# CLINICAL POLICY MANUAL 2026-2027

South University, Savannah
Master of Science in Physician Assistant Program

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This Clinical Policy Manual (CPM) will be your primary source of information during the clinical year. Read it. Refer to it. Keep it close to you. The South University, Master of Science in Physician Assistant Program will expect you to refer to this manual and your Rotation Syllabus.

# *PROGRAMMATIC ACCREDITATION STATUS*

### Accreditation Review Commission on Education for Physician Assistant

The Accreditation Review Commission on Education for the Physician Assistant (ARC-PA) has granted Accreditation-Continued status to the South University-Savannah Physician Assistant Program sponsored by South University. Accreditation-Continued is an accreditation status granted when a currently accredited program is in compliance with the ARC-PA Standards.

Accreditation remains in effect until the program closes or withdraws from the accreditation process or until accreditation is withdrawn for failure to comply with the Standards. The approximate date for the next validation review of the program by the ARC-PA will be October 2035. The review date is contingent upon continued compliance with the Accreditation Standards and ARC-PA policy. The program's accreditation history can be viewed on the ARC-PA website at:

https://www.arc-pa.org/accreditation-history-south-university-savannah/

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## PURPOSE

The clinical phase of the South University Physician Assistant program consists of 40 weeks of supervised clinical practice experiences referred to as "rotations." Clinical rotations allow students to integrate and apply their didactic knowledge in the evaluation, diagnosis, and treatment of patients in supervised clinical settings. Students complete rotations with providers across multiple disciplines to gain exposure to diverse patient populations and clinical environments. The experiences are designed to build competence in fundamental clinical skills through practice and feedback and to enhance confidence in preparation for graduation and practice.

Learning in the clinical environment is different from learning in a didactic phase. To support the integration of knowledge and skills, the clinical curriculum includes three Special Topics in Clinical Practice courses (PAS6320, PAS6330, and PAS6340), which reinforce and expand concepts learned during clinical rotations. The clinical phase concludes with PAS6350 PA Senior Seminar, a two-week course focused on board preparation and readiness for entry into clinical practice.

This manual outlines the policies, procedures, requirements, and expectations for the clinical phase of the program. It serves to supplement the **South University Academic Catalog**, **South University Student Handbook**, the **South University Physician Assistant Program Student Handbook**, and the clinical rotation syllabi. All policies from the South University Physician Assistant Program Student Handbook not addressed in this manual shall remain in effect. Periodically, additional policies or procedures may be adopted, or curricular changes may occur. Students will be notified via e-mail as they become effective.

Students should direct any questions to the **Director of Clinical Education**, **Assistant Director of Clinical Education**, and the **Education Clinical Coordinator,** as appropriate to their respective roles detailed below. If the Education Clinical Coordinator is unable to resolve an issue, the student will be referred to the Director or Assistant Director of Clinical Education.

Students are responsible for their professional conduct at all times while affiliated with the clinical site. Violation of the law; inappropriate public behavior; participation in disputes or demonstrations; or any action, whether during clinical activities or personal time, that may reflect negatively on the student, the host facility, or the University, or that interfere with the clinical site's mission, must be avoided. Violation of policies or expectations may result in referral to the program's Student Progress and Promotions Committee (SPPC) and may lead to disciplinary action, up to and including dismissal from the program.

Program policies apply to all students, principal faculty, and the Program Director during both the didactic and clinical phases, regardless of location. Students must not substitute for clinical or administrative staff during supervised clinical practice experiences. Students must not substitute for or function as an instructional faculty. Students must not solicit clinical preceptors or sites. The program is responsible for securing and coordinating clinical sites and preceptors for program-required rotations. The South University Physician Assistant Program does not allow or require students to work for the program at any time.

# CLINICAL EDUCATION TEAM ROLE DELINIATION

Each member of the Clinical Education Team has differing roles. Each position is responsible for the following:

**Director of Clinical Education/Assistant Director of Clinical Education**

- Coordinating student clinical rotation schedules
- Monitoring clinical logging platform (CORE)
- Publishing clinical syllabi and rubrics
- Monitoring student attendance
- Delivery of clinical curriculum
- Coordinating Special Topics in Clinical Practice and PA Senior Seminar schedules
- Monitoring course grading and completion of learning outcomes and competencies
- Addressing student concerns, professionalism concerns, clinical incidents, and safety concerns
- Recruitment and retention of clinical sites and performance of site visits
- Tracking affiliation agreements

**Education Clinical Coordinator**

- Monitoring clinical logging platform (CORE)
- Credentialing students for clinical rotations at all sites
- CORE support person
- Scheduling and performing clinical site visits
- Clinical site and preceptor maintenance (contact for site specific credentialing requirements, preceptor applications, licenses, and board certifications)
- Tracking affiliation agreements and clinical phase paperwork
- Recruitment and retention of clinical sites

## *Section 2 PROGRAM LEARNING OUTCOMES (GRADUATE COMPETENCIES)*

Students of the South University Physician Assistant Program will be expected to demonstrate competencies essential to PAs entering clinical practice. The South University Physician Assistant program expects achievement of the program learning outcomes (graduate competencies) by each student of the program. The program uses achievement of these learning outcomes as metrics for student competency and program effectiveness. Each course syllabus will guide the student through the assessment modalities utilized by the program to determine competency in the domains of medical knowledge, interpersonal skills, clinical skills, technical skills, professional behaviors, and clinical reasoning and problem-solving abilities.

The following are the Program Learning Outcomes (Graduate Competencies) for the South University Physician Assistant Program.

**At the completion of the program, students will meet the following competencies required for successful entry-level PA practice:**

**PLO 1.** Demonstrate comprehensive **medical knowledge** to promote health, evaluate a broad range of patient presentations, and manage clinical conditions across the lifespan.

**PLO 2.** Demonstrate **interpersonal and communication skills** to exchange information clearly and provide counseling and education to improve patient outcomes.

**PLO 3.** Perform essential **clinical skills** in in decisions related to patient care.

**PLO 4.** Perform essential procedures and **technical skills** common to clinical practice.

**PLO 5.** Apply **clinical reasoning and problem-solving** in formulating differential diagnoses and developing patient-centered management plans.

**PLO 6.** Exhibit essential **professional behaviors** in all interactions.

**PLO 7.** Demonstrate appropriate use of **healthcare resources** in order to advocate for quality patient-centered care.

## STANDARDS OF CONDUCT

The **South University Student Handbook** defines a **Code of Conduct** that must be followed by all students. South University publishes its **Master of Science in Physician Assistant Code of Conduct** in the South University Academic Catalog. All students enrolled in the South University Physician Assistant Program are expected to abide by this code.

Failure to comply with general University policies may result in dismissal from the program and the University according to defined disciplinary procedures. All disciplinary actions will be reported to the Student Progress and Promotions Committee and will be considered relative to the student's suitability for continued participation in the program and/or entry into the PA profession.

## STANDARDS OF PROFESSIONALISM

One of the core tenets of the South University Physician Assistant Program is that physicians and PAs are called to the highest standards of honor and professional conduct. It is essential for students to understand that this responsibility begins at the start of their medical education, not upon graduation. Students must uphold the following standards which reflect these values and are intended to foster an atmosphere of honesty, trust, and cooperation among the students, faculty, patients, and society.

Students in the South University Physician Assistant Program are expected to demonstrate behavior appropriate for a career in medicine. This includes, but is not limited to honesty, trustworthiness, professional demeanor, respect for the rights of others, personal accountability, and concern for the welfare of patients – all of which are outlined below. Violations of these Standards of Professionalism may result in referral to the Student Progress and Promotions Committee (SPPC).

**Honesty**: Being truthful in communication with others.

**Trustworthiness**: Maintaining the confidentiality of patient information; admitting errors, and avoiding intentional misrepresentation, self-promotion at the patient's expense, or misleading others.

**Professional demeanor**: Interacting thoughtfully and respectfully with patients and their families; maintaining composure under fatigue, stress, or personal difficulties; and presenting a neat, clean appearance with attire that is appropriate to the patient population served.

**Respect for the rights of others**: Interacting with healthcare team members, peers, staff, and patients with consideration and cooperation; demonstrating equity toward all persons encountered in a professional capacity regardless of age, race, color, national origin, disability, religion, gender, sexual preference, gender identity, socioeconomic status, or veteran/Reserve/National Guard status; respecting patient rights to be informed, to participate in decisions and to maintain modesty and privacy.

**Personal accountability**: Participating responsibly in patient care under appropriate supervision; completing clinical duties diligently; and notifying supervisors if unable to perform clinical tasks effectively.

**Concern for the welfare of patients**: Treating patients and families with respect and dignity both in person and in discussion with others; seeking supervision or advice when needed; recognizing limitations and requesting assistance when appropriate; avoiding alcohol or drug use that could impair performance; refraining from romantic, sexual, or other nonprofessional relationships with patients or preceptors.

**Personal aptitude for medicine**: Graduation from the program requires faculty determination that a student is suitable for medical practice based on personal characteristics, conduct, and academic achievement.

**Students in the South University Physician Assistant Program are preparing for positions of critical responsibility as healthcare providers**. Accordingly, they are evaluated not only on academic and clinical skills, but also on interpersonal skills, reliability, appearance, and professional conduct. Deficiencies in any of these areas may result in probation, suspension, or dismissal. Academic grades alone do not sufficiently meet promotion, progression, or graduation. **The program reserves the right to dismiss any student whose behavior does not align with the professional standards or whose presence is detrimental to the program, peers, or society.** Faculty will refer professionalism concerns to the SPPC. Students should be aware that placement on Professionalism Warning or Professionalism Probation may negatively impact clinical credentialing both during and after the program.

Students are expected to develop habits and behaviors consistent with professional practice. The **American Academy of Physician Assistants Guidelines for Ethical Conduct** outlines the values and principles that uphold these high standards. Students must review, understand, and follow these guidelines which are available on the **American Academy of PAs website.**

The primary purpose for enforcing non-academic discipline in the South University Physician Assistant Program is to preserve the quality of the educational environment and uphold campus community standards. This is founded upon the following expectations:

- The South University Physician Assistant Program and the University at large require high standards of courtesy, integrity, and responsibility in all of its members.
- Each student is responsible for their own conduct.
- Continuation in the program depends on compliance with the Standards of Professionalism and the University and Physician Assistant Program Code of Conduct.

The South University Physician Assistant Program reserves the right to take necessary and appropriate action to ensure the safety and well-being of the campus community. The Dean of Student Affairs is charged with the welfare of all students. Accordingly, in emergency situations, this individual has full authority to deal with student conduct according to the exigencies of the emergency and for its duration. The Dean of Student Affairs is delegated responsibility pertaining to all student organizations and student government and has both

the responsibility and authority to discipline such organizations whose members are students within the program.

The program is not designed or equipped to rehabilitate students who do not abide by the Honor Code, and it may be necessary to dismiss such students.

**NATIONAL COMMISSION ON CERTIFICATION FOR THE PHYSICIAN ASSISTANT (NCCPA) CODE OF CONDUCT**

The South University Physician Assistant Program expects students to abide by the **Code of Conduct** set forth by the National Commission on Certification of Physician Assistants. Breaches in this Code of Conduct while a student is enrolled in the program will be grounds for referral of that student to the program's Student Progress and Promotions Committee.

South University does not guarantee third-party certification/licensure. Outside agencies control the requirements for taking and passing certification/licensing exams and are subject to change without notice to South University.

The NCCPA Code of Conduct is designed to protect the integrity of the PA profession and to ensure that certified and certifying physician assistants uphold the highest standards of professionalism, ethics, and patient safety. The Code emphasizes honesty in examinations and credentialing, accurate representation of certification status, and compliance with all laws and professional standards governing clinical practice. It requires PAs to maintain patient confidentiality, respect professional boundaries, avoid behaviors that compromise patient safety or trust, and practice free from impairment. PAs are also obligated to report adverse legal, regulatory, or credentialing actions, as well as convictions of certain crimes, within 30 days, and to cooperate fully with NCCPA inquiries or disciplinary proceedings.

Students are expected to review the full NCCPA Code of Conduct, which is available on the NCCPA website, and to conduct themselves in a manner consistent with these principles throughout their enrollment in the program.

**VIOLATIONS OF STANDARDS OF CONDUCT OR PROFESSIONALISM**

Violations of the program's Standards of Conduct or Professionalism, or University policy will be referred to the appropriate University official (i.e. Faculty Advisor, Dean of Student Affairs, Student Progress and Promotions Committee).

# *SECTION 4 STUDENT SAFETY, DISABILITY, HARRASSMENT, AND GRIEVANCES*

## SAFETY AND SECURITY

As directed by federal law, South University requires information to be available to students regarding safety policies and procedures for all clinical sites, including criminal action reports, site specific security protocols, and law enforcement. In the event of a safety concern, students should notify the point of contact at the clinical site listed in the clinical logging platform and the Director of Clinical Education and Assistant Director of Clinical Education in a safe and timely manner. Students may access information regarding safety/security, local crime statistics, parking, and transportation, under "Logistics for Students" for each clinical site on the clinical logging platform.

Please refer to the **Campus Security** section of the South University Academic Catalog for additional information.

## CLINICAL SITE INCIDENT REPORTING

All students participating in clinical experiences are required to immediately report Reportable Incidents to appropriate University personnel. Failure to report may result in disciplinary action, including removal from the clinical site and/or dismissal from the program. See **Appendix A** for the **Standard Operating Procedure for Clinical Site Incident Reporting** and the **Incident Report Form**.

**Reportable Incidents - Students Must Report:**

You must immediately report any of the following incidents:

1. **Patient-Related Incidents:**

    - Patient death during or after your involvement in care
    - Serious patient injury or adverse outcome during your care
    - Medication errors or near-misses
    - Patient falls or safety events
    - Equipment failure or malfunction
    - Any situation where patient safety was or could have been compromised

2. **Student Safety Incidents:**

    - Needlestick injuries or blood/body fluid exposures
    - Injury to yourself at the clinical site
    - Exposure to infectious diseases
    - Physical or verbal threats to your safety
    - Unsafe working conditions

3. **Professional Conduct Issues:**

- Allegations of unprofessional behavior against you
- Witness to unprofessional or unethical conduct by others
- HIPAA violations or potential privacy breaches
- Conflicts with clinical site staff or preceptors
- Removal or request to leave the clinical site for any reason

4. **Legal or Regulatory Matters:**

    - Requests for your involvement in legal proceedings
    - Inquiries from attorneys, law enforcement, or regulatory agencies
    - Receipt of any legal documents related to clinical activities
    - Complaints filed against you by patients or families

5. **Other Significant Events:**

    - Any incident requiring completion of a clinical site incident report
    - Situations that receive media attention
    - Any event that causes you concern about patient or your own safety
    - Requests from patients or families for your personal contact information

## INFECTION CONTROL

Students must immediately report any blood/body fluid exposure(s) to their preceptor, the Director of Clinical Education, and any hospital personnel (if instructed by their preceptor) immediately. Students must adhere to the program's Infection Control Policy (**Appendix B**). Be advised that neither the school nor the clinical site/preceptor are liable for health care costs accrued if an exposure occurs. Students should submit claims to their own medical health insurance.

## DISABILITY SERVICES

Please refer to the **South University Academic Catalog: Disability Services** and the clinical rotation syllabi for more information.

## NON-DISCRIMINATION POLICY

Please refer to the **South University Academic Catalog: Non-Discrimination Policy** for the Non-Discrimination policy.

## NO HARASSMENT POLICY

Please refer to the **South University Academic Catalog: No Harassment Policy** for the No Harassment policy.

## STUDENT MISTREATMENT AND GRIEVANCE PROCEDURE

For concerns regarding mistreatment, discrimination, harassment (other than sexual harassment), unprofessional relationships, abuse of authority, and abusive and/or intimidating behavior, please refer to the

**South University Academic Catalog: Student Grievance Procedure for Internal Complaints of Discrimination and Harassment.**

## STUDENT GENERAL COMPLAINT PROCEDURE

For concerns regarding general complaints, please refer to the **South University Academic Catalog: General Complaint Procedures**.

In compliance with U.S. Department of Education and SACSCOC regulations, South University is committed to implementing a student concern/complaint process that is fair, timely, and effective. Students should follow the process outlined in the **South University Student Concern Submission form** including; discuss complaints with the appropriate individual(s) within the PA Department or College of Health Professions. Initial discussion should be with the person most knowledgeable of the issues involved or with immediate decision-making responsibility.

If you feel that the complaint has not been fully addressed, a written account can be sent using the **Student Concern Submission form**. Your concern will be submitted to the Dean of Student Affairs if related to non-academic issues or to the Campus Director & Dean of Academic Affairs and Operations for academic issues.

## SEXUAL MISCONDUCT AND RELATIONSHIP VIOLENCE POLICY AND PROCEDURES

For concerns regarding Sexual Misconduct & Relationship Violence, please refer to the **South University Academic Catalog: Sexual Misconduct & Relationship Violence Policy; Procedures for Handling Sexual Misconduct and Relationship Violence Complaints.**

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## SECTION 5 GENERAL GOALS OF THE CLINICAL YEAR

Clinical rotations are designed to provide the student with hands-on clinical experience that reinforces knowledge gained during the didactic phase and supports the development of interpersonal skills and professionalism. These rotations allow students to refine their patient interviewing, physical examination, procedural, diagnostic, and data-integration skills. Through these experiences, students begin to assimilate into the professional role of the physician assistant while building effective working relationships with other members of the healthcare team.

The clinical curriculum is structured to give students the opportunity to achieve clinical competence while under the supervision of clinical preceptors in a variety of healthcare settings. Students will work directly with physicians (MDs or DOs), certified Physician Assistants, and other health professionals serving as preceptor supporting students' clinical training. In addition, students will complete discipline specific SCPE self-directed learning activities.

Each clinical rotation, regardless of discipline, is designed to emphasize and strengthen the student's ability to:

- Apply didactic knowledge to supervised clinical practice
- Develop and refine clinical problem-solving skills
- Expand and build their medical fund of knowledge
- Improve history taking and physical examination skills
- Strengthen oral presentation and written documentation skills
- Develop an understanding of the PA's role in healthcare delivery
- Demonstrate the interpersonal skills and professionalism required to function as part of a medical team
- Apply technical skills during patient care, including the performance diagnostic and therapeutic procedures
- Respond appropriately to commonly encountered emergency care situations
- Locate, analyze and integrate evidence-based scientific literature to support patient care
- Engage in critical reflection on personal practice experience, medical literature, and other resources for continuous improvement
- Demonstrate awareness of, and responsiveness to, the broader healthcare system to provide patient care that balances quality and cost
- Prepare for the Physician Assistant National Certification Exam (PANCE)

The clinical year consists of eight five-week clinical rotations (40 weeks total). Each rotation is a program course. The clinical portion of the program involves an in-depth exposure to patients in a variety of clinical settings. The settings, characteristics, assigned tasks, and student schedules will vary depending on the discipline and the site. The outline of the clinical rotation schedule is below, although the discipline/order of disciplines will vary for each student.

Clinical disciplines include the following:

| | | |
|---|---|---|
| Behavioral Medicine | Emergency Medicine | Family Medicine |
| Internal Medicine | Pediatrics | Surgery |
| Women's Health | Clinical Elective (disciplines vary) | |

## REQUIRED CLINICAL COURSES

| Course No. | Rotation | Length | Credit Hours |
|---|---|---|---|
| PAS6200 | Clinical Rotation I | 5 weeks | 8.0 |
| PAS6205 | Clinical Rotation II | 5 weeks | 8.0 |
| PAS6320 | Special Topics in Clinical Practice I | 5 days | 2.0 |
| PAS6210 | Clinical Rotation III | 5 weeks | 8.0 |
| PAS6215 | Clinical Rotation IV | 5 weeks | 8.0 |
| PAS6330 | Special Topics in Clinical Practice II | 5 days | 2.0 |
| PAS6220 | Clinical Rotation V | 5 weeks | 8.0 |
| PAS6225 | Clinical Rotation VI | 5 weeks | 8.0 |
| PAS6340 | Special Topics in Clinical Practice III | 5 days | 2.0 |
| PAS6230 | Clinical Rotation VII | 5 weeks | 8.0 |
| PAS6235 | Clinical Rotation VIII | 5 weeks | 8.0 |
| PAS6350 | Physician Assistant Senior Seminar | 2 weeks | 4.0 |
| | **Total for Clinical Rotations** | **45 weeks** | **74.0** |

Clinical rotations provide students with hands-on clinical experience that reinforces knowledge gained in the didactic year and allows them to refine procedural, diagnostic, and data-integration skills. These rotations help students begin to assimilate into the professional role of the Physician Assistant while developing effective working relationships with members of the healthcare team. The clinical curriculum is designed to support the development of clinical competence under the supervision of clinical preceptors in a variety of healthcare settings.

Each clinical discipline will be completed during the Clinical Rotation I-VIII courses throughout the clinical year. Each course includes a syllabus outlining discipline-specific objectives. At the conclusion of each 5-week rotation, students return to campus for their end of rotation exam (with the exception of the clinical elective rotation). The Special Topics in Clinical Practice I-III courses occur on-campus during the final week of each quarter. Scheduled events during these periods may include formative knowledge assessments, clinical and professional lectures, learning outcomes assessments, and meetings with faculty advisors, the Clinical Education Team, and other program faculty. During Special Topics III (PAS6340) students will complete the summative evaluation detailed later in this handbook.

In Quarter 9, the clinical year concludes with a two-week on-campus course, Physician Assistant Senior Seminar (PAS6350). During this time, students complete any required end of rotation exams, and the PACKRAT II is administered. Scheduled events may include PANCE preparation sessions, lectures on beginning clinical practice as a PA, dedicated time to complete licensing and credentialing documentation, learning outcome or assessment remediation, completion of the Graduate Exit Survey, and participation in the hooding ceremony.

Attendance during the clinical rotation year is essential for student development and is therefore, **MANDATORY**. An absence is defined as not being present, regardless of the reason, to participate in clinical training or associated activities at any scheduled or assigned time, including weekend, evening, or on-call hours as required by the preceptor. Students are expected to follow the schedule of their preceptors **OR** the schedule provided to them by the preceptor. This may include South University holidays, U.S. holidays, on-call responsibilities, evening, overnight, and weekend shifts.

Because clinical training often follows a "non-scheduled" or variable structure, students are expected to take personal responsibility for both patient care and their learning experience. Developing this responsibility is a core component of clinical education and an essential part of professional identity formation. If a student will be tardy or absent from a scheduled shift for any reason, they must immediately notify the Director of Clinical Education.

Student attendance is mandatory for all End of Rotation exam days and the entirety of the callback weeks. In addition to lectures and exams, these days may involve student testing, advising, remediation, class meetings, Student Progress and Promotions Committee meetings, etc. Students should be available from 8 AM to 5 PM on each of these days.

Any absence, from rotation or scheduled time back on campus during the clinical year, requires an Absence Tracking Form (**Appendix C**) and logging in CORE ELMS (the clinical logging platform).

**Time Off**

Students have scheduled break periods during that align with the end-of-quarter breaks (see the clinical year calendar in **Appendix F**). These breaks include the holidays of Christmas Day and New Year's Day. Students shall attend their rotation in accordance with the schedule provided to them by their preceptor. Observation of other holidays (i.e. Memorial Day, Fourth of July, Thanksgiving, etc.) is allowed at the discretion of the preceptor, the Clinical Education Team, and within the limits of the student's call schedule. **It is strictly prohibited for students to request time off from their preceptors.** Some rotations require students to work on weekends and night shifts. Students are not likely to know their full schedule prior to the start of a rotation. Regardless of the day of the week, **students are expected to attend their rotation site as assigned.**

**Illness and Emergency**

Students must contact the Director of Clinical Education **prior** to their regular reporting time if they need to be absent for illness or emergency. Absences **longer than 48 hours** due to illness require a signed note from a medical provider; the note **should not** contain any personal health information. **Students should not seek non-emergency medical care at their clinical rotation site**. The student must also complete the Absence Tracking Form in the CORE ELMS and submit the corresponding form (**Appendix C**) to the Director of Clinical Education.

Students may utilize up to two emergent days off during the clinical phase. The student shall complete the Absence Tracking Form in CORE ELMS and submit the corresponding form (**Appendix C**) to the Director of Clinical Education.

The absence form must include an action plan to make up missed clinical hours. Students are required to complete the Rotation Deficiency Form (**Appendix D**) and submit it to the Director of Clinical Education in a timely manner. It is the shared responsibility of the student, faculty, and preceptor to schedule make-up or substitute work at the earliest convenient time.

In the event of inclement weather or other natural disasters, students will receive further instructions from the Director of Clinical Education. Students are required to inform the Clinical Education Team if their rotation or site or schedule is affected.

Given the short duration and nature of the call back weeks, any absence due to illness will require a note from a healthcare provider.

**Religious Observances**

During the clinical phase, when the patient care responsibilities conflict with a student's religious observances, the Director of Clinical Education may authorize make-up hours or work in accordance with the **PA Program Student Handbook**. Students must complete the Absence Tracking Form in the clinical logging platform and submit to the Director of Clinical Education **at least 30 calendar days before** the anticipated conflict.

Failure to adhere to the attendance protocols outlined above **may result in a deduction of 5 percentage points from the final grade, referral to the Student Progress and Promotions Committee, and/or a requirement to repeat of the rotation, which can delay graduation.** Students with a delayed graduation are responsible for any additional tuition and fees.

**Attendance and Absences**

**Absences for any reason DO NOT reduce or eliminate the minimum hourly requirements for a clinical rotation**.

Attendance is mandatory for all end of quarter courses, including Special Topics in Clinical Practice I-III (PAS6320-6340) and PA Senior Seminar (PAS6350). Students who fail to meet the attendance requirements for the end of quarter courses are subject to the attendance policy detailed in the syllabus and may be referred to the Student Progress and Promotions Committee for consideration of disciplinary action. Students who do not complete the requirements of the end of quarter courses will receive an incomplete grade and could face a delay in graduation which would result in the student incurring additional tuition and fees. The end of quarter courses requires that students be available Monday through Friday (with the exception of any University holiday that may fall during that week).

**Request for Conference Attendance**

PA students are encouraged to participate in professional conferences to support their learning and networking. However, schedule adjustments for clinical obligations will only be granted under specific circumstances. Students may attend conferences as participants **only when the dates and times do not conflict**

with their assigned Clinical Rotation Schedule. Students may not request time off from preceptors for conference attendance.

- **Conference Approval Considerations**
  - Student attendance will only be considered if they are serving as an **active student representative or fellow**. This includes roles such as:
    - Student Representative of conference sponsoring body- including but not limited to AAPA, GAPA, PAEA
    - Participating in a Challenge Bowl
    - Other recognized roles that contribute to the conference such as presenting a research paper or poster presentation
- **Request Process**
  - Students must submit a written request to the Director of Clinical Education at least **60 days prior** to the conference. This request should include:
    - Name and dates of the conference
    - Description of the student's role and contributions
    - Rotation Hourly Deficiency Form (**Appendix D**)
    - Plan to make up hourly deficiency
- **Approval**
  - The Director of Clinical Education will review requests and notify students of approval or denial within **7 days** of submission. Approval will be based on:
    - Student participation role in conference
    - Current academic standing

## STUDENT CLEARANCE FOR ROTATION

Students must successfully complete/pass the following requirements prior to starting clinical rotations:

- All didactic coursework
- All pre-clinical assignments
- BLS and ACLS
- A criminal background check (and any other site-specific requirements as indicated)
- A 12-panel urine toxicology screening (and any other site-specific requirements as indicated)
- All required immunizations according to the CDC and any facility requirements
- Demonstrate current health insurance coverage
- Produce a current Curriculum Vitae (CV)
- A current physical exam by a medical provider
- HIPAA Certification
- Blood Borne Pathogen/OSHA Training Certification
- Sterile Gown/Glove and Surgical Scrub Training Certification
- Additional site-specific requirements per rotation (may have additional associated costs)
- Current valid state issued driver's license or other valid government issued ID

Students must upload, maintain, and continuously update all required documentation in the web-based compliance platform. In addition, students are responsible for uploading and maintaining **ALL** associated documents in the CORE ELMS clinical tracking system as required by the PA program and individual clinical sites or facilities. **No required documentation may expire at any time during the clinical phase.**

- Failure to complete any requirements by the assigned deadlines may result in, but not limited to:
- A delayed start to the clinical year and/or clinical site placement
- Modification of clinical site assignments
- Deductions from the professionalism assessment component of the rotation grade
- Delay in program completion resulting in additional tuition and fees

Any lapse or expiration of required items during the clinical year may result in being removed from a clinical rotation and may dela program completion, potentially resulting in additional tuition and fees, among other consequences.

Students are responsible for following all clinical year protocols related to vaccinations, such as what type of titers should be drawn, what to do if a titer does not show immunity or a vaccination series needs to be repeated, what TB tests are acceptable, etc. **Students should plan ahead to avoid expiration of documents which will cause delays in credentialing, delays in clinical rotation placement, delays in completing clinical rotation, and delays in meeting program requirements for graduation. Scheduling of appointments necessary to complete these items should be done on the students' own time and will not be considered for an excused absence.**

## COLLEGE OF HEALTH PROFESSIONS DRUG AND ALCOHOL SCREENING POLICY

**Students must adhere to the College of Health Professions Background Check Policy and the Substance Abuse and Screening Policy at all times.** Due to the nature of the practice of health professions programs, the College of Health Professions maintains a **zero-tolerance policy** for any violation outlined in this policy. Students who violate this policy are subject to **immediate dismissal**.

Prior to providing a urine sample for drug screen, note that certain medications (diuretics as one example) or dilute urine samples, can adversely affect the results of this test. Dilute specimens are considered inadequate, and students will be out of compliance until a suitable urine sample is provided. Please review the student instructions provided by the third-party testing company (and reach out for clarification as needed). If you are notified of a positive drug screen, you must immediately inform the DCE by email, and follow the instructions given by the third-party MRO (medical review officer). Students with a positive urine drug screen are immediately removed from clinical rotations. Please refer to the published policy for further details.

## CLINICAL ROTATION TRAVEL

All students may be required to travel/commute and/or relocate for any given clinical rotation. While many rotations are located within a commutable distance from the program, students may be assigned to clinical rotation sites outside the local campus geographical area and should anticipate the need to travel or temporarily relocate for those assigned rotations. Students are responsible for all costs associated with travel, transportation, housing, credentialing, and living expenses during the clinical year. These expenses will vary based on the location of each clinical rotation site.

## CLINICAL ROTATION PLACEMENT

Assignment of student rotations is the responsibility of the Clinical Education Team.

1. During the didactic phase, the Clinical Education Team meets with the first-year students to review general information and program policies related to the clinical phase of their education.

2. **Students may NOT develop, request, or arrange their own clinical sites.** Students are not allowed to solicit potential preceptors through “cold call” or unsolicited contact. Students are not permitted to seek or arrange their own clinical sites to avoid relocating, commuting, or placement at a particular clinical site, or to support potential employment opportunities.

3. While most clinical rotation sites are in-state, students may be scheduled for rotations outside of the state.

4. All students should expect to travel, commute, or relocate for some clinical rotations. Students are responsible for all financial costs associated with clinical rotations.

5. All students must maintain housing or have an available place to stay near the South University PA Program campus for the duration of the clinical year.

6. Students are given the opportunity to share their scheduling preferences during the didactic phase.

7. Students may submit clinical contacts in the community as potential rotation sites. The Clinical Education Team will accept submissions **received by the assigned deadline** (fall quarter of didactic phase). This timeline allows the team adequate time to contact the preceptor/site, evaluate suitability, establish a legal agreement, obtain credentialing information, review hospital requirements, credentialing, and affiliation agreements, and collect necessary documentation. Submission of the contact information **does not guarantee** placement at that site, as multiple factors must be considered, including site capacity, preceptor qualifications, and the student standing in the program.

8. After submitting a new site/preceptor request, students must not contact the site regarding a potential clinical rotation unless instructed otherwise by the Clinical Education Team. If a site contacts the student before the rotation is confirmed (or outside of the credentialing window), the student must promptly **refer the clinical site contact to the Clinical Education Team** by replying politely and cc'ing the Education Clinical Coordinator on the email.

9. The Clinical Education Team reserves the right to deny any site request, replace an elective rotation with an additional core rotation, or change a student's currently scheduled rotations. Situations that may warrant changes include, but are not limited to:

    - Cumulative GPA below 3.2
    - Significant decline in academic or professionalism performance
    - Failure or poor performance on an end-of-rotation (EOR) exam
    - Inability to meet the program learning outcomes/competencies based on the student's assigned rotation schedule

10. Students will receive their rotation schedules through CORE ELMS, the web-based clinical rotation management platform. Notifications will include details regarding location, preceptor, affiliated sites, and credentialing requirements. The Clinical Education Team will not individually notify students of schedule changes or site requests. Students are responsible for reviewing all program communication within 24 hours and routinely checking CORE ELMS for updates. *

11. Each rotation assignment is an academic course the student is enrolled in with associated credits. Therefore, clinical site assignments cannot be exchanged between students.

12. The Clinical Education Team works to secure each rotation well in advance; however, unforeseen events circumstances may require a student to be reassigned with short notice, either before a rotation begins or while it is underway. The Clinical Education Team will make every effort to minimize disruptions, but some changes are outside of the control of the PA Program. *

13. Students are informed of the financial and logistical commitments of the clinical phase prior to program entry. No special accommodations will be made for reasons including, but not limited to:

    - Financial need
    - Lack of transportation
    - Lack of housing
    - Childcare

- Special events such as weddings or reunions

Clinical sites and preceptors are not responsible for assisting with housing, transportation, or meals. Students are responsible for all costs related to clinical travel, credentialing, and relocation, regardless of reason.

14. In consultation with the Student Progress and Promotions Committee and the Program Director, the Director of Clinical Education will determine the best possible placement of students with consideration of student preferences, student standing, and within the constraints of the number and location of clinical sites and the student's individual learning needs.

***Students are responsible for reviewing their schedule in CORE ELMS to monitor for rotation changes***

# PHYSICIAN ASSISTANT STUDENT CONDUCT GUIDELINES

Students will be evaluated not only on their academic and clinical skills, but also on their interpersonal skills, reliability, and professional conduct. The following is a list of guidelines, in addition to those found in this handbook and the **Physician Assistant Program Student Handbook**, to which the student must adhere during their participation in the clinical year.

For additional information, please also see the South University Academic Catalog **Code of Conduct**.

## 1. Communication with the Program and University:

Students have been assigned a South University email address. This is the **only email address** that will be answered by the Clinical Education Team members. Forwarding the South University email to another email account **is prohibited**. These accounts can lack the security, capability, and sometimes sufficient space necessary for downloading important attachments. **This includes forwarding notifications from the student's CORE ELMS profile.** If a student fails to respond in the timeframes outlined below, they may be required to meet with their advisor, the Clinical Education Team, or the Student Progress and Promotions Committee (SPPC).

### The following is additional information for phone communication:

- Students are expected to: ensure that their phone voicemail system is active and able to receive messages, provide a phone number in all messages, to respond to voicemails within 24 hours, and to notify the program, University Registrar, and PA Program Coordinator immediately upon changing a contact number.
- Students are permitted to communicate with faculty via text messages in an emergency but should follow up with email communication about the situation when safely able to do so.
- Students must update their contact information in the **CORE ELMS** system, the PA Program Coordinator, and the University immediately with any changes.

### The following is additional information for email communication:

- Students are expected to check their South University email account at least once every 24 hours and respond to program emails within 24 hours. Failure to respond to communication in a timely manner could result in disciplinary action, such as referral to the Student Progress and Promotions Committee
    - This includes during scheduled breaks between quarters. If a student will be out of communication for more than 48 hours, they need to advise the Clinical Team of the timeframe they will be out of communication.
- Email responses and forwarded emails should include the original message when appropriate.
- Students are responsible for maintaining access to email even while moving and traveling during clinical rotations.

- When sending credentialing documents to clinical sites, students must utilize the **Email Template** provided by the program as indicated.
- Copy both Education Clinical Coordinators on all credentialing communications with the clinical site or other program staff. If your email has not been addressed within 48 hours, forward the entire email chain to the Assistant Director of Clinical Education or the Director of Clinical Education.
- Emails should always be professional in content and tone and should include a subject, greeting, purpose, body, and signature.

**The following is additional information for professional boundaries:**

- Students must maintain professional boundaries in all their communications with faculty, staff, and preceptors, regardless of the communication channel. This includes in-person, phone, text message, email, or other online platforms.
- Language should be formal and respectful to maintain a conducive academic environment.

**2. Address:**

Students are required to provide the Program Coordinator with permanent contact information prior to the clinical year. Students are expected to notify the program **immediately**, upon any change of contact information. **The student contact information must be kept current in CORE ELMS and with the University.**

**3. Credentialing/Onboarding:**

- The student is responsible for providing documentation for hospital or clinic credentialing/onboarding by the provided deadlines prior to the start of each rotation. **Delays in the provision of this documentation may result in a delayed or missed rotation, delay in graduation, and/or further action as per the Student Progress and Promotions Committee.**

- **Two weeks prior to arrival,** the PA student is responsible to contact the preceptor and/or clinical site point of contact prior to the beginning of the rotation (as directed by the Clinical Education Team) to remind them of the student's upcoming arrival and to ascertain the time and place to meet on the first day. The preceptor and/or clinical site point of contact information will be posted in CORE ELMS.

- The student may be required to attend an Orientation prior to the start of a rotation, which will be coordinated through the Clinical Education Team. The orientation may occur during the student's break or a prior rotation but must be completed in a timely manner to avoid a **delayed or missed rotation, delay in graduation, and/or further action as per the Student Progress and Promotions Committee.**

**4. Timeliness:**

Students must report to clinical sites on time (**at least 10 minutes early**) and should remain at the site until dismissed by the preceptor. If a student anticipates being late due to an unforeseen emergency, they must contact the Director of Clinical Education, or the Clinical Coordinator if they are unavailable, immediately. Repetitive tardiness will impact the student's professionalism grade for that rotation and could result in disciplinary action, such as dismissal from the rotation by the preceptor, and referral to the Student Progress

and Promotions Committee. **Students are expected to work the same schedule as the preceptor, including on call hours, nights, weekends, and holidays.**

### 5. Preparation:

Students must report to clinical sites fully prepared for clinical experiences with all necessary equipment (i.e. stethoscope, lab coat, etc.). Additionally, students are to have readily available all documents listed under "Student Clearance" in **Section 8** of this manual.

*While the program works diligently to monitor the specific requirements of all facilities, facilities will occasionally change a protocol without notifying the program. Students are responsible for notifying the program of any protocol changes that they discover in order for the program to update the requirements for future students.*

### 6. Attire:

Students must dress in a professional nature. A short, white lab coat with the South University patch is required. Male students must wear collared shirts with ties (unless prohibited by the clinical site). Female students should wear dresses or slacks/skirts with dress shirts. Closed-toed and closed-heeled shoes are required. Specialty rotations or specific educating sites may designate other prescribed clothing, such as scrubs and/or tennis shoes. A professional appearance mandates good hygiene and clean, conservative professional attire. **Fragrances (perfume/cologne or aftershave) should not be worn.** Nails should be short, clean and polish-free. Hair must be secured at all times in any clinical settings. Excessive or loose/dangling jewelry is not permitted. Facial hair must always be well-groomed, and properly covered during surgical/procedural experiences, unless otherwise stated by facility policy. Students will otherwise be held to the dress code expectations delineated in the South University **PA Program Student Handbook.**

### 7. Identification:

Students must always introduce themselves as a **"Physician Assistant Student."** Students should **never** present themselves to patients or other practitioners as a physician, resident, medical student, or as a graduate or certified physician assistant. While in the program, students may not use previously earned titles (i.e. RN, MD, DC, PhD, etc.) for identification purposes. Students must wear a short clinical jacket with the program patch while at all clinical sites, unless instructed not to do so by the clinical site or the program. **Students must wear their program issued identification nametag at all times at clinical sites, in addition to any student identification required by the site.** Students must report lost or destroyed nametags within one day and will incur the cost of replacement tags.

### 8. Student Role:

- Students must be aware of their limitations as students and of the limitations and regulations pertaining to physician assistant practice. Students at clinical sites must always practice with the collaboration and supervision of a preceptor. They may not function in the place of an employee or assume primary responsibility for a patient's care.

- Student activities must be confined to those which are either directly supervised or delegated by the preceptor. If delegated a task, the student **must have direct access to the on-site preceptor**. The

preceptor must be in attendance with the student for all procedures involving direct patient contact until the student demonstrates a level of competence that satisfies the preceptor. Potentially life-altering skills/procedures such as ACLS, surgery, and delivery of an infant, should **ALWAYS** be performed in the presence of, and with assistance of, the preceptor or delegated licensed provider/alternate preceptor. Non-provider healthcare staff such as RNs, MAs, LVNs, RTs, etc.... do NOT qualify as "licensed providers" for these purposes.

- Written orders and computerized physician order entry must be countersigned immediately. The PA student cannot provide or receive telephone orders. Likewise, documentation or dictation performed by the PA student must also be countersigned by the preceptor in a timely fashion.

- Students may NOT use pre-signed prescription pads, order sheets, or documentation at any time.

- A PA student may NOT phone in a prescription.

- **Students shall not manage, treat, or discharge a patient from care without consultation with the clinical preceptor**. Such behavior is fraudulent and illegal and may result in disciplinary action.

- Students must adhere to all regulations of the program and the clinical sites. The student is to contact the Director of Clinical Education (DCE) immediately with any questions or concerns about the student's role at a site. (May contact alternate Clinical Education Team member if DCE is unavailable)

- **A chaperone** must be present during any examination of the breasts, genitalia, and rectal area for all patients. The term "chaperone" includes the physical presence of a staff member of the site or your preceptor. It does not apply to the family or friend of a patient. The chaperone's name must then be documented in the medical record. Informed verbal consent must be given for student participation in pelvic examinations.

### 9. Student Participation in the Learning Process:

Students must take an active part in the learning process during their clinical education. Students are expected to review their syllabus, SCPE learning objectives and skills/procedures, and **Appendix A** of the syllabi, with their preceptor(s) at the beginning of each rotation. Active listening skills must be applied to all clinical encounters, whether observational or interactive. Students should show initiative and eagerness to learn. Despite different teaching styles and time constraints among preceptors, students must be assertive in pursuing their educational goals, but never aggressive or disrespectful. Students are expected to manage their time well and use slow periods, at the direction of their preceptor, for discipline specific reading and preparation for examinations. Students are responsible for all assignments given by the preceptor and the program. Students should be actively participating in their rotation and not avoid clinical and educational experiences in order to complete program assignments or exam preparation.

**Students are expected to attend the various conferences and other educational opportunities offered at their rotation site. Attendance at weekend, holiday, evening, or early morning rounds that are usual activities of the rotation service/preceptor is expected.**

### 10. Demeanor:

Students must conduct themselves in a professional and courteous manner at all times, displaying respect for the privacy, confidentiality, and dignity of patients, preceptors, faculty, staff, healthcare workers, and fellow students. Displays of aggression, argumentative speech (in verbal and/or written correspondence), threatening language or behavior, inappropriate sexual conduct or speech, demeaning language, and behavior/language that is deemed to be insensitive to, or intolerant of, race, religion, gender, sexual orientation, and ethnicity toward program faculty, a preceptor, staff, and/or patient will **not** be tolerated.

The Physician Assistant and Physician Assistant Student roles require teamwork and the ability to carefully follow directions from a clinical supervisor. The role of the clinical preceptor commands the utmost respect. Students displaying any type of unprofessional behavior may face disciplinary action, be referred to the Student Progress and Promotions Committee, be referred to the University's Dean of Student Affairs, and/or be considered for dismissal from the program.

### 11. Integrity:

Students are expected to follow all policies in the **Student Code of Conduct** outlined in the South University Academic Catalog, including those pertaining to academic honesty. Infractions, such as forgery, plagiarism, stealing/copying tests, and cheating during examinations will not be tolerated. Physician Assistant Students are also expected to display the highest ethical standards commensurate with work as a health care professional. Students shall report any illegal or unethical activity to the Director of Clinical Education. Students may not accept gifts or gratuities from patients or families. Breeches in confidentiality, HIPAA violations, falsification of records, misuse of medications, use of illegal substances (at any time during the clinical year), or participation in sexual relationships with patients or preceptors will not be tolerated.

### 12. Confidentiality:

In accordance with the *Guidelines for Ethical Conduct for the Physician Assistant Profession (**www.aapa.org**)* and in compliance with HIPAA Standards, students must respect and maintain the confidentiality of patients. Students are not permitted to discuss any patients by name or any other identifiable means outside the clinical encounter. For academic presentations and documentation assignments, all identifiable patient information must be removed as per HIPAA requirements. Additionally, **no original documents containing identifiable patient information should be photographed, videotaped, or removed from the clinical site.**

### 13. Health and Safety:

Any student whose actions directly or indirectly jeopardize the health and safety of patients, faculty, clinical staff, or fellow students may be immediately removed from the clinical site and/or face disciplinary action. Removal from a clinical rotation may result in a delay in the student's graduation or dismissal from the program. This pertains to behaviors on and off shift or clinical premises.

Preceptors, other than in the case of an emergency, are not to render any care or services for PA students while they are assigned to the SCPE. Preceptors are instructional faculty and fall under the same policy as principal faculty in adherence with the **PA Program Student Handbook**. **At no time while a student is being supervised by a preceptor are they to seek non-emergent medical care or advice at the clinical site with any provider.** Students in violation of this policy will be referred to the SPPC.

**Students must immediately report any blood/body fluid exposure(s) to their preceptor**, the Director of Clinical Education and any hospital personnel (if instructed by their preceptor). Students must adhere to the program's **Infection Control Policy** and complete the required **Incident Form** (**See Appendix A and B**). **Be advised that neither the school nor the clinical site/preceptor are liable for health care costs accrued if an exposure occurs.** Students should submit claims to their own medical health insurance.

### 14. Nondiscrimination:

Students shall deliver quality health care service to patients without regard to patients' race, color, national origin, sex, gender, sexual orientation, gender identity or expression, disability, age, religion, veteran's status, genetic marker, or any other characteristic protected by state, local or federal law. In addition, students shall deliver quality health care services to patients without regard to patients' personal background or medical history.

### 15. Substance Use and Impairment:

The South University College of Health Professions has a **zero-tolerance policy**. **Students must adhere to the College of Health Professions Background Check Policy and the Substance Abuse and Screening Policy at all times.** Any student deemed to be in violation will be immediately removed from the rotation, and the policy published in the South University Academic Catalog will be applied, up to and including dismissal.

The use of tobacco products is strongly discouraged. Students must adhere to facility tobacco product policies, and reported violations may result in removal from the rotation and referral to the SPPC.

### 16. Site Regulations:

Students must comply with all rules, regulations, bylaws, and policies of the site for which they are assigned. Failure to do so may result in removal from the rotation and may result in additional disciplinary action.

### 17. Learning Expectations:

Students are responsible for fulfilling all learning outcomes, instructional objectives, and technical skills in the rotation syllabus. It is the student's responsibility to ensure comprehensive knowledge of all objectives for each discipline. If a student feels that they are not going to be able to fulfill all learning outcomes, instructional objectives, or technical skills during a rotation, it is their responsibility to inform the Director of Clinical Education.

### 18. Flexibility:

Physician Assistant clinical education involves instruction from practicing clinicians with unpredictable schedules. At times, clinical rotations may need to be adjusted with short notice. Students must be flexible and anticipate changes. Students must also learn to adapt to the various teaching styles, expectations and schedules of the preceptors/sites, as well as various personalities among preceptors and clinic/hospital staff.

### 19. Problems/Conflicts:

Students should first attempt to work out any minor problems with their preceptor or supervisor. If the student continues to perceive a problem, including major personality conflicts, communication issues, supervision, or inadequacy of the learning experience, or if any major problems arise, the student should contact the Director of Clinical Education immediately (or other Clinical Education Team member if DCE is not available).

### 20. Weapons:

Students are not permitted to carry/possess weapons, regardless of personal permits/licensure, incendiaries or explosives (including fireworks) of any kind on campus or at clinical sites, **including housing** provided by/through the clinical site or Area Health Education Centers (AHEC).

### 21. Special Topics Courses:

Attendance for the Special Topics Series is **MANDATORY**, as is completion of all course activities, examinations, and assignments. Students must arrive on time for Special Topics Days and stay for the entire day. Failure to do so, or absences without prior program approval, **may result in referral to the Student Progress and Promotions Committee.** Any absence from the Special Topics courses or PA Senior Seminar due to illness will require a healthcare provider note.

### 22. Registration and Financial Obligations:

Students on clinical rotations must adhere to deadlines concerning tuition bills, financial aid, registration, and current contact information.

### 23. Social Media/Cell Phones/Personal Electronic Devices:

**Students are not permitted to take photographs of patients or to take any photographs, on any device, while physically within a clinical site building or on clinical site premises, due to risk of inadvertently including patients or protected health information (PHI/PII).** Students may not reference any patient, patient encounter, identifying patient details, clinical site, or affiliated health care system, by name or otherwise, on any social media platform or in written communication, including but not limited to emails or text messages. Additionally, students may not reference preceptors or clinical site staff on any social media platform if such references could reasonably be interpreted in a negative manner. Students MAY NOT connect with patients on social media platforms or through other means outside of the clinical encounter. **Use of cell phones or electronic devices for non-clinical-rotation-related activities is prohibited while at a clinical rotation, unless the student is on a scheduled break or off shift.**

As members of the South University Physician Assistant Program, students must comply with all applicable professionalism and conduct policies when utilizing social media. In addition, all students must follow university privacy and confidentiality policies, such as those outlined by the Health Insurance Portability and Accountability Act (HIPAA). Sharing patient information, including photos or any identifiable details, is strictly prohibited. Social media behavior violations of program professionalism standards will be referred to the Student Progress and Promotions Committee.

### 24. Graded Activities:

Students are responsible for all graded activities as outlined in the course syllabi, including, but not limited to, submission of clinical rotation notes, board review questions, submission of additional assignments, submission of assigned evaluations of site(s) and preceptor(s), logging of time, and field encounters.

**Important Reminder**: Students should NOT CONTACT preceptors, sites or other personnel at any clinical site or healthcare setting without the explicit permission of the Clinical Education Team. Attempting to arrange a rotation without consulting with the Clinical Education Team can lead to complications that take time and energy to rectify and can severely jeopardize other students' clinical opportunities. There are several factors apart from the potential preceptor's willingness to have a student, which need to be considered. Any infractions related to this stipulation are a violation of the Standards of Professionalism and may result in referral to the Student Progress and Promotions Committee.

# CLINICAL PRECEPTOR RESPONSIBILITIES

The preceptor plays a vital role in the educational process. The preceptor acts as a clinical instructor while students apply the medical knowledge obtained during didactic education. The primary preceptor must be a licensed health care provider and is responsible for the on-site supervision, education, and evaluation of the physician assistant student. Preceptor responsibilities include, but are not limited to, the following:

1. **Orientation:**

   The preceptor will orient the student at the onset of the rotation, with practice/site policies and procedures, and review the expectations/objectives for the rotation. Orientations will vary between sites, preceptors, and rotations.

2. **Student Schedule:**

   The preceptor determines and provides the student's schedule. Students are expected to adhere to the preceptor's work schedule, which may include nights, weekends, and holidays.

3. **Clinical Experience:**

   The preceptor will aim to provide the student the opportunity to spend as much time as possible involved in supervised hands-on patient care activities, seeing the largest number and greatest diversity of patients that is possible to enhance the learning experience. It is especially important that all students obtain exposure to patient care across the entire life span specified for that SCPE. Additionally, the preceptor will aim to expose students to all aspects of a clinician's daily duties.

4. **Objectives:**

   Students are given learning objectives to guide their learning and to focus their study efforts for the end of rotation exam. The program acknowledges that the student will not be exposed to every diagnosis and/or problem listed; however, the preceptor is oriented to the discipline specific learning objectives, mandatory skills/procedures, and learning outcomes.

5. **Supervision:**

   The preceptor is responsible for the overall supervision of the physician assistant student's educational experience at the clinical site. An assigned qualified practitioner (e.g. attending physician, physician assistant (PA), nurse practitioner (NP)) **must be on the premises and available at all times** while the student is performing patient care tasks. The student must know who this person is and how to contact them. Unusual or abnormal physical findings must be confirmed.

   Students require **direct preceptor supervision for surgical procedures, life-saving skills, and delivery of a neonate.** While on rotations, the physician assistant student will be supervised in all their other

activities commensurate with the complexity of care being given and the student's own abilities. **Students cannot treat and/or discharge a patient from care without consultation with the clinical preceptor,** and the preceptor or other designated licensed provider must always evaluate the patient during the encounter.

### 6. Feedback and Teaching:

The preceptor will provide ongoing and timely feedback regarding clinical performance, knowledge base, and critical thinking skills, throughout the course of the rotation (formally or informally), student initiated Mid-Rotation Evaluation, and via submission of the end-of-rotation evaluation of the student digitally through the clinical logging platform (CORE ELMS).

The preceptor will model and demonstrate ethically and culturally competent care in accordance with current evidence-based guidelines and accepted standards of care; including, but not limited to, structured teaching rounds, chart review periods, reading assignments, hallway or informal consultations between patient encounters, and/or recommending specific conferences.

### 7. Assignment of Activities:

Students shall be directly involved in the evaluation and management of patients based on the clinical preceptor's preference and the individual student's skill and knowledge level. Patient encounter volumes vary depending on the specialty, location, and practice. Students shall not, however, be used to substitute for regular clinical or administrative staff. The preceptor should assign the students to appropriate clinical oriented activities such as:

- Patients to examine and/or follow
- Procedures to perform/surgeries to assist in
- Clinical oriented paperwork (reviewing diagnostic test results and consultation reports, pharmacy refill requests, treatment prior authorizations, insurance/specialist referrals)
- Diagnosis and treatment research
- Patient/family education

### 8. Presentation:

Preceptors will have the student verbally present patients and will provide appropriate feedback and direction, critique, and constructive feedback.

### 9. Documentation:

Preceptors must review and countersign all student documentation, dictation, and orders. If the practice permits student access to an electronic medical record (EMR) system, students should be provided with orientation and an individual student ID and password for that EMR from the clinical site. Students **cannot use a licensed provider's ID and password**. If the office/system uses predominately checklists or student EMR access is limited/absent, the program encourages the preceptor to assign (and subsequently evaluate) written notes to the student and/or additional case presentations to the student.

### 10. Evaluation:

The preceptor will be responsible for evaluating the student **based on the expected level of performance for a student at that stage of training.** The preceptor will complete the end-of-rotation evaluation digitally through the clinical logging platform (CORE), no later than the final day of the rotation. Receiving honest critique and constructive feedback is critical to the academic and professional progression of a student. The preceptor may also be asked to give feedback on student performance to faculty members during site visits.

### 11. Notification:

The preceptor should promptly notify the PA program of any circumstances that might interfere with the accomplishment of the above goals, minimum required hours, or diminish the overall training experience.

### 12. Payment and Employment:

The preceptor **shall not** compensate the student in return for his/her assistance in medical care to patients and agrees **not** to use the PA student as a replacement for a paid staff position.

### 13. Student Health:

At no time is a full-time or part-time faculty member, program staff member, instructional faculty, the Program Director, or Medical Director allowed or expected to participate in the provision of healthcare for a student enrolled in the South University Physician Assistant Program. In an emergency, students may receive assistance from the provider until care can be transferred. This is in accordance with the scope of practice and standards of care.

# PROGRAM RESPONSIBILITIES

The South University Physician Assistant Program maintains responsibility for all aspects of preceptor/clinical site coordination. This includes the identification, communication, and evaluation of all sites (core or elective) and preceptors for suitability.

1. **Preparation:**

   The program will adequately prepare the students for their clinical experiences.

2. **Clinical Site/Preceptor Evaluation:**

   The program's Clinical Education Team will be responsible for evaluating preceptors and clinical sites for suitability.

3. **Clinical Site/Preceptor Coordination and Assignment:**

   The program's Clinical Education Team will communicate with preceptors and sites, coordinate schedules and onboarding requirements, and assign clinical rotations to students. The Clinical Education Team shall act as a liaison and information resource to the students and preceptors.

4. **Student Evaluation:**

   The Program's Clinical Education Team will provide the preceptor with appropriate links or login instructions to electronic student evaluations in CORE ELMS for their completion by the end of each rotation.

5. **Objectives:**

   The program will provide a syllabus including learning objectives for clinical experiences to students and preceptors. The program shall evaluate the student's competency based on the objectives.

6. **Affiliation Agreements:**

   The program will develop and maintain affiliation agreements with all clinical sites.

7. **Insurance:**

   The program will ensure that all students have current malpractice liability insurance and verify that students carry their own personal health insurance throughout the clinical year.

8. **Immunizations:**

The program will enforce the immunization policy consistent with the US Centers for Disease Control and Prevention's Immunization of Health Care Personnel Recommendations of the Advisory Committee on Immunization Practices (ACIP) and **per the requirements of clinical rotation sites**.

### 9. Grading:

The program will be responsible for assigning a final grade to every student for all rotations.

### 10. Problems:

The program will interact with all preceptors, sites, and students and be available to respond to any problems or concerns. Should problems arise at the site, the program retains the right to remove a student from a rotation.

### 11. Health and Safety:

The Director of Clinical Education will interact with preceptors and sites to help maintain patient safety. If a student's actions, whether direct or indirect, put the health and safety of patients, faculty, clinical site staff, or fellow students at risk, the student may be immediately removed from the clinical site. Additionally, disciplinary action may be taken, which could result in a delay in graduation or, in severe cases, expulsion from the program. The nature and severity of the student's actions will determine the consequences, emphasizing the importance of ensuring a safe clinical environment.

## STUDENT PROGRESS

The Student Progress and Promotions Committee (SPPC) is responsible for monitoring and coordinating the evaluation of the progress of each student in the program. Students in the clinical phase of the program are evaluated in a variety of ways by clinical preceptors and program faculty throughout the clinical year. Feedback is provided to the students daily by the preceptors while students are actively participating in the care of patients. Student evaluation during the clinical phase of the program is intended to address attainment of clinical rotation learning outcomes and achievement of competency in the areas of medical knowledge, interpersonal skills, clinical and technical skills, professionalism, and clinical reasoning and problem-solving abilities required for PA practice. Please refer to the **PA Program Student Handbook** for further details regarding the Student Progress and Promotions Committee, progression requirements, and policies.

## CLINICAL PHASE EVALUATION

Clinical students must satisfactorily complete all assigned clinical rotations by posted deadlines. Successful completion of a clinical rotation requires:

- An **overall rotation grade of C or above**
- **A passing score on all rotation components/competencies**
    - End of rotation exam/elective project
    - Preceptor evaluation
    - Clinical note submission
- **Submitting all assigned preceptor and site evaluations**
- **Logging of all clinical rotation hours and case logs in CORE ELMS**
- **Logging of Technical Skills in CORE ELMS**
- **Submitting all related assignments and credentialing requirements**
- **Professionalism**

The Director of Clinical Education will review the evaluations of students from the clinical preceptors and has final authority in assigning grades for all courses in the clinical phase of the program. Please see the discipline specific course syllabus for further information on grading. The Director of Clinical Education will meet with students individually if a preceptor has noted any concerns in their evaluation of the student.

Successful completion of the clinical year requires **successful completion of seven core rotations, one elective rotation and/or independent study** (per discretion of the SPPC, Director of Clinical Education, and the Program Director)**, three Special Topics in Clinical Practice courses, one Physician Assistant Senior Seminar course, End of Curriculum Exam, Summative OSCE exam, and all mandatory technical skills and procedures.**

Concern for patient safety, proper professional conduct, and the progressive demonstration of competency at all clinical sites is expected. The Director of Clinical Education in consultation with the SPPC and the Program Director may recommend that a student either stay longer at a clinical site or repeat specific components of a clinical rotation and course as deemed necessary to ensure patient safety and the student's expected level of professional development and mastery of program learning outcomes. The Student Progress and Promotions

Committee will review any such recommendation and will make a recommendation to the Program Director.

To avoid an incomplete, **students are responsible for ensuring all submissions are received in a timely fashion,** including the preceptor evaluation. All final course grades not calculated by the end of the quarter are reported as "I" (Incomplete) to the Registrar's Office. Late grades will be submitted to the Registrar's Office with a change of grade form once the necessary evaluation(s) and/or assignments have been completed. All final grades must be reported to the Office of the Registrar prior to graduation.

## END OF ROTATION EXAM

The end of rotation examinations (EOR exams) take place on campus at the conclusion of the rotation or during Special Topics in Clinical Practice courses and PA Senior Seminar. EOR exams are based on topics and objectives outlined in the clinical rotation syllabi and the specific exam blueprint provided by the **Physician Assistant Education Association**. **The minimum passing grade for an EOR exam is 70%.**

Attendance is mandatory for all examinations, both written and oral. Students are responsible for being present at the beginning of all examinations. Exams will begin **ON TIME**. Students who arrive after an examination has begun will be refused admission to the testing room. Students are only allowed to take an examination prior to the regularly scheduled test administration if it is approved by the Director of Clinical Education. Students must remain in the proctored setting until the start of the regularly scheduled class examination.

Students who are excused from the regularly scheduled administration of a test will be required to set up a time with the Director of Clinical Education to make up for the missed test as soon as possible. Permission for any deviation from the regular test schedule must be requested through the Director of Clinical Education. For unexcused absences or tardiness, it is at the discretion of the Director of Clinical Education if the student will be allowed to make up the examination for a **maximum achievable grade of 70%**. Additionally, any missed exam may be referred to the Student Progress and Progressions Committee for evaluation. **The student may appeal the decision to the Program Director.**

**EOR Exam Process for Academic Success**

- **If a student does not score 70% or greater on an EOR exam, they will be required to repeat the exam** after meeting with the SPPC, a period of remediation, and self-study.
- **If the student successfully passes the second attempt** of the exam, the **original grade stands** and they will receive the earned grade for the course.
- **If a student fails the end-of-rotation examination twice in the same discipline, the student has not met the rotation competency and will be referred to the SPPC for further action up to and including dismissal from the PA Program.** Failure of an EOR exam after remediation indicates a failure of the graduate competency **PLO-1**:
    - *Demonstrate comprehensive **medical knowledge** to promote health, evaluate a broad range of patient presentations, and manage clinical conditions across the lifespan.*
  - If the student is allowed to continue in the program, they will be required to remediate the failed competency by enrolling in an Independent Study Course (PAS5499 or PAS5599). The student receives an incomplete for the rotation with the failed EOR until successful completion of the terms of their remediation. If the student is successful with their remediation, they will receive

the earned grade for the course in the place of the incomplete. This delays graduation and will incur additional expenses for the student.

- **If a student fails an end-of-rotation examination (EOR) in a subsequent rotation after previous remediation of a rotation, the Student Progress and Promotion Committee will convene to determine further action up to and including dismissal from the program. The SPPC may suggest an extended period of remediation.** Accordingly, the student will receive an "I" (Incomplete) grade for the course that had the failed EOR exam. The student will be enrolled in an Independent Study Course (PAS5499 or PAS5599) in the rotation immediately following to allow for remediation of any competency deficiencies. The student may then repeat the EOR exam upon completing the remediation plan. If the student successfully passes the second attempt of the EOR, they will then be awarded their earned grade for the incomplete course. **If the student does not successfully pass the repeat EOR they will be dismissed from the program.**

# ELECTRONIC SUBMISSIONS AND EVALUATION

## PRECEPTOR EVALUATION

At the end of the supervised clinical practice experiences, the preceptor will evaluate the student on performance and professionalism. **The Preceptor Evaluation is a graded component of the rotation.** Please refer to the discipline specific rotation syllabus for further information on grade weighting.

Students are required to verify the VERY BEST EMAIL to which your evaluation should be sent. Any students scoring below a “Competent with Support” as evaluated by preceptors on discipline-specific Learning Outcomes are required to successfully complete remediation. Any preceptor evaluation with a score of less than 80% will require a meeting with the Director of Clinical Education.

**If a student's evaluation results in a score below 70%, the Director of Clinical Education will conduct a thorough review.** A score below 70% is considered a failure of a rotation competency and will be addressed by the SPPC. The SPPC could determine that the student requires remediation, should be placed on a Performance Improvement Plan (PIP), should be enrolled in an Independent Study Course (PAS5499 or PAS5599), should repeat the rotation, or the SPPC may determine that the student should be dismissed from the program. If the student remains in the program, the student will receive an "I" (Incomplete) grade for the relevant course. Once the student has successfully remediated the rotation competency, the earned grade will be assigned.

**If a student is dismissed from a rotation by their preceptor** prior to completion, this is an **automatic failure** to meet the rotation competencies and will result in a meeting with the SPPC to determine the severity of the student’s deficiencies/conduct. **If the student has violated the University Code of Conduct, they may be recommended for dismissal from the program.** If the student is found to be deficient in the Graduate Competencies, they will be enrolled in an Independent Study Course (PAS5499 or PAS5599) to remediate the deficiencies. The student may then be required to successfully complete a repeat rotation in the discipline from which they were dismissed. This will result in a delay in graduation and additional expenses for the student to successfully complete the program.

## MID-ROTATION SELF-EVALUATION

By the end of Week 2, students should seek verbal feedback from the preceptor. Complete the discipline-specific Mid-Rotation Assessment provided (**Appendix E**) in the Clinical Policy Manual and review it with your preceptor. Obtain the preceptor's signature and submit it through Brightspace **no later than 5pm on Wednesday of Week 3.** Submission is a graded component of the rotation (pass/fail). Please refer to the discipline-specific syllabus for further information on grade weighting.

## PROFESSIONALISM AND ASSIGNMENTS

Please refer to the discipline specific syllabus for more detailed information on assignments and submissions. All necessary rubrics and information related to grading will be in Brightspace and the course syllabus.

**Professionalism, Attendance and Timely Submissions/Credentialing**

Attendance is the presence of a student at a clinical rotation. Please refer to the Attendance Policy (**Section 7**) in this handbook. The student is responsible for submitting documentation for all rotation requirements, including hospital or clinic credentialing/onboarding by the provided deadlines. Delays in the provision of documentation may result in a delayed or missed rotation, delay in graduation, and/or further action as per the Student Progress and Promotions Committee. PA students will not only be evaluated by their preceptors on their professionalism with patients, family members, and members of the healthcare team, but also by the PA program faculty.

The Summative Professionalism Evaluation defines the program's expectations of a student's behavior as they progress throughout the program. Interactions with program faculty, staff, other students, and colleagues are continuously monitored. Please refer to the Summative Professionalism Evaluation in the **PA Program Student Handbook**.

**Clinical Logging**

Thorough and accurate documentation of the students' patient care experiences and exposures during each clinical rotation is essential. Logging of time and case logs in CORE ELMS is a required component of each rotation. Clinical logging is a graded component of the rotation as detailed in the course specific syllabus. The goal for case logging is to demonstrate participation in the care of a wide variety of patient diagnoses, a diverse patient population, and a range of acuity levels. Students are required to log a minimum of 50 case logs per rotation and all procedures. **Students should download the case logs for each rotation** and save them for future credentialing requirements. Evidence of participation in patient encounters and technical skills may be required for future hospital credentialing. Students do not maintain access to CORE ELMS after graduation.

Students should document case logs promptly (same day as patient care visit). Under no circumstances should students wait longer than 24 hours to log their cases. All case and procedural logs must be entered in the clinical logging system (CORE) **no later than 11:59 PM the last Friday of the clinical rotation.**

Students are expected to log a minimum of 180 clinical hours on 5-week rotations to successfully pass the rotation. Full credit will be awarded for each component if logging (or supplemental work) is complete and submitted on time. Incomplete, late, or insufficient submissions will receive point deductions accordingly.

Students should document all case logs promptly (same day as patient care visit). All time and case logs for a rotation must be submitted by the submission deadline detailed in the course syllabus.

Over the clinical year, students must have exposure to patients with emergent, acute, chronic, and preventive diseases. Additionally, patient exposures must be across the lifespan to include infants, children, adolescents, adults, and the elderly. Finally, students must be exposed to prenatal and gynecological care; pre-operative, intra-operative, and post-operative care; and care for behavioral and mental health conditions. If a student's schedule changes unexpectedly or the patient exposure is insufficient causing the student to be unable to meet the required minimum rotation hours or case logs, the student should complete a Rotation Deficiency Form (**Appendix D**) and submit to the Director of Clinical Education immediately.

**Board Preparation Self-Assessment**

During each clinical rotation, each student will be assigned questions and modules through an online Self-Assessment Board Preparation platform. Students must receive a score of 80% or above on their submission. It is **due no later than 11:59 PM on the last Friday of the clinical rotation.**

While it is not required, it is strongly encouraged that students continue to utilize Board Preparation Self-Assessment platform questions that are pertinent to their assigned SCPE specialty. It is recommended that students complete a minimum of 10 questions per week. Students are encouraged to utilize question categories that align with the End-of-Rotation Exam topic list (provided by PAEA and appended to the syllabus) for each core clinical rotation.

**Student Evaluation of the Clinical Site, Course, and Preceptor**

During each clinical rotation, each student will be assigned a survey evaluating the Clinical Site, Course, and Preceptor. For a student to move on to the next rotation, each student must complete and submit the survey. This survey is a graded component of the rotation and **is due no later than 11:59 PM on the last Friday of the clinical rotation**. Failure to complete these evaluations will result in an (I) Incomplete grade for the rotation and will remain as such until a grade change form is submitted to the registrar. Students will be unable to graduate with an Incomplete on their record. Receiving an Incomplete under these circumstances may result in a referral to the SPPC. Please see the discipline specific course syllabus for further information on grade weighting.

**Special Topics in Clinical Practice Course Grading**

Details regarding evaluation and grading of the Special Topics Series can be found in the respective syllabi for the course. These courses are graded pass/fail. Attendance is mandatory at all Special Topics Week activities.

**Program Completion/Summative Evaluation/Senior Seminar Course Grading**

Before graduation, students must successfully complete a comprehensive summative evaluation administered near the end of the clinical training period. This evaluation, conducted within four months of clinical phase completion, includes a written exam, an objective structured clinical examination (OSCE), and assessment of professionalism. It measures medical knowledge, clinical and technical skills, communication, professionalism,

and clinical reasoning and problem-solving abilities, ensuring competency in the program's learning outcomes, and confirming eligibility for graduation.

The graduate candidate's summative evaluation consists of three distinct components, each of which must be successfully completed to earn a passing grade. Minimum passing standards are as follows:

- **Written Exam** – Score must be greater than or equal to 1.5 standard deviations below the national mean for the exam (medical knowledge)
- **OSCE** – Score of at least 70% in each area assessed on the clinical performance exam (medical knowledge, interpersonal and communication skills, clinical skills, technical skills, professionalism behaviors, clinical reasoning, and problem-solving abilities in patient care)
- **Final Professional Behavior Evaluation** – Student must be rated "Competent" in all domains of professional behavior on the program's final evaluation

Students who do not pass any component of the comprehensive summative evaluation will be referred to the Student Progress and Promotions Committee (SPPC). They will be required to remediate deficiencies and repeat the failed portion(s). In cases of significant deficiency, the student may be required to enroll in a self-directed independent learning seminar. The Program Director, with input from the SPPC, will establish a remediation plan.

Students are not eligible for program completion until all components of the summative evaluation are successfully passed. Failure of a component on the second attempt will result in further review by the SPPC. Any delay in graduation will result in additional tuition and fees for which the student is responsible. All program requirements, including successful completion of the summative evaluation, must occur within 45 months of matriculation.

**Standard Operating Procedure: Clinical Site Incident Reporting**

**Purpose:** To establish clear procedures for reporting incidents, adverse events, and other significant occurrences during clinical placements to ensure student safety, patient safety, and institutional compliance.

**Policy Statement:**

All students participating in clinical experiences are required to immediately report Reportable Incidents to appropriate University personnel. Failure to report may result in disciplinary action, including removal from the clinical site and/or dismissal from the program.

**Reportable Incidents - Students Must Report:**

You must immediately report any of the following incidents:

1. **Patient-Related Incidents:**
    - Patient death during or after your involvement in care
    - Serious patient injury or adverse outcome during your care
    - Medication errors or near-misses
    - Patient falls or safety events
    - Equipment failure or malfunction
    - Any situation where patient safety was or could have been compromised
2. **Student Safety Incidents:**
    - Needlestick injuries or blood/body fluid exposures
    - Injury to yourself at the clinical site
    - Exposure to infectious diseases
    - Physical or verbal threats to your safety
    - Unsafe working conditions
3. **Professional Conduct Issues:**
    - Allegations of unprofessional behavior against you
    - Witness to unprofessional or unethical conduct by others
    - HIPAA violations or potential privacy breaches
    - Conflicts with clinical site staff or preceptors
    - Removal or request to leave the clinical site for any reason
4. **Legal or Regulatory Matters:**
    - Requests for your involvement in legal proceedings
    - Inquiries from attorneys, law enforcement, or regulatory agencies
    - Receipt of any legal documents related to clinical activities
    - Complaints filed against you by patients or families
5. **Other Significant Events:**
    - Any incident requiring completion of a clinical site incident report
    - Situations that receive media attention
    - Any event that causes you concern about patient or your own safety

- Requests from patients or families for your personal contact information

**Reporting Procedures:**

**STEP 1: IMMEDIATE ACTION (Within 1 hour of incident or as soon as safely possible)**

1. Ensure patient safety and follow clinical site protocols
2. Notify your on-site preceptor/supervisor immediately
3. **Contact University personnel immediately by phone:**
   - **PRIMARY CONTACT:** Director of Clinical Education
     - Name: Mallory Capps
     - Phone: 303-312-7751
     - Email: mcapps@southuniversity.edu
   - **IF PRIMARY UNAVAILABLE:** Program Director
     - Name: John Burns
     - Phone: 912-201-8024
     - Email: jjburns@southuniversity.edu

**STEP 2: WRITTEN NOTIFICATION (Within 24 hours)**

Submit a written incident report using the Clinical Incident Report Form available on CORE to: clinical_incident@southuniversity.edu and your Director of Clinical Education.

**Your written report must include:**

- Date, time, and location of incident
- Detailed description of what occurred
- Names of witnesses and involved parties
- Actions you took in response
- Name of clinical site personnel notified
- Your contact information including enrolled program of study and campus for follow-up

**STEP 3: FOLLOW-UP**

- Attend any required meetings to discuss the incident
- Cooperate fully with any University or clinical site investigations
- Complete any remediation or additional training as required
- Maintain confidentiality regarding the incident investigation

**Critical Reminders:**

- **WHEN IN DOUBT, REPORT.** It is always better to report an incident that turns out to be minor than to fail to report a serious incident.
- **TIME MATTERS:** "Immediately" means as soon as you can safely do so, ideally within 1 hour of the incident.
- **DOCUMENT EVERYTHING:** Keep your own contemporaneous notes about the incident.

- **DO NOT DISCUSS:** Do not discuss the incident on social media or with anyone other than appropriate University and clinical site personnel.
- **PROTECT PRIVACY:** Maintain patient confidentiality in all reports and discussions.
- **YOU ARE PROTECTED:** The University prohibits retaliation against students who report incidents in good faith.

**Consequences of Failure to Report:**

Failure to report a Reportable Incident may result in:

- Removal from clinical site
- Clinical course failure
- Academic probation or dismissal from program
- Professional licensure implications
- Inability to complete degree requirements

**Questions?**

Contact your Program Director if you have questions about whether an incident is reportable or how to complete a report.

# *CLINICAL SITE INCIDENT REPORT FORM*

Student Name: _____

Incident Date: _____ Time: _____ AM/PM

Location of Incident: _____

Nature of Incident: _____

Incident Cause: _____

Give brief description of incident, including predominating and contributing causes, as well as actions taken following the incident:

| |
|---|
| |

State corrective action taken to prevent recurrence. Indicate if further investigation is warranted.

| |
|---|
| |

Did you seek medical care? Yes No

Date/Time/Method Program was Notified: _____

Date/Time of Report to Preceptor _____

Date/Time of Report to Director of Clinical Education: _____

Name of Faculty/Advisor Reviewing the Report: _____

Signature of Student: _____

**POLICY**

The objective of the following guidelines is to prevent the spread of infection and avoid exposure to blood and body fluid pathogens.

**GENERAL**

It is the policy of the South University Physician Assistant program to follow the guidelines and recommendations made by the Centers for Disease Control and Prevention (CDC) and the Occupational Safety and Health Administration (OSHA) regarding STANDARD PRECAUTIONS. Before beginning any clinical education experience through the South University Physician Assistant program, students must receive training regarding CDC STANDARD PRECAUTIONS.

**STANDARD PRECAUTIONS**

Standard Precautions are the minimum infection prevention practices that apply to all patient care, regardless of suspected or confirmed infection status of the patient, in any setting where healthcare is delivered. Standard Precautions combine the major features of Universal Precautions and Body Substance Isolation and are based on the principle that all blood, body fluids, secretions, excretions, non-intact skin, and mucous membranes may contain transmissible infectious agents.
These practices include:

- Hand hygiene
- The use of personal protective equipment (PPE) (e.g., gloves, gowns, masks) for mouth, nose, eye protection
- Safe injection practices
- Properly handle, clean, and disinfect patient care equipment and instruments/devices. Clean and disinfect the environment appropriately.
- Respiratory hygiene/cough etiquette
- Ensure appropriate patient placement.
- Handles textiles and laundry carefully.

In addition to Standard Precautions, students will receive training in the three categories of Transmission-Based Precautions:

- Contact Precautions
- Droplet Precautions
- Airborne Precautions

Transmission-Based Precautions are used when the route(s) of transmission is (are) not completely interrupted using Standard Precautions alone.

**EXPOSURE TO BLOODBORNE PATHOGENS**

Strict adherence to STANDARD PRECAUTIONS and other infection control measures should prevent a student's exposure to blood borne pathogens. Should a student sustain a possible exposure (including a needle stick injury) to blood borne pathogens during a clinical training experience, the student is responsible for immediately notifying their supervisor, instructor, preceptor, or department manager. The student should then follow the steps outlined in the section titled "Post-Exposure Procedure" and "Student Injuries or Exposures". Exposure is defined as a demonstrated skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials.

**THE FOLLOWING PROCEDURE SHOULD BE INITIATED AND FOLLOWED AFTER AN EXPOSURE**

**POST-EXPOSURE PROCEDURE**

- Aggressive local wound care to the site of exposure should be initiated immediately. Percutaneous wounds should be expressed to promote bleeding. The site should be cleansed thoroughly with soap and water using a surgical hand brush

when possible. It may be beneficial to use an antiseptic such as chlorhexidine gluconate (Foam Carer CHG), an iodophor (EZ Scrub, Betadine), or Dakins solution (dilute 1:9 buffered sodium hypochlorite). Difficult to scrub areas should be soaked in chlorhexidine gluconate (Foam Carer CHG) or other antiseptic. Non-intact skin should be cleansed with soap and water. It may be beneficial to use an antiseptic as described above.

- Mucous membrane exposures (e.g., eye splashes) should be irrigated thoroughly with tap water using the nearest eye washing station (or faucet if none available).
- The incident should be reported immediately to the student's supervisor, instructor, preceptor, or department manager.
- Post Exposure Prophylaxis protocol should be initiated if indicated. The student may access current guidelines through the National Clinician Consultation Center.

Access to emergency health care is recommended, and the student is urged to become informed about current PEP guidelines in order to receive most effective treatment within the recommended time frame.

Finally, the student must notify the Director of Clinical Education or if unavailable, the Education Clinical Coordinator or Program Director. In addition, the South University Physician Assistant Program incident form must be completed and sent to the program.

**STUDENT INJURIES**

Incidents involving an injury to a student (such as a fall, or other accidental injury) during a clinical education experience will follow a similar protocol.

- The injury should be reported to the student's supervisor, instructor, preceptor, or department manager.
- Students should report to the nearest Emergency Room for treatment.
- The program should be notified as soon as it is possible to do so. The student must notify the Program Director or if unavailable, the Director of Clinical Education or if unavailable, the Education Clinical Coordinator. In addition, the South University Physician Assistant program incident form must be completed and sent to the South University Physician Assistant Program.

If a potentially infectious exposure occurs, do not allow feelings of embarrassment, a large workload, or misplaced peer pressures to prevent you from reporting the event immediately. Needle sticks and other exposures can be life-threatening. Responsible health care providers recognize that unintentional injuries and occupational exposures may occur and must be evaluated by competent, objective, and experienced medical professionals.

**IMPORTANT**

All charges incurred by PA students for evaluation and management related to an injury, needle stick; blood or body fluid exposures are the student's responsibility. Students must maintain health insurance throughout their educational experience at the South University Physician Assistant program. All medical or health care services (emergency or otherwise) that the student receives or requires are the student's responsibility and are at the student's expense.

*Please complete this form digitally in the clinical logging platform.*

Student Name: _____ Date: _____

All absences MUST be reported to the Director of Clinical Education.

I was/will be absent from _____ with
(Course/Rotation)

_____ at _____.
(Instructor/Supervising Preceptor) (Rotation Site, if applicable)

Start Date of Absence: _____ Date of Return: _____

Cumulative Absences: _____

*Continuous absences will be referred to the Student Progress Committee.

Brief description of the emergent absence: *Please provide supporting documents*

_____
_____
_____

Program Notes:

_____
_____
_____
_____

Date Form Submitted by Student: _____

***Students are required to meet the minimum clinical hour requirements, regardless of absence.***

Student Name: _____ Date: _____ Rotation Discipline: _____

Rotation Date: _____

Clinical Site: _____ Primary Preceptor Name: _____

1. Complete the following table as accurately as possible:

| **Current Week of Rotation (1–5)** | **Case Logs Obtained to Date** | **Average # of Cases Logged Per Day** |
|---|---|---|
| | | |
| **Current Week of Rotation (1–5)** | **Current Hours Obtained** | **Anticipated Hours by End of Rotation** |
| | | |
| **Current Week of Rotation (1–5)** | **Procedural Skills Deficiency** | |
| | | |
| | | |

2. Attach your current "Field Encounters," "Time Logs," and "Procedure" reports downloaded from CORE ELMS.

3. Discuss the pertinent details related to your inability to enter the required number of case logs, hours, or procedures. Please include all information that may be relevant, such as limited patient exposure, limited clinic days, holidays, and prolonged patient care time (long OR critical care patients). Please sign and date the form and return it to the Director of Clinical Education prior to the end of the rotation.

_____
_____
_____

Student Signature: _____ Date: _____

---

**For Clinical Education Department (CED) Use Only**

Date Form Received: _____ Deficiency in Case Logs: _____

Supplemental Training Assigned:

___ Additional Clinical Hours
___ Webinar Information
___ Conference Time
___ Case Studies
___ Other: _____

Name of CED Member Approving Supplemental Training: _____

Date Supplemental Training Received/Approved: _____ Make-up Work Entered into CORE: _____

## Physician Assistant Program Mid-Rotation Assessment – Family Medicine

| | |
|---|---|
| Student Name: _____ | Rotation Number: _____ |
| Preceptor Name: _____ | Discipline: **Family Medicine** |

**Rotation Goals / Objectives:**

1. _____
2. _____
3. _____
4. _____

Please provide comments on how the student can **reinforce or improve** in the following areas over the remainder of the rotation.

**Competency – Medical Knowledge:** Demonstrating comprehensive medical knowledge to promote health, evaluate a broad range of patient presentations, and manage clinical conditions across the lifespan.

| **Student to complete prior to meeting** | **Preceptor to complete during meeting** | |
|---|---|---|
| ☐ Meeting Expectations | ☐ Meets Expectations | Comments: |
| ☐ Not Meeting Expectations | ☐ Does Not Meet Expectations | |

**Competency – Interpersonal Skills:** Demonstrate interpersonal and communication skills to exchange information clearly and provide counseling and education to improve patient outcomes.

| **Student to complete prior to meeting** | **Preceptor to complete during meeting** | |
|---|---|---|
| ☐ Meeting Expectations | ☐ Meets Expectations | Comments: |
| ☐ Not Meeting Expectations | ☐ Does Not Meet Expectations | |

| **Competency – Clinical Reasoning and Problem-Solving Abilities:** Apply clinical reasoning and problem-solving in formulating differential diagnoses and developing patient-centered management plans. | | |
|---|---|---|
| **Student to complete <u>prior</u> to meeting** | **Preceptor to complete <u>during</u> meeting** | |
| ☐ Meeting Expectations<br>☐ Not Meeting Expectations | ☐ Meets Expectations<br>☐ Does Not Meet Expectations | Comments: |
| **Competency – Professionalism:** Exhibit essential professional behaviors in all interactions. | | |
| **Student to complete <u>prior</u> to meeting** | **Preceptor to complete <u>during</u> meeting** | |
| ☐ Meeting Expectations<br>☐ Not Meeting Expectations | ☐ Meets Expectations<br>☐ Does Not Meet Expectations | Comments: |
| **Competency – Clinical Skills:** Perform essential clinical skills in eliciting patient histories and conducting physical examinations. | | |
| **Student to complete <u>prior</u> to meeting** | **Preceptor to complete <u>during</u> meeting** | |
| ☐ Meeting Expectations<br>☐ Not Meeting Expectations | ☐ Meets Expectations<br>☐ Does Not Meet Expectations | Comments: |
| **Competency – Technical Skills:** Perform essential procedures and technical skills common to clinical practice. | | |
| **Student to complete <u>prior</u> to meeting** | **Preceptor to complete <u>during</u> meeting** | |
| ☐ Meeting Expectations<br>☐ Not Meeting Expectations | ☐ Meets Expectations<br>☐ Does Not Meet Expectations | Comments: |

| **Competency – Healthcare Resources:** Demonstrate appropriate use of healthcare resources in order to advocate for quality patient-centered care. | | |
|---|---|---|
| **Student to complete <u>prior</u> to meeting** | **Preceptor to complete <u>during</u> meeting** | |
| ☐ Meeting Expectations<br>☐ Not Meeting Expectations | ☐ Meets Expectations<br>☐ Does Not Meet Expectations | Comments: |
| **Rotation Specific Competency:** The student is currently meeting the expectations for rotation specific learning outcomes. Please see the complete list below. | | |
| **Student to complete <u>prior</u> to meeting** | **Preceptor to complete <u>during</u> meeting** | |
| ☐ Meeting Expectations<br>☐ Not Meeting Expectations | ☐ Meets Expectations<br>☐ Does Not Meet Expectations | Please list any discipline specific learning outcomes in which the student is not meeting expectations (see list of learning outcomes below): |
| Additional Comments: | | |

**Printed Student Name:** _____

**Student Signature:** _____

**Preceptor Signature:** _____

**Date Signed:** _____

## Family Medicine Learning Outcomes:

**Acute (Adult) Care Learning Outcomes (B3.03b, B3.06a)**

1. Conduct focused history-taking for adult patients with acute conditions.
2. Perform problem-focused physical examinations tailored to adult patients' acute complaints.
3. Select appropriate diagnostic studies for adult patients with acute conditions.
4. Interpret diagnostic results accurately to inform management of acute conditions in adult patients.
5. Provide adult patient education on lifestyle modifications for acute conditions.
6. Determine appropriate triage and referral pathways for adult patients with acute complaints.

**Chronic (Adult) Care Learning Outcomes (B3.03c, B3.06a)**

7. Select appropriate diagnostics for adult patients presenting with chronic musculoskeletal pain.
8. Accurately interpret diagnostics for adult patients with chronic conditions.
9. Effectively communicate with adult patients about abnormal diagnostic results for chronic conditions.
10. Determine appropriate referral pathways for adult patients with chronic conditions.

11. Develop comprehensive management plans for adult patients with chronic diabetes.
12. Create individualized behavior modification plans for adults with chronic conditions. (Preceptor Example: Create a smoking cessation plan for a patient with COPD.)

**Preventative (Adult) Care Learning Outcomes (B3.03a, B3.06a)**

13. Obtain comprehensive medical histories from adults during preventive care visits.
14. Conduct thorough physical examinations during adult wellness visits.
15. Recommend evidence-based screenings according to U.S. Preventive Services Task Force (USPSTF) age-appropriate guidelines.
16. Provide personalized immunization counseling based on current CDC guidelines to adult patients.

**General Clinical Learning Outcome for Family Medicine (B3.06a)**

17. Demonstrate professional behavior in all outpatient clinical interactions.
18. Perform urine dipstick testing with proper technique.
19. Accurately interpret urine dipstick results.
20. Perform capillary blood glucose testing using proper finger-stick techniques on a diabetic patient.
21. Justify appropriate use of healthcare resources in Family Medicine based on evidence-based, patient-centered care principles.

*See other discipline specific evaluations in Brightspace

| Class of 2027 Clinical Year Schedule<br>Subject to Change | | |
|---|---|---|
| **Course Number** | **Course** | **Rotation Dates** |
| PAS6200 | Rotation 1 | 04/06/2026 - 05/08/2026 |
| PAS6205 | Rotation 2 | 05/11/2026 - 06/12/2026 |
| PAS6320 | Special Topics in Clinical Practice I | 6/15/2026 - 6/19/2026 |
| | Holiday | 6/22/2026 - 06/26/2026 |
| PAS6210 | Rotation 3 | 06/29/2026 - 07/31/2026 |
| PAS6215 | Rotation 4 | 08/03/2026 - 09/04/2026 |
| PAS6330 | Special Topics in Clinical Practice II | 9/7/2026 - 9/11/2026 |
| | Holiday | 9/14/2026 - 9/25/2026 |
| PAS6220 | Rotation 5 | 09/28/2026 - 10/30/2026 |
| PAS6225 | Rotation 6 | 11/02/2026 - 12/04/2026 |
| PAS6340 | Special Topics in Clinical Practice III | 12/07/2026 – 12/11/2026 |
| | Holiday | 12/14/2026 – 1/01/2027 |
| PAS6230 | Rotation 7 | 01/04/2027 - 02/05/2027 |
| PAS6235 | Rotation 8 | 02/08/2027 - 03/12/2027 |
| PAS6350 | PA Senior Seminar | 03/15/2027 – 03/26/2027 |

## *APPENDIX G CLINICAL POLICY MANUAL STUDENT ACKNOWLEDGEMENT*

I, _____, have received and read the South University Physician Assistant Program Clinical Policy Manual.

I fully understand this information and hereby agree to abide by the Physician Assistant Program policies contained within the South University Physician Assistant Program Clinical Policy Manual. Additionally, I agree to abide by all rules and regulations as set forth in the South University Academic Catalog and in the **South University Physician Assistant Program Student Handbook.**

I understand my obligation to successfully complete all rotation requirements in the outlined timeframe. I also understand that I am responsible for all additional costs associated with completion of the clinical phase of my training, including travel costs, relocation costs, or fees associated with the credentialing process. I understand that the Physician Assistant Program reserves the right to make the final rotation assignment for each rotation. The program also reserves the right to make changes in any student's rotation schedule based on performance or availability of rotation sites.

I understand that amendments may be made to the policy and procedures noted within. I hereby agree to comply with all provisions listed in this manual and any future amendments.

Student Signature _____ Date _____

Student Printed Name _____

Prior to beginning any rotation, the student must complete the following tasks:

NOTE: Students must not contact clinical site staff until a rotation has been formally finalized by the program. All credentialing-related communication must include ("CC") both Education Clinical Coordinators. Final decisions regarding student rotation placement are made by the Director of Clinical Education, in consultation with the Program Director as needed.

1. Submit the SUPA Credentialing Form to the Education Clinical Coordinators (ECC) **within the SUPA Credentialing Window** and by the SUPA Credentialing Deadline. The form is linked in the *Credentialing 101* document in CORE.

   You will ALWAYS submit this form for **every rotation**. The form will ask you what is required to credential for your main and any affiliated site(s). This lets the ECC's know what is needed from us for you to credential with your site- i.e. credentialing platform access, signed form(s), items submitted on your behalf, etc.

2. Complete all rotation-specific requirements and submit the SITE Credentialing Email to your clinical site(s) **within the SITE Credentialing Window** (if required for a specific site) and by the SITE Credentialing Deadline as per CORE credentialing instructions. Some sites have different deadlines. **It is your responsibility to look ahead at what is required of you.** All questions regarding credentialing must be addressed to the Education Clinical Coordinators **no later than 10 business days prior** to the SITE credentialing deadline to allow time to process all questions.

   You **must** use the *email templates* provided in the *Credentialing 101* document in CORE. You may occasionally need to send more than one email if an affiliated site requires it.

   **You will then upload a copy of the email(s) via the Credentialing form linked in the *Credentialing 101* document in CORE by the SITE Credentialing Deadline.**

   i. The information from the template goes in the BODY of your email.

   ii. No email is required for your site if the site-specific credentialing instructions in CORE state "Not applicable to this site" for this step.

   iii. You may credential via a credentialing platform (i.e. Clinician Nexxus, Bridges EXP, etc.) during this step versus sending an email. Refer to your site-specific credentialing instructions in CORE for instructions.

   **NO REQUIRED CREDENTIALING ITEM IS ALLOWED TO EXPIRE DURING A ROTATION!!!!**

   If anything is set to expire during a rotation (PPD, Physical exam, etc.…), then it *must* be updated prior to the SUPA credentialing deadline for that rotation.

Example: Rotation 7 starts in January of 2027, but the SUPA credentialing deadline for R7 is in the middle of November. This means that if your physical exam is set to expire **any time** within Rotation 7, you will need to schedule and complete your physical examination and upload the associated document to SentryMD for approval and then CORE once approved before the mid-November deadline.

*As such, we **STRONGLY** recommend that you check the expiration dates on all of your credentialing items every month and compare these to your credentialing deadlines. Plan ahead as there can be wait times for exams and delays in receiving lab results.*

**YOU WILL NOT BE ALLOWED TO START A ROTATION IF YOUR CREDENTIALING ITEMS ARE NOT UP TO DATE OR IF ANY CREDENTIALING ITEM WILL EXPIRE DURING THAT ROTATION.**

3. Send the Clinical Site Reminder Email (cc Education Clinical Coordinators) by the Reminder Email deadline OR **per site-specific guidelines listed in CORE**. This email is to politely remind them of your upcoming rotation as well as confirm you are cleared for your rotation. You MUST utilize the *Rotation Reminder Email Templat*e found in the *Credentialing 101* document in CORE. You should put the information from this template in the **body** of your email. This email gets sent to your main and any affiliated site(s).

   IF NOT PREVIOUSLY DISCLOSED TO YOU IN AN EMAIL, CREDENTIALING DOCUMENT OR VIA CORE INSTRUCTIONS, you may also use this email to inquire about your reporting time and location, as well as any other special instructions.

4. Make housing arrangements. All housing and transportation expenses are the student's responsibility. **It is the student's responsibility to procure housing if they are assigned to a distant rotation.**

## Additional Considerations in Preparation for Rotations:

1. Be prepared to provide all necessary clearance documents to the appropriate departments at your site (For example: immunizations, ACLS card, hospital credentialing documents, HIPAA certificate).
2. Review rotation syllabus and objectives. Syllabi will be housed within each Clinical Rotation course shell in Brightspace.
3. Review the clinical and technical skills and procedures for the clinical year and inform your preceptor of these at the beginning of the rotation, so that you may both look for opportunities to sign off the clinical passport.
4. Review discipline-specific history, physical exam, and skills BEFORE your first day of rotation. Example: Student should review sterile scrub/gowning/gloving procedures and suture techniques before starting the Surgery rotation.

*Disclaimer: Students are responsible for reviewing all the information regarding their future rotations to ensure the timely completion of any rotation-specific requirements. Failure to complete rotation specific requirements as instructed may result in a delayed start to the rotation or removal from the rotation. This may in turn delay the student's completion of the program and may result in additional tuition and/or fees.