



# GEORGE FOX UNIVERSITY

Master of Medical Science (PA)

Admissions Handbook  
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**GFU MMSc. (PA) ADMISSIONS HANDBOOK REVIEW**

## PREFACE

Program policies, to include the Admissions Handbook, apply to all students, *principal faculty* and the program director regardless of location (A3.01). In some instances, a signed clinical affiliation agreement or memorandum of understanding may specify that certain program policies will be superseded by those at the clinical site. This policy document clearly defines and accurately reflects admissions practices and is available for download at <http://www.georgefox.edu/pa> (A3.02; A3.13).

- In accordance with ARC-PA accreditation standards, this policy defines, to enrolled and prospective students, the following general principles:
  - ARC-PA accreditation status (A3.12a)
  - Success of the program in achieving its goals (A3.12b)
  - First time PANCE rates for the most recent graduating classes (A3.12c)
  - All required curricular components (A3.12d)
  - Academic credit offered by the program (A3.12e)
  - Estimates of all costs (tuition, fees, etc.) related to the program (A3.12f)
  - Policies and procedures for refunds of tuition and fees (A1.02k)
  - Policies about student employment while enrolled in the program (A3.05)
- In accordance with ARC-PA accreditation standards, this policy defines, to prospective students, admission related information to include:
  - Admission and enrollment practices that favor specified individuals or groups (A3.13a)
  - Admission requirements regarding prior education or work experience (A3.13b)
  - Policies and procedures concerning awarding or granting advanced placement (A3.13c)
  - Any required academic standards for enrollment (A3.13d)
  - Any required technical standards (A3.13e)
- In accordance with ARC-PA accreditation standards, this policy will clearly define admission decision practices of the institution and program (A3.14)
- All GFU PA courses must be taken as part of the PA cohort and no advanced placement options are available (A3.13c; A3.16a). All students who matriculate into the PA program must complete all program requirements (A3.15b).
- This MMSc PA program consists of 112 semester hours (SH) divided into three phases that span 24 consecutive months. The Didactic Phase represents the preclinical year and spans 12 months. The Clinical Phase represents the clinical year and consists of 11 months of supervised clinical education and coursework. The Summative Phase is 1 month in duration and represents the final stage of training. (A3.12d; A3.12e)
- Upon successful completion of the program, students will be awarded a Master of Medical Science (MMSc) degree.
- GFU's Master of Medical Science (MMSc PA) program will matriculate 20, 32, and 36 students in 2021, 2022, and 2023 (and beyond) respectively.

This Program Admissions Pamphlet provides a printable version of admissions related information that can also be found on the George Fox University Master of Medical Science (MMSc PA) website. This handbook is updated on an annual basis.

## **ARTICLE 1.0 MISSION, VISION, VALUES, AND GOALS (B1.01)**

The School of Medical Science and Master of Medical Science (MMSc) exists to support the mission of George Fox University, which promotes community awareness and service. Therefore, the mission of the School is to support and augment the mission of the College.

### **Article 1.1 Master of Medical Science Mission Statement**

The program develops well-informed, resilient, and compassionate PAs who provide patient-centered and service-oriented medical care in diverse environments.

### **Article 1.2 Master of Medical Science Vision Statement**

The program will transform healthcare through increased access, affordability and equity for the benefit of individuals and communities.

### **Article 1.3 Master of Medical Science Core Values and Goals**

- **Compassion:** Foster a commitment to Christian values, ethics and integrity in personal and professional service as a PA
- **Service:** Emphasize a servant-leadership lifestyle, which prepares graduates to serve in underserved communities, domestically and abroad
- **Leadership:** Promote professionalism, self-reflection, and advocacy for the profession
- **Knowledge:** Cultivate high-quality graduates committed to life-long learning, the application of critical thinking, and the analysis of research.

The MMSc PA Program affirms its core values and goals as essential to fulfilling the program mission statement and is committed to attaining measurable graduate goals to include:

- PA employment as a primary care provider
- PA employment in underserved areas and populations
- PA volunteerism in communities
- PA volunteerism in medical mission work at a national and/or international level

### **Article 1.4 George Fox University Mission**

George Fox University, a Christ-centered community, prepares students spiritually, academically, and professionally to think with clarity, act with integrity, and serve with passion.

## **ARTICLE 2.0 CASPA PARTICIPATION**

The George Fox Master of Medical Science (PA) program's application cycle will open at the end of April, and run through October 31 via the Central Application Service for PA (CASPA). To be precise, GFU will accept COMPLETED applications through October 1; Interviews will end prior to October 31; all seats will be offered by October 31. The cohort will matriculate in January. CASPA is an online application clearing house located at <https://portal.caspaonline.org/>. As of March 2019, the cost for a CASPA application was \$179 for the first program you apply to. If you submit to other programs before the first e-delivery of your application, each additional program is \$45. If you submit to other programs after the first e-delivery of your application, each additional program is \$52. As a general rule, CASPA does not refund application fees. Information related to CASPA fees can be found at [https://help.liasonedu.com/CASPA\\_Applicant\\_Help\\_Center](https://help.liasonedu.com/CASPA_Applicant_Help_Center). The link between the George Fox MMSc

PA program, CASPA, and student candidates will be managed by the MMSc PA program’s Admissions Coordinator or Admissions Counselor.

### ARTICLE 3.0 ARC-PA ACCREDITATION STATUS (A3.14a)

Accreditation for George Fox University and the MMSc PA program comes from two sources. (1) professional accreditation is provided by the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA) and (2) regional accreditation is provided by the Northwest Commission of Colleges and Universities (NWCCU).

#### Article 3.1 Accreditation Review Commission on Education for the PA

The ARC-PA has granted Accreditation-Provisional status to the George Fox University Master of Medical Science – Physician Assistant Program sponsored by George Fox University. Accreditation-Provisional is an accreditation status granted when the plans and resource allocation, if fully implemented as planned, of a proposed program that has not yet enrolled students appear to demonstrate the program’s ability to meet the ARC-PA Standards or when a program holding Accreditation Provisional status appears to demonstrate continued progress in complying with the Standards as it prepares for the graduation of the first class (cohort) of students. Accreditation-Provisional does not ensure any subsequent accreditation status. It is limited to no more than five years from matriculation of the first class. The program’s accreditation history can be viewed on the ARC-PA website at <http://www.arc-pa.org/accreditation-history-george-fox-university>

#### Article 3.2 National and Regional Accreditation

George Fox University, is accredited by the [Northwest Commission on Colleges and Universities](#) (NWCCU). In addition, George Fox is approved by the U.S. government and the states of Oregon and Idaho for the education of veterans, and by the U.S. attorney general for the admission of international students.

### ARTICLE 4.0 PROGRAM SUCCESS IN ACHIEVING ITS GOALS (A3.12B)

In addition to its mission, values, and goals, the George Fox Master of Medical Science (PA) program has established graduate goals/benchmarks. Following graduation of the inaugural cohort (and annually thereafter), alumni will be surveyed to determine the Program's goal attainment. George Fox will start gathering benchmark goal data in mid 2023. The following benchmarks will be measured.

PANCE PASS RATES (Knowledge)	When Assessed	Desired Result
PANCE: First Time Pass Rate	First Year	National Average
PANCE: Cumulative Pass rate	Yearly	National Average
PA Employment (Service)		
George Fox Graduate PAs Employed in Oregon	Yearly	41% (Data Based)
George Fox Graduate PAs Employed in Primary Care Practice (Family Medicine, Internal Medicine, Pediatrics)	Yearly	36% (Data Based)
George Fox Graduate PAs Employed in Underserved Population or Area	Yearly	8% (Data Based)
Leadership/Volunteerism (Compassion; Leadership)		

George Fox Graduate PAs Involved in the Community (Search and rescue, community emergency response team, volunteer fire department, free clinic volunteer, health center volunteer, etc.)	Yearly	50% (Entry Goal)
George Fox Graduate PAs Serving in Areas Outside Local Community (One developing country medical mission a year)	Yearly	50% (Entry Goal)
Georg Fox Graduate PAs in a Leadership Role in the PA Profession (Leadership role in AAPA, NCCPA, State Medical Board, etc.)	Yearly	25% (Entry Goal)

## ARTICLE 5.0 NCCPA PANCE PASS RATE (A3.12C)

The Physician Assistant National Certifying Examination (PANCE) is a computer-based, multiple-choice test that assesses basic medical and surgical knowledge. This examination must be successfully passed in order for graduates to become eligible for PA licensure. The table below is designed to present PANCE performance data for graduates of the George Fox University MMSc PA Program. The first performance scores will first become available to publish in mid 2023.

<https://www.georgefox.edu/pa/admissions/index.html#pance>

Class	First Time Takers	Program Aggregate	National Average
2022	Published mid 2023	Published Mid 2023	Published Mid 2023
2023	Published Mid 2024	Published Mid 2024	Published Mid 2024
2024	Published Mid 2025	Published Mid 2025	Published Mid 2025
2025	Published Mid 2026	Published Mid 2026	Published Mid 2026
2026	Published Mid 2027	Published Mid 2027	Published Mid 2027

## ARTICLE 6.0 COHORT ATTRITION RATE

At GFU the goal is to mentor and see each matriculated student through program completion, NCCPA certification, and into active practice as a PA. We recognize, however, that attrition may occur and if it does it will be reported on our website in a fashion similar to the table below.

Class	Enrolled	Program Completion	Attrition Rate
2022	Maximum of 32	Number of Graduates	1 student = 4%
2023	Maximum of 32	Number of Graduates	1 student = 3%
2024	Maximum of 36	Number of Graduates	1 student = 3%
2025	Maximum of 36	Number of Graduates	1 student = 3%
2026	Maximum of 36	Number of Graduates	1 student = 3%

## ARTICLE 7.0 CURRICULAR COMPONENTS/ACADEMIC CREDIT (A3.12D; A3.12E)

The MMSc PA Program at George Fox University is a professional degree program intended to prepare students academically and professionally for responsibilities and services as a PA. Due to the sequential nature of the didactic curriculum, students must successfully pass all didactic courses for a given semester before becoming eligible to take courses in the subsequent semester.

Advanced placement will not be granted under any circumstances (A3.13c). All students who are granted admission to the program must fulfill all program requirements. Clerkship rotations are designed to provide medical experience and patient exposure and are referred to as Supervised Clinical Practice Experiences (SCPE). These experiences form the basis of the clinical and socialization processes for adaptation to the roles and functions of a PA.

The overall design is based on three areas of input. These are (1) George Fox MMSc PA Graduate Competencies and Outcomes, (2) ARC-PA Standards, and (3) NCCPA Blueprint guidelines. The University and program mission were also integral in the curriculum design. Next, (1) course learning goals, (2) course learning outcomes, and (3) course instructional objectives are linked to each other and the program foundation. Each course curriculum is built using this guide. Assessment of the curriculum is

both described (in the syllabus and in the Student Handbook) and applied based on clear parallels between what is expected, taught, and assessed.

### Article 7.1 Graduate Competencies (B1.01b)

The George Fox University Master of Medical Science program seeks specific graduate competencies, as well as valid and reliable assessment of performance based on six graduate competencies (and outcomes for each). Competency categories include:

1. Medical knowledge (MK)
2. Interpersonal and communication skills (ICS)
3. Patient care and clinical problem solving (PC)
4. Technical skills (TS)
5. Practice based learning and improvement (PBLI)
6. System based practice (SBP)
7. Professionalism (P)

#### Medical Knowledge (MK)

PAs must demonstrate core knowledge about established and evolving biomedical and clinical sciences and the application of this knowledge to patient care in their area of practice. In addition, PAs are expected to demonstrate an investigatory and analytic thinking approach to clinical situations. Outcome expectations for this competency include:

MK1 – Demonstrate the ability to effectively recognize, assess, diagnose, and treat patients with a variety of problems to include preventive, emergent, acute, and chronic clinical practice of medicine. Associated ARC-PA Standards include:

- Core knowledge about established and evolving biomedical and clinical sciences and the application of this knowledge to patient care (**B1.01c**)
- Instruction in the following areas of medical sciences and their application in clinical practice (**B2.02a-e**):
  - o anatomy
  - o physiology
  - o pathophysiology
  - o pharmacology and pharmacotherapeutics
  - o the genetic and molecular mechanisms of health and disease
- Instruction in clinical medicine covering all organ systems (**B2.03**)
- Development of clinical reasoning and problem-solving abilities (**B2.05**)
- Patient evaluation, diagnosis and management across all age groups and from initial presentation through ongoing follow up (**B2.07**)
- Preventive, emergent, acute, chronic, and rehabilitative patient encounters (**B2.08b, B3.03a**)

MK2 – Demonstrate the medical, behavioral, and social science knowledge necessary to both promote health, evaluate, and manage care across the life span to include infants, children, adolescents, adults, and the elderly. Associated ARC-PA Standards include:

- Sufficient breadth and depth to prepare the student for the clinical practice of medicine (**B1.01d**)
- Medical care across the life span to include, prenatal, infants, children, adolescents, adults, and the elderly (**B2.08a, B3.03b**)
- Women’s health (to include prenatal and gynecologic care) (**B3.03c**)
- Care for psychiatric/behavior conditions (**B2.08d, B3.03e**)
- Palliative and end of life care (**B2.08e**)
- SCPE that occurs in an outpatient setting (**B3.04c**)
- SCPE that occurs in an emergency department (**B3.04a**)
- SCPE that occurs in an inpatient setting (**B3.04b**)
- Instruction in pre-, intra-, and post-operative care along with SCPE that occurs in a surgery setting (pre-, intra-, and post-operative) (**B2.08c, B3.03d, B3.04d**)
- SCPE occurs with preceptors in family medicine (**B3.07a**)
- SCPE occurs with preceptors in emergency medicine (**B3.07b**)
- SCPE occurs with preceptors in internal medicine (**B3.07c**)
- SCPE occurs with preceptors in surgery (**B3.07d**)
- SCPE occurs with preceptors in pediatrics (**B3.07e**)
- SCPE occurs with preceptors in women’s health including prenatal and gynecologic care (**B3.07f**)
- SCPE occurs with preceptors in behavior and mental health care (**B3.07g**)

**Interpersonal and Communication Skills (ICS)**

PAs must demonstrate interpersonal and communication skills that result in effective information exchange with patients, their patients’ families, physicians, professional associates, and the healthcare system. Outcome expectations for this competency include:

ICS1 – Demonstrate knowledge and application of effective interpersonal, oral, and written communication skills necessary to elicit and record a medical history, explain and document diagnostic studies, and present an appropriate treatment plan. Associated ARC-PA Standards include:

- Sufficient breadth and depth to prepare the student for the clinical practice of medicine (**B1.01d**)
- Demonstrated medical care to patients with consideration for (**B2.06a-f**):
  - o disability status or special health care needs
  - o ethnicity/race
  - o gender identity
  - o religion/spirituality
  - o sexual orientation
  - o social determinants of health
- Work collaboratively in *interprofessional* patient centered teams with consideration for (**B2.10a-c**)
  - roles and responsibilities of various health care professionals
  - emphasis on the team approach to patient centered care beyond the traditional physician-PA team approach
  - the application of these principles in *interprofessional* teams
- Interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families and other health professionals (**B2.04**)
- Basic counseling and patient education skills that is patient centered, culturally sensitive and focused on helping patients (**B2.12**):
  - o adhere to treatment plans
  - o modify their behaviors to more healthful patterns
  - o develop coping mechanisms
- Reimbursement, documentation of care, coding and billing (**B2.14a; B2.14b**)

ICS2 – Communicate in a patient-centered and culturally responsive manner to accurately obtain, interpret and utilize information and implement a patient-centered management plan. Associated ARC-PA Standards include:

- Intellectual honesty, academic integrity, and professional conduct **(B2.19)**
- Patient evaluation, diagnosis and management across all age groups and from initial presentation through ongoing follow up to include interviewing and eliciting a medical history **(B2.07a)**
- Clinical medical care across the life span **(B2.08a, B3.03b)**
- Social and behavioral sciences and their application to clinical practice in **(B2.11a-g)**:
  - o death, dying and loss
  - o human sexuality
  - o normal and abnormal development across the lifespan
  - o patient response to illness or injury
  - o patient response to stress
  - o substance use disorders
  - o violence identification and prevention
- Basic counseling and patient education skills that is patient centered, culturally sensitive and focused on helping patients **(B2.12a-c)**:
  - o adhere to treatment plans
  - o modify their behaviors to more healthful patterns
  - o develop coping mechanisms
- Reimbursement, documentation of care, coding and billing **(B2.14a; B2.14b)**
- Principles and practice of medical ethics **(B2.18)**

**Patient Care and Clinical Problem Solving (PC)**

PAs must demonstrate care that is effective, safe, high quality, and equitable; includes patient- and discipline-specific assessment, evaluation, and management. Outcome expectations for this competency include:

PC1 – Demonstrate the ability to perform a new or routine follow up physical exam and make informed decisions about diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence, and clinical judgment.

Associated ARC-PA Standards include:

- Core knowledge about established and evolving biomedical and clinical sciences and the application of this knowledge to patient care **(B1.01c)**
- Sufficient breadth and depth to prepare the student for the clinical practice of medicine **(B1.01d)**
- Instruction in the following areas of medical sciences and their application in clinical practice **(B2.02a-e)**:
  - o anatomy
  - o physiology
  - o pathophysiology
  - o pharmacology and pharmacotherapeutics
  - o the genetic and molecular mechanisms of health and disease
- Instruction in clinical medicine covering all organ systems **(B2.03)**
- Development of clinical reasoning and problem-solving abilities **(B2.05)**
- Patient evaluation, diagnosis and management across all age groups and from initial presentation through ongoing follow up to include **(B2.07b-f)**:
  - o performing a complete and focused physical exam
  - o generating a differential diagnosis
  - o ordering and interpreting diagnostic studies
  - o patient management to include acute and chronic care plans
  - o patient education and referral
- Concepts of public health as they relate to the role of the practicing PA and **(B2.15a-d)**:
  - o disease prevention, surveillance, reporting and intervention,
  - o the public health system
  - o patient advocacy
  - o maintenance of population health
- Medical care across the life span to include, prenatal, infants, children, adolescents, adults, and the elderly **(B2.08a, B3.03b)**
- Preventive, emergent, acute, chronic, and rehabilitative patient encounters **(B2.08b, B3.03a)**
- Women’s health (to include prenatal and gynecologic care) **(B3.03c)**
- Care for psychiatric/behavior conditions **(B2.08d, B3.03e)**
- Palliative and end of life care **(B2.08e)**
- SCPE that occurs in an outpatient setting **(B3.04c)**
- SCPE that occurs in an emergency department **(B3.04a)**
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- Instruction in pre-, intra-, and post-operative care along with SCPE that occurs in a surgery setting (pre-, intra-, and post-operative) **(B2.08c, B3.03d, B3.04d)**
- SCPE occurs with preceptors in family medicine **(B3.07a)**
- SCPE occurs with preceptors in emergency medicine **(B3.07b)**
- SCPE occurs with preceptors in internal medicine **(B3.07c)**
- SCPE occurs with preceptors in surgery **(B3.07d)**
- SCPE occurs with preceptors in pediatrics **(B3.07e)**

- SCPE occurs with preceptors in women's health including prenatal and gynecologic care (**B3.07f**)
- SCPE occurs with preceptors in behavior and mental health care (**B3.07g**)

PC2 – Demonstrate the ability to effectively work within a patient centered healthcare team. Associated ARC-PA Standards include:

- Intellectual honesty, academic integrity, and professional conduct (**B2.19**)
- Work collaboratively in *interprofessional* patient centered teams with consideration for (**B2.10a-c**)
  - o roles and responsibilities of various health care professionals,
  - o emphasis on the team approach to patient centered care beyond the traditional physician-PA team approach
  - o the application of these principles in *interprofessional* teams
- SCPE that occurs in an outpatient setting (**B3.04c**)
- SCPE that occurs in an emergency department (**B3.04a**)
- SCPE that occurs in an inpatient setting (**B3.04b**)
- Instruction in pre-, intra-, and post-operative care along with SCPE that occurs in a surgery setting (pre-, intra-, and post-operative) (**B2.08c, B3.03d, B3.04d**)
- SCPE occurs with preceptors in family medicine (**B3.07a**)
- SCPE occurs with preceptors in emergency medicine (**B3.07b**)
- SCPE occurs with preceptors in internal medicine (**B3.07c**)
- SCPE occurs with preceptors in surgery (**B3.07d**)
- SCPE occurs with preceptors in pediatrics (**B3.07e**)
- SCPE occurs with preceptors in women’s health including prenatal and gynecologic care (**B3.07f**)
- SCPE occurs with preceptors in behavior and mental health care (**B3.07g**)

**Technical Skills (TS)**

PAs must demonstrate the ability to obtain informed consent, perform clinical procedures common to primary care, and interpret diagnostic tests. Outcome expectations for this competency include:

TS – Skills include but not limited to: venipuncture, intravenous access, injections, wound care, casting and splinting and interpretation of radiographic images, pulmonary function tests, and ECGs. Associated ARC-PA Standards include:

- Technical skills and procedures based on current professional practice (**B2.09**)
- Patient safety, quality improvement, prevention of medical errors, and risk management (**B2.16a-d**)

**Practice-Based Learning and Improvement (PBLI)**

PAs must be able to assess, evaluate, and improve their patient care practices. Outcome expectations for this competency include:

PBLI – Demonstrate the ability to critically evaluate research literature and develop an educational evidenced-based practice-improvement project. Associated ARC-PA Standards include:

- Advancing applied content (**B2.01**)
- Instruction in quality improvement (**B2.16c**)

**Systems-Based Practice (SBP)**

PAs should work to improve the larger healthcare system of which their practices are a part. Outcome expectations for this competency include:

SBP1 – Demonstrate the ability to critically evaluate medical literature to ensure the appropriateness and cost effectiveness of patient resources. Associated ARC-PA Standards include:

- Advancing applied content (**B2.01**)
- Search, interpret and evaluate the medical literature relevant to (**B2.13a-e**):
  - o framing of research questions
  - o interpretation of basic biostatistical methods
  - o the limits of medical research
  - o types of sampling methods
  - o the use of common databases to access medical literature

SBP2 – Demonstrate the ability to identify needed area(s) of change within a system-based practice and develop and present a plan for improvement. Associated ARC-PA Standard includes:

- Instruction in quality improvement (**B2.16c**)

**Professionalism (P)**

PAs must express positive values and ideals as care is delivered. Foremost, professionalism involves prioritizing the interests of those being served above one’s own while acknowledging their professional and personal limitations. Additionally, PAs must demonstrate a high level of responsibility, ethical practice, sensitivity to a diverse patient population, and adherence to legal and regulatory requirements. Outcome expectations for this competency include:

P1 – Demonstrate professionalism in interactions with others including, but not limited to, patients, families, and colleagues. Associated ARC-PA Standards include:

- Instruction to prepare students to provide medical care to patients with consideration for (**B2.06a-f**):
  - disability status or special health care needs,
  - ethnicity/race,
  - gender identity
  - religion/spirituality
  - sexual orientation
  - social determinants of health
- Work collaboratively in *interprofessional* patient centered teams with consideration for (**B2.10a-c**)
  - roles and responsibilities of various health care professionals,
  - emphasis on the team approach to patient centered care beyond the traditional physician-PA team approach
  - the application of these principles in *interprofessional* teams.
- Interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families and other health professionals (**B2.04**)

P2 – Demonstrate knowledge and application of an understanding of the PA role including ethical and professional standards regarding the PA profession. Associated ARC-PA Standards include:

- Health care delivery systems and health policy (**B2.14c, B2.14d**)
- Concepts of public health as they relate to the role of the practicing PA (**B2.15a-d**):
  - disease prevention, surveillance, reporting and intervention,
  - the public health system
  - patient advocacy
  - maintenance of population health
- Principles of the PA profession to include (**B2.17a-g**):
  - credentialing
  - historical development
  - laws and regulations regarding professional practice and conduct
  - licensure and certification
  - the PA relationship with the physician and other health care providers
  - policy issues that affect practice
  - professional organizations
- Principles and practice of medical ethics (**B2.18**)
- Intellectual honesty, academic integrity, and professional conduct (**B2.19**)
- Concepts in personal wellness including prevention of impairment and burnout (**B2.20**)
- PA students must wear identification, in the clinical setting, to distinguish them from physicians, medical students and other health profession students and graduates (**A3.06**)

Competency and proficiency in these functions and tasks is a learning process that will gradually occur over the breadth of the MMSc PA program. Evaluation of these outcomes will occur via the use of multiple instruments, including, but not limited to, written and practical examinations, clinical preceptor evaluations, research projects, PANCE results, and graduate and post-graduate surveys.

## Article 7.2 Instructional Delivery Methods

Instruction methods will focus on program and course competencies and include a didactic, experiential, and summative phases. The didactic phase of the Program will consist of lectures, laboratory sessions, workshops, team-based learning activities (TBL), and problem-based learning case studies (PBL). Lectures and laboratory sessions will be accomplished as a class. Laboratory and workshop course work will allow students hands on experience in skills such as physical exams, crisis intervention, ultrasound techniques, and radiograph and electrocardiograph interpretation. Team and problem-based learning activities will take place in small groups (six to nine students with one faculty) where teams discuss solutions to a presented problem.

The experiential (clinical) phase of the program will take students from the theoretical classroom to an active learning environment that prepares them for a lifetime of continued skill refinement and expanded knowledge as a practicing PA. During this phase, a board-certified physician or PA will oversee students while they gain experience as a medical provider in a myriad of settings such as family practice, internal medicine, emergency medicine, surgery, psychiatry, and others.

Finally, the summative phase will test graduate competency attainment via written tests, objective structured clinical examinations (OSCEs), and skills testing.

### **Article 7.3 Curriculum**

The Master of Medical Science (MMSc) curriculum occurs over six consecutive semesters (24 months), covering 112 graduate semester hours. The program has three phases which include (1) pre-clinical also known as didactic, (2) experiential phase, and (3) the summative phase. The three semester pre-clinical phase is conducted on campus and prepares the student for the experiential hands-on portion of training (clinical phase). The experiential phase is 11 months long (three semesters) and is conducted at hospitals and clinics where students are exposed to supervised clinical experiences. The 1-month summative phase evaluates student attainment of graduate competencies and occurs during the last month of the program.

#### **Orientation**

Orientation occurs the first full week of January. This is mandatory for all enrolled.

#### Spring IA Semester (Didactic)

- Introduction to the PA profession (0.5 SH)
- Research and evidence-based medicine (0.5 SH)
- Health care delivery systems and health policy (0.5 SH)
- Ethics and social and behavioral science (0.5 SH)
- Communication, counseling and education techniques (0.5 SH)
- Introduction to anatomy (0.5 SH)
- Introduction to physical exams (0.5 SH)
- Introduction to Pharmacology (0.5 SH)

#### Spring IB Semester (Didactic)

- Clinical reasoning and problem-based learning I (7 SH)
- Clinical reasoning and problem-based learning lab I (1 SH)
- Human anatomy I (2 SH)
- Pathophysiology I (2.5 SH)
- Pharmacotherapy and patient management I (2.5 SH)
- Global Health and Special populations I (2 SH)
- Behavior medicine (2 SH)

#### Summer I Semester (Didactic)

- Clinical reasoning and problem-based learning II (9 SH)
- Clinical reasoning and problem-based learning lab II (1 SH)
- Human anatomy II (2 SH)
- Pathophysiology II (3 SH)
- Pharmacotherapy and patient management II (3 SH)
- Global Health and Special populations II (2 SH)

#### Fall I Semester (Didactic)

- Clinical reasoning and problem-based learning III (9 SH)
- Clinical reasoning and problem-based learning lab III (1 SH)
- Human anatomy III (2 SH)
- Pathophysiology III (3 SH)

- Pharmacotherapy and patient management III (3 SH)
- Global Health and Special populations III (2 SH)

Spring IIA Semester (Clinical Preparation)

- Principles of general surgery (3 SH)
- Principles of emergency medicine (3 SH)
- Transition to clerkships (2 SH)

Spring IIB, Summer II, Fall IIA Semesters (Experiential/Clinical Phase)

- Family Medicine (4 SH)
- Internal Medicine (4 SH)
- Emergency Medicine (4 SH)
- General Surgery (4 SH)
- Pediatric Medicine (4 SH)
- Prenatal and Gynecology Medicine (4 SH)
- Behavior and Mental Health (4 SH)
- Elective I (4 SH)
- Elective II (4 SH)

Fall IIB Semester (Summative Phase)

- Summative (5 SH)

**Article 7.3.1 Spring IA**

***Introduction to the PA Profession (0.5 SH)***

This course covers the following topics:

- Intellectual honesty, academic integrity, and professional conduct (**B2.19**)
- Reimbursement, Documentation of Care, Coding, and Billing (B2.14a; B2.14b)
- PA profession to include (B2.17):
  - credentialing,
  - historical development,
  - laws and regulations regarding professional practice and conduct,
  - licensure and certification,
  - the PA relationship with the physician and other health care providers,
  - policy issues that affect practice, and
  - professional organizations.
- Concepts in personal wellness including prevention of impairment and burnout (B2.20)

***Research and evidence-based medicine (0.5 SH)***

This course prepares students to search, interpret and evaluate the medical literature relevant to (B2.13):

- framing of research questions,
- interpretation of basic biostatistical methods,
- the limits of medical research,
- types of sampling methods, and  
the use of common databases to access medical literature

This instruction assists students in maintaining a critical, current and operational knowledge of new medical findings required for the prevention and treatment of disease.

### ***Health care delivery systems and health policy (0.5 SH)***

This course covers the following topics:

- Health Care Delivery Systems and Health Policy (B2.14c; B2.14d)
- Concepts of public health as they relate to the role of the practicing PA and (B2.15):
  - disease prevention, surveillance, reporting and intervention,
  - the public health system,
  - patient advocacy, and
  - maintenance of population health.
- Reimbursement, Documentation of Care, Coding, and Billing (B2.14a; B2.14b)

### ***Ethics and social and behavior science (0.5 SH)***

This course covers Intellectual honesty, academic integrity, and professional conduct (B2.19) and Medical Ethics (B2.18).

### ***Communication counseling and education techniques (0.5 SH)***

This course introduces students to communication, counseling and education techniques. It covers basics of:

- Interpersonal and Communication Skills that result in (1) effective exchange of information and (2) collaboration with patients, their families, and other health care professionals (B2.04)
- Interviewing and eliciting a medical history (B2.07)
- Basic counseling and patient education skills that is patient centered, culturally sensitive and focused on helping patients (B2.12):
  - adhere to treatment plans,modify their behaviors to more healthful patterns, and develop coping mechanisms.

### ***Introduction to anatomy (0.5 SH)***

This course provides an overview of anatomy, physiology, and genetic and molecular mechanisms of health and disease (B2.02a, B2.02b, B2.02e). In addition, the course will include core knowledge about established and evolving biomedical and clinical sciences and the application of this knowledge to patient care (B1.01c).

### ***Introduction to physical exams (0.5 SH)***

This course develops skills in patient evaluation, diagnosis, and management to include (B2.05):

- Caring for patients of all ages from initial presentation through follow up
  - Interviewing and eliciting a medical history
  - performing complete and focused physical exam
  - Generating a differential diagnosis
  - Ordering and interpreting diagnostic tests.
- Patient management instruction is acute and longitudinal management that is:
  - Patient centered
  - Inclusive
  - Addresses medical issue
  - Provides patient education and referral
- Patient safety, quality improvement, prevention of medical errors, and risk management (B2.13)

### ***Introduction to pharmacotherapy (0.5 SH)***

This course provides an introduction to pharmacotherapy (B2.02d). In addition, the course will cover acute and longitudinal – non-pharmaceutical – patient management that is patient centered and inclusive while addressing medical issues, patient education, and if needed a referral (B2.05)

### ***Article 7.3.2 Spring IB***

Topics and body systems covered include (1) hematology, oncology, and infectious diseases, (2) dermatology, (3) ears, eyes, nose, throat and (4) endocrine (hypothalamus, pituitary, pineal gland, thyroid, and parathyroid). Relevant topics and disease processes in each topic area will be developed.

### ***Clinical reasoning and problem-based learning I (7 SH)***

This course provides instruction related to the development of problem solving and medical decision-making skills (B2.05). It develops student knowledge in anatomy, physiology, pathophysiology, pharmacology/pharmacotherapeutics, and patient management of organ systems and topics covered during the term (B2.02a, B2.02b, B2.02c, B2.02d, B2.03). Using student led problem-based concepts, the course provides instruction in patient assessment (evaluation and diagnosis) and management includes caring for patients of all ages from initial presentation through ongoing follow-up (B2.07). Students will develop skills in (1) interviewing and eliciting a medical history; (2) performing complete and focused physical examinations; (3) generating differential diagnoses; and (4) ordering and interpreting diagnostic studies. In addition, topics on patient management to include (1) acute and chronic care plans and (2) patient education and referral are developed (B2.07). The course covers medical care across the life span in prevention, emergent, acute, chronic, rehabilitative, palliative, and end of life care scenarios (B2.06). In most instances, all age groups are addressed (prenatal, infant, children, adolescents, adult, and elderly (B2.06). Finally, the course covers instruction about basic counseling and patient education skills that is patient centered, culturally sensitive and focused on helping patients (B2.12):

- adhere to treatment plans,
- modify their behaviors to more healthful patterns, and
- develop coping mechanisms.

### ***Clinical reasoning and problem-based learning lab I (1 SH)***

This course takes the PBL session into the laboratory and clinical skills unit where hands on training further develops patient assessment and management (B2.07). Students work in small groups, developing skills in (1) interviewing and eliciting a medical history; (2) performing complete and focused physical examinations; (3) generating differential diagnoses; and (4) ordering, performing, and interpreting diagnostic studies. Patient management instruction includes (1) acute and chronic care plans and (2) patient education and referral (B2.07). The course covers medical care across the life span in prevention, emergent, acute, chronic, rehabilitative, palliative, and end of life care scenarios (B2.06). In most instances, all age groups are addressed (prenatal, infant, children, adolescents, adult, and elderly (B2.06). In addition, the course covers instruction about basic counseling and patient education skills that is patient centered, culturally sensitive and focused on helping patients (B2.12):

- adhere to treatment plans,
- modify their behaviors to more healthful patterns, and
- develop coping mechanisms.

Finally, students will learn about patient safety, quality improvement, prevention of medical errors, and risk management (B2.16).

### ***Human anatomy I (2 SH)***

This course provides an overview of anatomy, physiology, and genetic and molecular mechanisms of health and disease as they relate to body system diseases and topics covered this term (B2.02a, B2.02b, B2.02e).

### ***Pathophysiology I (2.5 SH)***

This course runs concurrently with and builds upon the clinical reasoning and problem-based learning course. Time will be spent reviewing relevant pathophysiology, discussed in PBL, and introducing any subject or body system topic not covered in PBL (B2.02c, B2.03).

### ***Pharmacotherapy and patient management I (2.5 SH)***

This course provides pharmacotherapeutic of body system diseases and topics covered this term (B2.02d). In addition, topics on patient management to include (1) acute and chronic care plans and (2) patient education and referral are developed (B2.07).

### ***Global Health and special populations I (2 SH)***

This class addresses social and behavior science and their application to clinical practice in (B2.11):

- death, dying and loss,
- human sexuality,
- normal and abnormal development across the life span,
- patient response to illness or injury,
- patient response to stress,
- substance use disorders, and
- violence identification and prevention.

In addition, the course prepares students to provide medical care to patients with consideration for (B2.06)

- disability status or special health care needs,
- ethnicity/race,
- gender identity,
- religion/spirituality,
- sexual orientation, and
- social determinants of health.

Instruction related to medical care and diversity prepares students to (1) evaluate their own values and avoid stereotyping, (2) become aware of differing health beliefs, values and expectations of patients and other health care professionals and how it impacts (a) communication, (b) decision-making, (c) compliance and (d) health outcomes.

### ***Behavior Medicine (2 SH)***

This course covers several mental health conditions to include the pathophysiology, evaluation, diagnosis, and treatment of each. Topics covered are abuse and neglect, anxiety disorders, bipolar, depression disorders, conduct disorders, dissociative disorders, eating disorders, obsessive compulsive disorders, attention deficit, autism, personality disorders, schizophrenia, sleep-wake disorders, somatic symptoms, and trauma related disorders. In addition, detection and treatment of issues related to (B2.11)

- death, dying and loss,
- human sexuality,
- normal and abnormal development across the life span,
- patient response to illness or injury,

- patient response to stress,
- substance use disorders, and
- violence identification and prevention.

### **Article 7.3.3 Summer I**

Topics and body systems covered include (1) pulmonary, (2) cardiac, (3) gastroenterology/nutrition, and (4) endocrine (pancreas). Relevant topics and disease processes in each topic area will be developed.

#### ***Clinical reasoning and problem-based learning II (9 SH)***

This course provides instruction related to the development of problem solving and medical decision-making skills (B2.05). It develops student knowledge in anatomy, physiology, pathophysiology, pharmacology/pharmacotherapeutics, and patient management of organ systems and topics covered during the term (B2.02a, B2.02b, B2.02c, B2.02d, B2.03). Using student led problem-based concepts, the course provides instruction in patient assessment (evaluation and diagnosis) and management includes caring for patients of all ages from initial presentation through ongoing follow-up (B2.07). Students will develop skills in (1) interviewing and eliciting a medical history; (2) performing complete and focused physical examinations; (3) generating differential diagnoses; and (4) ordering and interpreting diagnostic studies. Patient management instruction will address acute and longitudinal management that helps develop treatment plans that are (1) patient centered, (2) inclusive, (3) addressing medical issues, and (4) provides patient education and referral. (B2.07). The course covers medical care across the life span in prevention, emergent, acute, chronic, rehabilitative, palliative, and end of life care scenarios (B2.06). In most instances, all age groups are addressed (prenatal, infant, children, adolescents, adult, and elderly (B2.06). Finally, the course covers instruction about basic counseling and patient education skills that is patient centered, culturally sensitive and focused on helping patients (B2.12):

- adhere to treatment plans,
- modify their behaviors to more healthful patterns, and
- develop coping mechanisms.

#### ***Clinical reasoning and problem-based learning lab II (1 SH)***

This course is takes the PBL session into the laboratory and clinical skills unit where hands on training further develops patient assessment and management (B2.07). Students work in small groups, developing skills in (1) interviewing and eliciting a medical history; (2) performing complete and focused physical examinations; (3) generating differential diagnoses; and (4) ordering, performing, and interpreting diagnostic studies. In addition, topics on patient management to include (1) acute and chronic care plans and (2) patient education and referral are developed (B2.07). The course covers medical care across the life span in prevention, emergent, acute, chronic, rehabilitative, palliative, and end of life care scenarios (B2.06). In most instances, all age groups are addressed (prenatal, infant, children, adolescents, adult, and elderly (B2.06). Also, the course covers instruction about basic counseling and patient education skills that is patient centered, culturally sensitive and focused on helping patients (B2.12):

- adhere to treatment plans,
- modify their behaviors to more healthful patterns, and
- develop coping mechanisms.

Finally, students will learn about patient safety, quality improvement, prevention of medical errors, and risk management (B2.16).

### ***Human anatomy II (2 SH)***

This course provides an overview of anatomy, physiology, and genetic and molecular mechanisms of health and disease as they relate to body system diseases and topics covered this term (B2.02a, B2.02b, B2.02e).

### ***Pathophysiology II (3 SH)***

This course runs concurrently with and builds upon the clinical reasoning and problem-based learning course. Time will be spent reviewing relevant pathophysiology, discussed in PBL, and introducing any subject or body system topic not covered in PBL (B2.02c, B2.03).

### ***Pharmacotherapy and patient management II (3 SH)***

This course provides pharmacotherapeutic of body system diseases and topics covered this term (B2.02d). In addition, topics on patient management to include (1) acute and chronic care plans and (2) patient education and referral are developed (B2.07).

### ***Global Health and special populations II (2 SH)***

This course provides an introduction to important global health issues, including determinants of health, key areas of disease burden, and the role that PAs can play in solving these problems. The goal of the course is to expand the PAs understanding of the impact of infectious and chronic diseases on the world's population with particular attention paid to the health status of women, children and the poor. Students will examine case studies of successful global health interventions to understand features of successful programs.

### ***Article 7.3.4 Fall I***

Topics and body systems covered include (1) renal, genitourinary, and reproductive, (2) musculoskeletal, (3) neurologic, and (4) endocrine (adrenal glands, testicles, and ovaries). Relevant topics and disease processes in each topic area will be developed.

### ***Clinical reasoning and problem-based learning III (9 SH)***

This course provides instruction related to the development of problem solving and medical decision-making skills (B2.05). It develops student knowledge in anatomy, physiology, pathophysiology, pharmacology/pharmacotherapeutics, and patient management of organ systems and topics covered during the term (B2.02a, B2.02b, B2.02c, B2.02d, B2.03). Using student led problem-based concepts, the course provides instruction in patient assessment (evaluation and diagnosis) and management includes caring for patients of all ages from initial presentation through ongoing follow-up (B2.07). Students will develop skills in (1) interviewing and eliciting a medical history; (2) performing complete and focused physical examinations; (3) generating differential diagnoses; and (4) ordering and interpreting diagnostic studies. In addition, topics on patient management to include (1) acute and chronic care plans and (2) patient education and referral are developed (B2.07). The course covers medical care across the life span in prevention, emergent, acute, chronic, rehabilitative, palliative, and end of life care scenarios (B2.06). In most instances, all age groups are addressed (prenatal, infant, children, adolescents, adult, and elderly (B2.06). Finally, the course covers instruction about basic counseling and patient education skills that is patient centered, culturally sensitive and focused on helping patients (B2.12):

- adhere to treatment plans,
- modify their behaviors to more healthful patterns, and develop coping mechanisms.

### ***Clinical reasoning and problem-based learning lab III (1 SH)***

This course takes the PBL session into the laboratory and clinical skills unit where hands on training further develops patient assessment and management (B2.07). Students work in small groups, developing skills in (1) interviewing and eliciting a medical history; (2) performing complete and focused physical examinations; (3) generating differential diagnoses; and (4) ordering, performing, and interpreting diagnostic studies. In addition, topics on patient management to include (1) acute and chronic care plans and (2) patient education and referral are developed (B2.07). The course covers medical care across the life span in prevention, emergent, acute, chronic, rehabilitative, palliative, and end of life care scenarios (B2.06). In most instances, all age groups are addressed (prenatal, infant, children, adolescents, adult, and elderly (B2.06). In addition, the course covers instruction about basic counseling and patient education skills that is patient centered, culturally sensitive and focused on helping patients (B2.12):

- adhere to treatment plans,
- modify their behaviors to more healthful patterns, and
- develop coping mechanisms.

Finally, students will learn about patient safety, quality improvement, prevention of medical errors, and risk management (B2.16).

### ***Human anatomy III (2 SH)***

This course provides an overview of anatomy, physiology, and genetic and molecular mechanisms of health and disease as they relate to body system diseases and topics covered this term (B2.02a, B2.02b, B2.02e).

### ***Pathophysiology III (3 SH)***

This course runs concurrently with and builds upon the clinical reasoning and problem-based learning course. Time will be spent reviewing relevant pathophysiology, discussed in PBL, and introducing any subject or body system topic not covered in PBL (B2.02c, B2.03).

### ***Pharmacotherapy and patient management III (3 SH)***

This course provides pharmacotherapeutic of body system diseases and topics covered this term (B2.02d). In addition, topics on patient management to include (1) acute and chronic care plans and (2) patient education and referral are developed (B2.07).

### ***Global Health and special populations III (2 SH)***

This is the third course in the global health and special populations series and is focused on developing organization and leadership traits. Instruction will look at how individuals and groups think and interact and analyze what factors enhance these interactions to positively impact the success of the organization. The purpose of this course is to create a more effective service-oriented clinician. The course will examine some of the primary theories and principles of motivation, communication, leadership attributes, managing conflict, decision making, team building, and dealing with change at an organizational level. The course will explore many prominent organizational behavior theories and issues and discuss and analyze current examples from the healthcare arena. It will provide examples of how greater knowledge and understanding of effective leadership skills in an organization is vital to successful and sound decision-making, problem solving, conflict management, team building, and managing change.

### ***Article 7.3.5 Spring IIA***

### ***Principles of General Surgery (3 SH)***

This course covers concepts of surgical assessment, basic surgical skills and procedures, surgical complications, and management of surgical patients. It builds on the foundation of the previous medicine courses and expands on etiology, pathophysiology, clinical manifestation, and diagnosis, and appropriate management of selected surgical conditions including care of acute and chronic patients. Emphasis is on students developing competency in the principles and practices involved in aseptic and basic surgical techniques, surgical risk assessment, wound management, anesthesia, and preoperative, perioperative and postoperative evaluation and management. (B2.05; B2.02d; B2.06; B2.07)

### ***Principles of emergency medicine (3 SH)***

This course prepares students to recognize, rapidly assess, and effectively manage emergent situation, illness, or injury. Problem-based case studies and team-based activities are used to encourage the development of teamwork, collaboration, and interdisciplinary value. Basic Life Support, Advanced Cardiac Life Support, and Pediatric Advanced Life Support training is part of this course. (B2.05; B2.02d; B2.06; B2.07).

### ***Transition to clerkships (2 SH)***

The purpose of this course is to: (1) provide the student with a time of self-assessment, (2) evaluate the students' knowledge, skills, and attitude, (3) identify the student's level of preparedness for clinical rotations, and (4) promote interprofessional relationships. The course will evaluate student preparedness for SCPE clerkships using Objective Structured Clinical Examination (OSCE) testing, clinical skills assessments, and a written examination. Students must pass each of the three testing areas prior to the start of SCPE rotations. Supervised Clinical Practice Experience (SCPE) expectations and behavior will be discussed.

### ***Article 7.3.7 Spring IIB***

#### ***Supervised Clinical Practice Experience (4 SH each)***

Supervised clinical practice experiences address the fundamental principles of each discipline as they relate to the clinical care of patients. Three of the following supervised clinical practice experiences occur this term (B3.07).

- Family Medicine (4 SH)
- Emergency Medicine (4 SH)
- Internal Medicine (4 SH)
- Surgery (4 SH)
- Pediatric Medicine (4 SH)
- Prenatal and Gynecology Medicine (4 SH)
- Behavior and Mental Health (4 SH)
- Elective I (4 SH)
- Elective II (4 SH)

Supervised clinical practice experiences enable students to meet the program's learning outcomes expected of students, to include (1) preventive, (2) emergent, (3) acute, and (4) chronic patient encounters (B1.03; B3.02). Additional outcomes met during the SCPE year include providing (1) medical care across the life span to include, infants, children, adolescents, adults, and the elderly, (2) women's health (to include prenatal and gynecologic care), (3) surgical management to include pre-operative, intra-operative, and post-operative care, and (4) care for behavior and mental health conditions (B3.03). In addition, SCPE clerkships should expose students to various care settings to include, (1) outpatient, (2)

emergent, (3) inpatient, and the (4) operating room (B3.04). SCPE clerkships occur with licensed physicians who are board certified in their area of instruction or NCCPA Board Certified PAs (B3.05; B3.06). In rare instances, vetted non-physician or PA preceptors will be used (B3.06). PAEA 'end of rotation' exams will be administered for all SCPE clerkships with the exception of the two electives.

### ***Article 7.3.8 Summer II***

#### ***Supervised Clinical Practice Experience (4 SH each)***

Supervised clinical practice experiences address the fundamental principles of each discipline as they relate to the clinical care of patients. Three of the following supervised clinical practice experiences occur this term (B3.07).

- Family Medicine (4 SH)
- Emergency Medicine (4 SH)
- Internal Medicine (4 SH)
- Surgery (4 SH)
- Pediatric Medicine (4 SH)
- Prenatal and Gynecology Medicine (4 SH)
- Behavior and Mental Health (4 SH)
- Elective I (4 SH)
- Elective II (4 SH)

Supervised clinical practice experiences enable students to meet the program's learning outcomes expected of students, to include (1) preventive, (2) emergent, (3) acute, and (4) chronic patient encounters (B1.03; B3.02). Additional outcomes met during the SCPE year include providing (1) medical care across the life span to include, infants, children, adolescents, adults, and the elderly, (2) women's health (to include prenatal and gynecologic care), (3) surgical management to include pre-operative, intra-operative, and post-operative care, and (4) care for behavior and mental health conditions (B3.03). In addition, SCPE clerkships should expose students to various care settings to include, (1) outpatient, (2) emergent, (3) inpatient, and the (4) operating room (B3.04). SCPE clerkships occur with licensed physicians who are board certified in their area of instruction or NCCPA Board Certified PAs (B3.05; B3.06). In rare instances, vetted non-physician or PA preceptors will be used (B3.06). PAEA 'end of rotation' exams will be administered for all SCPE clerkships with the exception of the two electives.

### ***Article 7.3.9 Fall IIA***

#### ***Supervised Clinical Practice Experience (4 SH each)***

Supervised clinical practice experiences address the fundamental principles of each discipline as they relate to the clinical care of patients. Three of the following supervised clinical practice experiences occur this term (B3.07).

- Family Medicine (4 SH)
- Emergency Medicine (4 SH)
- Internal Medicine (4 SH)
- Surgery (4 SH)
- Pediatric Medicine (4 SH)
- Prenatal and Gynecology Medicine (4 SH)
- Behavior and Mental Health (4 SH)
- Elective I (4 SH)

- Elective II (4 SH)

Supervised clinical practice experiences enable students to meet the program's learning outcomes expected of students, to include (1) preventive, (2) emergent, (3) acute, and (4) chronic patient encounters (B1.03; B3.02). Additional outcomes met during the SCPE year include providing (1) medical care across the life span to include, infants, children, adolescents, adults, and the elderly, (2) women's health (to include prenatal and gynecologic care), (3) surgical management to include pre-operative, intra-operative, and post-operative care, and (4) care for behavior and mental health conditions (B3.03). In addition, SCPE clerkships should expose students to various care settings to include, (1) outpatient, (2) emergent, (3) inpatient, and the (4) operating room (B3.04). SCPE clerkships occur with licensed physicians who are board certified in their area of instruction or NCCPA Board Certified PAs (B3.05; B3.06). In rare instances, vetted non-physician or PA preceptors will be used (B3.06). PAEA 'end of rotation' exams will be administered for all SCPE clerkships with the exception of the two electives.

### ***Article 7.3.10 Fall IIB***

#### ***Summative Evaluation (5 SH)***

The summative phase measures mastery in the GFU MMSc PA graduate competencies and outcomes, associated ARC-PA Standards, and NCCPA Blueprint items. This phase is 1 month in duration and represents the final stage of the program and includes the following 'summative' evaluations:

- Written multiple question examination covering the knowledge base content associated with all the basic medical and clinical sciences and its application to the practice of medicine.  
Competency headings include:
  - Medical knowledge (MK)
  - Interpersonal and communication skills (ICS)
  - Patient care and clinical problem solving (PC)
  - Technical skills (TS)
  - Practice based learning and improvement (PBLI)
  - System based practice (SBP)
  - Professionalism (P)
- Objective Structured Clinical Examination (OSCE), which is used to evaluate direct patient care skills including obtaining the medical history, physical examination skills, communication, and professionalism (testing aptitude of competency and outcomes relevant to [1] Medical Knowledge, [2] Interpersonal and Communication Skills, [3] Patient Care, and [4] Professionalism).
- Skill Specific Testing, which is used to assess the student's ability to perform and/or interpret the diagnostic and therapeutic skills, listed in this SCPE core syllabus (testing aptitude of competency and outcomes relevant to [1] Medical Knowledge, [2] Interpersonal and Communication Skills, [3] Patient Care and Clinical Problem Solving, [4] Technical Skills, and [5] Professionalism).

Additional instruction will include (B2.16; B2.17):

- A review of patient safety, quality improvement, prevention of medical errors, and risk management
- Instruction about PA licensure, credentialing, and laws and regulations of professional practice
- In addition, the program curriculum will include instruction in the PA profession and current trends to include:
  - Physician-PA team relationship

- Political issues that affect PA practice
- PA professional organizations

Finally, students will also engage in preparation for the PANCE exam, Curriculum Vitae creation, and preparation for job interviews.

# ARTICLE 8.0 CURRICULUM MAP

**24 Month PA Curriculum Course Map** CURRICULUM MAP  
 MMSc (PA) is 112 SH January Start

		January				February				March				April				May				June				July				August				September				October							
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44
Year 1	Orientation Week	Spring IA (4 SH)		Spring IB (19 SH)																		Summer I (20 SH)				Fall I (20 SH)																			
		January 11, 2021 - April 30, 2021		May 10, 2021 - August 20, 2021																		August 30, 2021 - December 17, 2021																							
		-PA Profess		Clinical Reasoning and Problem Based Learning I																		Clinical Reasoning and Problem Based Learning II				Clinical Reasoning and Problem Based Learning (PBL) III																			
		-EBM		-Human Anatomy																		-Human Anatomy				-Human Anatomy																			
		-PH/Policy		-Pathophysiology																		-Pathophysiology				-Pathophysiology																			
		-Ethics		-Patient Evaluation & Physical Diagnosis																		-Patient Evaluation & Physical Diagnosis				-Patient Evaluation & Physical Diagnosis																			
		-Communica		-Clinical Methods & Procedures																		-Clinical Methods & Procedures				-Clinical Methods & Procedures																			
		-A and P		-Pharmacotherapy & Patient Management																		-Pharmacotherapy & Patient Management				-Pharmacotherapy & Patient Management																			
		-Phy Exam		-Critical Thinking																		-Critical Thinking				-Critical Thinking																			
		-Pharm		Clinical Reasoning and Problem Based Learning Lab I																		Clinical Reasoning and Problem Based Learning Lab II				Clinical Reasoning and Problem Based Learning Lab III																			
				-Physical Examination Skills																		-Physical Examination Skills				-Physical Examination Skills																			
				-Clinical Procedures Skills																		-Clinical Procedures Skills				-Clinical Procedures Skills																			
		Human Anatomy I																		Human Anatomy II				Human Anatomy III																					
		Pathophysiology I																		Pathophysiology II				Pathophysiology III																					
		Pharmacotherapy & Patient Management I																		Pharmacotherapy & Patient Management II				Pharmacotherapy & Patient Management III																					
		Global Health and Special Populations I																		Global Health and Special Populations I				Global Health and Special Populations III																					
		Behavior Medicine																		Global Health and Special Populations I				Global Health and Special Populations III																					

Body System Topics for Spring IB (weeks include block testing; Finals week is not included)			
Hem/Onc/Infectious Diseases	11%	4 wks	
Dermatology	5%	3 wks	
HEENT with Endocrine *	7%	5 wks	

Body System Topics for Summer I (weeks include block testing; Finals week is not included)			
Pulmonary	10%	4 wks	
Cardiac	13%	5 wks	
Gastroenterology/Nutrition with Endocrine *	9%	5 wks	

Body System Topics for Fall I (weeks include block testing; Finals week is not included)			
Renal System with Endocrine (adrenal glands) *			
Genitourinary and Reproductive System with Endocrine (testicles and ovaries) *			
Musculoskeletal			
Neurologic			

\* Endocrine includes: hypothalamus, pituitary, pineal gland, thyroid, and parathyroid

\* Endocrine includes: Pancreas

\* Endocrine includes: Adrenal glands, testicles, and ovaries

		Spring IIA/IIB (8 SH)												Spring IIC (12 SH)												RAD				Summer II (12 SH)												Fall IIA (12 SH)			
		January 10, 2022 - April 29, 2022																								May 9, 2022 - August 19, 2022				August 29, 2022 - December 16, 2022															
Year 2	Break	Principles of Surgery		Transition to Clerkships		Eperiential Learning (1) Family Medicine (2) Internal Medicine (3) General Surgery (4) Emergency Medicine				Eperiential Learning (1) Family Medicine (2) Internal Medicine (3) General Surgery (4) Emergency Medicine				Eperiential Learning (1) Family Medicine (2) Internal Medicine (3) General Surgery (4) Emergency Medicine				RAD				Eperiential Learning (1) Family Medicine (2) Internal Medicine (3) General Surgery (4) Emergency Medicine				Eperiential Learning (1) Family Medicine (2) Internal Medicine (3) General Surgery (4) Emergency Medicine				Eperiential Learning (1) Family Medicine (2) Internal Medicine (3) General Surgery (4) Emergency Medicine															
		Principles of Emergency Care				(5) Pediatrics (6) Prenatal and GYN (7) Behavior Medicine (8) Elective #1 (9) Elective #2				(5) Pediatrics (6) Prenatal and GYN (7) Behavior Medicine (8) Elective #1 (9) Elective #2				(5) Pediatrics (6) Prenatal and GYN (7) Behavior Medicine (8) Elective #1 (9) Elective #2				Rotation Assessment (Return to Campus)				(5) Pediatrics (6) Prenatal and GYN (7) Behavior Medicine (8) Elective #1 (9) Elective #2				(5) Pediatrics (6) Prenatal and GYN (7) Behavior Medicine (8) Elective #1 (9) Elective #2				(5) Pediatrics (6) Prenatal and GYN (7) Behavior Medicine (8) Elective #1 (9) Elective #2															

## ARTICLE 9.0 ESTIMATED COST OF ATTENDANCE

### Article 9.1 Tuition, Fees, and Other Program Costs (A3.12f)

The standard undergraduate tuition rate does not apply to students who matriculate into the GFU MMSc PA Program. The following table outlines the program’s expected tuition and fees for the application cycle cohort. It should be noted that tuition and fees might change from year to year subject to economic influences, the needs of the University, and needs of the program.

Tuition and Fees	Year 1	Year 2
Tuition Academic Year (January – December) Levelized tuition	\$58,800	\$58,800
Program Fees (\$1,733/Semester)	\$5,199	\$5,199

Diagnostic and Technology Costs	Year 1	Year 2
Diagnostic Medical Equipment (*estimate)	\$1,050	
Technology Supplies (Computer; iPad, etc. *estimate)	\$2,500	\$200

Other Costs	Year 1	Year 2
Criminal Background and Sex Offender Registry Search, National Healthcare Fraud and Abuse Scan, Residence History, and Social Security Alert. Due as follows: <ul style="list-style-type: none"> <li>· Pre-Matriculation</li> <li>· Pre-Clinical Rotations</li> <li>· As Required by Clinical Sites</li> </ul> Due and/or verified by third party	\$100	\$100
12 Panel Urine Drug Screen. Due as follows: <ul style="list-style-type: none"> <li>· Pre-Matriculation</li> <li>· Pre-Clinical Rotations</li> <li>· As Required by Clinical Sites</li> </ul> Due and/or verified by third party	\$40	\$40
Compliance Tracker Which Includes Verification of: <ul style="list-style-type: none"> <li>· Signed Technical Standards Form; CPR Certificate</li> <li>· Immunization Status; Tuberculosis Screening Results</li> <li>· Release Form for Immunizations</li> <li>· Tuberculosis status; Health Insurance Status</li> </ul> Due as follows: <ul style="list-style-type: none"> <li>· Pre-Matriculation</li> <li>· Pre-Clinical Rotations</li> <li>· As Required by Clinical Sites</li> </ul> Due and/or verified by third party	\$35	\$35
Mandatory HIPAA and OSHA Certification Due and/or verified by third party	\$25	\$0
Professional Organization Fees	\$100	\$100
Textbooks and misc. Supplies	\$1,000	\$1,000
Health Insurance based on GFU policy ( <a href="https://www.georgefox.edu/offices/hea_cou/insurance.html">https://www.georgefox.edu/offices/hea_cou/insurance.html</a> )	\$3,800	\$3,800
University Comprehensive Fee (Campus Safety, Rec Center, Health Center)	\$460	\$460
Graduation Fee		\$165

**Note: Additional costs for housing, transportation, food, etc. should be considered in the cost of education**

### Article 9.2 Payment (Application, Deposit, Tuition, and Fees) and Refunds (A1.02k)

The George Fox Master of Medical Science (PA) program’s application cycle will open at the end of April, and run through October 31, via the Central Application Service for PA (CASPA). To be precise, GFU will accept COMPLETED applications through October 1; Interviews will end prior to October 31; all seats will be offered by October 31. The cohort will matriculate in January. CASPA is an online application clearing house located at <https://portal.caspaonline.org/>. As of March 2019, the cost for a CASPA application was \$179 for the first program you apply to. If you submit to other programs before the first e-delivery of your application, each additional program is \$45. If you submit to other programs after the first e-delivery of your application, each additional program is \$52. As a general rule, CASPA does not refund application fees. Information related to CASPA fees can be found at [https://help.liasonedu.com/CASPA Applicant Help Center](https://help.liasonedu.com/CASPA_Applicant_Help_Center). The link between the George Fox MMSc PA program, CASPA, and student candidates will be managed by the MMSc PA program’s Admissions Coordinator or Admissions Counselor.

Enrollment Deposit: Candidates who accept a seat must pay a \$1,000 non-refundable deposit within two weeks of notification of acceptance in order to hold their place in the cohort. Eight-hundred (\$800) of this deposit will be applied toward first semester tuition costs. The remaining \$200 is an [Enrollment Deposit](#) applied to the student’s account at graduation. Accepted candidates who do not pay the \$1,000 deposit within the required time frame (two weeks) forfeit their seat.

Payment: 100% of semester tuition and fees are due at the beginning of the semester. [Refunds](#) for students who drop or withdraw from classes, on or after the first day of the session, will receive a removal of tuition using the following GFU policy (<https://www.georgefox.edu/offices/student-accounts/policies/charges-removal.html>).

First Week	100% of charged removed
Second Week	90% of charges removed; \$25 drop fee assessed
Third Week	75% of charges removed
Fourth Week	50 of charges removed
Fifth Week	25% of charges removed
Sixth Week and Beyond	All tuition charges remain

### ARTICLE 10.0 STUDENT EMPLOYMENT (A3.04; A3.05)

The PA program [strongly discourages](#) students from being employed while enrolled and does not make exceptions or alterations to required course work, scheduling, or rotation assignments for individual students due to employment (A3.14h). Employment status while in the program will not be used to excuse absence from scheduled learning activities, justify poor performance, or be considered as a mitigating factor when assessing students’ academic and professional progress.

#### Article 10.1 Students Will Not Work for The PA Program (A3.04)

- The GFU MMSc PA Program [does not](#) permit its students to work (paid or voluntary) for the Program (A3.04).

#### Article 10.2 Student Will Not Substitute as Faculty (A3.05)

- GFU MMSc PA students [will not](#) substitute for or function as instructional faculty (paid or volunteer) (A3.05).

- Students with specific prior knowledge, experiences, and skills may assist faculty (provided faculty approval and oversight) and share that knowledge and skill set during didactic and laboratory sessions.
- Students may not be the primary instructor or instructor of record for any component of the program curriculum.
- Students may not participate in the primary assessment of other students, except as indicated in the student reflection activities.

### **Article 10.3 Students Will Not Work at Clerkship Rotation Sites (A3.05)**

During supervised clinical experiences, students may not substitute for clinical or administrative staff and must ensure all services provided to patients are directly supervised (A3.05). Students may not accept compensation for any services provided during supervised clinical experiences unless specifically approved by the Director of Clinical Education (e.g. housing stipend)

## **ARTICLE 11.0 PROGRAM ADMISSION POLICY (A3.13)**

### **Article 11.1 Special Consideration (A3.13a)**

All George Fox University graduates and military veterans\* *who meet ALL the PA program's admission requirements* will be invited for an interview. To be considered under this article, however, the applicant *must submit transcripts\*\** and have their CASPA application verified on or before Aug. 30 of the application cycle. An invitation to interview does not guarantee admittance to the program.

\* Reservists/guard members must be in good standing; separated or retired veterans must produce a DD214 showing an honorable discharge.

\*\* Military applicants may have met some prerequisite course requirements in their military training. For example, the USAF Pararescue Airman completed 12 semester hours of Emergency Medicine, 4 semester hours of Anatomy and Physiology, and 3 semester hours of Psychology. This training is represented on the Airman's Community College of the Air Force transcripts. Therefore, the GFU PA program requires military applicants to submit military training transcripts (Air Force, Navy, Army, Marines, Coast Guard) to CASPA and recommend that you download an unofficial copy for yourself or request an additional copy be sent to your home address for your personal records. **Transcripts are available at the following links:**

- [Air Force - Air University/Community College of the Air Force Transcripts \(CCAF\)](#)
- [Army, Coast Guard, Navy and Marines - Joint Service Transcript \(JST\)](#)

**(Please note: if the transcript links prompt you with a security warning, simply accept the security certificate or follow the instructions to add an exception to your browser.)**

Note: Although the minimum passing grade for military training is a C, which is below the B (3.0) mark for non-military applicants, GFU recognizes the equivalent grade within this training (A, B, or C) cannot be determined. Given that, the GFU PA Admissions Committee agreed to accept the pass grade "as is." The cumulative 3.0 GPA, for all courses taken (military and non-military), still applies.

### **Article 11.2 Prior Education Requirements (A3.13b; A3.13d)**

All Transcripts must be submitted and support completion of a bachelor's degree and required science prerequisites.

**Article 11.2.1 Bachelor’s Degree Standards (A3.13b; A3.13d)**

A bachelor’s degree, from a *U.S. regionally accredited* institution is required to apply. A candidate may apply prior to meeting this requirement provided they can complete it by Oct. 1 preceding matriculation. To do this, official transcripts (sealed) from the college or university, confirming the degree must be received by George Fox's MMSc PA program by Oct. 31 (preceding matriculation). If a selected candidate does not meet this deadline, he or she will relinquish their seat.

**Article 11.2.2 Minimum Grade Point Average (GPA) Standards**

The minimum GPA to apply is a *CUMULATIVE (ALL COURSE WORK) OF 3.0* (or B; B- is not acceptable). Upon written request, George Fox will consider an applicant whose cumulative GPA falls below 3.0, provided their last 60 semester hours of academic work (undergraduate or graduate) produced a 3.3 or higher GPA. Prerequisites (see below) must still meet the 3.0 per course requirement. **Note:** The average cumulative GPA for all programs in the U.S. is 3.49. **NOTE: In response to academic changes related to covid-19, GFU will accept pass/fail grades for courses taken during the 2020 Calendar year (for cohort matriculating in January 2021). A 3.0 course GPA; however, is still the minimum GPA standard for each prerequisite graded on a 4.0 scale.**

**Article 11.2.2 Science Prerequisites Standards (A3.13b; A3.13d)**

All prerequisite courses must be taken at a U.S. regionally accredited institution and EACH course must meet a minimum 3.0 GPA (or B; B- is not acceptable) requirements (prerequisite course completion recommended within the last 5 to 7 years). Applicants with up to one remaining prerequisites may apply provided they complete the course with a 3.0 or higher GPA – before the first day of October preceding matriculation (if selected, official transcripts [sealed] from the college or university must be received by GFU’s MMSc PA program by October 31 (preceding matriculation) or a selected candidate will relinquish their seat). **NOTE: In response to academic changes related to covid-19, GFU will accept pass/fail grades for courses taken during the 2020 Calendar year (for cohort matriculating in January 2021). A 3.0 course GPA; however, is still the minimum GPA standard for each prerequisite graded on a 4.0 scale.**

Required Course	Semester Hours Minimum
Anatomy and Physiology – lecture and lab <ul style="list-style-type: none"> <li>● Human-based <u>ONLY</u></li> <li>● NO online lab courses are accepted</li> <li>● The lab must apply to the course taken</li> <li>● If taken separately, no lab is required for the physiology course</li> </ul>	Applicants can fulfill this requirement with one of the following options: <ol style="list-style-type: none"> <li>1. Taking <u>two</u> Human Anatomy and Physiology (with lab) courses (combined) for a total of <u>8 SH</u></li> <li>2. Taking the Human Anatomy with lab (<u>4 SH</u>) <u>and</u> Human Physiology (no lab required) (<u>3 SH</u>) courses separately</li> <li>3. Successful completion of the Special Operations Combat Medic Course</li> </ol>
General Biology with Lab <ul style="list-style-type: none"> <li>● <u>NO</u> online lab courses are accepted</li> <li>● The lab must apply to the course taken</li> <li>● Survey courses <u>DO NOT</u> meet this requirement (usually a 100 level class)</li> </ul>	General Biology with Lab course ( <u>4 SH</u> )

<p>Other Biology</p> <ul style="list-style-type: none"> <li>Survey courses <b>DO NOT</b> meet this requirement (usually a 100 class)</li> <li>No lab is required</li> </ul>	<p>Applicants can fulfill this requirement with one of the following options (or equivalent) (3 SH to 4 SH):</p> <ol style="list-style-type: none"> <li>General Biology II</li> <li>Genetics</li> <li>Cell Biology</li> <li>Histology</li> <li>Immunology</li> <li>Virology</li> <li>Epidemiology</li> <li>Biochemistry (can only be used once)</li> </ol>
<p>Microbiology</p> <ul style="list-style-type: none"> <li>Microbiology for non-science majors are accepted</li> <li>Online courses are accepted</li> </ul>	<p>Microbiology course (3 SH)</p>
<p>General Chemistry with Lab</p> <ul style="list-style-type: none"> <li><b>NO</b> online lab courses are accepted</li> <li>The lab must apply to the course taken</li> <li>Survey courses <b>DO NOT</b> meet this requirement (usually a 100 class)</li> </ul>	<p>General Chemistry with Lab course (4 SH)</p>
<p>Other Chemistry</p> <ul style="list-style-type: none"> <li>Survey courses <b>DO NOT</b> meet this requirement (usually a 100 lass)</li> <li>No lab is required</li> </ul>	<p>Applicants can fulfill this requirement with one of the following options (or equivalent) (3 SH):</p> <ol style="list-style-type: none"> <li>General Chemistry II</li> <li>Organic Chemistry</li> <li>Analytical Chemistry</li> <li>Biochemistry (can only be used once)</li> </ol>
<p>Introductory to Psychiatry/Psychology or higher</p>	<p>Applicants can fulfill this requirement with one of the following options (or equivalent) (3 SH):</p> <ol style="list-style-type: none"> <li>Introductory to Psychiatry</li> <li>Abnormal Psychology</li> <li>Developmental Psychology</li> <li>Psychology throughout the Lifespan</li> </ol>
<p>Statistics</p> <ul style="list-style-type: none"> <li>Business Statistics is <b>NOT</b> accepted</li> </ul>	<p>Applicants can fulfill this requirement with one of the following options (or equivalent) (3 SH):</p> <ol style="list-style-type: none"> <li>General Statistics</li> <li>Behavioral Statistics</li> <li>Biostatistics</li> </ol>
<p>Medical Terminology</p>	<p>Highly recommended</p>

Note #1: Military applicants may have met some prerequisite course requirements in their training. For example, USAF Pararescueman training includes 12 SH of Emergency Medicine, 4 SH of Anatomy and Physiology, and 3 SH of Psychology. The decision to accept or decline military training, as meeting a prerequisite, is at the discretion of the PA program director. Since no letter grade is provided in these courses, they will be accepted ‘as is’ when successful completion can be proven (DD214 verification).

### Article 11.3 Other Applicant Requirements/Considerations (A3.13d)

#### Article 11.3.1 Graduate Record Examination (GRE)

The GRE is required (within five years of the application date) for admission. There is no exception to this requirement. To be competitive, consider the following GRE score guidelines:

- Best Scores:** include a verbal score between 163 and 170, quantitative score between 165 and 170, and a writing score of 5 to 6.
- Better Scores:** include a verbal score between 158 and 162, quantitative scores between 159 and 164, and a writing score of 4.5.
- Good Scores:** include a verbal score of 152 to 158, quantitative score of 153 to 158, and a writing score of 4.

- **Below Average Scores:** include a verbal score 151 or lower, quantitative score 152 or below, and a writing score of 3.5 or below.
- The GFU GRE Code will be posted once it is available.

**NOTE:** In response to the covid-19 pandemic, the GRE is waived during the 2020 application cycle (for cohort matriculating in January 2021). All applicants (during this cycle) will receive 5 points in this category.

### **Article 11.3.2 Professional Recommendations**

Three letters of recommendation are required (each from a 'professional' source; should not be from a relation or close family friend).

### **Article 11.3.3 Paid Healthcare Experience**

A minimum number of patient care hours are not required for admittance into the program. However, a point value for paid healthcare experience is added to the applicants overall score. To receive points for paid healthcare experience it must be from a paid position(s) and not volunteer work or an academic internship. Exceptions include work as a paramedic or EMT when all emergency services are provided only on an all-volunteer basis. Note: Clinical experience gained through a training program, as a student, does not count as paid healthcare experience. Note: The average number of patient contact hours for a PA Applicant (based on data from all U.S. PA programs) is 4,019 hours.

#### **Article 11.3.3.1 Common, Competitive, Direct Patient Care Experience Examples**

- Military (medic, corpsman, pararescueman, SERE specialist)
- Emergency medicine (EMT, paramedic, ER technician)
- Nursing (registered nurse, licensed practical nurse, certified nursing asst)
- Respiratory therapist
- Medical assistant, Community health aid/practitioner

#### **Article 11.3.3.2 Other Acceptable Allied Health Experience Examples**

- Mental health practitioner
- Laboratory/medical technician
- Radiology technician
- Clinical research
- Chiropractor
- Emergency room or clinical scribe

#### **Article 11.3.3.3 Positions NOT Meeting Direct Patient Care Prerequisite**

- Medical billing
- Medical records
- Medical interpretation
- Medical transcriptionist
- Patient scheduler
- Anything considered administrative in nature

### **Article 11.3.4 Volunteerism**

A minimum number of Volunteer hours are not required for admittance into the program.

- A point value volunteerism (mission work, soup kitchen, big brothers/sisters, etc.), however, is added to the applicants overall score. Note: For every one week on a medical mission, the applicant receives 70 hours of volunteerism.
- Note: Military veterans (with a DD214 showing honorable discharge) will receive the maximum volunteerism value.
- Note: the average volunteerism: based on data from all U.S. PA programs is 423 hours

#### **Article 11.3.5 Test of English and Foreign Language (TOEFL)**

An applicant whose native language is not English and who does not have a full year (two semesters) of composition or its equivalent in English studies must demonstrate skills in English understanding and use. Recent scores on the Test of English and Foreign Language (TOEFL) normally suffice. TOEFL scores should be submitted with the CASPA application or directly to GFU Graduate Admissions when CASPA is not used. Satisfactory scores are based on the testing format and include:

- Internet-based TOEFL: Score of 100 with a minimum score of 20 on each section.
- A total score of 600 on the paper TOEFL, with a score of 55 on the Listening Comprehension.
- A total score of 250 on the computer-based TOEFL.
- A level 112 from the ELS Language Centers or other recognized evidence may be considered satisfactory, pending the Admissions Committee approval.

#### **Article 11.4 Advanced Academic Placement (A3.13c; A3.16)**

All GFU MMSc PA courses must be taken as part of the MMSc PA cohort and no advanced placement options are available.

### **ARTICLE 12.0 TECHNICAL STANDARDS FOR ENROLLMENT (A3.13e)**

George Fox University student candidates must possess the capacity to complete the entire curriculum to achieve the Master of Medical Science degree. The curriculum requires demonstrated skills in (1) observation, (2) communication, (3) motor, (4) intellectual-conceptual, integrative, and quantitative abilities, and (5) behavioral and social attributes. Candidates offered a seat in the program are required to sign this testament, verifying understanding and that they meet these Standards. In the event an applicant is unable to fulfill these technical standards prior to or any time after admission, with or without reasonable accommodation, the student will not be allowed to enter or progress within the program.

#### **Article 12.1 Observation**

The candidate must be able to:

- Observe demonstrations, visual presentations in lectures and laboratories, laboratory evidence and microbiologic cultures, microscopic studies of microorganisms and tissues in normal and pathologic states
- Observe a patient accurately at a distance and close at hand
- Use the sense of vision, somatic sensation, and smell as part of the observation process.

#### **Article 12.2 Communication**

A candidate should be able to:

- Communicate professionally, effectively, and sensitively with patients and families
- Communicate professionally, effectively, and efficiently in oral and written forms with all members of the healthcare team

- Be able to speak, hear, and observe patients in order to elicit information, perceive nonverbal communications, and describe changes in mood, activity, and posture
- Utilize speech, reading, writing, and computers as part of the communication process. In addition, candidates must possess the skills necessary to communicate effectively in small and large group discussions.

### **Article 12.3 Motor**

Candidates must have sufficient motor skills and coordination to:

- Execute the movement required to provide patient care such as palpitation, auscultation, percussion, and other diagnostic maneuvers
- Execute movements required to provide general care and emergency treatment to patients. These skills require coordination of gross and fine muscular movement, equilibrium, and sensation.
- Manipulate equipment and instruments necessary to perform basic laboratory tests and procedures required to attain curricular goals (e.g. needles, stethoscope, ophthalmoscope, tongue blades, intravenous equipment, gynecologic speculum, and scalpel)
- Transport themselves from one location to another in a timely fashion in order to facilitate patient care responsibilities and receive educational training.

### **Article 12.4 Intellectual-Conceptual, Integrative and Quantitative Abilities**

Candidates must be able to:

- Comprehend three-dimensional relationships and the spatial relationship of structures
- Collect, organize, prioritize, analyze, and assimilate large amounts of technically detailed and complex information within a limited time frame. This information will be presented in a variety of educational settings, including lectures, small group discussions, and individual clinical settings.
- Analyze, integrate, and apply information appropriately for problem solving and decision-making.

### **Article 12.5 Behavioral and Social Attributes**

Candidates must have:

- Emotional health, maturity, sensitivity, intellectual ability, and good judgment needed to complete all responsibilities associated with the diagnosis and care of patients
- The ability to tolerate physical, mental, and emotional stress associated with training and the profession
- Qualities of adaptability, flexibility and be able to function in the face of uncertainty
- A high level of compassion for others, motivation to serve, integrity, and a consciousness of social values
- Sufficient interpersonal skills to interact positively with people from all levels of society, all ethnic backgrounds, and all belief systems
- The ability to accept criticism and respond by appropriate modification of behavior.

## **ARTICLE 13.0 PRE-SCREEN SCORING MATRIX (A3.14)**

Applicant requirements are reviewed, scored, and converted to percentage value (total points earned divided by the maximum potential). The GFU PA Admissions Committee will review all applicants meeting minimum requirements and either (1) invited to interview, (2) put on hold, or (3) deny an interview. Each of the items on the applicant spreadsheet will be given a weighted point value (based

on preset objective criteria) and the combined score will be used to rank candidates for the interview (pre-screen matrix). The higher your score, the better your odds of being interviewed. For example:

- Cumulative GPA scoring ranges from 5 points for a 3.0 GPA up to 20 points for a 3.7 or higher GPA.
- Science aptitude (combined courses; must have 3.0 in each) scoring ranges from 15 points for a 3.0 GPA up to 30 points for a 3.7 or higher GPA.
- Although there is no minimum GRE requirement to apply, scoring ranges start at 0 for a score below 153 (verbal), below 152 (quantitative) and 0 for writing of 3 or below. The highest GRE score available is 2 for a verbal score of 165 or higher, 2 for a quantitative score of 165 or higher and 1 for a writing score of 5 to 6. The total GRE potential value is 5 points. **NOTE: In response to the covid-19 pandemic, the GRE is waived during the 2020 application cycle (for cohort matriculating in January 2021). All applicants (during this cycle) will receive 5 points in this category.**
- Letters of recommendation are required and are reviewed, but no point value is applied to this item.
- There is no minimum for volunteerism but like other items shown here, volunteerism points range from zero to 25.
- Paid healthcare experience, although not required, has an assigned value in our application. A value of 5 points is assigned for 250 to 1,000 hours; 10 points for 1,001 to 2,000 hours; and 15 points for over 2,000 hours.

Item	Minimum Requirements	National Average/Goal	Your Results	Potential Points
Bachelor's Degree	Mandatory	N/A		N/A
Cumulative Grade Point Average	3.0 Cumulative GPA	3.56 Cumulative GPA		20
Science Aptitude <ul style="list-style-type: none"> <li>• Anatomy and Physiology with lab I</li> <li>• Anatomy and Physiology with lab II</li> <li>• General Biology with Lab</li> <li>• Other Biology</li> <li>• Microbiology</li> <li>• General Chemistry with Lab</li> <li>• Other Chemistry</li> <li>• Introduction to Psychology</li> <li>• Statistics</li> </ul>	3.0 Minimum/Course 3.0 GPA 3.0 GPA 3.0 GPA 3.0 GPA 3.0 GPA 3.0 GPA 3.0 GPA 3.0 GPA	Combined 3.51 GPA		30
Graduate Record Evaluation (GRE) <ul style="list-style-type: none"> <li>• Verbal Reasoning</li> <li>• Quantitative Reasoning</li> <li>• Writing</li> </ul>	No Minimum No Minimum No Minimum	305/4 152 153 4		5
Paid Healthcare Experience	No Minimum	4,019Hours		15
Volunteerism	No Minimum	618 Hours		25
Letters of Reference (Professional)	Three Letters	N/A		5

### ARTICLE 14.0 INTERVIEW (A3.14)

Each of the items on the applicant spreadsheet (article 15.0) will be given a weighted point value (based on preset objective criteria) and the combined score will be used to rank candidates for interview (pre-screen matrix). The higher your score, the better your odds of being interviewed.

### **Article 14.1 Interview Timeline**

Interviews will begin in June and continue until the class is full or October 31, whichever comes first. By using this approach, it is possible to fill all available seats prior to the October 31 date. Therefore, it is to your advantage to submit a completed application (via CASPA) as early in the process as possible. The longer you wait to submit an application (even though prior to the deadline), the greater your risk that no class seats will be available, or that only a few will remain. Once the class is full, remaining applications will be evaluated for an alternate list.

### **Article 14.2 Interview Process**

An invitation to interview does not guarantee acceptance into the program. The GFU Program uses a rolling admissions process. Therefore, applicants who qualify for an interview may be invited to the next available scheduled interview date. Program faculty (program director, medical director and principal faculty), adjunct faculty, and local physicians, PAs, and health care workers will make up the interview team. Each will be trained on the interview process before the interview date and briefed on the scoring criteria before each interview session begins.

The interview day will begin with introductions and expectations for the day. Next, applicants will be evaluated via a series of short, carefully timed interview stations and one essay station. In general, each of these encounters will assess the candidate's character, communication skills, professionalism, and adaptability.

## **ARTICLE 15.0 CANDIDATE SELECTION (A3.14)**

The Program Admissions Committee applicant-scoring matrix used includes the applicant's bachelor's degree GPA, science aptitude GPA, GRE scores, letters of recommendation, paid healthcare experience, and volunteerism. The program faculty (program director, medical director and principal faculty), adjunct faculty, and local physicians, PAs, and health care workers may make up the interview team. Applicants will be evaluated via a series of short, carefully timed interview stations and one essay station. At the day's end, the Program Admissions Committee will (1) tally candidate scores from the interview process using a 'Post Interview Matrix' and rank applicants in order of score. (2) Next, the 'pre-screen matrix' and 'post screen matrix' will be combined and the selection committee will discuss the applicants. (3) The committee will select up to three candidates on the day of the interview. (4) The remaining will be set aside and reviewed again in approximately two weeks and at that time placed in one of three categories: (a) admit now – these candidates will receive a formal offer for a seat in the Program within four weeks of completing the interview; (b) alternate list (wait list) – these candidates will be formally notified – by email – within four weeks of completing the interview. Each wait-listed candidate will be reviewed at the two-week mark of all future interviews. At that time, their status will be updated to (i) admit now, (ii) continue wait list, or (iii) declined; (c) Declined – these individuals will be notified within four weeks of the interview process.

Letters of acceptance may have conditions to matriculate. In this situation, the offer and conditions of acceptance will be detailed in the letter. An example would be acceptance of a student who must complete a required prerequisite course by October 1 (verified by October 31) prior to matriculating into the program. In this case, their acceptance would be pending successful completion of the prerequisite course. For details on what is required, see 'post acceptance requirements' below.

### **Article 15.1 Conflict of Interest (A3.14)**

Faculty members must use their professional integrity and excuse themselves from interviewing, ranking, or selecting candidates whom they have a significant relationship with. This may include but is not limited to: family members, friends, family friends, acquaintances of individuals they know well, and those whom they have established professional relationships within other settings.

## **ARTICLE 16.0 POST-ACCEPTANCE REQUIREMENTS (A3.07; A3.13e)**

### **Article 16.1 Non-Refundable Deposit**

Candidates who accept a seat must pay a \$1,000 non-refundable deposit within two weeks of notification of acceptance in order to hold their place in the cohort. Eight-hundred (\$800) of this deposit will be applied toward first semester tuition costs. The remaining \$200 is an [Enrollment Deposit](#) applied to the student's account at graduation. Accepted candidates who do not pay the \$1,000 deposit within the required time frame (two weeks) forfeit their seat.

### **Article 16.2 Post-Acceptance Requirements**

Once accepted into the GFU MMSc PA Program, the following conditions must be completed by November 30, 2020 in order to matriculate into the program. Candidates who fail to complete these requirements by the deadline will relinquish his/her seat and it will be offered to an alternate. These requirements will be coordinated by the GFU admission team and handled by an outside vendor that works with the admissions director. Requirements include:

- Background Search (estimated at \$100 for each occurrence):
  - Criminal Activity
  - Sex Offender Registry
  - National Healthcare Fraud and Abuse
  - Residence History
  - Social Security Alerts
- Twelve (12) Panel Urine Drug Screen (estimated at \$40 for each occurrence)
- Compliance Verification (estimated at \$35 per occurrence)
  - Signed Technical Standards Form
  - Immunization Status Verification
  - Tuberculosis Screening Results
  - CPR Certification
  - Health Insurance Policy (showing current status)
  - Signed Release Form allowing GFU to Provide Preceptors with Status or Results of Immunizations, TB Screening, Drug Screening, and Background Check
- Mandatory HIPAA and OSHA Certification (estimated at \$25)

All prerequisites must be taken at a U.S. regionally accredited institution and EACH course must meet a minimum 3.0 GPA (or B; B- is not acceptable) requirement (prerequisite course completion recommended within the last 5 to 7 years). An applicant may be offered a seat with up to two (2) outstanding prerequisites provided but these courses must be completed by October 1 preceding matriculation and official transcripts [sealed] from the college or university (confirming course completion and course grade of at least 3.0) must be received by GFU's PA program by October 31. Failure to meet these deadlines will result in a forfeiture of seat and the candidate will not be allowed to matriculate into the program.

### **Article 16.2.1 Background Search**

Prior to matriculation (by November 30<sup>th</sup>), before the clinical year begins, and as required by a clerkship site – all PA students are required to have a completed certified background check via an established third party. The background search looks for a history of:

- Criminal Activity
- Sex Offender Registration
- National Healthcare Fraud and Abuse
- Residence History
- Social Security Alerts

Admittance to the Program is contingent upon a successful background evaluation. If the background search reveals information that would prohibit a student from participating in clinical rotations, the seat offer will be rescinded or if already in the program the student will be dismissed (academically unable to fulfill course/program obligations). The estimated cost for the background check is \$150.

### **Article 16.2.2 Twelve Panel Urine Drug Screen**

Prior to matriculation (by November 30<sup>th</sup>), before the clinical year begins, and as required by a clerkship site – all PA students are required to have a twelve (12) panel urine drug screen completed via an established third party.

Admittance to the Program is contingent upon a negative twelve panel urine drug screen. If any drug screen reveals information that would prohibit a student from participating in clinical rotations, the student will be dismissed (academically unable to fulfill course/program obligations). The estimated cost for the twelve panel drug screen is \$45.

### **Article 16.2.3 Mandatory HIPAA and OSHA Certification**

Prior to matriculation (by November 30<sup>th</sup>) all PA students are required to complete Health Insurance Portability and Accountability (HIPAA) and Operational Safety and Health Administrative (OSHA) training through an established third party. The cost of this training is estimated at \$25. Prior to the clinical year HIPAA and OSHA concepts will be reviewed by program faculty. If required by a clerkship site, this training will need to be repeated at the clinical site. Depending on circumstances, it may be done by GFU established third party or through the clerkship site.

### **Article 16.2.4 Compliance Verification**

To matriculate (by November 30<sup>th</sup>) and as needed throughout the program, certain tasks must be completed and/or verified by an established third party. The estimated cost for compliance verification is \$35. These include:

- Immunization Status Verification
- Tuberculosis Screening Results (two step)
- Health Insurance Policy (showing current status)
- CPR Certification (must be current)
- Signed GFU MMSc PA Pre-Matriculation Technical Standards Testament
- Signed Release Form allowing GFU to Provide Preceptors with Status or Results of Immunizations, TB Screening, Drug Screening, and Background Check

### **Article 16.2.5 Immunization History (A3.07)**

The GFU MMSc PA Program has a pre-matriculation immunization policy that is based on the Centers for Disease Control and Prevention (CDC) immunization recommendations for health-care personnel (<https://www.cdc.gov/vaccines/adults/rec-vac/hcw.html>). All applicants must meet the CDC recommendation prior to matriculation and it must be verified by an established third party. In addition, all immunizations must remain current while attending the GFU PA program. All vaccines must be administered in accordance with CDC's published guidelines.

#### **Article 16.2.5.1 Hepatitis B**

If you don't have documented evidence of a complete Hep B vaccine series, or if you don't have an up-to-date blood test that shows you are immune to hepatitis B (i.e., no serologic evidence of immunity or prior vaccination) then you must have the 3-dose series (dose #1 now, #2 in 1 month, #3 approximately 5 months after #2). In 1 to 2 months after the 3<sup>rd</sup> dose you must have anti-HBs serologic testing done.

- If anti-HBs is at least 10 mIU/mL (positive), the student is immune. No further serologic testing or vaccination is recommended.
- If anti-HBs is less than 10 mIU/mL (negative), the student is not protected from hepatitis B virus (HBV) infection, and should receive 3 additional doses of Hep B vaccine on the routine schedule, followed by anti-HBs testing 1–2 months later. A student whose anti-HBs remains less than 10 mIU/mL after 6 doses is considered a “non-responder.”

For non-responders: PA student non-responders are considered susceptible to HBV and will need to obtain HBIG prophylaxis for any known or probable parenteral exposure to hepatitis B surface antigen (HBsAg)-positive blood or blood with unknown HBsAg status. It is also possible that non-responders are people who are HBsAg positive. Therefore, HBsAg testing is required for all non-responders. A student found to be HBsAg positive must see an infectious disease provider for a medical evaluation and counseling.

For students with documentation of a complete 3-dose HepB vaccine series but no documentation of anti-HBs of at least 10 mIU/mL (e.g., those vaccinated in childhood): students who are at risk for occupational blood or body fluid exposure might undergo anti-HBs testing and meet the preceding criteria on immunity or non-responder documentation.

#### **Article 16.2.5.2 Influenza**

All MMSc PA students must receive annual vaccination against influenza. Inactivated injectable influenza vaccine (IIV) is the preferred vaccine. Live attenuated influenza vaccine (LAIV), however, may be given to non-pregnant healthy students that are 49 years old and younger.

Contraindications are limited to a history of anaphylactic hypersensitivity to egg or other components of the vaccine or documented case of Guillain-Barré Syndrome within 6 weeks following a previous dose of influenza vaccine.

#### **Article 16.2.5.3 Measles, Mumps, Rubella**

Although birth before 1957 is generally considered acceptable evidence of measles, mumps, and rubella immunity, it is not enough for health care providers or MMSc PA students. Therefore, all MMSc PA students will be considered immune to measles, mumps, or rubella only if they have documentation of (a) laboratory confirmation of disease or immunity or (b) appropriate vaccination against measles, mumps, and rubella (i.e., 2 doses of live measles and mumps vaccines given on or after the first birthday and separated by 28 days or more, and at least 1 dose of live rubella vaccine).

Students with 2 documented doses of MMR do not need serologically testing for immunity and testing is not required.

**Article 16.2.5.4 Diphtheria, Pertussis, and Tetanus**

All MMSc PA students who have not or are unsure if they have previously received a dose of Tdap should receive a dose of Tdap before matriculation, without regard to the interval since the previous dose of Td. Pregnant students should be revaccinated during each pregnancy. All students are required to receive Td boosters every 10 years thereafter.

**Article 16.2.5.5 Varicella**

All MMSc PA students must be immune to varicella. Evidence of immunity includes documentation of 2 doses of varicella vaccine given at least 28 days apart, laboratory evidence of immunity, laboratory confirmation of disease, or diagnosis or verification of a history of varicella or herpes zoster (shingles) by a healthcare provider.

**Article 16.2.5.6 Other Vaccines (travel related)**

If a student travels outside the United States, data from the Center for Disease Control will be reviewed at least 6 weeks before travel to ensure required vaccines are known. Recommended vaccines will need to be completed prior to any training outside the United States.

Students who require one or more multi-dose-vaccine series to meet Immunization requirements must provide medical documentation that they have initiated the process by November 30<sup>th</sup> before their first day of orientation. Students failing to do so will not be permitted to matriculate into the program. They must also provide medical documentation of completion of the process according to established CDC immunization timelines. Students failing to do so will be dismissed from the program.

**Article 16.2.6 Tuberculosis Screening**

All students must have a two-step PPD skin test (TST) or TB blood test (ie quantiFERON gold or Tspot) within four (4) months of enrollment. Additionally students are required to complete a TB risk assessment and a TB symptom checklist. (all items to be verified by a GFU contracted third party vendor)

- All new positive TB tests (TST or TB blood test) must have a chest X-ray and be evaluated by the Health Department.
- If the chest X-ray is positive, the applicant/student will not be allowed to enter or continue training until treated and cleared by an infectious disease specialist.

A PPD skin test is not acceptable and an IGRA test (Quantiferon Gold, TSpot) must be done for any of the following reasons:

- BCG vaccine
- Applicant was born outside the U.S.

Individuals with a prior history of positive TB test need to provide documentation of a normal chest x-ray, complete a TB symptom checklist and be cleared by an infectious disease specialist before they begin their PAS training. Repeat chest x-ray is not required unless they are symptomatic.

**Article 16.2.7 Health Insurance Policy Documentation**

As a condition of enrollment, students are required to have health insurance coverage while enrolled in the GFU MMSc PA program. The cost of insurance and all covered, uncovered, or related health care expenses are the exclusive responsibility of the student and not the responsibility of GFU, SCPE preceptor, or SCPE site. These costs may include but are not limited to: immunization, illness, PPD testing, health evaluation post exposure to a communicable disease, or other accidental injuries sustained during program mandated training activities. Proof of insurance coverage must be provided prior to matriculation.

In addition, students are not employees of the GFU or the hospital, clinic or practice where SCPE rotations occur and are NOT covered under workman's compensation. Therefore, students are required to carry medical insurance (throughout the program) to cover the expense should an injury or exposure occur. Costs not covered by insurance are the student's responsibility.

#### ***Article 16.2.8 CPR Certification***

Prior to matriculation (by November 30<sup>th</sup>), before the clinical year begins, and as required by a clerkship site – all PA students are required to hold a current CPR certification. Proof of current CPR certification must be provided prior to matriculation via a GFU established third party vendor.

### **Article 17.0 GFU Policy on Academic Learning Disabilities**

George Fox University MMSc PA Policy on Academic Learning Disabilities

- Provided the preceding 'technical Standards' are met, a student can claim disability through the GFU Learning Disabilities Office (<https://www.georgefox.edu/offices/dso/index.html>).
- Criteria for establishing a MMSc PA candidate's disability is taken from the (1) National Commission on Certification of Physician Assistants (NCCPA) criteria and (2) peer reviewed literature published in the Journal of Physician Assistant Education. To establish a disability the MMSc PA candidates requesting special accommodations must provide appropriate documentation of the disability or qualifying medical condition. The documentation must specify the extent to which classroom or testing procedures are to be modified. The accommodation requested or recommended by the PA candidate should not be based on preferences but on disability-driven reasons, nor should it over-accommodate the PA candidate. Reports from the qualified licensed professional should be on letterhead, typed in English, dated, signed, and legible. Prior to considering any request for special accommodations, GFU must receive the following documentation:
  - A complete description of disability or medical condition and impact on the PA candidates daily life and day-to-day functioning – limitations to major life activity
  - Signed, typed and dated current documentation of the disability by a qualified professional. The documentation must be based on professional testing, which was performed by a qualified professional. Diagnostic methods used should be appropriate to the disability and in alignment with current professional protocol. Documentation must include all the following:
    - The name, title, and professional credentials of the evaluator, including information about license or certification (e.g., licensed psychologist) as well as the area of specialization, employment, and state in which the individual practices must be clearly stated in the documentation.
    - Contact information including address, telephone number, and/or e-mail address of each professional providing documentation.

- The date and location of the assessment upon which each professional's report is based.
- A detailed description of the psychological, educational, and/or cognitive functioning tests that were conducted.
- The results of those tests and a comprehensive interpretation of the results.
- The name of the specific disability diagnosed and a description of the specific impact on daily life activities and day-to-day functional limitations to major life activities including a history of the impact of the disability on academic functioning if the disability is due to a learning disability or attention deficit/hyperactivity disorder (ADD or ADHD).
- The specific examination accommodations that are requested to compensate for those limitations and how they will reduce the impact of identified limitations.
- Description of treatment and rehabilitation. Describe all treatment and efforts at remediation that the candidate has undergone and the results of the treatment. Also, describe how the disability is accommodated in daily life.
  - Note 1: A qualified professional is someone with the credentials, training, and expertise to diagnose the disability the individual is claiming. The primary relationship of the attesting professional to the individual must be that of a treating medical professional to a patient; there must be no familial, intimate, supervisory or other close relationship between the qualified professional and the individual requesting accommodations.
  - Note 2: GFU reserves the right to request further verification, if necessary, of the evaluating professional’s credentials and expertise relevant to the diagnosis.
- Once the preceding assessment is provided, it will be evaluated by the PA Program Director and, if deemed necessary, the Executive Dean for the Wellness Enterprise of College of Behavior and Health Science and a consultant. At this point it will either be accepted, denied, or modifications suggested.
- As part of the preceding steps, an interactive dialog about what is reasonable will take place (student candidate suggestions does not mean they can be met).
- An accommodation is considered unreasonable when it causes “undue hardship” (a complex determination that can take into account how much the cost would be or how onerous to the school), alters the fundamental nature of the program, disrupts the cycle of education, or is related to dependent skill testing such as problem focused objective structured clinical examination or skills testing.
- In general, comfort aids will not require pre-approval but must be inspected prior to each use. These items include:

Medicine & Medical Devices
Auto-injectors; such as EpiPen
Bandages
Braces- Neck, Back, Wrist, Leg or Ankle Braces
Casts - including slings for broken/sprained arms and other injury-related items that cannot be removed.
Cough Drops - must be unwrapped and not in a bottle/container.
Eye Drops
Eye Patches
Eyeglasses (without the case), including tinted lenses – must be removed for visual inspection

Glucose Tablets (does not include hard candy) - must be unwrapped and not in a bottle/container.
Handheld (non-electronic) magnifying glass (without the case)
Hearing aids/Cochlear implant
Inhaler
Medical Alert Bracelet
Medical device: Must be attached to a person's body, must be inaudible, and must not include a remote-control device. Examples include but are not limited to: <ul style="list-style-type: none"> <li>● Insulin pump</li> <li>● Continuous glucose monitor</li> <li>● Note: If the insulin pump or continuous glucose monitor includes an accompanying remote-control device, the remote-control device may not be taken into the testing room. If there is a need to take the remote-control device into the testing room, Candidates must apply and be approved for an accommodation to do so.</li> <li>● TENS Unit</li> <li>● Spinal Cord Stimulator</li> </ul>
Medical/Surgical face mask
Nasal drops/spray
Oxygen Tank
Pillow/Cushion
Pills - i.e. Tylenol or aspirin must be unwrapped and not in a bottle/container. Candidates may bring pills that are still in the packaging if the packaging states they MUST remain in the packaging, such as nitro glycerin pills that cannot be exposed to air. Packaging must be properly inspected.
<b>Mobility Devices:</b>
Canes
Crutches
Motorized Scooters/Chairs
Walkers
Wheelchairs
<b>Other approved items (must be provided by Testing Center):</b>
Tissues/Kleenex
Earplugs and Noise Cancelling Headphones

## ARTICLE 18.0 IMMUNIZATIONS. TB, DRUG, AND BACKGROUND STATUS (A3.17)

Each supervised clinical practice experiences site requires a copy of the student's immunization history, tuberculosis screening results, background and sexual offense check, and drug screen. Therefore, candidates offered a seat in the program are required to sign a statement that allows the MMSc PA program to maintain and release this information when relevant to their academic training and clinical placement (via a GFU established third party vendor).

## Article 19.0 OTHER REQUIREMENTS

- Official transcripts of all course work including any courses that may have been completed since their program application was submitted
- Evidence of compliance with any other conditions noted in the applicant's conditional letter of acceptance
- Candidates who accept a seat must pay a \$1,000 non-refundable deposit within two weeks of notification of acceptance in order to hold their place in the cohort. This deposit will be applied toward first semester tuition costs. Accepted candidates who do not pay the \$1,000 deposit within the required time frame (two weeks) forfeit their seat

## **ARTICLE 20.0 FINANCIAL AID OPTIONS**

### **Article 20.1 Federal Stafford Student Loan Program**

The primary source of financial assistance for students attending PA School will be the federal Stafford Student Loan Program. Beginning July 1, 2012, a Subsidized Stafford Loan will no longer be available, however graduate students may be eligible for as much as \$20,500 a year through the Unsubsidized Stafford Loan program. The student will be charged interest from the time the loan is disbursed until it is paid in full. If the interest is capitalized (allowed to accumulate) it will be added to the principal amount of the loan and will increase the amount the borrower will have to repay. If the choice is made to pay the interest as it accumulates, the total interest charges paid during repayment will be considerably less.

The total amount a graduate or professional student may borrow from all Stafford Loans combined is \$138,500. The graduate borrowing limit includes any Stafford Loans received for undergraduate study. Under current law, the interest rate charged on Federal Stafford Loans is fixed. There are also origination and guarantee fees associated with each loan up to 1.0 percent. These fees are deducted up front and thus lower the actual amount of each disbursement. Repayment of Stafford Loans begins six months after graduation or withdrawal from the PA program. This is called the grace period.

### **Article 20.2 Federal Graduate PLUS Loan Program**

For students who need financial assistance beyond the \$20,500 Stafford Loan maximum, there is the federal Graduate PLUS Loan program. The PLUS Loan allows for the deferment of repayment while the student is enrolled in the PA program. The PLUS Loan carries a fixed interest rate. The maximum amount a student may borrow from the PLUS Loan program will be the Cost of Attendance for the PA Program less any Stafford Loans and other forms of financial aid a student may be receiving.

### **Article 20.3 National Health Service Corps**

The National Health Service Corps (NHSC) scholarship is a competitive program that pays tuition, fees and provides a living stipend to students enrolled in accredited medical (MD or DO), dental, nurse practitioner, certified nurse midwife, and PA training programs. Upon graduation, scholarship recipients serve as primary care providers between 2 and 4 years in a community-based site in a high-need Health Professional Shortage Area (HPSA) that has applied to and been approved by the NHSC as a service site.

Awards are made to applicants most committed to serving underserved people and most likely to build successful careers in HPSAs and meet future needs for care throughout the nation. Please monitor the NHSC website <http://nhsc.hrsa.gov/scholarships/overview/index.html> for updated information on future application cycles.

### **Article 20.4 Indian Health Service**

Indian health programs need dedicated health professionals – people like you who envision a career with a purpose and mission and who are willing to commit to working in American Indian and Alaska Native communities where they can truly make a difference.

The mission of Indian Health Service (IHS) is to raise the physical, mental, social and spiritual health of American Indians and Alaska Natives to the highest level. Because of the IHS Scholarship Program, many qualified American Indian and Alaska Native health professionals are given the opportunity to pursue their careers as well as help their own communities. More information can be found here:

<http://www.ihs.gov/jobscareerdevelop/dhps/scholarships>

## **Article 20.5 Military Scholarship**

Air Force

<http://www.airforce.com/careers/detail/physician-assistant>

Navy

<http://www.navy.com/careers/healthcare/clinical-care/physician-assistant.html>

Army

<http://www.goarmy.com/careers-and-jobs/amedd-categories/medical-specialist-corps-jobs/physician-assistant.html>

## **Article 20.6 Other Possible Funding Sources**

Candidates and students are encouraged to apply to clubs, organizations, corporations, agencies and foundations for funding that may be used at any school the student chooses to attend. These groups may be able to offer students scholarship and grant funding that does not have to be repaid. In addition, many healthcare institutions offer tuition reimbursement for students who contract to work at their facility where they currently work or are interested in working after graduation. Students should inquire about this possibility at the facility where they are interested in working. The Oregon Office of Rural Health administers various state funded loan forgiveness and loan repayment provider incentive programs. A full list of these programs can be found here: <https://www.ohsu.edu/oregon-office-of-rural-health/provider-incentive-programs>

## **Article 20.7 PA Foundation Student Scholarship Links**

Over the years, the PA Foundation has awarded more than \$2.3 million in scholarships to PA students, benefitting more than 1,400 future PAs. Scholarships are awarded based on the availability of funds provided through contributions from AAPA members, other individuals, and corporate partners.

Link: <https://pa-foundation.org/scholarships-fellowships/pa-student-scholarships/>

## **ARTICLE 21.0 CONTACT INFORMATION**

Admissions Counselor: Ms. Cristina Schmitt

503-554-6097

[cschmitt@georgefox.edu](mailto:cschmitt@georgefox.edu)