of mutual respect between teachers and learners. In the context of medical education, the term “teacher” is used broadly to include peers, resident physicians, full-time and volunteer faculty members, clinical preceptors, nurses and ancillary support staff, as well as others from whom students learn. Students and teachers share the challenge of learning and teaching not only the art and science of medicine, but also the acquisition of behaviors and values that characterize the ideal physician.

This Agreement serves both as a pledge and a reminder to teachers and students that their conduct in fulfilling their mutual obligations is the medium through which the profession perpetuates its ethical values. Failure to uphold the principles of the teacher learner agreement may result in referral to the Office of Professional Education (Faculty) or Student Promotions Committee (Students).

2.11a Guiding Principles

Duty: Medical educators have a duty not only to convey the knowledge and skills required for delivering the profession’s standard of care but also to model the values and attitudes required for preserving the medical profession’s social contract with its patients.

Integrity: Learning environments that are conducive to conveying professional values must be based on integrity. Students learn professionalism by observing and emulating role models who epitomize authentic professional values, attitudes and, especially, behaviors.

Respect: Respect for every individual is fundamental to the ethic of medicine. Mutual respect between students, as novice members of the profession, and their teachers, as experienced and esteemed professionals, is essential for nurturing that ethic. Given the inherently hierarchical nature of the teacher-learner relationship, teachers have a special obligation to ensure that students are always treated respectfully.

2.11b Relationships between Students and Teachers

Students and teachers should recognize the special nature of the teacher-learner relationship, which is, in part, defined by professional role modeling, mentorship and supervision. There is a power differential, as expressed by the fact that teachers often evaluate student performance and the results of their evaluations may affect the student’s future. Conversely, students evaluate the quality of their teachers and this can, to a lesser degree, affect the teacher’s career.

Because of the special nature of this relationship, students and teachers should strive to develop a relationship that is characterized by mutual trust, acceptance and confidence. They both have an obligation to respect and maintain appropriate boundaries. Students and teachers must avoid any and all behaviors that conceivably could lead to the perception of a boundaries violation; avoiding boundary violations is crucial to a proper teacher-student relationship. There are similar boundaries between students and patients that exist because of the nature of this special and trusting relationship. Boundary violations or actions that may give the appearance of a boundary violation should routinely be avoided. A partial list includes:
• Romantic involvements;
• Business relationships, other than those that might emerge from joint educational projects;
• Faculty or students accepting services or personal favors from each other (e.g., babysitting, house sitting, pet care, work in the office);
• Accepting substantial gifts;
• Special treatment of a student, including gifts, meals, entertainment, or social contacts, that differs substantially from the usual teacher-learner relationship with other students.

2.11c Conflict of Interest between Faculty and Students
Health providers who provide health services, including psychiatric/psychological counseling, to a CHA/PA student or their primary family members will not be involved in the academic assessment or promotion of the CHA/PA student receiving those services. When students or their primary family members choose their health care providers from physicians who are on the faculty, they have the potential to be in a conflict-of-interest situation, where their provider is also evaluating their academic or clinical performance. Faculty members are not allowed to complete an evaluation for any students for whom they provide or have provided medical care including their primary family members. Conflicts arise between a faculty's role as the student's physician and their role as an evaluator of the student's performance. Faculty must notify students as soon as they recognize the conflict. Students likewise must notify a faculty member if they are assigned to a preceptor for assessment who is providing or has provided medical care for them or their primary family members in the past. The student must also notify the Clinical Coordinator who will find an alternative clinical site or provide an alternative preceptor for evaluation.
2.11d Teacher-Learner Agreement

**Teachers Must:**
- Maintain high professional standards in all interactions with patients, students, colleagues and staff;
- Provide relevant and timely information;
- Provide explicit learning and behavioral expectations early in a course;
- Provide timely, focused, accurate and constructive feedback on a regular basis;
- Practice insightful (Socratic) questioning, which stimulates learning and self-discovery and avoid overly aggressive questioning which may be perceived as hurtful, humiliating, degrading or punitive;
- Be familiar with the Student Honor Council process and the Student Professionalism Committee process and the role that faculty and students play in each;
- Provide thoughtful and timely evaluations at the end of a course;
- Disclose to students, during lectures, seminars and mentored research activities, the existence of any financial ties or conflicts-of-interest that are related to the material being taught;
- Be familiar with the responsibilities of the Teacher-Learner Agreement and utilize appropriate mechanisms to encourage students who experience mistreatment or who witness unprofessional behavior to report the facts immediately and to treat all such reports as confidential.

**Integrity**
- Display honesty, integrity and compassion;
- Solicit feedback from students regarding their perception of their educational experiences and personal interactions;

**Respect**
- Treat students fairly, respectfully and without bias related to age, race, ethnicity, gender, sexual orientation, religion, spiritual or political beliefs, disability or country of origin, federal and state protected classes;
- Be prepared and on time;
- In all educational, research and clinical care settings, welcome and respect patients and others who lower socioeconomic backgrounds, disadvantaged, uninsured or non-English speaking;
- Recognize and respect patients’ rights to privacy

**Students Must:**
- Be active, enthusiastic, curious learners who work to enhance a positive learning environment;
- Demonstrate professional behavior in all settings;
- Recognize that not all learning stems from formal and structured activities;
- Recognize their responsibility to develop personal learning goals and to participate as active learners;
- Demonstrate a commitment to life-long learning, a practice that is essential to the profession of medicine;
- Recognize the privileges and responsibilities that derive from the opportunity to work with patients in clinical settings;
- Recognize the duty to place patient welfare above their own;
- Recognize and respect patients’ rights to privacy;
- Provide teachers and the CHA/PA Program with constructive feedback that can be used to improve the educational experience;
- Be familiar with the responsibilities of the Teacher-Learner Agreement and utilize appropriate mechanisms to report exemplary professionalism and professionalism lapses.

**Integrity**
- Recognize personal limitations and seek help whenever it is needed;
- Display honesty, integrity and compassion; these attributes include the responsibility for upholding the CHA/PA Honor Council Principles;
- Solicit feedback on their performance and recognize that criticism is not synonymous with “abuse”;

**Respect**
- Treat teachers and fellow students fairly, respectfully and without bias related to age, race, ethnicity, gender, sexual orientation, religion, spiritual or political beliefs, disability or country of origin; federal and state protected classes;
- Be prepared and on time;
- In all educational, research and clinical care settings, welcome and respect patients and others who lower socioeconomic backgrounds, disadvantaged, uninsured or non-English speaking;
- Recognize and respect patients’ rights to privacy
3.1 The Academic Calendar
The first, second, and third year academic calendars are found on the University of Colorado Anschutz Medical Campus Office of the Registrar webpage:
http://www.ucdenver.edu/anschutz/studentresources/Registrar/CourseListings/Pages/AcademicCalendar.aspx

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

The program curriculum on the website at medschool.ucdenver.edu/paprogram is the best source for updated curriculum information.
3.3 CHA/PA Curriculum Committee
The CHA/PA Curriculum Committee is composed of the CHA/PA Core Faculty and provides general oversight and evaluation of the curriculum. All new courses and changes to existing courses must meet the approval of this committee.

3.4 Course Schedules
Required classes and events for students may be scheduled by the CHA/PA Program between the hours of 8 AM and 5 PM Monday – Friday. Those times in which no course is scheduled are labeled as “Reflection/Study”.

3.4a Request for a schedule change
Due to the integrated nature of the curriculum, schedule changes will only be accommodated in extenuating circumstances. For students to request a schedule change to classes, exams, finals or other course-related activities, the following procedure must occur:

- The Class Representative will request a class schedule change directly with the Block Director and Academic Coordinator.
  - The request for a change must be unanimously agreed upon by the class prior to contacting the Block Director and Academic Coordinator.
  - The final decision will be provided to the Class Representative by the Academic Coordinator.

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

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

Definition of the Preceptor-Student Relationship
The preceptor is an integral part of the teaching program. Preceptors will serve as role models for the student and, through guidance and teaching will help students’ perfect skills in history taking, physical examination, effective communication, physical diagnosis, succinct recording and reporting, problem assessment, and plan development including a logical approach to further studies and therapy.
The preceptor should maintain a professional relationship with the PA student and at all times adhere to appropriate professional boundaries. Social activities and personal relationships outside of the professional learning environment should be appropriate and carefully selected so as not to put the student or preceptor in a compromising situation. Contact through web-based social networking sites (e.g., Facebook, Twitter) should be avoided until the student fully matriculates through the educational program. If the preceptor and student have an existing personal relationship prior to the start of the rotation, a professional relationship must be maintained at all times in the clinical setting.

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

### 3.5a Rotation Length/Dates

- **First Year**
  One didactic preparatory clinical experience in the fall and one (1) clinical experience in a healthcare setting in the spring. Clinical experiences within the healthcare setting occur on Tuesdays only and are six (6) weeks in length (Session 1 or Session 2). The other weeks of the semester will be utilized for other program activities.

- **Second Year**
  Two clinical experiences in the summer semester, one (1) clinical experience in the fall semester and one (1) clinical experience in the spring semester. Clinical experience during the summer occurs daily for a 2-week duration. Clinical experiences during the fall and spring semesters occur on Tuesdays only and are six (6) weeks in length (Session 1 or Session 2). The other weeks of the semester will be utilized for other program activities.

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

### 3.5b 1st Year Clinical Experience Track Requirements
For those students involved in the Pediatric Critical and Acute Care Longitudinal Experience, placement at Children’s Hospital Colorado will occur in the spring semester of the 1st Year.

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

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

- **Class of 2021 and 2022 ONLY** - For those students involved in the Urban Underserved Track (UUT), students will be preferentially placed in available urban underserved settings for their clinical experiences.

- For those students involved in the **Global Health Track**, the student may work with the School of Medicine Global Health Track coordinator and the CHA/PA Global Health Track Course Director to schedule an optional Global Health Track clinical experience or Global Health Track Elective Experience during the summer semester. This will take the place of one (1) required clinical experience in the summer semester.

- For those students involved in the **Rural Track**, a required rural immersion week occurs during the summer semester through the Rural Track. This is not a clinical experience but rather a Rural Track experience. Students will still be placed in two (2) clinical experiences in the summer semester.

- For those students involved in the **Pediatric Critical and Acute Care Longitudinal Experience**, the student will be scheduled in their Pediatric Critical and Acute Care experience at Children’s Hospital Colorado in the fall semester.

- **Class of 2021 ONLY** - For those students involved in the **LEADs Track**, the student will participate in a didactic project during the summer of the 2nd year. This is not a clinical experience but rather a LEADs Track Experience. Students will still be placed in two (2) clinical experiences in the summer semester.

- For those students who elect to and have been approved to have a clinical experience in **Guatemala**, the students will work with International Course Director and the Clinical Team to schedule this experience in the summer of the 2nd year.

### 3.5d International Clinical Experiences

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

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

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

The policy on Immunizations for International Travel can be found in Appendix V.

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

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

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

- **Out-of-State (Required or Elective)**
  The student should only contact sites/preceptors where a personal relationship has previously been established. Students should not “cold-call” sites/preceptors or contact other PA Programs requesting clinical experiences.

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

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

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

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

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

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

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

3.5g 3rd Year Requirements and Electives for All Students

- **Rural and Underserved Rotation Requirement**
  Each student is required to have one clinical experience occur in a rural setting and one clinical experience occur in an underserved setting regardless of the Track they are enrolled in.

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

When rural and underserved experiences are scheduled, they may be combined with other requirements (i.e., one month could be in a rural family medicine practice fulfilling both the rural and family medicine requirements, and another may be scheduled in an underserved pediatric practice, fulfilling the pediatric and underserved requirements). However, the rural and underserved program requirements cannot be combined during one clinical experience. A clinical experience cannot meet more than 2 requirements (e.g., IHS site that is rural, family medicine and underserved would only count for 2 requirements, not 3). The determination of what the site will fulfill for requirements will be discussed with the Clinical Coordinator.

• **Professional Development Month** Each student will request a mandatory one-month professional development month during the 3rd Year. Every effort will be made to accommodate professional development month requests; however no more than 15 students may be on professional development in a given month. The professional development month date range will be the 1st of the month to the last day of the month.

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

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

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

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

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

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

3.6 Block, Thread and Non-Clinical Experience Course Directors
Course leadership is shared between all course directors (block, thread and non-clinical experience course directors). These course directors work with the CHA/PA Curriculum Committee to design the specific content and presentation of the course materials. The Course Directors are expected to provide students with the overall objectives for the course. In addition, information regarding requirements of enrolled students and grading policies are presented at the onset of the course within the course syllabus. The Course Director has overall responsibility and authority of the content of his/her course. The Course Director reserves the right to lower a student’s grade based upon individual professional behavior.

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

3.7 Testing Policies and Procedures
The following are general procedures used for ALL examinations:

- Scheduled test times will be adhered to
- Exams will start and end as scheduled
- Students are expected to take exams as scheduled
  - Exceptions may be made in the case of an emergency or an approved Administrative Absence. The student must communicate with the course director immediately. At the discretion of the course director and based on the student’s case, the student may be granted the ability to take a paper quiz, in a proctored setting, for completion of that requirement and awarding of a grade.
- The following is the exam schedule during student’s enrollment in the CHA/PA Program:
  - **1st and 2nd Year:**
    - **Monday Quizzes:** Occur each week for Block courses
    - **End-of-Week Exams:** Occur every Friday of the Block course, with the exception of the last Friday of the block (End-of-Block Exam)
    - **End-of-Block Exam:** Occurs the final Friday of the Block course
    - **Anatomy Practicum:** Based on individual Block requirements. If part of the Block course assessments, this will occur the final Friday of the Block course
• **End of Semester Clinical Exam**: Occurs every fall and spring semester during Finals Week at the Center for Advancing Professional Excellence (CAPE) (refer to Section 3.12 – 1st and 2nd Year Assessments).
  - Further information regarding the logistics of these exams will be provided by the CHA/PA CAPE Liaison and/or a CAPE Representative.
• **PACKRAT**: Completed in the Spring of the 2nd Year (refer to Section 3.12 – 2nd Year Assessments)

○ **3rd Year**:
  - **End-of-Program Written Exam**: Occurs in the Spring of the third year (within four months of Program completion) (refer to Section 3.13a).
  - **End-of-Program Clinical Exam**: Occurs in Spring of the third year (within four months of Program completion) (Refer to Section 3.13b).

The following are general procedures pertinent to **Written** didactic examinations:

- All online assessments for the CHA/PA program occur through a software program called Examplify.
- Examplify requires the use of a laptop that must have parameters that were provided to students upon acceptance into CHA/PA.
- Assessments will be administered on Mondays and Fridays through Examplify.
- Assessments will have a deadline for downloading the exam one-hour prior to the start of quiz or exam.
- A confirmation email will be sent to the student if they have successfully downloaded the quiz or exam. The student can also check Examplify itself to confirm the downloaded.
- Students who do not download assessments for Monday Quizzes and Friday End-of-Week Exams will not be allowed to take the exams and will receive a zero grade.
- Students who do not download the assessment for End-of-Block Final Exam will be allowed to download the exam upon arriving to class but, will receive a 10% reduction in the exam grade.
- If the student is having any technical problems with their account or with downloading a quiz or exam, they should contact Examplify support directly at 866.429.8889; or support@examsoft.com 24hrs/7days per week.
- For all exams, the CHA/PA Program attempts to follow NCCPA procedures for exam taking. Please following the procedures below:
  - All cell phones and watches must be silenced and placed in a backpack
  - Backpacks may be left on the floor at the back, front or sides of the room
  - No food on desk
  - A water bottle is permitted
  - Absolutely no talking (including whispering) during exams
  - Dry erase boards and pens will be provided for all exams and must be returned before leaving the classroom
  - The exam proctors will not be able to answer questions on exam content during the exam
  - If necessary, bathroom breaks may be taken. The exam must be left open and the laptop left with the proctor at the front of the room until your return.
  - Laptop screens must be placed down when completed and not re-opened until after the exam has finished
Once the student has completed the exam, if they leave the classroom, they may not re-enter until the exam is complete.

- No phone use or note-taking is permitted during exam review
- The Honor Code is in effect with all exams.

- Grading and the structure of written examinations can be found in the course syllabi.
- Further information on the End-of-Program Written Examination can be found in Section 3.13a.

The following are general procedures pertinent to Clinical examinations:

- Clinical Exams will occur at the Center for Advancing Professional Excellence (CAPE).
- Scheduled exam times will be adhered and cannot be changed without the approval of the CAPE Liaison.
- Should a clinical exam need to be rescheduled for extenuating circumstances as described above, the student may be responsible for additional costs incurred due to the rescheduling.
- Clinical exam formative feedback will be provided to the 1st and 2nd Year students after faculty review, which may occur 4-weeks after clinical exam completion. The feedback provided to the student may include:
  - Standardized Patient (SP) comments
  - Checklists
  - Videos
  - Overall score sheets

- Further information on the End-of-Program Clinical Examination can be found in Section 3.13b.

3.8 Grade Report Symbol Information
This curriculum uses a pass/fail grading system to assess student performance. The following grades are possible in the curriculum – Pass (P), Fail (F), In Progress (IP), Incomplete (I), Pass with Remediation (PR) and Withdrawal (W).

3.8a Pass (P)
A grade of Pass (P) is given to a student whose performance meets the minimum requirements established by the Block, Thread, or Course Director.

3.8b Fail (F)
A grade of Fail (F) is given when a student’s performance is clearly below the passing standards of the Block, Thread, or Course. The Fail (F) grade is a permanent part of the university transcript. A physician assistant student with a failing (F) grade is required to register for the failed course and achieve a grade of “Pass”. If this is achieved, a Pass with Remediation (PR) will be noted on the remediated course on the transcript. The highest grade available after remediation is “Pass with Remediation” (PR). Any failing grade will be brought to the Student Promotions Committee for review.

For further information on failing grades, refer to Section 4.2a “Student Performance – Failure of a Course”
3.8c  In Progress (IP)
A temporary grade of In Progress (IP) is given when a student is unable to complete the requirements for a Block, Thread, or Course because of illness or other extenuating circumstances AND is considered to be passing by the Block, Thread or Course Director at the time the grade is given.

Once the student completes course requirements, the Block, Thread, or Course Director will submit a grade change to the Registrar’s Office indicating the final course grade. In this instance, a pass (P) or fail (F) grade will replace the In Progress (IP) as the official course grade. The official transcript will denote the final grade.

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

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

3.8d  Incomplete (I)
A temporary grade of Incomplete (I) is given when a student has not successfully completed all of the Block, Thread, or Course requirements at the end of the Block, Thread, or Course AND requires successful completion of all required components in order to meet the minimum requirements of the Block, Thread, or Course.

3.8d(1)  Blocks, Threads and Non-Clinical Courses:
Remediation of an Incomplete (I) will entail the successful completion of the required components. Once the student completes one retake attempt of the required Block or Thread components, the Block or Thread Director will submit a grade change to the Registrar’s Office indicating the final course grade. If the student successfully completes the required components, the grade of Pass with Remediation (PR) will replace the Incomplete (I) as the official course grade. If the student does not successfully complete the required components on the first retake attempt, the grade of Fail (F) will replace the Incomplete (I) as the official course grade. The official transcript will denote the final grade.

3.8d(2)  Clinical Experiences Courses:
Remediation of an Incomplete (I) will entail the successful completion of the required components. Once the student completes the required Clinical Experiences Course components, the Course Director will submit a grade change to the Registrar’s Office indicating the final course grade. If the student successfully completes the required components, the grade of Pass (P) will replace the Incomplete (I) as the official course grade. If the student does not successfully complete the required components, the grade of Fail (F) will replace the Incomplete (I) as the official course grade.
3.8e  Pass with Remediation (PR)
A grade of Pass with Remediation (PR) is given to the student whose performance is initially below the passing standard and receives an Incomplete (I), but who demonstrates competency in the course by completing the Block, Thread, or Course requirements in the manner described in 3.8d, above. A grade of Pass with Remediation (PR) is also given to the student who receives a Fail (F) and completes a formal remediation and retake of the Block, Thread, or Course. The F grade will remain as a permanent part of the student’s transcript.

3.8f  Withdrawal (W)
Withdrawal (W) is a special symbol that is an indication of registration or grade status and is not assigned by the instructor. Note: The CHA/PA Program curriculum is built entirely on courses taken as pre-requisites or as part of the program. Therefore, a Physician Assistant student may withdraw from a course only with permission of the Student Promotions Committee. In most instances, withdrawing from a course will result in withdrawing from the Program since all courses must be in sequential order. It is the student’s responsibility to obtain the necessary signatures from the instructor as well as the Registrar. A Withdrawal (W) notation is recorded on the student’s permanent record. Students who do not officially withdraw are subject to grades of Fail (F) for all course work.

3.8g  Grading Schema

![Clinical Experiences Grade Schema](image)

*Figure 1: Clinical Experiences Grade Schema*
3.9 Drop/Add Procedure

Students will be allowed to drop and add courses within a period specified by the Registrar for clinical experience that have a change due to extenuating circumstances and didactic elective courses (Tracks) only as approved by the Clinical Course Director or Academic Coordinator. Students seeking to drop or add a course after the specified period must obtain the Course Director’s permission and work in conjunction with the Academic Coordinator. All courses dropped after the conclusion of the initial drop period appear on the permanent record with the grade of Withdrawal (W).

After the 10th week (fall and spring semesters), courses may not be dropped unless there are circumstances clearly beyond the student’s control (accident, illness, etc.). In addition to the Course Director’s certification, the Program Director or his designee must grant approval to drop the course. There may be a fee associated with a drop/add if the change is made outside the specified drop/add period.

3.10 Online Course/Clinical Evaluations

3.10a Didactic Course Evaluations

Throughout the semester, students are required to evaluate each course, Course Director and guest lecturers for that course. The course evaluations are completed online and are administered through the CHA/PA Program’s System of Integrated Data (SID) software. Anonymous compilation of the evaluations is provided to Course Directors, and the CHA/PA
Leadership Team. Evaluations are reviewed and used to make improvements to individual courses as well as the overall curriculum. Furthermore, anonymous evaluations are provided to guest lecturers upon request. Therefore, constructive student feedback is extremely important in considering changes to curriculum.

Didactic course evaluations will be closed and no longer accessible for student access seven (7) calendar days after the conclusion of the semester.

Failure to complete student didactic course evaluations will result in the following:

- A warning from the Chair of the CHA/PA Program Quality Committee will occur for the first offense
- If student didactic course evaluations continue to not be completed for the following semester, the student’s status will be brought to the Student Promotions Committee for notation of an academic warning in the form of a Professional Development Evaluation (PDE).
- If student didactic course evaluations continue to not be completed for three consecutive semesters, the student’s status and the academic warning in the form of a PDE will be brought to the Student Promotions Committee for consideration of academic probation.

3.10b Clinical Experience Evaluations – Student Evaluation of the Preceptor

Students provide evaluations of clinical rotations using the online platform of Typhon. Constructive feedback is important in evaluation and continued use of clinical sites as well as in providing clinical site education. The student evaluation is due no later than seven (7) calendar days following completion of the clinical experience.

Failure to complete student evaluation(s) of the preceptor may result in the following:

- A grade of Incomplete (I) for the clinical experience at the end of the semester (this is dependent on the deadline for end-of-semester grade submission to the Registrar’s office) AND/OR
- A warning from the Clinical Course Director will occur if the evaluation is submitted later than seven (7) calendar days after the completion of the clinical experience for the first offense
- If evaluations continue to not be completed within seven (7) calendar days for the following clinical experiences, the student’s status will be brought to the Student Promotions Committee for notation of an academic warning in the form of a PDE. If clinical course evaluations continue to be turned-in late while the student has a corrective PDE, the Student Promotions Committee may impose academic probation.

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

Grades are assigned by the Clinical Course Director. The Clinical Course Director may obtain advice and consultation from the Preceptor, the Clinical Team and/or the Student Promotions Committee. All clinical experiences are grades at the end of each semester (See Section 3.8). The following are requirements for a passing grade for 1st, 2nd and 3rd Year clinical experiences:

- Patient Logging
- Preceptor Assessment of Student
- Student Evaluation of Preceptor
- Additional requirements provided by the Clinical Course Director (i.e., Individualized Learning Plan – Goals in 3rd Year)Additional assignments assigned by Clinical Faculty (e.g., PCACLE Track)

Late assignments are a breach of professionalism. A warning will be given for the first violation and subsequent violations will be reviewed by the Promotions Committee. If any of the requirements are missing or not meeting program-defined expectations at the time semester grades are due, the student will receive an “Incomplete” (I) grade until the requirement has been met.

3.11a Patient Logging

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

- Log all patient information that is required per the course syllabus on the patient logging worksheet in Typhon
- Log ICD-10 codes in the 2nd year
- Complete logging within seven (7) calendar days after the completion of the clinical experience.
  - Failure to complete patient logging within seven (7) calendar days after the completion of the clinical experience may result in a warning for the first lapse followed by a notation of an academic warning in the form of a Professional Development Evaluation (PDE) for the second lapse. If late patient logging continues while the student has a corrective PDE, the Student Promotions Committee may impose academic probation.
  - Students should review their Typhon graph printout with their preceptor(s) at the end of the rotation

3.11b Assessment of Student Progression

The CHA/PA Program utilizes a developmental approach to assessment for clinical experiences. This method allows a preceptor to assess student performance based on the activities that the student was able to demonstrate rather than those that might be theoretical in nature. Using this assessment method, students are able to identify areas of strength and specific areas for improvement, guide their future educational goals, and provide a measure of their progression over three clinical years. A copy of the assessment explanation can be found in Appendix III: Assessment of Student Progression.
The Preceptor Assessment of Student Competence is electronic and sent directly to the preceptor by the program through Typhon. If the preceptor prefers paper evaluation forms, the student should print out a pdf form and provide it to the preceptor. The pdf form is found on the CHA/PA website under “Preceptors”, “Preceptor Resources” and on the Canvas clinical page.

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

The Preceptor Assessment of Student Competence is due in the CHA/PA office within seven (7) calendar days following the student’s clinical experience.

3.11c Student Evaluation of the Preceptor
(See above in “Clinical Experience Evaluation – Student Evaluation of the Preceptor”)

3.11d Other Requirement for 3rd Year Students
The following are additional requirements for 3rd Year Students:

Individualized Learning Plans:
Goals are due to the Clinical Course Director at the beginning of each semester (see Syllabus for dates) for 3rd Year students. Information on this will be provided in the 2nd Year Professional and Clinical Practice IV course (MPAS 6804).

Site-Specific Requirements:
Clinical sites may have specific requirements for students to complete prior to starting the clinical experience. This may include but is not limited to: paperwork, modules, drug screening, background checks. The student must review these requirements and submit them by the designated deadline. Failure to complete the appropriate requirements and/or complete the requirements in the designated deadline may result in one or more of the following:

- Inability to begin a clinical experience resulting in an extended program and delayed graduation
- A warning for the first lapse followed by a notation of an academic warning in the form of a Professional Development Evaluation (PDE) for the second lapse. If the behavior continues while the student has a corrective PDE, the Student Promotions Committee may impose academic probation.

3.12 First and Second Year Student Assessments
The first two years of the Curriculum contain five (5) formative End-of-Semester Assessments. These formative assessments are multi-modal and may include numerous types of assessment.

3.12a First Year Formative Assessment
The First-Year formative clinical assessments are administered at the end of the Fall and Spring semesters during Finals week. Following completion of the assessment, 1st Year CHA/PA
students will receive formative feedback as described in Section 3.7 and may meet with their academic advisor.

3.12b Second Year Formative Assessment
There are two types of formative assessments utilized in the second-year curriculum:

**Second-Year Formative Clinical Assessment**
The Second-Year formative clinical assessments are administered at the end of the Fall and Spring semesters, during Finals week. Following completion of the assessment, 2nd Year CHA/PA students will receive formative feedback as described in Section 3.7 and may meet with their academic advisor. Students who receive an unsatisfactory score for the Spring Second Year formative clinical assessment may be placed on extended program and/or required to complete a remediation program based on the Student Promotions Committee’s review and decision.

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

3.13 End-of-Program Assessment
Within the four months preceding the completion of the CHA/PA Program, the CHA/PA Program administers the End-of-Program Assessment. This assessment is a two-part examination, consisting of a written examination and a clinical skills examination.

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

3.13a End-of-Program Written Examination
The End-of-Program Written Examination is completed online through the Physician Assistant Education Association’s (PAEA) End-of-Program exam. This examination occurs in the Spring of the third year or within four months of graduation. The student must pass the End-of-Program Written Examination in order to graduate from the CHA/PA program. If the PAEA End-of-Program exam is not available, the CHA/PA Program will administer a comparable exam using the PAEA End-of-Program exam blueprint.

Students will receive their End-of-Program Written Examination scores within four (4) weeks following completion of the exam.

In the event of a failure of the End-of-Program Written Examination, the student will have the ability to retake the exam one (1) time. Failure to pass the written examination after the second attempt, will result in a thorough review of the student’s performance in the program (e.g., didactic courses, clinical experience evaluations, professionalism evaluations, performance according to the competencies). Using all of these data points, the Student Promotions
Committee will decide next steps, which may include and are not limited to: remediation, graduation, and/or a plan specific to the student’s needs, which may include dismissal.

An extended program may be necessary in order to accommodate the re-take examination or remediation plan determined by the Student Promotions Committee.

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

3.13b  End-of-Program Clinical Examination

The End-of-Program Clinical Examination is completed at the CAPE during Spring of the third year or within four months of graduation. The student must pass the End-of-Program Clinical Examination in order to graduate from the CHA/PA program.

Students will receive the following pertaining to the End-of-Program Clinical Examination within four (4) weeks following completion of the exam:

- Standardized Patient (SP) comments
- Videos
- Checklists
- Overall score sheet

In the event of a failure of the End-of-Program Clinical Examination, the student will have the ability to retake the exam one (1) time. Failure to pass the clinical examination after the second attempt, will result in a thorough review of the student’s performance in the program (e.g., didactic courses, clinical experience evaluations, professionalism evaluations, performance according to the competencies). Using all of these data points, the Student Promotions Committee will decide next steps, which may include and are not limited to: remediation, graduation and/or a plan specific to the student’s needs, which may include dismissal.

An extended program may be necessary in order to accommodate the re-take examination or remediation plan determined by the Student Promotions Committee.

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

The Student Promotions Committee will make final determinations regarding whether a student has successfully completed the program requirements required for graduation. This will entail a comprehensive evaluation of the student’s overall performance in the program.
SECTION 4: PROMOTION AND GRADUATION

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

The Student Promotions Committee is composed of all core CHA/PA Program faculty members with the Medical Director serving as a non-voting member. The Program Director acts as Chair. Student academic and professional performance is reviewed at the end of each semester and on an as-needed basis. When evaluating student performance, the Student Promotions Committee takes into account grades and academic warnings in the form of Professional Development Evaluations (PDE) as specified in the “Student Grades” and “Student Professional Development” sections. Although each incident is considered on an individual basis, the Student Promotions Committee reviews the student’s entire academic and professional progress when making decisions.

When a student is brought to the Student Promotions Committee for academic and professional performance concerns, the student may appear before the Student Promotions Committee either at the request of the student or the Student Promotions Committee and may choose to be accompanied by an advocate from the School of Medicine Advocacy Office, a faculty member, or another student (See Appendix II). This request for a student to appear before the Student Promotions Committee should occur prior to the Student Promotions Committee making a final decision. It is recommended that the student discuss the request and the timeline for appearance with their academic advisor.

Actions by the Student Promotions Committee may consist of, but are not limited to:

- Recommending an academic warning in the form of a Professional Development Evaluation (PDE)
- Placing a student on academic probation
- Remedial action,
- Dismissal.

The Student Promotions Committee will also act on the following student requests:

- Official non-medical leave of absence
- Official medical leave of absence
- Program leave,
- Requests to return to active status after an official leave of absence or program leave
- Requests to drop academic tracks
- Results of criminal background checks

The process to appeal decisions of the Student Promotions Committee is outlined under “Rights of Appeal”.

4.2 Student Performance
Block and Thread Directors report grades to the Registrar’s Office. Student performance is reviewed at the end of each block and thread, and student performance issues are reported to the Student Promotions Committee.
4.2a Failure of a Course
A student may retake a failed course one (1) time only. The student will be placed on academic probation and will be mandated to complete remediation. Due to the scheduling needs within the fall and spring semester, the following should be noted:

- If a student fails a fall semester course, the student may be allowed to remediate the course during the Winter Break.
- However, if a student fails a spring semester course, the student will remediate in the Summer, which will lead to an extended program and delayed graduation.

If the student receives a second failing grade after completing remediation for the failed course, the Student Promotions Committee will review the students' academic progress. The student will be dismissed from the program and may petition the Student Promotions Committee for re-admission in the next academic year. Re-admission is not guaranteed and will be determined after a thorough review of the student’s academic and professional record.

If a student fails two courses in an academic year, the student will be dismissed from the program and may petition the Student Promotions Committee for re-admission in the next academic year. Re-admission is not guaranteed and will be determined after a thorough review of the student’s academic and professional record.

In courses that utilize anatomy practicums as part of their End-of-Block exams and determination of a course grade, if a student fails an anatomy practicum for that course, the student will be required to complete an anatomy remediation and will receive an Incomplete (I) grade for that course until they pass the anatomy practicum.

Please note: If a student is at risk of failing, the Student Promotion Committee and Course Directors will make every effort to notify the student of the final grade and student options within one week of the completion of the course. Course Directors will not be able to provide a definitive grade or progression plan on the final day of the course.

4.2b Academic Standing
When a student incurs a failing grade, the Student Promotions Committee reviews that student’s entire academic record in detail and may impose the actions described in Section 4.2a and in the “Student Probation” and “Student Remediation” sections.

To remain in “Good Standing”, a student must receive a passing (P) grade in all courses, pass all clinical experiences/rotations, and successfully complete requirements for annual promotion.

If the criteria for “Good Standing” are not met, the student will be considered “Not in Good Standing” and will be placed on academic probation. It is the responsibility of the student to know his/her academic status. Students “Not in Good Standing” may not hold elected or appointed student leadership positions. Students “Not in Good Standing” may not participate in elective courses, including track curriculum, and may be subject to loss of scholarship funds.
4.3 Course Requirements, Electives and Tracks
The requirements for each year of the CHA/PA Program must be completed successfully before a student can begin the next years’ curriculum. All students have the same didactic and clinical course requirements for the CHA/PA curriculum in all three years.

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

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

4.4 Requirements for Annual Promotion
There are specific requirements for each year for annual promotion.

4.4a First Year Requirements
The student must successfully pass all required first year courses and be in “Good Standing” before becoming eligible to begin second year courses.

4.4b Second Year Requirements
The student must successfully pass all requirements, complete the PACKRAT assessment, and be in “Good Standing” to begin third year courses.

4.4c Third Year Requirements
The student must successfully complete all requirements, pass the End-of-Program Assessments, and be in “Good Standing” to complete the Program.

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

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

Students on extended curriculum will incur additional tuition and/or fee expenses.
4.7 Student Academic Probation

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

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

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

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

Students on probation:

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

4.8 Student Remediation

Students who have unsatisfactory grades, exhibit unprofessional behavior, or fail block, thread, end-of-semester, and program assessments, may have the opportunity to complete a remediation plan determined by the Student Promotions Committee and the appointed Remediation Faculty Member. The Committee may require remedial action, including, but not limited to, repeating a course and/or repeating a year or more of additional study in a subject area. In the latter instance, the student may be required to register for an Independent Study course in order to complete the additional student requirements. In addition, the committee may impose deceleration, which may result in delayed program completion.

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

First-year and second-year students participating in a remediation plan for spring semester course work during the summer semester will be placed on a deceleration program, resulting in delayed program completion. Due to the 3rd Year clinical seminar course, graduation, and university completion requirements, no clinical rotations will be initiated and/or completed during the month of May. Eligibility for graduation will be determined upon successful completion of remediation.
4.9 Student Dismissal

Any student who, in the opinion of the Student Promotions Committee, is deemed unfit for practice of medicine may be immediately dismissed from the CHA/PA program without a term on probation. "Unfit to practice" includes, but is not limited to:

- Actions that indicate a direct threat is imminent and severe
- The student’s physical or mental health increases the probability of an adverse effect on him/herself, a peer, or a member of the public,
- Actions that are dishonest, unethical or considered egregious

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

Students on probation or on an extended curriculum due to remediation are subject to immediate dismissal upon receipt of failing grades, demonstrating unprofessional behavior, or violating the terms of probation.

Generally, students with one deficient grade in an academic year are not dismissed without a term of probation. Students who receive more than one deficient grade in a semester or are found in violation of the student conduct and honor code may be subject to dismissal.

4.10 Requests for Leave of Absence (LOA)

There are different options for a leave of absence. The following are available to CHA/PA Students:

4.10a Official Non-Medical Leave of Absence (LOA)

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

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

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

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

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

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

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

The Student Promotion Committee will contact the University of Colorado Office of Case Management for any student requesting an Official Leave of Absence.

**4.10b Official Medical Leave of Absence**

A student requesting an Official Medical LOA must submit the following:

- A written petition to the Student Promotions Committee for a non-medical leave of absence.
- Evidence from a licensed practitioner of medicine (MD/DO/PA/licensed mental health provider) that the student is under the care of the practitioner
- Completion of the appropriate University of Colorado Medical Leave of Absence steps found at: [http://www.ucdenver.edu/anschutz/studentresources/student-assistance/student-wellbeing/Pages/medical-leave.aspx](http://www.ucdenver.edu/anschutz/studentresources/student-assistance/student-wellbeing/Pages/medical-leave.aspx)

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

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

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

Additional requirements may be instituted due to changes in the program curriculum or policies since the leave began. A LOA for any reason may be granted for variable amounts of time, however, no more than **two (2) one-year leaves** may be granted; and all program requirements must be completed within **the maximum time of six (6) years** from the time of matriculation.
The two (2) one-year leave of absences may not be consecutive. If the student is not ready to return after a one (1) year Official Leave of Absence, the student must withdraw from the SOM Child Health Associate/Physician Assistant Program or be dismissed.

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

4.10c Request to Return from an Official Non-Medical and Medical Leave of Absence
To request a return from an Official Non-Medical and Medical Leave of Absence, a student must submit:

- Work with the appropriate University of Colorado departments (Bursar’s Office, Registrar, and Financial Aid; Office of Case Management - Medical Leave of Absence) prior to submitting a written petition to return to the Program.
- A written petition requesting return to the Program submitted to the Student Promotions Committee.
- The Student Promotions Committee must receive the written request no later than 10 calendar days before the LOA ends.
- For a Medical Leave of Absence, documentation from a licensed practitioner of medicine (MD/DO/PA/licensed mental health provider) indicating the student is able to return to studies and clinical rotations may be asked for by the Office of Case Management.

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

4.10d Program Leave
During the 3rd Year, a student may request a program leave for at least 2-week duration due to personal reasons. Student requesting a Program Leave must submit:

- Written documentation clarifying and supporting the necessity of the Program Leave
- Estimation of the amount of time they will be absent
- Acknowledgement of understanding of extended program and delayed graduation

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

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

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

The Student Promotion Committee will contact the Office of Case Management for any student requesting a Program Leave of Absence.

**A student on an official non-medical or official medical leave of absence may NOT participate in CHA/PA program activities including, but not limited to, examinations, CHA/PA courses or student organization activities.**

### 4.11 Track Change Requests

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

### 4.12 Need for Special Accommodations

The goal of the American with Disabilities Act (ADA) is to ensure that individuals with disabilities are not discriminated against or denied equal access to the same programs, services, and facilities available to others. It is the policy of the CHA/PA Program to provide reasonable accommodations to qualified students with a disability. Whether or not an accommodation is reasonable is determined on an individual basis. Students are encouraged to contact the Office of Disability Resources with any questions.

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

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

### 4.13 Requests for Withdrawal

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

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

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

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

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

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

Repeat criminal background investigations will require a new consent/release form signed by the student prior to conducting the background investigation as well as the payment of the background check fee. Students who refuse to consent to additional criminal background investigations will be subject to discipline, up to and including dismissal from the Program. The Student Promotions Committee will review results of the criminal background investigation. The student may be subject to probation or dismissal, pending the results of the review.
SECTION 5: Student Honor and Conduct Code

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

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

5.1 Academic Honor and Conduct Code

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

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

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

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

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

5.2 Academic Honesty

Students should adhere to the highest standards of academic honesty and integrity. Examples of behavior that violate these standards include but are not limited to the following:
- Plagiarism, including improper use of web information;
- Cheating;
- Illegitimate possession and/or use of examinations;
- Fabrication and falsification;
- Multiple submissions;
- Misuse of academic materials and facilities;
- Complicity in academic dishonesty.

5.3 Reporting Violations of the Honor Code
The primary responsibility for reporting violations of the Student Honor and Conduct Code resides with the individual who has committed the violation. However, fellow students and members of the faculty and staff also share in this responsibility. Each student signs an agreement to adhere to the Student Honor and Conduct Code; therefore, all new violations must be reported. The acknowledgement form shall be placed in the student’s file.

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

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

5.4a Membership of the CHA/PA Student Honor and Conduct Committee
Voting members of the Student Honor and Conduct Committee will include three (3) faculty members, one of whom serves as a chairperson who shall only vote in circumstances where there is a tie, and two (2) students. An additional two (2) students will be elected to serve as alternates should a student member of the committee be unavailable. A minimum of two (2) faculty and two (2) students must be present for decision-making. Decisions of the Committee shall be reached based on a simple majority vote.

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

The Chairperson will be one of the faculty members and will be appointed by the Program Director to serve a one-year term.

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

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

I. Any reasonable suspicion of a violation of the Student Honor and Conduct Code shall be reported to the Chairperson of the Student Honor and Conduct Committee and must be submitted in writing. Normally, disciplinary action will not be taken against the alleged violator until the Student Honor and Conduct Committee has deliberated. However, if the alleged violation threatens the welfare or safety of others, or is against the law, the Program Director of the CHA/PA Program will take appropriate action if necessary. This action may include immediate suspension.

II. When a party has evidence that a student has violated the Student Honor and Conduct Code, he/she may meet with the student to discuss the issue. The reporting party may seek the counsel of a neutral person such as the Campus Ombudsperson. The party may give the student the opportunity to self-report to the Chairperson. If the party is not comfortable approaching the student or the student refuses to self-report, the party shall report the suspicion to the Honor Council Chairperson, as soon as possible.

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

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

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

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

VII. Following the hearing, the Student Honor and Conduct Committee will deliberate
outside the presence of the parties or witnesses. Upon a majority vote, the
Committee will make its decision. Decisions may include but are not limited to the
following actions:
   a. Take no action against the student based on a finding of no violation
   b. Place the student on disciplinary probation for a specified period
   c. Suspend the student's registration at the University of Colorado, including
      extended studies, for a specified period
   d. Recommend dismissing the student permanently from the University of
      Colorado CHA/PA Program.
      i. Recommendations of dismissal will be forwarded to the Student
         Promotions Committee for review and to render a decision.

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

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

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

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

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

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

a. New information regarding the student's alleged violation of the Student Honor and Conduct Code which was previously unknown to the student or the Committee is discovered;

b. There was an error in the process that prevented the student from presenting relevant information to the Student Honor and Conduct Committee that could have materially changed the Student Honor and Conduct Committee’s decision;

c. There is evidence that the Student Honor and Conduct Committee acted in an arbitrary or capricious manner.

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

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

Honor Council proceedings will be kept confidential to the extent practical and allowed by law. Information may be shared with the Program Director and/or the Student Promotions Committee if the Honor Council Chair determines it may affect the student’s education, or the education or safety of other students in the program.
SECTION 6: STUDENT RIGHTS

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

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

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

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

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

The Dean, or designee, may affirm or reject the Student Promotions Committee’s decision or refer the matter back to the Student Promotions Committee for further consideration. The Dean’s decision is final.
6.1b Appeal of a Failing (F) Grade

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

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

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

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

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

6.2 Rights of Reapplication

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

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

The rights of reapplication in the case of a student who withdraws prior to establishment of a record are reviewed in “Requests for Withdrawal”.

6.3 Student Right to Review Academic File

Any enrolled student may review his/her entire academic file. Inquiries to review personal academic files should be directed to the Program Director.
SECTION 7: CLINICAL POLICIES

7.1 Immunization and Health Screening Requirements

Students are responsible for maintain current immunization status and are required to follow Center for Disease Control (CDC) guidelines. Immunization requirements must be completed prior to the beginning of the first clinical experience in the spring of 1st year and must remain current to continue clinical experiences. Updated tuberculosis screening and influenza vaccination is required yearly by designated deadlines. Failure to provide updated documentation of immunization and screening requirements will result in the cancelation of clinical experience and review by the Student Promotions Committee.

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

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

7.1a University of Colorado Influenza Vaccination Policy

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

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

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

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

Students will be responsible for obtaining the vaccine and the costs associated with receiving the vaccine.
Noncompliance with this policy may result in withdrawal or withholding of a student from clinical rotation(s), which may limit the student’s ability to graduate on time.

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

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

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

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

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

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

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

Students in the CHA/PA Program are required to adhere to these guidelines

OSHA Training is completed yearly through the University of Colorado Human Resources Website (SkillPort).

7.4 **Drug Screens**
The CHA/PA Program takes patient safety very seriously. Therefore, all students must submit to a 10-panel drug screen prior to starting the clinical experiences portion of their Program. A negative drug
screen is required for participation in any clinical experience. This policy applies to all enrolled students in the MD, PT and PA degree programs.

A repeat 10-panel drug screen prior to entering the 3rd Year of the CHA/PA program is part of this requirement. Additional drug screen requirements for clinical rotations beyond the two described above, may be required prior to beginning a clinical rotation. Cost associated with additional drug screens is the responsibility of the student.

7.4a University of Colorado School of Medicine Drug Screening Policy

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

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

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

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

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

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

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

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

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

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

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

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

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

**Positive Drug Screening Results:**

Students who do not pass a required drug screen may face disciplinary action, including administrative withdrawal from courses, placement on a leave of absence, or dismissal from the Program. Students may be referred for evaluation and treatment through the Colorado Physicians Health Program (CPHP) or another designated program as a condition for remaining in the Program. Costs incurred are the responsibility of the student.

Students found to have a substance abuse problem that will likely pose a danger to patient care, as determined through the drug screening evaluation process, will be referred for independent evaluation and treatment at the student’s expense.

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

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

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

7.6 Worker’s Compensation and Malpractice
This section explains the malpractice and worker’s compensation coverage for CHA/PA students.

7.6a Malpractice
The School of Medicine provides professional liability coverage for its students through a combination of self-insurance and commercial insurance. This coverage is subject to the terms of the University of Colorado Self-Insurance and Risk Management Trust Coverage Document. The extent of coverage under the Trust may be limited by the nature of the PA training program with the University.

Coverage extends to an individual who is duly enrolled and matriculated as a medical student at the University Of Colorado School Of Medicine for all professional and educational activities that are within the course and scope of the individual’s responsibilities as a student. Some example situations in which a student would not be covered:

• Students who are not enrolled during the summer months are not covered by this policy.
• Student who are enrolled but for which “activities” are not within the course and scope of the student responsibilities.
• Students on an approved Leave of Absence may not be covered and should work with the Office of Student Life for details.

Volunteer activities performed by CHA/PA students enrolled at CU are covered by the Malpractice Trust if they fall within the course and scope of the individual’s responsibilities as a student. In most circumstances, the volunteer activity will be a recognized activity within the approved curriculum and course credit will be awarded to the student. In other situations,
contact the Professional Risk Management Office (303-724-7475) or the Office of the University Counsel (303-315-6617) for guidance. The Office of Student Life should approve all non-course credit volunteer activities in writing before engaging in the activity.

7.6b Workers’ Compensation
Workers’ compensation benefits may apply to students in clinical rotations. Students in on-campus classroom activities are not covered by workers’ compensation. Workers’ Compensation policies and procedures are managed by the University Risk Management, go to http://www.cu.edu/risk

7.6c Health Insurance
Students in the School of Medicine are required to carry personal health insurance. Students on Leave of Absence should work with the Office of Student Life to understand their health insurance options.
SECTION 8: OTHER POLICIES

8.1 University of Colorado Policy on Conflict of Interest between Health Care Professional Students and Industry Representatives.

The University of Colorado has created a policy regarding conflict of interest between health care professional students and industry representatives. This policy can be found at: http://www.ucdenver.edu/research/ORC/COI/Pages/default.aspx

8.2 Site Visits

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

8.3 Additional Clinical Experience Costs

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

8.3a Fingerprints

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

8.4 Participating in Community Service and Health Fairs

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

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

8.4a DAWN Clinic (https://www.dawnclinic.org/about-d-a-w-n/)

Students who wish to volunteer at the DAWN Clinic must notify the Didactic Service Coordinator to be added to the CHA/PA Program list of volunteer members. Students must notify the Didactic Services Coordinator prior to volunteering at the DAWN Clinic and must be included on the CHA/PA Program list of volunteer members to participate. Students cannot participate or
volunteer at the DAWN Clinic when courses are not occurring (e.g., Winter Break during 1st and 2nd Year).

8.4b National Western Stock Show Health Fair
Students who wish to participate in the University of Colorado sanctioned National Western Stock Show Health Fair must communicate with the Rural Track CHA/PA Course Director to discuss their intentions.

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

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

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

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

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

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

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

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

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

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

8.8 Preparation for Licensure

8.8a Colorado Licensure
All transactions with the Colorado Board of Medical Examiners are strictly the student’s responsibility – not the Program’s responsibility. The Program will inform the Colorado Board of Medical Examiners (BME) of who has graduated and provide the required form(s) and a copy of the student’s diploma. Graduates will need to forward their Board scores and official transcripts directly to the Colorado BME for the application to be complete. See www.dora.state.co.us/Medical/ for more information.

8.8b Other State Licensure
For applications for licensure outside the state of Colorado, the student must provide the Didactic Services Coordinator with the required paperwork. See www.aapa.org for information related to licensure in other states.
8.9 CHA/PA Program Reference Request

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

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

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

8.10 CHA/PA Program Credentialing and Privileges Request

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

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

8.11 Student Privacy

Pursuant to the Family Educational Rights and Privacy Act (FERPA), students may annually file written notification requesting the withholding of certain personal information from disclosure. Such requests must be filed with the Registrar’s Office. Without such filing, the Registrar’s Office will provide student director information regarding enrolled students, as permitted by law. The University of Colorado’s FERPA Policy can be found at: http://www.ucdenver.edu/student-services/resources/Registrar-dev/StudentServices/Pages/FERPA.aspx.

In an emergency, both the CHA/PA Main Office (303-724-7963) and the Registrar’s Office (303-724-8053) will make reasonable efforts to contact a student or a student’s designated emergency contact.

8.12 Security Table for AMC and Clinical Sites

The following table will provide information on security measures on the Anschutz Medical Campus, at University-Affiliated Clinical Sites and clinical sites outside of the University.
Anschutz Medical Campus

**During regular classroom hours:** The security systems in place during regular classroom hours at the main Anschutz Medical Campus (AMC) include a full-service police force and security personnel who patrol the campus 24 hours a day 7 days a week 365 days a year. The University Police Department (UPD) for the University of Colorado Denver provides police, security, and access control to the AMC. The UPD maintains a full-service staff of 27 full-time police officers who hold police commissions with the State of Colorado. The UPD also employs 6 security guards and 13 full-time Emergency Communications Center personnel in addition to administrative staff.

Blue light emergency call stations are located outdoors throughout the AMC and are regularly assessed and maintained. The push button on the pole dials directly to the UPD and a dispatcher answers on the speaker.

At the entrances to most buildings on the AMC are call boxes that are mounted to the buildings or within pedestrian areas that contain a telephone. The police department can be contacted from any of these devices by pressing the call button, or by dialing 911 or x4-4444 from any campus telephone. Every elevator has a call button on the control panel that is a direct link to UPD. Upon request, the UPD will provide escorts to any of the parking lots and near-by side streets that are within a four-block radius of the university.

All buildings and offices have Emergency Preparedness Quick Reference Guides available to any student or employee that outlines what to do for any type of emergency. If a student dials x4-4444 or calls, 303-724-4444 on campus the emergency will be responded to immediately via emergency communications.

The University of Colorado Denver | Anschutz Medical Campus Emergency Notification System, commonly referred to as the RAVE system, provides campus emergency notification via text and voice-message when conditions develop on or near the Denver-based campuses which pose an imminent threat of danger to the campus community. Chancellor Don Elliman has determined that all students, faculty, and staff will automatically receive emergency alerts and campus closure notifications via university-issued email addresses. In addition to the Emergency Notification System (RAVE), students, faculty, and staff can sign up to receive general alert information from university safety and facilities personnel on the campus Alerts Webpage. The can also get updates regarding the operational status of the campus by going to the Alerts Webpage or by calling 1-877-463-6070.

**Outside regular classroom hours**

The standard and default hours of operation for the security of exterior entrance doors on the Anschutz Medical Campus are from 6:00 a.m. to 6:00 p.m. After hours, those individuals enrolled in the Access Control System (badging) will be able to enter any access controlled door for which after-hours access has been granted to that cardholder.

Security at Clinical Sites

**The University of Colorado Hospital (UCH):** is under the jurisdiction of the UPD and is served by many of the campus security systems. There are on-site security staff present on the AMC 24 hours a day 7 days a week 365 days a year, with officers staffing the main patient/visitor entrances 24 hours a day and a minimum of 2 security personnel in the Emergency Department at all times. Security staff stay in constant contact with the call center and have direct connection to campus police and area law enforcement. The 24-hour call center keeps constant watch on exterior and interior activities.

Security staff monitor the parking lots and buildings 24 hours a day, seven days a week and do patrol on a scheduled routine basis. Each parking lot has ample lighting to assure optimum visibility and are monitored by security camera systems 24 hours a day 7 days a week. Emergency “Blue” phones are located throughout parking lots and garages, as well as along all pedestrian walkways. Security also provides a variety of support activities for staff, students, patients and visitors including: escorts to and from personal vehicles, recharging dead vehicle batteries, Assistance in contacting services related to keys locked in the car, flat tires and disabled automobiles. Students, staff, patients, and visitors can call 911 for any emergency and they will be connected with the Hospital Shared Services Emergency dispatchers or can dial x8-7777 to request an escort to their vehicle after dark.

**The Children’s Hospital Colorado (CHC):** is under the jurisdiction of the UPD and is served by many of the campus security systems. Students are able to request escorts to their vehicles.

**Denver Health (DH):** security officers are available 24 hours a day, 7 days a week, and are responsible for providing a safe and secure environment for all patients, visitors and staff. Security can be reached by dialing x67444 from any hospital or clinic telephone or by dialing (303) 438-7444 from outside the system. Students are also able to request escorts to their vehicle.

**The Denver Veteran’s Affairs (VA):** Office of Security and Law Enforcement (OS&LE) is responsible for developing policies, procedures and standards that govern VA’s infrastructure protection, personal security and law enforcement programs; protecting Veterans, visitors, and staff on department facilities and grounds. The VA Eastern Colorado Health Care System has a Police Service and its officers provide 24-hour patrols of the facility and parking lots. For general police assistance, please dial 1-888-336-8262 x523. In case of an emergency, dial 1-888-336-8262 x3911. On-site 24/7 security personnel are available to walk students to their cars or respond to their needs and can be reached at 303-393-5233. The VA Medical Center is federal property and as such all persons and bags are subject to search.

**Off-campus clinical sites** are expected to comply with accreditation requirements for safety and security.
APPENDIX I: Technical Standards

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

SECTION 1: Introduction

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

1.1 Standards

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

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

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

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

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

2.1 Reasonable Accommodation
The University of Colorado Child Health Associate/Physician Assistant (CHA/PA) Program is committed to providing equal opportunities for qualified students with disabilities who apply for admission to the CHA/PA program or who are enrolled as CHA/PA students. A “qualified individual with a disability” is an individual with a disability who meets the academic and technical standards requisite to admission or participation in the CHA/PA’s educational programs, with or without reasonable accommodations. Whether or not a requested accommodation is reasonable will be determined on an individual basis. Determining what is a reasonable accommodation is an interactive process that the student should initiate with the Office of Disability Resources and Services. An accommodation is not reasonable if it poses a direct threat to the health or safety of self and/or others, if making it requires a substantial modification in an essential element of the curriculum, if it lowers academic standards, or poses an undue administrative or financial burden. Except in rare circumstances, the use by the student of a third party (e.g., an intermediary) to perform any of the functions described in the Technical Standards set forth above would constitute an unacceptable substantial modification. Students in the CHA/PA Program will be assessed on a regular basis according to the Academic Standards and the Technical Standards of the CHA/PA Program on their abilities to meet the requirements of the curriculum.
Appendix II: University of Colorado Anschutz Medical Campus Student Services/Student Advocacy

SECTION 1: CHA/PA STUDENT SERVICES

1.1 Student Advisors

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

SECTION 2: AMC CAMPUS STUDENT SERVICES

2.1 Campus Assessment, Response and Evaluation (CARE) Team

CONTACT INFORMATION: http://www.ucdenver.edu/life/services/care/Pages/default.aspx

The Campus Assessment, Response & Evaluation (CARE) Team was created to address the health and safety needs of students as well as the campus community. The purpose of the team is to assess whether individuals pose a risk to themselves or others and to intervene when necessary, and more generally, to identify and provide assistance to those in need. The team takes a preventative approach to risk assessment by offering resources, referrals, and support to both the concerning individual and those impacted by their behavior. (http://www.ucdenver.edu/life/services/care/Pages/default.aspx)

2.2 Office of Disability Resources and Services (DRS)

CONTACT INFORMATION: (303) 724-5640

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

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

2.3 Office of Equity – Sexual Misconduct, Discrimination and Harassment

CONTACT INFORMATION: 303-315-2567

The University of Colorado does not discriminate based on sex, gender or sexual orientation in its education programs or activities. Title IX of the Education Amendments of 1972, and certain other Federal and state laws, prohibit discrimination in all education programs and activities operated by the University (both on and off campus). Title IX protects all people regardless of their gender or gender identity from sex discrimination, which includes sexual harassment and sexual assault.
Title IX requires the University to designate a Title IX Coordinator to monitor and oversee overall Title IX compliance. The campus Title IX Coordinator is available to explain and discuss the student’s right to file a criminal complaint; the University’s complaint process, including the investigation process; how confidentiality is handled; available resources, both on and off campus; and other related matters.

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

**Location:**
Education 2 North
13120 E 19th Ave, Room 5221
Aurora, CO 80045

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

**2.4 Office of Diversity and Inclusion**
**CONTACT INFORMATION: (303) 724-8003**

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

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

**2.5 Office of Professionalism - Office of Professional Excellence**
**CONTACT INFORMATION: (303) 724.4PRO (4776)**
Professionalism@ucdenver.edu
The Office of Professionalism provides a resource to obtain a fair and equitable process and resolution for all matters pertaining to professionalism concerns or student mistreatment. Students may report allegations of unprofessionalism to this office via online reporting or email. Reports are confidential.

Jeffrey Druck, MD – Director, Office of Professionalism  
Abigail Lara, MD - Director, Office of Professionalism  
Josette G. Harris, PhD – Associate Director, Office of Professionalism  
Abigail Beacham, PhD - Associate Director, Office of Professionalism

2.6 Ombuds Office

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

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

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

2.7 Student Mental Health Services

**CONTACT INFORMATION:** (303) 724-4716

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

- Waiting time is minimal
- Enrolled students are usually seen within 2-3 days
- Same-day emergency appointments are usually available
- Initial consultation is always free
Students can choose either on-going treatment with professionals on the Anschutz Campus or private practitioners in the local community

CU Denver student insurance covers at least 20 visits/year (unlimited visits for certain diagnoses)

No co-pay or co-insurance for students

Students with other insurance are referred to an appropriate provider in the community.

SECTION 3: STUDENT ADVOCACY

3.1 School of Medicine Student Advocacy Office

CONTACT INFORMATION: Jon Repine, MD (303) 724-4788 (Cell: 303-917-4257)

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

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

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

SECTION 4: OTHER STUDENT SERVICES

4.1 COLORADO PHYSICIAN HEALTH PROGRAM (CPHP)

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

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

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

The CHA/PA Program is utilizing a developmental assessment method for clinical experiences. This allows preceptors to assess our students’ skills, attitudes and behaviors in a developmental approach, focusing on the skills that the student demonstrates in the clinical experience. The assessment allows students to identify areas of improvement and strengths, guide their future educational goals, and provide a measure of their progression through 6 of 8 CHA/PA Competencies over three (3) clinical years.

<table>
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<tr>
<th>Participation</th>
<th>Typical Learner Level</th>
<th>Narrative Description of the Learner</th>
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</table>
| Student observed preceptor perform activity, but lacked knowledge/skills to perform | • Majority of 1st Year CHA/PA students  
• 2nd Year CHA/PA students in surgical or highly specialized practice | Learner is not participating in direct patient care, rather s/he is participating in active observation of the preceptor’s patient care, interpersonal and communication skills, and interprofessional collaborations. |
| Student participated with the preceptor in performing activity, but lacked the knowledge and/or skills to fully accomplish activity | • Some 1st Year CHA/PA students  
• All 2nd Year CHA/PA students | ➢ Learner can accurately gather and clearly communicate the majority of the history of present illness (HPI) to the preceptor but may still be working on efficient and accurate physical exam skills.  
➢ Learner generates a working differential for a simple or common clinical presentation (i.e. sore throat, ear pain, painful urination), but more complex cases may be difficult for the learner with more gaps in the medical decision-making and management plan.  
➢ Learner is able to formulate a SOAP note and a rudimentary oral report, recognizing normal and abnormal findings, but may not have a full understanding of what information is pertinent to include, correct placement of information or how to communicate abnormal findings.  
➢ Learner is respectful in interprofessional interactions but may not fully understand health care members’ roles to collaborate fully. |
| Student performed activity with direct help of the preceptor, who stepped in as needed | • Advanced 2nd Year CHA/PA students for common problems  
• All 3rd Year CHA/PA students—early in 3rd Year | ➢ Learner can accurately gather and communicate the history of present illness (HPI) and pertinent positive or negative facts for common presentations but may still need guidance on details of more complex presentations.  
➢ Learner has a solid foundation in basic exam skills and common special tests but may need the preceptor to demonstrate or refine exam techniques and efficiency.  
➢ Learner begins prioritizing the working differential and labeling new problems for a simple or common clinical presentation (i.e. sore throat, ear pain, pain with urination), but complex cases may be difficult for learner with more gaps in the medical decision-making and management plan.  
➢ Learner is able to complete the S &O of the SOAP note and oral presentation but may need the preceptor to provide context and medical decision-making rationale for the assessment and plan.  
➢ Learner is respectful in interprofessional collaborations and begins to recognize and draw on the roles of team members with preceptor’s help. |
<p>| Student performed activity and only needed the preceptor | • All 3rd Year CHA/PA students—late in 3rd Year | ➢ Learner accurately gathers and clearly communicates history and exam findings for common presentations, with preceptor confirming findings. |</p>
<table>
<thead>
<tr>
<th>Student performed activity independently, but under the supervision of the preceptor</th>
<th>Highly advanced 3rd Year CHA/PA students at end of their training</th>
</tr>
</thead>
</table>
| • Learner generates broad differential and uses objective data to narrow differential to most reasonable options.  
• Learner uses rationale medical decision making to provide at least three management options for the diagnosis.  
• Learner completes the S, O & A sections of the SOAP note and oral presentation independently but may need preceptor to provide context and medical decision-making rationale for plan of choice.  
• Learner is respectful in interprofessional interactions and collaborates with team members independently after discussing plan with preceptor. |

<table>
<thead>
<tr>
<th>Student is not on track to achieve competency in activity</th>
<th>Early observational experiences may reveal a student has not yet been exposed to the knowledge or skills needed for competency</th>
</tr>
</thead>
</table>
| • Learner is unable to answer “why” questions regarding risk factors, etiology, pathophysiology or clinical findings for clinical presentations already covered in didactic curriculum.  
• Learner is unable to identify gaps in medical knowledge.  
• Learner is unable to develop improvement goals and when given suggestions fails to work toward those goals. |

<table>
<thead>
<tr>
<th>Student is on track to achieve competency in activity</th>
<th>Early 2nd through mid-3rd Year CHA/PA students</th>
</tr>
</thead>
</table>
| • Learner is still acquiring skills or knowledge, but shows evidence of some working knowledge, as s/he can answer some “why and how” questions related to basic science and clinical medicine.  
• Learner is self-directed and motivated to make improvements. With adequate exposures, authentic practice and commitment to the time needed to fill in gaps, the learner will achieve all aspects of the competency. |

| Student has achieved competency in activity | All levels of CHA/PA students are expected to behave in a professional manner and have achieved Professionalism competency  
• Majority of 3rd Year CHA/PA students |
| --- | --- |
| • Learner is timely, well dressed, honest, follows instructions, takes feedback well and is respectful to everyone.  
• Learner conveys compassion, empathy, sensitivity and openness to culturally diverse patients. |
**Appendix IV: Professional Development Evaluation Form - Didactic**

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

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

**ALTRUISM**

<table>
<thead>
<tr>
<th></th>
<th>Meets Expectation</th>
<th>Needs Improvement</th>
<th>Unable to evaluate</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. General Behavior</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

**ACCOUNTABILITY**

<table>
<thead>
<tr>
<th></th>
<th>Meets Expectation</th>
<th>Needs Improvement</th>
<th>Unable to evaluate</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Appropriate Work Ethic</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

**3. Responsivity to Correction**

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

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

**EXCELLENCE**

<table>
<thead>
<tr>
<th></th>
<th>Meets Expectation</th>
<th>Needs Improvement</th>
<th>Unable to evaluate</th>
</tr>
</thead>
<tbody>
<tr>
<td>4. Initiative/Independence</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

**5. Understanding Limitations**

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

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

**DUTY**

<table>
<thead>
<tr>
<th></th>
<th>Meets Expectation</th>
<th>Needs Improvement</th>
<th>Unable to evaluate</th>
</tr>
</thead>
<tbody>
<tr>
<td>6. Attitude/Enthusiasm</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

**7. Attendance/Promptness**

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

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

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

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

### RESPECT FOR OTHERS
9. Individual Professional Demeanor

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

*Expected Behavior*: Demonstrates respect and sensitivity for others

### 10. Appropriate Classroom/Group Behavior

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

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

**Comments:**

---

**Signature:**

**Date:**

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

*Adapted from “Project Professionalism”, American Board of Internal Medicine, 1996.*

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80
## Appendix V: Professional Development Evaluation Form - Clinical

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

<table>
<thead>
<tr>
<th>Student:</th>
<th>Date:</th>
<th>Qtr/Yr:</th>
</tr>
</thead>
</table>

### ALTRUISM

#### 1. General Behavior

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

**Expected Behavior:** Concerned first with the best interests of others; puts patient needs above personal needs; is actively involved in advocating for their patients.

### ACCOUNTABILITY

#### 2. Appropriate Work Ethic

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

**Expected Behavior:** Meets commitment for all assigned tasks at an appropriate level; Completes assigned work in a thorough and timely manner.

#### 3. Responsivity to Correction

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

**Expected Behavior:** Accepts responsibility for errors or failure; Asks for and incorporates constructive feedback; Makes corrective changes when appropriate.

### EXCELLENCE

#### 4. Initiative/Independence

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

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

#### 5. Understanding Limitations

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

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

### DUTY

#### 6. Attitude/Enthusiasm

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

**Expected Behavior:** Embraces work with a positive attitude and is engaged in the clinical experience; Appreciates the role of the preceptor.
7. **Attendance/Promptness**

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

*Expected Behavior:* Student will follow the procedures set forth in the Student Academic Policies & Procedures regarding attendance in clinical experiences.

8. **Professional Behavior**

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

*Expected Behavior:* Student will follow all the policies and procedures detailed in the Student Academic Policies & Procedures, as well as any additional policies and procedures for a clinical site; Demonstrates appropriate clinical behavior, including, but not limited to, completing documentation and trainings required by a clinical site, maintaining appropriate dress, adhering to the policies and procedures outlined by a clinical site without fail, wears nametag/badges.

9. **Honor & Integrity**

9. **Uphold professional standards**

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

*Expected Behavior:* Behave in a manner that is in accordance with professional standards; chart and present truthfully; interact with patients and families in accordance with written laws and unwritten professional code of conduct.

10. **Respect for Others**

10. **Individual Professional Demeanor**

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

*Expected Behavior:* Demonstrates respect and sensitivity for others; Honors HIPAA and confidentiality laws.

11. **Appropriate Interprofessional Behavior**

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

*Expected Behavior:* Interacts with interprofessional team members in a respectful and collaborative manner.

**Comments:**

**Signature:**

**Date:**

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

*Adapted from "Project Professionalism", American Board of Internal Medicine, 1996*
Appendix VI: Student Immunization for International University Travel

Policy

ADMINISTRATIVE POLICY STATEMENT

Policy Title: Student Immunization for International University Travel

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

Effective: July 1, 2018

Approved by: Jonathan Bowser

Last Reviewed/Updated: June 15, 2018

Applies to: CHA/PA Faculty & Students

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

I. POLICY

All CHA/PA students who will travel internationally on clinical and/or other learning experiences that have been approved by the University and/or CHAPA program shall be required to provide proof of vaccination to the CHA/PA Program at least 4 weeks prior to beginning their experience. The vaccinations required for the specific country or region in which the student will travel, will be determined by the Global Health Track course director or his/her designee, according to the current recommendations posted on the CDC website under the section Traveler’s Health, For Clinicians (https://wwwnc.cdc.gov/travel/)

The CHA/PA program will not mandate malaria prophylaxis for students traveling to malaria-endemic regions; however, the program highly recommends that students follow the CDC recommendations and those of their healthcare providers regarding malaria prophylaxis.

II. VACCINATIONS

Guatemala for extended stay/study abroad

<table>
<thead>
<tr>
<th>Vaccination</th>
<th>Recommendation</th>
<th>Guidance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hepatitis A</td>
<td>Most travelers</td>
<td>2 doses separated by &gt;6 mo.</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>SOM requirement for matriculation</td>
<td>See SOM Clinical Requirements for matriculation</td>
</tr>
<tr>
<td>Typhoid</td>
<td>Recommended for most travelers, especially those who are staying with friends or relatives; visiting smaller cities, villages, or rural areas where exposure might occur through food or water; or prone to &quot;adventurous eating&quot;</td>
<td>Oral, live attenuated: 1 capsule q 48 hours x 4; booster q 5 years --OR-- IM, capsular polysaccharide: 0.5 mL x 1; booster q 2 years</td>
</tr>
</tbody>
</table>
### Nepal for extended stay/study abroad

<table>
<thead>
<tr>
<th>Vaccination</th>
<th>Recommendation</th>
<th>Guidance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hepatitis A</td>
<td>Most travelers</td>
<td>2 doses separated by &gt;6 mo.</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>SOM requirement for matriculation</td>
<td>See SOM Clinical Requirements for matriculation</td>
</tr>
<tr>
<td>Japanese encephalitis</td>
<td>Recommended for travel to southern lowlands between June-October</td>
<td>2 doses administered IM on days 0 and 28</td>
</tr>
<tr>
<td>Typhoid</td>
<td>Recommended for most travelers, especially those who are staying with friends, relatives, hostels and host homes; visiting smaller cities, villages, or rural areas where exposure might occur through food or water; or prone to &quot;adventurous eating&quot;</td>
<td>Oral, live attenuated: 1 capsule q 48 hours x 4; booster q 5 years --OR-- IM, capsular polysaccharide: 0.5 mL x 1; booster q 2 years</td>
</tr>
</tbody>
</table>

### Tanzania for extended stay/study abroad

<table>
<thead>
<tr>
<th>Vaccination</th>
<th>Recommendation</th>
<th>Guidance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hepatitis A</td>
<td>Most travelers</td>
<td>2 doses separated by &gt;6 mo.</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>SOM requirement for matriculation</td>
<td>See SOM Clinical Requirements for matriculation</td>
</tr>
<tr>
<td>Cholera</td>
<td>Recommended for travel to most parts of Tanzania</td>
<td>1 single oral dose given 10 days prior to potential exposure</td>
</tr>
<tr>
<td>Typhoid</td>
<td>Recommended for most travelers, especially those who are staying with friends or relatives; visiting smaller cities, villages, or rural areas where exposure might occur through food or water; or prone to &quot;adventurous eating&quot;</td>
<td>Oral, live attenuated: 1 capsule q 48 hours x 4; booster q 5 years --OR-- IM, capsular polysaccharide: 0.5 mL x 1; booster q 2 years</td>
</tr>
</tbody>
</table>

### III. REVIEW

This document will be reviewed yearly by the Global Health Track course director and updated in accordance with the CDC guidelines.
Appendix VII: Observance of Religious Holidays

ADMINISTRATIVE POLICY/PROCEDURE
STATEMENT

Policy Title: Observance of Religious Holidays

Brief Description: The University of Colorado Child Health Associate/Physician Program has a legal and moral obligation to accommodate all students who must be absent from classes, clinical rotations, and/or miss exams to observe religious holidays.

Effective: April 1, 2019

Approved by: Jonathan Bowser

Last Reviewed/Updated: March 26, 2019

Applies to: CHA/PA Faculty, Staff & Students

Reason for Policy: The CHA/PA Program has adopted and modified the policy created by the University of Colorado Boulder around student absences from classes, clinical rotations, and/or exams to observe religious holidays. This policy serves to provide clarity to faculty, staff and students around student requests for absences to observe religious holidays and how best to serve our students around these absences.

I. POLICY: Course Directors (didactic and clinical) shall make every effort to accommodate students who, because of religious obligations, have conflicts with scheduled clinical rotation assignments, course exams, didactic assignments, CAPE examinations, summative assessments, or other required attendance, provided they notify the course director, advisor, and/or faculty member responsible for the content within 6 months of the schedule conflict.
   A. If an exam (course, CAPE, summative) is scheduled on a religious holiday and the course director/advisor/faculty member was notified within the appropriate timeframe, the faculty member will provide a reschedule option for the affected student.
   B. If class attendance is required, classes missed to observe a religious holiday should not be counted as an absence, so long as the course director was notified in the appropriate timeframe.
   C. If the student and the course director/advisor/faculty member cannot agree on an accommodation, the student may bring the matter to the Program Director for a decision.
APPENDIX VIII: Mistreatment Policy

(Adapted from the School of Medicine Policies and Procedures: http://www.ucdenver.edu/academics/colleges/medicalschool/education/studentaffairs/studentresources/Documents/StudentHandbook.pdf)

A8.1 Standards of Behavior and the Definition of Mistreatment

The University of Colorado Child Health Associate/Physician Assistant Program (CHA/PA) has a responsibility to provide an environment conducive to effective learning and compassionate, high quality patient care by creating an atmosphere of mutual respect and collegiality among faculty, residents, students, and staff. The CHA/PA Program is committed to creating a learning, research and clinical care environment that is supportive, that promotes learner well-being and that is free from ridicule, exploitation, intimidation, sexual or other forms of harassment, physical harm and threats of physical harm. To that end, the CHA/PA Program will not tolerate the mistreatment of students, nor will it tolerate retaliation against any learner because they reported, in good faith, a violation of the school’s professionalism standards. The CHA/PA Program shall also:

- provide mechanisms and procedures by which learners may safely report mistreatment against them or others;
- provide information to students about what will happen to their reports of mistreatment; and
- use data from these reports to educate faculty, residents, professional staff and others about what constitutes mistreatment, with the goal of reinforcing a culture of respect.

A8.1a Definition of Mistreatment

The American Association of Medical Colleges states, “Mistreatment, either intentional or unintentional, occurs when behavior shows disrespect for the dignity of others and unreasonably interferes with the learning process.” Examples of mistreatment include:

- public belittlement or humiliation;
- verbal abuse (e.g., speaking to or about a person in an intimidating or bullying manner);
- physical harm or the threat of physical harm; requests to perform personal services;
- being subject to offensive sexist remarks, or being subjected to unwanted sexual advances (verbal or physical);
- retaliation or threats of retaliation against students;
- discrimination or harassment based on race, religion, ethnicity, sex, age, or sexual orientation; and the use of grading or other forms of assessment in a punitive or discriminatory manner.

A8.1b Suboptimal Learning Environment

Although it is not mistreatment, a suboptimal work or learning environment can interfere with learning, compromise patient care, marginalize students and cause significant distress among students. Student feedback about suboptimal learning environments should be given to course or block directors, to the Program Director as appropriate or reported in your course or block evaluation.
A8.1c  Procedures for Reporting Student Mistreatment

If a student feels that they have been subject to mistreatment in the learning or clinical environment, the student should contact the Office of Professional Excellence. The Office can serve as an advocate for fair and equitable treatment for medical students and can facilitate confidential and safe reporting of mistreatment or abuse. For further information, go to the Office of Professionalism. To make an online report, go to Report an Incident or Mistreatment

For FAQs, go to Medical Student Mistreatment

If a student feels that they have witnessed or been subject to sexual misconduct, or discrimination or harassment based on a protected characteristic, the student should contact the University’s Office of Equity. Policies and procedures can be located here: http://www.cuanschutz.edu/policy/TitleIX/Pages/default.aspx
Contact by phone: 1-888-CU-TITLE
Contact by email at equity@cuanschutz.edu
To make an online report, click on the Submit a Report or Request button
APPENDIX IX: CHA/PA Program Directory

SECTION 1: CHA/PA PROGRAM CONTACT INFORMATION

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

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

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

SECTION 2: CORE FACULTY

PROGRAM DIRECTOR
Jonathan Bowser, MS, PA-C
Associate Professor, Pediatrics
jonathan.Bowser@cuanschutz.edu
LEADS Track CHA/PA Course Director
Leadership Team

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

ASSOCIATE PROGRAM DIRECTOR
Jacqueline (Jackie) Sivahop, MS, PA-C
Associate Professor, Pediatrics
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Leadership Team

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Amy Akerman, MPAS, PA-C
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Global Health Track Course Director and International Course Director
CAPE LIAISON
Kelsey Dougherty, MSPAS, PA-C
Assistant Professor, Pediatrics
Kelsey.Dougherty@cuanschutz.edu

CLINICAL COURSE DIRECTOR
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Pediatric Critical and Acute Care Longitudinal Experience Course Director

CLINICAL SITE EDUCATOR
Joyce Nieman, MHS, PA-C
Associate Professor, Pediatrics
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Rural Health Track CHA/PA Course Director

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Associate Professor, Family Medicine
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Leadership Team

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Guatemala Clinical Experience Course Director

SECTION 3:  CHA/PA PROGRAM STAFF

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CLINICAL COORDINATOR
Janice Baker, MHR
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CLINICAL SERVICES COORDINATOR
Nikita Reid
Nikita.Parksreid@cuanschutz.edu

DIDACTIC SERVICES COORDINATOR
Giselle Cabrero
Giselle.Cabrero@cuanschutz.edu

DIRECTOR OF ADMISSIONS AND COMMUNICATIONS
Kay Denler
kay.denler@cuanschutz.edu
APPENDIX X: CHA/PA Program Information

SECTION 1: HISTORY OF THE CHA/PA PROGRAM

Dr. Henry K. Silver – Our Founder

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

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

69
The CHA/PA Program was the first and remains the only PA Program with expanded curriculum regarding the health care needs of children. Dr. Silver recognized the need to document the educational, legal and health care ramifications of these new professions. He and his colleagues published multiple articles on these topics as well as documenting the competency, efficiency and effectiveness of the Child Health Associate (PA). Dr. Silver died of cancer at the age of 72 in 1991.

SECTION 2: STUDENT ORGANIZATIONS OF THE CHA/PA PROGRAM

2.1 Silver Society

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

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

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

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

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

2.2 CHA/PA Program Student Association and Executive Council

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

**SECTION 3: THE PHYSICIAN ASSISTANT PROFESSIONAL OATH**

*Physician Assistant Professional Oath*

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

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

*These duties are pledged with sincerity and upon my honor.*

**SECTION 4: PHYSICIAN ASSISTANT PROFESSIONAL ORGANIZATIONS**

4.1 **American Academy of Physician Assistants (AAPA)**

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

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

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

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

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

4.2 Student Academy of the American Academy of Physician Assistants

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

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

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

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

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

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

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

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

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

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

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

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

Today, CAPA represents Colorado PAs before the State Legislature and the Board of Medical Examiners, as well as monitoring their decisions and disseminating information. CAPA also provides information to the Colorado Medical Society, local medical societies, and insurance companies.
CAPA’s membership includes more than 500 PAs who are widely distributed across the state, working in both primary care and specialty areas. A Board of Directors that acts on behalf of the membership governs the organization.

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

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

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