**CCNY/SDSBE PA Program Standards for Capacity (Technical Standards)**

Students at CCNY/SDSBE PA Program must have capacities/abilities in five broad areas:

- Perception/observation
- Communication
- Motor/tactile function
- Cognition
- 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 sections, 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
- Develop therapeutic relationships
- Demonstrate competencies
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.

E. Professionalism: (Mature and Ethical Conduct)

Students must be able to:

- Consistently display integrity, honesty, empathy, caring, fairness, respect for self and others, diligence, and dedication
- Promptly complete all assignments and responsibilities attendant to the diagnosis and care of patients (beginning with study in the first year)
• Communicate with, examine, and provide care for all patients—including those whose gender, culture, sexual orientation, or spiritual beliefs are different from students' own.
• Develop mature, sensitive, and effective relationships, not only with patients but with all members of the medical school community and healthcare teams.
• Maintain sobriety in all academic and clinical environments, and refrain from the illegal use of substances at all times.
• Abide by all state, federal, and local laws, as well as all CCNY/SDSBE PA Program and clinical training sites codes of conduct.
• Tolerate physically, emotionally, and mentally demanding workloads.
• Function effectively under stress, and proactively make use of available resources to help maintain both physical and mental health.
• Adapt to changing environments, display flexibility, and be able to learn in the face of uncertainty.
• Take responsibility for themselves and their behaviors.

Examples of professional behavior beginning in year 1 include, but are not limited to: showing up for required experiences on time and prepared; handing in assignments on time; refraining from plagiarizing or cheating; treating faculty, staff, and other students with respect; making an effort to understand prejudices and preconceptions that might affect patient interactions or collegial relationships (especially in the areas of race and ethnicity, sexual orientation, gender, disability, age, and religious difference); developing successful working relationships with preceptors, staff, and peers by accepting constructive feedback.

Additional examples of professional behavior in year 2 include, but are not limited to: maintaining a professional demeanor on service (e.g. white coat, name tag, appropriate attire, neat appearance, respectful speech, sobriety); representing oneself accurately; appreciating and preserving patient confidentiality; responding sensitively to patients' social and psychological issues; developing empathic listening skills; understanding social biases and stigmas, and not reinforcing them; advocating for patients when appropriate; using hospital/clinic resources responsibly; showing up prepared and on time for rounds, lectures, conferences, and procedures; getting advice when handling ethical dilemmas; taking constructive feedback from attending physicians, residents and physician assistants with open-mindedness and the intention to improve; contributing to the effectiveness, efficiency, and collegiality of healthcare teams.

*** Any student who has a question about whether he or she can meet these standards should contact the CCNY/SDSBE PA Program Office about your concerns. There are any number of accommodations that can be made for students with documented disabilities, but all students should be able to perform in a reasonably independent manner. ***