



2024-2025





**UNIVERSITY OF DETROIT MERCY  
PHYSICIAN ASSISTANT PROGRAM**

**Mission Statement**

To produce highly ethical, clinically competent medical professionals thoroughly prepared to deliver quality care and dedicated to serve diverse and underserved populations

**Vision**

To engage and support a diverse student body that through their varied learning opportunities develop the required foundational skills to become caring, confident, and capable Physician Assistants who continue to develop and master their trade throughout their professional career.

**Philosophy:**

The didactic and clinical portions of the Physician Assistant Program reflect a fundamental allegiance to the compassionate delivery of services to those in need. The Program implements this commitment through a curriculum which emphasizes the practical and policy issues of: health promotion and disease prevention; primary care delivery in urban and metropolitan communities; the team approach to delivery of care to populations with special needs; and the use of technology to support delivery of quality health care and education.

The Physician Assistant Program is committed to a student-centered approach to education and equal educational access for interested and qualified applicants. The Program strives to maintain an atmosphere of mutual respect and an environment promoting personal growth and professional advancement which culminates in the graduation of humane and ethical practitioners.

The University of Detroit Mercy is an independent, Catholic institution of higher learning which exists primarily for teaching, learning and research. Through an ongoing collaboration between students and instructors, the Physician Assistant Program encourages the development of self directed professionals, prepared for life long learning in clinical, educational and research milieus.

### **Detroit Mercy PA Program Diversity and Inclusion Statement**

The University of Detroit Mercy PA program is committed to promoting and supporting diversity among our student body. Our mission compels us to ensure that no one is denied access to a Detroit Mercy education based on their gender, race, religion, national origin or economic status. The composition of our student body reflects this commitment. Advancing diversity, equity, and inclusion supports our campus goals for diversifying the faculty and creating an inclusive campus climate for all individuals.

A Detroit Mercy education seeks to integrate the intellectual, spiritual, ethical and social development of our students. A diverse student body enriches PA education by increasing diverse perspectives that enhance new knowledge and promote opportunities to learn from others with a broad range of backgrounds and experiences. The University of Detroit Mercy PA program is committed to recruiting students of diverse backgrounds through recruitment, admissions, and support programs that support diversity, fostering the development of competent PAs of the next generation.

Detroit Mercy is committed to maintaining a safe and supportive learning environment. Students are expected to conduct themselves in a manner that supports the Detroit Mercy's mission by behaving professionally and respectfully when attending classes in person or virtually. Students are expected to refrain from illicit, exploitive, or inappropriate content in the classroom and virtual environments. Violations include 1) posting harassing, threatening, or embarrassing comments; 2) posting content that is harmful, abusive, racially, ethnically, or religiously offensive; and 3) selecting virtual backgrounds that are offensive or exploitive. Violations of this policy will be subjected to disciplinary action.

#### **PA PROGRAM WEB ADDRESS:**

<https://healthprofessions.udmercy.edu/academics/pa/>

**PHYSICIAN ASSISTANT**  
**PROGRAM**

**PHYSICIAN ASSISTANT PROGRAM**  
**ADMISSIONS POLICIES**

The Physician Assistant Program carefully abides by the nondiscriminatory admissions policy of the University of Detroit Mercy. Applications are accepted for regular admission through CASPA January 15th in the year for which admission is sought. Applicants transferring from other Physician Assistant Programs must be reviewed for admission by the end of the semester preceding the one for which transfer admission is sought.

The Physician Assistant Program recognizes categories of admission.

**REGULAR ADMISSION**: is selectively afforded to applicants who satisfy all admission requirements of the University and the Physician Assistant Program.

**CONTINGENT ADMISSION**: is afforded to applicants who appear qualified for regular

**UNIVERSITY OF DETROIT MERCY**  
**[STUDENT COMPLAINT POLICY](#)**

**COLLEGE OF HEALTH PROFESSIONS**  
**[POLICY AND PROCEDURE FOR CRIMINAL BACKGROUND CHECK](#)**

**COLLEGE OF HEALTH PROFESSIONS**  
**[POLICY AND PROCEDURE FOR DRUG SCREENING](#)**

**COLLEGE OF HEALTH PROFESSIONS**  
**[TECHNICAL STANDARDS](#)**

Located within “Health Check and Immunizations; Forms and Instructions”

**COLLEGE OF HEALTH PROFESSIONS**  
**[LATEX ALLERGY POLICY](#)**

See the “Technical Standards” link above. Latex Allergy Policy located within “Health Check and Immunizations; Forms and Instructions”

**PHYSICIAN ASSISTANT PROGRAM**  
**[LAPTOP POLICY](#)**





13. refrain from any activity which involves risk to the health and safety of a student, except with the student's informed consent, and, where applicable, in accordance with the

**10.**

## **ACADEMIC MISCONDUCT UNIVERSITY OF DETROIT MERCY**

Among the most serious academic offenses is plagiarism, submitting the words or style of another author or source without acknowledgement or formal documentation. Plagiarism occurs when specific phrases or entire passages, whether a sentence, paragraph, or longer excerpts, are incorporated into one's own writing without quotation marks or documentation. One also plag9 (W4.7 (a)-1.6 -1.141 TD [dC s9.9 (n)1doc)-1.7 (un





Application for waiver of course work must be made to the student advisor or at the time of registration unless other arrangements have been made. The course instructor may be asked to determine the equivalency of the previous course work and can recommend to the student advisor whether a waiver is appropriate or not. The student must present this recommendation and waiver form to the student advisor for approval. Final approval comes from the Dean of the College of Health Professions.

Students will receive a copy of the waiver form for their records. The original goes to the student file. Waived classes are not reflected on a student transcript. Students should be aware of the consequences of a decreased credit load on financial aid status.

### **DEGREE REQUIREMENTS**

Students must complete the program in the time determined by track (2 year or 3 year) on admission. Extension of the time to complete the program may be granted upon request to the Promotion and Progress Committee. This extension may require additional tuition.

Students must complete the "Application for Graduation" by the posted deadline (usually late January or early February prior to August graduation) to be considered for graduation. A graduation fee will be assessed.

No student may graduate with an incomplete "I" grade on his or her transcript. Students must meet the requirements for promotion to graduate from the program (see section Academic Progress).  
**Earned Hours:** The Detroit Mercy Master's Degree requires a minimum of 30 semester hours beyond the baccalaureate level.

**Residence:** The residence requirement for Detroit Mercy graduate students requires more than half the required course hours be taken at University of Detroit Mercy. See the Graduate Catalog for further information.

### **POLICY ON EXAMINATIONS**

The examination of didactic knowledge, clinical skills and professional milestones is an integral part of the teaching/learning process. The Program has established a framework for examinations, including which provides for consistent evaluation and allows for flexibility and individual differences.

#### **DEFINITION OF TERMS:**

**Examination, Exam:** any testing procedure to measure a student's knowledge base, clinical technique and problem-solving skills. This may include individual and group projects; performance demonstrations and peer review experiences. Typically, the exam length is one class period or longer.

**Comprehensive Examination:** a series of didactic and clinical testing procedures assesses cognitive, affective and psychomotor skills which occurs at the end of the didactic and clinical year.

**Quiz:** an oral, written or performance test procedure whose length typically does not exceed 30 minutes.

**OSCE:** Objective Structured Clinical Examination. A practical examination of clinical skills provided in stations.

**POPE:** Problem oriented physical examination. A practical examination evaluating the student's ability to apply appropriate clinical skills to the presented case scenario.

**FACULTY GUIDELINES:**

The faculty or course instructor will make available, within the first or second class meeting, a syllabus which specifies the nature, number, grading and due dates of the course quizzes, papers, demonstrations and examinations.

This syllabus will also outline the course policy concerning grades needed to demonstrate competency on course quizzes, papers, demonstrations and examinations and specific means for remediation of a grade.

The syllabus will inform students of the reference material from which course objectives and examination measures are constructed.

The course instructor or designated person will administer the examination(s). The person responsible will begin the examination at the scheduled time.

The instructor will make available to the students the results of quizzes, papers and examinations as soon as possible, but not longer than two weeks from the time the test was administered. The Program does not provide for the return of exam materials, but will arrange for students to review test materials at his/her request.



- x using test breaks or bathroom breaks to research test answers or share information with others
- x stealing, gaining access to, reproducing, distributing, or using unauthorized information, material, or assistance related to examinations.
- x participation in any activity which gives a student an unfair advantage over others

will not be tolerated and those caught sharing or receiving exam information will face sanctions including dismissal from the program.

Upon completing the examination, or when the allotted time for completion has expired, all testing materials must be returned to the person administering the examination.

As with other Program obligations, unavoidable absence on the day of the examination (including papers, clinical demonstrations and project deadline) must be reported to the course instructor prior to the scheduled examination time, paper deadline or other appointment.

No portion of this policy is intended to create any rights on the part of students to invalidate or raise grades with respect to courses which do not comply with these guidelines. ~~however~~, a student or instructor may request a faculty committee review of any substantial deviation from these guidelines as a basis for recommending that a student's grade be changed.

### **COMPUTER EXAMINATION POLICY**

The following policy has been established to provide guidelines on electronic testing.

1. Computer exams will be given at a time and place announced by the course instructor.

## **FUNCTION OF THE COMMITTEE**

1. To review the academic and professional progress of all physician assistant students.
2. To review academic evaluation outcome data.
3. To make recommendations to the program chair for:
  - a. Students in real or potential academic and/or professional difficulty
  - b. Students who have shown outstanding ability
  - c. Academic policy development or modification

## **COMPOSITION**

A majority of the core faculty, at least one physician assistant in community practice and the Program Medical Director. The Program Chairperson serves as the chairperson.

A majority of members of the committee will constitute a quorum. Recommendations must be approved by a majority of the voting members.

Each member of the committee will be entitled to one vote with the exception of the chairperson. The chairperson will vote only in a tie breaking situation.

## **PROCEDURAL OPERATION OF THE COMMITTEE MEETINGS**

The Promotion and Progress Committee meet on a regular basis at the end of each term. It will also meet once during the course of the term (typically at the mid semester) to evaluate progress

## **PROTOCOL FOR PROMOTION OF PHYSICIAN ASSISTANT STUDENTS**

### **GRADES:**

All grades (or equivalent report of standing) will be submitted to the program chair at the Committee meeting by the student advisor.

To achieve satisfactory academic progress leading to promotion in, and completion of the Physician Assistant Program the student must maintain an aggregate grade of B (a University GPA of 3.00). The PA Program considers a grade below B in any of the core curriculum [Clinical Medicine (PAS 524, 525, 526), Patient Evaluation (PAS 5100, 5200, 5300), Clinical Rotations ((Tj [(, 7.002 1.141 TdE(a)9.3 (c)-1.7 (3 (i)- 53081j 0.3(i)- 69b)22.2

documentation(Typhon) and participation in evaluation of the clinical experience.

Student Evaluation of Clinical Site and Preceptor The student evaluates the clinical site and preceptor based on their experience during the rotation.

Details for grading in the clinical year are provided in the Clinical Year syllabi. Due to its later publication date, those policies take precedence over this summary.

### **End of Curriculum COMPREHENSIVE EXAM:**

All students must meet a minimal level of competency prior to graduation. comprehensive exams are given in the final semester to assess competency in primary care. A passing score is outlined in the clinical year handbook must be achieved to graduate.

The exam assesses acquisition of knowledge, problem solving skills, psychomotor and clinical competencies. The exam is taken on two separate days. The **End of Curriculum Comprehensive Exam** is typically given in the final summer semester An average passing score of at least 1470 must be achieved on the written components to pass. The **Practical Clinical Comprehensive Exam** is typically given in the final summer semester. A score of at least 80% must be achieved on EACH of the station components to pass. Failure of the written exam or any part of the practical exam will require remediation on a passing grade for promotion to graduation. Failure of the comprehensive exams may result in delay of graduation. The comprehensive exam will test students on the PA Program Goals and Outcomes described previously in this manual.

Students must also complete and pass a comprehensive EKG and Radiology exam prior to graduation.

### **GRADE "I" INCOMPLETE:**

If a student has been making satisfactory academic progress, has encountered extraordinary circumstances, (e.g., illness) a course grade of "I" may be requested with an "I" Grade Petition (see appendix A). It is the student's responsibility to contact the instructor to make these arrangements. The instructor will submit a failing grade if no arrangements for incomplete work is made. Work for the course in which the "I" grade is

## **ACADEMIC PROGRESS**

At intervals during each semester and at its conclusion, the Promotion and Progress Committee will review the progress of each student. The Committee determines whether the student shall be unconditionally promoted; promoted with recognition; promoted with conditions or be subject to other action as described below

UNCONDITIONAL: Students who have demonstrated competency at or above the minimum standards will be acknowledged by the Promotion and Progress Committee. A notice from the Program Chair will be sent to the student at least once a semester. The notice will reflect the semester and course work in which the promotion was earned. A copy of this notice will be added to the student's record.

RECOGNITION: Students who have demonstrated exceptional academic performance will be acknowledged. Recognition of outstanding academic achievement is done annually at commencement

### CONDITIONAL PROMOTION includes

#### **Counseling:**

Directing a student to seek appropriate academic counseling is within the purview of the Promotion and Progress Committee. While it is advisable for students to seek assistance from instructors and university resources as a course proceeds, there may be circumstances where extra support is needed to understand certain concepts or to make up work lost for extraordinary reasons such as illness. The Promotion and Progress Committee can recommend the student establish a collaborative plan with the faculty to complete selected course objectives and incomplete work and/or seek assistance from the Student Success Center. Students will be notified of this recommendation by letter from the program chair. This letter will remain a part of the student's permanent file. In specific situations involving financial or personal elements, the Committee may recommend outside resources, including psychological support, be utilized to satisfy this category of promotion. When medical or psychiatric consultation is required or recommended, the Promotion and Progress Committee will respect patient/provider confidentiality. However, documentation of enrollment and/or completion may be required by the Committee.

## **OTHER PROCEDURAL OPERATION OF THE PROMOTION AND PROGRESS COMMITTEE MEETINGS**

### **Remediation:**

**Remediation is a process by which identified deficiencies in a student's knowledge base, skills, or professionalism are addressed in order to assist the student in achieving required**

**academic or professional competencies.**

**The remediation process occurs mainly at the individual course level.** The PA Program has established certain levels of performance as representing minimum levels of competency in each course offered in the curriculum. The standards, means of evaluation, and the procedure for course level remediation are outlined in each syllabus. All syllabi are reviewed prior to each semester by the PA Faculty Curriculum Committee.

**Remediation in the didactic phase:**

If a student fails a course assignment (exam, written assignment, skills checkoff) with a score of <80%, the instructor will post the failing grade to the Blackboard site. It is the student's responsibility to make an appointment with the instructor to determine if the assignment will need to be redone in keeping with the policies outlined in the course syllabus. The course instructor and the student will define a plan to retest or redo an assignment. This plan will be tailored to address the failed learning outcomes. Students are also required to meet with their academic advisor to keep them informed of the plan.

The plan for addressing the student's deficiencies may consist of supplemental readings, additional practice sessions, applicable self study activities, and working with relevant instructional faculty. If outlined in the course syllabus that a failed assignment (exam, written assignment, skills checkoff) must be repeated to mastery, the student will have one opportunity to complete a re-test or a re-do assignment. If the student achieves >80% on the re-test or re-do assignment in accordance with the syllabus the instructor will record a score no higher than the minimal competency level for the material. In other words, repeating work cannot increase the grade for that content area above minimal competency (80%) or B.

Students who fail their EOR exam by achieving below the program defined pass rate are given a period of ~~study~~ and then allowed to retest. If they do not achieve a minimum passing score on the second attempt, they will not pass the rotation and be referred to the Promotion and Progress Committee.

If students earn a failing evaluation of any clinical rotation, they will be required to complete another clinical rotation in that area. Students should be aware that completion of additional clinical s wh-8.1(S)Tj 0.22 Tw 0.56 0 [( ( b)-10 (y) 14.55 0 Tdnd)4 (o)]TJ [(r)ogranlo





**Suspension:**

## **PROFESSIONAL CONDUCT POLICY AND PROCEDURES**

The PA PROGRAM has established standards for determining the professional and ethical fitness of students. All students enrolled in this program are expected to adhere to a standard of ~~consistency~~ with the high standards of their new profession. Compliance with all institutional rules and regulations, city, state and federal law is expected.

Student conduct evaluations include the following considerations:

**Concern for the welfare of patients (real or mock), faculty, staff & peers as evidenced by:** a thoughtful and professional attitude manifesting concern for the total ~~provision~~ avoidance of offensive language, offensive gestures, inappropriate remarks, or remarks with sexual overtones; treatment of patients, peers, ~~staff~~ and faculty with respect and dignity both in their presence and in discussions with others

**Concern for the rights of others, shown by:** dealing with class peers, professional and staff personnel, and with all other members of the health team in a considerate manner and with a spirit of cooperation; acting with an egalitarian spirit towards all persons encountered in a classroom setting or a professional capacity regardless of race, religion, gender, sexual orientation or disability.

**Responsibility to duty, which involves:** effectively undertaking duties with alacrity and persevering until complete, or notifying responsible persons of ~~problems~~ ~~actual~~ attendance at classes, labs, rounds, conferences ~~clinical~~ duties, or offering appropriate explanation when unable to ~~be~~ present; notifying course directors and supervising house officers of absence or inability to carry out duties; seeing patients regularly and assuming responsibility for their care with appropriate supervision; identifying emergencies and responding appropriately; insuring that he/she can be located when on duty by faculty or staff personnel; dependability; and assuming an appropriate and equitable share of duties among peers.

**Teachability:** Which means accepting teaching, guidance and feedback, ~~the ability~~ discern one's own strengths and weaknesses and taking steps to correct shortcomings; acknowledging limitations; the ability to work with others and the ability to work with authority

**Trustworthiness, that is:** being truthful, ethical and intellectually ~~honest~~ honest in communication with others; acceptance of responsibility for meeting multiple demands by establishing proper priorities and by completing work; discerning accurately when supervision or advice is needed before acting and maintaining ~~confidentiality~~ confidentiality of information concerning patients.

**Professional demeanor, which means:** neat and clean appearance in attire that is acceptable as professional to the patient population; maintaining equilibrium under pressures of fatigue, professional stress, or ~~personal~~ personal problems; avoidance of the effects of alcohol or of drugs while on duty or while attending class.

It is not possible to enumerate all forms of inappropriate behavior which would raise serious questions concerning a student's status as a ~~professional~~ professional in training. The following, however, are examples of behavior which would constitute a violation of professional standards:

Harassment, harm, abuse, damage, or theft to or of any person or property including copying of copy write materials ~~on plagiarism~~ and copying software on the University of Detroit Mercy grounds or

property owned by any hospital/clinic, affiliated institution/organization, or individual to which the student may be assigned.

Entering or using the University of Detroit Mercy or affiliated hospital/clinic facilities without

sites. This includes visits to study in the hospital library and for examinations or meetings held in a clinical facility. Jeans, sweat pants and shirts, sandals and casual accessories are not considered appropriate in these settings.

While participating in any clinical Program activity outside of the University of Detroit Mercy campus students should present a professional appearance. Short white "trainee medical student" jackets with the Program identification/name tag **MUSE** must be worn at all clinical training sites. The hospital or institution issued identification badge must be worn at all times while on those sites.

**ALL PHYSICIAN ASSISTANT TRAINEES MUST BE CLEARLY AND CONTINUOUSLY IDENTIFIED AS PHYSICIAN ASSISTANT STUDENTS DURING CLINICAL EXPERIENCES.**

No other credentials will be displayed on the student I.D. badge.

Perfumes, musk, colognes or aftershave should not be worn in patient areas due to respiratory sensitivity and reactive airway disorders.

### **GUIDELINES FOR CLINICAL CONDUCT**

As the Program offers new clinical challenges, the developing professional bears the responsibility of representing the profession to patients, the public, and other members of the health care team. The following guidelines should be observed in representing the Physician Assistant profession:

- x Consistently demonstrate your concern for welfare of the patient. Be thoughtful and professional when obtaining the history and performing the physical exam. Treat patients with respect and dignity, both in your interactions with them, and in your patient related discussions with other professionals. Demonstrate your concern not only for the medical problem but for the total patient.
- x Conscientiously respect the rights of your colleagues. Characterize all of your professional encounters with cooperation, consideration and respect for authority. Strive to assume an appropriate and equitable share of patient care duties.
- x Approach your responsibilities with dedication. Be truthful in all professional communications. When meeting multiple demands, establish patient centered priorities to guide you in completion of such work.

### **RIGHTS AND RESPONSIBILITIES OF STUDENTS**

Students are assured of:

1. Academic evaluation that is honest and fair while students remain responsible for the quality of their work in all courses.
2. The right to privacy for their PA program records and communications with PA program faculty.
3. Due process as outlined in this handbook.

Responsibilities of Students



**FITNESS FOR THE PRACTICE OF THE PROFESSION**

As the result of unethical, unprofessional, inconsistent or illegal behavior(s) a student may be

5. consistently demonstrate appropriate preparation, openness to feedback, application of learning to practice, appropriate self-critical and self-reliant behavior, including a willingness to recognize and correct non-professional issues which may be adversely affecting professional performance or standards.

**Failure to perform and meet the standards outlined above may influence decisions concerning progress in the PA program, including possible dismissal from the program**

### **CONFIDENTIALITY OF MEDICAL RECORD & HEALTH HISTORY INFORMATION:**

All data gathered about the patient and his/her illness, including all items within a patient's medical history is privileged information.

1. Students should not discuss or present a patient's records in a manner or situation which would violate the confidential nature of that record.
2. Charts or contents, e.g., lab reports, etc., are not to be removed from the hospital or clinical setting.

The Health Insurance Portability and Accountability Act (HIPAA) of 1996 mandates Federal privacy protection for individually identifiable health information. Standards have been set for health care providers who transmit health care transactions electronically. While in Clinical Practice, most of the health care providers you will come in contact with will be under the HIPAA guidelines and requirements. In your studies, and during your clinical practice, you need to be aware of these requirements, and additionally, the health care provider will often train you on their HIPAA policies and practices.

Some of the pertinent requirements of HIPAA are:

- x Notifying patients about their privacy rights and how their information is used.
- x Adopting and implementing privacy procedures for the practice or hospital.
- x Training employees so that they understand the policies.
- x Designating an individual as a Privacy Officer, who is responsible for seeing that the privacy procedures are followed.
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professional interactions with patients, colleagues, other health professionals and the general public. Realizing that no code can encompass all ethical responsibilities of the physician assistant, this enumeration of obligations in the Code of Ethics is not comprehensive and does not constitute a denial of the existence of other obligations, equally imperative, though not specifically mentioned.

Physician Assistants shall be committed to providing competent medical care, assuming as their primary responsibility the health, safety, welfare and dignity of all humans.

Physician Assistants shall extend to each patient the full measure of their ability as dedicated, empathetic health care providers and shall assume responsibility for the skillful and proficient transactions of their professional duties.

Physician Assistants shall deliver needed health care services to health consumers without regard to sex, age, race, creed, socioeconomic and political status

Physician Assistants shall adhere to all state and federal laws governing informed consent concerning the patient's health care.

Physician Assistants shall seek consultation with their supervising physician, other health providers, or qualified professionals having special skills, knowledge or experience whenever the welfare of the patient will be safeguarded or advanced by such consultation. Supervision should include ongoing communication between the physician and the physician assistant regarding the care of all patients.

Physician Assistants shall take personal responsibility for being familiar with and adhering to all federal/state laws applicable to the practice of their profession.

Physician Assistants shall provide only those services for which they are qualified via education and/or experiences and by pertinent legal regulatory process.

Physician Assistants shall not misrepresent in any manner, either directly or indirectly, their skills, training, professional credentials, identity or services.

Physician Assistants shall uphold the doctrine of confidentiality regarding privilege patient information, unless required to release such information by law or such information becomes necessary to protect the welfare of the patient or the community.

Physician Assistants shall strive to maintain and increase the quality of individual health care service through individual study and continuing education.

## **DISCIPLINARY SANCTIONS FOR VIOLATIONS OF PROFESSIONALISM**

Students who fail to meet the standards specified in the Program policy on attendance, professional decorum, clinical conduct or professional ethics are subject to sanctions including, but are not limited to, warning, reprimand, probation and dismissal. The Physician Assistant Program and Progress Committee is the determining authority for PA student misconduct, warning, reprimand or probation for professional misconduct. The Office of the Dean of the College of Health Professions will adjudicate all matters involving dismissal for professional misconduct.

#### WARNING:

A warning is verbal or written to a student for misconduct that is found to be an isolated, promptly correctable, and does not violate specific Program, University policy or jurisdictional law. A warning may be issued by any faculty member, adjunct instructor, or any representative of the University of Detroit Mercy. Warnings are reported to the Promotion and Progress Committee and Program Director/Chair for informational purposes. Temporary entry is made into the student record and made permanent if further action is required. Warning letter(s) is/are removed upon successful completion of education.

#### REPRIMAND:

A reprimand is a written letter to a student for misconduct that is found to be more serious than the above, but is still felt to be isolated, promptly correctable, does not violate specific Program, University policy or jurisdictional law. Reprimand may be issued by any faculty member or administrator of the University of Detroit Mercy. Reprimands are reported to the Promotion and Progress Committee and the Dean of the College for informational purposes. A copy is placed in the student's record.

#### PROBATION:

In a more serious breach of professional standards, a student may be placed on disciplinary probation. Provisions included in probation will be decided by the Promotion and Progress Committee of the PA Program. Such provisions may include a P2 (e p)2ee4(l)BDC -0.002299 (ns)46,

## PROFESSIONAL AND ACADEMIC MISCONDUCT

Persons involved in this process must read this entire document

Students who engage in professional or academic misconduct, or who are deemed unfit for the practice of medicine, are subject to discipline. The University has the right, at its discretion, to impose any penalty or combination of penalties in any order, depending on the severity of the misconduct or violation that has occurred. It is recognized that “progressive discipline” is not required, and that immediate dismissal is an appropriate discipline for certain misconduct, regardless of whether there has been previous discipline.

The following list is examples of misconduct, which may result in discipline. This list is illustrative and is **not** exhaustive, and is not to be read as a limitation of the University's general disciplinary powers, nor does it limit the University's right to discipline for infractions that are not listed. Discipline, up to and including dismissal may be imposed, for any of the following:

Discrimination, harassment or retaliation;  
Verbal or physical abuse or intimidation;  
Inappropriate off-campus activity;  
Breach of ethical standards;  
Substance abuse;  
Lying with regard to any professional or academic issue;  
Forgery, Stealing, or other Illegal Acts;  
Student Academic Misconduct, including cheating or plagiarism;  
Clinical Breaches or Misconduct;  
Damage to University, student, faculty, employee or patient property;  
Computer or technology abuse or tampering.

It should be noted that instances of professional misconduct sometimes arise from ill-willed attempts at humor. It should be understood that malicious or inappropriate intent is not a necessary element of professional misconduct. Individuals, who engage in any of the above behaviors, or other forms of professional or academic misconduct, will not be allowed to use humorous intent as a defense. If there is any question as to whether a remark, joke, or other reference intended to be humorous might be insulting, degrading, or offensive, the PA professional should refrain from making the remark or reference.

1. **Discrimination, Harassment or Retaliation:** Any discriminatory, harassing or retaliatory action toward a student, faculty or staff member or patient which is based upon race, color, ethnicity, gender, national origin, physical or mental disability, sexual preference or other category protected by Federal, State or local law. (See also, Sexual Harassment Policy in this Handbook)
2. **Verbal or Physical Abuse or Intimidation:** Verbally or physically abusive behavior or vulgar language directed toward or in the presence of any student, faculty, or staff member or patient, including overt or implied threats to the personal or physical well-being of the individual.
3. **Inappropriate Off-Campus Activity:** Off Campus activity can constitute professional or academic misconduct, and subject the student to discipline. Any off campus activity



9. Clinical Breaches or Misconduct Clinical breaches or misconduct include failure to follow faculty directions, clinical protocol or guidelines, performing any procedure without proper authorization and approval, violations of patient or faculty trust or any intentional acts that could potentially result in harm to patients, colleagues, staff or faculty. Breaches may include, but are not limited to, failure to:
  - a. Maintain confidentiality of patient records; removal of records from school premises or incorrect storage of patient records
  - b. Demonstrate concern for the welfare of patients, real or simulated.
  - c. Demonstrate concern for the rights of others
  - d. Effectively meet one's duties including notification of responsible persons, punctual attendance, notifying appropriate individuals of absences or inability to carry out responsibilities
  - e. Maintain professional demeanor
  - f. Adherence to infection control, privacy and other federal, state or local regulations
10. Damage to or Theft of University, Student, Faculty, Employee or Patient Property: Prohibited damage or theft includes damage or theft of equipment, furniture, building walls or structure, lockers and preclinical or clinical facilities, laboratories, uniforms, clinical supplies, whether owned by the University, other students, faculty, employees or patients
11. Computer or Technology Abuse or Tampering Physical damage to any computer or other equipment as the result of anything other than excusable accident or normal wear and tear. Prohibited behavior also includes use of computer or other technology to send any inappropriate email or message, or to alter any academic, patient or University record or document.

## APPEAL OF A PROMOTION AND PROGRESS COMMITTEE DECISION:

Refer to the College of Health Professions academic ["Appeals"](#).

Composition of the Appeal Committee The program chair will appoint an Appeal Committee as a sub-committee of the Promotion and Progress Committee and designate the chairperson. The Committee shall consist of PA faculty members (2), the public member of the promotion and progress committee, the medical director and one CHP faculty member who is a PA. Any person selected for the Committee may decline to participate due to perceived or real conflict of interest in the proceedings. A simple majority of the invited members of the Committee will constitute a quorum. Decisions must be approved by a majority of the members in attendance.

## POLICIES OF THE PHYSICIAN ASSISTANT PROGRAM

### EMPLOYMENT POLICY

Students enrolled in the Physician Assistant Program are not excused from program classes or clinical obligations because of full or part-time outside employment. When continuation of employment is essential, students should enroll in the yeartrack of studies. Students are expected to balance their commitments to give priority to and fulfill all educational responsibilities. Students in the clinical year of training are not eligible for deceleration or employment.

The Michigan Public Health Code clearly states the qualifications and conditions of Physician Assistant practice. Physician Assistant students may render services nor use the title "physician assistant student" for compensation. No physician assistant student may practice or train in any site not sanctioned by the University or school in which they are enrolled.

### POLICY ON MEDICAL MALPRACTICE INSURANCE

Students in the University of Detroit Mercy Physician Assistant Program are covered under the institutional policy for medical liability associated with training activities during the didactic and clinical portions of the program. Students may be charged a fee for this liability coverage. Students who are not registered each semester in the PA program and are not assigned to a particular clinical site are NOT covered by the student liability policy.

The liability policy will not cover the student in activities not directly sanctioned and supervised by the Program. The policy will not cover students who are on leave or otherwise not enrolled. The policy will not cover the student in any employment setting.

### CPR REQUIREMENTS

Approved 10/06

In light of the recommendations made by AHA and other public health organizations that all citizens, especially those in the health care industry should be certified in Basic Life Support, the University of Detroit Mercy Physician Assistant Program requires that all PA students be certified prior to start of clinical rotations. Certification or recertification will not be part of a course, but will be a standalone session to be scheduled at the student's expense.

Prior to the start of clinical rotations, all students are required to present evidence of current certification for cardiopulmonary resuscitation (CPR), Healthcare Provider Course. The certification card must indicate you completed the **Healthcare Provider Course**. If the American Red Cross issues the card, it must indicate you completed the **CPR Professional Rescuer**.  
**CPR certification must be current for the entire year in which the student is on clinical rotation.**

CPR courses are available through several agencies, including the American Red Cross a-2 (s)-1 (10 (a

. Students who are not certified will not be scheduled for clinical rotations. Students will be required to keep their original certification card and provide only a copy to their advisor prior to clinical rotations. The PA program will not replace lost certification cards. Students who require additional proof of certification must contact the issuing agency for replacement certification. This will be at the expense of the student.

## **STUDENT HEALTH POLICY**

Approved 2015

### **OSHA**

The Program and the University observe and enforce all applicable OSHA standards for blood borne pathogens. The Program offers and requires DETROIT MERCY College of Health Professions annual education regarding these pathogens and the risks of exposure.

The Program utilizes only those clinical training sites which comply with OSHA standards for availability of protective equipment against exposure;

The University reserves the right to limit or curtail a student's clinical opportunities in the event that proof of completion of the annual education on blood borne pathogens is not available, and required records of student health are not submitted and maintained.

From: The Centers for Disease Control and Prevention [Recommended Vaccines for Adults | CDC](#)  
[Bloodborne Infection Disease Exposure Control Plan](#)

### **Health insurance coverage and Health Services**

PA students are required to have health insurance while attending the PA program. Information regarding student health insurance is available through the University Student Health Center 313-993-1185 or online at the link above.

Health care services are not available to students through the Program clinical sites. Limited services are available through the Student Health Service. The University of Detroit Mercy reserves the right to modify a student's clinical experience as needed by individual clinical sites based upon health insurance status.

### **Personal Counseling**





## POLICY ON STUDENT PROFESSIONAL ACTIVITIES

The Physician Assistant Program encourages its students to participate in the professional activities of their new profession. The Program provides opportunities for students to attend professional meetings and workshops sponsored by local, state and national physician assistant organizations.

Students are expected to actively participate in the endeavors and leadership of the William Beaumont Society chapter of the AAPA Student Academy (SAAAPA) as well as those of the Michigan Academy of Physician Assistants.

The Program will make every effort to accommodate reasonable schedule revisions needed for student representatives in these professional pursuits.

As representatives of the University of Detroit Mercy Physician Assistant Program, all students attending

require students apply only through the financial aid office.

When applying for financial aid, the student must consider all educational expenses including basic living costs. Be sure to include, in addition to tuition, medical insurance, room and board, books, medical equipment, personal expenses, professional dues and transportation.

PA student financial aid information is published by the Student Academy of the AAPA (SAAAPA). Students should keep in mind that individual "tuition future-work" arrangements are another source of funding assistance which many students have taken advantage of in the past. Students must apply for financial assistance annually and eligibility may change from year to year. Remember, any significant changes in expenses or income should be brought to the attention of the financial aid office at the time it occurs as it may affect your current financial aid status.

[SAAAPA FINANCIAL AID INFORMATION](#)

[UNIVERSITY FINANCIAL AID OFFICE](#)

**PHYSICIAN ASSISTANT PROGRAM**  
**UNIVERSITY OF DETROIT MERCY HISTORICAL BACKGROUND**

The Physician Assistant program began in 1972 at Mercy College of Detroit as an expression of the mission of both the College and the sponsoring body, the Religious Sisters of Mercy. Both organizations have a commitment to service as the central theme of their missions. This was tangibly addressed with the establishment of the Physician Assistant Program in response to the need for health care professionals to serve in areas with limited access to health providers and services.

Given the proximity to the many other resources in metropolitan Detroit, Mercy College was uniquely situated to implement and sustain a training program such as that necessary for the education of physician assistants. In addition to the educational resources of the College, Mount Carmel Mercy Hospital, located two miles from the college, provided a wealth of clinical resources. This hospital was a major teaching center with a strong commitment to serving inner city residents of Detroit. Growing out of this strong affiliation with Mount Carmel Mercy Hospital, many other clinical facilities and experiences evolved to address the health service needs of inner city and other medically underserved groups. The range of clinical facilities and experiences now available to the program represents a dynamic spectrum of health care delivery in the United States. These facilities encompass all aspects of care and clientele. Beginning in the 1991-1992 academic year, Mercy College of Detroit synergistically joined forces with the University of Detroit. The new University of Detroit Mercy is an independent Catholic institution of higher learning whose mission includes compassionate service to persons in need, the service of faith and the promotion of justice and, a commitment to quality education.

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Physician Assistants. Since then, the philosophy has gained wider acceptance and programs to prepare midlevel health practitioners have multiplied. The federal government has played an important role in the development and expansion of the PA concept by providing both start-up funds and continued financial support.

Originally limited to former military personnel, the training programs now draw on a large pool of applicants from a wide variety of health-related backgrounds. In December, 1971, the House of Delegates of the AMA adopted "Essentials for an Educational Program for the Assistant to the Primary Care Physician" establishing specific standards for the education of Physician Assistants and providing a mechanism for review and survey visits. The accreditation process is currently under the supervision of the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA) composed of representatives from various medical and educational organizations. The University of Detroit Mercy is one of the 6 accredited programs in Michigan. Currently, there are over 200 programs accredited by ARC-PA.

State support for the Physician Assistant concept in Michigan was formalized in 1972 when Public Act 312 established an Advisory Commission to set standards for educational programs. Subsequent legislative action was taken to regulate the employment of PAs and to amend both the medical and osteopathic practice acts to conform to these regulations. The PA Task Force, in conjunction with the Michigan Department of Community Health, licenses PAs and oversees their activities within the state.

The American Academy of Physician Assistants defines the Physician Assistant as the following.

Physician Assistants are health professionals. They are licensed to practice medicine with physician supervision. PA's are qualified by graduation from the accredited educational program and/or certification by the National Commission on Certification of Physician Assistants. Within the physician/ PA relationship, PA's exercise autonomy in medical decision making and provide a broad range of diagnostic and therapeutic services. The clinical role of the Physician Assistant is defined by the American Academy of Physician Assistants. (ARC-PA) (v)4 -2 (t)erheaoeiheanJhebm[(s)-1 (i)22 (

2006 four key PA organizations, the American Academy of Physician Assistants, the Accreditation Review Commission on Education for the Physician Assistant, the National Commission on Certification of Physician Assistants and the Physician Assistant Education Association collaborated to produce the Competencies for the Physician Assistant Profession. This document identifies six major areas for clinically practicing PAs: medical knowledge, interpersonal and communication skills, patient care, professionalism, practice based learning and improvement and systems based practice.

Services performed by Physician Assistants include but are not limited to the following:

**EVALUATION:** Initially approaching a patient of any age group in any setting to elicit a detailed and accurate history, perform an appropriate physical examination, delineate problems, and record and present the data.

**MONITORING:** Assisting the physician in conduction rounds in acute and long inpatient care settings, developing and implementing patient management plans, recording progress notes and assisting in the provision of continuity of care in office based and other ambulatory care settings.

**DIAGNOSTICS:** Performing and or interpreting at least to the point of recognizing deviations from the norm, common laboratory, radiologic, cardiographic, and other routine diagnostic procedures used to identify pathophysiologic processes.

**THERAPEUTICS:** Performing routine procedures such as injections, immunizations, suturing and wound care, managing simple conditions produced by infection or trauma, assisting in the management of more complex illness and injury, which may include assisting surgeons in the conduct of operations and taking initiative in performing evaluation and therapeutic procedures in response to life threatening situations.

**PATIENT EDUCATION and COUNSELING:** Instruction and counseling patients regarding compliance with prescribed therapeutic regiments, normal growth and development, family planning, emotional problems of daily living and health maintenance.

**REFERRAL:** Facilitating the referral of patients to the community's health and social service agencies when appropriate.

Assistants can provide patient care services such as application and removal of casts, suturing wounds, changing dressings and monitoring the progress of ill patients.

As members of the health care team, physician assistants can provide valuable and flexible support for their physicians. They can be used both in office and in hospital settings. They can make home visits and call upon patients in nursing homes. Consequently, proper utilization of PA services can enable the physician's practice to operate in a more efficient and effective manner.

### Regulation

Currently all states, have enacted some type of regulatory mechanisms for physician assistants. Although the statutes vary, the mechanism most often proposed or enacted vests authority in the State Board of Medical Examiners, or a similar state agency, to oversee the utilization of physician assistants through an exception to the State Medical Practice Act which recognizes the physician's right to delegate tasks to a trained assistant.

### Third Party Reimbursement

The costs and benefits of employing PA's are crucial issues to potential employers, to third party payers, to patients, and to PAs themselves. Cost containment is a major issue on all spheres of living today. For the PA profession, it is critical that health services provided by PAs be of significant value in reversing inflationary trends in the cost of medical care. At the same time, it must be recognized that unless third party reimbursement plans will pay for services provided by a physician extender, there may be little advantage to a physician hiring one.

In February of 1979, the Rural Health Clinic Act was passed by the U.S. Congress which provides direct reimbursement for services performed by a physician extender in specific health clinics in medically underserved areas. This reinforces the government's intention that PAs and other extenders should be aimed specifically at such underserved areas for the provision of primary care.

The Omnibus Budget Reconciliation Act of 1986 incorporated language on Medicare Reimbursement for Physician Assistant services. Effective January 1, 1998, PAs are reimbursed at 85% of the physician fee when treating Medicare patients for services provided in the office or clinic. When following guidelines for "incident" to provision, services are covered at 100% of the fee scheduled.

National Certification and Continuing Education / MC / DDON



### Publications

Members of the Academy and Association are kept informed of national, state, and local developments through "The PA Professional". The Journal of the American Academy of Physician Assistants serves to improve communication between members of the Academy and as a forum for the exchange of educational, scientific and medical information. The Physician Assistant Education Association publishes quarterly the "Journal of Physician Assistant Education" and annually the "Physician Assistant Programs Directory" for those interested in learning more about the various educational programs.

There are currently some 3500+ practicing PAs in Michigan. As of 2013, there were over 1,100 University of Detroit Mercy trained Physician Assistants caring for some 2 million patients each year.

[PA History Society](#)



# Appendix A

## Forms

["I" grade petition form](#)

[Consent form, background check form, disclosure form, health record form/technical standards form](#)

### **Authorization to Release Student Information**

The undersigned grants permission to the University of Detroit Mercy Physician Assistant Program furnish information and opinions concerning my academic achievement and standing during the course of didactic and clinical education in the Physician Assistant Program at the University of Detroit Mercy. Information covered by this release includes but is not limited to: GPA; summary of clinical rotation evaluation(s); grades in specific modules of the clinical medicine course; summary of academic progress; status of promotion (honors; probation...etc); date of entry and completion; community service; professional activity; student society membership/officer; and additional information specified below:

\_\_\_\_\_  
\_\_\_\_\_

I further grant permission for the faculty to provide information on my general reputation, character, conduct and work quality; and an assessment of my qualifications for employment; whether same is a matter of record or not, including personal evaluation of my honesty, reliability, carefulness and ability to take orders from my superiors. I understand that this may include a record of disciplinary action assessed during my academic career.

This authorization specifically excludes information submitted through the application process. It also excludes:

Information contained in transcripts from other institutions, which may be included in the student's file.

Information in the health and medical records of the student.

I hereby release the University of Detroit Mercy, the Physician Assistant Program, its faculty and agents from any and all liability, which may result in furnishing such information or opinion. I hereby release the organization and any representative from the obligation to provide me with written notification of such disclosure.

This release will expire on the first day of January following graduation or separation from the program unless specifically extended in writing by the student.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name Printed

\_\_\_\_\_  
Student ID #

COLLEGE OF HEALTH PROFESSIONS  
**Student Hepatitis B Vaccine Declination**

I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring or transmitting Hepatitis B virus (HBV) infection. However, I decline Hepatitis B vaccination at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring Hepatitis B, a serious disease. If, in the future I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with Hepatitis B vaccine, I may do so.

Reference: Appendix A, 29 Code of Federal Regulations 1910.1030 Occupational Exposure to Bloodborne Pathogens. Occupational Safety and Health Act.

I, \_\_\_\_\_, have decided not to receive injections of the (print name)

Hepatitis B vaccine as required by the University of Detroit Mercy.

Date \_\_\_\_\_ Signature \_\_\_\_\_

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