This Handbook is published by The University of South Dakota School of Health Sciences Physician Assistant Studies Program. The faculty reserves the right to alter the curriculum, the schedule of required courses, and other regulations affecting admission and graduation requirements. Any changes apply to all current and prospective students. Students are expected to keep themselves informed about these changes.

It is the policy of The University of South Dakota to provide all persons with a high quality education. No person shall be excluded or denied this education on the basis of race, color, national origin, sex, religion, age, or handicap; nor shall they be otherwise discriminated against in the admission process or in their participation in educational programs or activities. Discrimination shall not be tolerated in any service or operation including recruiting, testing, counseling, awarding of financial aid, teaching, assignment of work-study and assistantships, granting of degrees, or participation in University sponsored student recreation or organizational activities.

Each member of The University community is responsible for adhering to and implementing this policy. Employees and students will be subject to disciplinary action for violation of this policy.
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University of South Dakota School of Health Sciences  
Physician Assistant Studies Program  
414 East Clark Street, Vermillion, SD 57069  
Ph: 605.658.5926  FAX: 605.677.6569  
Website: [www.usd.edu/pa](http://www.usd.edu/pa)  
Student Resources: [http://link.usd.edu/pa](http://link.usd.edu/pa)

## FACULTY & STAFF CONTACT INFORMATION

If you are unable to contact the individual needed, leave a message including your name, phone number, and the time you may be available to receive a return call.

### FACULTY

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Contact Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wade Nilson, EdD, MPAS, PA-C</td>
<td>Program Chair, Associate Professor</td>
<td>605-658-5931, <a href="mailto:Wade.Nilson@usd.edu">Wade.Nilson@usd.edu</a></td>
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<tr>
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<td>Professor</td>
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</tr>
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</tr>
<tr>
<td>Betty Hulse, MSPAS, PA-C</td>
<td>Associate Professor, Clinical Coordinator</td>
<td>605-658-5934, <a href="mailto:Betty.Hulse@usd.edu">Betty.Hulse@usd.edu</a></td>
</tr>
<tr>
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<td>Associate Professor</td>
<td>605-658-5926, <a href="mailto:Julie.Johnson@usd.edu">Julie.Johnson@usd.edu</a></td>
</tr>
</tbody>
</table>

### MEDICAL DIRECTOR

- **Bruce Vogt, MD**  
  Professor  
  [Bruce.Vogt@usd.edu](mailto:Bruce.Vogt@usd.edu)

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  Program Assistant II  
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  [Doug.Standley@usd.edu](mailto:Doug.Standley@usd.edu)

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  Education Assistant  
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INTRODUCTION

This document is presented to each student accepted into the University of South Dakota Physician Assistant Studies Program for his/her thorough review and understanding. It contains essential information about basic policies governing academic performance and student conduct, which are applicable to all students. These policies are unique to the PA Program and establish the standards for academic competence, professional discipline and personal responsibility.

Each student enrolled in the Program is expected to read these policies, understand them, and keep them available for quick reference. Additionally, students are encouraged to seek clarification from the Program Director about any sections students do not understand. Accompanying this document is a declaration to be signed by each student. By signing this declaration, the student declares that he or she (1) understands all policies described herein, (2) understands that these policies apply to all aspects of the student’s academic progress and personal conduct as long as the student is enrolled in the Physician Assistant Program, and (3) agrees to follow these policies as long as the student is enrolled in the Program.
HEALTH AFFAIRS ORGANIZATION CHART

Organizational Chart
July 2019

[Diagram of the Health Affairs Organization Chart, showing various positions and departments within the University of South Dakota School of Health Sciences, including names and titles of staff members.]

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MISSION STATEMENT

The Physician Assistant Studies Program at The University of South Dakota provides a comprehensive primary care education that prepares graduates to deliver high-quality health care to meet the needs of patients in South Dakota and the surrounding region.

To accomplish this mission, the USD PA Program:
- Promotes the ideal of a competent, caring, and compassionate physician assistant
- Supports excellence and professionalism
- Fosters an evidence-based approach to patient care
- Expects students to be accountable for individual learning
- Expects faculty and students to be partners in the educational process.
- Empowers students to be lifelong learners
- Selects individuals likely to practice in South Dakota and the surrounding region
- Fosters interest in primary care to rural and underserved populations
- Selects individuals who have the interpersonal aptitudes and maturity necessary for successful practice as a physician assistant

Physician Assistants and students should demonstrate the following core beliefs, attitudes, and behaviors at all times:
- Professional and personal ethical behavior
- Honesty and integrity
- Compassion
- Service to those in need
- Advocacy for an interprofessional approach to healthcare and collaborative practice
- Commitment to lifelong learning
- Sensitivity to cultural and individual differences
- Promotion of the physician assistant profession and its ideals
PA STUDENT OBJECTIVES

The education of a physician assistant involves developing a broad base of general, scientific, and medical knowledge, and developing strong interpersonal, professional, and clinical skills. This skill and knowledge base is acquired through pre-professional education and experience in the PA Program’s Preclinical and Clinical phases of education which ultimately lead to graduation from the program. After the conclusion of this formal education program, a PA’s education continues through a process of life-long learning that involves both formal continuing education programs and individual study.

The overriding objective of the program is to provide program graduates with the demonstrable ability to identify, analyze, and manage clinical problems in order to provide effective, efficient and humane patient care with physician supervision. The University of South Dakota Physician Assistant Studies Program is designed to provide students with the skills and activities that enhance their professional and personal growth as physician assistants. The graduates will be able to demonstrate:

1. Obtain a complete and accurate medical history from multiple types of patients in different types of settings.
2. Write a complete and accurate medical history from multiple types of patients in different types of settings.
3. Perform a complete or problem focused physical exam on multiple patient types of patients in different settings.
4. Clearly and effectively communicate with patients, their families, and other members of the health care team.
5. Demonstrate knowledge of the structures of the human body and how they function at the physiology level.
6. Demonstrate knowledge of the epidemiology, etiologies, risk factors, and underlying pathophysiologic process of medical conditions.
7. Demonstrate knowledge of the principles of drug absorption, distribution, action, toxicity and elimination.
8. Construct a list of differential diagnoses to formulate a final diagnosis by interpreting information derived from the history, physical exam, diagnostics, and other patient related information.
9. Demonstrate the ability to perform common technical procedures.
10. Demonstrate patient evaluation, monitoring, diagnostic/therapeutics, counseling and appropriate referral skills.
11. Appraise and critically evaluate medical literature for the benefit of patients.
12. Discuss the health care delivery system and the role of the physician assistant.
13. Demonstrate ethical behavior and professional conduct.
Medical education entails the acquisition of scientific knowledge, the development of clinical skills, and the acceptance of professional attitudes and behavior. This involves commitment to a rigorous academic program and an equal commitment to medical education and service. These can only be achieved by highly prepared, motivated and intelligent individuals. Recognizing this, the admission standards for a physician assistant program must be rigorous and exacting, and admission to the USD School of Health Sciences Physician Assistant Studies Program must be offered only to those who are best qualified to meet these performance standards. The University of South Dakota Physician Assistant faculty has developed a very selective admission process that admits only the most qualified applicants.

The education of USD physician assistants can be divided into four phases:

- A Preparatory Phase that involves the completion of:
  - a minimum of a baccalaureate degree
  - prerequisite courses prior to entry into the USD PA Program
- A Preclinical (Didactic) Phase that involves successful completion of advanced courses in:
  - the basic sciences,
  - the practice of clinical medicine, and
  - a research project
- A Clinical Phase that consists of a series of clinical experiences under supervision as designated in the clinical year handbook
- A Continuing Medical Education Phase relies on PA graduates to maintain the highest level of medical practice through a life-long program of independent medical study.

Graduation from the USD PA Studies Program certifies that each PA graduate has acquired the knowledge and skills needed for practice as a primary care physician assistant. Students are required to possess the physical and mental capabilities necessary to function fully as PA clinicians and representatives of the PA profession.

Preclinical Phase courses of the PA curriculum include Pharmacology, Physiology, Anatomy, Clinical Basic Sciences, Research Perspectives, Professional Practice, and Clinical Medicine. All are taught using a variety of educational methods, and all are taught at sufficient depth and breadth to ensure that students have an adequate knowledge base prior to entry into the Clinical Phase. In addition, all students are required to complete a Master's project. During the Clinical Phase, students are given the opportunity to participate in the supervised care of patients in family medicine, internal medicine, pediatrics, general surgery, psychiatry, obstetrics and gynecology, emergency medicine, and elective areas of the student’s choice. The clinical phase of the curriculum includes the study of mental and physical disease, as well as preventive medicine and the socioeconomic aspects of health and disease. This involves exposure to in-patient, out-patient, surgical, long term and emergency patients, although individual clinical experiences may vary somewhat between students.

**PROGRAM ACCREDITATION**

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

Accreditation remains in effect until the program closes or withdraws from the accreditation process or until accreditation is withdrawn for failure to comply with the Standards. The approximate date for the next validation review of the program by the ARC-PA will be March 2023. The review date is contingent upon continued compliance with the Standards and ARC-PA policy.
## Tentative Class Schedule – Class of 2021

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<thead>
<tr>
<th>Course</th>
<th>Credit</th>
<th>Semester hours</th>
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<tr>
<td><strong>Semester I: Didactic – 07/22/2019 – 12/18/2019</strong>&lt;br&gt;Spring 2019</td>
<td></td>
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<tr>
<td>ANAT 711 Gross Anatomy</td>
<td>6</td>
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<tr>
<td>CPHD 701 Introduction to Clinical Basic Sciences</td>
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<tr>
<td>PHGY 730 Human Physiology</td>
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<td>PAST 718 Research Perspectives</td>
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<tr>
<td>PAST 720 Professional Practice 1</td>
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<tr>
<td><strong>Semester II: Didactic – 01/02/2020 – 05/08/2020</strong>&lt;br&gt;Spring 2020</td>
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<tr>
<td>PAST 714 Clinical Medicine 1</td>
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<tr>
<td>PAST 722 Professional Practice 2</td>
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<td>PHAR 720 Pharmacology</td>
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<tr>
<td>PAST 788 Masters Project</td>
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<td><strong>Semester III: Didactic – 05/11/2020 – 7/17/2020</strong>&lt;br&gt;Summer 2020</td>
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<tr>
<td>PAST 716 Clinical Medicine 2</td>
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<td>PAST 724 Professional Practice 3</td>
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<tr>
<td>PHAR 721 Pharmacology</td>
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<tr>
<td><strong>Semester IV: Clinical – 08/03/2020 – 12/18/2020</strong>&lt;br&gt;Fall 2020</td>
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<tr>
<td>PAST 763 Internal Medicine</td>
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<tr>
<td>PAST 760 Family Medicine I</td>
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<td>PAST 758 Rural/Underserved Family Medicine</td>
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<tr>
<td>PAST 751 General Surgery</td>
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<tr>
<td><strong>Semester V: Clinical – 12/21/2020 – 05/07/2021</strong>&lt;br&gt;Spring 2021</td>
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<tr>
<td>PAST 753 Pediatrics</td>
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<td>PAST 757 Behavioral Health</td>
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<td>PAST 752 OB/GYN</td>
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<td>PAST 754 Emergency Medicine</td>
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<tr>
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<tr>
<td>PAST 765 Elective II</td>
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<td>12 credits</td>
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This is a tentative schedule only and is subject to change without notice.
TECHNICAL STANDARD FOR PA STUDENTS

The University of South Dakota PA Program (USD PA) affirms that no applicant to PA School will be excluded on the basis of race, color, creed, national origin, ancestry, citizenship, gender, transgender, sexual orientation, religion, age, genetic information, veteran status, or disability. Otherwise qualified applicants with a disability will be considered in relation to the guidelines listed below.

In evaluating applicants for admission and preparing PA’s, it is essential that the integrity of the curriculum be maintained, that those elements necessary for the education of the PA be preserved, and that the health and safety of patients be maintained. While reasonable accommodation can be made for certain disabilities, those candidates and students who have a disability will be held to the same performance standards as their peers who do not have that disability.

Because the PA degree signifies that the holder is a person prepared for entry into the practice of medicine, it follows that graduates must have the knowledge, skills, and ability to function in a broad variety of clinical situations and to render a wide spectrum of patient care. Therefore, candidates for the MSPAS degree from the USD PA Program must have certain sensory and motor functions that permit them to carry out the activities described in the sections that follow. They must be able to consistently, quickly and accurately integrate all information received by whatever sense(s) employed, and they must have the intellectual ability to learn, integrate, analyze, and synthesize data.

A candidate for the MSPAS degree must have abilities and skills of five varieties including:

I. Observation
II. Communication
III. Motor
IV. Intellectual, Conceptual, Integrative and Quantitative abilities
V. Behavioral and Social Attributes

Technological accommodation may be available to assist for some disabilities in certain of these areas, but a candidate and student should be able to perform in a reasonably independent manner without reliance on a trained intermediary to replace the candidate’s judgment or power of assessment and observation.

I. Observation:
The candidate and student must be able to participate in activities determined to be essential by the faculty. This may include physiologic and pharmacologic demonstrations, anatomic dissection, microscopic studies of microorganisms, observation of tissues of normal and pathologic states, and accurate observation of the numbers and patterns on diagnostic instruments and simulations. They must be able to observe a patient accurately at a distance and close at hand with the ability to observe patient responses to physical exams. Observation necessitates the functional use of the senses of vision, hearing and somatic sensation.

II. Communication:
The candidate and student must be able to speak to, hear, and observe patients in order to elicit information, describe changes in mood, activity and posture, and perceive nonverbal communication. They must be able to communicate effectively and sensitively with colleagues and patients. Communication includes not only speech but reading and writing. They must be able to communicate effectively and efficiently in oral and written form with all members of the health care team. They must be able to read and record observations in a legible, efficient and accurate manner including the effective use of electronic documentations.

III. Motor:
The candidate and student must have sufficient motor function to elicit information from patients by palpation, auscultation, percussion, and other diagnostic maneuvers. They must be able to execute motor movements reasonably required to provide general care and emergency treatment to patients. Examples of such care reasonably required of PA’s are cardiopulmonary resuscitation, the administration of intravenous medication, placement of catheters, the application of pressure to stop bleeding, suturing of simple wounds, assisting in surgical procedures, and the performance of simple obstetrical maneuvers. They must have adequate endurance to carry out clinical activities for extended periods of time. They must possess adequate sensorimotor function and equilibrium to assume reasonable body postures when performing these skills and to perform them in a manner that does not compromise test accuracy, treatment effectiveness, or patient safety.

IV. Intellectual, Conceptual, Integrative and Quantitative Abilities:
The candidate and student must have sufficient cognitive abilities which would include measurement, calculation, reasoning, analysis, and synthesis. Problem solving, the critical skill demanded of PA’s, requires all of these intellectual abilities. In addition they must be able to comprehend three dimensional relationships and to understand the spatial relationships of structures. They must be able to perform these problem solving skills in a timely manner.

V. Behavioral and Social Attributes:
The candidate and student must possess the emotional health required for full utilization of their intellectual abilities, the exercise of good judgment, the prompt completion of all responsibilities attendant to the diagnosis and care of patients and the development of mature, sensitive, and effective relationships with patients. They must be able to adapt to changing environments, recognize multiple points of view, identify personal reactions and responses, and integrate these into clinical decision-making. They must be able to communicate with and care for, in a non-judgmental way, persons whose culture, sexual orientation, or spiritual beliefs are different from their own.

Questions about the program’s technical standards for clarification or to determine whether a student can meet the requirements with or without reasonable accommodations may be directed to the Program Director. Revealing a disability is voluntary. However, such disclosure is necessary before any accommodations may be made in the learning environment or in the program’s procedures. Information about disabilities is handled in a confidential manner. Reasonable accommodations will be made to comply with the Americans with Disabilities Act. These require program and institutional approval. Requests for accommodations must be submitted in writing, allowing sufficient time prior to matriculation for action on these requests. Students who feel that they may not meet the technical standards are encouraged to contact the Program Director to discuss and identify what accommodations, if any, can be made by The University of South Dakota and the Program so that the candidate might meet the admissions and educational standards.
Section I - General Policies
Rules, Regulations and Procedures of the USD PA Program
PA students are expected to conduct themselves with honesty and integrity. They must also remain in good academic and professional standing throughout the entire educational program.

All students are expected to be familiar with the general policies of the University, the Graduate School, the Physician Assistant Program and the rules, regulations and policies of any other institution of facility where they may be assigned. Students are held individually responsible for complying with all of the requirements of the rules and regulations set forth by The University and the SD Board of Regents. All information herein is subject to change with timely notification to students in writing. Some of these policies are included in whole or in part in the pages that follow. Refer to the online USD Student Handbook and Graduate Catalog for complete policies.

Freedom in Learning
Students are responsible for learning the content of any course of study in which they are enrolled. Under Board of Regents and University policy, student academic performance shall be evaluated on an academic basis and students should be free to take reasoned exception to the data or views offered in any course of study. Students who believe that an academic evaluation is unrelated to academic standards but is related instead to judgment of their personal opinion or conduct should contact the Dean of the college which offers the class to initiate a review of the evaluation.

ADA Policy
Any student who feels s/he may need academic accommodations or access accommodations based on the impact of a documented disability should contact and register with Disability Services during the first week of class. Disability Services is the official office to assist students through the process of disability verification and coordination of appropriate and reasonable accommodations. Students currently registered with Disability Services must obtain a new accommodation memo each semester. For information contact: Ernetta L. Fox, Director; Disability Services; Room 119 Service Center; (605) 677-6389; disabilityservices@usd.edu.

Federal Law prohibits discrimination on the basis of disability (Section 504 of the Rehabilitation Act of `1973 and Title II of the Americans with Disabilities Act). The University has designated Ms. Roberta Ambur, Vice President of Administration & ITS, as the Coordinator to monitor compliance with these statutes. Section 504 obligates USD and Ms. Ambur to provide equal access for all persons with disabilities. Ms. Ambur can be reached at Room 209, Slagle Hall, Phone: 605-677-5661

Accessibility Statement
The University of South Dakota strives to ensure that physical resources, as well as information and communication technologies, are accessible to users in order to provide equal access to all. If you encounter any accessibility issues, you are encouraged to immediately contact the instructor of the course and the Office of Disability Services, which will work to resolve the issue as quickly as possible.

Inclusive Excellence
The University of South Dakota supports an inclusive learning environment where diversity and individual differences are understood, respected, appreciated, and recognized as a source of strength.

Academic Misconduct
The phrase "Academic Misconduct" means cheating or plagiarism. Examples of behaviors that violate the academic misconduct policy include, but are not limited to the following:

1. Using any unauthorized assistance in, or having unauthorized materials while, taking quizzes, tests, examinations or other assignments, including copying from another’s quiz, test, examination, or other assignment or allowing another to copy from one’s own quiz, test, examination, or other assignment;
2. Using sources beyond those authorized by the instructor in writing papers, preparing reports, solving problems, or carrying out other assignments;
3. Acquiring, without permission, tests or other academic material belonging to the instructor or other member of the Institutional faculty or staff;
4. Engaging in any behavior prohibited by the instructor in the course syllabus or in class discussion;
5. Falsifying or misrepresenting data or results from a laboratory or experiment, or
6. Engaging in other behavior that a reasonable person would consider cheating.
7. Using, by paraphrase or direct quotation, the published or unpublished work of another person without full and clear acknowledgment;

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2. Using sources beyond those authorized by the instructor in writing papers, preparing reports, solving problems, or carrying out other assignments;
3. Acquiring, without permission, tests or other academic material belonging to the instructor or other member of the Institutional faculty or staff;
4. Engaging in any behavior prohibited by the instructor in the course syllabus or in class discussion;
5. Falsifying or misrepresenting data or results from a laboratory or experiment, or
6. Engaging in other behavior that a reasonable person would consider cheating.
7. Using, by paraphrase or direct quotation, the published or unpublished work of another person without full and clear acknowledgment;
8. Using materials prepared by another person or agency engaged in the selling of term papers or other academic materials without prior authorization by the instructor, or
9. Engaging in other behavior that a reasonable person would consider plagiarism.
10. Violation of the AAPA Code of Ethics

The only “old exams” students are authorized to have and review are those provided by the PA or Basic Biomedical Sciences faculty. Students are not permitted to have or access any old exams that are not directly provided by a PA or Basic Biomedical faculty.


The USD Physician Assistant Program reserves the right to dismiss a student, based upon the severity of the academic transgression.

If a student witnesses activity that compromises academic integrity or professional behavior standards, he or she is expected to take appropriate action to discourage this activity. This may involve confronting the individual(s) and/or reporting the activity and the individual(s) to the Course Coordinator or to the Program Director.

References
Students in the Physician Assistant Program must be familiar with all policies contained in the USD Student Handbook and USD Graduate Catalog. Although excerpts of some USD policies are included below, please refer to each document for additional information.

USD Student Handbook:
The USD Student Handbook contains policies governing the general student body, the student code of conduct, and a description of student services. It is available online at: http://www.usd.edu/~/media/files/student-life/usdstudenthandbook.ashx

USD Graduate School:
A student admitted to The Graduate School is expected to demonstrate intellectual maturity and independence in the pursuit of advanced knowledge. Graduate students are expected to meet the exacting demands of advanced learning through the use of variety of intellectual skills. Thus, a graduate degree represents more than an accumulation of hours and credits in specific competencies in a major field. The student will be judged at all stages on the above grounds and, regardless of grades in courses, may be dropped from the graduate program if progress or behavior is found to be unsatisfactory. The USD Graduate School catalog is available online at http://catalog.usd.edu/index.php - be sure to select Graduate Catalog.

Administration
The Graduate Dean exercises overall supervision and responsibility for administering the policies and procedures relating to graduate study. In collaboration with the Graduate Council, the Graduate Dean provides leadership in establishing standards for graduate education, developing new programs, and maintaining standards and guidelines for existing programs. Within the standards and guidelines of the Graduate Council, the responsibility for the development and implementation of the individual graduate programs resides with the graduate faculty of individual academic disciplines.

Student Records/FERPA Policy
The Family Educational Rights and Privacy Act (FERPA) affords students certain rights with respect to their educational records. They are 1) the right to inspect and review the student’s education records; 2) the right to request the amendment of the student’s education records to ensure that they are not inaccurate, misleading, or otherwise in violation of the student’s privacy or other rights; 3) the right to a hearing if the request to correct an alleged inaccuracy is denied; 4) the right to consent to disclosures of personally identifiable information contained in the student’s educational records, except to the extent that FERPA authorizes disclosure without consent; and 5) the right to file a complaint with the U.S. Department of Education concerning alleged failures by The University of South Dakota or any of its schools or colleges to comply with the requirements of FERPA. The complete student records policy of The University of South Dakota is available at http://catalog.usd.edu/index.php.

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Education records and personally identifiable information obtained from those records may be disclosed without the student’s consent to school officials with legitimate educational interests.

**Notice of Nondiscriminatory Policy**

In accordance with the South Dakota Board of Regents Policy 1:19, the institutions under the jurisdiction of the Board of Regents shall offer equal opportunities in employment and for access to and participation in educational, extension and other institutional services to all persons qualified by academic preparation, experience, and ability for the various levels of employment or academic program or other institutional service, without discrimination based on sex, race, color, creed, national origin, ancestry, citizenship, gender, gender identification, transgender, sexual orientation, religion, age, disability, genetic information or veteran status or any other status that may become protected under law against discrimination. The Board reaffirms its commitment to the objectives of affirmative action, equal opportunity and non-discrimination in accordance with state and federal law. Redress for alleged violations of those laws may be pursued at law or through the procedures established by the provisions of 1:18 of this policy. For additional information, please contact Khara Iverson M.A., J.D., Director, Equal Opportunity and Chief Title IX Coordinator, Room 205 - Slagle, Vermillion, SD 57069. Phone: 605-677-5651 E-Mail: Khara.Iverson@usd.edu

Admission decisions are made without regard to disabilities. All prospective students are expected to present academic credentials at or above the minimum standards for admission and meet any technical standards that may be required for admission to a specific program. If you are a prospective student with a disability and need assistance or accommodations during the admission/application process, please contact the Director of Disability Services, 119B Service Center North, USD, Vermillion, SD 57069. Phone: 605-677-6389 Fax: 605-677-3172 E-Mail: disabilityservices@usd.edu

Federal Law prohibits discrimination on the basis of disability (Section 504 of the Rehabilitation Act of 1973, The Americans with Disabilities Act of 1990, and the Americans with Disabilities Act Amendment Act of 2009. The University has designated Ms. Roberta Ambur, Vice President of Administration & ITS, as the Coordinator to monitor compliance with these statutes. This obligates USD and Ms. Ambur to provide equal access for all persons with disabilities.

**Using State Vehicles**

The following rules apply to student use of University of South Dakota state vehicles:

1. Students must have a driver’s license and proof of automobile insurance.
2. Request for a state vehicle should be made **one week** in advance of the trip.
3. Request should include the following information:
   - Day and time of departure
   - Destination
   - Number of people in the vehicle
   - Date and time of return
   - Purpose of the trip (to Sioux Falls etc…)
4. This information will be entered into the computer and students will receive two (2) copies of confirmation of a state vehicle. Students should take both copies with them when picking-up the vehicle. Students should write the beginning mileage on both copies. Upon return, they should write the return mileage and give one copy to fleet and the other copy to the PA office.

The USD state vehicle fleet is located on the Bypass Hwy 50. If you have questions, please ask the PA office staff.
Lee Medicine and Science Building Information

Food in Classroom Policy
Normally food and beverages are not permitted in carpeted classrooms at USD. Working with USD’s Custodial Services policies have been created to allow food and beverages in classrooms and small group study rooms. It is expected that all students, faculty, and staff will clean up after themselves. If a student organization holds an event that includes food, the group will be held responsible for the cleanup when the event ends. Please note that certain items should be avoided because they quickly stain carpets. These include tomato-based sauces, fruit punch, pink lemonade, or other red-colored liquids. During the year, various organizations have catered meals or fundraisers selling food in the atrium. These foods are typically taken into classrooms. Please have your menus reviewed by Andrea.Jahn@usd.edu, Laura.Wiemers@usd.edu, Steve.Waller@usd.edu prior to the event. If there is a concern, we will contact USD’s building custodial supervisors to verify the food is permitted in the classroom. If this policy is abused, food and beverages will be banned from the classrooms. Food and drink are NEVER permitted in laboratories, including Gross Anatomy, Lee Medicine and Science Building 15, and the clinical exam rooms.

Any spills or messes should be reported to LeeMedClean@usd.edu as soon as possible. The Custodial Staff will attend to the spill/mess as quickly as possible. Their normal workday ends mid- to late-morning so spills/messes reported after noon will likely be handled the next day. This email address may be used to report other problems identified within the building such as inadequate soap in dispensers, lights not working, etc. The email address is monitored by the custodial staff, representatives of Facilities Management, and Basic Biomedical Sciences staff.

The University’s contract with Aramark provides Aramark exclusive rights to all catering and food service at USD. This includes the Lee Medicine and Science Building. Essentially, all catering at Lee Medicine and Science Building, regardless of funding source, must be Aramark. Catering refers to any food provided to a group through a commercial food service business (Little Italy’s, Subway, Mr. Smith’s, etc.) and regardless of fund source (personal funds, University or organizational funds). This policy does not apply to personal food orders you might place. However, it does apply to events like journal clubs, club or organizational meetings, etc. Also, if an outside group wants to provide lunch within Lee Medicine, they MUST use Aramark or seek permission from Aramark to use another food service caterer. Working with Aramark, permission to use another vendor can be granted on a case-by-case basis. To seek an exemption from using Aramark, requests should be sent to Steve Waller (Steve.Waller@usd.edu) for forwarding to Aramark. Limited budget is rarely viewed as an acceptable reason for an exemption. Charity fundraisers that include food must also seek exemption from using Aramark. Please remember the USD contract appears to be very clear – Aramark has exclusive food service/catering rights at USD-Vermillion. Please do not assume your event is exempt without official confirmation. Confirmation may take time, please submit your requests as early as possible.

Card access policy
If your access card has been lost or broken, immediately contact Andrea.Jahn@usd.edu. The old card will be deactivated and a new card ordered and programmed. Never punch a hole in the card as this may inactivate the card. If you wish your card to be punched, please see Nicole Bennett in Lee Medicine and Science Building 202. Ms. Bennett is knowledgeable into where holes can be punched into these cards without compromising their performance. There will be a $5 charge for replacements. Never loan your card to another person. You are responsible for how your card is used.

Your program of study determines the areas you are provided access. If you feel you need access to an area but your card does not allow access, please contact Andrea.Jahn@usd.edu.

Weather Emergency
In the event of severe weather such as a tornado or severe thunderstorm, the lower level of Lee Med is the recommended safe place. All access cards provide entry into the lower level by the north or south stairwell. In severe weather, do not stand near a window or in the atrium.

Emergency Evacuation Policy
In the event that the alarm system is activated, the entire building must be evacuated regardless of time of day or weather conditions. The following procedures shall be followed.

- Upon hearing or seeing the fire evacuation signal, all persons within the Lee Medicine and Science Building will immediately begin exiting the building through the nearest available exit route. The
recommended evacuation routes are posted near or on the primary exit doors of all rooms in Lee Medicine.
  o Elevators should NOT be used during an evacuation event unless necessary for the evacuation of a disabled/handicapped person.
  o Prior to leaving the room, any open fires, hot plates, coffee pots, or similar equipment should be turned off. Electrical equipment that cannot be left unattended for prolonged periods should also be turned off prior to exiting the room.

- All persons within the Lee Medicine and Science Building that can escape the building will convene on the lawn in front of the SD Union Building or Julian Hall, located on the other side of Clark Street. This will allow quick assessment for any missing persons and avoid interference with the emergency responders. In the event of weather conditions where shelter is desired, please move away from the Lee Medicine and Science Building and go inside either Julian Hall or SD Union Hall for comfort and safety.
- All persons within the Lee Medicine and Science Building that CANNOT safely exit the building will convene in the designated “safe rooms”. These are the small meeting rooms located on the west side of the building on both the second and third floors that overlook the parking lot, rooms 203, 220, 306, and 320. Working with emergency responders for Vermillion and Clay County, rescue personnel will check these areas for occupancy and assist with escapes as needed.
- Each floor has two or more faculty/staff identified as being responsible for sweeping through their areas and making sure all persons that can leave have evacuated. Each member of this sweep team has full access to all rooms in their area and is authorized to open and verify all rooms are vacated during an evacuation event.

Small Group Rooms
On the west side of the second floor, there are small group rooms. Each room has a wall-mounted monitor that can be connected to video output of most portable computers. Your access card can be used to enter any of these rooms. They are available for your use on a first come-first served basis. However, these rooms may be scheduled for classes or formal meetings. If you are using a room for studying or a meeting and are asked to leave as another group has the room for a scheduled event, please respect their request and leave quietly. Never leave personal items in the room unattended and never allow persons you do not know to use these rooms. If you wish to reserve a room for a formal group meeting or class, contact Wendy Pederson (Wendy.Pederson@usd.edu). Rooms will not be reserved for individual study or group study sessions.

Listserv Information
LEEMEDSTUDENTS-LIST@USD.EDU To serve as a single means of communicating with the MD, OT, PT, PA and Graduate Students based at the Lee Medicine and Science Building. This represents about 300 to 350 students. All members of this listserv can send to the listserv. If you have an email that you wish directed to faculty and staff, please forward your email to Steve Waller (Steve.Waller@usd.edu), Laura.Wiemers@usd.edu or Andrea Jahn (Andrea.Jahn@usd.edu). They will review your request and, when appropriate, forward to the appropriate faculty and staff listservs.

Building Hours
The Lee Medicine and Science Hall is open most weekdays from 7 am to approximately 5:30 pm. The building may be open later than 5:30 pm weeknights for scheduled events. Your proximity access card will provide you 365/24/7 access to the building and those areas of the building for which you are authorized.

Technology in Lee Medicine and Science Hall
Lee Medicine and Science Building is wireless. Students should find strong wireless connectivity to the USD network in all parts of the building. However, access to the USD network requires installation of approved (and current) antivirus software. Instructions can be found on the Technology page on the Student Portal.

In Lee Medicine and Science Building 111, 107, and 22A, there are hard internet drops and electrical power located near each seat. Cables and power cords should be run through the grommets on the desktop and not around the desktop to avoid possible snagging of the cables in an emergency. It is your responsibility to provide the appropriate cable for connecting to the internet.

Printing in Lee Medicine and Science Building by students can be done through the Pharos networked printer located in Lee Medicine and Science Building 220. This is a Pharos printer managed by ITS. All student access
cards should provide you 365/24/7 access to this space. Students are provided a limited amount of free printing on this printer each academic year by the University. Students wishing to print more will have to pre-pay for printing through the Coyote Cash system. You must add money to this system at the Kiosk located at the Munster University Center or by calling the Coyote Card office directly. No person or office in Lee Medicine and Science Building is able to assist you with this task. It must be done at the MUC or by calling the Coyote Card office. Instructions for connecting to and using the Pharos Printer can be found on the Technology page on the Student Portal or at http://link.usd.edu/laptopprinting. Problems with the printer in Lee Medicine and Science Building 220 can be referred to the ITS helpdesk (Helpdesk@usd.edu or 677-5028).

Cell phone reception in parts of the Lee Medicine and Science Building ranges from poor to non-existent. Reception is best near the exterior walls of the building and poorest in the lower level. If you are expecting an important call, you are encouraged to work with your main office (Medical Student Affairs, Basic Biomedical Sciences, or Health Sciences) for them to receive the call and how best to reach you. If you are expecting a call and may be contacted during a class session, you should notify the instructor of this situation and sit in a location where you can be contacted or leave the room with minimal classroom disruption. Cell phones should be off during normal class sessions.

Bicycles at Lee Medicine and Science Building

Lee Medicine and Science Building has a single bicycle rack located at the south end of the building. The bicycle rack will accommodate approximately 120 bicycles (using both sides). Bicycles should not be locked to benches, trash cans, handrails or other structures around Lee Medicine and Science Building. Bicycles should never be brought into Lee Medicine and Science Building.

Smoke-Free Campus Policy 2.043

Consistent with USD’s obligation to protect and promote the health and wellbeing of employees, students and visitors, smoking is prohibited at all times on the campus of the University of South Dakota. Signs stating the policy are posted across campus.

Room 326: Health Science Student Lounge

a. Individual lockers are assigned to OT, PT, and PA student in the Health Science Student Lounge. Please minimize the number of bags and coats in lab by using the lockers regularly. At the end of the spring semester of their second year, students are required to clean out their lockers. Any items left in the lockers will be discarded.

b. There are two refrigerators and two microwaves for student use in the lounge. Students are responsible for cleaning up after themselves and to determine a regular cleaning schedule to maintain a space that can be used by everyone.

c. There is a computer in the lounge; however, there is no printer.

***It is the responsibility of each student to clean up after him/herself when using any area of the building.
Section II - Academic and Professional
Standards of Conduct
Success in the physician assistant profession requires certain behavioral attributes including: empathy, discipline, honesty, integrity, the ability to work effectively with others in a team environment, and the ability to address a crisis or emergency situation in a composed manner. The Standards and Guidelines for an Accredited Educational Program for the Physician Assistant state: “The role of the physician assistant demands intelligence, sound judgment, intellectual honesty, appropriate interpersonal skills and the capacity to react to emergencies in a calm and reasoned manner. An attitude of respect for self and others, adherence to the concepts of privilege and confidentiality in communicating with patients, and a commitment to the patient’s welfare are essential attributes”. Fulfillment of these expectations requires that physician assistants and physician assistant students exhibit a high level of maturity and self-control even in highly stressful situations.

In keeping with these precepts, physician assistant students must conduct themselves in a highly professional manner consistent with the patient care responsibilities they will have during their training in the Program and thereafter. Students must adhere to the following standards. Failure to do so will result in presentation of the student’s case to the Progress and Conduct Committee and may result in corrective action or dismissal from the Program.

1) **Respect**: Students are expected to treat all patients, faculty, university staff, clinical preceptors, health care workers, and fellow students with dignity and respect. Conflicts should be resolved in a diplomatic, reasoned manner. Students should be sensitive to, and tolerant of, diversity in the student and patient population. PA training involves a close working environment with other students, including physical examination of fellow students and discussion groups that may reveal personal information. These situations must be approached with respect for the privacy, confidentiality, and feelings of fellow students. Students should offer criticism or suggestions in a thoughtful and reasoned manner that fosters respect and trust. Displays of anger or aggression, which include demeaning, offensive, argumentative, threatening language/behavior, or language that is insensitive to race, gender, ethnicity, religion, and sexual orientation will not be tolerated. Students must be appropriately responsive to lawful requests from their instructors, preceptors, and clinical sites. Students shall not display disruptive or obstructive behavior at the university or at clinical sites.

2) **Flexibility**: PA training involves instruction from practicing clinicians who have unpredictable schedules. At times, lectures or clinical session times may need to be changed on short notice. We believe the advantage of utilizing practicing clinicians and experts outweighs this inconvenience. Thus, we ask students to be flexible and tolerant of changes. Student schedules in the Clinical year are set by the clinical sites and may involve night and weekend hours.

3) **Integrity**: Students are expected to follow all policies in the Student Code of Conduct outlined in the University Student Handbook including those pertaining to academic honesty. Infractions such as forgery, plagiarism, stealing/copying tests, and cheating on examinations will not be tolerated. PA students are also expected to display the highest ethical standards commensurate with work as a health care professional. Some of these are outlined in the Code of Ethics of the Physician Assistant Profession published by the American Academy of Physician Assistants (see Appendix A). Students shall report any illegal or unethical activity to the Program and/or preceptor. Students may not accept gifts or gratuities from patients or families. Breeches in confidentiality, falsification of records, misuse of medications, and sexual relationships with patients/preceptors will not be tolerated and will be grounds for dismissal.

4) **Identification**: PA students must always identify themselves as “physician assistant students” to patients and clinical site staff, and never present themselves as physicians, residents, medical students, or graduate physician assistants. Students must wear a short clinical jacket with the Program patch while at all clinical sites unless instructed not to do so by the clinical site or the Program. Students must always wear their Program-supplied nametag while at clinical sites. While in the Program students may not use previously earned titles (e.g. RN, MD, DC, PhD, Dr, etc.) for identification purposes.

5) **Confidentiality**: Students must respect the confidentiality of patients and fellow students and are not permitted to discuss any patients by name outside the clinical encounter situation. For academic presentations and H&P assignments, please use patients’ initials or first name only.

6) **Health and Safety**: PA students shall not exhibit any behavior that may jeopardize the health and safety of patients, faculty, or fellow students.

7) **Nondiscrimination**: Students shall deliver health care service to patients without regard to their race, religion, creed, national origin, sexual orientation, socioeconomic status, disability, disease status, or political beliefs.

8) **Student Role**: Students at clinical sites must always work under the supervision of a preceptor. They may not function in the place of an employee or assume primary responsibility for a patient’s care. Students shall not treat and discharge a patient from care without consultation with a clinical preceptor or supervisor. Students
shall perform only those procedures authorized by the Program, clinical site, and preceptor. Students must adhere to all regulations of the Program and the clinical sites.

9) **Impairment**: Students shall not appear at the university or clinical sites under the influence of alcohol or drugs.

Guidelines for conduct specific to the clinical training experiences are outlined in the Clinical Rotation Handbook and must be fully understood and adhered to.

**Professionalism in the classroom**

It is important for students to remember that the expectation of professionalism generalizes to all settings, including clinical sites and the academic environment. Academic professionalism will enhance the learning experience. The Medical School and PA course directors have identified the following as important aspects of academic professionalism:

- Arriving for class on time to avoid disruption of others’ learning experience and out of respect for students, guests, and faculty
- Professionalism includes respectful behavior towards faculty, staff, and classmates. Students should offer criticism or suggestions in a thoughtful and reasoned manner that fosters respect and trust. Expressions of aggression or anger, which include demeaning, offensive, argumentative, threatening language/behavior, or language that is insensitive to race, gender, ethnicity, religion, and sexual orientation will not be tolerated.
- Professionalism includes switching cell phones either off or to “manners mode” (vibrate) during class. Students who might receive an emergency call during class should alert the faculty in advance of this possibility and sit near an exit door. In the event of a call which must be answered during class, the student should quietly leave the room before conversing. It is PA and Medical School policy that cell phones are to be turned OFF during any examination or quiz. Students are to inform his/her contacts that in the event of an emergency they should contact the PA Program Office at 605-658-5926.
- Professionalism includes limiting the use of portable computers (laptops, tablets, etc.) to academic purposes during class sessions. It is unprofessional to check E-mail, instant message, play games, or web surf, etc. during class. See Social Media Guidelines.
- Professionalism includes remembering the rules of netiquette and SDBOR policies for use of academic computing resources when using technology on any USD campus. USD and BOR Acceptable Use Policy can be found at [https://www.sdbor.edu/policy/documents/7-1.pdf](https://www.sdbor.edu/policy/documents/7-1.pdf).
- Professionalism includes maintaining the safety aspects of all teaching spaces. This includes not blocking primary or secondary walkways with extension cords, backpacks, additional chairs/tables or other such material.

**Professionalism outside the classroom.**

PA students also have professional responsibilities outside the classroom. These are related to the protecting the safety and health of the student as well as the patients they have contact with:

- Professionalism includes completing immunization and proof of immunity requirements in a timely manner without requiring repeated reminders.

**Professionalism related to patient contact.**

It is important for students to recognize that the following expectations apply to patient contact regardless of the setting (classroom or clinical). Students will be expected to treat patients in the academic setting with the same professionalism and respect as patients seen in clinical settings.

- Professionalism includes strictly maintaining patient confidentiality. Throughout their medical education, students are exposed to a number of people in the classroom setting who – voluntarily -- describe their personal experiences as patients in the health care setting. Each of these discussions is to be treated as though it occurs in the context of a physician (PA)-patient visit with assumed respect for confidentiality. Likewise, the same responsibility for patient confidentiality is assumed when students are in the clinical setting.
- Professionalism includes dressing and presenting oneself in a manner that is respectful to patients when in a clinical setting.
1. Tennis shoes, jeans, shorts, revealing clothing, sandals, and open toed shoes are not acceptable dress.

2. Strong cologne or perfume may be nauseating to sick patients and should be avoided.

3. Body piercing(s), other than the ear, need to be removed or replaced with invisible retainers.

4. Tattoos will be covered in clinical settings.

5. Women should not wear artificial nails, as infectious agents may adhere to the artificial nail and become an infection control issue that endangers patients.

- Professionalism includes identifying oneself properly. Name tags and a clean white coat with the PA school patch are required in clinical settings. PA students wear the shorter white coat. One coat is required and students are encouraged to purchase additional white coats to ensure they have a clean coat for each clinical experience. Additional patches are available through the PA office for a nominal charge.

**Professionalism documentation**

The program utilizes reporting forms (see below) to document both unprofessional behaviors and exemplary professional behaviors. If a behavior (exemplary professionalism or unprofessional behavior) is identified it will be discussed as a faculty and will result in a meeting between the student and a faculty member. The completed form will be retained in the students’ confidential file. The terminology used to define and describe professional and unprofessional behaviors includes, but is not limited to:

**Altruism**
- Promotes the good of the team above self and takes on extra work when appropriate
- Tutors and readily shares information with peers

**Honor and Integrity**
- Does not lie, steal, plagiarize, cheat or participate in activities that subvert education
- Follows the highest moral and ethical standards at all times

**Responsibility and Accountability**
- Arrives on time for class, scheduled activities and appointments
- Completes assigned share of team responsibilities
- Transmits accurate and detailed information for optimal transition
- Provides appropriate, constructive and supportive feedback
- Accepts constructive feedback and modifies behavior appropriately
- Requests help when needed

**Respect**
- Treats others with respect
- Demonstrates sensitivity to power/authority asymmetries in professional and academic relationships
- Maintains privacy of donor or patient information in public areas

**Leadership**
- Improves team effectiveness through motivation and facilitation
- Provides constructive approaches for conflict resolution

**Excellence and Scholarship**
- Engages in informal teaching and learning activities with colleagues as appropriate
- Solicits and values input from colleagues when appropriate

**Caring, Compassion and Communication**
- Maintains composure during difficult interactions with colleagues
- Responds appropriately to help a distressed or struggling colleague
- Demonstrates effective listening skills
Unprofessional Behavior Incident Report

The purpose of the Critical Incident Report is to enable faculty to document an individual incident indicative of problem behavior by a student. This report will be confidentially filed and will come to the attention of the Program Director. The goal of this reporting activity is to allow feedback, remediation, and improvement in professional behavior.

__________________________________________  _____________________________
Student name (please print)                 Date of incident

__________________________________________  _____________________________
Faculty name (please print)                 Faculty signature

Description of incident:
(May attach document) _____________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

In the incident described, indicate which of the following categories of professionalism behaviors was the area of concern. (Check all that apply)

- Altruism
- Honor & Integrity
- Responsibility & Accountability
- Respect
- Leadership
- Excellence & Scholarship
- Caring, Compassion & Communication

Rate the degree of concern by circling one of the following:

1 2 3 4 5
barely acceptable severe problem

Documentation of discussion with student
Date: __________________ Signature of Student: _________________________________

Signature of Faculty member and Program Director:
__________________________________________  _____________________________
The purpose of the Exemplary Professional Behavior Report is to enable faculty to document an individual incident indicative of excellent professional behavior by a student. This report will be confidentially filed and will come to the attention of the Program Director. The goal of this reporting activity is to acknowledge professional excellence in order to promote the student’s further professional development and to facilitate role modeling and motivation in other students.

Student name (please print) _____________________________ Date of incident _____________________________

Faculty name (please print) ____________________________ Faculty signature ____________________________

Description of incident:
(May attach document)_______________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________

In the incident described, indicate which of the following categories of professionalism behaviors was the area of exemplary performance. (Check all that apply)

☐ Altruism
☐ Honor & Integrity
☐ Responsibility & Accountability
☐ Respect
☐ Leadership
☐ Excellence & Scholarship
☐ Caring, Compassion & Communication

Rate the degree of exemplar performance by circling one of the following:

1 Above Expectations
2 Highly Excellent
3
4
5

Documentation of discussion with student
Date: ____________________ Signature of Student: ____________________________

Signature of Faculty member and Program Director:
__________________________________________ ________________________________
THE CODE OF PROFESSIONAL CONDUCT

Statement of Purpose
The Code of Professional Conduct is designed to foster a sense of trust, responsibility, and professionalism among students and is implemented by students and between students and faculty. Its fundamental purposes are:

1. To ensure the integrity of the examination process.
2. To promote ethical behavior in academic and clinical settings.
3. To develop a sense of responsibility to maintain the integrity of the medical profession.

This Code provides a process through which students can uphold its values themselves.

We, the students of The University of South Dakota Physician Assistant Program, recognize that the practice of medicine is a great privilege and carries with it the responsibility to uphold certain expectations in character and behavior. We shall maintain the honor of our chosen profession and will not engage in academic dishonesty, misrepresentation, harassment, discrimination, or other forms of unprofessional conduct. We shall always maintain respect and compassion for others and conduct ourselves in a professional manner. We shall not take unfair advantage of a patient, colleague, instructor or other member of the community.

Specifics of the Code of Professional Conduct
The following sections describe specific conduct proscribed by and the enforcement procedures of the Code of Professional Conduct. The descriptions that follow are not a comprehensive list but are examples of conduct unbecoming of Physician Assistant students at The University of South Dakota. It is the spirit of these expectations, and not simply the letter of the Code of Professional Conduct, that is to be upheld and preserved by students and faculty.

Section I: Academic Dishonesty in Grading and Coursework
No student shall knowingly or willfully obtain or utilize an unfair advantage when taking any examination. This shall include but not be limited to:

1. Plagiarism of test answers or any written assignments.
2. The use of unauthorized notes, tests, or any other unapproved assistance during the course of an examination or other graded class assignments.
3. The unauthorized procurement or possession of test information or answers prior to or during the course of an examination.
4. Excusing oneself from an exam or obtaining the postponement of an examination under false pretenses.
5. Any and all other actions designed to falsely enhance an individual’s performance on an examination or other graded assignment.

Section II: Academic Misconduct in Professional Behavior
No student will conduct himself or herself in an unprofessional manner, whether through dishonesty, misrepresentation, harassment, discrimination or other forms of unprofessional conduct. This shall include but not be limited to:

1. The falsification of physical examination findings, laboratory data, or patient history,
2. Misrepresentation of skills, experience or exposure to surgical and/or medical procedures,
3. Discrimination against or harassment of a patient, colleague, instructor or other member of the community,
4. Conducting clinical responsibilities while impaired by drugs or alcohol,
5. Showing lack of compassion or respect for patients, faculty, staff, classmates, and others by breaching confidentiality or by any other means,
6. Failure to maintain a neat and clean appearance and dress or attire that is reasonable and accepted as a health care professional,
7. Demonstration of lack of respect for others through either verbal communications or written communications, including all forms of electronic media,
8. Creating or encouraging an environment that is disruptive to the educational program of the school,
9. Conduct in the public arena that can result in diminishing the integrity of the school or the profession, or
10. Making a maliciously false accusation of violation of the Code of Professional Conduct against a colleague.
Section III: Reporting Violations
A Student, who believes there may be a potential violation of the Code of Professional Conduct by another student may choose to meet with that student to seek clarification. If there is reasonable cause to believe that the spirit or provisions of the Code of Professional Conduct have been violated, it is the duty of that student to make timely contact with the Program Director/Chair. It is the obligation of each student to report suspected Code of Professional Conduct violations; failure to do so is itself a violation of the Code.

When a complaint presents facts that would suggest that the challenged action stemmed from conduct violating Board Policy No. 1:18 or 1:19, which prohibit sexual harassment and other forms of discrimination, the matter will be referred under Board Policy No. 1:18 to the institutional Title IX/EEO coordinator for investigation and resolution under those policies. No further action will be taken pending the completion of proceedings under Board Policy No. 1:18.

A Faculty member who has reasonable cause to believe that the spirit or provisions of the Code of Professional Conduct have been violated should complete an “Unprofessional Behavior Incident Report” document and notify the Program Director/Chair.

Section IV: General Procedures
A. Student allegations of violation of the Code of Professional Conduct will be investigated. The Program Director will do a thorough investigation and may meet with all necessary parties. The Program Director may involve the Progress and Conduct Committee. After all allegations have been thoroughly investigated, the Program Director may decide:

1. No infraction has occurred.
2. An infraction may have occurred with satisfactory explanation.
3. An infraction may have occurred with unsatisfactory explanation.

B. When no infraction has occurred, the case will be dismissed. Instances in which an infraction has occurred with a satisfactory explanation will be kept in the committee’s records until graduation, but may be included in any future accusation of violation of the Code of Professional Conduct.

C. Faculty allegations or for cases where an infraction has occurred with unsatisfactory explanation the Progress and Conduct Committee will be convened. The hearing before the Progress and Conduct Committee will be a closed session and records of the proceedings made. The Progress and Conduct Committee may request to meet with the accused and/or necessary parties.

Section V: Disciplinary Action
The Progress and Conduct Committee will make recommendations to the Program Director. These recommendations are intended to help the students conduct themselves as professionals, to correct violations of the Code of Professional Conduct, and to prevent recurrences of the violations. Disciplinary actions that may be recommended in cases of student misconduct range from written warnings to dismissal from the Physician Assistant Program.

A. A simple majority of the Progress and Conduct Committee must find the accused guilty of violating the Code of Professional Conduct in order to make a recommendation to the Program Director.

B. Student Grievance procedures and forms are outlined on the Graduate School website (http://www.usd.edu/graduate-school/student-resources.cfm).

Section VII: The Code of Professional Conduct and Pledge to Uphold the Code
This paragraph will be signed by each student at matriculation and will be displayed at The University of South Dakota PA program.

We, the students of The University of South Dakota Physician Assistant Program, recognize that the practice of medicine is a great privilege and carries with it the responsibility to uphold certain expectations in character and behavior. We shall maintain the honor of our chosen profession and will not engage in academic dishonesty, misrepresentation, harassment, discrimination or other forms of unprofessional conduct. We shall always maintain respect and compassion for others and conduct ourselves in a professional manner. We shall not take unfair advantage of a patient, colleague, instructor or other member of the community. We hereby agree to uphold the principles and provisions of the Code of Professional Conduct in acknowledgement of the inherent need to preserve honesty and integrity in the medical profession.
Attendance

A tremendous amount of didactic material is covered in each scheduled class, and due to the sequential and experiential nature of the preclinical phase curriculum, knowledge gained in each class is vital for subsequent learning, not only in each individual course but across courses and throughout the curriculum. Students officially enrolled in a course are responsible for mastering the content of the course and are required to attend all classes. Therefore, PUNCTUAL ATTENDANCE TO ALL CLASSES IS MANDATORY. Tardiness results in missed content and, just as importantly, is disruptive to the learning environment, to classmates and to faculty. Students should arrive a few minutes prior to the beginning of the scheduled lecture, activity, etc...

Students are responsible for on time attendance at all scheduled lectures, laboratories, clinical rounds and case presentations. Student absences from or tardiness to scheduled examinations and laboratory sessions will be accepted only for excused reasons (see below). Unexcused absences and/or late attendance are unprofessional conduct and will be handled by the Program Faculty and/or Progress and Conduct Committee. Unexcused absences from classes may adversely affect the academic status of the student in the USD PA Studies Program.

Notification of absence or potential tardiness should never be after the fact. The program reserves the right to take attendance and a student may be asked to affix his/her signature to attendance sheets. No student may sign on behalf of another student.

An excused absence will only be granted for one of the following reasons or at the discretion of the Program Director. Excused absences will be defined as time missed because of:

- Personal illness requiring medical attention (written documentation from a healthcare provider may be required)
- Serious illness of an immediate family member. Documentation from a health care provider may be required.
- Death within the immediate family.
  - Students will be generally granted two or three day’s absence including the day of the funeral.
  - Immediate family members are defined as:
    - Spouse, domestic partner, child, sibling, mother, father, or a person who stood in loco parentis, and grandparent.
  - Documentation may be required
- Natural disaster or local emergency

For Sickness/Illness/Death/Disaster to be excused, the student must personally notify ALL of the following people prior to assigned schedule times on the day of the absence.

- Course Coordinator(s)
  - If you cannot reach the Course Coordinator via phone, please leave a message and email the Course Coordinator(s), and contact the program office staff via phone (605-658-5926)
  - Instant messaging, texting is not appropriate.

For all other absences a request form must be completed and forwarded to the student’s advisor for full faculty consideration. The faculty will review the request, make a final decision and notify the student. It is mandatory that the request be submitted no less than 2 weeks before the planned absence.

Consequences for unexcused absences are:

First Occurrence - A meeting with the student’s advisor to discuss prevention of further occurrences.

Second Occurrence - Academic warning and a meeting with the faculty to discuss prevention of further occurrences.

Third Occurrence - A meeting with the Progress and Conduct Committee for further consideration and action.

Excessive absences, whether excused or unexcused, will require a meeting with the faculty and/or Progress and Conduct Committee to discuss continuation in the Program.

Students who miss classes due to enrollment in the armed services will be dealt with on an individual basis.
Request for Absence Form

Student- Complete sections above dashed line and Return to your Academic Advisor

Student Name: ____________________________

Requested Date of Absence: ____________________________

Requested Time of Absence: ____________________________

Reason for Requested Absence:

This Section is for Program Personnel Use Only - Complete and Place in Student’s file

Date Received: ____________________________  Input Date: ____________________________


Excused [ ] Unexcused [ ]

COMMENTS: __________________________________________________________

__________________________________________________________

__________________________________________________________

Advisor Signature: ____________________________________________
Absences for Medical Illness
An absence of short duration (fewer than 3 days) requires notification of PA Program Administration and the Course Coordinators. Longer illnesses (more than 3 days; no greater than 1 week) must be approved by the Program Director and will require notification of the Course Coordinator. All such absences may require specific make-up work as deemed necessary by the PA Program and respective Course Coordinator(s). A justification statement from a Physician or PA will be required. An Incomplete grade will be given for a course until the missed work is made-up. Need for a prolonged absence may result in withdrawal from current coursework, delayed graduation, or an extended pathway.

Professional Dress and Hygiene
Dress and hygiene are matters of personal taste and judgment and serve as an expression of individuality. However, because of the professional nature of the program, student dress and hygiene must be appropriate. It is important to recognize that dress and hygiene have an effect on the way patients and preceptors relate to students. Thus, students should dress in a way that fosters optimal student-patient-preceptor relationships.

It is PA Program policy that students dress appropriately and in a professional manner at all times throughout his/her enrollment in the school. Faculty may preclude a student from patient care areas if his/her appearance does not meet professional standards. In addition, the Physician Assistant Program requires the student to wear an appropriate lab jacket with the USD discipline patch affixed over the left shoulder when in patient care areas. The student will also wear an appropriate nametag/ID tag stating he or she is a physician assistant student. The department describes appropriate dress as dress skirt and blouse, pants and blouse for women; pants, shirt, and tie for men. Students are expected to dress in a professional manner during all interactions with PA Program faculty, staff, clinical preceptors and patients.

As a general rule, this means:

- No informal or provocative attire
  - No tee shirts or shirts with “sayings” on them other than standard logo or brand names
  - No sweat pants
  - PA logo shirts are acceptable
- No hats
- No clothing that exposes any part of the midriff or the umbilicus
- No unprofessional shorts (running shorts, cut offs, sweats, etc…)
- No short skirts or dresses and no excessive skin exposure (legs, arms, midriff or chest)
- Keep jewelry to a minimum. Jewelry has a cross-contamination or infection potential. Due to heath issues/concerns in participating health care facilities, all body piercing jewelry should be removed prior to entering the clinical area. Ear piercing is the exception and is allowed in most facilities. Small stud earrings may be worn with a limit of two per ear
  - No rings with raised stones or surfaces (otherwise the physical exam can be painful for the patient
  - No “encrusted”, jeweled or extreme décor nail varnish – use neutral nail fashion.
  - Fingernails should be relatively short in the laboratory or clinical setting.
- Tattoos must be covered in the clinical setting
- Hair should be tied back and off the face in laboratory or clinical setting.
- Pungent or strong smelling perfumes, cologne, or body products may be inappropriate.
- Body odor and halitosis (bad breath, especially with smokers) may interfere with rapport in laboratory or clinical setting.
- No sandals, open-toed, backless, or canvas shoes in clinical setting.
- Scrub suits are not to be worn outside of the hospital or emergency department unless specifically instructed by preceptor

Student Evaluation
The faculty of the University of South Dakota Physician Assistant Studies Program is charged with the responsibility for educating students as well as determining the capacity of every student for professional competency and responsibility. At regular times throughout the duration of the Program, the faculty must evaluate this capacity for each student and recommend whether or not the student should continue in the program. Therefore, the faculty reserves the right and has the responsibility to recommend the academic or disciplinary suspension, or dismissal, or voluntary withdrawal of a student when unsatisfactory academic progress, academic dishonesty, unsatisfactory clinical performance, unsatisfactory professional growth, impaired mental or physical health, unsatisfactory personal conduct, failure to comply with published program requirements or other factors
deemed necessary for professional competency make it impractical or inadvisable for the student to continue in the program.

If at any time during his/her course of study a student is in the position of being recommended for academic or disciplinary suspension or dismissal, or voluntary withdrawal, for any reason, the student shall be notified in writing as to the cause for such action by the Program Director.

Handout Policy
Outlines for lectures and lab handouts will be posted electronically via Desire to Learn (D2L) or E-mail in PDF format. While the PA faculty will attempt to provide these documents, instructors are not obligated to provide them for all lectures. Additionally, the instructor is not obliged to provide handouts or course content in other formats unless written documentation is received from the Office of Disability Services. It is the instructor’s or guest presenters’ choice whether to provide handouts and in what format. Students should always be prepared to take notes during class sessions.

Printing outlines/handouts is part of preparation for class; therefore, students will not be allowed to use class time to print handouts. Doing so will result in a tardiness report for that session.

Computers and Email
- Your coyotes@usd.edu email is the department’s main communication source. All emails to the program are to be sent with your USD email. Do not forward your USD email account to another account.
- Students are responsible for routinely checking their email for information on classes, other messages, etc… General student information and access to your email account can be obtained at www.usd.edu.
- Your email account will be terminated at graduation.
- Each student is required to have a laptop computer. You will be required to use up to date Microsoft Office products (Word, Excel, and PowerPoint) as a student.
- Upgrades to Microsoft Windows are available at a nominal cost through Barnes and Noble at USD. PC’s are available for use in various locations around campus, University Libraries, Wegner Health Science Information Center, and others. Wireless access is available in various buildings across campus.
- Students are not allowed to use faculty, office staff or classroom computers.
- Care needs to be taken when communicating in an electronic environment, i.e. Facebook, etc… See Social Media Guidelines below.
Social Media Guidelines

Social media are internet-based applications which support and promote the exchange of user-developed content. Some current examples include Facebook, Instagram, Twitter, and YouTube. Posting personal images, experiences and information on these kinds of public sites poses a set of unique challenges for all members of the medical community, including employees, faculty, volunteers and students (collectively “Personnel”). All personnel have responsibility to the institution regardless of where or when they post something that may reflect poorly on The University of South Dakota PA Program or on the medical community.

Maintaining professionalism is of utmost importance when using social media. It is recommended that you assume all postings are visible to program faculty, future employers, and patients. It is strictly prohibited to discuss patient related matters, take photographs of patients and cadavers, including in the operating room, even if the patient is not identified. Similarly, the posting of diagnostic images or any form of patient data on any social media platform such as YouTube, Facebook, iTunes, LinkedIn, Twitter, and blogs is strictly prohibited. Posting on Facebook or any other form of social media regarding program personnel, including faculty and fellow students is strictly prohibited. Requesting connection with preceptors, faculty, staff, and supervisors while currently a student is unacceptable.

The University of South Dakota PA Program is committed to supporting your right to interact knowledgeably and socially; however these electronic interactions have a potential impact on patients, colleagues, and future employers’ opinions of you. The principal aim of this Guideline is to describe your responsibilities to The University of South Dakota PA Program in relation to social media and to help you represent yourself and The University of South Dakota PA Program in a responsible and professional manner.

Guideline

The following Guideline outlines appropriate standards of conduct related to all electronic information (text, image or auditory) that is created or posted externally on social media sites by Personnel affiliated with The University of South Dakota PA Program. Examples include, but are not limited to: text messages, media messaging service (MMS), Twitter®, Facebook®, LinkedIn®, YouTube®, and all other social networks, personal and organizational websites, blogs, wikis, and similar entities. This Guideline applies to future media with similar implications. It also applies whether Personnel are posting to: The University of South Dakota-hosted sites; social media in which one’s affiliation is known, identified, or presumed; or a self-hosted site, where the views and opinions expressed are not intended to represent the official views of The University of South Dakota Program.

Best Practices

Everyone who participates in social media activities should understand and follow these simple but important Best Practices:

1. Take Responsibility and Use Good Judgment. You are responsible for the material you post on personal blogs or other social media. Be courteous, respectful, and thoughtful about how other Personnel may perceive or be affected by postings. Incomplete, inaccurate, inappropriate, threatening, harassing or poorly worded postings may be harmful to others. They may damage relationships, undermine The University of South Dakota PA Program’s reputation, discourage teamwork, and negatively impact the program’s commitment to patient care, education, research, and community service.

2. Think Before You Post. Anything you post is highly likely to be permanently connected to you and your reputation through Internet and email archives. Future employers can often access this information and may use it to evaluate you. Take great care and be thoughtful before placing your identifiable comments in the public domain.

3. Protect Patient Privacy. Disclosing information about patients without written permission, including photographs or any potentially identifiable information is strictly prohibited. These rules also apply to deceased patients and to posts in the secure sections of your social media pages that are accessible only by approved friends.

4. Protect Your Own Privacy. Make sure you understand how the privacy policies and security features work on the sites where you are posting material.

5. Respect Work Commitments. Ensure that your blogging, social networking, and other external media activities do not interfere with your educational commitments.

6. Identify Yourself. If you communicate in social media about The University of South Dakota PA Program, disclose your connection with The University of South Dakota and your role in the program. Use good judgment and strive for accuracy in your communications. False and unsubstantiated claims and
inaccurate or inflammatory postings may create legal or professional liability for you.

7. Use a Disclaimer. Where your connection to The University of South Dakota is apparent, make it clear that you are speaking for yourself and not on behalf of The University of South Dakota PA Program. A disclaimer, such as, “The views expressed on this [blog; website] are my own and do not reflect the views of The University of South Dakota or The University of South Dakota Physician Assistant Program,” may be appropriate.

8. Respect Copyright and Fair Use Laws. For The University of South Dakota’s protection as well as your own, it is critical that you show proper respect for the laws governing copyright and fair use of copyrighted material owned by others, including The University of South Dakota’s own copyrights and logo brands.

9. Protect Proprietary Information. Do not share confidential or proprietary information that may compromise The University of South Dakota PA Program’s practices or security. Similarly, do not share information in violation of any laws or regulations.

10. Seek Expert Guidance. Consult with the PA Program Director if you have any questions about the appropriateness of materials you plan to publish or if you require clarification on whether specific information has been publicly disclosed before you disclose it publicly. Social media may generate interest from the press. If you are contacted by a member of the media about a University of South Dakota-related blog posting or Program information of any kind, contact the PA Program Director before disclosing information to the media.

Failure to abide the aforementioned best practices will be considered a breach of appropriate professional behavior and can result in discipline up to and including removal from the program.

Addendum to Social Media Guideline

The following are fictional use-case examples of social media and blogging activities and an explanation of their appropriateness as per The University of South Dakota PA Program Social Media Guideline:

1. A patient attempts to “friend” medical provider or student on Facebook. This is almost always inappropriate. Even after the provider-patient relationship has ended, it would be inappropriate to discuss health-related information. (Best Practice 3)

2. A patient comments on a faculty or student blog and discloses protected health information with the expectation that The University of South Dakota PA Program faculty or student will continue the discussion. Any health-related discussions by email with patients require a written consent. Similarly, social media discussion with a patient should not directly address health concerns of individual patients. (Best Practice 3)

3. A PA student “tweets” that he just finished rounds with a preceptor on a patient and describes the clinical findings of that patient. It is difficult to be certain that information disclosed in the Twitter® post is not identifiable to that particular patient. The best type of posting would include very general information. Other posts by the same student could indicate his/her school and current rotation, leading to circumstances that indirectly identify the patient, such as by naming a very rare disease. (Best Practice 3)

4. A PA student writes in her blog, naming a preceptor who did minimal teaching and recommending that other students not take clinical electives with that preceptor. Legitimate critique of an educational activity is appropriate, so long as professionalism is maintained. There are more effective and less public mechanisms for relaying this type of information. (Best Practices 1, 2)

5. A PA student posts to his “wall” on Facebook that half of the class was sleeping during Dr. X’s lecture on Pharmacology. This is very similar to the use case above. (Best Practices 1, 2)

6. A student on a pediatric rotation posts (on her Facebook wall) a picture of a baby who was just discharged from care, expressing joy, best wishes to the family, and congratulating everyone involved in this excellent patient outcome. Without written patient/representative consent, this is a clear violation of patient confidentiality, even if the patient is not named. (Best Practice 3)

7. A student blogs that the clinical equipment he is using should have been replaced years ago and is unreliable. The public disclosure of such information increases the liability for the preceptor and The University of South Dakota PA Program and is clearly unprofessional. There are legitimate and confidential mechanisms for improving quality. (Best Practices 1, 2)

8. A PA student wearing a University of South Dakota PA Program t-shirt is tagged in a photo taken at a local bar and posted on a friend’s Facebook page. The student is clearly inebriated. The two issues are that: (1) The University of South Dakota PA Program logo identifies the affiliation to the institution; and (2) the unprofessional behavior of the student is available for all to see, including future employers and patients. Although the student did not post the photo, but should do everything possible to have the photo removed and remove the tagging link to the student’s own Facebook page. (Best Practices 2, 4)
9. A student blogs that her team-mate wears too much cologne, has terrible taste in clothes, and takes a long time to complete tests. This is an inappropriate forum and set of comments and demonstrates unprofessional behavior. There are legitimate and confidential mechanisms for addressing valid concerns in the classroom. (Best Practices 1, 2)

10. A PA student creates a social media website to discuss medical knowledge (e.g., "Cardiology Interest Group" on Facebook®). This is a learning community environment, in which medical knowledge is exchanged, shared and discussed. While the goal is laudable, there are still risks. A disclaimer is necessary, since postings may be incorrect, taken out of context, or improperly referenced. The moderator should take precautions to prevent the posting of information or photographs that are potentially identifiable to a particular patient. (Best Practices 1, 3, 6, 7)

11. During class a student instant messages a group of classmates about a faculty members accent and indicates he/she needs to take the "next slow boat back to" country x. Using information technology in the classroom for a non-educational purpose demonstrates unprofessional behavior. Additionally, this interferes with others ability to learn and concentrate and is disparaging towards the faculty member -- not to mention culturally insensitive. (Best Practices 1, 5, 6)

12. Following a test review a student blogs that a particular faculty member is "out of touch with reality" and is insane. One student reply’s that the faculty member “isn’t human”, while another posts “are you $/#%^(# kidding me? I can’t take this anymore – I’m quitting this joke of a program.” Using information technology in the classroom for a non-educational purpose demonstrates unprofessional behavior. Additionally, this is an inappropriate forum and set of comments and demonstrates unprofessional behavior. There are legitimate mechanisms for addressing valid concerns in the classroom. False and unsubstantiated claims and inaccurate or inflammatory postings may create liability for you. (Best Practices 1, 2, 5, 6)
Course Evaluation
At various times throughout the training program, students are required to evaluate instructors and/or courses via standardized forms. This allows the student to give constructive feedback regarding his/her education process. This also provides valuable information so the program can assess and meet the student’s needs in a dynamic fashion.

Examination Policies
- Courses conducted outside the PA Program will be subject to the policies of their respective Course Coordinator.
- Students are expected to take examinations at the designated time.
- PA Program policy stipulates that in cases of an illness preventing a student from taking an exam at the designated time, students will need to contact the Course Coordinator BEFORE the test to inform them of their absence.
- Students who miss an examination due to excused illness or a personal crisis will typically be given 48 hours to take the examination after they return to class. Students who miss an exam for an unexcused reason will be given a “0” for the exam. Petitions to this rule should be sent to the Program Director and the instructor of record. Students should note that it is the instructor’s right to require a physician’s note justifying a missed exam for reasons of illness.
- Grades for each examination will normally be distributed (in person or electronically) within a 1-week period from the day the examination is given.
- Examinations will not be returned in order to maintain security of test items.
- Students will be made aware of the specific review times when the tests will be available for review. Review will occur before the next exam. They cannot be reviewed beyond that time period.

Test question Appeal
From time to time exam questions may be ambiguous or interpreted in a manner not anticipated by the faculty. The test question appeal is NOT to be utilized for comments, feedback or questions. It is appropriate to email the unit facilitator to set up time to discuss any topics for learning at a later date. Appealing test questions will be allowed under the following conditions:
- Students will be given a piece of paper on which to document appeal questions. You may only choose five questions for a possible challenge before exiting the exam room.
- The number of the question being appealed as well as rationale for the appeal must be documented in a professional manner (this includes providing documentation from power point presentations, handouts, journal articles or approved textbooks (not PA review books) including page or slide numbers and limited to what you might realistically have possessed going into the exam). The appeal will be turned in to the proctor/instructor.
- Both the scratch paper and appeal paper must be handed into the proctor before leaving the testing environment. You must remain in the classroom until the end of the appeal time.
- Challenges will be reviewed after all students have completed the exam. If the challenge is successful, the appropriate point(s) will be added to the student's score.
- Each student must submit his/her own exam appeal; appeals for an entire class will not be permitted.
- Challenges based on idiosyncratic interpretations of questions are unlikely to succeed unless a significant number of students make a note of the same concern at the time of the exam.
- After each exam all of the questions will be reviewed by the faculty, based upon the item analysis of the class performance. Following this, test questions may occasionally be dropped or additional answers accepted. In this case, the ensuing changes will apply to the entire class.

Grading
Grade point averages and letter grades for all PA courses and rotations in the Physician Assistant Studies Program will follow the formula:

<table>
<thead>
<tr>
<th>Grade</th>
<th>Percentage</th>
<th>GPA</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>90 - 100%</td>
<td>4.0</td>
</tr>
<tr>
<td>B</td>
<td>80 - 89.9%</td>
<td>3.0</td>
</tr>
<tr>
<td>C</td>
<td>70 - 79.9%</td>
<td>2.0</td>
</tr>
<tr>
<td>D</td>
<td>60 - 69.9%</td>
<td>1.0</td>
</tr>
<tr>
<td>F</td>
<td>0 - 59.9%</td>
<td>0</td>
</tr>
</tbody>
</table>
PA Program Advisor, Course Difficulty and Remediation
Shortly after enrollment each student will be assigned a PA faculty advisor for the duration of the didactic phase. The faculty advisor will routinely meet with his/her advisees at mid-semester and again prior to semester completion. The purpose of this meeting is to review current standings within courses, discuss any ongoing issues, offer guidance/support and refer students to available resources. The advisor may request additional meeting times if there are academic or professional concerns.

Students experiencing difficulty in any of their courses, especially if faced with the possibility of earning an unacceptable grade in a required course, are expected to take initiative and seek assistance at the first sign of difficulty. Students should speak with the Course Coordinator, make use of student services, and consult with their academic advisor as soon as possible. It is the student’s responsibility to identify possible problems in course completion and to seek whatever assistance he/she needs to successfully complete the course. The type, or availability, of remediation is dependent upon the course and determined by the Course Coordinator and faculty.

Any student concerned about a particular course, course grade or teaching/testing methods should first discuss his/her concerns with the individual instructor(s). Should the student feel his/her concerns are not resolved after that point, he/she should discuss them with the Program Director. If the student feels that his/her concerns were not resolved after meeting with the Program Director, there is should schedule an appointment with the Dean.

Promotion and Dismissal Policies
Regulations pertaining to promotion, dismissal, and graduation are made according to the following rules. In addition, students are subject to University of South Dakota Graduate School policies:

A student must satisfactorily complete the entire prescribed program sequence to qualify for promotion and graduation. The Program Director, in consultation with the Program Faculty, shall determine what constitutes satisfactory performance.

The graduate student admitted to a graduate program must make satisfactory academic progress each term toward completion of the graduate degree being sought. Students who fail to make satisfactory progress are subject to academic probation and/or dismissal.

- In addition to overall satisfactory performance, graduate students must maintain a “B” average in all work submitted for their degree, with no more than one-third of the credit hours with grades of “C”. No grade below a “C” is acceptable.
- Acceptable grades in the PA curriculum include A (superior), B (good), and C (passing). A grade of D (scholastically deficient) or a grade of F is unacceptable and constitutes a course failure that will require that the student appear before the Progress and Conduct Committee. This committee will make a recommendation and notify the student of the decision. The student has the opportunity to appeal the decision as defined in the graduate school handbook under Graduate Student Academic Appeal Procedure: [http://link.usd.edu/gradschoolforms](http://link.usd.edu/gradschoolforms)
- An end of semester GPA less than 3.0 will result in a student being placed on academic probation or dismissed from the program. If placed on academic probation the student will then become subject to permanent dismissal from the USD PA Studies Program if:
  a. The GPA falls below 3.0 during the subsequent semester, or as per the timeline established in the probationary terms.
  b. The student receives a D or F in any subsequent course or rotation.
     i. Or as established in the probationary terms, e.g. no C grades
  c. A student isn’t able to achieve the established probationary terms.
  d. A student has a GPA of < 3.0 at the end of the didactic phase they may not be permitted to enter the clinical phase.
     i. Students with a GPA of <3.0 at the end of the didactic phase have to meet with the Progress and Conduct Committee.
- No student receiving a grade of D or F in any Preclinical Phase course will be permitted to enter the Clinical Phase. Any grade below a C will result in a meeting with the Progress and Conduct Committee. The committee may recommend dismissal. If the Progress and Conduct Committee recommends probation the course must be successfully repeated before beginning clinical rotations. It is important that the “clinical medicine” courses occur just prior to the clinical year. Therefore, if a student is required to repeat a course it may also be required that the student repeat other courses.
• Students cannot withdraw from any course in the PA Studies Program curriculum without written permission from the PA Program Director. However, students in good standing may request a Leave of Absence for personal/health reasons or for purposes of applying to the Extended Curricular Pathway.
• Every student must undergo and pass summative evaluations with acceptable scores, as determined by the faculty.
• Demonstrate satisfactory evidence of good interpersonal relations and professional conduct.
• Failure to meet all the criteria listed above is adequate grounds for probation or dismissal of the student from the Program.
• Awarding the PA degree is predicated on the determination by the faculty that a student is suitable for practice as a physician assistant in terms of her/his personal characteristics and conduct, as well as scholastic achievement. The faculty and/or Dean of the School of Health Sciences reserve the right to dismiss any student whose behavior is not in keeping with the standards of the medical profession, as determined by the PA Program. The Progress and Conduct Committee will evaluate all PA students whose professional behavior and/or ethics have been questioned by a faculty member or physician preceptor and make appropriate recommendations to the Program Director. The student has the opportunity to appeal the decision as outlined in the graduate school handbook under “Graduate Student Academic Appeal Procedure”.

Continuance in the program requires that students meet all the criteria set forth in the Section on Promotion and Dismissal.

Students who are unable to meet program requirements and are dismissed can reapply. Applicants must follow the stated application procedures to be considered for re-admission. Applicants for re-admission are evaluated, once annually, along with new applicants.

Requirements for Graduation
• In order to graduate from the PA Program, every student must satisfactorily complete all required course work and all graded and non-graded course work, clinical rotations (required and elective), assignments and projects designated by the Program as "required," “Satisfactory completion” shall mean completing all non-graded assignments and projects with an instructor’s “Pass,” completing each course and clerkship with a minimum grade of C and maintain a cumulative GPA of 3.00 throughout the student’s entire enrollment in the Program. A grade of C is only acceptable as a satisfactory grade when the cumulative GPA is 3.00 or above, and no more than one-third of the credit hours may have grades of “C”. No grade below a “C” is acceptable.
• All courses in the PA Program are designated as “required” and must be taken by every student. No Program courses will be waived, no advanced standing in the Program will be granted, and no advanced credit for any previous course work will be given, even though it may be similar or identical to course work in the Program. Students must successfully complete and pass all requirements (graded and non-graded) of the Preclinical phase of the Program to continue to Clinical Phase of the Program. Any exception to this requirement must be approved in writing by the Program Director.
• As a requirement for graduation, all students must undergo a summative evaluation of their medical knowledge and clinical skills. This summary evaluation will consist of written and performance examinations and will occur prior to each student’s completion of the Program. In order to graduate from the Program, every student must pass the summative evaluation with acceptable scores, as determined by the faculty. Students will be notified in advance of the particulars of the examination in a timely manner.
• All written and performance assignments for all PA course requirements are required to be performed or turned in before the relevant coursework will be considered “successfully completed”. Assignments turned in or performances completed past the designated due date will be penalized according to the criteria established in the course syllabus or by the instructor unless other specific arrangements have been made with the instructor. A student, who has not completed and turned in all assignments or completed all performances by the end of the course, unless other arrangements have been made with the instructor, will receive a grade of F (failure) for the course.
**USD Policy for Withdrawals**

- **Withdrawal** from all courses generally requires the approval of the Program Director and must be submitted on the appropriate form, which may be obtained from the Registrar’s Office.
  1. [http://link.usd.edu/registrarforms](http://link.usd.edu/registrarforms)
  2. This form is to be used through the last day to withdraw with a “W” grade (the 70% point of the term). The form is to be returned to the Financial Aid Office.
- Approval for withdrawals after the 70% point require the signature of the Graduate Dean. Students may obtain the Petition for Late Drop or Withdrawal form from the Registrar’s website at [http://link.usd.edu/registrarforms](http://link.usd.edu/registrarforms)
- Since withdrawal from a course affects a student’s academic progress, such actions will be reviewed by the Program Director and the faculty.
- A student may voluntarily withdraw from the Program at any time.
- Unofficial withdrawal from one or more courses in the curriculum will be considered as student failure, and the student will need to discuss their standing in the PA program, and dismissal may be considered.
- Any student who withdraws or is dismissed from the Program must follow the usual application procedures to be considered for re-admission. Applicants for re-admission are evaluated once annually along with new applicants.
- Calculation of any refund/reduction in charges will be processed based upon the SD Board of Regents Refund and Return of Federal Funds Policy. Excepting unusual circumstances, a refund, if applicable, will be based on the day the FA/Withdrawal Office is notified that the student is withdrawing.

**Employment Policy**

The PA Program is a very intense curriculum that demands a great deal of time. It is important that students remain well balanced by allowing sufficient time for social activities, recreation and rest.

- Students are advised to forego employment while in the didactic year.
- Employment during the clinical phase is not allowed. Students are encouraged to take advantage of financial aid opportunities or other loans or funding.

The PA Program does not follow the University semester schedule, thus making it difficult to maintain employment. During the didactic and clinical year students may be assigned to sites that are distant and/or have irregular schedules, which may operate during evenings, night call, and on weekends.

A conflicting work schedule will not be considered just cause for a change in schedule. Employment will not be considered an acceptable excuse for violation of the attendance policy.

**Policy on Student Service Work**

In order to avoid practices which might conflict with the professional and educational objectives of the University of South Dakota Physician Assistant Program during the didactic and clinical phase, and to avoid practices in which students are substituted for regular staff, the following policy shall be in effect with regard to service work.

- Students may not be hired as employees for any private or public practice, clinic or institution to perform medical services during any time they are part of the Physician Assistant Program under the sponsorship of that specific practice, clinic or institution
- Students may not take the responsibility for or the place of qualified staff.
- Students may not be given any payments, stipends or other remuneration for medical services performed as part of the students' physician assistant educational program.
- Students may volunteer their medical services to charitable, humanitarian or community service organizations when such services are assigned or approved within the Physician Assistant Program.

**Policy for Reporting Pending Criminal Charges**

- It is the Sanford School of Medicine and School of Health Sciences policy that you successfully complete a criminal background check prior to matriculation and repeated prior to the clinical phase.
- A health science student has a continual obligation to report any pending legal charges against him/her, which occur after the student has been granted final acceptance into the health science program.
- A written explanation of the pending charges should be submitted to the Program Chair/ Director within 72 hours.
- A decision regarding the student’s continued participation in clinical experiences will be made by the departmental Program Director. Classroom attendance may/may not be affected.
- Failure to comply with any aspect of this policy will result in immediate referral for dismissal from the
program.

- Healthcare institutions may require additional background checks and/or drug screening to participate at their respective institution. Students must complete these requirements, as requested by the healthcare institution.

Commuting Students
We understand that commuting students spend a considerable amount of time getting to and from Vermillion. However, this may not be used to excuse an absence or tardiness. It is the student’s responsibility to plan ahead and make necessary arrangements to be in class and on time. Students are reminded to use their own best judgment regarding specific conditions when making decisions about winter travel.

Transportation/Housing
The second year of the Program is offered at hospitals and other clinical facilities primarily throughout the region. However, students may be assigned to rotations outside the area and surrounding States. Students must provide their own transportation to clinical sites and classroom activities. Students are responsible for their own housing during all phases of the program.

Scheduled Appointments
You should be aware that the calendar constantly changes, and while we do our best to keep this to a minimum, we cannot foresee all changes. Students should be prepared for schedule changes.

Children/Pets
There may be courses within the curriculum that are scheduled in the evening hours. Additionally, there will be instances throughout the semester in which students are required to travel to locations off campus, or scheduled evening activities. Therefore, arrangements need to be made at the time of orientation to accommodate this.

In consideration of safety and in order to create an environment most conducive to learning, children, family, pets, and other non-course work related individuals are prohibited from being brought to the classroom/lab.

Name and/or Address Change
It is imperative that the Program be able to contact the student at all times, a current phone number and address where he/she can be reached must be filed with the Program Secretary.

While enrolled in the program it is the responsibility of each PA student to notify the program and the University of any change in name, residence or permanent address, or telephone number within three business days of such change.

Respect for Patient Confidentiality and Proper Use of Medical Records
Students will demonstrate compassion for patients and respect for their privacy and personal dignity. The Physician Assistant Oath recited by students at graduation states, “I will hold in confidence the information shared in the course of practicing medicine.” To that end, the following policy relating to the written, verbal, and electronic aspects of patient confidentiality and medical record use requires each student’s attention and signature.

Access
Students may have access to existing records or other information about a patient under three conditions: 1. Access to specific patient information is a necessary component of their medical education. 2. Access to specific patient information is necessary for direct involvement in the care of that patient. 3. Access to specific patient information is necessary for conducting a research project for which there is documented IRB approval. Access should be through the established policies within that hospital or clinic, and applies to verbal, written, email, electronic, personal digital assistant (PDA), or any other route of communication. All written and electronic records remain the property of the hospital or clinic.

Release of Medical Information
Students should not release medical information to outside parties without the direct supervision of faculty and then only with a signed authorization from the patient, a parent or custodial parent in the case of a minor, the patient’s legal guardian or a person having the patient’s Power of Attorney. This applies also to facsimile, voice and electronic mail.
Student-Generated Records
Records generated by a student as a result of course requirements or as part of patient care may or may not become part of permanent hospital or clinic records. Efforts should be made to remove patient identifying information from any copies, printouts or electronic media storage kept by the student, used by the student for presentations or other patient care purposes, or transmitted to clerkship coordinators or other faculty. Patient-identifying information includes names, social security numbers, patient ID numbers, birth dates, initials, location or date of service, and attending physician’s names or initials. In the event patient-identifying information is necessary for patient care or medical education purposes, it is imperative that attention be paid to patient confidentiality with respect to storage and carrying of records. When no longer needed, any records that contain patient-identifying information should be destroyed by use of a paper shredder or by other appropriate method of permanent destruction.

Student Procedures and Experiences
During the clinical year, maintenance of patient encounters is a requirement of the USD PA program. Entries should not include patient names, initials, date of birth or other identifying information.

Verbal communication
Verbal communication is an essential part of patient care as well as the learning process, and should follow these professional guidelines: 1. Verbal communication with the patient should occur under supervision of USD faculty, though faculty presence may not be required. 2. Verbal communication with the patient’s family members should be with patient consent. 3. Verbal communication regarding a patient should only be done in the appropriate setting and with individuals who are involved with the care of the specific patient. 4. Discussion of the patient as part of the education process should be conducted in an appropriate educational setting and in a professional manner.

Electronic Transmission
Patient information may be transmitted electronically only if required by the clerkship or educational program and then only to the appropriate faculty. Patient name, date of birth or any other identifying information may not be included in the transmission.

Disposal
Patient information that is written or printed should be shredded immediately after use. Electronic patient information should not be stored on computer hard drives or floppy disks but should be deleted as soon as no longer needed.

Policies Related to the Clinical Phase
- All students must complete clerkships as scheduled by the Program.
- Selection of Clinical Site
  - Assignment of a student to a clinical site will be determined by the Program. The Clinical Coordinator will provide information regarding clinical site selection and scheduling via written communications and informational sessions prior to the clinical year.
  - The PA Program retains the right to schedule all rotations strictly on the basis of PA Program needs.
  - Students do not have the right to refuse a rotation, either the timing or the location of the rotation.
  - Students who refuse a rotation assignment will receive a failing grade for the rotation and will be subject to additional disciplinary measures.
  - All students shall be subject to the requirement that up to 12 months of clinical rotations may be assigned in rural areas of South Dakota and the region outside of the Vermillion area.
- Where not otherwise provided, students shall be responsible for all costs for transportation, housing and meals at all assigned clerkship sites.
- A grade of D or F obtained during a clinical rotation will result in dismissal from the Program or require repeating the rotation at a time convenient to the PA Program. If allowed to repeat the rotation, students who fail to receive a grade of C or better upon repeating a failed rotation will be permanently dismissed from the PA Program.
- All students will be governed by the requirements for clerkships and other educational activities and assignments during the Clinical Phase as outlined in the Rotation Handbook.
- Grades will be assigned on the basis of performance, assignments, and end of rotation examinations as defined in the Rotation Handbook.
Students will observe a dress code when working in any clinical situation. This means that a professional appearance is mandatory for all students unless otherwise specified by the clinical preceptor. In all clinics a short white coat with a Program approved name tag and the PA Program cloth patch will be worn with appropriate dress to reflect a "professional" or "business" appearance. Personal grooming and hygiene must be a priority. For men a shirt and tie with appropriate dress pants are required. For women a skirt and blouse, dress, or dress slacks are required. In certain clerkships, the requirement for the white coat may be waived by the preceptor.

All students are required to be present for clinical duties (clinic, hospital rounds, presentations, etc...) at the times designated, including evenings, Saturdays and Sundays. Further clarification/definition can be found in the Rotation Handbook.

In all cases, students are required to notify both the preceptor and his or her Clinical Coordinator at the Program of all absences during all clinical rotations.

Failure to notify the Program of an absence from any clerkship site shall constitute an unexcused absence and be subject to disciplinary consequences.

All students will be required to take the appropriate end-of-rotation examinations as directed by the Program.

Students falsifying entries on the electronic patient logs will be considered to be engaging in academic dishonesty and will incur disciplinary consequences as deemed appropriate by the Progress and Conduct Committee.

Failure to submit entries on the electronic patient logging system in a timely manner as described in the Rotation Handbook will result in academic suspension from clerkships. Habitual and long-term failure to submit clerkship log entries will result in termination of enrollment via voluntary withdrawal or academic dismissal.

Constraints on Clinical Activity

Physician Assistant students should not make a diagnosis, carry out any diagnostic or therapeutic procedure or administer therapy without appropriate direction or supervision of the clinical instructor or preceptor.

The Program Director, in consultation with the faculty, shall consider dismissal of a student from the Program on grounds of academic deficiencies, for example:

- A rotation grade of a D or F.
- Earns two or more unsatisfactory preceptor evaluations.
- A clinical evaluation that includes unsatisfactory performance in interpersonal skills/professionalism may be sufficient grounds for dismissal from the Program regardless of the student’s grades.

Anti-nepotism and Non-fraternization Policies

Occasionally students ask to serve a rotation with a family member (mother, father, sibling, grandparent or significant other) who is also a health care provider serving as the preceptor. Because such close personal relationships can interfere with the clinical evaluation process, which is both objective and subjective in nature, these rotation arrangements are prohibited.

Similarly, a student may find himself or herself attracted to a preceptor (or vice versa) or other personnel at the site(s) where they are serving a rotation. Pursuit of such relationships during the rotation period compromises the integrity of the education and evaluation processes and is therefore prohibited. Engaging in such a relationship will also make the student ineligible for a subsequent rotation with that preceptor, and potentially the remainder of the site, if multiple rotations are offered.

Students failing to comply with the above policies will be withdrawn from rotation and may incur a delay in progression in their clinical education.

Students with questions or concerns about the above issues should immediately consult the clinical coordinator.

General information and further policies, procedures for the clinical year will be reviewed and delivered to each student prior to beginning the clinical experience.
Graduation Ceremony
All students eligible to graduate are expected to participate in graduation ceremonies/hooding ceremony.

Graduation/hooding ceremony will usually be held in July. The PA Program will assume the responsibility of performing the graduation/hooding ceremony. Any post-graduation reception will be the responsibility of the graduating class.

Post-Graduation
Licensure - Be aware that there may be a delay in obtaining a license from the South Dakota State Board of Medical and Osteopathic Examiners, and others following graduation, due to processing of your application.

NCCPA Examination – All students who are eligible and wish to take the NCCPA exam for certification must pre-register. Passage of the exam is required in South Dakota and other states. You should be prepared for the approximately $500 fee that must accompany your application.
The PA Program Progress and Conduct Committee:

Responsibilities of the Committee include:
1. Reviewing the cases of students who have not met the expected academic standards, and making recommendations for student promotion, probation or dismissal;
   a. Probation and/or dismissal decisions will be guided by SDBOR policies 2.9 and/or 3.4
2. Reviewing the cases of students who have violated rules and/or regulations governing professional conduct and patient contact.
3. The Committee may, at its discretion or upon the request of accused student, meet with the accused student to discuss the student’s individual situation.
4. The Progress and Conduct Committee makes recommendations to the Program Director

Academic appeals are handled through the Graduate Academic Appeal Policy (SDBOR Policy 2:9, see below) and/or the Student Code of Conduct Policy in the event of an allegation of misconduct (SDBOR 3.4; see below). In addition, general campus rules and policies relating to student conduct are found herein and in the University Student Handbook available in the myU Portal at link.usd.edu/45.

Grievance Procedure
The Physician Assistant Program recognizes the right of students to appeal any decision made about a disciplinary action against them. The student is referred to the Graduate Studies Catalog, http://www.usd.edu/graduate-school/student-resources.cfm

Other Situations
It should be noted that due to the many potential requirements beyond scholastic achievement for licensure as a PA, the PA Program and the University of South Dakota do not take responsibility for obtaining licensure of its graduates as PAs in the State of South Dakota.

Any other situation or condition not addressed in these RULES, REGULATIONS AND PROCEDURES should be brought to the attention of the Program Director. Each will be considered independently according to the merits of the case. Insofar as possible each will be dealt with in a manner comparable to similar conditions described in this document.

These RULES, REGULATIONS AND PROCEDURES may be amended from time to time.
Extended Curriculum Pathway

Like most PA Programs, the USD PA Studies Program has an extremely concentrated and academically challenging curriculum. However, most PA students will be able to complete the program by adhering to regimen of academic rigor and discipline. Rarely but on occasion, a student who may ultimately become high quality PA, may not be suited to this intense curriculum, given the student’s individual skills and situations. For these rare students, the USD PA Studies Program has developed an “Extended Curricular Pathway” that allows students to complete the 12 month, Preclinical Phase over 24 months, or as determined by the Progress and Conduct Committee.

The “Extended Curricular Pathway” is designed as an alternative for the student faced with extenuating or extraordinary circumstances. Admission to the pathway is limited to those who require temporary help in completing the full pre-clinical curriculum. It is only offered to students who have already matriculated into the program. **NOTE:** Any student who is experiencing academic failure, or who is not in good academic standing (for example a student with failing grades on exams), or any student who is the subject of an involuntary dismissal from the Program for any reason may not use this policy for the purpose of avoiding or delaying academic or disciplinary consequences.

For all Extended Pathway applicants, the following will apply:

- The student request for the extended pathway must be made in writing and addressed to the Program Director. The reason for the request should be stated clearly in the letter. In most cases, the student should continue to attend classes, take examinations and fulfill any other class assignments until leave has been formally granted. In the event that the student is ill or otherwise indisposed the Program Director may initiate the action independently.
- The student is responsible for initiating determination of the financial consequences of the extended curriculum pathway. Students must review financial arrangements with the Business Office and the Office of Financial Aid.
- When an Extended Pathway is granted, the Program may require that the student meet additional academic requirements (e.g., remedial course work) and/or submit specific documentation (e.g., certification for medical leave or a medical release to return to classes).
- When an Extended Pathway is granted, students must notify the Course Coordinators of their withdrawal from all classes in which they are enrolled.
- Design of the Extended Curriculum Phase will be individualized for each student by the Progress and Conduct Committee. This individualized plan will be written as a "contract" between the student and the USD PA Studies Program.
- The Extended Pathway can only be granted for a period of time in the pre-clinical phase as determined by the Progress and Conduct Committee.
- The Extended Pathway will extend the preclinical phase from the usual 12 months and will require the assignment of a new program completion date, new graduation date, and may require assignment to a new graduating class.
- Upon re-enrollment following a leave of absence, the student will be subject to all rules and regulations which pertain to any new class to which he or she will be assigned.
- The extended curricular pathway only applies to the preclinical phase. After successful completion of the preclinical curriculum the student must comply with the clinical phase as stipulated in the clinical year handbook. Rotations will proceed without interruption throughout the entire clinical phase of the program. This holds for both traditional students and students involved in the Extended Phase.

Any such extended curriculum granted shall be solely within the discretion of the PA Progress and Conduct Committee, and ultimately the Program Director, based upon the merits of the request, which are evaluated on a case-by-case basis. The Program Director will review the Progress and Conduct decision and inform the Dean of Health Sciences of the action taken on the petition. Students have the right to appeal the decision. The student is referred to the Graduate Studies Catalog for the “Graduate Student Academic Appeal Procedure.”

Since the Extended Curricular Pathway was developed to allow students extra time to complete the Preclinical Phase, students are not allowed to work during this period.
Leave of Absence

Under exceptional circumstances, students may be granted a Leave of Absence (up to 3 months, or as determined by the Progress and Conduct Committee) during the clinical phase of the program. Any such leave of absence granted shall be solely within the discretion of the Progress and Conduct Committee/program faculty, and ultimately the Program Director, based upon the merits of the request, evaluated on a case-by-case basis. A leave of absence constitutes formal permission to delay progression through the Physician Assistant Program but does not excuse the student from any program requirements. NOTE: Any student who is experiencing academic failure, or who is not in good academic standing (for example a student failing a clinical rotation), or any student who is the subject of an involuntary dismissal from the Program for any reason is not eligible to utilize this policy for the purpose of avoiding or delaying academic or disciplinary consequences.

For all leaves of absence, the following will apply:

- The student request for a leave of absence must be made in writing and addressed to the Program Director. The reason for the request should be stated clearly in the letter. In most cases, the student should continue to attend clinical rotations, take examinations and fulfill any other rotation requirements until a leave has been formally granted. In the event that the student is ill or otherwise indisposed, the written requirement may be waived, or the Program Director may initiate the action independently.
- The student is responsible for initiating determination, through the Financial Aid Office, of the financial consequences of taking a leave of absence. Students must review financial arrangements with the Business Office and the Office of Financial Aid.
- If a leave of absence is granted, the Program may require that the student meet additional academic requirements (e.g., remedial course work) and/or submit specific documentation (e.g., certification for medical leave or a medical release to return).
- If a leave of absence is granted, students must notify all clinical preceptors in which they are enrolled of their withdrawal from rotations.

If a leave of absence is granted, the design will be individualized for each student by the Progress and Conduct Committee/Program Faculty. This individualized plan will be made into a "contract" between the student and the USD PA Studies Program.
Section III - Resources
Registration and Financial Aid

A USD PA Program will register students for all classes within the PA Program curriculum. However, students will need to fill out an annual FAFSA report in order to be eligible for financial aid. While enrolled in the PA Program, students are eligible for financial aid, but the level of aid will vary depending on a variety of factors. For questions about financial aid please contact the financial aid department at 658-6250.

Didactic Phase (12 months)
Fall, Spring, and Summer

Second Year – Clinical Phase (12 months)
Fall, Spring and Summer

It will be necessary to access information from the FAFSA web site to help complete the FAFSA report. Make sure the printer is switched “on” before attempting to log-on to.

www.fafsa.ed.gov

Your pin # is not the same number as your DNR number. If you do not have a pin number, you must request one by calling the 1-800-801-0576 customer service number. The pin number will remain the same year after year unless you lose it or change your name and/or your Social Security number. If you don’t have the pin #, you may enter as a new student. A pin # will automatically be sent to you. Follow the directions and submit the form.

Students can verify that their web application was properly received and recorded by returning to the home page, www.fafsa.ed.gov and selecting "check my submitted fafsa". The one-line status check allows students to check their application all the way from submission to the processed SAR. If a student has a PIN #, he/she can also look-up the processed EFC. Students may also call FAFSA on the Web Customer Service at 1-800-801-0576 to perform a status check over the phone.

myU. Student Portal

myU. is the personal, customizable portal to The University of South Dakota. Login consists of username and password. Services are presented based on your role at The U. The student view will vary slightly from the faculty/staff view. myU. provides a single point of entry to e-mail, D2L, WebAdvisor, and other university-wide network communications and functions. myU. will be expanded continually with additional features and online applications.

Academic Advising Center
advising@usd.edu
605-677-5381
The Academic Advising Center provides general academic advising for all USD students. It offers classes and individual instruction to strengthen test-taking, reading, writing, and critical thinking skills.

University Writing Center
wcenter@usd.edu
677-5626
The Writing Center is a place where students can meet with writing consultants to discuss their writing and get assistance with developing their writing skills. Any USD student, faculty member, or staff person may come to the Writing Center for individualized help with any writing. The Writing Center provides knowledgeable, experienced writing consultants who will work with students on a variety of writing: academic papers written for classes; MA theses and dissertations; homework that involves writing.

Psychological Services Center
http://www.usd.edu/education/counseling-and-school-psychological-services-center
(677-5250)
There is a Psychological Service Center on the Vermillion Campus operated by the Clinical Training Program of the Psychology Department of the University of South Dakota, which will provide confidential help for a wide range of personal and emotional difficulties. This service is available to all full-time students of the University.
Student Counseling Center
www.usd.edu/scc
(677-5777)
Students are invited to meet with any PA Program faculty member to discuss general/personal concerns, scholastic problems and any issues relating to the PA profession. The Student Counseling Center offers individual, group, and relationship counseling.
Areas covered include:

- crisis management
- problem solving
- assertion and confidence
- self-esteem skills
- habit control
- concentration
- stress management

The Student Counseling Center also operates an Alcohol and Other Drug (AOD) Services program which is accredited by the State Division of Alcohol and Drug Abuse. Individual, group and family counseling is available, as well as formal assessment of substance use. The AOD program has recently been accredited to provide Intensive Outpatient Treatment for USD students. In addition, extensive proactive AOD Prevention activities are provided across the campus throughout the year.

Student Health Services
www.usd.edu/shs
(677-3700)
The University of South Dakota Student Health Services is provided by the Sanford Clinic Vermillion. Every full time student on the Vermillion Campus is automatically enrolled in the service by payment of the general university fee. The Student Health Service is a primary care facility and renders basically the same service as a personal physician’s office. Please see the Student Health website for a complete listing of services. Hospital care and other services are not covered; therefore all students must have major medical health insurance coverage.

- Policy requires that all USD School of Health Science students carry major medical health and disability insurance during their education at USD. This insurance can be provided through a premium billed to the student’s University account on an annual basis. This particular insurance company will provide a presentation on this plan during student orientation.
  
  Individual students who have their own health coverage may opt-out of the school policy so long as their coverage is comparable to the policy coverage offered through the school (no individual policies). Students are required to show proof of said coverage at the time of orientation and throughout the program.

- PA Faculty are not permitted to provide medical care to PA students

Disability Services
www.usd.edu/ds
disabilityservices@usd.edu
677-6389
Disability Services is an integral part of The University of South Dakota, committed to ensuring that students and campus visitors with disabilities have equal access to all programs and activities USD offers these services in accordance with Section 504 of the Rehabilitation Act of 1973 and with the Americans with Disabilities Act (ADA) of 1990. Disability Services is committed to providing services and support to ensure that students are able to access and participate in all of the activities, programs and services of The U. Disability Services are available to students with a qualifying and documented learning, physical or psychological disability.

Any student who feels s/he may need academic accommodations or access to accommodations based on the impact of a documented disability should contact and register with Disability Services during the first week of class. Disability Services is the official office to assist students through the process of disability verification and coordination of appropriate and reasonable accommodations. Students currently registered with Disability Services must obtain a new accommodation memo each semester.

For information contact:
Ernetta L. Fox, Director
Disability Services
Parking
USD parking policies and procedures are available online at http://www.usd.edu/administration/university-police/parking

GENERAL: The University develops and maintains parking lots for the use of its faculty, staff, students and others attending the campus for university functions or for university purposes. Parking permits are required to use the university parking system except as noted. Parking permits may be purchased by members of the faculty, staff, student body, employees of entities affiliated with the university and visitors who are on campus for university purposes.

All parking on campus, except designated visitor parking and metered parking, is by permit only. Permit Type A is used to designate Non-campus Resident (including employees) and Permit Type B is used to designate Campus Residents. The lot directly west of Lee Medical Building is designated as Type A; whereas the lot across Dakota Street is designated as Type B.

A parking permit does not guarantee a parking space but an opportunity to park within a specified area or areas. Permits are sold on a first come, first served basis. Parking permits sold may exceed the number of available campus parking spaces. Since spaces in prime parking areas tend to fill first, a motor vehicle operator may have to choose space in a less convenient location.

VISITOR PARKING: Not for students or employees of the University.

TEMPORARY RESTRICTIONS AND CHANGES: The University reserves the right to make temporary changes in the parking regulations. Such changes will be posted, and when practical be publicly announced in advance.

Campus Public Safety
- http://www.usd.edu/administration/university-police
- Police, Fire, Medical Emergencies (from campus phones): 9-911
- Non-emergencies: 658-6199

The Department of Public Safety consistently strives to ensure the safety of the University community and the surrounding area. The officers work closely with the University Administration and the Vermillion Police Department.

The Department of Public Safety is the agency responsible for law enforcement on campus. In addition to law enforcement, the department is responsible for operating the Campus heating plant, Parking and Traffic Management, and Escort Services. DPS is located in the Davidson Building, directly south of the USD Libraries, in the heart of campus. Our office is open 24 hours a day, 365 days a year.

Our staff is composed of full-time Police Officers and part-time Security staff. Full-time Police Officers are sworn in as Vermillion City Deputy Police Officers and receive the same training as other City Police Officers. Each Officer is required to attend the South Dakota Law Enforcement Academy in Pierre, SD. In addition to law enforcement, our officers respond to all medical emergencies on campus. Subsequently, many of our officers are certified EMTs.

Crime prevention and education are high priorities of DPS. We work with all members of our community to find answers to problems and address concerns of those we serve.
Section IV - Health and Safety
Health
Every student is required to present to the University of South Dakota Student Health Center evidence of good health and absence of communicable disease prior to matriculation in the Physician Assistant Studies Program. This includes but is not limited to a physical examination, up-to-date immunizations, or immunity against mumps, measles, rubella, polio, varicella, Tdap, Hepatitis B, influenza and TB skin test. Some clinical sites may impose additional requirements. Forms and procedures are provided upon acceptance to the program. PA faculty are not allowed to perform health screening exams or conduct immunization of PA students. Students must comply with the immunization requirements (see policy on immunization compliance). Certain medical problems as determined by the student’s health care provider and The University of South Dakota policies might preclude a student’s placement in a clinical facility. Questions concerning this should be referred to the Program Director.

Health Affairs Student Insurance Policy
Students enrolled in Health Affairs graduate professional programs are required to carry health insurance coverage that meets or exceeds the minimum standards outlined below. These students must provide proof of credible coverage meeting minimum coverage standards at the beginning of each academic year. Students enrolled in Health Affairs undergraduate professional programs are required to carry health insurance coverage that meets or exceeds the minimum standards outlined below, at the beginning of the semester in which they will engage in clinical experiences. Health insurance coverage is a requirement of the Affordable Care Act, each academic program’s accreditation standards, and through affiliation agreements with clinical rotation sites. Students who are unable to provide or have not provided sufficient proof of credible coverage meeting minimum standards will not be allowed to participate in clinical rotations or experiences.

If required by the student’s specific academic program, other insurances (ie. Life, disability and malpractice) are purchased as a part of the student tuition and fees.

Minimum coverage requirements are:
- Nationwide coverage
- Insurance must contain provisions for mental health and chemical dependency coverage.
- Insurance not have a deductible higher than $9000 or out of pocket maximum of $9000.

NOTE: Exceptions to the minimum requirements may be temporarily granted on an individual basis with the approval of the Dean of Medical Student Affairs or the appropriate Health Sciences Department Chair.

Examples of acceptable coverage may include but are not limited to:
- Group plans where student is a dependent of a parent or spouse.
- Tricare
- Medicaid
- Coverage through the HealthCare.gov marketplace. South Dakota companies participating in the marketplace include Avera Health Plans, Sanford Health Plan

Malpractice, Life and Disability Insurance
All USD PA students are required to participate in the malpractice, life, and disability insurance offered through the USD School of Medicine and School of Health Sciences. Charges for this insurance will be automatically added to the student’s tuition and fees.

Criminal Background Check
Notification of Disclosure – National Commission Physician Assistant National Certification Examination (PANCE) & State Licensure
Applicants should know that applying to the National Commission on Certification of Physician Assistants (NCCPA) to sit for the national certification examination (PANCE) may include answering questions regarding any convictions. A candidate should direct any questions he / she may have to NCCPA, 12000 Findley Road Suite 100, Johns Creek, GA 30097-1409 or call (678) 417-8100. Additionally, applicants should know that most states have regulations regarding an individual’s eligibility to practice as a physician assistant in that given state. As part of the application process, states may request information regarding history of chemical and / or alcohol abuse, felony convictions, and malpractice. Due to requirements for disclosure, the Physician Assistant Program at the University of South Dakota began to require all accepted students to submit to a Background Check in fall 2005.

Updated 02/2019
Latex Allergy
Latex products are extremely common in the medical environment. Students with a history of latex allergy are at risk for future severe reactions upon exposure to latex products. These include: local reaction, eye/nose itching or watering eyes, gastro-intestinal symptoms (pain, nausea, vomiting, diarrhea), constricted sensation in the throat, dyspnea (difficulty breathing), generalized urticaria with angioedema (tissue swelling) and/or anaphylaxis (cardiovascular collapse).

Any student with a known latex allergy, or having or describing symptoms consistent with latex allergy, is advised to consult a qualified allergist for evaluation. Such evaluation is at the student’s expense. Any student found to be latex allergic must determine whether or not to continue with clinical training, acknowledging the risk of becoming ill even if after reasonable precautions are taken and accommodations are made.

If such a student elects to continue in training, the student must realize that he/she assumes any responsibility and risk posed by allergic reactions, which can range from mild symptoms to anaphylaxis and death. In the event such an allergy is present, either intentional or inadvertent exposure to latex and related products may lead to these consequences.

Automated External Defibrillator (AED) Policy for Lee Medicine and Science Hall

Introduction
Automated External Defibrillators (AEDs) are lightweight, portable computerized medical devices that save lives. They are designed to be used by persons trained in basic skills such as cardiovascular pulmonary resuscitation (CPR) and require limited training for their proper use. Following a simple setup process, the AED can check a person’s heart rhythm and can recognize a rhythm that requires a defibrillation shock, advise when one is needed, and can provide that shock. Used properly, AEDs can save many persons experiencing sudden cardiac arrest.

AEDs in Lee Medicine and Science Hall
There are five AEDs located in Lee Medicine and Science Hall. Four units, Physio-Control LIFEPAK 500 AEDs, are located in alarmed wall cabinets located in the public areas. In the lower level, the AED is located outside of LeeMed 15. On the first, second and third floors, the AED’s are located outside of the restrooms at the south end of the building. The cabinets are alarmed such that opening the door will trigger an audio and visual strobe alarms.

The fifth unit is located in the Human Performance laboratory of the Department of Physical Therapy in LeeMed 28. This unit is not available to the public during normal working hours and is positioned in this room for quick access during human performance testing.

Training in AED Usage in Lee Med
There are many levels of CPR/AED training offered by the American Heart Association. The training requirements for Lee Med’s CPR/AED process are fulfilled by any American Heart Association training program covering CPR/AED, including the basic “heart saver” training.

Students enrolled in the MD, MD/PhD, PA and PT programs are trained in AED use during their normal basic life-saving courses. Notification of completion of the BLS/AED training each year will be forwarded to the Building Safety Point of Contact (Steve.Waller@usd.edu) within ten days of completion.

Staff and faculty located in Lee Med will be offered classes in “heart saver” CPR and AED training annually. Historically, this course has been offered through BBS during the end of year break between Christmas and New Year’s. This course is offered at no charge to faculty and staff of BBS. Departments will be asked to cover the expense for their faculty and staff training. Notification of completion of the BLS/AED training each year will be forwarded to the Building Safety Point of Contact (Steve.Waller@usd.edu) within ten days of completion.

Faculty, staff, and students certified in CPR/AED use will be required to receive refresher training once every two years. This will commonly be done through the end-of-year offering “heart saver” training arranged by BBS. Again, notification of completion of the CPR/AED refresher training will be forwarded to the Building Safety Point of Contact (Steve.Waller@usd.edu) within ten days of completion.

Liability and Good Samaritan Laws Relating to AED Use
SDCL 20-9-4.4 provides civil immunity for emergency use or nonuse of AED by a lay person. Anyone may, at their
discretion, provide voluntary assistance to victims of medical emergencies to the extent appropriate to their 
training and experience.

20-9-4.4. Civil immunity for emergency use or nonuse of AED. Any person, who in good faith 
obtains, uses, attempts to use, or chooses not to use an AED in providing emergency care or 
treatment, is immune from civil liability for any injury as a result of such emergency care or 
treatment or as a result of an act or failure to act in providing or arranging such medical treatment.

Maintenance of AEDS
The BSPOC (Building Safety Point of Contact) will be responsible for maintaining all records for the AED units 
housed in Lee Med. This will include the following:
- Guidelines for use
- Manufacturer's instructions
- Training records for faculty, staff and students and a description of the training program
- AED Incident Reports
  - AED Incident Reports will be automatically reported to the USD AED Program 
    Coordinator.
  - If your program requires reporting to another point of contact (i.e., medical director), you 
    are expected to make the report to that point of contact in addition to reporting to the 
    BSPOC.

The BSPOC will monthly inspect all AEDs in LeeMed to verify they are in proper working order and in adherence 
to manufacturer specifications. A tag will be maintained on each unit for documentation of monthly inspection. 
Units found not to be in proper working order will be removed from service until they are repaired or replaced. The 
BSPOC will annually report to the USD AED Program Coordinator as verification of compliance with this policy. 
The BSPOC will notify the USD AED Program Coordinator immediately of any AED incidence and of any AEDs 
that are removed from service.

Required Equipment
Each wall-mounted AED unit should have accompanying the unit the following supplies:
- Adult AED electrodes. Pediatric electrodes are optional but strongly encouraged for areas in 
  LeeMed where children may be involved in our educational process.
  - At least one spare set of adult and pediatric electrodes should be available for each model 
    of AED in LeeMed.
  - At least one set of batteries for each model of AED in LeeMed should also be available.
- Safety razor for shaving chest hair when necessary to apply the AED pads
- Cardiovascular pulmonary resuscitation barrier (face shield or mask) for protection from infectious 
  disease
- Two pairs of unused medical examination gloves (size large or extra-large)

Building Safety Point of Contact
USD designates for all academic and administrative buildings a single BSPOC. This person is responsible for the 
coordination of the emergency response for this building and plays a vital role in the campus safety structure and 
in building evacuations. BSPOC, or their designee, is responsible for disseminating non-emergency information 
throughout the building and developing and maintaining a contact tree for their building to communicate both 
emergency and non-emergency information. The LeeMed BSPOC is Steven Waller. Dr. Waller can be reached 
by email at Steve.Waller@usd.edu, by telephone at 605-658-6323 (landline to office) or 605-677-9033 (cell 
phone).
**Winter Weather**

- The USD Vermillion campus rarely closes for winter weather.
- Use your own common sense regarding specific conditions when making decisions about winter travel.
- Do not travel if you feel the roads are unsafe.
- In the event a Course Director/Course Coordinator is unable to hold class, e.g.,
  - Dr. Waller (Pharmacology)
  - Amber Evenson, Katie Kassin, Tracy Cleveland, Julie Johnson, Nancy Trimble, Wade Nilson (Clinical Medicine, Prof. Practice 2 and 3)
  - Dr. Schweinle (Research Perspectives)
  - Dr. Nilson (Professional Issues 1)
  - Betty Hulse (Clinical Phase)
  The decision will be announced using e-mail and initiation of the calling tree as soon as possible before the start of a class or class-day that will be cancelled.
- You should assume classes are being held unless you receive official notification of the campus closing or notification by e-mail that one or more classes has been canceled.
- If you do not attend class for reason of winter weather and the class or classes are not cancelled, then you are responsible for all of the material covered in your absence.
- If a student is unable to attend s/he is required to call to speak directly with the Course Coordinators. If unable to speak directly with the Course Coordinators, s/he is to leave a voice mail or e-mail and call the PA Program Office at (605) 658-5926
- In the event of rapidly worsening weather, for which the Course Coordinator/Course Director is unable to hold class, the decision may be announced after the start of a class. Method of announcement will be either personal notification or by using e-mail and initiation of the calling tree.
- If a student has excessive absences due to weather, the student will meet with the faculty to discuss the student’s continuation in the Program.

**Clinical Phase**

- If you are on a clinical rotation that requires travel, you are expected to follow the policy as outlined in the student rotation handbook:
  - It is mandatory that students notify the Clinical Coordinator by phone or email of any absence. If the absence has not been or cannot be preapproved, such as an absence due to weather, the student is required to notify the Clinical Coordinator the same day that the absence occurs.
  - The student is also required to notify the preceptor on the morning of the absence as early as possible. Students must speak to the preceptor personally; do not leave messages with clinic staff and do not send a text message or email. Notification should never occur after an absence.
  - If the student is unable to reach the preceptor personally, the Clinical Coordinator needs to be informed as soon as possible that this is the case.
  - If you cannot reach the Clinical Coordinator, call the rotation specialist
  - If a student has excessive absences due to weather, the student will meet with the faculty to discuss the student’s continuation in the Program.
Universal (Standard) Precautions

Policy: It is standard policy that all body substances except sweat will be regarded as contaminated with the potential for transmission of serious illness. Therefore, all students in patient care settings will be expected to utilize a system of Universal (Standard) Precautions for the prevention of contact with these body substances.

Definition: Universal (Standard) Precautions is a system of infection control/precautions which places emphasis on the health care worker to consider all body fluids as potentially infectious for HIV, HBV or other pathogens and to adhere rigorously to infection control practices for minimizing the risk of exposure to the body fluids of all patients regardless of the patient’s inpatient/ outpatient status.

Key Points: Clinical sites shall have a system of universal (standard) precautions that is consistent with recommendations from the Centers for Disease Control and OSHA Bloodborne Pathogens Final Standard.

The system focuses on isolating all blood and moist body substances (except sweat), dry blood, mucous membranes and non-intact skin from personnel by the use of appropriate barriers. Physician orders for special precautions may be initiated in instances where airborne, droplet, or contact precautions, or protective isolation is required.

The system fulfills a standard of care that interrupts cross-contamination of organisms from colonized and infected patients to others. It provides comprehensive protection for health care workers and patients from known and unknown sources of infection. It is used for all patients at all times.

The system relies on persistent, consistent applications of principles: 1) as outlined and 2) as these actions are determined necessary by the assessment of the healthcare worker.

Equipment:
The universal supplies and equipment that students may need are usually available in patient care areas:
1. Gloves
2. Gowns
3. Masks/eye protection/facial shields
4. Signs
5. Isolation linen
6. Microshields, resuscitation equipment
7. Hand washing facilities

Procedure:
A. Personal Protective Equipment

- Is considered "appropriate" ONLY if it does not permit blood or other potentially infectious materials to pass through or to reach the employee’s clothes, street clothes, undergarments, skin or mucous membranes.
- Shall be readily accessible in all patient care areas. All staff shall be knowledgeable of its location.
- Lack of practicality, concern regarding patient perception, discomfort in wearing personal protective equipment are NOT considered acceptable criteria for refusing to wear PPE.

1. Gloves: Gloves shall be worn when it can be reasonably anticipated that an employee may have hand contact with blood or potentially infectious materials; when performing vascular access procedures or when touching contaminated items or surfaces. Gloves may also be worn to minimize potential transfer of organisms from the healthcare worker to the patient.
   a. Use sterile gloves for procedures involving contact with normally sterile areas of the body.
   b. Use examination gloves for procedures involving contact with mucous membranes and non-intact skin (unless otherwise indicated) and for other patient care or diagnostic procedures that do not require the use of sterile gloves.
   d. Do not wash or disinfect surgical or examination gloves for reuse.
      Washing with surfactants may cause "wicking," i.e., the enhanced penetration of liquids through undetected holes in the glove. Disinfecting agents may cause deterioration.
e. Use general purpose utility gloves (e.g., rubber household gloves) for housekeeping chores involving potential blood contact and for instrument cleaning and decontamination procedures. Utility gloves may be decontaminated and reused but should be discarded if they are peeling, cracked or discolored, or if they have punctures, tears or other evidence of deterioration.

f. Use gloves for activities/procedures which involve contact with mucous membranes/non-intact skin including, but not limited to: suctioning, oral care, perineal/genital care, bowel care, open lesion care, urinary drainage or emptying, handling of all specimens, handling of heavily soiled linen, starting and manipulating IV/arterial lines and stopcocks, emptying fluid-filled containers.

g. Gloves are used when cleaning up blood/body fluids.

2. Gowns, Aprons and Other Protective Body Clothing
   a. Wear an impervious gown in instances where clothing may become soiled or wet. Change clothing and cleanse skin as soon as possible if contamination of clothing/skin occurs.
   b. Personnel during care of patients infected or suspected to be infected with significant organisms (e.g. antibiotic resistant organisms) wear gowns.

3. Masks/Goggles/Shield Masks
   a. Wear in instances of possible splashing, spraying, spatter or droplets where contamination of skin and mucous membranes can be reasonably anticipated.
   b. Wear a surgical mask to provide protection against infectious large-particle droplets spread by coughing, etc.

B. Linen and Laundry
   a. Use isolation linen (individual or packs) as necessary.
   b. Any handling of contaminated linen/laundry shall require the use of appropriate barriers.

C. Hand washing shall be considered an integral part of universal precautions, as well as good personal hygiene. Wearing gloves is NOT an acceptable alternative to hand washing. Instead, a combination of the two is necessary to interrupt infection transmission to patients or personnel.

Procedure:
1. Remove jewelry unless it has been worn during a procedure.
2. Wet hands under running water.
3. Keeping hands lower than elbows, apply soap or antiseptic.
4. Use friction for at least 10 seconds to clean between fingers, palms, back of hands, wrists and forearms.
5. Rinse under running water.
6. Use paper towels to dry hands.
7. Use paper towels to turn off the faucet and discard.
8. Use lotions after washing to prevent dermatitis, chapping and chafing.

D. Other
1. Eating, drinking, smoking, applying cosmetics or lip balm and handling contact lens are prohibited in work areas where there is reasonable likelihood for exposure to infectious materials.
2. HIV (+) persons require no procedures in addition to the above listed standard precautions/procedures. All patients’ blood and body fluids except sweat are considered potentially positive for bloodborne and other pathogens and thus are treated as such.
Sharps Disposal

NEEDLES AND OTHER SHARPS

**Sharps**: Items designed to cut or puncture skin and sharp items contaminated with human blood and body fluids.
- Needles and syringes with needles
- Lancets
- Scalpels and razor blades
- Contaminated broken vials, hematocrit tubes, Pasteur pipettes and laboratory slides

**OSHA-Approved Sharps Container**: Closable, puncture resistant, leakproof, plastic sharps container.
**Obtain from**: Laboratory supply/safety catalog.

**Disposal Procedure**:
- Collect in an OSHA-approved sharps container.
- When full take to a sharps collection area and deposit container in the red plastic collection can. (Ask your building manager for the location)

HAZARDOUS GLASS AND PLASTIC

**Hazardous Glass and Plastic**: Items that can injure if disposed of in normal trash containers.
- Pasteur pipettes
- Other pipettes and tips
- Uncontaminated slides and cover slips
- Broken or fragile glass

**Sturdy, Leakproof Cardboard Boxes**:
- Use plastic liner.
- Double box or tape seams to contain waste.
- Use packing tape, not lab tape or masking tape.
- Limit weight to 20 lbs.
- Limit bottom size to 12 x 12
- Use discarded boxes or obtain boxes from a lab supply catalog.

**Disposal Procedure**:
- If contaminated with infectious agents or human blood, decontaminate first.
- Empty the item of hazardous chemicals and drain liquids.
- Tape box closed.
- Mark box with the words “Hazardous Glass for Disposal” and your room number.
- Place in hallway next to your lab door.

EMPTY BOTTLES, OTHER GLASS AND PLASTIC

**Unbroken Glass and Plastic**: Items that present no hazard if disposed of as normal trash.
- Petri dishes (decontaminated)
- Sturdy test and centrifuge tubes
- Empty bottles

**Regular Lab Wastebasket**

**Disposal Procedure**:
- If contaminated with infectious agents or human blood, decontaminate first.
- Empty the item of hazardous chemicals, rinse and drain liquids.
- Place in wastebasket
- Place large (4 liter) bottles next to wastebasket.
Immunization Compliance Policy
Physician Assistant Program

It is the policy of The University of South Dakota PA program that all students must comply with the immunization requirements as defined (in the USD Health Affairs Immunization Policy) by the SD Board of Regents and State Health Department. This includes appropriate documentation of immunizations and/or titers. It is the student’s responsibility to meet the PA program deadlines for these requirements. Students are not allowed to participate in patient care without appropriate immunizations and/or titers.

Failure to comply with this PA program policy will result in dismissal.

For the protection of the health of our students and because of the risks of exposure to infectious diseases to which students are subjected in the course of clinical work, certain tests and immunizations are required. Entering and visiting students are required to provide documentation of all required immunizations to USD Student Health prior to matriculation or visit. Immunization records are maintained by USD Student Health. As these immunizations are part of the School(s) on-going affiliation agreements with our clinical sites, students will not be allowed to register or participate in any clinical activities until documentation is provided. Students are responsible for maintaining copies of their immunization records and titer reports and keeping these records updated.

Health Affairs Requirements:

- Students are required to follow the Immunization Compliance Policy of their specific program.
- For students in programs requiring full compliance with the USD Health Affairs Immunization Policy, the immunization form must be completed with the appropriate signatures. Include copies of titer reports and other medical records when applicable.

1. Measles (Rubeola), Mumps, Rubella. One of the following is required:
   - All students born after December 31, 1956 are required to have medically signed proof of TWO properly administered immunizations.
   - Immune titers for measles (rubeola), mumps, and rubella.

2. Hepatitis B immunization. ALL students are required to receive HBV vaccination (3 doses at 0, 1 and 6 months). The first two doses of the three dose series are required prior to the start of classes. A positive HEP B titer without proof of vaccine dates is accepted if unable to obtain immunization dates.

   AND

   Hepatitis B titer.

   - Test for anti-HBs or HbsAB (HBV surface antibodies). Recommended 1-2 months after completion of the vaccination series.
   - Students admitted with documented prior vaccination history must also provide immune status documentation. If that is not available, current immune status will be determined by the titer.
   - A copy of the titer report must accompany immunization form or be provided as soon as it is available.
   - Those who do not seroconvert when the titer is done 1-2 months following the series should be revaccinated with a full series with the titer repeated 1-2 months after the last immunization.
   - Those who do not seroconvert when the titer has been delayed greater than 12 months since the initial series may choose to obtain one additional booster dose of the vaccine with the titer repeated 1-2 months after the last immunization. If the second titer remains below 10mIU/mL, the person will complete the series followed by another titer.
   - If after a second series, titers remain below 10mIU/mL, the person is considered at risk for acquiring HBV. Students should be counseled about the occupational risk and the need to obtain HBIG prophylaxis for any known or probable parenteral exposure to HBsAg-positive blood. No further vaccine series are recommended. However, it is recommended the student consult with their health care provider about
being tested for HBsAg to make sure that chronic HBV infection is not the reason for vaccine non-response (assuming the 2nd negative HbsAb titer was performed 1-2 months following the last hepatitis B vaccine of the second series).

3. **Varicella/Chicken Pox immunity.** One of the following is required.
   - Varicella Titer if the student has had the chicken pox that indicates immunity (copy of titer report must accompany immunization form);
   OR
   - Two doses of varicella immunization is indicated if there is no history of the disease of if the varicella titer is negative. Recommended interval is 4-8 weeks between doses.

4. **Tdap (tetanus, diphtheria, adult pertussis).** One life time dose of Tdap (tetanus, diphtheria, adult pertussis) is required. Tdap vaccine can be administered to healthcare workers without concern for the length of time since the most recent Td vaccine. If it has been longer than 10 years since the Tdap, a Td or Tdap booster is required.

5. **Upon admission: TB Skin Tests or Interferon Gamma Release Assay (IGRA)**
   - Initial Two-Step TB Skin Test: Documentation of two TB skin tests is required. If the first is negative, a second TB skin test will be given in 1-3 weeks. The second negative will confirm lack of infection (any two documented TB skin tests completed within a 12 month period can meet this requirement.)
   OR
   - Interferon Gamma Release Assay (IGRA)
   - History of BCG vaccine is NOT a contraindication for tuberculin testing. TB skin test reactivity caused by BCG vaccine generally wanes with time. If more than 5 years have elapsed since administration of BCG vaccine, a positive reaction is most likely a result of M. tuberculosis infection.

During enrollment:

6. **Annual TB Skin Test:**
   - Students are required to have an annual TB Skin Test
   OR
   - IGRA
   OR
   - Annual symptom checklist if history of latent TB or if a TB Skin Test is contraindicated and the student had a negative IGRA on admission to their program.

If there is a lapse greater than 13 months between annual TB skin tests, the two-step TB skin test will be repeated.

Students with a positive TB skin test or IGRA:

- Are required to provide documentation from their health care provider including the following:
  - Result of the positive TB skin test (date placed, read, measurement in mm, signed by a health care provider) or IGRA report.
  - Chest x-ray report.
  - Determination by the health care provider if this a latent TB infection or active TB disease.
  - Treatment; including medication and dose, when started, when completed, etc.

Students who have active TB disease will be restricted from school and patient contact until they have provided documentation that satisfies the infection prevention policies of the health care facilities where the student trains.

7. **Annual Influenza vaccination:**
   The influenza vaccine is required by November 1st annually.
Recommended Immunizations:

- **Meningococcal (meningitis) vaccine.** Recommended for students living in college dormitories who have not been immunized previously or for college students under 25 years of age who wish to reduce their risk.

- All 11 to 12 year olds should be vaccinated with a meningococcal conjugate vaccine (Menactra® or Menveo®). A booster dose is recommended at age 16 years. Teens and young adults also may be vaccinated with a serogroup B meningococcal vaccine. In certain situations, other children and adults could be recommended to get any of the three kinds of meningococcal vaccines. Students should consult with their physician about the appropriate vaccine for their specific risk.

- Childhood DTP/DTaP/DPT and polio vaccines.

It is the policy that all students enrolled in medical school or any of the programs under the Health Sciences must comply with the immunization requirements of the School as defined in the USD Health Affairs Immunization Policy. It is a part of the student’s professional responsibility to meet these requirements in a timely manner and provide appropriate documentation. See the specific immunization and TB testing timelines in the Health Affairs Immunization Requirements Policy and Health Affairs Infection Control Manual.

USD Student Health is responsible for maintaining student immunization records and counseling students on any missing requirements. Students are reminded that their professional conduct includes timely responses to contacts from Student Health.

Failure to comply with meeting the immunization requirements may preclude registration for classes, receiving financial aid, and placement into a clinical setting.

After three attempts to contact a student to bring their immunization records in compliance, Student Health will provide these names to the Dean/Chair of the program and a report of a professional conduct violation will be placed in the student file. In addition, this may result in the referral of a non-compliant student to the Student Progress and Conduct Committee for review.

Updated 02/2019
DECLARATION OF UNDERSTANDING

I declare that I have read and understand the document titled Physician Assistant Student Affairs Handbook, which contains the requirements, rules, regulations, policies, procedures, and expectations of all students enrolled in the USD Physician Assistant Studies Program.

I further declare that I understand that all said policies apply to all phases of student education and evaluation and that I will uphold and comply with all policies stated herein for as long as I am enrolled as a student in the USD Physician Assistant Studies Program.

I received the link and directions to the Graduate School Catalog for my reference. I understand that it is my responsibility to read and understand the policies in this book.

________________________________________________________________
STUDENT NAME - PRINTED

________________________________________________________________
STUDENT SIGNATURE

________________________________________________________________
DATE

________________________________________________________________
PROGRAM DIRECTOR SIGNATURE

________________________________________________________________
DATE

Signed original in student file, copy in handbook
SOCIAL MEDIA GUIDELINES
DECLARATION OF UNDERSTANDING

I declare that I have read and understand the policy titled Social Media Guidelines.

I further declare that I understand that this policy applies to all phases of student education, and that I will uphold this policy for as long as I am enrolled as a student in the USD Physician Assistant Studies Program. I understand that failure to abide by the policy will be considered a breach of appropriate professional behavior and can result in discipline, up to and including removal from the program.

________________________________________________________________
STUDENT NAME - PRINTED
________________________________________________________________
STUDENT SIGNATURE
________________________________________________________________
DATE

Signed original in student file, copy in handbook
THE CODE OF PROFESSIONAL CONDUCT

We, the students of The University of South Dakota Physician Assistant Program, recognize that the practice of medicine is a great privilege and carries with it the responsibility to uphold certain expectations in character and behavior. We shall maintain the honor of our chosen profession and will not engage in academic dishonesty, misrepresentation, harassment, discrimination or other forms of unprofessional conduct. We shall always maintain respect and compassion for others and conduct ourselves in a professional manner. We shall not take unfair advantage of a patient, colleague, instructor or other member of the community. We hereby agree to uphold the principles and provisions of the Code of Professional Conduct in acknowledgement of the inherent need to preserve honesty and integrity in the medical profession.

________________________________________________________________

STUDENT NAME - PRINTED

________________________________________________________________

STUDENT SIGNATURE

________________________________________________________________

DATE

Signed original in student file, copy in handbook
ACKNOWLEDGEMENT OF RESPONSIBILITIES REGARDING HEALTH AND PATIENT CARE

I affirm that I understand the importance of recognizing personal medical conditions that could potentially endanger the health of patients and others.

I understand the need for complying with universal precautions at all times when interacting with patients.

I understand the importance and necessity of promptly seeking medical advice if I suspect that I may have developed a condition which could potentially endangers others.

I understand that I should restrict all interactions with patients and others pending medical evaluation and treatment of any potentially transmittable disease that I might incur.

________________________________________
Student Printed Name

________________________________________
Student Signature

________________________________________
Date

Signed original in student file, copy in handbook
PARTICIPATION OF STUDENTS AS HUMAN SUBJECTS

Functional anatomy and physical diagnosis are best learned through the study of living subjects. Upon the completion of gross anatomy, the only anatomy that most students will see again will be that of live patients.

Firm foundations laid early in physical diagnosis will prevent uncomfortable floundering and error in clinical areas involving real patients. For this reason, we require the participation of students as living subjects and examiners (in an interchangeable fashion) during selected courses within the Preclinical Phase of the PA Program. The experience gained from working with live patients is the only way to achieve a genuine understanding of the human body prior to entering the clinical arena. Therefore, it is expected that all students in the PA program will participate in all aspects of physical exam practica and will maintain a professional, cooperative attitude during this component of their education.

As a general rule, students will learn physical examination techniques and skills under the supervision of an experienced instructor in teams of two or three. To accommodate this, students are expected to participate in their laboratory sessions by partially disrobing.

When working on the lower extremities, both male and female students should come prepared by wearing swim or athletic shorts. When working on the upper limb, thorax and abdomen, male students should simply shed their shirts; women should wear a swimsuit, halter, or other appropriate tops beneath easily shed shirts.

It should be noted that participation in this component of PA education does not include examination of the genitalia or breasts. Students will learn this component of the exam by evaluating anatomical models, or by supervised examination of professional patients.

By signing below, you signify that you understand this policy and agree to abide by it.

________________________________________
Student Printed Name

________________________________________
Student Signature

________________________________________
Date

Signed original in student file, copy in handbook
I have read and understand the “Technical Standards of Performance for Physician Assistant Studies Program Students” information sheet.

I declare that I have the abilities and skills described in the “Technical Standards of Performance for Physician Assistant Studies Program Students” -- including observation, communication, motor, intellectual-conceptual, integrative and quantitative abilities and behavioral and social attributes.

_______________________________________________________________
STUDENT'S NAME - PRINTED

_______________________________________________________________
STUDENT’S SIGNATURE

_______________________________________________________________
DATE

_______________________________________________________________
PROGRAM DIRECTOR’S SIGNATURE

_______________________________________________________________
DATE

*Please return to: Physician Assistant Studies Program
University of South Dakota
414 E. Clark St.
Julian #120
Vermillion, SD 57069

Signed original in student file, copy in handbook
CONFIDENTIALITY STATEMENT

I agree to keep all information, including names, conditions, and other references to clinical patients/clients strictly confidential. In addition, I agree to treat all patient information that may be provided to me, as a result of clinical experiences, lectures, conferences, etc., with the same degree of confidentiality. I further agree to not disclose said information to anyone other than those involved in that person’s care. (Note: You may be required to sign additional individual confidentiality agreements with certain specific agencies.)

A breach of confidentiality may result in dismissal from the University of South Dakota Physician Assistant Studies Program.

I attest that I have been provided with the USD PA Student Affairs Handbooks, have read the policies, and understand that I, as a Physician Assistant student, must comply with these policies.

__________________________________________
Student Printed Name

__________________________________________
Student Signature

__________________________________________
Date

Signed original in student file, copy in handbook
MEDICAL RECORD RELEASE FORM

I hereby authorize the University of South Dakota Physician Assistant Studies Program to release all pertinent information to participating clinics and hospitals concerning my immunization status or medical disease/disorder that could potentially interfere with my ability to care for patients while enrolled as a student in the USD PA Program. I also authorize the PA Program to receive from USD Student Health verification that my health and immunization records are complete and up to date.

________________________________________________________________
Printed Name

________________________________________________________________
Address

________________________________________________________________
City, State, Zip

________________
DOB

___________________________  ____________________
Signature Date

Signed original in student file, copy in handbook
Section V - Appendices
APPENDIX A - Guidelines for Ethical Conduct for the Physician Assistant Profession

Guidelines for Ethical Conduct

Introduction

The physician assistant profession has revised its code of ethics several times since the profession began. Although the fundamental principles underlying the ethical care of patients have not changed, the societal framework in which those principles are applied has. Economic pressures of the health care system, social pressures of church and state, technological advances, and changing patient demographics continually transform the landscape in which PAs practice.

Previous codes of the profession were brief lists of tenets for PAs to live by in their professional lives. This document departs from that format by attempting to describe ways in which those tenets apply. Each situation is unique. Individual PAs must use their best judgment in a given situation while considering the preferences of the patient and the supervising physician, clinical information, ethical concepts, and legal obligations.

Four main bioethical principles broadly guided the development of these guidelines: autonomy, beneficence, nonmaleficence, and justice.

Autonomy, strictly speaking, means self-rule. Patients have the right to make autonomous decisions and choices, and physician assistants should respect these decisions and choices.

Beneficence means that PAs should act in the patient's best interest. In certain cases, respecting the patient's autonomy and acting in their best interests may be difficult to balance.

Nonmaleficence means to do no harm, to impose no unnecessary or unacceptable burden upon the patient.

Justice means that patients in similar circumstances should receive similar care. Justice also applies to norms for the fair distribution of resources, risks, and costs.

Physician assistants are expected to behave both legally and morally. They should know and understand the laws governing their practice. Likewise, they should understand the ethical responsibilities of being a health care professional. Legal requirements and ethical expectations will not always be in agreement. Generally speaking, the law describes minimum standards of acceptable behavior, and ethical principles delineate the highest moral standards of behavior.

When faced with an ethical dilemma, PAs may find the guidance they need in this document. If not, they may wish to seek guidance elsewhere — possibly from a supervising physician, a hospital ethics committee, an ethicist, trusted colleagues, or other AAPA policies. PAs should seek legal counsel when they are concerned about the potential legal consequences of their decisions.

The following sections discuss ethical conduct of PAs in their professional interactions with patients, physicians, colleagues, other health professionals, and the public. The "Statement of Values" within this document defines the fundamental values that the PA profession strives to uphold. These values provide the foundation upon which the guidelines rest. The guidelines were written with the understanding that no document can encompass all actual and potential ethical responsibilities, and PAs should not regard them as comprehensive.

Statement of Values of the Physician Assistant Profession

- Physician assistants hold as their primary responsibility the health, safety, welfare, and dignity of all human beings.
- Physician assistants uphold the tenets of patient autonomy, beneficence, nonmaleficence, and justice.
- Physician assistants recognize and promote the value of diversity.
- Physician assistants treat equally all persons who seek their care.
- Physician assistants hold in confidence the information shared in the course of practicing medicine.
Physician assistants assess their personal capabilities and limitations, striving always to improve their medical practice.

Physician assistants actively seek to expand their knowledge and skills, keeping abreast of advances in medicine.

Physician assistants work with other members of the health care team to provide compassionate and effective care of patients.

Physician assistants use their knowledge and experience to contribute to an improved community.

Physician assistants respect their professional relationship with physicians.

Physician assistants share and expand knowledge within the profession.

The PA and Patient

PA Role and Responsibilities
Physician assistant practice flows out of a unique relationship that involves the PA, the physician, and the patient. The individual patient–PA relationship is based on mutual respect and an agreement to work together regarding medical care. In addition, PAs practice medicine with physician supervision; therefore, the care that a PA provides is an extension of the care of the supervising physician. The patient–PA relationship is also a patient–PA–physician relationship.

The principal value of the physician assistant profession is to respect the health, safety, welfare, and dignity of all human beings. This concept is the foundation of the patient–PA relationship. Physician assistants have an ethical obligation to see that each of their patients receives appropriate care. PAs should be sensitive to the beliefs and expectations of the patient. PAs should recognize that each patient is unique and has an ethical right to self-determination.

Physician assistants are professionally and ethically committed to providing nondiscriminatory care to all patients. While PAs are not expected to ignore their own personal values, scientific or ethical standards, or the law, they should not allow their personal beliefs to restrict patient access to care. A PA has an ethical duty to offer each patient the full range of information on relevant options for their health care. If personal moral, religious, or ethical beliefs prevent a PA from offering the full range of treatments available or care the patient desires, the PA has an ethical duty to refer a patient to another qualified provider. That referral should not restrict a patient’s access to care. PAs are obligated to care for patients in emergency situations and to responsibly transfer patients if they cannot care for them.

Physician assistants should always act in the best interests of their patients and as advocates when necessary. PAs should actively resist policies that restrict free exchange of medical information. For example, a PA should not withhold information about treatment options simply because the option is not covered by insurance. PAs should inform patients of financial incentives to limit care, use resources in a fair and efficient way, and avoid arrangements or financial incentives that conflict with the patient’s best interests.

The PA and Diversity
The physician assistant should respect the culture, values, beliefs, and expectations of the patient.

Nondiscrimination
Physician assistants should not discriminate against classes or categories of patients in the delivery of needed health care. Such classes and categories include gender, color, creed, race, religion, age, ethnic or national origin, political beliefs, nature of illness, disability, socioeconomic status, physical stature, body size, gender identity, marital status, or sexual orientation.

Initiation and Discontinuation of Care
In the absence of a preexisting patient–PA relationship, the physician assistant is under no ethical obligation to care for a person unless no other provider is available. A PA is morally bound to provide care in emergency situations and to arrange proper follow-up. PAs should keep in mind that contracts with health insurance plans might define a legal obligation to provide care to certain patients.

A physician assistant and supervising physician may discontinue their professional relationship with an established
patient as long as proper procedures are followed. The PA and physician should provide the patient with adequate
notice, offer to transfer records, and arrange for continuity of care if the patient has an ongoing medical condition. Discontinuation of the professional relationship should be undertaken only after a serious attempt has been made to clarify and understand the expectations and concerns of all involved parties.

If the patient decides to terminate the relationship, they are entitled to access appropriate information contained within their medical record.

**Informed Consent**

Physician assistants have a duty to protect and foster an individual patient’s free and informed choices. The doctrine of informed consent means that a PA provides adequate information that is comprehensible to a competent patient or patient surrogate. At a minimum, this should include the nature of the medical condition, the objectives of the proposed treatment, treatment options, possible outcomes, and the risks involved. PAs should be committed to the concept of shared decision making, which involves assisting patients in making decisions that account for medical, situational, and personal factors.

In caring for adolescents, the PA should understand all of the laws and regulations in his or her jurisdiction that are related to the ability of minors to consent to or refuse health care. Adolescents should be encouraged to involve their families in health care decision making. The PA should also understand consent laws pertaining to emancipated or mature minors. (See the section on **Confidentiality**.)

When the person giving consent is a patient’s surrogate, a family member, or other legally authorized representative, the PA should take reasonable care to assure that the decisions made are consistent with the patient’s best interests and personal preferences, if known. If the PA believes the surrogate’s choices do not reflect the patient’s wishes or best interests, the PA should work to resolve the conflict. This may require the use of additional resources, such as an ethics committee.

**Confidentiality**

Physician assistants should maintain confidentiality. By maintaining confidentiality, PAs respect patient privacy and help to prevent discrimination based on medical conditions. If patients are confident that their privacy is protected, they are more likely to seek medical care and more likely to discuss their problems candidly.

In cases of adolescent patients, family support is important but should be balanced with the patient’s need for confidentiality and the PA’s obligation to respect their emerging autonomy. Adolescents may not be of age to make independent decisions about their health, but providers should respect that they soon will be. To the extent they can, PAs should allow these emerging adults to participate as fully as possible in decisions about their care. It is important that PAs be familiar with and understand the laws and regulations in their jurisdictions that relate to the confidentiality rights of adolescent patients. (See the section on **Informed Consent**.)

Any communication about a patient conducted in a manner that violates confidentiality is unethical. Because written, electronic, and verbal information may be intercepted or overheard, the PA should always be aware of anyone who might be monitoring communication about a patient. PAs should choose methods of storage and transmission of patient information that minimize the likelihood of data becoming available to unauthorized persons or organizations. Computerized record keeping and electronic data transmission present unique challenges that can make the maintenance of patient confidentiality difficult. PAs should advocate for policies and procedures that secure the confidentiality of patient information.

**The Patient and the Medical Record**

Physician assistants have an obligation to keep information in the patient’s medical record confidential. Information should be released only with the written permission of the patient or the patient’s legally authorized representative. Specific exceptions to this general rule may exist (e.g., workers compensation, communicable disease, HIV, knife/gunshot wounds, abuse, substance abuse). It is important that a PA be familiar with and understand the laws and regulations in his or her jurisdiction that relate to the release of information. For example, stringent legal restrictions on release of genetic test results and mental health records often exist.

Both ethically and legally, a patient has certain rights to know the information contained in his or her medical record. While the chart is legally the property of the practice or the institution, the information in the chart is the property of the patient. Most states have laws that provide patients access to their medical records. The PA should know the laws and facilitate patient access to the information.
Disclosure
A physician assistant should disclose to his or her supervising physician information about errors made in the course of caring for a patient. The supervising physician and PA should disclose the error to the patient if such information is significant to the patient’s interests and well being. Errors do not always constitute improper, negligent, or unethical behavior, but failure to disclose them may.

Care of Family Members and Co-workers
Treating oneself, co-workers, close friends, family members, or students whom the physician assistant supervises or teaches may be unethical or create conflicts of interest. For example, it might be ethically acceptable to treat one’s own child for a case of otitis media but it probably is not acceptable to treat one’s spouse for depression. PAs should be aware that their judgment might be less than objective in cases involving friends, family members, students, and colleagues and that providing “curbside” care might sway the individual from establishing an ongoing relationship with a provider. If it becomes necessary to treat a family member or close associate, a formal patient-provider relationship should be established, and the PA should consider transferring the patient’s care to another provider as soon as it is practical. If a close associate requests care, the PA may wish to assist by helping them find an appropriate provider.

There may be exceptions to this guideline, for example, when a PA runs an employee health center or works in occupational medicine. Even in those situations, the PA should be sure they do not provide informal treatment, but provide appropriate medical care in a formally established patient-provider relationship.

Genetic Testing
Evaluating the risk of disease and performing diagnostic genetic tests raise significant ethical concerns. Physician assistants should be informed about the benefits and risks of genetic tests. Testing should be undertaken only after proper informed consent is obtained. If PAs order or conduct the tests, they should assure that appropriate pre- and post-test counseling is provided.

PAs should be sure that patients understands the potential consequences of undergoing genetic tests – from impact on patients themselves, possible implications for other family members, and potential use of the information by insurance companies or others who might have access to the information. Because of the potential for discrimination by insurers, employers, or others, PAs should be particularly aware of the need for confidentiality concerning genetic test results.

Reproductive Decision Making
Patients have a right to access the full range of reproductive health care services, including fertility treatments, contraception, sterilization, and abortion. Physician assistants have an ethical obligation to provide balanced and unbiased clinical information about reproductive health care.

When the PA’s personal values conflict with providing full disclosure or providing certain services such as sterilization or abortion, the PA need not become involved in that aspect of the patient’s care. By referring the patient to a qualified provider who is willing to discuss and facilitate all treatment options, the PA fulfills their ethical obligation to ensure the patient’s access to all legal options.

End of Life
Among the ethical principles that are fundamental to providing compassionate care at the end of life, the most essential is recognizing that dying is a personal experience and part of the life cycle.

Physician Assistants should provide patients with the opportunity to plan for end of life care. Advance directives, living wills, durable power of attorney, and organ donation should be discussed during routine patient visits.

PAs should assure terminally-ill patients that their dignity is a priority and that relief of physical and mental suffering is paramount. PAs should exhibit non-judgmental attitudes and should assure their terminally-ill patients that they will not be abandoned. To the extent possible, patient or surrogate preferences should be honored, using the most appropriate measures consistent with their choices, including alternative and non-traditional treatments. PAs should explain palliative and hospice care and facilitate patient access to those services. End of life care should include assessment and management of psychological, social, and spiritual or religious needs.

While respecting patients’ wishes for particular treatments when possible, PAs also must weigh their ethical responsibility, in consultation with supervising physicians, to withhold futile treatments and to help patients
understand such medical decisions.

PAs should involve the physician in all near-death planning. The PA should only withdraw life support with the supervising physician's agreement and in accordance with the policies of the health care institution.

The PA and Individual Professionalism

Conflict of Interest
Physician assistants should place service to patients before personal material gain and should avoid undue influence on their clinical judgment. Trust can be undermined by even the appearance of improper influence. Examples of excessive or undue influence on clinical judgment can take several forms. These may include financial incentives, pharmaceutical or other industry gifts, and business arrangements involving referrals. PAs should disclose any actual or potential conflict of interest to their patients.

Acceptance of gifts, trips, hospitality, or other items is discouraged. Before accepting a gift or financial arrangement, PAs might consider the guidelines of the Royal College of Physicians, "Would I be willing to have this arrangement generally known?" or of the American College of Physicians, "What would the public or my patients think of this arrangement?"

Professional Identity
Physician assistants should not misrepresent directly or indirectly, their skills, training, professional credentials, or identity. Physician assistants should uphold the dignity of the PA profession and accept its ethical values.

Competency
Physician assistants should commit themselves to providing competent medical care and extend to each patient the full measure of their professional ability as dedicated, empathetic health care providers. PAs should also strive to maintain and increase the quality of their health care knowledge, cultural sensitivity, and cultural competence through individual study and continuing education.

Sexual Relationships
It is unethical for physician assistants to become sexually involved with patients. It also may be unethical for PAs to become sexually involved with former patients or key third parties. Key third parties are individuals who have influence over the patient. These might include spouses or partners, parents, guardians, or surrogates.

Such relationships generally are unethical because of the PA’s position of authority and the inherent imbalance of knowledge, expertise, and status. Issues such as dependence, trust, transference, and inequalities of power may lead to increased vulnerability on the part of the current or former patients or key third parties.

Gender Discrimination and Sexual Harassment
It is unethical for physician assistants to engage in or condone any form of gender discrimination. Gender discrimination is defined as any behavior, action, or policy that adversely affects an individual or group of individuals due to disparate treatment, disparate impact, or the creation of a hostile or intimidating work or learning environment.

It is unethical for PAs to engage in or condone any form of sexual harassment. Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, or other verbal or physical conduct of a sexual nature when:

- Such conduct has the purpose or effect of interfering with an individual's work or academic performance or creating an intimidating, hostile or offensive work or academic environment, or
- Accepting or rejecting such conduct affects or may be perceived to affect professional decisions concerning an individual, or
- Submission to such conduct is made either explicitly or implicitly a term or condition of an individual's training or professional position.

The PA and Other Professionals
Team Practice
Physician assistants should be committed to working collegially with other members of the health care team to assure integrated, well-managed, and effective care of patients. PAs should strive to maintain a spirit of cooperation with other health care professionals, their organizations, and the general public.

Illegal and Unethical Conduct
Physician assistants should not participate in or conceal any activity that will bring discredit or dishonor to the PA profession. They should report illegal or unethical conduct by health care professionals to the appropriate authorities.

Impairment
Physician assistants have an ethical responsibility to protect patients and the public by identifying and assisting impaired colleagues. "Impaired" means being unable to practice medicine with reasonable skill and safety because of physical or mental illness, loss of motor skills, or excessive use or abuse of drugs and alcohol.

PAs should be able to recognize impairment in physician supervisors, PAs, and other health care providers and should seek assistance from appropriate resources to encourage these individuals to obtain treatment.

PA–Physician Relationship
Supervision should include ongoing communication between the physician and the physician assistant regarding patient care. The PA should consult the supervising physician whenever it will safeguard or advance the welfare of the patient. This includes seeking assistance in situations of conflict with a patient or another health care professional.

Complementary and Alternative Medicine
When a patient asks about an alternative therapy, the PA has an ethical obligation to gain a basic understanding of the alternative therapy being considered or being used and how the treatment will affect the patient. If the treatment would harm the patient, the PA should work diligently to dissuade the patient from using it, advise other treatment, and perhaps consider transferring the patient to another provider.

The PA and the Health Care System

Workplace Actions
Physician assistants may face difficult personal decisions to withhold medical services when workplace actions (e.g., strikes, sick-outs, slowdowns, etc.) occur. The potential harm to patients should be carefully weighed against the potential improvements to working conditions and, ultimately, patient care that could result. In general, PAs should individually and collectively work to find alternatives to such actions in addressing workplace concerns.

PAs as Educators
All physician assistants have a responsibility to share knowledge and information with patients, other health professionals, students, and the public. The ethical duty to teach includes effective communication with patients so that they will have the information necessary to participate in their health care and wellness.

PAs and Research
The most important ethical principle in research is honesty. This includes assuring subjects’ informed consent, following treatment protocols, and accurately reporting findings. Fraud and dishonesty in research should be reported so that the appropriate authorities can take action.

Physician assistants involved in research must be aware of potential conflicts of interest. The patient's welfare takes precedence over the desired research outcome. Any conflict of interest should be disclosed.

In scientific writing, PAs should report information honestly and accurately. Sources of funding for the research must be included in the published reports.

Plagiarism is unethical. Incorporating the words of others, either verbatim or by paraphrasing, without appropriate attribution is unethical and may have legal consequences. When submitting a document for publication, any previous publication of any portion of the document must be fully disclosed.

PAs as Expert Witnesses
The physician assistant expert witness should testify to what he or she believes to be the truth. The PA’s review of medical facts should be thorough, fair, and impartial.

The PA expert witness should be fairly compensated for time spent preparing, appearing, and testifying. The PA should not accept a contingency fee based on the outcome of a case in which testimony is given or derive personal, financial, or professional favor in addition to compensation.

The PA and Society

Lawfulness
Physician assistants have the dual duty to respect the law and to work for positive change to laws that will enhance the health and well being of the community.

Executions
Physician assistants, as health care professionals, should not participate in executions because to do so would violate the ethical principle of beneficence.

Access to Care / Resource Allocation
Physician assistants have a responsibility to use health care resources in an appropriate and efficient manner so that all patients have access to needed health care. Resource allocation should be based on societal needs and policies, not the circumstances of an individual patient–PA encounter. PAs participating in policy decisions about resource allocation should consider medical need, cost-effectiveness, efficacy, and equitable distribution of benefits and burdens in society.

Community Well Being
Physician assistants should work for the health, well being, and the best interest of both the patient and the community. Sometimes there is a dynamic moral tension between the well being of the community in general and the individual patient. Conflict between an individual patient’s best interest and the common good is not always easily resolved. In general, PAs should be committed to upholding and enhancing community values, be aware of the needs of the community, and use the knowledge and experience acquired as professionals to contribute to an improved community.

Conclusion
The American Academy of Physician Assistants recognizes its responsibility to aid the PA profession as it strives to provide high quality, accessible health care. Physician assistants wrote these guidelines for themselves and other physician assistants. The ultimate goal is to honor patients and earn their trust while providing the best and most appropriate care possible. At the same time, PAs must understand their personal values and beliefs and recognize the ways in which those values and beliefs can impact the care they provide.
See [http://link.usd.edu/pa](http://link.usd.edu/pa)
The following policies are covered in the South Dakota Board of Regents Policy Manual, and are deemed appropriate for inclusion in this PA Program Student Affairs Handbook:

SUBJECT: Sexual Harassment
Number: 1:17

Educational institutions play a special role in preparing students to lead the complex social organizations through which businesses and professions operate and through which free people govern themselves. Students must be taught, and they must be shown through the example given by institutional employees, that stable, effective and prosperous social organizations observe norms of conduct under which all participants are expected to treat one another civilly and to carry out their respective tasks in a constructive and informed manner. Complex social organizations derive their strength from the cooperation of those who participate in them. By virtue of their special role in preparing future generations of leaders, educational institutions have a particular concern with conduct that subjects members of the institutional community to harassment on the basis of sex, race or any other grounds. Such conduct destroys the bonds of cooperation and common purpose on which society rests by demeaning some members of the community, and, it cannot be tolerated in an institution whose very purpose is to shape the skills and conscience of the rising generations. For this reason, the Board strictly proscribes harassing conduct, and those members of the institutional community who have indulged in it shall be subject to discipline pursuant to Board Policy 1:18.

B. Harassment on any grounds, directed against individuals, is proscribed.
   1. Sexual harassment in either of its recognized forms is proscribed:
      a. Sexual harassment may be established by showing that an individual has been subjected to unwelcome sexual advances, requests for sexual favors, or other verbal or physical conduct of a sexual nature where:
         i. Submission to such conduct is made either explicitly or implicitly a term or a condition of an individual's participation or use of an institutionally sponsored or approved activity, employment or resource; or
         ii. Submission to or rejection of such conduct by an individual is used as the basis for educational, employment or similar decisions affecting an individual's ability to participate in or use an institutionally sponsored or approved activity, employment or resource.
      b. Sexual harassment may also be established by showing participation in the creation of an intimidating, hostile or demeaning environment established under & 2(B) below.
   2. Harassment on the basis of race, color, creed, religion, national origin, ancestry, citizenship, gender, sexual orientation, age or disability or harassment on any grounds, directed against individuals, may be established by showing:
      a. Conduct toward another person that has the purpose of creating an intimidating, hostile or demeaning environment and that interferes with his or her ability to participate in or to realize the intended benefits of an institutional activity, employment or resource:
      b. Conduct toward another person that has the effect of creating an intimidating, hostile or demeaning environment that adversely interferes with his or her ability to participate in or to realize the intended benefits of an institutional activity, employment or resource.
         i. Harassment consists, in most cases, of more than casual or isolated incidents.
         ii. Consideration should be given to the context, nature, scope, frequency, duration and location of the incidents, whether they are physically threatening or humiliating as opposed to merely offensive utterances, as well as to the identity, number and relationships of the persons involved.
         iii. Harassment shall be found where, in aggregate, the incidents are sufficiently pervasive or persistent or severe that a reasonable person with the same characteristics of the victim of the harassing conduct would be adversely affected to a degree that interferes with his or her ability to participate in or to realize the intended benefits of an institutional activity, employment or resource.
            1. The reasonable person standard includes consideration of the perspective of persons of the alleged victim's race, gender or other circumstances that relate to the purpose for which he or she has become the object of allegedly harassing conduct.
            2. If the victim does not subjectively perceive the environment to be hostile, the
A. Purpose of Regulations
The South Dakota Board of Regents has a legal obligation to enforce federal, state and local laws and regulations prohibiting discrimination in employment, in the delivery of educational services and in the other activities carried on under its authority. Inherent in its function as constitutional governing board for publicly funded higher education is the duty to assure all individuals in its employ or attending institutions under its jurisdiction equal access to the employment and educational opportunities it controls. The South Dakota Board of Regents recognizes that discrimination based on archaic and overbroad assumptions about the relative needs and capacities of certain categories of persons forces individuals to labor under stereotypical notions that often bear no relationship to their actual abilities. It thereby both deprives persons of their individual dignity and denies society the benefits of wide participation in political, economic, educational and cultural life. These human rights complaint procedures have been adopted to afford individuals a means to protect the rights guaranteed to them under federal, state and local laws and regulations and to vindicate the deprivation of personal dignity that accompanies denials of equal opportunity.

B. Scope of Regulations
This procedure applies to complaints alleging discrimination on the basis of race, color, creed, religion, national origin, ancestry, citizenship, gender, sexual orientation, age or disability.

C. Discrimination
Discrimination includes all violations of rights guaranteed under federal, state or local anti-discrimination laws and regulations. Also, discrimination includes any allegation that, because of a person's race, color, creed, religion, national origin, ancestry, citizenship, gender, sexual orientation, age or disability, a person has been subjected to disparate treatment in terms and conditions of employment, in the delivery of educational services or with respect to the participation in the activities of officially recognized organizations. Harassment complaints brought under section 3.4 of the policy manual shall also constitute discrimination complaints within the meaning of these regulations, notwithstanding the fact that they may not otherwise be encompassed hereunder.

D. Proof of Discrimination
Except as otherwise provided under federal, state and local law, proof of discrimination under these regulations shall conform to the federal standards employed to prove disparate treatment. These regulations shall neither eliminate nor restrict express exceptions to anti-discrimination laws and regulations provided
under federal, state or local law, nor shall they prohibit conduct, action or policies based upon such legitimate nondiscriminatory reasons as are recognized under federal anti discrimination law.

E. Complaints
Complaints include all allegations or reports that a person, persons or organization subject to this policy has discriminated against a person protected under this policy.

1. All organizations recognized by an institution are subject to this policy, except insofar as the application of the policy would impermissibly invade the members' freedom of intimate association or freedom of expressive association.
   a. Challenges to the applicability of these regulations shall be referred to an administrative officer designated by the institutional chief executive officer as provided in 13(A) below. Questions about the applicability of this chapter to organizations shall be resolved pursuant to the provisions of 13 and following.
   b. If an organization challenges the application of these policies to it or to its activities, resolution of the challenge must address the following issues:
      i. Will application of the regulations serve a compelling state interest?
         1. The Board has determined that it has a compelling interest in applying these regulations to individuals and organizations whose activities affect the ability of others to participate in and to enjoy the benefits of institutional employment, educational services or the activities of officially recognized organizations, so this issue may ordinarily be resolved through reference to 1 and 2 above.
      ii. Application of the regulations is unrelated to the suppression of ideas.
         1. This issue requires a factual inquiry into the purpose of applying the regulations to particular organizations. An institution may not apply the regulations in order to suppress a particular point of view. The mere dissemination of ideas, however offensive to good taste and common decency such ideas may be, does not afford grounds for regulation.
      iii. Can the state's compelling interest be achieved through means significantly less restrictive of associational freedoms?
         1. This issue requires a two-step analysis. First, it must be determined whether application of the regulations would infringe associational rights of organization members. If so, a determination must be made whether some less intrusive measures might suffice to protect the Board's compelling interests.
            a. The following principles shall be used to determine whether application of the Board's policies to an organization might invade the association rights of organization members:
               i. Freedom of intimate association refers to those relationships that presuppose deep attachments and commitments to the necessarily few other individuals with whom one shares not only a special community of thoughts, experiences and beliefs, but also distinctively personal aspects of one's life. Factors that suggest that freedom of intimate association is implicated include:
                  1. the relative smallness of the organization;
                  2. a high degree of selectivity in choosing and maintaining members of the organization;
                  3. the personal nature of the organization's purpose; and
                  4. the exclusion of nonmembers from the central activities of the organization.
               ii. Freedom of expressive association is implicated where an organization is created for specific expressive purposes and the organization shall be significantly inhibited in advocating its desired viewpoints if it cannot restrict its membership based on race, color, creed, religion, national origin, ancestry, citizenship, gender, sexual orientation, age or disability.
F. **Complainants**

Complainants are persons who have allegedly been subjected to discrimination.

G. **Non-retaliation**

Persons who bring complaints of discrimination and persons who assist in the investigation and disposition of such complaints shall not be subject to harassment, interference, intimidation or retaliation.

H. **Duty to Cooperate**

All students and employees whose assistance is needed in the investigation of a complaint or in the course of disciplinary action shall be required to cooperate with the Title IX/EEO coordinator and other parties who are duly authorized to investigate or to discipline. Persons who are accused of having engaged in discriminatory conduct shall be entitled to such cooperation when necessary to obtain witnesses in any formal disciplinary proceedings that may be initiated. Where necessary, adjustments shall be made to work schedules, classroom schedules and other academic or employment obligations.

I. **Confidentiality**

Reasonable effort shall be made to maintain the confidentiality of the complaints. Complainants and witnesses must understand that it may become necessary to disclose their identities, either directly or indirectly, in the course of investigation. Where formal disciplinary proceedings are instituted, the party alleged to have engaged in discriminatory conduct shall be given the names of the complaining party and the witnesses whose testimony shall be used to support the complaint, together with the substance of their allegations. The formal proceedings themselves need not be open to the public.

J. **Timing Requirements**

The following provisions address the timing requirements contained in this regulation; different definitions and requirements may apply to the grievance and disciplinary procedures that have been incorporated herein. Deadlines stipulated for action may be relaxed where, in the judgment of the Title IX/EEO coordinator or other administrative officer having responsibility for the complaint, this shall help to achieve the purposes of the regulations. Deadlines may also be extended upon the mutual agreement of the parties. Deadlines shall be extended if necessary to accommodate holidays and vacation periods that form part of the academic calendar or days on which an institution is closed for weather or other emergency purposes. Working days are those on which the Board office is open for business.

K. **Initiation of Complaint**

1. Persons who believe that they have been subjected to discrimination may bring complaints under these procedures by contacting the Title IX/EEO coordinator. Collective bargaining agents may also initiate complaints hereunder, but only where they would have standing to do so under state or federal law. Collective bargaining agents shall not be entitled to exercise procedural rights granted to complainants.

2. A person who believes that he or she has been the victim of discrimination may also lodge a complaint with any administrator or, in the case of students, with any faculty member. Complaints lodged with such individuals shall be referred to the Title IX/EEO coordinator for investigation. This provision shall not be interpreted to require individuals to refer to the Title IX/EEO coordinator accusations addressed to them directly by aggrieved persons.

3. Third party reports of discrimination and conduct observed directly that may be discriminatory should be investigated as provided in Section 11(D) below.

4. All inquiries, allegations, reports or complaints relating to discriminatory conduct shall be forwarded to the Title IX/EEO coordinator for response or investigation. The Title IX/EEO coordinator shall have the responsibility to advise the individual or group of the procedures for investigating and taking action upon the complaint. The Title IX/EEO coordinator shall also advise the complainant of any counseling or support groups that are available for persons who feel that they have been subjected to discriminatory conduct. Having provided this information to the complainant, the Title IX/EEO coordinator shall record the factual basis for the complaint.

5. If the complaint is referred to the Title IX/EEO coordinator by another administrator or faculty member, the Title IX/EEO coordinator shall contact the complainant within five working days to provide information about procedures and resources and to record an initial statement of the factual basis for complaint.

6. Upon obtaining a statement of the factual basis of the complaint, the Title IX/EEO coordinator shall initiate an investigation of the complaint to determine whether there is a reasonable basis to believe that the complainant was subjected to discrimination. The investigation shall be completed within twenty working days.

L. **Procedure Where Title IX/EEO Coordinator Determines That There is Not a Reasonable Basis to
O. Disciplinary Action

1. If the discriminatory conduct is admitted or, as a result of the disciplinary proceedings, proven, the administrative officer who initiated the disciplinary procedures shall determine what disciplinary action, if any, shall be taken to remedy the effects of the discriminatory conduct. In selecting a discipline, the administrative officer shall consider (1) the extent to which the party charged exercised undue influence over the complainant by virtue of the office and authority entrusted to the party charged or otherwise, (2) the gravity of the offense established and (3) the likelihood that the discipline selected shall be effective to avoid a recurrence of the conduct.

2. Once the administrative office has selected a proposed discipline, the party charged shall be notified of the proposed discipline at such time and in such a manner as provided under the applicable grievance procedures. The complainant shall be notified of the proposed discipline at the same time. The discipline shall not become finalized if the complainant petitions the institutional chief executive officer what disposition should be made of the matter.

N. Procedures for Discipline for Those Who Are Found to Have Discriminated Against Others

1. Discipline of persons found to have discriminated against others shall be determined and carried out in accordance with the relevant disciplinary procedures.

O. Disciplinary Action

1. If the discriminatory conduct is admitted or, as a result of the disciplinary proceedings, proven, the administrative officer who initiated the disciplinary procedures shall determine what disciplinary action, if any, shall be taken to remedy the effects of the discriminatory conduct. In selecting a discipline, the administrative officer shall consider (1) the extent to which the party charged exercised undue influence over the complainant by virtue of the office and authority entrusted to the party charged or otherwise, (2) the gravity of the offense established and (3) the likelihood that the discipline selected shall be effective to avoid a recurrence of the conduct.

2. Once the administrative office has selected a proposed discipline, the party charged shall be notified of the proposed discipline at such time and in such a manner as provided under the applicable grievance procedures. The complainant shall be notified of the proposed discipline at the same time. The discipline shall not become finalized if the complainant petitions the institutional chief executive officer for a review.

3. If the complainant is dissatisfied with the discipline selected, the complainant may petition the institutional chief executive officer for a review of that determination. The petition must be received within five working days after the complainant has been notified of the proposed discipline. The
institutional chief executive officer, either personally or through a delegatee, shall review the
investigation files, hearing records and findings, and other documents relating to the matter to
determine whether a discipline provided is commensurate with the gravity of the offense established,
considering the relation to the parties, and whether it may reasonably be thought to assure that the
conduct shall not recur. The determination of the institutional chief executive officer shall not be
subject to further review.

P. Complainants' Right to Appeal from a Finding That Discrimination Has Not Been Proven

1. If as a result of the disciplinary hearing the party charged is found not to have engaged in
discriminatory conduct or the proof of such charges has been found to be inadequate, the complainant
shall be entitled to appeal that determination to the institutional chief executive officer.

2. Before adopting a finding that the party charged has not engaged in discriminatory conduct, the
complainant shall be notified of the proposed finding. The party charged shall be notified of the
proposed finding at the same time. The proposed finding shall not become finalized if the complainant
petitions the institutional chief executive officer for a review. The complainant shall be allowed five
working days in which to submit such a petition.

3. Such petitions shall be taken pursuant to and shall be governed by the grievance procedures
designated for persons in the employee or student classification to which the complainant belongs.
Where such procedures require hearings to establish the factual basis for a discipline, and where the
proposed findings that the party charged had not engaged in discriminatory conduct were themselves
reached following a fact-finding hearing, the hearing records developed during the initial hearing
process shall be deemed to provide an adequate factual basis for review of the grievance. If the initial
proceedings were resolved at the campus level, and if the procedures that govern complainant's
grievance provide for a hearing before a Board appointed hearing examiner, the matter shall be heard
de novo to the extent permitted under the governing procedures.

4. If the review provided under section 15 of the policy results in a finding that the complainant was
subjected to discriminatory conduct, the findings of fact and conclusions of law reached through that
process shall provide the basis for discipline of the party charged. The petition permitted under
section 15(C) should be lodged either with the institutional chief executive officer or with the Executive
Director, depending upon the stage at which the grievance was determined.

Q. Preservation of Records

All records and writings developed in the course of the formal disciplinary hearings shall be preserved in the
complaint file and in other records as required under related grievance policies.


SUBJECT: Equal Opportunity, Non-Discrimination, Affirmative Action
Number: 1:19

A. Equal Opportunity
The institutions under the jurisdiction of the Board of Regents shall offer equal opportunities in employment
and for access to and participation in educational, extension and other institutional services to all persons
qualified by academic preparation, experience, and ability for the various levels of employment or academic
program or other institutional service, without discrimination based on race, color, creed, national origin,
ancestry, citizenship, gender, sexual orientation, religion, age, or disability.

B. Non-Discrimination, Civil Rights and Affirmative Action
The Board reaffirms its commitment to the objectives of affirmative action, equal opportunity and non-
discrimination in accordance with state and federal law. Redress for alleged violations of those laws may be
sued at law or through the procedures established by the provisions of 1:18 of this policy.

C. Responsibilities of Chief Executive Officers
The chief executive officers of the respective institutions shall be responsible for assuring that the Board's
equal opportunity policies are communicated effectively to members of the institutional community and the
public at large. The means for such communication may include seminars and other forms of public service or
instructional programming and shall include notices to be posted or otherwise incorporated into institutional
promotional materials. Such notices should clearly identify persons who are responsible for the implementation
of equal opportunity policies and should advise readers or listeners of how they might contact the responsible
institutional officials to obtain further information or to express their concerns about implementation of
institutional policies.
Source: BOR, February 1969; BOR, June 1987; BOR, October 1993; October, 1995
SUBJECT: Student Appeals for Academic Affairs

Number: 2.9 (Academic Appeal)
SDBOR Policy 2.9; forms - https://www.usd.edu/graduate-school/student-resources

Number: 3.4 (Student Conduct)
SDBOR Policy 3.4; forms - https://www.usd.edu/graduate-school/student-resources

South Dakota Board of Regents Policies Link
http://www.usd.edu/policies/south-dakota-board-of-regents

Students shall refer to the above link for the most current versions of South Dakota Board of Regents Policies. Sections 1-3 affect all University students.