



THE UNIVERSITY
OF ARIZONA

PHYSICIAN ASSISTANT

STUDENT HANDBOOK

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1. Welcome and Program Introduction

1.1 Welcome Message from the Program Director

Dear PA Students,

Welcome to the University of Arizona Physician Assistant (UAPA) Program! Whether you're just beginning your journey or are already deep into the rhythm of didactic life, we are so glad you're here.

You are now part of a dynamic, mission-driven program built on innovation, compassion, and connection. As Program Director, it's an honor to walk alongside you as you grow into the skilled, empathetic, and adaptable healthcare professionals the world needs.

Our Commitment to You

We've designed this program not just to teach medicine, but to nurture your growth as a whole person. From our **state-of-the-art clinical lab spaces** to our **Medical Spanish curriculum** rooted in cultural humility, every element of our curriculum is intentional and student focused. You'll be mentored by faculty who are both passionate educators and practicing clinicians, committed to your success in and beyond the classroom.

You'll also benefit from our partnerships with the **Arizona Simulation Technology and Education Center (ASTECC)** and the **Interprofessional Clinical and Professional Skills Center (ICAPS)**, collaborations that give you access to hands-on, team-based learning in some of the most advanced simulation environments in the country.

What Makes Us Unique

We know PA school is demanding, but it doesn't have to be joyless. At UAPA, we center **joy, wellness, and community** as essential ingredients of a successful education. You'll hear us talk about balance, boundaries, and mental health just as often as we talk about cardiac murmurs or antibiotic stewardship.

And at every step, our mission will guide us: to develop **skilled and compassionate physician assistants** who are ready to serve in **primary care and rural health** settings and meet the needs of diverse communities across Arizona and beyond.

Looking Ahead

As you move through this program, I encourage you to stay curious, lean into challenge, ask for help when needed, and celebrate your progress, no matter how small. You belong here, and we are thrilled to have you as part of our UAPA family.

Here's to a joyful and transformative journey ahead.

Warm regards,

MJ Ellis, MPAS, PA-C, DFAAPA

Program Director

Associate Clinical Professor

University of Arizona Physician Assistant Program

1.2 Land Acknowledgement

We respectfully acknowledge the University of Arizona is on the land and territories of Indigenous peoples. Today, Arizona is home to 22 federally recognized tribes, with Tucson being home to the O'odham and the Yaqui. The university strives to build sustainable relationships with sovereign Native Nations and Indigenous communities through education offerings, partnerships, and community service.

1.3 ARC Accreditation Statement (A3.12a)

The University of Arizona Physician Assistant Program has applied for Accreditation - Provisional from the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA). The University of Arizona PA Program anticipates matriculating its first class in August 2026, pending achieving Accreditation - Provisional status at the April 2026 ARC-PA meeting. Accreditation - Provisional is an accreditation status granted when the plans and resource allocation, if fully implemented as planned, of a proposed program that has not yet enrolled students appear to demonstrate the program's ability to meet the ARC-PA Standards or when a program holding accreditation-provisional status appears to demonstrate continued progress in complying with the Standards as it prepares for the graduation of the first class (cohort) of students.

Please note that the program will not commence in the event that the provisional accreditation is not received.

1.4 Program Description and Overview

The University of Arizona's 26-month Physician Assistant Program prepares graduates to provide person-centered care in primary and underserved rural settings. Our pass/fail, competency-based curriculum emphasizes student wellness, clinical excellence, and health equity.

Students complete three didactic semesters followed by a full year of clinical rotations across diverse communities. A required **Medical Spanish course**, taught in partnership with the Department of Spanish and Portuguese, supports culturally responsive care.

Learning is immersive and hands-on, supported by state-of-the-art simulation at **ASTE**C and interprofessional training through **ICaPS**. Graduates earn a **Master of Physician Assistant Practice (MPAP)** degree.

1.5 History of the Program

The University of Arizona Physician Assistant Program was established to increase access to high-quality healthcare education in southern Arizona and to address the state’s longstanding primary care workforce shortages.

This initiative emerged from the University’s 2019 strategic plan, which identified the need for expanded interprofessional education and targeted strategies to meet unmet health workforce needs—particularly in rural, tribal, border, and underserved urban communities. As part of this effort, the University of Arizona Center for Rural Health (AzCRH), which houses Arizona’s State Office of Rural Health, played a key role in identifying these gaps and informing the institutional decision to develop a UAPA Program.

Data from workforce reports and policy briefs—such as the *Physician Assistant Workforce Profile* (2019) and the *Primary Care Health Professional Shortage Area (PCHPSA) Brief*—demonstrated clear and persistent shortages in the primary care pipeline. These findings guided program development and continue to shape its mission and values today.

The UAPA Program is built on a foundation of academic excellence, service to community, and a commitment to expanding healthcare access across Arizona. As part of the Mel & Enid Zuckerman College of Public Health (MEZCOPH) School of Health Professions (SHP), the program aligns with broader University initiatives to grow the healthcare workforce and improve health outcomes across the state.

1.6 Geographically Distant Campuses (A3.12h)

The University of Arizona will not host a Physician Assistant Program at a geographically distant campus. As such, services and resources available to UAPA Program students will be located on the at the MEZCOPH on the main campus of the University of Arizona.

1.7 Campus/Building Information

The University of Arizona Physician Assistant Program is located in the **Health Sciences Innovation Building (HSIB)** on the University of Arizona’s Tucson campus:

Health Sciences Innovation Building (HSIB)
1670 E. Drachman Street
Tucson, AZ 85721

HSIB is a nine-story, 220,000-square-foot facility that houses cutting-edge educational spaces, including active learning classrooms, simulation labs, clinical skills labs, student study rooms, and dedicated PA faculty offices. The building also supports interprofessional collaboration and simulation-based education through partnerships with the **ASTEC** and the **ICAPS**.

Students also have access to academic, wellness, and administrative resources throughout the UArizona Health Sciences campus, all within walking distance of HSIB.

1.8 Program Contact Information

University of Arizona Physician Assistant Program

Mel & Enid College of Public Health, School of Health Professions

Health Sciences Innovation Building (HSIB)

1670 E. Drachman Street

Tucson, AZ 85721

✉ **General Email:** SHP-PA@email.arizona.edu

🌐 **Website:** [Physician Assistant Program | School of Health Professions](#)

For questions about admissions, curriculum, student support, or general program information, students are encouraged to contact the main office or reach out directly to their assigned faculty advisor.

2. Mission, Goals, and Competencies

2.1 Mission and Vision

Mission

To develop skilled and compassionate physician assistants with a strong focus on primary care and rural health. We are committed to fostering a learning environment that cultivates clinical and inclusive excellence, wellness, and community engagement, ensuring graduates are equipped to provide comprehensive and accessible health care services to all populations.

Vision

To be a national leader in physician assistant education, renowned for producing graduates who excel in delivering person-centered care in primary care and rural health settings. We aim to bridge health disparities in underserved communities by preparing compassionate practitioners who are adaptable, collaborative and dedicated to improving the well-being of those they serve.

2.2 Core Values

Core Values

- Advocacy
- Compassion
- Cultural Humility
- Excellence
- Integrity
- Joy
- Leadership
- Person-centered care
- Service
- Teamwork

2.3 Goals (A3.12b)

Goal 1: Promote a Culture of Wellness and Joy

Benchmark:

- Respondents will confirm in the Student Exit Survey (mean Likert scale > 4/5) that the Program consistently integrates and supports wellness practices in the curriculum to support their well-being
- Principal faculty, staff and students will annually confirm (mean Likert scale > 4/5) that the Program promotes a culture of wellness and joy

Goal 2: Achieve Academic and Clinical Excellence.

Benchmark:

- NCCPA PANCE first time pass rate will be at or above the national average
- 100% NCCPA PANCE ultimate pass rate for the respective cohort
- 85% of the respective cohort will pass the program's summative examination OSCE on their first attempt

Goals #3: Promote Community Engagement and Service.

Benchmark:

- 100% of students will participate in at least two community service projects throughout the duration of the Program as tracked by attendance
- Respondents will confirm in the Student Exit Survey (mean Likert scale > 4/5) that the Program promotes community engagement and service

2.4 Envisioned Future for our Physician Assistant Graduates

The overall envisioned future for our physician assistant graduates is one of profound impact and meaningful service. These graduates will be the cornerstone for improved health care access, better health outcomes and stronger community well-being in primary care and rural health settings. Through their dedication, compassion and expertise, they will embody the program's mission, vision, and values, contributing to a healthier and more equitable future for all. Our graduates will exemplify clinical excellence, cultural humility, joy in their work, and interprofessional collaboration while leading community engagements, advocacy, and emphasizing wellness and holistic person-centered care.

2.5 Program Defined Competencies (A3.12g)

- Demonstrate comprehensive knowledge of biomedical, clinical, and behavioral sciences essential to safe and effective patient care. (Medical Knowledge) PC1
- Perform essential clinical and technical skills to address the physical, mental, and overall well-being of patients. (Clinical and Technical Skills) PC2
- Apply clinical reasoning and problem-solving skills to improve patient outcomes. (Clinical Reasoning and Problem-Solving) PC3
- Demonstrate empathic, inclusive, and culturally responsive communication in patient engagement and interprofessional collaboration. (Interpersonal and Communication Skills) PC4
- Exhibit professional behaviors that reflect ethical practice, respect, and accountability consistent with the PA scope of practice. (Professional Behaviors) PC5

2.6 Oath of the PA Profession

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

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

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

3. Curriculum and Academic Policies

3.1 Curriculum Overview (A3.12d, A3.12e)

Our curriculum focuses on both intellectual and professional growth for future PAs. The curriculum starts with foundational studies in anatomy and physiology, progressing to clinical medicine, skills and advanced reasoning in a carefully sequenced trajectory. The curriculum structure comprises two didactic semesters during the Fall and Spring of Year 1, followed by a summer break, and culminating in a final didactic semester at the beginning of Year 2. Subsequently, students embark on their clinical education journey across a wide spectrum of settings encompassing rural, indigenous, and urban environments. This diverse exposure fosters a comprehensive skill set, leading to the conferral of a Master of Physician Assistant Practice (MPAP) degree.

3.2 Academic Calendar

Didactic Phase

- **Fall Semester**
Foundations in basic sciences, anatomy, physiology, introductory clinical skills and medical Spanish
- **Spring Semester**
Progression to clinical medicine, pharmacology, evidence-based practice and medical Spanish
- **Summer Break**
A scheduled academic break providing rest and renewal before the final didactic term
- **Fall Semester**
Final didactic courses focusing on advanced clinical reasoning, public health, preparation for clinical rotations and medical Spanish

Clinical Phase

- **Spring, Summer, and Fall**
Supervised Clinical Practice Experiences (SCPEs) begin and continue across a wide range of healthcare settings

3.3 Course Descriptions- Didactic Phase

Fall

PAP601 – Foundations in Medicine I (In-person; hybrid) is the first in a three-course series that covers basic core knowledge about established and evolving biomedical sciences as it relates to patient care including anatomy, physiology, and the genetic and molecular mechanisms of health and disease. Students will attend lecture and lab-based components that allow for examination of prosected human cadavers and digital content related to the various organ systems being covered

in PAP611. Course instructors will attempt to align content to the appropriate Clinical Medicine series for better sequencing and application of knowledge across all courses. The course is only offered in the Fall semester (3 credit hours).

PAP611 – Clinical Medicine I (In-person; hybrid) is the first in a three-course series (I-III) that covers instruction in pathophysiology, pharmacokinetics or pharmacodynamics, pharmacotherapeutics and pharmacology, diagnostic studies, and clinical medicine. The content is arranged into course modules. Each module covers a specific organ system or medicine topic, with corresponding pharmacotherapeutics instruction, and includes a set of modular objectives. The objectives are designed to guide the student through the information presented within that module, and help the student prepare for the end-of-module examination. The student, through a variety of mediums, such as lectures, cases, quizzes and activities, module wrap-up activities, and independent study/reading, will obtain this knowledge. Students are responsible for all information presented in lecture, covered in a case, and all pertinent information found in the assigned readings, guided by the learning objectives. The organ systems covered will change each semester to allow for appropriate depth and breadth across all systems in alignment with the Foundations in Medicine series. The course is only offered in the Fall semester (8 credit hours).

PAP621 – Clinical Skills I (In-person; hybrid) is the first in a three semester course series (CS I-III) that is designed to prepare the physician assistant student (PA-S) with the foundational knowledge, skills, and abilities to work in the clinical setting. It is described to offer content on basic clinical skills essential to medical practice. In this first course, students will learn how to take a focused and comprehensive history from patients with an emphasis on person-centered language and professionalism. The course is only offered in the Fall semester (2 credit hours).

PAP622 – Clinical Skills I Lab (In-person) is the first in a three semester lab series (CS Lab I-III) that is designed to provide experiences with basic clinical skills essential to medical practice. In this first course, students will practice completing focused and comprehensive history taking for patient care. The course is only offered in the Fall semester (1 credit hour).

PAP631 – PAs in Health Care (In-person; hybrid) provides the student with a historical perspective on the history of the PA profession including roles and responsibilities of various members of the health care team, the team approach to patient-centered care beyond the traditional physician-PA team approach, and other principles of interprofessional practice. Students will learn about the historical development of the profession, laws and regulations regarding professional practice and conduct, licensure, certification, and credentialing, policy issues that affect practice, and the role of professional organizations. The course is only offered in the Fall semester (1 credit hour).

PAP641 – PA Clinical Reasoning Workshop I (In-person; hybrid) is the first in a three-semester course series utilizing team-based learning that is designed to prepare the physician assistant student (PA-S) with the opportunity to learn and practice applying clinical reasoning and critical thinking skills to a wide variety of clinically relevant scenarios. Students will work through clinical cases in small and medium sized teams to process clinical reasoning skills related to clinical content being taught in other related courses (Clinical Medicine, Clinical Skills, Foundations in Medicine, etc). The course is only offered in the Fall semester (1 credit hour).

PAP651 – Evidence Based Medicine (In-person; hybrid) introduces the core concepts of evidence-based medicine, life-long learning, and clinical decision-making. These concepts include the interpretation of research results, the process of evidence-based medicine, and appropriate clinical reasoning based on an understanding of clinical epidemiology concepts. The course is only offered in the Fall semester (1 credit hour).

PAP661 – Medical Spanish I (In-person; hybrid) provides students with instruction on basic medical vocabulary, grammar, and conversational medical Spanish skills in preparation for the clinical clerkship experience, where many of the rotations are in Spanish-speaking communities. The course is only offered in the Fall semester (2 credit hours).

PAP662 – Medical Spanish I Workshop (In-person; hybrid) provides students with the opportunity to practice basic medical vocabulary, grammar, and conversational medical Spanish skills in preparation for the clinical clerkship experience, where many of the rotations are in Spanish-speaking communities. The course is only offered in the Fall semester (1 credit hour).

PA699 – Independent Study (In-person/hybrid) is an optional course for most students but may be required as a result of failure to demonstrate minimum program competencies in any other program required course. Students who fail to meet those passing standards may be offered an opportunity to remediate specific components of a course with faculty oversight. Students may not continue in the required program courses until successful remediation has been completed and will be dependent on Student Success Committee assignments (1 credit hour).

Spring

PAP602 – Foundations in Medicine II (In-person; hybrid) is the second in a three-course series that covers basic core knowledge about established and evolving biomedical science as it relates to patient care including anatomy, physiology, and the genetic and molecular mechanisms of health and disease. Students will attend lecture and lab-based components that allow for examination of prosected human cadavers and digital content related to the various organ systems being covered in PAP612. Course instructors will attempt to align content to the appropriate Clinical Medicine series for better sequencing and application of knowledge across all courses. The course is only offered in the Spring semester (3 credit hours).

PAP612 – Clinical Medicine II (In-person; hybrid) is the second in a three-course series (I-III) that covers instruction in pathophysiology, pharmacokinetics, pharmacodynamics, pharmacotherapeutics and pharmacology, diagnostic studies, and clinical medicine. The content is arranged into course modules. Each module covers a specific organ system or medicine topic, with corresponding pharmacotherapeutics instruction, and includes a set of modular objectives. The objectives are designed to guide the student through the information presented within that module, and help the student prepare for the end-of-module examination. The student, through a variety of mediums, such as lectures, cases, quizzes and activities, module wrap-up activities, and independent study/reading, will obtain this knowledge. Students are responsible for all information presented in lecture, covered in a case, and all pertinent information found in the assigned readings, guided by the learning objectives. The organ systems covered will change each semester to allow

for appropriate depth and breadth across all systems in alignment with the Foundations in Medicine series. The course is only offered in the Spring semester (8 credit hours).

PAP623 – Clinical Skills II (In-person; hybrid) is the second in a three semester course series (CS I-III) designed to prepare the physician assistant student (PA-S) with the foundational knowledge, skills, and abilities to work in the clinical setting. It is described as laboratory experiences with basic clinical skills essential to medical practice. In this course, students will learn how to conduct both focused and comprehensive physical examinations with an emphasis on person-centered language, trauma-informed technique, and professionalism. The course is only offered in the Spring semester (2 credit hours).

PAP624 – Clinical Skills II Lab (In-person) is the second in a three semester course series (CS Lab I-III) designed to prepare the physician assistant student (PA-S) with the foundational knowledge, skills, and abilities to work in the clinical setting. It is described as laboratory experiences with basic clinical skills essential to medical practice. In this course, students will practice physical examination techniques through the various organ systems of the human body. Students will become proficient in trauma-informed physical examinations. The course is only offered in the Spring semester (1 credit hour).

PAP632 – Ethics & Professionalism for PAs (In-person; hybrid) provides PA students with instruction on the principles and practice of medical ethics. Topics include risk factors and vulnerabilities that increase the risk of ethical violations, the basic tenets of patient rights and responsibilities, informed consent and capacity, principles of confidentiality, boundary ethics, dual loyalty, and ethical and legal implications of financial impropriety and fraud. Students will also receive instruction on professional conduct, provider impairment and burnout, whistleblower laws and strategies to mitigate unprofessional conduct witnessed by students and/or practicing PAs in their practice. Students will have group discussions on medical ethics cases, and they will review examples of breaches in professionalism by PAs in the United States. This course is only offered in the Spring semester (1 credit hour).

PAP642 – PA Clinical Reasoning Workshop II (In-person; hybrid) is the second in a three-semester course series utilizing team-based learning that is designed to prepare the physician assistant student (PA-S) with the opportunity to learn and practice applying critical thinking to a wide variety of clinically relevant scenarios. The course is only offered in the Spring semester (1 credit hour).

PAP652 – Health, Justice, & Society I (In-person; hybrid) introduces students to the relationship between health, justice, and society. Students will explore how social forces shape health behaviors and outcomes with particular focus on social determinants of health, cultural competency and humility, ethical principles, epidemiology, and patient safety. Students will receive instruction from a wide variety of perspectives to better understand the connections between socioeconomics, justice, and health. The course is only offered in the Spring semester (1 credit hour).

PAP663 – Medical Spanish II (In-person; hybrid) provides students with instruction on intermediate medical vocabulary, grammar, and conversational medical Spanish skills in

preparation for the clinical clerkship experience, where many of the rotations are in Spanish-speaking communities. The course is only offered in the Spring semester (2 credit hours).

PAP664 – Medical Spanish II Workshop (In-person; hybrid) provides students with the opportunity to practice intermediate medical vocabulary, grammar, and conversational medical Spanish skills in preparation for the clinical clerkship experience, where many of the rotations are in Spanish-speaking communities. The course is only offered in the Spring semester (1 credit hour).

PA699 – Independent Study (In-person/hybrid) is an optional course for most students but may be required as a result of failure to demonstrate minimum program competencies in any other program required course. Students who fail to meet those passing standards may be offered an opportunity to remediate specific components of a course with faculty oversight. Students may not continue in the required program courses until successful remediation has been completed and will be dependent on Student Success Committee assignments (1 credit hour).

Fall

PAP603 – Foundations in Medicine III (In-person; hybrid) is the first in a three-course series that covers basic core knowledge about established and evolving biomedical science as it relates to patient care including anatomy, physiology, and the genetic and molecular mechanisms of health and disease. Students will attend lecture and lab-based components that allow for examination of prosected human cadavers and digital content related to the various organ systems being covered in PAP613. Course instructors will attempt to align content to the appropriate Clinical Medicine series for better sequencing and application of knowledge across all courses. The course is only offered in the Fall semester (3 credit hours).

PAP613 – Clinical Medicine III (In-person; hybrid) is the third in a three-course series (I-III) that covers instruction in pathophysiology, pharmacokinetics, pharmacodynamics, pharmacotherapeutics and pharmacology, diagnostic studies, and clinical medicine. The content is arranged into course modules. Each module covers a specific organ system or medicine topic, with corresponding pharmacotherapeutics instruction, and includes a set of modular objectives. The objectives are designed to guide the student through the information presented within that module, and help the student prepare for the end-of-module examination. The student, through a variety of mediums, such as lectures, cases, quizzes and activities, module wrap-up activities, and independent study/reading, will obtain this knowledge. Students are responsible for all information presented in lecture, covered in a case, and all pertinent information found in the assigned readings, guided by the learning objectives. The organ systems covered will change each semester to allow for appropriate depth and breadth across all systems in alignment with the Foundations in Medicine series. The course is only offered in the Fall semester (8 credit hours).

PAP625 – Clinical Skills III (In-person; hybrid) is the third in a three semester course series (CS I-III) designed to prepare the physician assistant student (PA-S) with the foundational knowledge, skills, and abilities to work in the clinical setting. It is described as laboratory experiences with basic clinical skills essential to medical practice. In this third course, students will become proficient in a variety of clinical skills required for successful clinical practice. This includes

suturing, casting, splinting, bedside ultrasound, joint injections, sterile technique, and a variety of other skills. The course is only offered in the Fall semester (1 credit hour).

PAP626 – Clinical Skills III Lab (In-person) is the third in a three semester course series (CS Lab I-III) designed to prepare the physician assistant student (PA-S) with the foundational knowledge, skills, and abilities to work in the clinical setting. It is described as laboratory experiences with basic clinical skills essential to medical practice. In this third course, students will become proficient in a variety of clinical skills required for successful clinical practice. This includes suturing, casting, splinting, bedside ultrasound, joint injections, sterile technique, and a variety of other skills. The course is only offered in the Fall semester (1 credit hour).

PAP633 – Health Systems (In-person; hybrid) provides students with an exploration of current topics in health systems including medical care organizations, managed care, Medicaid and Medicare, and aspects of physician assistant practice including administration, financing, changing organizational settings, and workforce issues. Students will receive instruction on coding and billing, health care delivery systems, and health policy. They will also learn about the role of public health and their role in disease prevention, surveillance, reporting, and intervention, patient advocacy, and maintenance of population health. The course is only offered in the Fall semester (1 credit hour).

PAP643 – PA Clinical Reasoning Workshop III (In-person; hybrid) is the third in a three-semester course series utilizing team-based learning that is designed to prepare the physician assistant student (PA-S) with the opportunity to learn and practice applying critical thinking to a wide variety of clinically relevant scenarios. The course is only offered in the Fall semester (1 credit hour).

PAP653 – Health, Justice, & Society II (In-person; hybrid) continues to explore the relationship between health disparities, justice, and both individual and community health. Students will examine health disparities and outcomes in four areas: core medical sociological theories and models; the biology of stress; intersections of race, class, and gender for health; and an introduction to genetics and health disparities. Additional instruction will prepare students to care for patients with consideration to disability status or special health care needs, ethnicity and race, gender identity, religion and spirituality, and sexual orientation. The course is only offered in the Fall semester (1 credit hour).

PAP665 – Medical Spanish III (In-person; hybrid) provides students with instruction on advanced medical vocabulary, grammar, and conversational medical Spanish skills in preparation for the clinical clerkship experience, where many of the rotations are in Spanish-speaking communities. The course is only offered in the Fall semester (2 credit hours).

PAP667 – Medical Spanish III Workshop (In-person; hybrid) provides students with the opportunity to practice advanced medical vocabulary, grammar, and conversational medical Spanish skills in preparation for the clinical clerkship experience, where many of the rotations are in Spanish-speaking communities. The course is only offered in the Fall semester (1 credit hour).

PA699 – Independent Study (In-person/hybrid) is an optional course for most students but may be required as a result of failure to demonstrate minimum program competencies in any other program required course. Students who fail to meet those passing standards may be offered an opportunity to remediate specific components of a course with faculty oversight. Students may not continue in the required program courses until successful remediation has been completed and will be dependent on Student Success Committee assignments (1 credit hour).

3.4 Grading and Assessment (A3.13d, A3.15a–b)

Course grades will be determined by the following scale:

Letter Grade	Percentage
Pass	70-100%
Fail	Less than 70%

Course grades are numerical in nature and will add to a final percentage for the course based on weighted grades. Students must receive a 70% or higher to pass this course. Please note, that course grades are not rounded up (e.g. 69.8 is a failing course grade).

Our goal is to support each student’s mastery of essential knowledge and skills. In addition to achieving a passing score for the course, students must demonstrate successful achievement of all Student Learning Outcomes (SLOs) for the course. If a student does not fully meet one or more SLOs, they will be provided with a targeted learning enrichment activity designed to support their continued growth and ensure competence in those specific areas.

We are committed to helping students succeed, and learning enrichment is offered as an opportunity to reinforce learning. However, failure to meet course requirements or successfully complete assigned learning enrichment activities may result in a course failure and referral to the Student Success Committee for further review, guidance, and other action plans. (See 3.5 Academic Progression Policies for more information.)

The Program is responsible for preparing students to practice safely as members of the interprofessional medical team. The program has a responsibility to the student, the public, and the profession. The program maintains academic standards, competencies, and professional ethics that the student is expected to adhere to throughout the program. Failure to do so may result in disciplinary action.

3.5 Academic Progression (A3.15b)

Good Academic Standing

Students are considered in good academic standing if all the following are met:

- Pass all didactic and clinical courses
- Pass the End of Didactic Phase exam

- Pass of the end-of-curriculum summative practical assessment
- Pass of the end-of-curriculum summative examination
- Maintain acceptable academic standards, ethics, or professional behavior
- Maintain satisfactory academic progress

Early Indicators of Students at Risk of Not Progressing:

- **Failing course assessments**
- **Overall assessment score below 75%** on the end of didactic phase exam & the end of curriculum summative exam
- **Poor attendance**, including but not limited to unexcused absences from mandatory teaching or meetings.
- **Unprofessional behavior**, including but not limited to failing to communicate with faculty or preceptors, ignoring emails, displaying an adversarial attitude, failing to comply with policies as stated in the program's Student Handbook, or legal issues.

Grade Determination

- General requirement
 - Each syllabus will clearly state how the final grade will be determined, including identifying all summative assessments.
- Criteria for Course Pass or Fail
 - Pass
 - A course cumulative score equal to or greater than 70% (no rounding up will occur, i.e. 69.8% is a fail) must be achieved.
 - Satisfactory achievement of all course learning outcomes.
 - Fail
 - A course cumulative score of less than 70 percent (no rounding) is received

Option to Retake

Didactic

- In the event of a cumulative score of less than 70 percent at the end of a Foundations or Clinical Medicine course, students have the opportunity for a retake examination on a date stipulated by the Student Success Committee.

- The retake examination will consist of content in proportion to the full scope of material from the course assessments that received a score of less than 70 percent that led to the course failure.
- A cumulative score of 70 percent or greater (no rounding up) on the retake examination results in a passing grade for the course.
- A student is permitted to retake examinations for up to 2 courses over the course of the three didactic semesters.
- Should the student receive a score of less than 70 percent on the retake, the grade remains as a failure for the course (see Remediation policy).

Clinical

- In the event of a failed score, on the first attempt of a PAEA End-of-Rotation™ (EOR) exam (Fail equals less than -1.5 standard deviations below the national mean), students have the opportunity for a retake examination within a timeframe stipulated by the Student Success Committee.
- The retake examination will be a second EOR exam covering the same rotation setting materials (i.e. if failure was a Family Medicine EOR, the repeat exam is a Family Medicine EOR).
- A minimum score of Pass (Pass equals greater than -1.5 standard deviations or above from the national mean) must be achieved on the second EOR attempt, to result in a score of Pass for the EOR.
- Failure of a second EOR attempt within the same rotation results in a rotation failure (see Remediation policy).
- A student is permitted up to 2 EORs retakes, in different clinical rotations, during the clinical year. If both retakes have been used, any future failed first attempt of an EOR will equal a rotation failure (see Remediation policy).

Course Remediation Pass or Fail

- A student must achieve a cumulative score of 70 percent or greater (no rounding up) for the remediated course.
- Students who successfully complete the remediation process for a course failure will receive a final grade of "PAP111R" (remediated Pass) for the course.
- If a student achieves less than 70 percent (no rounding up) on the remediation, this will be considered a second course failure. (See Remediation policy)

Incomplete Grades

PA students whose academic work at the end of a course is incomplete may be given, at the course director's discretion, a grade of I (incomplete). An Incomplete Grade Agreement will be drafted, reviewed, and signed by the student and course director, issuing the incomplete, which will define the terms and timeline for completing the course and converting the I to a letter grade. Incomplete grades for which there is not a signed Incomplete Grade Agreement form will become failing grades two weeks after being issued. When the terms of an Incomplete Grade Agreement are not fulfilled, the incomplete grade will be converted to an F.

At-Risk Identification & Levels

Students may be identified as at-risk due to **academic, health, behavioral, or social concerns**. Criteria are tracked cumulatively across the curriculum.

At-Risk Level I (Low Risk) --Criteria (Any one of the following):

- Scoring less than 75% on one major unit assessments (MUAs)
- Receiving a “low pass” (70-75%) course score
- Below benchmark scores on one or more learning outcomes on the mid-point preceptor evaluation of student
- Scoring a low pass on end-of-rotation exam (between -1.5 to -1.0 SD below the mean)
- Repeated minor concerns related to attendance, or professional behavior, even if individual incidents do not meet Level II thresholds
- PACKRAT I & II <-1.0 STD from national mean

Actions Taken:

- **Notification:** The SSC Chair informs the student and their advisor via email of At-Risk Level I identification and action plan. *Student will not be required* to meet with the SSC for At-Risk Level I concerns.
- **Action Plan:** May include but not limited to:
 - Mandatory advisor meeting(s)
 - Any learning enrichment activity or assignments related to academic or professionalism concerns
 - Repeat or retake of an examination or assessment
 - Referral to Academic and Student Affairs or tutoring for additional support
- **Standing:** The student remains in Good Academic Standing but is monitored for further issues.

- **Documentation:** The completed action plan is stored in the student's file and shared with their advisor, PD, and DODE or DOCE respectively.

At-Risk Level II (High Risk)

Escalation to Level II:

A student moves to Level II if they meet any of the following:

- Repeatedly identified as Level I (e.g., multiple MUAs between 70-75% or multiple minor concerns in different courses/rotations).
- Failure to engage with advisor meetings or recommended support strategies.
- Signs of worsening performance, including additional exam failures, attendance issues, or behavioral concerns.

At-Risk Level II (High Risk) --Criteria (Any one of the following):

- Scoring less than 75% on two or more major unit assessments (MUAs) at any time during the program
- Receiving two or more "low pass" (70-75%) course scores across different courses
- Two or more low pass end-of-rotation exam scores (<1.0-1.5 SD from national mean)
- Receiving below benchmark score on one or more learning outcomes on the end-of-rotation preceptor evaluation
- Failing a course
- Failing a remediation plan
- Failing a component of the Summative Exam
- Meeting multiple and continued early risk indicators (e.g., poor attendance, professional misconduct, academic deficiencies)
- Failing a component of the End of Didactic Phase Exam

Actions Taken:

- **Notification:** The SSC Chair informs the student and their advisor via email.
- **Mandatory SSC Meeting:** The student must meet with the SSC (in person or virtually) to discuss challenges, prior interventions, and required steps for improvement.

- **Formal Action Plan:** The SSC Chair drafts a summary of the meeting and a required action plan, which is:
 - Sent to the student, their advisor, PD, and DoDE or DoCE respectively
 - Stored in the student's record

- **Standing:** Student remains in good academic standing unless they have met one of the indicators as outlined in Academic Probation language.

- **Follow-Up & Compliance:** The student must complete the action plan within the specified timeframe and meet regularly with their advisor to track progress.

- **Potential Consequences:** Failure to comply with the action plan may result in **further review by the SSC**, which could lead to academic probation, additional remediation, or other interventions.

3.6 Remediation (A3.15c)

Purpose: This policy supports the academic, clinical, and professional success of all students by providing structured remediation for those who demonstrate deficiencies. The goal is to ensure all students meet the competencies and standards required for graduation and PA professional practice.

Scope: This policy applies to all students enrolled in the UAPA Program, including those in the didactic and clinical phases.

Step-by-Step Remediation Process

Step 1: Identification of Deficiencies; Academic, Clinical and Professional Deficiencies:

- A student is identified for remediation if they:
 - Fail a course, or

 - Exhibit unsatisfactory professional behavior (see Grading Progression Policy and Professionalism and Integrity Policy)

Step 2: Initial Student Notification

- The Student Success Committee (SSC) chair formally notifies the student of the deficiency, including the date, source, and nature of the issue.

Step 3: Development of a Remediation Plan

- An individualized plan of improvement is created by the SSC with input from the student and other instructors/faculty as appropriate to the identified deficiency.

- The remediation plan includes:
 - **Remediation director:**
 - *Academic/Clinical:* The faculty of record for the remediation will be the Course Director or their designee.

- *Professionalism*: The student’s advisor will lead the remediation and confer with other faculty or clinical instructors as needed.
- **Remediation Objectives**: Targets specific academic, clinical learning outcomes, or professionalism competencies not achieved.
- **Remediation Activities**:
 - *Academic/Clinical*: Tutoring, additional assignments, skills workshops, repeated rotations.
 - *Professionalism*: Reflective writing, professionalism workshops, mentorship, or behavioral contracts outlining specific behavioral expectations and consequences for non-compliance.
- **Assessment Methods**: Defined measures such as multiple-choice exams, OSCEs, preceptor evaluations, or professionalism assessments.
- **Student Responsibilities**: The student must actively engage in all activities; schedule required meetings and utilize recommended resources.
- **Timeline**: Clearly defined deadlines, typically within the current term or rotation, extended timelines may delay progression or graduation.

Step 4: Implementation and Monitoring

- The student engages in remediation activities under the supervision of the assigned remediation director.
- Regular check-ins ensure progress, and adjustments may be made as needed.
- Faculty will specify a minimum number of required check-ins to monitor progress and provide support.

Step 5: Reassessment and Evaluation

- Upon completion of remediation activities, students undergo reassessment using designated evaluation methods, which may include but are not limited to:
 - *Academic*: Exams, essays, OSCEs.
 - *Clinical*: Faculty evaluations, direct observation, repeated clinical experiences.
 - *Professionalism*: Peer/faculty feedback, contract compliance, observed behavioral changes.
- Students must meet the program’s standard for passing (score of Pass).

Step 6: Outcome Determination

- **Successful Remediation:** The student meets competency expectations and progresses within the program.
- **Failure to Remediate:** If deficiencies persist, the Student Success Committee will review the case and determine appropriate action, which may include:
 - Additional remediation (if feasible and warranted)
 - Deceleration (see Deceleration language)
 - Dismissal from the program
- **Threshold for Failure to Remediate:** If a student fails remediation twice in the same domain (academic, clinical, or professionalism), dismissal will be considered unless extraordinary circumstances justify additional attempts.

Step 7: Documentation and Reporting

- All remediation activities, progress reports, and outcomes are documented in the student's academic record.
- Reports are submitted to the Program Director and relevant faculty members.
- Professionalism outcomes will be monitored over time for sustained compliance.

Appeal Process

- Students may appeal within two (2) business days of being notified of the remediation outcome.
- Appeals are only based on specific grounds of procedural errors, documented extenuating circumstances, or new evidence.
- Appeals are reviewed by the Program Director.

3.7 Degree Progression, Completion and Graduation Requirements (A3.15b)

Degree Progression Policy

Progression and continuance in the program are based on academic achievement, professional performance and the ability to meet all requirements of the UAPA program. The program-specific standards are rigorous due to the responsibilities and professional conduct expected from healthcare providers in society.

All students must achieve:

- Successful completion of all didactic and clinical courses with a grade of ‘Pass’ (see grade scale below) or fulfillment of all remediation requirements.
- Be in good academic and professional standing.

If students receive a course grade below ‘Pass,’ they must complete the program’s remediation assessment. Please see the remediation policy (A3.15d). Students who fall below the minimum standards of progress are subject to the following actions: academic probation, deceleration or dismissal from the program.

Degree Completion and Graduation

Students will be awarded the Master of Physician Assistant Practice degree if they satisfactorily complete of all program student learning outcomes and graduate competencies:

- Satisfactory completion of all didactic and clinical courses with a score of ‘Pass,’ within five (5) consecutive years of commencing the program.
- Satisfactory completion of the end-of-didactic summative written exam and OSCE, at the end of the didactic phase of the curriculum
- Satisfactory completion of the end-of-curriculum examination administered in the last four months of the program of study.
- Satisfactory completion of the end-of-curriculum summative practical assessment administered in the last four months of the program.
- Satisfactory completion of the Capstone project.
- Remain in good academic and professional standing.

3.8 Academic Probation (A3.15c)

Academic Probation

Students will be placed on academic probation by the SSC for any of the following reasons:

- Failure of a didactic or clinical course
- Failure of the retake of the End of Didactic Phase exams
- Failure of the retake of the end-of-curriculum summative practical assessment
- Failure of the retake of the end-of-curriculum summative examination
- Failing to maintain acceptable academic standards, ethics, or professional behavior

- Failing to complete all mandated remediation activities within the stated time frame
- Failing to maintain satisfactory academic progress

While on probation:

- Students are required to meet regularly with their Faculty Advisor (A2.05e)
- A student may not serve in elected or leadership positions within student government or student groups
- A student's selective rotation may be changed to support the student's academic progress
- SSC may require additional requirements
- SSC will monitor a student's probation status

When students are placed on academic probation, a written notification from the SSC will specify:

- The reason(s) for academic probation
- The requirements for restoration of good standing, and
- The prescribed methods for completing those requirements

Probation Appeals

A student placed on probation may appeal to the Program Director for reconsideration. A written, signed request setting forth the student's position must be submitted within 10 calendar days of official notification of probation. It is the sole discretion of the Program Director to reverse, uphold, or modify the terms of the academic probation. The Program Director will notify the student and the Student Success Committee of the decision within 10 calendar days of receiving the request for reconsideration. Students will remain on probation pending reconsideration by the Program Director. The Program Director decision is final and cannot be appealed. A copy of the notice of probation will be placed in the student's file that is stored in house and not a part of a student's permanent academic record.

Removal from Academic Probation

When students are placed on academic probation, a written notification from the Student Success Committee will specify:

- The reason(s) for academic probation
- The requirements for restoration of good standing, and
- The prescribed methods for completing those requirements

At the end of the semester, students will be reviewed for successful completion of the requirements for restoration of good standing.

3.9 Withdrawal and Dismissal (A3.15d)

Withdrawal

Withdrawal from the UAPA Program should only be considered after a careful and thorough assessment of the academic, financial and personal implications. Students are strongly encouraged to consult with appropriate program and university representatives prior to making this decision.

Once an official withdrawal request is submitted, the student is required to complete exit interviews with both the School of Health Professions (SHP) Financial Aid Office and the Registrar's Office. Documentation of these meetings and related advisement will be recorded in the student's contact management file.

Students may voluntarily withdraw from the program at their discretion and at any time; however, unless a Leave of Absence is formally requested and approved (see LOA policy), any course withdrawal constitutes a full withdrawal from the program. The University of Arizona PA Program does not offer "partial withdrawal" or part-time enrollment status.

To initiate official withdrawal from the program, the following steps must be completed:

- Submit a written withdrawal letter to both the Program Director and the SHP Student Affairs Office.
- Schedule and complete exit interviews with the SHP Financial Aid Office and the Registrar's Office.

Dismissal

Students dismissed from the program for academic or conduct-related reasons will receive written notification sent to their official arizona.edu email address. This notification will include information regarding their right to appeal the decision in accordance with the SHP's student grievance and appeal process. Appeals must be submitted to the office of student and academic affairs within 10 business days of receiving the dismissal notice. (See Student Grievance Policy for additional details.)

Academic Dismissal

A student is subject to academic dismissal if they meet any of the following:

- Failing three courses across the program.
- Unsatisfactorily progression through the curriculum.
- Failure to meet academic or programmatic requirements.
- In ability to complete all requirements for the Master of Physician Assistant Practice degree within five years.

Conduct Dismissal

A student who meets any of the following conditions may be subject to conduct dismissal from the UAPA program:

- Violations of the program's professionalism and integrity policy.
- Unprofessional behavior during extracurricular activities or interactions.
- Violations of clinical site policies, including HIPAA.
- Violations of the Arizona Board of Regents Student Code of Conduct (ABOR Policy 5-308).

ABOR: <https://public.powerdms.com/ABOR/documents/1491970>

UA Dean of Students: <https://deanofstudents.arizona.edu/policies/code-academic-integrity>

3.10 Deceleration and Re-entry (A3.15c)

Deceleration

The UAPA Program is committed to supporting student success while upholding the high standards necessary for professional PA practice. Our mission is to prepare students to provide evidence-based, person-centered care with professionalism, compassion, and excellence, particularly to rural and underserved communities.

To meet this mission, all students must demonstrate competency in both academic and clinical settings. We recognize that significant personal or academic challenges may arise during the course of training.

Deceleration is a structured process that allows a student to temporarily step out of their original cohort and follow an adjusted program timeline. This option may be considered when serious circumstances interfere with a student's ability to progress.

The purpose of this policy is to offer a pathway for recovery and continued success, while preserving the integrity of the curriculum, clinical preparation, and professional expectations required for graduation and entry into PA practice.

Definition

Deceleration refers to a student who is still enrolled in the program but is no longer progressing with their original cohort. Their education is delayed or interrupted, causing them to fall off the expected timeline for completion.

Eligibility for Deceleration

- Deceleration may be considered under limited circumstances, such as:
- Significant medical or personal challenges that impede academic progress.

- Students miss more than 5 days in a term.
- Academic deficiencies following unsuccessful remediation (i.e. failing a remediation plan or the same course twice), as determined by the SSC.

Procedure for Deceleration

- If offered deceleration, the student has two business days from the time the offer is made to submit their decision via email to the Program Director. This is a one-time opportunity and will not be extended. The program director will review:
 - Academic history
 - Personal circumstances with supporting documentation
 - Recommendations from the SSC
- If approved, the SSC will develop a revised program plan for the student and the Program Director will review the plan with the student.

Restrictions on Deceleration

- Students may only decelerate once during the program unless there are extenuating circumstances, which the Program Director and Vice Dean will handle on a case-by-case basis.
- Students who fail to meet the requirements of the revised plan will be dismissed from the program.
- Deceleration is not an automatic option and is granted only after a thorough review.
- Deceleration is not to exceed 24 consecutive months

Re-entry Into the Program

Interruptions in the educational process can hinder a student's ability to retain and apply program competencies. To be reinstated, the student must be prepared to demonstrate proficiency in the knowledge and skills from all courses completed prior to academic separation, even if those courses were previously passed.

While the criteria for re-entry into the program will be individualized to each student's circumstance, students are advised that, at a minimum, the following re-entry requirements will apply:

- A comprehensive competency evaluation covering all material up to the point of program separation.
- Competency must be demonstrated with the following assessments:
 - #1. A multiple-choice question exam
 - #2. A clinical and technical skills assessment

The program reserves the right to require additional assessments for return depending upon a student's individual circumstances.

- Students must demonstrate competency with a minimum grade of Pass on the multiple-choice question exam AND the clinical and technical skills assessment.

- These competency evaluations must be completed prior to the anticipated re-entry date for the program and at a time arranged by the program.
- Upon successful completion of each assessment the student will reenter at the beginning of the term as defined in their approval letter.
- For students who have failed a course, this re-entry point must be in the term that the failed course is offered. The failed course must be successfully repeated with a minimum grade of Pass to progress in the program. In addition, the student may be required to audit courses that are offered in the semester that the failed course is offered even if those courses were previously completed successfully. While auditing, the student must meet all course requirements including attendance, assessments, assignments, exams, quizzes, readings, class participation, or any other activities assigned by the faculty member. The student is responsible for the full cost. The SSC may also elect to allow the student to re-enroll in courses previously completed according to the student's individualized academic plan.
- Once the competency evaluations are complete, the SSC is responsible for recommending re-entry to the Program Director based upon a student's satisfactory completion of reentry requirements.
- Failure to successfully complete assigned reentry requirements will result in academic dismissal from the PA program.

Limitations on the Number of Decelerated Students

The UAPA Program is committed to maintaining a high-quality educational experience by ensuring adequate resources, faculty availability, and clinical placement opportunities for all students. To support this commitment, the Program will not exceed the maximum class size approved by the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA). As such, deceleration options may be limited or unavailable at any given time. Requests for deceleration are evaluated on a case-by-case basis and are granted at the discretion of the Program based on available resources, current enrollment, and the ability to meet accreditation standards.

3.11 Grade Appeals and Disputes (A3.15g)

If a student believes an error has been made regarding a failing grade on a major unit or assessment or course, the student should contact the course director within 10 business days of the grade being posted to set up a meeting (in-person or virtual) to discuss the grade. It is the student's responsibility to demonstrate that the appeal has merit; therefore, the student should bring to the meeting with the course director any evidence that the grade was assigned incorrectly.

At the meeting, the course director will:

- Review the evidence the student has submitted

- Discuss student's appeal with the content instructor or preceptor, if applicable
- Present any of the student's work that remains in the Course Director's possession (e.g., papers, examinations, etc.)
- Explain how the student's grade was determined based on the guidelines presented at the beginning of the course and in the course syllabus
- Recalculate the numerical computation of the grade to determine if there has been a clerical error

If a resolution is not met, the student should submit their grievance in writing to the SSC chair within three (3) business days of receiving the course director's final response. The grievance will be reviewed by the SSC and the Director of Clinical Education (DOCE) or Director of Didactic Education (DODE), and the student will receive a written response within seven (7) business days.

If a resolution is not met, the student should submit their grievance in writing to the program director within three (3) business days. The grievance will be reviewed, and the student will receive a written response within seven (7) business days. The decision from the Program Director is final and not subject to appeal.

4. Clinical Education

4.1 Supervised Clinical Practice Experience (SCPE) Overview

The clinical phase of the University of Arizona Physician Assistant Program offers immersive, hands-on training through a variety of core rotations designed to provide students with comprehensive exposure to the healthcare field. Under the guidance of experienced preceptors, students apply their knowledge while gaining proficiency in diagnosing and managing patient care across the lifespan and in diverse clinical settings.

Each rotation is five (5) weeks, except for the Family Medicine rotation, which is 10 weeks. This critical phase of the curriculum fosters the development of clinical skills, professional competency, and confidence, ensuring graduates are well-prepared to excel in their roles as compassionate and capable healthcare providers.

All policies outlined in this Student Handbook also apply during the clinical phase.

4.2 Clinical Phase (B3.03, B3.04, B3.07)

The UAPA Program has developed guidelines to ensure documentation of students' exposure to the settings, encounter types, and patient populations necessary for entry into clinical practice. These guidelines encompass the following categories:

- **Encounter Type:** Preventive Care, Emergent Care, Acute Care, Chronic Care
- **Lifespan Care:** Infants (0-12 months), Children (1-11y), Adolescents (12-17y), Adults (18-64y), Elderly (65+)
- **Women's Health:** Prenatal Care, Gynecologic Care
- **Surgical Management:** Pre-Operative Care, Intraoperative Care, Post-Operative Care
- **Practice Setting:** Outpatient, Inpatient, Emergency Department, Operating Room
- **Behavioral and Mental Health Care:** Behavioral Modification, Mental Health Conditions

Students' clinical patient exposure data is tracked using the learning management system. Students' progress is formally reviewed at the midpoint and end of each clinical rotation

4.3 Clinical Course Descriptions

Core Clinical Rotations:

PAP681 – Emergency Medicine (In-person) is a five-week required clinical rotation for second year PA students which focuses on the role of the PA student in the emergency department setting. Students will work under the supervision of a Program determined licensed healthcare professional or their designee(s). The student will actively engage in applying the medical knowledge and clinical skills gained during the didactic year, along with continuing to develop clinical reasoning

through evidence- based approaches to the evaluation and management of acute, urgent, and emergent problems commonly encountered in emergency medicine across the life span. This course is assigned during the clinical phase of the PA program (5 credit hours).

PAP682 – Family Medicine for PAs (In-person) is a ten-week required clinical rotation for second year PA students that focuses on the role of the physician assistant in family medicine. Students will work under the supervision of a Program determined licensed healthcare professional or their designee(s). The student will actively engage in applying medical knowledge gained during the didactic year, demonstrating and continuing development of clinical reasoning and communication skills to the evaluation and management of acute, urgent, and chronic problems encountered in the outpatient family medicine settings to include pediatric, adult, and geriatric patients. Students will also work to incorporate health promotion, disease prevention, patient education and counseling in their patient encounters. This course is assigned during the clinical phase of the PA program (10 credit hours).

PAP683 – Internal Medicine for PAs (In-person) is a five-week required clinical rotation for second year PA students which focuses on the role of the physician assistant in a hospital-based inpatient setting. Students will work under the supervision of a Program determined licensed healthcare professional or their designee(s). The student will actively engage in applying the medical knowledge and clinical skills gained during the didactic year, along with continuing to develop clinical reasoning through evidence-based approaches to the evaluation and management of acute, chronic, emergent, and life-threatening problems commonly encountered in the inpatient settings. Students will also work to incorporate health promotion, disease prevention, patient education and counseling in their patient encounters. This course is assigned during the clinical phase of the PA program (5 credit hours).

PAP685 – Pediatrics for PAs (In-person) is a five-week required clinical rotation for second year PA students which focuses on the role of the physician assistant in an outpatient pediatric setting. Students will work under the supervision of a Program determined licensed healthcare professional or their designee(s). The student will actively engage in applying the medical knowledge and clinical skills gained during the didactic year, along with continuing to develop clinical reasoning through evidence- based approaches to the evaluation and management of common, acute, chronic, and emergent problems commonly encountered in the newborn, child, and adolescent patient population. Students will also work to incorporate health promotion, disease prevention, patient education and counseling in their patient encounters. This course is assigned during the clinical phase of the PA program (5 credit hours).

PAP686 – Surgery for PAs (In-person) is a five-week required clinical rotation for second year PA students which focuses on care of the surgical patient and the role of the physician assistant on a surgical patient management team. Students will work under the supervision of a Program determined licensed healthcare professional or their designee(s). The student will actively engage in applying the medical knowledge and clinical skills gained during the didactic year, along with continuing to develop clinical reasoning through evidence-based approaches to the evaluation and management of problems commonly encountered in both the inpatient and outpatient surgical setting. In addition, students will work toward expanding their knowledge of surgical care as well

as their surgical skills through active participation and engagement as part of the surgical team. This course is assigned during the clinical phase of the PA program (5 credit hours).

PAP687 – Behavioral Health (In-person) is a five-week required clinical rotation for second year PA students which focuses on the role of the physician assistant in providing behavioral and mental health care. Students will work under the supervision of a Program determined licensed healthcare professional or their designee(s). The student will actively engage in applying medical knowledge and clinical skills gained during the didactic year, along with continuing to develop clinical reasoning through evidence-based approaches to the evaluation and management of common behavioral and psychiatric problems and issues encountered in behavioral health settings. This course is assigned during the clinical phase of the PA program (5 credit hours).

PAP688 – Women’s Health for PAs (In-person) is a five-week required clinical rotation for second year PA students which focuses on the role of the physician assistant in a women’s health setting. Students will work under the supervision of a Program determined licensed healthcare professional or their designee(s). The student will actively engage in applying the medical knowledge and clinical skills gained during the didactic year, along with continuing to develop clinical reasoning through evidence-based approaches to the evaluation and management of common medical problems and issues encountered in women’s health in an outpatient setting. Students will also work to incorporate health promotion and disease prevention as well as advocacy for healthy lifestyles, preventive medicine practices and patient support. This course is assigned during the clinical phase of the PA program (5 credit hours).

PAP689 – Selective for PAs (In-person) is a five-week required clinical rotation for second year PA students which focuses on the role of the physician assistant in providing primary care in a primary care specialty (family and internal medicine, gerontology, or pediatrics). Students will work under the supervision of a Program determined licensed healthcare professional or their designee(s). The student will actively engage in applying medical knowledge and clinical skills gained during the didactic year, along with continuing to develop clinical reasoning through evidence-based approaches to the evaluation and management of common primary care problems. Students will follow specific instructional objectives based on the selective rotation assigned. This course is assigned during the clinical phase of the PA program (5 credit hours).

Students will also explore personal clinical interests through ‘selective’ rotation experiences. Selective rotations are elective specialties that have been pre-approved by the UAPA program to support our mission. All selectives must be approved for each student on an individual basis.

In addition to clinical rotations courses students will participate in two additional courses during their clinical year:

PAP698-PA Directed Research (Capstone)– (In-person) is a required course for second year PA students which focuses on incorporating didactic content with a directed research master capstone project focused on community health. Students will work under the supervision of a Program determined licensed healthcare professional or their designee(s). This includes a required needs

assessment, subsequent implementation of a project focused on the previously determined need(s), and analysis of the impact. This is completed during the clinical phase of the curriculum with a dedicated period for project completion. (2 credit hours)

PAP690-Transition to Practice– (In-person) is a required course for second year PA students which focuses on the transition to clinical practice including licensure updates, credentialing, board certification review, and a required summative examination for the end of curriculum. Students will be on campus for one week to complete required coursework and examinations in preparation for the transition to clinical practice following commencement. (1 credit hour)

If need for remediation is determined during the didactic or clinical year, and this remediation may not be achieved within the normal class structure a student may be required to enroll in Independent Study:

PAP699-Independent Study– (In-person/hybrid) is an optional course for most students but may be required as a result of failure to demonstrate minimum program competencies in any other program required course. Students who fail to meet those passing standards may be offered an opportunity to remediate specific components of a course with faculty oversight. Students may not continue in the required program courses until successful remediation has been completed and will be dependent on Student Success Committee assignments. (1 credit hour)

4.4 Selective Rotations Preferences

By the end of the second didactic semester, students will meet with their faculty advisor and submit their top three preferences for selective rotations. Students who do not provide preferences will have their rotation selected at the discretion of the faculty. The clinical team will try to accommodate requests for specific clinical sites and specialties, however these requests are not guaranteed. The clinical team has developed a pre-approved list of selective rotation options from which students may choose. If a student is interested in pursuing a rotation outside of these options, the student's faculty advisor should be notified as soon as possible, but must be notified no later than the end of the second semester.

4.5 Clinical Sites and Preceptor Solicitation (A3.03)

Securing clinical sites or preceptors is not a requirement of the UAPA Program. The program abides by the *Standard A3.03 of the ARC-PA*, which states prospective and enrolled students must not be required to provide or solicit clinical sites or preceptors.

4.6 Student identification (A3.06)

In all clinical rotation settings, when a student is providing care for a patient or in a patient care setting, the student must be clearly identified as a Physician Assistant Student. Proper program issued identification badges bearing the student's name identifying them as a "Physician Assistant Student" must be worn at all times in the clinical setting, on the outer garment and in plain view, visible to all. Students must introduce themselves to every patient using their first and last name,

and the term “PA student.” Example: “Hello, my name is PA student Jane Doe.” At no time should a student, either by virtue of their skills or knowledge attained while progressing through the Program, misrepresent their role as being other than a physician assistant student. Students should refrain from using previously earned titles while matriculating in and representing the PA program. Failure to adhere to this policy may result in an incident report.

4.7 Dress Code

Student appearance and conduct should reflect the professionalism and dignity of the medical profession. PA students are expected to dress in a way that is respectful to faculty, classmates, patients, and colleagues in clinical and academic settings. The Program has the authority to establish and enforce dress code expectations.

Dress codes at clinical sites may differ from Program guidelines. If a site’s dress culture differs from the policies outlined below, students should consult with the clinical preceptor and the Director of Clinical Education to determine appropriate attire.

The PA program is committed to upholding a professional appearance while remaining mindful of cultural, religious, and individual expression. Student safety and patient comfort are also important considerations.

- Students must be professionally dressed for patient encounters, standardized patient interactions, presentations representing the Program, and when visiting clinical sites—unless instructed otherwise.
- Students should follow their clinical site’s dress code, which may differ from the Program policy.
- **Professional dress** includes slacks, dress shirts, dresses, and skirts. Skirts and dresses should reach the knees to allow for clinical movement. Necklines should be modest. Clothing, accessories, and hairstyles should not interfere with patient interactions or examinations.
- Jeans, leggings, and cargo pants are not considered professional attire. Scrubs may be appropriate for specific rotations.
- Shoes must comply with OSHA safety standards (closed-toed and covering the entire foot).
- Nails should be short and clean.
- Excellent personal hygiene is expected. Scents that may disrupt clinical or learning environments (e.g., perfumes, colognes, scented lotions, body sprays, tobacco smoke) should be avoided.
- Clean, unstained white coats should be worn when requested during clinical activities
- Program name tags must be worn at all times while in professional dress on the University campus.
- Cultural or ethnic dress modifications that maintain safety and professionalism are fully supported and welcomed.

4.8 Mid-Rotation and End of Rotation Preceptor Evaluations of Students

Preceptors will provide a formative midpoint and summative end of rotation evaluation of each student. Evaluations will be completed electronically and reviewed by the clinical team within three (3) business days of receipt. It is the student’s responsibility to remind the preceptor of these

deadlines and ensure the evaluation is completed. See course syllabus for grading information. Below benchmark scores (less than three (3)) in any learning outcomes on the midpoint or final preceptor evaluation of students will result in At-Risk identification (see Grading and Progression language section 3 of this handbook) which will result in a referral to the Student Success Committee. The student will be placed in the At-Risk Level 1 as per our Academic Progression and Remediation policy.

4.9 Student Evaluations of Preceptor and Clinical Site

Students will be expected to complete a Preceptor and Site Evaluation by the end of the rotation week (Friday). These evaluations are critical in allowing the clinical team to monitor clinical sites and ensure the best experiences for our students. Evaluations will be reviewed by the clinical team after each rotation, and trends will be reviewed by the faculty annually. Timely submission of these evaluations is required to receive full credit for professionalism & participation in each clinical rotation (10% of final grade).

Student evaluation of the site and preceptor is formal feedback from the student regarding the SCPE preceptors and site. The program considers this information when evaluating each of the program rotation sites. Constructive and professional feedback is valuable information to the PA program to allow for continued high quality educational experiences.

4.10 Clinical Formative Assessments (B4.01)

The Clinical Team will continue to communicate with students throughout the clinical phase electronically to monitor their progress and address any issues that may arise. Additionally, the Clinical Team or designated faculty will conduct student formative evaluations throughout the clinical phase. Student formative evaluations will be pre-scheduled and conducted in person. In the event that the student cannot be located, they will be considered absent and in violation of the attendance policy (see Attendance Policy in section 7). At the student formative evaluation, the student must be prepared to present a patient case including relevant history, exam findings/technique, diagnostic studies, differential diagnosis, final diagnosis and patient education. Students will be evaluated on oral presentation skills, critical thinking and clinical reasoning.

The purpose of the visit is: (1) to continually assess the clinical site to make sure the site is prepared for students, and is an appropriate learning environment; (2) to allow faculty to observe the student in the clinical setting and complete a formative assessment of the student, and observe the interaction between students and preceptors; (3) and to address any concerns that may arise during a SCPE.

4.11 Call-back Days

During the clinical phase PA students can expect structured academic and professional activities during call-back days, which typically occur between rotations throughout the clinical phase. The purpose of call back days is to evaluate a student's progress during the clinical year. Scheduled activities may include but are not limited to: submission of assignments and other required paperwork, end-of-rotation exams, clinical skills assessments, OSCEs, Standardized Patient

Encounters, PACKRAT II, lectures on topics relevant to PA practice, professional development lectures, administrative topics, case presentations, and summative evaluation assessments.

Key Considerations:

- Frequency: Call-back dates occur every 10 weeks, starting in March of the clinical phase.
- Duration: three (3) days per return.
- Logistics: Students must plan for travel, housing, and schedule adjustments, as rotations may be distant from campus. Ensure to bring fully charged personal electronic device with up-to-date Learning Management System software. Familiarize yourself with instructions for preparation for all assessments.
- Attendance is mandatory.

4.12 Preceptor and Clinical Site Concerns

Concerns regarding preceptors or sites brought to the attention of the clinical team will be investigated promptly and a clinical site visit will be arranged. Each site visit conducted by the clinical team will re-assess the preceptor's ability to provide a SCPE sufficient for meeting the course learning outcomes in a safe environment. Whenever possible this will be completed within one (1) week of the date the concern is reported, pending preceptor/ site availability. No additional students will be placed at the site until the visit is complete, and the site has been deemed capable of meeting the course learning outcomes.

The Program is committed to ensuring your clinical learning environment is safe, supportive, and aligned with Program expectations. Students who have concerns about preceptor or clinical site, should report them promptly to the clinical team or any member of the Program. Once a concern is raised, the clinical team will investigate the issue and, when necessary, arrange a site visit to reassess whether the preceptor and site can provide a safe and effective SCPE that meets the course learning outcomes. When deemed necessary, the clinical team will reassign a student to a new rotation site to ensure that students continue to receive appropriate clinical education and meet their course learning outcomes. Students will be kept informed of the next steps, and the original site must be approved by the program before any future student placements continue there.

4.13 Student SCPE Clinic Hours

During the SCPE student clinic hours should reflect that of their preceptor. Students should notify Clinical Team as soon as possible if they feel they are not getting sufficient exposure time to meet learning outcomes.

4.14 Student Travel and Housing

In the clinical phase of the program, the student will be off campus a significant portion of the time. The student is responsible for transportation during this time. Because of this, reliable transportation is required during the clinical phase. Parking fees may be incurred as students begin clinical training in hospitals. Car-pooling is recommended, when applicable.

In the clinical phase of the program, students complete eight (8) clinical rotations which require, from time to time, that the student be away from the Tucson area. Sometimes these clinical sites are within driving distance, but at other times, the student will need to stay near the clinical site for the duration of the rotation. Because of this, there may be additional housing costs during this clinical year.

5. Student Readiness and Compliance Requirements

5.1 Technical Standards for Enrollment (A3.13e)

The University of Arizona Physician Assistant (PA) Program is designed to train highly skilled and effective PAs, dedicated to improving patient care and advancing the profession. An applicant for the Master of Physician Assistant Practice Program must demonstrate proficiency in five key areas for technical standards: (1) intellectual-conceptual abilities, (2) behavioral and social attributes, (3) communication, (4) sensory/observation, and (5) motor capabilities.

Throughout the program students must possess the capability to complete, with or without reasonable accommodation, all aspects of the curriculum and training. The following abilities and characteristics, defined as technical standards, are requirements for admission, retention, progression, and graduation.

The UAPA Program is committed to the selection of a diverse cohort of students who will become future leaders in advancing health care to the distinct communities that comprise Arizona and the United States. The University of Arizona promotes a campus that is accessible and welcoming to applicants, employees, and guests with and without disabilities; where community members are invested in the inclusion, representation, and equitable participation of all.

By actively collaborating with students, it is ensured that the curriculum and the physical, technological and policy environments are functional, welcoming, and accessible through individual consultation, strategic partnerships, and consistent outreach. Students who require accommodations are encouraged to contact the [University's Disability Resource Center](#) to explore available support options.

Intellectual-Conceptual, Integrative and Quantitative Abilities

The applicant must be able to problem solve rapidly. This critical skill demanded of all healthcare professionals requires the ability to learn and reason, and to integrate, analyze, and synthesize data concurrently in a multi-task setting. In addition, the applicant must be able to comprehend three-dimensional relationships and to understand the spatial relationships of structures. The applicant must be able to measure, calculate, reason, analyze, integrate, and synthesize in the context of the study of medicine. The applicant must be able to effectively learn, participate, collaborate, and contribute as a part of a team. The applicant will need to synthesize information effectively both in person and via remote technology. The applicant must be able to consider alternatives and make decisions for managing or intervening in the care of a patient.

Behavioral and Social Attributes

The applicant must possess the ability to make sound decisions, and to complete all responsibilities attendant to the diagnosis and care of patients and their families. The applicant must have the ability to perform essential tasks in a fast-paced or high-pressure environment and adapt to an environment that may change rapidly without warning and/or in unpredictable ways. The applicant must be able to exhibit integrity, cultural humility, emotional intelligence and concerns for others. When engaging patients and their families, health care professionals, and all involved parties, the applicant must demonstrate compassion, consciousness of social values, and

interpersonal skills to effectively interact positively with people regardless of race, ethnicity, gender, gender identity, expression, sexual orientation, disability, and belief systems. Applicants are expected to understand and perform within the legal and ethical aspects of the healthcare profession.

In addition, the applicant must maintain mature, sensitive, effective, and harmonious relationships with all patients, healthcare providers and team members, even under stressful situations.

Communication

The applicant must be able to communicate effectively, professionally, and efficiently with all members of the healthcare team. The applicant must demonstrate a willingness and ability to both give and receive feedback.

Applicants must be able to: effectively communicate and comprehend auditory information, with or without reasonable accommodations, and observe patients closely in order to elicit and transmit information; describe changes in mood, activity, and posture; and perceive nonverbal communications; and communicate sensitively with patients. Communication includes not only speech, but also reading and writing skills. Applicants must be able to communicate effectively and efficiently in oral and written English with all members of the health care team, with or without accommodations. Applicants must possess reading skills at a level sufficient to accomplish curricular requirements, provide clinical care for patients, and complete appropriate medical records, documents, and plans according to protocol in a thorough and timely manner.

The applicant must be able to process and communicate information on the patient's status with accuracy in a timely manner to members of the healthcare team, with or without accommodations.

Sensory/Observation

The applicant must be able to acquire the information presented through demonstrations and experiences in the basic and clinical sciences. The applicant must have the ability to receive, process, and respond to visual, auditory and tactile information, or the functional equivalent, with or without reasonable accommodations.

Motor Capabilities

Applicants are required to directly perform palpation, percussion, auscultation, and other diagnostic procedures; and execute motor movements reasonably required to provide medical care with or without reasonable accommodations. These actions typically require coordination of gross and fine muscular movements, and equilibrium. Applicants must be able to perform them effectively, with or without accommodations.

Equal Opportunity

The UAPA Program follows the University of Arizona in its equal opportunity and affirmative action stance. More information on this may be found on the University of Arizona [ADA/504 Compliance](#).

Special Accommodations

In compliance with Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act, reasonable accommodation will be provided to students with documented disabilities. Students seeking accommodations will be advised to register with the Disability Resource Center (DRC) and provide appropriate documentation to DRC before any accommodations can be provided. Please note that accommodations are not retroactive so timely contact with DRC is encouraged.

5.2 Technical Standards Evaluation

Summary

All UAPA students must meet the Technical Standards throughout their enrollment in the Program. Satisfaction of the Technical Standards is an ongoing academic requirement. Technical Standards Evaluations are used to determine if a student's academic or behavioral performance is or may be affected by impairment that includes but is not limited to medical, behavioral, or substance abuse issues.

The purpose of a Technical Standards Evaluation is to determine the student's ability to perform their academic and clinical duties responsibly and safely, meaning that the student is not a danger to patients, colleagues, self, or anyone in the learning environment or on University or clinical properties.

The UAPA Program develops and publishes technical standards for the admission, retention, and graduation of applicants or Physician Assistant students in accordance with legal requirements.

Applicability & Scope

This policy applies to Physician Assistant students enrolled at the University of Arizona.

Definitions

Technical Standards Evaluation – An evaluation to determine the student's ability to meet the Technical Standards of the program so the student is able to perform their academic and clinical duties responsibly and safely.

Impairment – Conditions that may affect a student's academic or behavioral performance, including but not limited to medical, behavioral, or substance abuse issues.

Technical Standards – A document outlining the essential qualifications for admission and ongoing participation in the UAPA Program. All accepted student applicants are required to sign the Technical Standards as a contingency of their admission to and continued enrollment at the University of Arizona.

Technical Standards Evaluation Determination – Written confirmation by the non-PA faculty provider or psychologist who conducted the evaluation of the student's ability to meet the Technical Standards for the UAPA Program.

Policy Statement

1. Ability to meet the Technical Standards of the UAPA Program is an ongoing academic requirement.
2. The program may require a Technical Standards Evaluation when:
 - a. The program administration receives a concern that a student's behavior or performance may threaten the health or safety of the student, patients, instructors, or anyone in the learning environment.
 - b. A student's performance or behavior indicates that a student is or may be struggling to meet the Technical Standards.
3. Pending a Technical Standards Evaluation, and in consultation with the course director, Director of Didactic Education (DoDE)/ Director of Clinical Education (DoCE) overseeing the student in the curriculum, the office of Curricular Affairs will assign the student to virtual learning or require the student stop progress in the UAPA Program.
4. Technical Standards Evaluations must be conducted by an evaluator approved by the Program. The prospective evaluator may be assessed for a known conflict before being elected. Approved evaluators may not be University of Arizona-employed PA faculty members.
5. The Offices of Student Affairs and Curricular Affairs will provide the pertinent information directly to the evaluator(s) selected to perform the Technical Standards Evaluation.
6. The cost(s) of the initial Technical Standards Evaluation is/are the responsibility of the Program. The cost(s) of any additional medical advice, evaluations, and/or treatment is/are the sole responsibility of the student.
7. The Program may require that the Technical Standards Evaluation process be completed by a specific deadline.
8. The evaluator will generate a written Technical Standards Evaluation Determination addressed to the Offices of Student Affairs and Curricular Affairs regarding the student's ability to perform the Technical Standards required for the UAPA Program.
 - a. The Technical Standards Evaluation Determination will not include specific health information about the student.
 - b. The Technical Standards Evaluation Determination will state only whether the student is able to meet the Technical Standards of the UAPA Program, with or without accommodations.
9. If a student requires accommodations to meet the Technical Standards, they will be referred to the student to the Disability Resource Center (DRC).

- a. It is the student's responsibility to initiate contact with the DRC and complete the DRC's assessment and accommodation process.
 - b. If the student fails to contact the DRC within two (2) weeks of the Technical Standards Evaluation Determination, the student will be deemed unable to meet the Technical Standards of the UAPA Program.
10. A student who cannot meet the Technical Standards will be offered a medical or personal leave of absence when eligible and if such leave meets the conditions of the Leave of Absence Policy.
 - a. A student returning from a leave of absence must recertify that they are able to meet the Technical Standards of the UAPA Program, with or without accommodations.
 - b. If student exhausts all leave of absence options, the student may withdraw from the UAPA Program.
11. Students who are absent from the UAPA Program for a period of three (3) months without being on an approved leave of absence will be dismissed in accordance with the Academic Progression and Remediation Policy and Student Success Committee Procedures and Process for Dismissal.

5.3 Disability Accommodations- Disability Resource Center (DRC)

As noted above all the technical standards must be achieved by all students with or without reasonable accommodations. Students who believe that they might need accommodations should work with the Disability Resource Center (DRC) located at [Disability Resource Center](#). Students should contact the DRC once they matriculate in the University of Arizona student information system to ensure their accommodations can be met. Additionally, any student realizing during the program that they may need accommodations should initiate a consultation with the DRC immediately.

5.4 Immunization, Health and Drug Screen Requirements (A3.07a, A3.17b, A3.19)

Health Requirements (A3.07a, A3.17b, A3.19)

The UAPA Program considers the health, safety and welfare of its faculty, student body, staff and the community we serve of utmost importance. Therefore, based on the Centers for Disease Control Recommended Vaccines for Healthcare Workers most recent guidelines; the program has developed the following policy to safeguard the wellbeing of all.

Required Drug Screen

- All matriculated students must complete and successfully pass a chain of custody drug screen prior to entering the clinical phase of the program.
 - Additional testing may be required at the discretion of each clinical site
- If a concern arises regarding a student's ability to meet the Technical Standards, a *Technical Standards Evaluation* may be required. This evaluation may include additional testing or assessments, as deemed appropriate.
- A student may be prevented from progressing in the program's didactic phase, being promoted to the clinical phase of the program, or being recommended for graduation if the student fails a chain of custody drug screen.
- The U of A is a Drug free campus- [Drug Free Arizona](#)

Immunizations

All students must complete the following requirements prior to matriculation. If a student is non-immune to any of the required vaccinations, completion of a booster vaccination series is required. Repeat immunity titers after booster vaccinations are not required. Some clinical sites may have different vaccination requirements. Failure to comply with clinical site requirements will disallow participation at those sites. Please see the full policy at [Campus Health](#).

- Tuberculosis (TB) screening
- Rubella (German measles)
- Measles (Rubeola)
- Mumps
- Varicella (Chickenpox)
- Hepatitis B
- Tetanus, Diphtheria, and Pertussis (TDAP) vaccine
- Influenza vaccine (annual)

Recommended (but not required):

- Meningococcal vaccination
- COVID-19 vaccination – Students are encouraged to receive any FDA-approved COVID-19 vaccine. Please note that some clinical sites may require proof of COVID-19 vaccination for participation.

Students are financially responsible for the cost of all immunizations, health and drug screenings they may require while enrolled in the program, including any health care services required because of their participation in scheduled program activities (e.g. TB testing, immunizations, treatment of injuries, pathogen exposure evaluation and treatment).

Noncompliance with any component of this policy will result in withholding the student from progressing in the program, withdrawal from classes without credit and a referral to the Student Success Committee.

The student's health record is protected by HIPAA and will be maintained by Campus Health in a secured electronic depository. Program faculty do not have access to records maintained by Campus Health.

The Program will maintain the Technical Standards attestation form confirming that the student has met institution and program technical standard requirements, this will be stored in the students' electronic record.

5.5 Background Check and Eligibility Disclosure Policy

Applicants to the University of Arizona Physician Assistant Program should be aware of the following:

- If you have a criminal history or are designated as a sex offender, you may be prohibited from enrolling in the PA program and/or may not be able to secure clinical placements, even if you are extended an offer of admission.
- Prior to matriculation, you will be required to complete a criminal background check and other compliance screenings (including Office of Inspector General (OIG) Exclusion List review). These checks are conditions for participation in clinical practice experiences, which are required for graduation, and may also be required for licensure under applicable state law.
- Our affiliated clinical sites establish their own requirements regarding student participation. This may include repeating background checks or other onboarding requirements. A history of felony convictions, OIG exclusion, or other disqualifying findings may prevent assignment to certain clinical sites, potentially limiting your ability to complete the program.
- Admission to the program does not guarantee eligibility for clinical placement, licensure, or employment. State licensing boards review convictions and exclusions on a case-by-case basis, and some findings may prevent you from becoming licensed as a PA, even after graduation. The University cannot provide advice as to whether applicants' backgrounds are likely to disqualify them from placements, licensure, or employment.

Acknowledgment

By applying, you acknowledge that you understand these requirements and limitations.

6. Professional Standards and Expectations

6.1 Purpose

Professionalism is a cornerstone of the PA profession and plays a vital role in student success in both academic and clinical environments. This policy outlines the professional behavior, ethical standards, and responsibilities expected of PA students to foster excellence in patient care, academic integrity, and professional growth.

6.1.1 Ethical and Legal Conduct

All enrolled students are expected to uphold the highest standards of ethical practice by adhering to the **American Academy of Physician Assistants (AAPA) Code of Ethics**, institutional policies, and all legal regulations. This includes:

- Protecting patient confidentiality in alignment with HIPAA regulations.
- Demonstrating honesty and integrity in academic and clinical settings.
- Avoiding conflicts of interest and upholding ethical standards in all patient interactions.

6.1.2 Academic Integrity

Students are encouraged to approach their academic responsibilities with sincerity and a commitment to learning:

- Complete all coursework, examinations, and clinical documentation with honesty and independence.
- Refrain from plagiarism, cheating, or misrepresentation of data.
- Actively promote a culture of integrity by reporting any observed academic misconduct.

6.1.3 Responsibility and Accountability

Students are expected to take ownership of their academic and professional development. This includes:

- Embracing responsibility for their actions and academic performance.
- Welcoming feedback as an opportunity for growth and demonstrating a willingness to improve.
- Proactively seeking support when needed and contributing to a collaborative, respectful learning environment.

6.1.4 Cultural Humility and Professional Relationships

Professionalism includes respecting the uniqueness of people and perspectives encountered in academic and clinical environments. Students are expected to:

- Build and maintain professional relationships with patients, faculty, peers, and clinical preceptors.
- Demonstrate cultural humility and respect for individuals regardless of age, race, ethnicity, cultural background, gender, disability, socioeconomic status, sexual orientation, or other personal characteristics.
- Treat all people with dignity and professionalism, valuing diversity in all its forms.

6.1.5 Reporting Criminal Incidents

Students are required to notify their Faculty Advisor and/or the Program Director of any interaction with law enforcement that results in an arrest or formal involvement with the criminal justice system. This includes, but is not limited to, charges, citations, or legal proceedings that may impact licensure eligibility, program standing, or professional conduct expectations.

6.1.6 Patient Confidentiality and HIPAA Compliance

Patient confidentiality is a cornerstone of Physician Assistant practice and essential for establishing trust between clinicians and patients.

As a PA student, you will be granted access to sensitive information and entrusted with participating in deeply personal aspects of patient care. In return, you are expected to maintain strict confidentiality and uphold the highest standards of professionalism.

Student responsibilities include:

- Never discussing patient information in public or non-secure settings (e.g., elevators, hallways, social media).
- Refraining from disclosing any information that could directly or indirectly identify a patient to individuals not involved in the patient's care.
- Respectfully reminding peers or team members to maintain confidentiality if needed.
- Avoiding the medical evaluation or treatment of classmates, friends, or family members.

All students will receive training in **HIPAA (Health Insurance Portability and Accountability Act)** compliance and are expected to strictly follow all related regulations across all clinical settings.

Violations:

Any breach of HIPAA or patient confidentiality reported by a clinical site or faculty member will be referred to the **Academic and Professional Performance Review Committee**. Consequences may include required remediation, formal sanctions, or—in cases of serious or repeated violations—dismissal from the program.

6.2 Code of Academic and Professional Conduct

Integrity and ethical behavior are foundational to every student's academic journey. The principle of Academic Integrity promotes honesty in all coursework and ethical conduct across classroom, lab, and clinical settings.

This principle is supported by the [Student Code of Conduct](#) and the disciplinary procedures outlined in Arizona Board of Regents (ABOR) Policies 5-308 through 5-404 (see Chapter 5), all of which apply to University of Arizona students.

This Code of Academic Integrity ("this Code") fulfills the requirements of ABOR Policy 5-403.A.4 and supplements the Student Code of Conduct, as allowed by ABOR Policy 5-308.C.1.

For comprehensive details on prohibited conduct and expectations, students are encouraged to review the full [Code of Academic Integrity](#).

6.2.1 Unacceptable Behaviors

The following examples of unprofessional behavior will result in prompt referral to the Student Success Committee and may lead to dismissal from the program. These include, but are not limited to:

- Violations of academic integrity, including cheating or plagiarism, as outlined in the University of Arizona [Code of Academic Integrity](#).
- Possession, use, distribution, or consumption of alcohol, illegal drugs, or controlled substances during school activities. Students must not be under the influence of such substances while participating in any school-related function, on or off campus. Please refer to the [University of Arizona Safe and Drug Free Campus](#).
- Communication or behavior that is discriminatory, demeaning, or reasonably perceived as mentally or physically harmful to others—including faculty, staff, fellow students, patients, their families or caregivers, and healthcare providers.

The program reserves the right to assess and determine what constitutes unprofessional behavior, including the severity of the conduct.

6.2.2 Assessment of Professional Behaviors

The program is committed to supporting the development of professional behaviors throughout each student's time in the program. These behaviors are assessed and monitored regularly through a variety of strategies to ensure students are meeting expectations for professional conduct.

When concerns are identified, the student—together with their faculty advisor—will create an individualized plan for improvement, focused on positive behavior change and student success. This plan may include referrals to additional support services or resources as needed.

To ensure a coordinated and supportive approach, the student will meet with their faculty advisor, course director, the Director of Didactic and/or Clinical Education, and the Program Director to review the improvement plan and associated monitoring strategies. The Student Success

Committee will be informed that the student is participating in a professional behavior improvement plan.

If concerning behaviors persist or escalate, the student will be referred to the Student Success Committee for formal review. This process may result in further action, including possible dismissal from the program.

6.2.3 Program Faculty Advisor Assessment

At the end of both the Didactic Phase and the Clinical Phase, each student's professional behavior will be thoughtfully evaluated by their assigned program faculty advisor. This evaluation will incorporate any concerns reported by members of the program's academic or clinical teams.

Advisors will meet individually with each student to review the Faculty Advisor Professionalism Review Form. If any areas for growth are identified, the student—working collaboratively with their advisor—will create an individualized action plan focused on fostering positive behavior change. These plans may include referrals to appropriate external resources to support the student's success.

To ensure a collaborative and supportive approach, the student will meet with their faculty advisor, the Director of Didactic and/or Clinical Education, and the Program Director to review the action plan and monitoring strategies. The Student Success Committee will be notified when a student has entered into an individualized action plan related to professional behavior.

If the behavior continues or worsens despite the plan, the student will be referred to the Student Success Committee for a formal review, which may lead to dismissal from the program.

6.2.4 Student Success Committee Process

The Student Success Committee (SSC) evaluates professional behavior at key points in the program, as indicated by the faculty advisor—typically at the conclusion of the Didactic Phase and again at the end of the Clinical Phase.

If concerns are identified, the student will be placed on **Professionalism Probation**. In collaboration with their faculty advisor, the student will develop an individualized improvement plan focused on constructive behavior modification. These plans may include referrals to appropriate resources to support the student's growth.

The student will meet with their faculty advisor, the Director of Didactic and/or Clinical Education, and the Program Director to review the improvement plan and monitoring strategies.

Once the student demonstrates consistent professional behavior and meets the expectations outlined in the plan, Professionalism Probation status will be removed.

If concerns persist or escalate, the SSC will reconvene to review all relevant documentation. This review may result in dismissal from the program.

6.3 Communication and Social Media Conduct

6.3.1 Communication

Once the admission deposit has been paid, all students receive instructions from the University of Arizona MEZCOPH/SHP on how to activate their **NetID** and University of Arizona College email account.

It is **mandatory** that students check their University of Arizona College email account **daily**, as this is the official channel through which the Program communicates. To ensure clear and consistent communication, students are also expected to use this email account when corresponding with faculty and staff.

Please note: Faculty and staff will not respond to messages sent from personal or outside email accounts. The Program is not responsible for any missed or inaccurate information resulting from a student's failure to routinely check, read, or maintain their university email account.

6.3.2 The UAPA Program supports students' rights to free expression as articulated in the U of A First Amendment policy. At the same time, PA students have unique professional responsibilities when communicating—especially through social networking platforms (e.g., X, TikTok, Facebook, Instagram, blogs, message boards and emerging media) and professional networking platforms (LinkedIn).

Students are expected to:

- Align their public and digital presence with the professionalism and licensure standards of the PA profession.
- Engage in expressive activity with thoughtful awareness of how content may reflect on their future role as healthcare providers.
- Avoid content that could interfere with patient safety, dignity, or privacy—or that could reasonably be interpreted as unprofessional by UAPA Program faculty.

To support these expectations:

- Never share patient information (including names or photos) or any personal health details online.
- Do not take photos or videos in clinical settings.
- Connections with faculty through professional networking platforms is permissible: refrain from initiating or accepting connections through social networking platforms.
- If referencing your role within the UAPA Program, the University of Arizona, or affiliated sites, clearly state that your views are personal and not representative of the institution.
- Do not misrepresent your training or licensure status or use social media to offer medical advice.
- Respect academic materials as copyright protected; do not share content (e.g., lecture slides, schedules, or faculty photos) on social platforms without permission.

Students are encouraged to review the following resources for additional guidance:

- AAPA Social Media Guidelines for PAs and PA Students
- University of Arizona Social Media Guidelines

Maintain professionalism in all verbal, written, and digital communication. Use official communication channels for academic and clinical correspondence.

During instructional and clinical time, cell phones should be silenced or on vibrate to minimize disruptions. Personal phone use—including calls, texts, or social media—is not permitted in the presence of patients, preceptors, or instructors.

6.4 Professional Behavior in Classroom and Clinical Settings

Professionalism in conduct reflects a readiness to join the healthcare team. Students are expected to:

- Arrive on time and prepared for classes, labs, and clinical rotations.
- Treat faculty, peers, healthcare professionals, and patients with respect.
- Adhere to the Program’s dress code and maintain appropriate hygiene.
- Communicate using respectful and professional language in all environments.
- Embody compassion, humility, integrity, and honesty consistently.

6.5 Dress Code and Identification

6.5.1 Dress Code

Student appearance and conduct should reflect the professionalism and dignity of the medical profession. PA students are expected to dress in a way that is respectful to faculty, classmates, patients, and colleagues in clinical and academic settings. The Program has the authority to establish and enforce dress code expectations.

Dress codes at clinical sites may differ from Program guidelines. If a site’s dress culture differs from the policies outlined below, students should consult with the clinical preceptor and the Director of Clinical Education to determine appropriate attire.

The UAPA Program is committed to upholding a professional appearance while remaining mindful of cultural, religious, and individual expression. Student safety and patient comfort are also important considerations. Early in the Program, students will be asked to present their interpretation of professional dress while incorporating the safety guidelines below:

- Students must be professionally dressed for patient encounters, standardized patient interactions, presentations representing the Program, and when visiting clinical sites— unless instructed otherwise.
- Students should follow their clinical site’s dress code, which may differ from the Program policy.
- Professional dress includes slacks, dress shirts, dresses, and skirts. Skirts and dresses should reach the knees to allow for clinical movement. Necklines should be modest. Clothing, accessories, and hairstyles should not interfere with patient interactions or examinations.
- Jeans, leggings, and cargo pants are not considered professional attire. Scrubs may be appropriate for specific rotations.
- Shoes must comply with OSHA safety standards (closed-toed and covering the entire foot).
- Nails should be short and clean.
- Excellent personal hygiene is expected. Scents that may disrupt clinical or learning environments (e.g., perfumes, colognes, scented lotions, body sprays, tobacco smoke) should be avoided.
- Clean, unstained white coats should be worn when requested during clinical activities.
- Program name tags must be worn at all times while in professional dress on the University campus.
- Simulation or clinical activities may require scrubs or personal protective equipment; this will be outlined in the course syllabus.
- Cultural or ethnic dress modifications that maintain safety and professionalism are fully supported and welcomed.

6.5.2 Skills Laboratory Class Attire

The following attire is expected for Skills Lab sessions to ensure comfort, professionalism, mobility, and respectful access for physical exam practice:

- Solid color athletic shorts (not short shorts or yoga-style pants)
- Plain tee shirt (without logos, unless Program-branded)
- Sweatshirt or hoodie, if needed for warmth
- Clean athletic or closed-toe shoes in good repair
- Sports bra under the tee shirt to allow access to trunk and upper extremities
- Briefs or panties under shorts to support modesty during clinical skill practice

Cultural or ethnic modifications to attire are welcomed and respected, provided they support both patient and student safety.

Students who do not follow dress code expectations may be asked to change into appropriate attire. Repeated violations will result in referral to the Student Success Committee for further review.

6.5.3 Student Identification (A3.06)

In all clinical rotation settings, when a student is providing care for a patient or in a patient care setting, the student must be clearly identified as a Physician Assistant Student. Proper Program issued identification badges bearing the student's name identifying them as a "Physician Assistant Student" must be worn at all times in the clinical setting, on the outer garment and in plain view, visible to all. Students must introduce themselves to every patient using their first and last name, and the term "PA student." Example: "Hello, my name is PA student Jane Doe." At no time should a student, either by virtue of their skills or knowledge attained while progressing through the Program, misrepresent their role as being other than a physician assistant student. Students should refrain from using previously earned titles while matriculating in and representing the UAPA Program. Failure to adhere to this policy may result in an incident report.

6.6 Gross Anatomy Lab Rules and Regulations

As part of the Program, students will utilize the College of Medicine (COM) Gross Anatomy Lab and are expected to follow all regulations established by COM. These guidelines are in place to ensure safety, professionalism, and above all, respect for our generous anatomical donors.

Lab Conduct and Safety Expectations:

- Proper attire is mandatory. Closed-toe shoes are required at all times.
- For dissection, students must wear nitrile gloves, chemical-resistant aprons, sleeve protectors, and eye protection. Face shields or surgical masks must be worn when Stryker saws are used.
- Food and beverages (opened or unopened) are not permitted.
- Lab doors must remain securely closed. Do not prop doors open or allow entry to individuals outside your lab group.
- Use discretion in all conversations; keep discussion of lab activities respectful and professional.
- Tampering with materials or equipment not assigned to you is strictly prohibited.
- Keep your assigned station clean and orderly. Tools, tables, and lighting must be cleaned and correctly stowed after each session.
- Biohazardous materials (e.g., cadaver tissue, contaminated gloves) must be disposed of in red biohazard bags or appropriate sharps containers. All non-biohazardous trash should go in grey or white bins.
- Recording (photo, video, or audio) is strictly prohibited. Do not share lab content on any platform.
- Music is permitted with headphones only, to avoid disrupting others.
- Wash and sanitize your hands before handling instructional materials like models, textbooks, and bones.
- Do not remove human remains, skeletal models, plastinated materials, or other instructional items from the lab.

Final Note:

Access to the Gross Anatomy Lab is a privilege. Students are expected to uphold the highest level of professionalism and honor the trust placed in them by our anatomical donors.

*For additional information on safety protocols and personal conduct expectations in laboratory and clinical environments, please refer to **Section 9: Student Safety and Rights**.*

6.7 Student Working in Program, Substitution for Faculty/Staff, Employment (A3.04, A3.05a/b, A3.15e)

The University of Arizona Physician Assistant Program strongly discourages any form of employment while enrolled in Program required courses. The Program does not permit matriculated students to substitute for or function as instructional faculty; nor are they required or allowed to work (paid or voluntary) for the Program in any capacity. (A3.04, A3.05a, A3.15e)

During supervised clinical experiences, students may not substitute for clinical or administrative staff and must ensure all services provided to patients are directly supervised. Students must not accept compensation for any services provided during supervised clinical experiences. (A3.05b)

There will be no exceptions or accommodations granted to didactic or clinical course work, scheduling of classes, labs, exams, special assignments, community service work, standardized patient experiences, supervised clinical experiences or assignments due to employment.

While the Program strongly discourages employment during enrollment due to the rigorous nature of the curriculum, students who choose to work are expected to meet all Program requirements without exception. Employment will not excuse absences, missed deadlines, or performance deficiencies.

If a student violates a policy, it may be considered a professionalism concern. In such cases, the student may be identified as “At-Risk”. For more information on what this means and the steps the UAPA Program may take, please see the “At-Risk” section in the Grading and Progression Policy of the Student Handbook.

7. Attendance and Participation

7.1 Attendance and Absence Policy

This policy establishes guidelines and procedures for attendance, punctuality and absence in ALL phases of the UAPA Program.

Participation in learning activities is critical for students to develop into effective Physician Assistants. Being reliable ensures a safe and productive learning environment. Punctuality and regular attendance by all students is important to demonstrating commitment to our professionalism values and goals, which means **you are required to be at your appointed class or rotation on time each day that you are scheduled or required to attend.** Absenteeism and tardiness places a burden on the Program and operations by negatively impacting student morale and/or patient care. **The student is responsible for making up all missed work.**

In accordance with [University Class Attendance and Participation](#), students are expected to be regular and punctual in class attendance and to fully participate in the course. Students themselves are primarily responsible for attendance and class participation.

Attendance is mandatory for the following:

- All lectures and laboratory classes, including but not limited to small groups, patient interaction, and simulation.
- All examinations including retakes, remediation, and general course exams.
- Service-learning experiences as defined by the program
- All required days and hours of clinical rotations

In the case that attendance is tracked, signing in for another student is unethical and considered a professionalism violation. Students may only sign in for themselves.

Instructors refer to this policy in their course syllabi; instructors will provide students with statements of how participation will be assessed for all courses.

Failure to adhere to this policy may lead to further referral to the Student Success Committee and potential consequences, including dismissal from the program.

7.2 Punctuality and Professionalism

We recognize there are times when absences and tardiness cannot be avoided. Students are required to notify their faculty advisor or clinical preceptor via phone and/or email if they are unable to report to class or rotation as scheduled.

If you must be absent from or late to a mandatory program activity, you must notify your faculty instructor/advisor or rotation preceptor as soon as possible to inform them of the reason for your lateness or absence and state when you expect to return to course. If your advisor or clinical preceptor is unavailable, you must speak with the Director of Didactic or Clinical Education or another faculty member directly.

A student is considered “late” if they enter the class or rotation site after their scheduled start time. Students are required to notify their instructor or clinical preceptor as far in advance as possible if they will be late to the start of their scheduled program activity. Unexcused absences and instances

of tardiness will be subject to the program Professionalism Policy and Grading and Progression Policy.

7.3 Excused Absences

Acceptable reasons for excused absences include the following: Medical/Illness, Religious Observance, Jury Duty, Bereavement, Professional Conference, and Clinical Phase Employment Interviews.

Medical/Illness:

In the case of student's own injury or illness, it is the student's responsibility to ensure that an absence request is submitted to the didactic course instructor/director or lead faculty in a timely manner. A note may be required from Campus Health or a primary care provider.

We understand that unexpected absences may occur due to illness or other unforeseen circumstances. While meeting attendance requirements is essential for your success in the program, we recognize the importance of health and well-being. If you experience an unexpected absence due to illness, you may be required to provide written medical authorization confirming the nature and duration of your illness/injury, as well as your ability to safely return to class or clinical rotations, in accordance with applicable laws. In cases where an absence due to medical extends to **three (3) or more consecutive scheduled class days (didactic and clinical including rotation days)**, medical documentation is required before resuming program activities.

Our goal is to support your academic and clinical progress while ensuring a healthy learning environment for all. If you anticipate challenges in meeting attendance requirements, we encourage you to communicate with program faculty as soon as possible so we can work together on an appropriate plan. A clinical phase absence request should be submitted to the Clinical Coordinator and Clinical Preceptor of record in a timely manner.

Religious Observance:

An excused absence may be granted for a student to observe a religious holiday, in accordance with [University Religious Accommodation Policy](#).

Jury Duty:

We encourage students to actively participate in the democratic process of our government and serve on jury panels if requested to do so. An excused absence may be granted for a student to fulfill this civic responsibility. Students are asked to make arrangements with their faculty advisor or clinical preceptor as soon as summons/subpoena is received. The UAPA Program reserves the right to request proof of jury duty service, as issued by a court of law. If a student is not required to serve on any particular day or finishes early, the student is required to call the faculty advisor to determine if they must report to the mandatory course activity.

If the student requires **more than a total of three (3) days**, then the student must make arrangements with the Program Director and Director of Didactic or Clinical Education and understand that the student is responsible for missed work and notifying instructors or preceptors.

Bereavement:

An excused absence may be granted for up to **three (3)** days in the event of a death of a loved one. A student may be granted up to an additional **two (2)** days to attend or arrange funeral services.

If the student requires **more than a total of five (5) days**, then the student must make arrangements with the Program Director and Director of Didactic or Clinical Education understand that the student is responsible for missed work and notifying instructors or preceptors.

Professional Conference:

An excused absence may be granted for a student who's scholarly work is representing the program at a professional conference or representing the program in a leadership capacity. As part of the UAPA Program students will be strongly encouraged to participate in state and national organizations such as the Arizona State Association of Physician Assistants (ASAPA), or national equivalent during clinical year rather than didactic year due to the foundational learning occurring in the didactic year.

Clinical Phase Employment Interviews:

Students are encouraged to interview for jobs, residencies/fellowships, and/or doctorate programs during the clinical phase of the program. Students who are offered interviews during the clinical phase of the program must obtain permission from the Director of Clinical Education to arrange for an excused absence in a timely manner. Students will be responsible for notifying the preceptor of his/her absence once granted permission from the program. Students will be responsible for coordinating with the clinical preceptor to make up the missed hours.

The Program's block schedule specifically includes time when students are not involved in class, lab or program activities such that, if needed, students can attend to outside appointments (e.g., medical appointments).

Unless approved by the Director of Clinical Education, no more than **two (2)** excused absences per supervised clinical practice experience are permitted for interviews. Students may not schedule interviews during return-to-campus day activities, end-of-rotation examinations, remediation activities, or summative activities. All requested absences for interview purposes must be approved no less than **one (1) week** in advance by the Director of Clinical Education.

Requesting an Excused Absence:

To request an excused absence from a mandatory program activity, except in the case of personal illness, injury or emergency, students must contact the course director or the lead faculty no less than **two (2) weeks** in advance of the anticipated absence. The reason for the absence and the date(s) of the absence must be included in the request.

To request an excused absence during a clinical rotation, the student must make arrangements with the clinical preceptor and inform the Director of Clinical Education regarding the absence as above and the manner in which the time missed will be made up.

7.4 Personal Day Policy

The Program is committed to the personal and academic success and well-being of all students, including timely access to services addressing personal issues which may impact progress in the

PA program. Although it is ideal if students receive services outside of their classroom hours, and, as noted below, time is included in the schedule for such activities, given the course load in the program this is not always possible. In such cases when timely access is otherwise not possible due to severity, access, or after hours availability, the Program permits students class release time to receive services from healthcare providers and the Campus Health Center - including academic success services, counseling, and disability support services.

- 1) Students are allowed **up to four (4)** Personal Day Passes during the entire Didactic Phase and **up to four (4)** Personal Day Passes during Clinical Phase to attend to personal business, weddings, reunions, or other events that are not included on the list of recognized excused absences.
- 2) Personal Day Passes may be used only **once (x1)** per clinical rotation. Additionally, they may NOT be taken during the program published blackout dates that include, but not limited to:
 - Scheduled exams, quizzes and other assessments (both written and practical)
 - Scheduled laboratory and training activities
 - Interactive classroom activities for which participation is required
 - Additional “blackout dates” published by the Program (e.g. Orientation, Transition to practice)
- 3) Absences may not exceed the maximum number of days allowed in a clinical rotation.
- 4) After the use of a Personal Day Pass in a clinical rotation or after use of **four (4)** Personal Day Passes within the respective year, any additional absence that does not meet criteria for an excused absence will be considered an unexcused absence.

Requesting a Personal Pass:

- 1) Students must submit a request for a Personal Day Pass a minimum of **two (2) weeks** in advance to the course director/ clinical coordinator and the request must be approved by the Director of Didactic Education or Director of Clinical Education.
- 2) A specific reason for a Personal Day Pass is not required.
- 3) Approval is not guaranteed but will depend on the nature of the missed sessions and whether the sessions can be remediated, if deemed necessary, by the course director or clinical rotation director. Personal day passes cannot be transferred or rolled over from didactic year to the clinical year.

7.5 Holiday Schedules

Rotation sites will observe the [holiday schedule](#) of the University of Arizona.

7.6 Extenuating Circumstances Requiring Additional Absences

If there are extenuating circumstances, concerns, or other special situations requiring additional absences beyond the maximum number of absences allowed in a semester or four (4) Personal Passes, students are encouraged to talk with the Director of Didactic Education (Didactic year), Director of Clinical Education (Clinical year), Program Director, or Office of Student Affairs to discuss potential solutions including a Leave of Absence (LOA).

Duration of Absence and Timing	Type of absence	Action required
≥3 <i>consecutive</i> Medical/illness (didactic or clinical phase)	Excused absence	Requires medical documentation
>3 days Jury duty (didactic or clinical phase)	Excused absence	Referral to SSC
>4 personal passes (didactic phase)	Personal pass	Referral to SSC
>4 personal passes (clinical phase)	Personal pass	Referral to SSC
>5 total Bereavement (didactic or clinical phase)	Excused absence	Referral to SSC
>5 total Excused Absences (clinical phase)	Any absence	Referral to SSC
>7 total Excused Absences (didactic phase)	Any absence	Referral to SSC

7.7 Unexcused Absences and Consequences Thereof

Any absence taken without notification or permission of the course instructor, faculty, or clinical preceptor is considered an unexcused absence and will be treated as an act of unprofessional behavior per the Professionalism and Integrity Policy.

Failure to notify of absences may lead to concerns and potential consequences, including being identified as At-Risk Level I (Low Risk), At-Risk Level II (High Risk) per the Grading and Progression Policy, or dismissal from the UAPA Program.

With the understanding that some material cannot be reproduced by the course director, students are responsible for all material missed because of the absence with the understanding that some material cannot be reproduced by the course director.

7.8 Policy on Make-Up Work

The student is responsible for making up all missed work.

- 1) If the student requests an excused absence due to illness or injury, they will contact the course director or lead faculty or clinical director as soon as possible. A note may be requested from Campus Health or a primary care provider.
- 2) The course director or Director of Clinical Education will inform the student of their decision regarding the request for an excused absence by email.
- 3) In the event of **greater than five (5) days of absence**, serious medical or personal issues, the student should contact the SHP Office of Student Affairs or the Registrar to request a leave of absence (LOA).

7.9 Leave of Absence (LOA)

Leave of absences are managed and approved through the Office of Student Affairs and the Student Success Committee per the [Graduate College LOA Policies and Procedures](#).

On a case-by-case basis, excessive absences, defined as **more than seven (7) days**, (excluding personal pass days) **in a didactic phase** or **more than five (5) days** (excluding personal pass days) **in a clinical phase**, may warrant referral to the Student Success Committee.

The UAPA Program promulgates this policy to ensure that all requests for a leave of absence are considered uniformly and consistently. The Program recognizes that, at times, students require a leave of absence either to address their own medical needs (including mental or physical illness or injury or disability), to take advantage of additional educational or research opportunities outside of the SHP, or to address other matters of a personal nature, including, but not limited to, parental leave, caring for a family member with a serious medical condition, military obligations, or academic enrichment opportunities (such as special training, research, or fellowship opportunities). Students requesting a leave of absence must comply with this policy in requesting such leave and returning from an approved leave of absence.

Students should know that a Leave of Absence (LOA) might adversely affect their financial aid and visa status. For this reason, students are urged to refer to the [University Dates & Deadlines](#), as deadlines vary by course.

Medical Leave of Absence

If a student exceeds the maximum allowable absences for any given course for medical reasons, they are eligible for a Medical Leave of Absence. Students requesting a leave of absence because of their own physical or mental illness, injury, or disability, must complete [The University of Arizona Leave of Absence Petition Form](#). The student must obtain and attach the appropriate medical documentation to the Leave of Absence Form as described in the leave of absence policy and complete the Campus Health medical withdrawal process.

Personal Leave of Absence (non-medical)

Students requesting a leave of absence for reasons other than their own mental or physical illness, injury, or disability must submit a [Leave of Absence Request Form](#) to the Office of Student Affairs, along with a separate personal statement describing the nature and reason for the leave. The representative from the office of Student Affairs will present it and the supporting documentation to the Student Success Committee for review and approval. Decisions regarding a denied non-medical leave of absence are not subject to review or appeal. Students should know that a Leave of Absence (LOA) might adversely affect their financial aid and visa status. Students on non-medical leaves of absence must submit a written report to the Office of Student Affairs at the end of the leave of absence regarding their progress toward the reintegration goals set forth before the leave.

Students who request consideration for a leave of absence must complete the [University's non-medical LOA petition](#) which must first be reviewed by the Student Success Committee. The

Student Success Committee will make a recommendation to the Program Director who will make final decision. This request covers anticipated absences and medical leave such as for necessary medical or surgical intervention that will require the student to miss three or more days in a row. If the leave of absence and make-up work cannot be accommodated, the student may be delayed in completing the program. If the leave of absence and make-up cannot be accommodated, the student may need to decelerate to the next cohort. Students must be in good academic standing, unless an exception is approved by the Program Director, in order to request a Leave of Absence.

If the request is not approved and the student does not return to classes as assigned, the student will be administratively withdrawn from the program and must re-apply for admission.

8. Student Support and Services

8.1 Academic Advising and Faculty Mentorship

Upon matriculation, each student in the UAPA Program is assigned a **faculty advisor** who will serve as their primary mentor throughout the program. Faculty advisors provide academic guidance, career counseling, and support for professional growth. They help students navigate the rigors of PA education, offer strategies for success, and serve as a consistent point of contact for questions or concerns. Students are expected to meet with their advisor regularly—at least three times during the didactic phase and twice during the clinical phase—and may schedule additional meetings as needed. Advisors also play a key role in identifying and addressing academic or professional challenges, collaborating with students to develop individualized improvement plans when appropriate. As advocates and mentors, faculty advisors are central to fostering student wellness, accountability, and long-term success in the program.

8.2 Referrals for Academic Counseling (A2.05e, A3.10)

Academic counseling services are provided within the SHP through the office of Student Services and Admissions. A dedicated academic success coach is available to assess student needs and develop a learning plan. A student may choose to see the academic success coach on their own, but a referral will be made for any student identified at risk based on academic performance. In addition, the University of Arizona has a broad range of student support available. The full list of resources can be viewed here: [Academic Support](#)

Mental Health Resources (A3.10)

The UAPA Program considers the wellness of its students to be of utmost importance. Recognizing that a wide range of personal challenges, including but not limited to mental health concerns, physical health conditions, financial stress, family obligations, or other life circumstances, can impact a student's ability to progress through the program, the Program has established the following policy to provide meaningful support.

Students are encouraged to contact any member of the PA Program team if they are feeling overwhelmed or experiencing difficulties. Faculty and staff are trained to respond with empathy and connect students with appropriate campus resources. This includes direct referral to Campus Health's Counseling and Psych Services (CAPS), which can be reached at 520-621-3334. Students will be introduced to available resources during orientation and receive reminders throughout the program on how to access support services and schedule appointments.

In addition to CAPS, the SHP has committed to providing an embedded mental health counselor who will be available on-site and free of charge to all students. This individual focuses on wellness and self-care and offers a safe, confidential space for students seeking guidance or counseling.

By fostering an environment where students feel supported in addressing both academic and personal challenges, the UAPA Program remains committed to student well-being and success.

8.3 Provision of Health Services (A3.09)

The Program Director, Medical Director and the Faculty of the Program will not participate as health care providers for students enrolled in the Program except as needed in case of an emergency. Students in need of medical care may seek care at University of Arizona Campus Health Center on campus at 1224 E. Lowell St. Tucson, AZ 85721 <https://health.arizona.edu>. After hours students may call 520-570-7898 for a medical concern or 520-621-3334 for a mental health concern.

8.4 Mandatory Health Insurance

The UAPA Program requires that all PA students maintain health insurance throughout their educational career. Students may obtain health insurance either through the commercial health insurance plans offered by Campus Health Service, or through their own health insurance carrier. Students are fiscally responsible for obtaining and maintaining health insurance, as well as for all costs incurred for medical care, including routine, urgent, and emergency services, whether on campus or at a clinical site.

Students will be required to demonstrate proof of insurance as a condition of enrollment and will be required to provide proof of insurance annually to the SHP Office of Student Records. Students who do not maintain health insurance may be unable to fulfill their academic requirements in the UAPA Program and therefore may not be able to complete the Program.

In an emergency, whether on campus or during a clinical affiliation, the faculty or clinician in charge will ensure appropriate emergency actions are taken. If the student is able, they should immediately proceed to an emergency room or urgent care facility for treatment. If the student is unable then emergency transportation will be requested by the faculty or clinician in charge. The student is responsible for all costs associated with emergency care as covered by their health insurance.

Students may contact campus health service at 520-621-6487 regarding health insurance coverage or may visit <http://www.health.arizona.edu/>

9. Student Safety and Rights

9.1 Campus and Building Safety

9.1.1 Campus Security

The U of A is committed to maintaining a safe and inclusive environment for all members of its community. The [Office of Public Safety](#) at the U of A protects and advances the safety of the University's community. Through a comprehensive approach encompassing education, awareness, and enforcement, the safety team, consisting of the U of A Police Department (UAPD), the Threat Assessment and Management Team, Facilities Management, Risk Management, Parking and Transportation, and Emergency Management, strives to maintain a safe, inclusive, and supportive community. The Office of Public Safety routinely works in coordination with and benefits from the support of several other University units, including but not limited to, the Dean of Students Office, Human Resources, and Counseling and Psych Services. All available resources and services are documented on the Office of Public Safety's website so that faculty, staff, and students can easily access information.

The Office of Public Safety and its partners have implemented several safety, security, and outreach initiatives, including 24 hours a day, seven days a week campus police presence, emergency blue light call stations which are located throughout campus with a direct line to the UAPD, a comprehensive surveillance system that monitors key University and surrounding areas, sexual assault awareness events, 'safety strolls' with the Chief Safety Officer, UAPD Community Academy, and education sessions and fairs. Many of these are listed on the Outreach and Initiatives drop down on the Office of Public Safety website.

The U of A complies with the Clery Act, a federal law that requires colleges and universities to disclose certain campus security information. As commitment to the safety and security of the campus community, the University has a dedicated [Clery Act](#) website that provide information about the federal law, public reports and logs, victim resources, and a resource library.

The Office of Public Safety website also offers many personal safety resources that can be found under the Resources drop down, such as a parent and family guide, support for students, resources for instructors, active shooter preparedness, and campus safety references. An important resource provided here is the [Wildcat Safety Guide](#). This online guide provides information about contacting 911, helpful phone numbers and websites, safety and wellness resources, safety trainings, and emergency procedures. In this guide, there is an interactive [University map](#) that shows the locations of various resources, parking, accessible entrances, automated external defibrillator devices, emergency bleeding kits, disabled parking, elevators, and emergency phones. The guide also provides communication and transportation resources. All employees and students are automatically registered for UAlert which is a text and email messaging platform to communicate timely and effectively with the campus community in the event of an emergency. The LiveSafe App enables direct and discreet two-way communication with UAPD using text, picture, video, and audio. For safe transportation around the campus, there is SafeRide which provides a safe, night-time method of transportation to all employees and students on or around the main campus and is entirely managed by students, and the Motorist Assistance Program which

offers free assistance for all employees or students who need a vehicle jump start or accidentally lock keys in the car. For safe transportation off campus, there is the Emergency Ride Home Program which offers a free emergency ride home to employees and students who are alternative transportation users, and NightCat by Lyft which offers employees and students free Lyft rides starting and ending on campus or at a nearby Safeway or Walmart. Information about and access to safety trainings for faculty, staff, and students also are provided in this guide, such as active shooter, mental health first aid, and risk management safety courses, some of which are mandatory institutional requirements.

9.1.2 Health Sciences Innovation Building

The Program uses a badge reader system that requires faculty, staff and students to swipe in with their designated key card (CATcard). All labs are accessible via building entry during working hours and after hours with the use of the CATcard. Each student will be provided with a CATcard on enrollment in the program which will allow access before 7am, after 5pm and on weekends, to the UAPA Program. The Health Sciences Innovation Building hours are 7am-7pm.

9.1.3 Clinical Laboratory Space

Success in the UAPA Program requires that students practice their skills and techniques. In recognition of this, the PA clinical laboratory space will be available to students after routine class time and outside of hours to allow adequate time for practice. The exception to this is when a guest lecture or additional lecture has been added by UAPA Program or others to be performed in the lab.

Students may use the equipment that is accessible but any equipment that is kept in locked areas will only be made available by prior arrangement with faculty. Students are expected to respect all lab rules for safety and hygiene and to leave the lab in an organized and tidy manner.

9.2 Personal and Environmental Safety

9.2.1 In the Role of Subject or Patient-Simulators

The goal of the UAPA Program is to train skilled primary care focused Physician Assistants who can treat patients through the lifespan and across the spectrum of care. To achieve this, students will be required to practice on one another and participate in simulated patient scenarios. Students must be prepared to practice on other students as well as allowing students to practice on them. Random assignment of partners will occur in some situations.

Students will be expected to treat all other students with respect regardless of gender, sexual orientation, religion, physical or mental ability, political beliefs, racial or ethnic origin or age.

Students will only successfully develop clinical skills if they can develop their own ability to respectfully give and receive feedback. Students must be honest with themselves and their partners and use professionalism to provide quality guidance and feedback to their peers to allow them to improve their skills.

Should there be any concerns that students cannot directly address with their partner, these should be brought to the attention of the faculty for that course, their personal academic advisor, or the Program Director.

When involved in simulation scenarios, students should be aware that they learn as much during the patient role playing as they do when they role play as the PA student. As such, all students are expected to be professional and appropriate when playing the role of the patient and give accurate and timely feedback.

All laboratory situations are overseen by principal or instructional faculty who are skilled clinicians and are present to ensure student learning and safety. Any student who feels unable to practice a technique through fear of harming their partner, should seek guidance from a faculty member, and request initial supervision to ensure accuracy of the technique. Likewise, any student in the role of the patient who feels that their PA student is not prepared should seek guidance from faculty in the laboratory.

9.2.2 Equipment Safety

The UAPA Program provides students and faculty access to equipment typical for the contemporary practitioner. Equipment that is used in the classrooms should be respected and treated appropriately. However, it is understood that the lifespan of any type of equipment is finite, and it is the responsibility of all faculty and students to monitor and report all faulty equipment. It should be noted that any of the equipment in the program, from high-low tables to electrical modalities, can cause injury to students or faculty if it is faulty.

If a student becomes aware of faulty equipment, they should notify the faculty responsible for their class or the module director. A note should be placed on the equipment item prior to that student leaving the classroom to inform others of the problem and where possible the equipment should be moved to a location where it will not be readily accessible.

If faculty become aware of faulty equipment or if a student notifies them of a problem, the faculty should place a note on the equipment prior to leaving the classroom and move the item, where possible, to a location where it will not be readily accessible. Faculty will then notify the Program Director (PD) with respect to the issue and the PD will notify facilities.

9.3 Gross Anatomy Lab Policies

Safety Policy: Students will be **required** to wear PPE (gloves, closed-toe shoes, aprons, safety glasses, and optional sleeve protectors) during laboratory sessions. **Masks for COVID are encouraged (subject to change based on CDC guidelines).** Safety glasses, gloves, and other protective equipment will be provided, as will dissection tools, as needed. Any issue with accessing these resources or with using PPE should be immediately discussed with your instructors to establish accommodations. MSDS are kept onsite and are available for all chemicals used in the lab.

9.4 Clinical Site Safety

Student safety and security while participating in supervised clinical practice experiences (SCPE) at clinical sites is of utmost importance to the Program. During orientation to the clinical phase of the Program, you will be provided instruction on best practices around security and personal safety while on clinical rotations. This orientation covers information about emergent and ongoing threats to safety and security and how to handle real and perceived risks and threats as well as prevention and processes to be used in the case of exposure to bodily fluids or environmental hazards. You are expected to abide by all safety measures at SCPEs.

Preceptors are instructed to orient you to safety measures and protocols specific to their clinical site on the first day of the SCPE. Section 7 of the clinical site affiliation agreement elaborates on a clinical site's responsibilities surrounding safety measures for Program participants. Some of the safety measures include immediate and direct competent supervision over student activities, all procedures include prior review and approval to ensure the safety of the patient and for all involved, and sites and preceptors agree to provide any additional training related to safety and emergency procedures.

In Arizona, all clinical partners are licensed by the Arizona Department of Health Services (ADHS), Bureau of Medical Facilities Licensing. This Bureau licenses and certifies medical healthcare institutions and providers of medical services throughout all of Arizona to protect the public's health and safety and assure quality customer service. ADHS requires all inpatient as well as outpatient clinical facilities to have plans and policies in place which complies with state safety and security mandates. The Bureau of Medical Facilities Licensing offers an online, searchable database called AZ Care Check that lists licensing history that includes deficiencies and/or enforcement actions found against facilities and providers by ADHS. AZ Care Check is Primary Source Verified, which means the provider and/or facility information generated is accurate and current.

A high proportion of clinical rotations will be in federally qualified health centers and medical centers and hospitals in Arizona which are required to attain accreditation and/or national quality assurance certification above and beyond licensing by ADHS. For medical centers and hospitals, these certifications include The Joint Commission. For federally qualified health centers, these certifications include the National Committee for Quality Assurance that assists a healthcare organization measure, assess, and improve their performance to provide safe and high-quality care for their patients.

9.5 Occupational Exposure Policy (A3.08a–c)

Student Occupational Exposure (A3.08a-c)

Students in the UAPA Program will be working in service-learning community locations, and at clinical sites both full and part time. All students must meet the mandatory medical vaccination requirements as listed on the campus health medicine pharmacy and nursing expanded immunization requirements <https://health.arizona.edu/comcopimmunizationuploads>

Compliance with all immunizations is the responsibility of the student and failure to ensure up to date paperwork can result in a student being withdrawn from a clinical affiliation or part time experience.

A further implication of being a PA student is the risk of occupational exposure to body fluids or blood. The University of Arizona has a strict policy that must be followed for any student accidentally exposed to body fluids or blood either in the academic, research or clinical settings. Please see the link below for full details of what to do in the event of a body fluid or blood exposure.

After the student's insurance has paid the claim, the college will reimburse the student for the amount they paid for the initial assessment, prophylactic treatment, and necessary tests including labs related to the exposure. The student maintains financial responsibility for medical costs beyond the care outlined above. Students are not eligible for worker's compensation benefits.

All students will be required to undergo Blood Borne Pathogens training in Edge learning annually. Additional resources and references are linked below for students requiring further information. We recommend reporting an incident as soon as safely possible after occurrence.

UA Student Exposure to Blood/Body Fluids

<https://health.arizona.edu/student-exposure-bloodbody-fluids>

University of Arizona Campus Health

<http://www.health.arizona.edu/>

University of Arizona Risk Management Services

<https://risk.arizona.edu/>

University of Arizona Non-Employee Incident Report Form: [claims](#)

Standard Precautions Utilization (A3.08a-c)

Students in the UAPA Program are developing the skills and techniques to be healthcare professionals. As such, their own health and that of their patients is critical. The use of standard precautions is a recommendation from the Centers for Disease Control. Standard precautions are based on the concept that all blood, secretions, body fluids, excretions (except sweat), nonintact skin and mucous membranes may contain transmissible infectious agents.

Standard precautions are used in all patient care environments and should be used in educational settings when appropriate. Additional precautions may be required by clinical sites.

Standard precautions will be taught throughout the program but include the following:

Barriers – this includes gloves, gown, mask and mouthpiece. All designed to prevent direct contact between the potential infectious agents.

Hand hygiene – after glove removal wash hands for the full recommendation of 20 seconds (sing happy birthday to yourself twice). Wash hands between patients.

Sharps – do not bend, recap, break or manipulate by hand used needles. Dispose of all sharps in a designated container. Use caution when disposing of a sharp instrument to prevent harm to self

Soiled patient care equipment – handle in a manner that prevents transfer of microorganisms to others and to the environment.

Respiratory hygiene (cough etiquette) – instruct others to cover nose and mouth when sneezing or coughing. Use tissues and dispose in a no touch receptacle. Perform hand

hygiene after soiling of hands from respiratory secretions. Wear a mask if experiencing a cough.

Miscellaneous – Avoid eating, drinking, smoking, applying cosmetics or lip balm and handling contact lenses in a patient care area. Avoid hand contact with mucous membranes of eyes, nose, mouth or ears. Handle all laundry carefully, especially soiled linens. Avoid unnecessary contact with a patient with a known risk. Report any incidents of contact with body fluids or waste product on an unprotected area.

Follow the policy for occupational exposure if exposed to any body fluids.

Safety of patients and human subjects used for demonstration and practice for educational purposes. The UAPA Program will be using individuals who have volunteered to attend class or are participating in service-learning opportunities. These individuals have all the same rights and privileges as any patient that the student may encounter during a clinical internship. As such HIPAA concepts must be adhered to, no posting on social media, and students must respect the fact that all individuals reserve the right to refuse intervention by any or all students on any occasion.

9.6 Harassment, Mistreatment and Grievances Policies (A1.02j)

9.6.1 Allegations of Harassment (A1.02j)

In compliance with federal and state laws, the Program will follow the policy of the University of Arizona to prohibit unlawful harassment and sexual misconduct by any person and in any form. It is committed to providing equal access to its educational programs, activities, and facilities to all otherwise qualified as without discrimination on the basis of race, national origin, color, creed, religion, sex, age, disability, veteran status, sexual orientation, gender identity, or any other category protected by applicable state or federal law. An equal opportunity employer, the University of Arizona affirms its commitment to nondiscrimination in its employment policies and practices. In compliance with Title IX (20 U.S.C Sec.1681 et seq.) The University of Arizona prohibits sex discrimination, including sexual harassment. For student- related disability discrimination concerns, contact the Office of Institutional Equity (520)621-9449. For all other concerns, including any arising under Title IX, contact the Title IX Coordinator, (520)621-9449 or submit a report at equity.arizona.edu

In addition to Title IX, harassment includes: any unwelcome behavior based on a protective classification that a reasonable person would perceive to be sufficiently severe or pervasive to create an intimidating, hostile or offensive environment. The UAPA Program takes these complaints very seriously. If an employee supervises others including, contractors, agents or students; teaches or advises students; or has management authority related to a UA-sponsored program or activity, they have certain responsibilities under the **U of A's Nondiscrimination and Anti-harassment Policy**. Therefore, University employees are responsible for promptly reporting any concern of sex discrimination (including sexual harassment, sexual assault, dating/domestic violence, and stalking) related to a student to the Office of Institutional Equity, the Title IX Coordinator, Deputy Coordinators, UAPD, or staff in the Dean of Students Office. The Office of Institutional Equity leads response for all non-emergency reports of sex discrimination impacting

students and is generally the most direct reporting option; a crime/crisis/emergency can be reported on-campus to UAPD by dialing 9-1-1.

9.6.2 Student Mistreatment and Grievances (A3.15f-g)

Mistreatment is defined as any behavior—intentional or unintentional—that disrespects the dignity of others or interferes with the learning process. Examples include, but are not limited to, discrimination, sexual harassment, unprofessional relationships, abuse of authority, and abusive or intimidating conduct.

A grievance may arise when a student believes they have been subjected to mistreatment or inappropriate behavior by a University or SHP representative (e.g., faculty, staff, or preceptors) acting within the scope of their official duties, or by an individual affiliated with the University acting outside of their professional role.

Informal Mistreatment and Grievance Resolution

Prior to bringing a grievance forward against a university office or representative acting within their role or duty, students are encouraged to attempt a good-faith resolution of the grievance.

This attempt may be made with the party directly involved with the disputed matter, or with the head of the department or unit in which the grievance arises. Please note that there are cases when it is appropriate to go directly to the formal grievance resolution process. Attempts at informal resolution should be initiated within 30 days of the incident in dispute.

Formal Mistreatment and Grievance Resolution

Should a situation arise in which a student is unable to resolve their grievance informally, the University's formal grievance process may be employed. This process, outlined below, should also be initiated within 30 days of the failed informal resolution if applicable.

Step I

A formal grievance is presented in writing to the Program Director. This written grievance must include the following:

- The name, address, and phone number of the individual submitting the grievance
- The name and title of the office, program, or individual against whom the grievance is directed
- A detailed description of the specific action, decision, or behavior that led to the grievance
- The date(s), time(s), and location(s) of the incident(s) in question
- A list of individuals who witnessed or have direct knowledge of the incident(s)

Step II

Upon receipt of the formal grievance, the Program Director or their designee will investigate the dispute. Investigation will be initiated within 1 (one) week of receiving the formal grievance. Length of investigation is dependent on the complexity and nature of the grievance.

If the grievance involves a university office or representative acting within their role or duty, the investigator will determine the involvement of pertinent supervisors, SHP leadership in the investigation. Depending upon the grievance, pertinent data (interviews, etc.) will be gathered by the investigator or the University office involved in the grievance. This data is then presented to the department for resolution. If the complainant and the respondent do not agree through informal resolution, a formal hearing becomes necessary. In a formal hearing, Vice Dean of the SHP will be consulted to determine if a panel or administrator should be appointed for further investigation and/or recommendations to the appropriate parties.

If the grievance is based on personal misconduct by a faculty member or other University employee, the investigator gathers pertinent information and presents it to either the Senior Director for Faculty Affairs and Engagement (faculty complaint) or the Office of Human Resources (staff complaint).

If the grievance is with the Program Director, the grievance should be presented in writing to the Vice Dean of the SHP. The Vice Dean or their designee will investigate the grievance.

Student Grievance (A3.15f-g)

Grievance Policy

Should a SHP student feel that they have been treated unfairly and have a grievance, there are several resources available. Most concerns can be resolved through direct communication with the course/clerkship director, curriculum lead, or program director, particularly those related to grades or academic progress.

For other grievances, the office of student affairs in the SHP can help direct the student to the appropriate resource such as the Office of Institutional Equity, Human Resources, or the Disabilities Resource Center, depending on the nature of the grievance. The SHP Student Appeals Committee (SAC) exists to review the specific formal grievances described below.

Student Appeals Committee

The Student Appeals Committee (SAC) is an ad hoc committee established by Faculty Affairs through a governance process to review and resolve appeals made by students regarding academic or disciplinary decisions as per the grievance policy below. Its primary purpose is to ensure fairness, transparency, and adherence to institutional policies in decision-making processes. The SAC is a group of faculty members and student representatives tasked with evaluating appeals submitted by students who believe they have been unfairly treated or wish to contest a decision that impacts their academic or professional progression.

Student Appeals Committee Participation

The SAC will meet once at the beginning of the academic year to review and accept responsibilities. After this initial meeting they will only meet ad-hoc based-on need. The

membership of the SAC is specified in the Bylaws of the Faculty of the University of Arizona SHP.

Grievances Reviewed by the SHP Student Appeals Committee

While the office of student affairs is available to discuss any academic or professional concerns, only grievances meeting specific criteria will be considered for formal review by the SAC. These include grievances resulting in academic or conduct dismissal, requiring the repetition of an academic year, or alleging violations of a specific SHP or University rule, regulation, policy, or practice that are not remediable by other SHP or university grievance policies/procedures and are within the decision-making jurisdiction of the SHP will be considered for formal review.

The Vice Dean of the SHP or a designated representative of the Vice Dean of the SHP shall determine whether a complaint falls within the decision-making jurisdiction of the SHP.

Examples of complaints not suitable for formal grievance review by the SAC include:

- Allegations of harassment or discrimination based on race, color, religion, sex, national origin, age, disability, veteran status, sexual orientation, gender identity, or genetic information, which are handled by the [Office of Institutional Equity](#).
- Grade appeals, which are handled directly by the course instructors, curriculum leads, and program directors. *Please see section 3.11 in this handbook.*
- Complaints against University employees or students that are covered by provisions of the [University Handbook for Appointed Personnel](#), the [Staff Personnel Policy Manual](#), and the [Student Code of Conduct](#).
- Requests of waivers of specific program policies.

Examples of complaints that are suitable for formal grievance review by the SAC include:

Academic Dismissal Appeal Procedures

- The student must submit a written appeal to the SAC Chair outlining their position and explaining why they should not be dismissed.
- The appeal must be submitted within 10 business days of receiving the Notice of Dismissal from the SHP.
- Along with the written statement the student is responsible for providing the SAC with any supporting documents that the student believes supports the appeal, including the student's transcript, correspondence with faculty and administrators, and communication from any SHP administrators.
- The student's written statement must identify one or both of the following grounds as the basis for the appeal:
 - The specific program policies do not require or support the academic dismissal.
 - The academic dismissal process was inconsistent with University or SHP policies and procedures, requiring correction through reversal or repetition of the process.
- If the SAC Chair determines the student's written appeal does not meet the required ground, the Chair will reject the appeal and notify the student of the deficiency. The student will have one opportunity to resubmit the appeal within seven (7) business days of receiving this notice.

If the SAC requires additional information before rendering a decision, they may request it from the student or College administration. The information must be directly relevant to the stated grounds for the appeal. Any information obtained directly from the College must be shared with the student, who will have two (2) business days to respond.

Conduct Dismissal Appeal Procedures

- The student must submit a written appeal to the SAC Chair outlining their position and explaining why they should not be dismissed
 - The appeal must be submitted within 10 business days of the Notice of Dismissal from the SHP.
 - The appeal must be submitted within 10 business days of the Notice of Dismissal from the SHP.

- The student's written appeal must identify one or more of the following grounds:
 - The finding of a policy violation is not supported by a preponderance of the evidence or is contrary to law or policy.
 - The student's conduct does not constitute a violation of University or the SHP policies or standards.
 - The dismissal is excessively severe under the circumstances.

- If the SAC Chair determines the appeal does not meet the required grounds, the Chair will reject the appeal and notify the student of the deficiency. The student will have one opportunity to resubmit the appeal within seven (7) business days of receiving this notice.

Requirement to Repeat an Academic Year Appeal Procedures

- The student must submit a written appeal to the SAC Chair explaining why they should not be required to pause and repeat the academic year.
 - The appeal must be submitted within 10 business days of receiving the Notice to Repeat an Academic Year from the Program Director.

- Along with the written statement the student is responsible for providing supporting documents, including their transcript and correspondence with faculty and administrators. These documents must be submitted with the written appeal.

- The student's written appeal must identify one or both of the following grounds:
 - The program's policies do not require or support the decision to terminate and repeat the academic year.
 - The decision-making process was inconsistent with University or SHP policies and procedures, requiring correction through reversal or repetition of the process.

- If the SAC Chair determines the appeal does not meet the required grounds, the Chair will reject the appeal and notify the student of the deficiency. The student will have one opportunity to resubmit the appeal within seven (7) business days of receiving this notice.

Appeal Procedures: Alleged Violation of a Specific SHP or University Rule, Regulation, or Policy
 The student must submit a written appeal to the SAC Chair explaining why they should not be held accountable to the specific rule, regulation, or policy that is in question.

The appeal must be submitted within 10 business days of the Notice of Alleged Violation. Along with the written appeal the student is responsible for providing the SAC with any supporting documents, including correspondence with faculty, administrators, and communication from any SHP administrators.

Steps	Time Limit
Student submits written appeal along with supporting documentation to SAC Chair	Within 10 business days of receiving notice of alleged violation, dismissal, or repeat year.
SAC reviews the student’s appeal packet and discusses the appeal	Within 10 business days of receipt of the student’s appeal packet.
SAC informs the Associate Dean for Curricular Affairs, of its recommendation	Within 10 business days of meeting to review the appeal.
SAC informs the Vice Dean of the SHP. The decision of the Vice Dean is final.	Within 5 days of receiving SAC’s determination.
Registrar sends notice to Grad College if student is dismissed from the program.	Within 2 days of receiving decision.

9.7 FERPA and Student Records Policy

Student Records and FERPA

The academic records for students enrolled in the UAPA Program, are maintained by the SHP Office of Student Records. We ensure that information about a student’s career with the UAPA Program is kept complete, accurate and secure.

FERPA (Family Educational Rights and Privacy Act)

The Family Educational Rights and Privacy Act of 1974, as amended (Also sometimes referred to as the Buckley Amendment), is a federal law regarding the privacy of student records and the obligations of the institution, primarily in the areas of release of records and the access provided to these records. Any education institution that receives funds under any program administered by the US Secretary of Education is bound by FERPA requirements. Institutions that fail to comply with FERPA may have funds administered by the Secretary of Education withheld.

10. Financial Policies

10.1 Tuition and Fees

Tuition and associated fees for the UAPA Program are established annually by the Arizona Board of Regents (ABOR) and are subject to change. Current and prospective students can find the most up-to-date tuition and fee information on the UAPA Program webpage and the University of Arizona Bursar's Office website:


- **UAPA Program Tuition and Fees:** [Tuition and Fees | School of Health Professions](#)
- **Bursar's Office – Tuition and Fees:** [Home | Bursar](#)

In addition to tuition, UAPA students are responsible for required university and program-specific fees. These may include, but are not limited to, course fees, clinical lab fees, technology fees, and program resource fees. Students also should anticipate expenses related to textbooks, medical equipment, immunizations, background checks, drug screening, and required professional memberships.

A detailed breakdown of anticipated program-related costs is provided to all accepted students prior to matriculation and reviewed during orientation.

The Bursar's Office manages tuition billing, payment processing, late fees, and installment plans. Students are responsible for monitoring their university account and ensuring timely payment of all tuition and fees to remain in good financial standing.

For questions about billing or payment plans, students should contact the **Bursar's Office** directly at:

 (520) 621-3232

 <https://bursar.arizona.edu>

10.2 Refund Policy (A1.02k)

The University of Arizona Bursar's Office is responsible for the processing of student tuition and fee refunds. All UAPA students are subject to the institutional tuition refund policies and timelines established by the Bursar's Office. These policies apply to all UAPA students, programs, and degrees, and ensure consistency, fairness, and transparency across the institution.

Students may be eligible for a full or partial refund of tuition and fees if they drop courses or officially withdraw from the University by the published refund deadlines. These deadlines are available on the Bursar's Office website at: [Students can review refund policies](#)

Refunds are processed automatically based on enrollment status and the date of withdrawal. After the refund deadline has passed, tuition and fees will not be recalculated or reversed, and students remain financially responsible for all charges on their account.

Students can review refund policies on the following webpages: [Bursar's Office website](#).

11. Program Operations and Communication

11.1 Student Handbook Attestation

University of Arizona Physician Assistant Program

Student Handbook Attestation Form

Academic Year: _____

Student Name (Printed): _____

Student NetID: _____

Cohort Year: _____

I, the undersigned, acknowledge that I have received, reviewed, and understand the contents of the **University of Arizona Physician Assistant Program Student Handbook**. I understand that it is my responsibility to read and become familiar with the policies, procedures, expectations, and standards outlined in the handbook.

By signing below, I affirm that:

- I agree to abide by all policies and procedures described in the handbook.
- I understand that the policies in the handbook may be updated periodically, and I will be informed of such updates.
- I agree to uphold the standards of professionalism, academic integrity, and ethical behavior expected of a student in the UAPA Program.
- I understand the consequences of failing to adhere to these standards, which may include academic or disciplinary action.
- I understand that this attestation form will be kept in my student file.

Student Signature: _____

Date: _____

Program Representative (Initial upon receipt): _____

11.2 Committee Structures

The UAPA Program uses a committee-based structure to promote shared governance, transparency, and student support throughout the educational experience. Committees are composed of program leadership, principal faculty, and, when appropriate, student representatives.

Each committee has a designated chair, and specific responsibilities related to academic and programmatic quality.

Leadership Committee

Chair: Program Director

Provides strategic oversight of program operations, policies, and resource allocation. This committee reviews and approves final recommendations from all other program committees.

Accreditation Committee

Chair: Director of Accreditation (DOA)

Coordinates program compliance with ARC-PA Standards and prepares accreditation materials, reports, and supporting documentation. Tracks ongoing programmatic self-assessment and ensures timely submission of required accreditation deliverables.

Curriculum Committee

Chair: Director of Didactic Education (DODE)

Evaluates the structure, sequencing, and delivery of both didactic and clinical curricula. The committee reviews course outcomes, student assessments, and faculty feedback to ensure curriculum alignment with program competencies and ARC-PA Standards.

Clinical Committee

Chair: Director of Clinical Education (DOCE)

Oversees all aspects of the clinical phase, including site development, student evaluation, and preceptor feedback. Ensures clinical experiences meet accreditation requirements and support student readiness for practice.

Student Success Committee (SSC)

Chair: Designated Principal Faculty Member

Monitors student academic and professional performance, supports early intervention strategies, and coordinates individualized student improvement plans. The SSC also reviews professionalism concerns and recommends actions such as remediation, probation, or dismissal.

Admissions Committee

Chair: Designated Principal Faculty Member

Manages applicant review, interview processes, and final admissions decisions using a holistic and mission-driven approach. Ensures consistency and fairness in selection practices.

12. Appendices

12.1 Frequently Asked Questions (FAQ)

Clinical Rotations

What are the clinical rotation opportunities?

Students will complete **eight** clinical rotations, including one **selective rotation**. The selective rotation allows students to pursue areas of interest, depending on the availability of clinical sites and preceptors.

How are students matched to their clinical rotations?

Clinical rotation assignments are made holistically, considering factors such as preceptor availability, specialty variety, geographic location, housing, cost, immunization requirements, and previous student/faculty evaluations.

What should I expect during my clinical experiences?

Clinical rotations are immersive learning experiences. Students will apply clinical skills under the supervision of licensed preceptors, complete required patient encounters and procedures, and participate in orientation (including EHR training). Schedules are set by preceptors within program guidelines. End-of-Rotation Exams and patient logs are required.

Curriculum & Assessments

Is there a research component?

While there is no research requirement for graduation, all students complete a **Capstone Project** during the clinical phase. This culminating academic experience typically involves a literature review and quality improvement project, presented at the end of the program.

How often are assessments given and what format do they take?

Assessments occur throughout all courses and include:

- Multiple-choice exams (MCQs)
- Written and practical exams
- OSCEs and SPEs
- Projects (individual/group)
- Skills assessments
- Oral presentations
- Self-assessments
- Preceptor evaluations

Key milestone exams include:

- End-of-Didactic OSCE and Summative Exam
- Formative PACKRAT (I and II)
- End-of-Curriculum OSCE
- MCQ readiness exam for clinical practice and PANCE

Are there opportunities for feedback and self-assessment?

Yes. Students receive formal feedback via:

- End-of-semester course evaluations
- Annual Program and Student Surveys
- Exit Survey (prior to graduation)

Faculty advisors are also available for informal feedback. Self-assessments such as personality inventories are integrated into orientation and wellness programming to support personal growth.

Student Life

Can I participate in volunteer activities while in school?

Yes! Volunteering is encouraged as a way to live out the Program's mission and engage with the community. However, students must carefully balance their academic workload and clinical responsibilities. Always consult your advisor before committing to external activities.

Can I work while in school?

See section 6.7 of this handbook for details.

Is there a mentoring program?

Yes. Each student is assigned a **faculty advisor** for one-on-one mentoring. The School of Health Professions also provides access to an **Academic Success Coach**, and peer mentoring is available through the **Thrive Center**.

Housing, Tuition, and Policies

Are there campus housing options?

Yes. Students can explore both on-campus and off-campus options:

- [On-Campus Housing](#)
- [Housing Guide](#)
- [Off-Campus Housing](#)

Early application is recommended due to limited space. While on-campus housing is not guaranteed, a waiting list is available.

What are the policies for refunding tuition or fees if a student withdraws?

See section 10.2 of this handbook for details.

International & Special Opportunities

Are there opportunities for international experience or rotations?

At this time, international rotations are not offered. The program focuses on addressing the healthcare needs of Arizona communities in alignment with its mission.