PREFACE

The CUNY School of Medicine Physician Assistant Program outlines school-wide and program-specific policies and regulations for the students in the Program. The handbook is designed to supplement rather than supplant existing college policies and procedures, including those found in the Graduate Bulletin of the City College of New York. The September 2016 edition of the handbook supplants any previous version of the Handbook.

While this Handbook covers polices for the entire curriculum, there are more specific guidelines and additional regulations for the clinical year. A separate Clinical Year Handbook with additional policies specific to the clinical year will be distributed and reviewed during the clinical year orientation.

Students will be bound to the academic policies delineated in the handbook of their admitting cohort. Therefore, all students entering in 2016 will be bound by this edition of the handbook even if they should prolong their tenure in the PA Program.
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The CUNY School of Medicine
Physician Assistant Program

Mission:

The mission of the CUNY School of Medicine Physician Assistant Program is to improve the health of underserved communities and to eliminate healthcare disparity by providing increased access to physician assistant education to students from historic underrepresented populations. Through education and mentoring, we will create a workforce that will provide highly skilled health services to the communities of greatest need.

Program Goals:

We are committed to graduating students with the following attributes:

- **Patient Care** – We are committed to practice high quality compassionate care, and to develop sensitivity and competence in communication skills with diverse populations

- **Scholarship** - We are committed to providing the skills necessary to apply new knowledge at the point of care and to engage in scholarly activity relevant to health and disease

- **Community** - We inspire graduates to work in health workforce shortage communities and with patient populations out of the mainstream of health care delivery. We encourage graduates to be advocates at the local, regional, and national level for the best care for patients and their community and to be activists for social justice

- **Leadership** - We promote the assumption of leadership positions within the profession and the community

- **Professionalism** - We are committed to creating an environment where collegiality, respect and ethical practice are fostered and valued

- **Interdisciplinary teams** - We value collaborative learning and working styles that facilitate full participation in interdisciplinary medical teams

- **Life-long learning** - We actively encourage intellectual curiosity and critical thinking necessary for life-long learning leading to the continual improvement of patient care.
PHYSICIAN ASSISTANT GRADUATE FUNCTIONS AND TASKS

Any graduate of the CUNY School of Medicine Physician Assistant Program will be expected to demonstrate competence in the following functions and tasks:

- Elicit a detailed and accurate medical history, perform a complete physical examination, and record all pertinent data in written or electronic form as a medical note
- Interview using the patient-centered model of care
- Generate an appropriate differential diagnosis using evidence-based practice
- Perform and interpret diagnostic studies, including routine laboratory procedures, common radiological studies, and electrocardiograms
- Determine most likely diagnosis
- Plan and implement therapeutic measures
- Counsel patients regarding physical and mental health, including diet, disease prevention, normal growth/development, and family planning
- Work in collaboration with the interdisciplinary healthcare team
- Perform life-saving maneuvers such as cardiopulmonary resuscitation
- Facilitate the appropriate referral of patients and maintain awareness of existing healthcare delivery systems and social welfare resources
- Communicate effectively in oral and written forms
- Display professionalism in all aspects of patient care.

HISTORY OF THE PROGRAM

The Physician Assistant Program at Harlem Hospital Center was founded in 1970 as a joint project of the Harlem Hospital Center and the Columbia University School of Public Health. The Harlem Program is one of the oldest in the country, being founded only five years after the birth of the profession. The Program was developed to train individuals with health care experience to practice primary care in communities of greatest need. The first class of four was admitted in 1971, graduating in 1973.

In 1972, the Program developed an academic affiliation with Antioch College which continued until the New School for Social Research assumed responsibility from 1974-1978. In 1978 the Program developed a partnership with the Sophie Davis School of Biomedical Education of the City College of New York (CCNY) which continues today.

In 2016, the program transitioned to a master’s degree granting program. In the same year, the Sophie Davis BS/MD program transitioned to become the CUNY School of Medicine. The name of the PA Program changed to the CUNY School of Medicine Physician Assistant Program. Although the degree of both programs changed, the mission of the School of Medicine and of the PA Program remains the same.
TECHNICAL STANDARDS

Students at CUNY School of Medicine Physician Assistant Program must have capacities/abilities in five broad areas:

A. Perception/observation
B. Communication
C. Motor/tactile function
D. Cognition
E. Professionalism (Mature and Ethical Conduct)

A. Perception/Observation

Students must be able to accurately perceive, by the use of senses and mental abilities, the presentation of information through:

- Small group discussions and presentations
- Large-group lectures
- One-on-one interactions
- Demonstrations
- Laboratory experiments
- Patient encounters (at a distance and close at hand)
- Diagnostic findings
- Procedures
- Written material
- Audiovisual material

Representative examples of materials/occasions requiring perceptual abilities beginning in year 1 include, but are not limited to: books, diagrams, discussions, physiologic and pharmacological demonstrations, microbiologic cultures, gross and microscopic studies of organisms and tissues, chemical reactions and representations, photographs, x-rays, cadaver prosections, live human case presentations, and patient interviews.

Additional examples from year 2 include, but are not limited to: physical exams; rectal and pelvic exams; examinations with stethoscopes, otoscopes, fundoscopes, sphygmomanometers, and reflex hammers; verbal communication and non-verbal cues (as in taking a patient's history or working with a medical team); live and televised surgical procedures; childbirth; x-rays, MRIs, and other diagnostic findings; online computer searches.

B. Communication

Students must be able to communicate skillfully (in English) with faculty members, other members of the healthcare team, patients, families, and other students, in order to:

- Elicit information
- Convey information
- Clarify information
- Create rapport
Examples of areas in which skillful communication is required beginning in year 1 include, but are not limited to: answering oral and written exam questions, eliciting a complete history from a patient, presenting information in oral and written form to faculty/preceptors, participating in sometimes fast-paced small-group discussions/interactions, participating in group dissections, participating in labs.

Additional examples of areas in which skillful communication is required in year 2 include, but are not limited to: participating in clinical rounds and conferences, writing patient H&Ps (histories and physicals), making presentations (formal and informal) to physicians and other professionals, communicating daily with all members of the healthcare team, talking with patients and families about medical issues, interacting in a therapeutic manner with psychiatric patients, providing educational presentations to patients and families, participating in videotaped exercises, interacting with clerkship administrators, writing notes and papers.

C. Motor/tactile function

Students must have sufficient motor function and tactile ability to:

- Attend (and participate in) all classes, groups, and activities which are part of the curriculum
- Read and write
- Examine patients
- Do basic laboratory procedures and tests
- Perform diagnostic procedures
- Provide general and emergency patient care
- Function in outpatient, inpatient, and surgical venues
- Perform in a reasonably independent and competent way in sometimes chaotic clinical environments
- Demonstrate competencies including manual dexterity

Examples of activities/situations requiring students' motor/tactile function beginning in year 1 include, but are not limited to: transporting themselves from location to location, participating in classes, small groups, patient presentations, review sessions, prosections, laboratory work, and microscopic investigations, using a computer, performing a complete physical exam including observation, auscultation, palpation, percussion, and other diagnostic maneuvers, performing simple lab tests, using light microscopes, performing cardiopulmonary resuscitation.

Additional examples of experiences requiring motor/tactile function in year 2 include, but are not limited to: accompanying staff on rounds and conferences, performing venipunctures, thoracenteses, paracenteses, endotracheal intubations, arterial punctures, Foley catheter insertions, and nasogastric tube insertions, taking overnight call in the hospital, performing physical, neurological, gynecological, pediatric, and obstetric examinations (with the appropriate instruments), dealing with agitated patients in emergency situations; maintaining appropriate medical records, acting as second assistant in the OR (retracting, suturing, etc.).
D. Cognition

Students must be able to demonstrate higher-level cognitive abilities, which include:

- Rational thought
- Measurement
- Calculation
- Visual-spatial ability
- Conceptualization
- Analysis
- Synthesis
- Organization
- Representation (oral, written, diagrammatic, three dimensional)
- Memory
- Application
- Clinical reasoning
- Ethical reasoning
- Sound judgment

Examples of applied cognitive abilities beginning in year 1 include, but are not limited to: understanding, synthesizing, and recalling material presented in classes, labs, small groups, patient interactions, and meetings with faculty/preceptors; understanding 3-dimensional relationships, such as those demonstrated in the anatomy lab; successfully passing oral, practical, written, and laboratory exams; understanding ethical issues related to the practice of medicine; engaging in problem solving, alone and in small groups; interpreting the results of patient examinations and diagnostic tests; analyzing complicated situations, such as cardiac arrest, and determining the appropriate sequence of events to effect successful treatment; working through genetic problems.

Additional examples of required cognitive abilities in year 2 include, but are not limited to: integrating historical, physical, social, and ancillary test data into differential diagnoses and treatment plans; understanding indications for various diagnostic tests and treatment modalities - from medication to surgery; understanding methods for various procedures, such as lumbar punctures and inserting intravenous catheters; being able to think through medical issues and exhibit sound judgment in a variety of clinical settings, including emergency situations; identifying and understanding psychopathology and treatment options; making concise, cogent, and thorough presentations based on various kinds of data collection, including web-based research; knowing how to organize information, materials, and tasks in order to perform efficiently on service; understanding how to work and learn independently; understanding how to function effectively as part of a healthcare team.
### PROGRAM CURRICULUM

#### First Semester (FALL) 13 credits

<table>
<thead>
<tr>
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<tbody>
<tr>
<td>Anatomy</td>
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<tr>
<td>Physiology I</td>
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<tr>
<td>Pharmacology I</td>
<td>2</td>
<td>PA 5031</td>
</tr>
<tr>
<td>Clinical Medicine I</td>
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<td>PA 5041</td>
</tr>
<tr>
<td>Patient Interviewing</td>
<td>2</td>
<td>PA 5051</td>
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#### Second Semester (SPRING) 14 credits

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<tr>
<td>Physical Diagnosis</td>
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<td>PA 5032</td>
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<tr>
<td>Pharmacology II</td>
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<td>PA 5042</td>
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<tr>
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#### Third Semester (SUMMER) 15 credits

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<tr>
<td>Cross-Cultural Competencies in Counseling</td>
<td>2</td>
<td>PA 5023</td>
</tr>
<tr>
<td>Clinical Medicine III</td>
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<tr>
<td>Integrated Medicine</td>
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<td>PA 5043</td>
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<tr>
<td>Technical Skills</td>
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<td>PA 5053</td>
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<tr>
<td>Medical Spanish</td>
<td>1</td>
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### CLERKSHIP YEAR

#### Fourth Semester (FALL) 3 credits

#### Fifth Semester (SPRING) 4 credits

#### Sixth Semester (SUMMER) 29 credits

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<tr>
<td>Internal Medicine Clerkship</td>
<td>4</td>
<td>PA 6021</td>
</tr>
<tr>
<td>Pediatrics Clerkship</td>
<td>3</td>
<td>PA 6031</td>
</tr>
<tr>
<td>Surgery Clerkship</td>
<td>4</td>
<td>PA 6041</td>
</tr>
<tr>
<td>Primary Care Clerkship</td>
<td>3</td>
<td>PA 6051</td>
</tr>
<tr>
<td>Obstetrics/Gynecology Clerkship</td>
<td>4</td>
<td>PA 6061</td>
</tr>
<tr>
<td>Psychiatry Clerkship</td>
<td>3</td>
<td>PA 6071</td>
</tr>
<tr>
<td>Geriatrics Clerkship</td>
<td>2</td>
<td>PA 6081</td>
</tr>
<tr>
<td>Critical Care Clerkship</td>
<td>2</td>
<td>PA 6091</td>
</tr>
<tr>
<td>Elective Clerkship</td>
<td>1</td>
<td>PA 6101</td>
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</table>

#### Seventh Semester (FALL) 9 credits

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</thead>
<tbody>
<tr>
<td>Epidemiology</td>
<td>3</td>
<td>PA 7011</td>
</tr>
</tbody>
</table>
THE DIDACTIC CURRICULUM

The didactic phase is comprised of classroom and laboratory instruction in basic science, behavioral science and clinical medicine. Classes are held, for the most part, from Monday through Friday between the hours of 8:00 and 5:00, although some classes require evening, early morning or weekend sessions. Students are required to attend all classes. Students should have no other commitments during these hours. See “Attendance Policy” for specific program requirements.

At the beginning of each course, students receive a syllabus and course outline describing the purpose of the course, the format, the objectives, and required readings. Students also receive instructional learning objectives for each course, which provide the basis for examinations and guide the student in studying.

Students are responsible for each objective delineated in the syllabus regardless of whether it is covered in class. Faculty members will determine the method of teaching and evaluation for the courses they teach. Some evaluation methods will be traditional, such as written tests, and others will not. Students are expected to meet the competencies determined by each instructor, in the manner required.

To appropriately prepare students to practice as physician assistants, the course load during the didactic year is rigorous with substantial reading assignments. Reading before each class is essential. Reviewing course topics each evening is the best preparation for written examinations. “Cramming” the night before will not give sufficient time to learn all the material needed. The course objectives found in the syllabus are the best guide for comprehensive preparation and gaining foundational clinical knowledge.

There are a number of skills that physician assistants need- medical knowledge, oral and written communication skills, clinical skills such as performing a physical examination, technical procedural skills, and most importantly, critical thinking skills. Each component is equally important. The comprehensive exam at the end of the curriculum assesses each of these modalities. Therefore, prepare for each class session equally.

THE CLINICAL YEAR

The clinical year is comprised of five-week clerkships in internal medicine, pediatrics, obstetrics and gynecology, psychiatry, primary care, emergency medicine and surgery, as well as five-week blocks in geriatrics, critical care and an elective. Clerkships are conducted off campus in various settings such as hospitals, private offices and clinics. The PA Program has sole responsibility for obtaining clinical sites and preceptors. At no time are students required to find clinical experiences.

Students are required to report to the site as instructed by their preceptors. Some rotations will require students to work during weekends, holidays, overnight, or late into the evenings. Students return to campus for “call back” days, which are held periodically throughout the clinical year. These daylong sessions consist of oral presentations, end of rotation examinations, and special lectures related to clinical
medicine. A separate handbook will be distributed during a clinical year orientation at the end of the didactic year detailing the specifics for the clinical year.

**ACADEMIC CALENDAR**

**Fall 2016**

<table>
<thead>
<tr>
<th>DATES</th>
<th>DAYS</th>
<th>Event Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>August 19</td>
<td>Friday</td>
<td>Last day to withdraw for 100% tuition refund</td>
</tr>
<tr>
<td>August 22</td>
<td>Monday</td>
<td>First day of classes for 1&lt;sup&gt;st&lt;/sup&gt; year PA students</td>
</tr>
<tr>
<td>August 28</td>
<td>Sunday</td>
<td>Last day for total withdrawal for 75% tuition refund</td>
</tr>
<tr>
<td>September 5</td>
<td>Monday</td>
<td>Labor Day - Medical School closed</td>
</tr>
<tr>
<td>September 4</td>
<td>Sunday</td>
<td>Last day for total withdrawal for 50% tuition refund</td>
</tr>
<tr>
<td>September 11</td>
<td>Sunday</td>
<td>Last day for total withdrawal for 25% tuition refund</td>
</tr>
<tr>
<td>September 13</td>
<td>Tuesday</td>
<td>Course withdrawal period begins (A grade of &quot;W&quot; is assigned to students who officially drop a class)</td>
</tr>
<tr>
<td>October 10</td>
<td>Monday</td>
<td>Columbus Day – Medical School closed</td>
</tr>
<tr>
<td>October 24</td>
<td>Monday</td>
<td>Last day to withdraw from a class with a grade of &quot;W&quot;</td>
</tr>
<tr>
<td>November 24-25</td>
<td>Thursday-Friday</td>
<td>Thanksgiving Day - Medical School closed</td>
</tr>
<tr>
<td>December 12-16</td>
<td>Friday</td>
<td>Finals Week</td>
</tr>
<tr>
<td>December 16</td>
<td>Friday</td>
<td>End of Term</td>
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**Spring 2017**

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<th>DATES</th>
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<th>Event Description</th>
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<tbody>
<tr>
<td>January 2</td>
<td>Monday</td>
<td>New Year's Day Observed - Medical School closed - Last day to withdraw for 100% tuition refund</td>
</tr>
<tr>
<td>January 3</td>
<td>Tuesday</td>
<td>First day of classes</td>
</tr>
<tr>
<td>January 9</td>
<td>Monday</td>
<td>Last day for total withdrawal for 75% tuition refund</td>
</tr>
<tr>
<td>January 10</td>
<td>Tuesday</td>
<td>Certification Of Attendance (COA) Roster available in CUNYfirst faculty self service</td>
</tr>
<tr>
<td>January 16</td>
<td>Monday</td>
<td>Martin Luther King Day - Medical School closed</td>
</tr>
<tr>
<td>January 17</td>
<td>Tuesday</td>
<td>Last day for total withdrawal for 50% tuition refund</td>
</tr>
<tr>
<td>January 17</td>
<td>Tuesday</td>
<td>Certification Of Attendance (COA) Rosters due in CUNYfirst Faculty self service</td>
</tr>
<tr>
<td>January 18</td>
<td>Wednesday</td>
<td>Classes follow a Monday Schedule</td>
</tr>
<tr>
<td>January 23</td>
<td>Monday</td>
<td>Last day for total withdrawal for 25% refund</td>
</tr>
<tr>
<td>January 24</td>
<td>Tuesday</td>
<td>Course withdrawal period begins (A grade of &quot;W&quot; is assigned to students who officially drop a class)</td>
</tr>
<tr>
<td>February 13</td>
<td>Monday</td>
<td>Lincoln's Birthday - Medical School closed</td>
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<tr>
<td>February 14</td>
<td>Tuesday</td>
<td>Classes follow a Monday Schedule</td>
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<tr>
<td>February 20</td>
<td>Monday</td>
<td>President's Day - Medical School closed</td>
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<tr>
<td>February 23</td>
<td>Thursday</td>
<td>Classes follow a Monday Schedule</td>
</tr>
<tr>
<td>March 22</td>
<td>Wednesday</td>
<td>Course withdrawal period ends. Last day to withdraw from a class with a grade of &quot;W&quot;</td>
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<tr>
<td>April 7 - 18</td>
<td>Friday - Tuesday</td>
<td>Spring Recess</td>
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<td>April 26 - May 2</td>
<td>Wednesday - Tuesday</td>
<td>Final’s week</td>
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<tr>
<td>May 2</td>
<td>Tuesday</td>
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Summer 2017

<table>
<thead>
<tr>
<th>DATES</th>
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<tbody>
<tr>
<td>May 5</td>
<td>Friday</td>
<td>Last day to withdraw for 100% tuition refund</td>
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<tr>
<td>May 8</td>
<td>Monday</td>
<td>First day of classes for 1st year PA students</td>
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<tr>
<td>May 12</td>
<td>Friday</td>
<td>Last day for total withdrawal for 75% tuition refund</td>
</tr>
<tr>
<td>May 19</td>
<td>Friday</td>
<td>Last day for total withdrawal for 50% tuition refund</td>
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<tr>
<td>May 26</td>
<td>Friday</td>
<td>Last day for total withdrawal for 25% refund</td>
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<tr>
<td>May 29</td>
<td>Monday</td>
<td>Memorial Day - Medical School closed</td>
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<td>May 30</td>
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<td>Independence Day – Medical School closed</td>
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<tr>
<td>August 14-18</td>
<td>Monday-Friday</td>
<td>Final's week</td>
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<td>August 18th</td>
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**TUITION AND FEES PER SEMESTER**

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<tr>
<td></td>
<td>$5,065/ per semester</td>
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<td>Academic Excellence Fee*</td>
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<td>Activity Fee*</td>
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<tr>
<td>Technology Fee*</td>
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<td>Consolidated Services Fee*</td>
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<td>Student Senate Fee*</td>
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**PROGRAM COSTS**

<table>
<thead>
<tr>
<th>Program</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>BCLS/ACLS</td>
<td>$150</td>
</tr>
<tr>
<td>Exam Master</td>
<td>$125</td>
</tr>
<tr>
<td>Books</td>
<td>$2,000</td>
</tr>
<tr>
<td>Equipment</td>
<td>$850</td>
</tr>
</tbody>
</table>

*Tuition and fees are subject to change without notice pursuant to City University Board of Trustee resolution and vendor increases.*
Tuition is set by the University Board of Trustees and is subject to change without notice of their actions. Students should arrange to pay their total tuition, fees and charges to complete their registration if they wish to be admitted to classes. The Bursar's Office is located on the ground floor of the Wille Administration Building. Telephone number: 212-650-8700.

Tuition Refunds
A full refund of appropriate tuition and fees will be made when courses are withdrawn by the College. In other cases, tuition refunds will be made or liability reduced only in accordance with the CUNY Board of Trustees regulations. Further information can be obtained from the Office of the Registrar. On approved applications, proportionate refunds of tuition will be made in accordance with the schedule below. The date on which the application is filed, not the last date of attendance, is considered the official date of the student's withdrawal and serves as the basis for computing any refund.

- Withdrawal before first day of classes (as published in the Academic Calendar) 100%
- Withdrawal before completion of the first full scheduled week of classes 75%
- Withdrawal before completion of the second full scheduled week of classes 50%
- Withdrawal before completion of third full scheduled week of classes 25%
- Withdrawal beyond third week 0%
- Consolidated and activity fees are not refundable.

New York State Residency Requirements
Students are assigned residency status when admitted to the College. Since residency determines tuition rates, students should know their classifications. If there is a question of status, it is the responsibility of the student to prove residency. An "Application for Proof of Bona Fide Residency" is available at the Office of the Registrar. New students must apply through the Office of Admissions.

FINANCIAL AID
The Financial Aid Office administers federal and state funds, as well as those provided by special programs and the College itself. Federal funds may be disbursed only to those students who maintain their academic standing and are not in default on a student loan or owe a refund on a federal grant.

The financial aid office of the CUNY School of Medicine is located in Harris Hall Suite 1B. For further Financial Aid information please contact the Medical School Financial Aid Director, Michelle Bolton at 212.650.7804 or at mbolton@med.cuny.edu.
## PROGRAM FACULTY AND STAFF CONTACT INFORMATION

CUNY School of Medicine Physician Assistant Program  
160 Convent Avenue, Harris Hall- 15  
New York, NY  10031

**Program office number:** (212) 650-7745  
**Program fax number:**  (212) 650-6697

<table>
<thead>
<tr>
<th>Position</th>
<th>Name</th>
<th>Contact Information</th>
</tr>
</thead>
</table>
| **Interim Assistant Dean and Program Director** | Tracy Jackson, PA-C, MS, CHES | (212) 650-6863  
tjackson@ccny.cuny.edu |
| **Academic Coordinator**                      | Birgland Joseph, MD   | (212) 650-5702      
bjoseph@med.cuny.edu |
| **Clinical Coordinator**                      | Emilia Medina-Colon, PA-C | (212) 650-8826  
medcolon@med.cuny.edu |
| **Interim Assistant to the Director/Administrative Coordinator** | Yasmine Azor, MSEd | (212) 600-7745      
yazor@med.cuny.edu |
| **Medical Director**                          | Maurice Wright, MD    | Maurice.Wright@nychhc.org |
| **College Assistant**                         | Deidre Washington, BA | (212) 650-7745  
dwashington@med.cuny.edu |
| **Director of Administration**               | Aletha Cook, BS       | (212) 650- 8859    
acook@med.cuny.edu |
| **Director of Recruitment**                  | Mary McDaniels Brown, MA | (212) 650-7746  
mmbrown@ccny.cuny.edu |
| **CUNY Office Assistant**                    | Fabiola Lopez         | (212) 650-8863     
flopez@med.cuny.edu |
II. PROGRAM POLICY

WORK POLICY

The program strongly discourages any type of outside employment during the course of studies in the program. Program responsibilities are not negotiable, and will not be altered due to student work obligations. Furthermore, working has been the chief cause for academic difficulty in past years.

Students who choose to volunteer or be paid employees during the course of their physician assistant training cannot use their affiliation with the program in any aspect of that employment. Any activity undertaken by the student, independent of the program, is not covered by the liability insurance offered for clinical work associated with physician assistant training. Furthermore, students may not be required to perform clerical or administrative work for the program.

Students may not substitute for regular clinical or administrative staff during the clinical year. Should such a request be made of a student, it should be reported to the program director immediately.

E-MAIL

E-mail is the preferred mode of communication between the program faculty/staff and students. All students must use their City College e-mail account, and must check this account daily. Students should empty mailboxes to allow for regular e-mail from program staff and faculty. Failure to check an e-mail account is not an allowable excuse for missing a program event or notification.

DRESS CODE

A clean, white, short lab jacket with PA Program logo must be worn at all times in class and during clinical rotations.

Clothing Specific Guidelines:

Shirts, Tops, and Jackets:
Acceptable: Collared shirts, dress shirts, sweaters, tops and turtlenecks are acceptable attire. Women’s dress length should be appropriate for professional wear. Most suit jackets or sport jackets are also acceptable attire. Men should wear slacks, dress shirts and a tie.

Unacceptable: Tank tops; midriff tops; shirts with potentially offensive words, terms, logos, pictures, cartoons or slogans; halter-tops; tops with bare shoulders; sweatshirts; plunging necklines, and t-shirts unless worn under another blouse, shirt, jacket or dress; bare-back dresses; blouses, tank-tops, muscle shirts and tube tops; denim or jeans; shorts or hats. Scrubs are prohibited outside of the hospital.

Shoes and Footwear:
Acceptable: Shoes with closed toes. Walking shoes, loafers, clogs, boots, flats, and dress shoes are acceptable. All shoes should be kept clean.
Unacceptable: Sneakers, gym-type footwear, slippers or sandals.
General Guidelines:

- Men may wear mustaches and beards that are neatly trimmed.
- Nails must be kept trimmed.
- Student must wear their hospital I.D. card and the Program I.D.
- If a more specific dress code is mandated by a clinical rotation site, that dress code should be adhered to.
- Repeated, documented violation of this dress code will be subject to action by the Committee on Course and Standing.

STUDENT TEACHING IN PROGRAM CURRICULUM

Some students may be particularly knowledgeable in an area of medicine or possess advanced clinical skills because of prior health care related experience. Although such expertise is commendable, PA students are not permitted to participate in the teaching of any component of the curriculum.

PROGRAM FACULTY AND STUDENT HEALTH CARE

No faculty member, including the Program Director and the Medical Director, are permitted to provide health care for CUNY School of Medicine PA Students. Provision of health care includes giving medical advice. Program faculty can refer students for medical and mental health care, if needed.

CONFIDENTIALITY

In compliance with The Family Educational Rights and Privacy Act (FERPA) of 1974 and Accreditation Standards for Physician Assistant Education, student materials, grades, records and files are considered privileged and confidential. All student records are stored in locked files when not in use. Faculty and clerical staff are the only individuals who have access to these files. No information contained within a student record will be given, either verbally or in writing, without the written consent of the student. Written consent for release of records will be kept in the student file. Written clearance is also necessary for the release of any medical information as discussed in the health clearance section of the Handbook.

ATTENDANCE POLICY

Attendance and punctuality is mandatory for all program activities. Absences or lateness must be reported to the course instructor, the academic coordinator and Ms. Lopez via e-mail, phone message, or in person prior to the start of class. It is unacceptable to report an absence or lateness for another student. Excessive absences whether excused or unexcused, and chronic lateness, will be referred to the Committee on Course and Standing. Please be advised that merely reporting an absence does not constitute approval.

The first unexcused absence will result in a conference between the student and his/her advisor. A second unexcused absence will result in a conference with the director. A third unexcused absence will result in referral to the Committee on Course and Standing.

The student is responsible for obtaining all information related to any missed class time and to make up any work missed due to an absence. Instructors are not obligated to provide material to students due to
an unexcused absence or to provide the opportunity to make up missed material due to an unexcused absence.

**ACADEMIC INTEGRITY**

Cheating and plagiarism are grave infractions of academic and professional ethical behavior and are contrary to the standards of any educational institution. Faculty are required to report all suspicions of academic dishonesty. Faculty may require students suspected of cheating or plagiarizing to confirm the originality of their work. Student breaches of academic standards will be subject to disciplinary or academic action and referral to the Committee on Course and Standing. Please refer to URL: [http://www1.ccny.cuny.edu/upload/academicintegrity.pdf](http://www1.ccny.cuny.edu/upload/academicintegrity.pdf).

**PROFESSIONAL CONDUCT**

Professional behavior is expressed through respect for instructors, PA Program faculty and staff, fellow students, patients and colleagues. Professional behavior is evaluated throughout the course of study, but is formally evaluated once a year during advisement sessions. Breeches in professionalism may result in appearing before the Committee on Course and Standing. The Committee on Course and Standing may mandate professional probation or dismissal from the Program. Some issues may arise that necessitate a referral to the Committee for Physician Health (CPH), a New York State Department of Health agency. While a referral to CPH will result in a very costly evaluation, meeting criteria mandated by them can facilitate licensure in individuals with professional issues, and who may otherwise be denied a license. Students from PA programs have been referred to CPH for chronic absences, anger management and bullying, as well as suspected drug and alcohol abuse. Failure to meet CPH criteria can lead to dismissal.

Examples of unprofessional behavior include but are not restricted to:

- Poor attendance or tardiness
- Plagiarism or cheating
- Inability to accept constructive criticism
- Lack of respect for the rights of patients to competent, confidential service
- Failure to follow protocol, or directions of supervising physician, physician assistant or program faculty
- Performing unauthorized procedures or administering services not permitted by the supervisor, the facility, or the program
- Violation of the Health Insurance Portability and Accountability Act (HIPAA)
- Failure to perform all or part of assigned tasks and responsibilities
- Leaving the clinical setting without permission of supervising physician or physician assistant
- Performing any activity which is beyond the scope of the role of a student
- Failure to identify as a physician assistant student
- Failure to report all observed unethical conduct by other members of the health profession, including other students.
Professionalism extends to behavior in the classroom. Therefore the following behaviors will not be tolerated:

- Engaging in conversation with others during a class or lecture
- Leaving the classroom during lectures
- Using personal e-mail or Facebook while in class
- Neglecting to turn off cell phones.

SOCIAL MEDIA POLICY

It is strictly prohibited to take photographs of patients, including in the operating room, even if the patient is not identified. Similarly the posting of diagnostic images or any form of patient data on a social media platform such as YouTube, Facebook, iTunes, LinkedIn, Twitter or blogs is strictly prohibited.

Violation of this policy will result in being called before the Committee on Course and Standing and possible dismissal from the program. Witnessing any violation of this policy should be immediately reported to the program director. Similarly, private postings on Facebook or any other form of social media regarding program personnel, including faculty and fellow students, may be subject to disciplinary action. Assume all postings are visible to the program faculty.

STUDENT ADVISEMENT

Each student is assigned a faculty advisor who is available for counsel on matters concerning academic performance, professional behavior or personal issues. Formal student advisement will occur at a minimum of twice during the program. Should a student become concerned about a personal matter, s/he should contact her/his advisor or the program director. The faculty can facilitate the acquisition of counselling services offered by the CUNY School of Medicine Physician Assistant Program.

CLASS REPRESENTATIVES

Each year one or two students are elected by their class to serve as liaison between the cohort and program administration. Class representatives convey concerns or information to and from the class. This is a voluntary position; students must be in good academic standing in order to serve as class representative.
STUDENT ACADEMY OF THE AMERICAN ACADEMY OF PHYSICIAN ASSISTANTS (SAAAPA).

The CUNY School of Medicine Physician Assistant Program is a charter member of SAAAPA. There are six elected positions in the didactic year class and five elected positions in the clinical year class.

President (clinical)
Vice-President (didactic)
Treasurer (clinical)
Secretary (didactic)
State Chapter Student Representative (clinical)
Assembly of Representatives (AOR) Representative (clinical)
AOR Alternate (didactic)
Student Diversity Committee Representative (didactic)
Historian (didactic)
Outreach Chair (clinical)
Green Chair (didactic)

Besides participation in AAPA and NYSSPA events, the Student Academy hosts monthly meetings for SAAAPA to discuss matters related to the Student Academy. Students must be in good academic standing in order to serve as an SAAAPA officer.

DIRECTOR MEETINGS

Didactic and clinical year classes will regularly meet with the Assistant Dean/Program Director to discuss problems that arise with the Program, including within individual courses. These meetings are mandatory. All students are free to suggest topics to be addressed at these meetings, and may approach the director regarding conflicts that need to be discussed by the class at any time. Students may discuss issues of a more personal nature with the Assistant Dean in private at any time by appointment.

STANDARD FOR WRITTEN ASSIGNMENTS

All written assignments must use the most recent edition of American Psychological Association (APA) Manual of Style. In addition, all papers must be free of typographical errors, spelling and grammatical errors, and plagiarism. Written work must also be sensitive to gender, racial, sexual orientation, religious, and ethnic bias. Non-adherence to any of these requirements may affect the grade received for that paper. Students are advised to make an extra copy of all written assignments for their own protection and records prior to submission. APA bibliographic citation examples can be found at: http://libguides.ccny.cuny.edu/content.php?pid=270410&sid=2249004

UNIVERSAL PRECAUTIONS

While the risk of infection due to contact with infectious tissue or fluids is far greater in the clinical year, students use sharp objects during the didactic year as well, and therefore should learn to practice universal precautions. The principle of universal precautions has been adopted to protect clinicians from exposure to infectious disease because any patient may harbor microorganisms that could cause infection if transmitted. Although blood-borne pathogens are of particular concern, all body fluids secretions, and
excretions are included in universal precautions. Since infected patients may be asymptomatic, it becomes necessary to use basic precautions with every patient. Observance of universal precautions will help to provide better protection for every staff member. Students should also familiarize themselves with the hospital/clinical sites specific policies regarding universal precautions. The material below reviews guidelines and preventative techniques.

1. Avoid direct contact with: blood, body fluids, secretions, excretions, mucous membranes, non-intact skin and lesions
2. Avoid injuries from all sharp objects such as needles or scalpels
3. Avoid direct contact with items, objects, and surfaces contaminated with blood, body fluids, secretions and excretions
4. Dispose of all sharp objects promptly in special puncture resistant containers
5. Dispose of all contaminated articles and materials in a safe manner prescribed by law
6. Wash hands frequently and thoroughly, especially if they become contaminated with blood, body fluids, secretions and excretions
7. Depending on job duties and risk of exposure, use appropriate barriers, which can include: gloves, gowns, aprons, caps, shoe covers, leggings, masks, goggles, face shields and resuscitation devices. These barriers are to be used to protect:
   a. Skin, especially non-intact skin (where there are cuts, chapping, abrasions or any other break in the skin)
   b. Mucous membranes, especially eyes, nose and mouth.

**NOTE:** Protective apparel, including gloves, must be removed after each use and are to be PROPERLY disposed of, and not worn from one patient or activity to another.

**CHANGE OF NAME, PHONE NUMBER OR ADDRESS**

Any student who changes his or her name, address or telephone number must immediately notify the PA Program office in H15 of the Harris building (telephone 650-7745), and the Office of Academic Records in Room 102 of Harris Hall (telephone 650-7156, 7160). The PA Program is not responsible for problems that are due to the failure of a student to notify the School of changes in personal information.

If a social security number has been changed, the student must obtain an application for a change of name or social security number from the City College Registrar's Office in Room 102 of the Administration Building. Supporting documentation must be submitted to the City College Registrar's Office along with the application for a change.

**III. ACADEMIC POLICY**

**STUDENT EVALUATION**

A variety of evaluation tools are used to evaluate student competency, including tests, written and oral presentations, discussion boards and group projects. All examinations are the property of the Program. The type of evaluation used in each course will be delineated in the course syllabus. Although some courses may be pass/fail, most course work will be evaluated by a letter grade. These letter grades will be converted to a Quality Point Index as follows:
<table>
<thead>
<tr>
<th>Letter Grade</th>
<th>Course Raw Score</th>
<th>University Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>90-100</td>
<td>4</td>
</tr>
<tr>
<td>B</td>
<td>80-89</td>
<td>3.0</td>
</tr>
<tr>
<td>C</td>
<td>70-79</td>
<td>2.0</td>
</tr>
<tr>
<td>F</td>
<td>&lt;70</td>
<td>0</td>
</tr>
</tbody>
</table>

The grade point average (GPA) is obtained by multiplying the numerical grade by the number of credits for each course (quality points). The total quality points are then divided by the total number of course credits completed.

EXAMINATION POLICY

Each course director is responsible for examining each student to assess the degree to which the student has met the course objectives. While many examinations will be written, the examination format is the prerogative of the course director with approval of the Physician Assistant Program. The PA Program makes every effort to secure optimal testing accommodations within the parameters of our control. The following policies concern all examinations, regardless of format:

1. Examination scores will be cumulative for the course
2. Course work, assignments and presentations must be handed in on the date and time indicated by the instructor. No late assignment will be accepted
3. Unauthorized retention, possession, copying, distribution, disclosure, discussion or receipt of any examination question is strictly prohibited.

EXAMINATION ADMINISTRATION POLICY

1. All students are to arrive at least 15 minutes prior to the start of each exam.
2. Additional time will not be provided for late arrivals. Time lost due to tardiness will not be compensated.
3. No books, book bags, cellular, electronic or any other devices will be allowed in the exam room.
4. Communication with other classmates is strictly forbidden during the exam.
5. Proctors will not answer questions regarding exam questions.
6. Students should use the “flag” link to express concerns with particular questions. If a question is flagged, a comment should also be written. Flagged questions without comments will not be reviewed.
7. If a student experiences software or technical issues, he/she should immediately seek the assistance of the proctor/s.
8. Scrap paper provided must be turned in to the proctor and will be collected at the end of each exam.
9. After exiting the room, no one will be allowed to re-enter the room.
10. Students may not reproduce exam questions or parts of exam questions, and may not discuss exam questions with other students during or after the examination.
11. Any misconduct or irregularity observed by the exam proctor must be reported to the program director and the Committee on Course and Standing.
EXAMINATION REVIEW POLICY

Examination reviews for CML components are held to reinforce core knowledge and identify deficits in topic areas. While not mandatory, students who receive a failing grade on an examination are encouraged to attend the examination review.

NOTE: This policy only applies to the CML components. Course directors of stand-alone courses may have their own policies regarding exam review.

1. There will be periodic examination reviews during a semester.
2. During the review, questions referencing specifics of the exam or explanations of any part of the exam will not be accommodated.
3. Students have 24 hours after a review session to submit their concerns. References must be cited. Questions may not be contested after the 24 hours period.
4. During the review, no one will be allowed to leave the room for any reason.
5. Before exiting the examination room, each student will be required to log out of Exam Master, and then be ‘forced-closed’ out of exam master by an exam proctor.
6. After exiting the room, students will not be allowed to re-enter the room.
7. Students may not reproduce exam questions or parts of exam questions, and may not discuss exam questions with other students during the review.
8. Any misconduct or irregularity observed by the proctor will be reported to the program director and the Committee on Course and Standing.
9. There will be no exam review for summative exams such as course final examinations, OSCE exams, and clinical clerkship examinations, Exit Exams or Summative Exams. The didactic coordinator and advisors will be available to discuss any content area needing further explanation.

ACADEMIC ACCOMMODATIONS

In compliance with CCNY policy and equal access laws, appropriate academic accommodations are offered by the AccessAbility Center. Students who are registered with the AccessAbility office and are entitled to specific accommodations must arrange to have the Office notify the Professor in writing of their status at the beginning of the semester. If specific accommodations are required for a test, students must present the instructor with a form from the AccessAbility Office at least one week prior to the test date to receive their accommodations.” Academic accommodations will extend through the review process.
MAINTENANCE OF GOOD ACADEMIC STANDING

The minimum semester GPA for the first semester is 2.7. Student not meeting the first semester GPA of 2.7 will be dismissed from the program. Should the cumulative grade point average fall below 3.0 at the end of any semester, the student will be referred to the Committing on Course and Standing. Students must maintain a cumulative grade point average of 3.0 in order to be in Good Academic Standing and for degree conferral.

Academic Probation

Probation is a designation that alerts the student that professional or academic circumstances are such that dismissal is possible. There are two types of probation: Academic and Professional. Academic Probation is the result of failing to maintain good academic standing. Professional probation is a status designated by the Course and Standing Committee when a student violates one of the tenets of professional conduct or those set forth by CCNY. Failing to meet the conditions of probation may result in dismissal from the program.

Failure to meet a cumulative GPA of 3.0 during the first academic year (any of the first three semesters) may result in academic probation. The student may remain on academic probation for two semesters only. Should a student not attain a cumulative GPA of 3.0 by the end of the first academic year (semester 3) dismissal from the program will result. A student may not fall below a cumulative GPA of 3.0 at any other point in the program.

The conditions of Professional Probation will be determined by the Committee on Course and Standing. A student on any type of probation may not serve as class representative, Student Academy officer, or as a member of the Medical Challenge Bowl team.

Reassessment of Failing Grades

There are two types of courses in the didactic year, stand-alone courses and component courses which consist of Clinical Medicine I, II, and III and Integrated Medicine courses.

The policies contained within this document supersede precedent corresponding policies and procedures highlighted within the Student Handbook for Academic Policies and Procedures 2016-2017 distributed to the Class of 2019 the beginning of the Fall 2016. Distributed January 2017
Stand-alone courses are:

<table>
<thead>
<tr>
<th>PA Program Didactic Curriculum - Stand-Alone Courses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anatomy</td>
</tr>
<tr>
<td>Physiology I</td>
</tr>
<tr>
<td>Physiology II</td>
</tr>
<tr>
<td>Pharmacology I</td>
</tr>
<tr>
<td>Pharmacology II</td>
</tr>
<tr>
<td>Preventative Medicine</td>
</tr>
<tr>
<td>Physical Diagnosis</td>
</tr>
<tr>
<td>History of the Profession</td>
</tr>
</tbody>
</table>

To be eligible to reassess a PA course, a student must have achieved an examination score between 60-69% in stand-alone courses.

**STAND-ALONE COURSE FAILURE & REASSESSMENT**

Stand-alone Course Failure is defined as:

- Earning a final grade below 70% in any stand-alone course.
- Only two stand-alone courses may be reassessed during the entire didactic phase of the PA program.
- A third course failure will result in dismissal.
- Should a student fail a stand-alone course with a grade less than 70%, s/he will be referred to the Committee on Course and Standing for determination of continued academic status.

**STAND-ALONE COURSE REASSESSMENT**

- Students are eligible for reassessment if grades of 60-69% and other academic criteria are met.
- Students who earn a passing grade on a reassessment will receive a grade of “C” for the course regardless of the grade earned on the exam.
- Students who do not pass the reassessment will be referred to the Committee on Course and Standing for determination of continued academic status.

The policies contained within this document supersede precedent corresponding policies and procedures highlighted within the Student Handbook for Academic Policies and Procedures 2016-2017 distributed to the Class of 2019 the beginning of the Fall 2016. Distributed January 2017
Clinical Medicine I, II & III and Integrated Medicine Courses are comprised of:

<table>
<thead>
<tr>
<th>Clinical Medicine I</th>
<th>PA 5041</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rheumatology, Oral Health</td>
<td></td>
</tr>
<tr>
<td>Dermatology &amp; Psychiatry</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Clinical Medicine III</th>
<th>PA 5033</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nephrology, Neurology, Hematology &amp; Oncology and Radiology</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Clinical Medicine II</th>
<th>PA 5052</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cardiology, Pulmonary, Endocrinology</td>
<td></td>
</tr>
<tr>
<td>Gastroenterology, Nutrition, and Infectious Disease</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Integrated Medicine</th>
<th>PA 5043</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pediatrics, OB/GYN, Emergency Medicine, Surgery, and Geriatrics</td>
<td></td>
</tr>
</tbody>
</table>

CLINICAL MEDICINE & INTERGRATED MEDICINE COURSE FAILURE AND REASSESSMENT

Each of the Clinical Medicine Lecture courses (PA 5041, PA 5052, and PA 5033) and Integrated Medicine (PA 5043) is made up of multiple components, representing various disciplines of medicine. A passing grade of 70% in each component is required in order to pass the entire course. Should a student fail any one component with a grade of 60-69% s/he will be offered a reassessment in the failed component. The highest grade that can be awarded in a component reassessment is 70%, which will be averaged in with the remaining components to calculate a new final course grade.

- Students may reassess a maximum of two components in Clinical Medicine I, II, and III, and Integrated Medicine courses.
- Students must pass the reassessment exam with a grade of 70% or better.
- Students who achieve a passing grade on the reassessment examination will receive a “C” for the component grade.
- Should a student fail a reassessment examination in CML I, II or III and/or Integrated Medicine he/she will be referred to the Committee on Course and Standing for determination of continued academic status.
- Failure of three or more components or failing a component with less than 60% in CML I, II or III and/or Integrated Medicine results in failure of the course and referral to the Committee on Course and Standing for determination of continued academic status.
- Policies regarding clinical year course failure are outlined in the Clinical Handbook.

The policies contained within this document supersede precedent corresponding policies and procedures highlighted within the Student Handbook for Academic Policies and Procedures 2016-2017 distributed to the Class of 2019 the beginning of the Fall 2016. Distributed January 2017
Deceleration

Deceleration is meant as a safety net, to provide supportive measures to prevent academic dismissal. Should a student fail one course they will be referred to the Committee on Course and Standing who may consider deceleration. A cumulative GPA of 2.7 or above in all remaining coursework is required to be eligible for deceleration. The following conditions apply to deceleration:

1. The student will take an academic leave.
2. Maintenance of matriculation fee is required. Failure to do this will result in dismissal.
3. Students must meet with their advisor once each month to develop a plan of remediation which the student is required to complete in order to remediate academic difficulties.
4. The failed course would be repeated with the subsequent cohort.
5. The student joins the succeeding cohort and resumes the curriculum on academic probation until the failed course is successfully passed.
6. A decelerated student may not serve as a class representative, Student Academy officer, or as a member of the Medical Challenge Bowl team.

Students are eligible for only one deceleration year during their tenure as PA students at the CUNY School of Medicine PA Program. Therefore, once a student resumes coursework, any further course failure in the didactic will result in dismissal.

Academic Dismissal

Students will be dismissed in any of the following situations:

1. Inability to attain a GPA of 2.7 or above in the first semester.
2. Failure of a third course.
3. Inability to attain a cumulative GPA of 3.0 at the end of the didactic year (semester 3).
4. Cumulative GPA falling below 3.0 after successful completion of academic probation.

Notification of dismissal will be made via e-mail and letter mailed to the address provided by the student. A student who refuses to accept the notification of dismissal loses the right to appeal the decision.

Academic Forgiveness

Should a student retake a failed course, the failure will appear on the student transcript, but only the second grade will count toward the GPA.

The policies contained within this document supersede precedent corresponding policies and procedures highlighted within the Student Handbook for Academic Policies and Procedures 2016-2017 distributed to the Class of 2019 the beginning of the Fall 2016. Distributed January 2017
REMEDIATION OF ACADEMIC DIFFICULTIES

Students who fail to demonstrate the requisite knowledge or skills necessary to perform at an acceptable level for a course may be required to remediate those deficiencies. Remediation is a process intended to correct a student’s academic deficiencies and includes such activities as special assignments, examinations, tutoring, assessment and development of study skills. Referral to the Learning Resource Center or to the Counseling Center may be recommended as well.

LEARNING RESOURCE CENTER

The Learning Resource Center provides free academic counseling to PA students. This includes instruction regarding study skills and test-taking, as well as content information in some areas. Students with academic difficulty are mandated to visit the LRC, but any student is free to use these services. The LRC is located in Harris Hall – Room 114. (212) 650-8408.

THE COMMITTEE ON COURSE AND STANDING

The Committee on Course and Standing (CCS) enforces academic standards of the PA Program. The Committee hears cases of students in academic or professional difficulty, takes all information into account and makes decisions regarding further action. The Committee is appointed by the Assistant Dean of the PA Program and consists of a minimum of two (2) core PA Program faculty members, two (2) faculty of the CUNY School of Medicine BS/MD program, the Medical Director, and two ex-officio members, the Assistant Dean of PA Program and the School of Medicine Director of Academic Records. The CCS acts through the Program Director, who communicates the decisions of the CCS in writing to the student.

All leaves of absence, withdrawals, placement on or removal of probation, course failures, professional breeches and potential dismissals are brought before the Committee on Course and Standing. Students may provide the Committee with a letter explaining extenuating circumstances or may appear before the Committee if they wish. Should a student choose to appear, providing a letter beforehand is advised. Students are not permitted attorney representatives to a CCS meeting or record the meeting.

ACADEMIC AND PROFESSIONAL PROBATION

Probation is a designation that alerts the student that professional or academic circumstances are such that dismissal is possible. There are two types of probation: Academic and Professional. Academic Probation is the result of failing to maintain good academic standing. Professional probation is a status designated by the CCS when a student violates one of the tenets of professional conduct or those set forth by CCNY.

Academic Probation will be removed once a student achieves good academic standing. The conditions of Professional Probation will be determined by the Committee on Course and Standing. A student on probation may not serve as class representative, Student Academy officer, or as a member of the Medical Challenge Bowl team.
APPEAL OF DISMISSAL

A student may appeal an adverse decision of dismissal in writing to the Dean of the CUNY School of Medicine within 10 (ten) business days of the official notification. The Dean will then appoint an Ad Hoc Appeals Committee, which will be provided with a copy of the student's appeal, the minutes of the CCS meetings at which the adverse recommendation was made, and the complete academic student record. The Appeals Committee is charged with determining:

- If the adverse decision was made in accordance with the approved and established policies of the PA Program Committee on Course and Standing
- If the student was accorded due process, or if the adverse decision was arbitrary, capricious or reflected prejudice against the student
- It is not within the purview of the Appeals Committee to critique the academic judgment of the PA Program Committee on Course and Standing.

The student has the right to be present at the meeting of the Ad Hoc Appeals Committee, and to make an oral or written statement. Should the student wish to appear, the Dean of the School will notify him/her of the time and place of the meeting at least 10 (ten) business days beforehand.

The Appeals Committee may request, in writing, that the appropriate course coordinator, instructor and the PA Program or the Chair of the CCS attend the meeting. Within 7 (seven) business days of the meeting, the Appeals Committee will send its written recommendation to the Dean.

The Dean will review the report of the Appeals Committee. After finding that the Appeals Committee properly carried out its charge, the Dean will accept or reject the recommendation. The Dean will promptly notify the student in writing of the final decision. If the original recommendation is reversed, the Dean will return the matter to the PA Assistant Dean/Program Director for action. The decision of the Dean in such cases is final; no further institutional recourse is available to the student.

LEAVES OF ABSENCE

There are two types of leaves of absence: medical leave and personal leave.

1. Medical Leave of Absence

The Committee on Course and Standing (CCS) may grant a student a leave of absence for medical reasons for up to one year. To apply for a medical leave of absence, a student must submit the following to the Chair of the CCS and to the Assistant Dean/Director:

- A letter from the student describing the reasons for requesting a medical leave
- A letter from a clinician substantiating these reasons.

To return from a medical leave of absence, the student must submit a letter declaring intent to return to the Program, as well written medical clearance from your provider recommending that the student be allowed to return to the program to the Chair of the CCS and to the Assistant Dean/Director.
The student must submit an additional letter for clearance to return by June 1 for a fall readmission, December 1 for a spring readmission and May 1 for a summer readmission. If, by the end of the leave, a student fails to notify the CCS regarding intent to return or fail to register, s/he will be considered resigned from the CUNY School of Medicine PA Program.

2. Personal Leave of Absence

Under extenuating circumstances, the Committee on Course and Standing (CCS) may grant a student a personal leave of absence for a period of up to one year. It may be granted regardless of academic standing. A personal leave of absence is designed to allow students the time to address personal matters so that they can better prepare to meet the academic rigors of the curriculum. A personal leave should not substitute for a medical leave of absence or be seen as a solution for academic difficulty.

To apply for a personal leave of absence, a student must submit a letter to the Assistant Dean & Program Director. The letter must include the length of the leave, the reason(s) that precipitated the request for the leave and what the student hopes to resolve during the course of the personal leave of absence. The Committee on Course & Standing will then meet to decide whether to grant the student's request. The committee may request the student to attend the meeting.

Requests for personal leaves should be made no later than the tenth week into the semester. This date is in accordance with the College's deadline to drop courses without an academic penalty (assign a grade "W" [withdrawal without penalty]). Extraordinary circumstances will be forwarded to the Committee on Course and Standing for consideration.

The student will be notified in writing of the decision of the Committee on Course & Standing. Should the leave be granted, the terms will be specified in the approval letter. If the request for a leave is denied, the student may appeal the decision to the Dean of the CUNY School of Medicine.

The student must notify the Assistant Dean/Director of the PA Program in writing of his or her intention to return to the Program. The student must submit this letter by June 1 for a fall readmission, December 1 for a spring readmission and May 1 for a summer readmission. If, by the end of the leave, a student fails to notify the CCS regarding intent to return or fail to register, s/he will be considered resigned from the CUNY School of Medicine Physician Assistant Program.

RESIGNATION FROM THE CUNY SCHOOL OF MEDICINE PA PROGRAM

A student considering resignation from the CUNY School of Medicine PA Program is encouraged to discuss the issue with his/her faculty advisor and Assistant Dean/Director of the PA Program. Once a decision to resign is reached, the student submits a letter to the Assistant Dean/Director of the PA Program notifying the Program of their intention to withdraw.

DIDACTIC YEAR EXIT EXAMINATION

Upon the completion of the didactic phase of instruction all students are required to take a written, comprehensive, examination of basic medical knowledge prior to beginning the clinical year of instruction. The passing grade for this examination is 65 percent. Students who fail to achieve 65% will be delayed in starting the clinical year by five-weeks during which time s/he will work with a faculty member to remediate deficits. A second exam is given after these five weeks. Should a student fail the
second exam, s/he will be granted an additional five-week period in order to prepare for a third examination. These three attempts must occur within a **10** week period. After three failed attempts, dismissal from the program will result.

**PROGRESSION FROM THE DIDACTIC TO CLINICAL YEAR**

Several conditions must be met in order to progress from the didactic to the clinical year:

1. Successful completion of all didactic year courses
2. A cumulative grade point average of 3.0 must be earned for the didactic year
3. All incomplete grades, probationary issues or pending assignments must be resolved
4. A passing grade must be earned for the didactic year exit examination
5. A faculty evaluation of professional behavior evaluation must be satisfactorily completed.

**END OF CURRICULUM EXAMINATIONS**

There are four examinations that are taken throughout the clinical year:

1. **Clinical Exams**: comprehensive, 200-question multiple-choice examinations are given without notice during some call back sessions. These exams are meant to highlight areas of weakness so that the student can direct studying toward these areas. The faculty will set a benchmark grade. Should students not meet the benchmark, a meeting with the advisor will result.
2. **Pre-PANCE examination** – a comprehensive, six-hour, 360-question multiple choice examination given once or twice a year. This test is developed by the faculty and based on the NCCPA Blueprint. Like the clinical exams, students not meeting the benchmark will meet with their advisor.
3. **Packrat** – a standardized exam developed by PAEA, modeled on the PANCE is given once or twice a year. This exam is also based on the NCCPA Blueprint. Results are reported both by organ system (cardiology, pulmonology, etc.) and by critical thinking area (history taking skills, therapeutics, management, etc.). A national mean is set as the benchmark. Students not achieving the benchmark will meet with their advisors.
4. **The summative exam** is a graded, final assessment given within the last six weeks of the curriculum. It exams basic competence in the following areas:
   
   a. **Medical Knowledge**: Demonstrate knowledge of etiology, risk factors, signs and symptoms of a medical condition
   b. **Affective skills**: Demonstrate effective communication to elicit and provide information; demonstrate compassionate and respectful behavior when interacting with patients
   c. **Oral and written communication**: Accurately and adequately document information regarding care; orally present a patient encounter with precision and poise
   d. **Critical thinking**: Demonstrate the ability to conduct a complaint-focused interview and physical exam; develop an accurate and detailed differential diagnosis
e. **Patient care:** Obtain essential and accurate information; counsel and educate patients and their families; provide education aimed at disease prevention and health maintenance; develop and implement patient management plans.

The format of the summative examination is clinical simulation using standardized patients. Students are given a chief complaint and perform a focused history and physical examination on the standardized patient. The student then orders laboratory tests for which results will be given. Interpretation of the tests is integrated into a SOAP note, which includes a differential diagnosis and plan. The final phase is oral presentation of the patient to a faculty member.

This examination is pass/fail. In the event of failure, students will be given the opportunity to retake the examination. Should a student fail a second time, s/he will appear before the Committee on Course and Standing, and may be asked to delay graduation for six weeks in order to remediate deficiencies.

**GRADUATION REQUIREMENTS**

Graduation is dependent upon successful completion of the following:

1. All courses in the physician assistant curriculum including all clinical rotations
2. A cumulative grade point average of 3.0 must be earned
3. Successfully pass the summative examinations
4. Meeting all patient and procedural log requirements
5. Faculty review of professional behavior throughout the entire program.

Eligibility to sit for the Physician Assistant National Certification Examination is contingent upon successful completion of all program requirements.

**CCNY GRIEVANCE PROCEDURE**

Students with grievances concerning classroom matters other than grades should first attempt to resolve the grievance at the department level through discussion with the faculty member(s) or department chair. If the matter is not resolved, the student or department may refer the problem to the appropriate academic dean, the Ombudsman, or the CCNY Vice President for Student Affairs, who shall, if necessary, refer it to the Office of the Provost for further consideration and possible action.

**IV. CITY COLLEGE OF NEW YORK STANDARDS, POLICIES, AND REGULATIONS**

https://www.ccny.cuny.edu/affirmativeaction

- **Sexual Harassment Policy**
  
  https://www.ccny.cuny.edu/affirmativeaction/harassment

- **The City University Of New York Policies On Equal Opportunity And Non-Discrimination, And Against Sexual Harassment**
  
  http://www2.cuny.edu/wp-content/uploads/sites/4/page-assets/about/administration/offices/hr/policies-and-procedures/PEONon-Discrimination12.4.2014.pdf
• Sexual Assault Policy
  http://www.cuny.edu/about/administration/offices/la/CUNYSexualAssaultPolicy.pdf

• Sexual Assault Information (Aid To Victims Of Violence)
  http://www1.cuny.edu/sites/title-ix/homepage/

• The City University Of New York Policy On Drugs And Alcohol
  http://www.cuny.edu/about/administration/offices/ohrm/cohr/drug-alcohol2011.pdf

• Information For The CUNY Community On The Risks And Consequences Of Drug And Alcohol Use
  http://www.cuny.edu/about/resources/student/consumer-info/drug-policy.pdf

• University Policy Relating to Drugs and Alcohol

• Student Conduct
  Students should become familiar with policies regarding student conduct at The City College of New York. Policies are located at the website indicated below:

• Public Safety Awareness & Crime Prevention Programs
  https://www.ccny.cuny.edu/sites/default/files/CLERY%202015%20COMBINED%20WITH%20STATS%20v3.pdf
V. PROGRAM FORMS

AGREEMENT TO ABIDE

STUDENT HANDBOOK AGREEMENT

I have received and read a copy of the Student Handbook on Academic Policies and Procedures of the CUNY School of Medicine Physician Assistant Program. I understand that as a student of the Physician Assistant Program that I am also bound by the academic policies and regulations of the City College of New York.

My signature attests that I agree to abide by all rules and regulations governing my matriculation in the Physician Assistant Program.

________________________________
Print name

________________________________
Signature

____________
Date
CUNY School of Medicine
Physician Assistant Program

PROFESSIONAL DEVELOPMENT EVALUATION FORM

This assessment tool is designed to aid students evaluate their professional development in becoming a Physician Assistant. The student is to critically assess his/her performance in the classroom, laboratory, and any other clinical and professional situation. The following rating scale is to be used by both the student and their faculty advisor:

0 = Unsatisfactory: The student does not yet demonstrate the required level of professional skill. The student's behavior is predicted to interfere with his/her ability to establish satisfactory therapeutic relationships with patients and/or effective working relationships with co-workers.

1 = Needs Improvement: The student is beginning to demonstrate the required level of professional skill, but needs improvement in quality of professionalism.

2 = Satisfactory: The student demonstrates the required level of professional skill.

STUDENT FIRST NAME: ______________________ LAST NAME: ______________________ CLASS OF: ______________________

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<thead>
<tr>
<th>HONESTY/INTEGRITY</th>
<th>STUDENT</th>
<th>FACULTY</th>
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<tbody>
<tr>
<td><strong>Behavior Descriptors</strong></td>
<td>0 1 2</td>
<td>0 1 2</td>
</tr>
<tr>
<td>Adheres to code of academic ethics</td>
<td>COMMENTS</td>
<td>COMMENTS</td>
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<tr>
<td>Able to admit and correct mistakes</td>
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<tr>
<td>Maintains confidentiality of others</td>
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<tr>
<td>Represents self appropriately</td>
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<tr>
<th>RESPONSE TO INSTRUCTOR SUPERVISION</th>
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<th>FACULTY</th>
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<tbody>
<tr>
<td><strong>Behavior Descriptors</strong></td>
<td>0 1 2</td>
<td>0 1 2</td>
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<tr>
<td>Respectful to instructors</td>
<td>COMMENTS</td>
<td>COMMENTS</td>
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<tr>
<td>Identifies problems and offers solutions in an appropriate manner</td>
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<td>Accepts feedback in a positive manner</td>
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<td>Appropriately modifies performance in response to feedback</td>
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<tr>
<th>COMMUNICATION</th>
<th>STUDENT</th>
<th>FACULTY</th>
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<tr>
<td><strong>Behavior Descriptors</strong></td>
<td>0 1 2</td>
<td>0 1 2</td>
</tr>
<tr>
<td>Actively participates in discussions</td>
<td>COMMENTS</td>
<td>COMMENTS</td>
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<tr>
<td>Asks thoughtful and relevant questions</td>
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<tr>
<td>Verbal and written communications are clear and concise</td>
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<tr>
<td>Communicates in a respectful, confident manner</td>
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<tr>
<td>Recognizes impact of non-verbal communication</td>
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<tr>
<th>SELF DIRECTEDNESS</th>
<th>STUDENT</th>
<th>FACULTY</th>
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<tbody>
<tr>
<td><strong>Behavior Descriptors</strong></td>
<td>0 1 2</td>
<td>0 1 2</td>
</tr>
<tr>
<td>Independently initiates learning experiences</td>
<td>COMMENTS</td>
<td>COMMENTS</td>
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<tr>
<td>Takes initiative to direct own learning</td>
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<tr>
<td>Assumes responsibility for learning</td>
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<td>Uses adequate and appropriate resources to achieve learning objectives</td>
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<tr>
<td>Demonstrates appropriate level of confidence and self-assurance</td>
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DEPENDABILITY/ RESPONSIBILITY
Behavior Descriptors
- Attends all scheduled sessions
- Is on time for all classes and scheduled meetings
- Hands in assignments and papers on time
- Complies with program and course expectations
- Fulfills commitments and responsibilities
- Maintains a safe environment in class and lab

JUDGEMENT/ CLINICAL REASONING
Behavior Descriptors
- Uses an inquiring approach towards learning
- Analyzes all options prior to making a judgment
- Develops rationale to support choices
- Demonstrates awareness of personal biases
- Makes decisions based on factual information
- Generates alternative hypotheses and solutions to problems

ORGANIZATIONAL ABILITY
Behavior Descriptors
- Is prepared for class and discussions
- Budgets resources to meet Program requirements
- Prioritizes multiple commitments
- Assists organizing group assignments & projects

PROFESSIONAL PRESENTATION
Behavior Descriptors
- Dresses neatly and in clean clothing
- Appearance is appropriate to setting
- Image is professional to peers, clients, and supervisors
- Displays a positive attitude toward becoming a professional

Additional comments:

Plan of Action:

Student’s signature

Faculty signature

Date