









2013 - 2014 University Catalog Western University of Health Sciences (WesternU) is an independent, non-profit academic health center, incorporated in the State of California, and dedicated to educating health care professionals qualified to provide comprehensive health care to the family.

### Accreditation(s)

Western University of Health Sciences is accredited by the Accrediting Commission for Senior Colleges and Universities of the Western Association of Schools and Colleges (WASC, 895 Atlantic Avenue, Suite 100, Alameda, California, 94501, phone number: 510-748-9001), a regional accrediting body recognized by the Council on Higher Education Accreditation and the U.S. Department of Education.

Professional accreditations for each academic program are indicated in the appropriate section of this catalog.

#### **Notice of Non-discrimination Policy**

Western University of Health Sciences, in compliance with Titles VI and VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Sections 503 and 504 of the Rehabilitation Act of 1973, and Sections 102 and 302 of the Americans With Disabilities Act of 1990, does not discriminate on the basis of gender, race, color, national origin, religion, handicap, or sexual orientation in any of its policies, procedures, or practices. In accordance with sex discrimination laws, the University forbids acts of sexual harassment. In compliance with the Age Discrimination in Employment Act of 1967, Section 402 of the Vietnam Era Veterans Readjustment Act of 1974, and Section 12940 of the State of California Government Code, the University does not discriminate against any employees or applicants for employment on the basis of their age, their ethnic origin, their marital status, their sexual orientation, or because they are disabled veterans or veterans of the Vietnam Era, or because of their medical condition (as defined in Section 12926 of the California Government Code); nor does the University discriminate on the basis of citizenship, within the limits imposed by law. This non-discrimination policy covers admission, access, and service in the University programs and activities and application for and treatment in University employment.

Pursuant to Executive Orders 11246 and 11375, as amended, Section 503 of the Rehabilitation Act of 1973, as amended, and Section 402 of the Vietnam Era Veterans Readjustment Act of 1974, as amended, Western University of Health Sciences is an affirmative action and equal opportunity employer.

#### **Access to Individuals with Disabilities**

It is the policy of WesternU to provide qualified persons with disabilities with access to its programs and services, when viewed in their entirety, in the most integrated setting possible. Additional information will be provided upon request from the Student Affairs Office.

#### **Campus Visitors**

Visitors are always welcome at the University and campus tours are available. Visitor badges are required and can be obtained from the receptionist in the Administration Center.

#### Disclaimer

Text for the catalog was prepared as of June 2013. The information herein applies to the academic year 2013-2014. Western University of Health Sciences has made every effort to ensure that the information contained in this catalog is accurate at the time of publication, but reserves the right to change the provisions of this catalog. This includes the right to discontinue courses, change requirements for admission and graduation, adjust fees or change any other regulation or policy in this catalog. The information and policies are for informational purposes only and do not constitute an agreement or contract between Western University of Health Sciences and students, staff and faculty.

Western University of Health Sciences Catalog Vol. 23, No. 1, Spring, 2013

## The President's Message

Attending an academic health center such as Western University of Health Sciences is not an automatic passport to becoming a good health professional. While a first-rate educational experience is essential, the making of a good health professional is also rooted in the nature and quality of the people involved.

There is visible and strong sense of community, of family, at WesternU. We are proud of the fact that the institution is people-centered, that it seeks to develop in our students a blend between the technical and the human skills required of health care professionals. The content and substance of the curricula, as well as the instructional processes used to carry it out, reflect a humanistic approach to health care.

The University's educational programs provide training that presumes the faculty and the students are the masters and not the slaves to this institution. We believe, therefore, that it is imperative our students feel they have a place in the learning environment and that they are active rather than passive recipients of their education. Learning proceeds in ways directly related to the interests and needs of the students as well as to the demands of the health professions.

Here at WesternU, a student can expect an education that will assist him or her to become a feeling, humane, sensitive and medically competent professional and not just a learned degree-holder. To that end, the University encourages a flexible and innovative "learning" environment instead of a rigid, closed "learned" one.

In a word, a student can expect the same treatment from WesternU that a patient should look for from an able health professional. Thus, in the final analysis, what a student can expect from the University is measured by the success of our humanistic approach — one that requires an active partnership between you and us.

That is what goes into the education that takes place here and what Western University of Health Sciences is all about.



Sincerely,

Philip Pumerantz, PhD

# Contents

General Information	1
Vision	1
Institutional Mission	1
Values	1
Goals	1
University Outcome domains	2
History	2
Key Facts about Western University of Health Sciences	4
Diversity Statement	5
Frequently Called Numbers	6
Pomona, California	6
Lebanon, Oregon (COMP-Northwest)	6
Student Life: Campus Facilities	7
Pomona Campus	7
Lebanon Campus	11
Personal Safety	12
Social Networking Recommendation	12
Student Services	13
Recreational Facilities	13
Community Activities	13
Student Government Association	13
Student Clubs	15
Student Employment	15
Harriet K. and Philip Pumerantz Library and Learning Resources Center	15
Harris Family Center for Disability and Health Policy (HFCDHP)	15
Accommodation and Resource Center (AARC)	16
Office of International and Cross-cultural Programs	16
Humanism and the Health Sciences	17
Student Housing	17
Student Parking	18
Psychological Counseling Services	18

Office of Learning Enhancement and Academic Development	18
University Registrar	19
Student Files: Access and Privacy	19
Release of Educational Records	20
Directory Information	22
Admissions Files	22
Registrar's Files	22
Other Student Files	23
Transcripts	23
Class Rank	24
Diplomas	24
Student Loan Deferment Processing	24
University Policies and Procedures	25
Non-Discrimination	25
Discrimination Complaint Procedure	25
University Facilities, Resources, and Services for Students with Disabilities	26
Sexual Harassment	28
Drug-Free Environment	29
Student Health and Safety	31
Dress Code/Identification	33
Smoking	33
Food in Lecture Halls, Laboratories, and Library	34
Videotaping, Audiotaping, Still Photography and Digitized Note Taking in Laboratori	
Halls	
Electronic Communications	34
Network Acceptable Use Policy	34
General Academic Policies and Procedures	
Educational Philosophy	
Standards of Academic and Professional Conduct	36
Orientation/Registration	36
Withdrawal from University/Program	
Leave of Absence	37

Standards of Professional Conduct: Reporting Alleged Violations	39
Student Performance Committee	39
Information for Students about Hearings Involving Alleged Viola Professional Conduct	
Promotion	41
Satisfactory Academic Progress	42
Probation	42
Remediation	43
Academic Suspension	43
Conduct Suspension	43
Summary Suspension	43
Dismissal	44
Student Appeal Process	44
Protocol for Input on Matters of Student Concern	45
Legal Limitations on Practice of Health Care	45
Modification of Academic Policies and Procedures under Extenu	ating Circumstances45
Tuition and Fees	46
Future Tuition Rate Increases	46
Tuition and Mandatory Fees	46
Comprehensive Health Plan	47
Prepaid Tuition Plan	47
WesternU Tuition Refund Policy	47
Financial Aid	48
Financial Aid and the World of Private Philanthropy	48
Department of Education	49
Department of Health and Human Services	52
Scholarships with Service Requirements	53
University Administered Scholarships	54
Emergency Loan Program	54
Veteran's Educational Benefits	54
Graduating Teaching Fellows in the Department of Neuromuscu  Manipulative Medicine	

	Tuition Refund Policy	55
	General Requirements	55
	Definition of a Title IV Recipient	55
	Title IV Aid Disbursed	56
	Percentage of Title IV Aid Earned	56
	Determining a Student's Withdrawal Date at a School that is not Required to Take Attendance	56
	Title IV Aid to be Returned	57
	Amount of Unearned Title IV Aid due from the School	58
	Return of Funds by the School: Order of Return of Title IV Funds	58
	Time Frame for the Return of Title IV Funds	58
	Repayment of Student Loans	58
	University Calendar	59
Сс	ollege of Allied Health Professions	60
	Mission	60
	Goals	60
M	aster of Science in Health Sciences Program	61
	Accreditation	61
	Mission Statement	61
	Vision	61
	Goals of the Department of Health Sciences	61
	Basic Competencies (Outcomes)	62
	Objectives and Student Learning Outcomes	63
	Personal Competencies for Admission and Matriculation	65
	Admissions Policies and Procedures	66
	Application Requirements	66
	Application Procedures and Deadlines	67
	International Students	67
	Transfer of Credits	67
	Continuing Education and Non-Degree Students	68
	Readmission	68
	Teaching Fellows in the College of Osteopathic Medicine of the Pacific	68
	Students in the College of Podiatric Medicine	68

Registration	68
Continuous Registration	69
Add, Drop and Withdrawal	69
Course Load	69
Full-Time/Part-Time Status	69
Time Limits	69
Tuition and Fees	70
Other Fees and Expenses	70
Computer-related Costs	70
Academic Policies and Procedures	70
Student Rights and Responsibilities	70
Communication	70
Declaration of Academic Track of Study	71
Advancement to Candidacy	71
Graduation	72
Standards of Academic Progress	72
Academic Standing	73
Reasonable Academic Progress	73
Thesis/Special Project Continuation	73
Probation	73
Financial Aid Warning Policy (Title IV and Title VII)	74
Tutorial Assistance Program	74
Remediation	75
Dismissal Recommendations	76
Student Conduct Committee	76
Standards of Professional Conduct	76
Violations of Professional Standards	76
Reporting and Processing Procedures	77
Evaluation and Grading	79
Grading Scale	79
Credit Hour Calculation	80
Incomplete Grades	80

Grade Appeals Process	80
Appealing a Course Grade	80
Issues/Dispute Resolution Procedure	81
Professional Development	81
Community Field Service Program	81
CAHP Research and Publication Center	81
MSHS Electronic Student Center	81
Annual Leadership Symposium	82
Student Government Association	82
Professional Organizations and Outreach	82
Curriculum Organization	82
Overview	82
Tracks of study within the MSHS degree program	82
Final Integrative Exercises	85
Course Descriptions	87
Honors and Awards	92
Academic Calendar	93
Fall 2013	93
Master of Science in Physician Assistant Studies	94
Department of Physician Assistant Education	94
Accreditation	94
Vision Statement	94
Mission Statement	94
The Physician Assistant Role	94
Certification/Licensure	95
Program Goals	96
Functions and Tasks of Physician Assistant Graduates	97
General Entry-Level Competencies Expected of a Graduate	97
Personal Competencies for Admission and Matriculation	97
Admissions Policies and Procedures	98
International Applicants	99
Application Requirements	99

Application Procedures and Deadlines	100
Linkage Program(s)	101
Transfers from Other Schools	101
Registration	101
Full-time/Part-Time Status	102
Time Limits	102
Additional PA Program Education Requirements	102
Tuition and Fees	102
Other Fees and Expenses	102
Academic Requirements	103
Academic Advisement	103
Promotion	103
Graduation	103
Standards of Academic Progress	104
Phase I	105
Phase II (Didactic and Clinical)	105
Phase II and Phase III (Clinical)	105
Attendance/Absences	106
Student Behavior during Examinations	106
Children in the Classroom/Labs	107
Academic Warning (Probation)	107
Probation	107
Financial Aid Warning Policy (Title IV and Title VII)	109
Tutorial Assistance Program	109
Remediation	109
Returning from Leave of Absence While in Phase II or Phase III	112
Dismissal Recommendations	112
Student Progress Committee	112
Student Conduct Committee	113
Standards of Professional Conduct	113
Violations of Professional Standards	113
Reporting and Processing Procedures	114

	Clinical Education	116
	Out-of-Area Clinical Education	116
	Clinical Rotation Education Assignment	117
	Clinical Rotation Education Assignment Appeal	117
	Reassignment of Clinical Rotation Education	117
	Rotational Clinical Education Observation	117
	Personal Appearance	117
	Professional Conduct during Clinical Education	118
	Confidentiality of Medical Record and Health History Information	119
	Patient Records - Physician Review and Countersignature	119
	Title Identification/Representation	119
	Evaluation and Grading	120
	Grading Scale	122
	Clinical Rotation Education Grading Criteria	122
	Credit Hour Calculation	122
	Grade Appeals Process	122
	Appealing a Course Grade	122
	Appealing a Clinical Education Grade	123
	Communications: Lockers, Email, Mail	123
	Issue/Dispute Resolution Procedure	124
	Curriculum Organization	125
	Year 1	125
	Year 2	126
	Course Descriptions	127
	Honors and Awards	132
	Academic Calendar	133
	The Physician Assistant Oath	135
D	octor of Physical Therapy Program	136
D	epartment of Physical Therapy Education	136
	Accreditation	136
	Mission Statement	136
	About the Doctor of Physical Therapy Program	136

Program Goals	136
Description of the DPT (Entry Level) Program	137
Curriculum Design	137
Program Learning Outcomes (PLO)	138
Personal Competencies for Admission and Matriculation	138
Admissions Policies and Procedures	140
International Students	140
Application Requirements	140
Application Procedures and Deadlines	142
Transfers from Other Schools	143
Registration	143
Full-time/Part-Time Status	143
Time Limits	143
Tuition and Fees	144
Other Fees and Expenses	144
Academic Requirements	144
Academic Advisement	144
Attendance/Absences	144
Student Test Taking Protocol and Guidelines	145
Confidentiality of Medical Records and Health History Information	145
Use of Physical Therapy Equipment and Laboratories	146
Clinical Education Policies and Procedures	146
Promotion	146
Graduation	147
Standards of Academic Progress	147
Academic Standing	147
Academic Warning	147
Probation	148
Financial Aid Warning Policy (Title IV and Title VII)	148
Tutorial Assistance Program	149
Remediation	149
Dismissal Recommendation	150

Student Progress Committee	150
Student Conduct Committee	151
Standards of Professional Conduct	151
Violations of Professional Standards	151
Reporting and Processing Procedures	151
Evaluation and Grading	154
Evaluation Methods	154
Professional Performance	155
Grading Scale	155
Incomplete	156
Grade Reports	156
Credit Hour Calculation	156
Grade Appeals Process	156
Review of Examinations	156
Appealing a Course Grade	157
Issues/Dispute Resolution Procedure	157
Curriculum Organization	158
Modified DPT Curriculum	160
Exemption from Individual Course	160
Description of the DPT (Advanced Standing) Program	161
Curriculum Design	161
Admissions Policies and Procedures	161
International Students	161
Application Requirements	161
Application Procedures and Deadlines	162
Portfolio Review	162
Transfer Credit	163
Conditional Admission	163
Readmission	163
Continuing Education and Non-Degree Students	163
Computer Requirements	163
Registration	163

New Students	163
Continuing Students	164
Adding, Dropping, or Withdrawing from a Course(s)	164
Full-time/Part-Time Status	164
Time Limits	164
Tuition and Fees	164
Other Fees and Expenses	165
Academic Policies and Procedures	165
Attendance/Absences	165
Residency Requirements	165
Standards of Academic Progress	165
Financial Aid Warning Policy (Title IV and Title VII)	165
Curriculum Organization	166
Additional Courses	166
Course Descriptions	167
Honors and Awards	176
Academic Calendar	177
College of Dental Medicine	179
Doctor of Dental Medicine Program	179
Accreditation	179
Vision	179
Mission	179
Values/Goals	179
Personal Competencies for Admission and Matriculation	179
Observation Skills	180
Communication Skills	180
Motor Skills	180
Interpretive/Conceptual/Quantitative Skills	181
Behaviors and Social Skills	181
Physical Health	181
Admissions Policies and Procedures	181
Application Requirements	182

	Experience	183
	Standardized Examinations	183
	Applicants with Foreign Coursework	183
	International Students	184
	Application Procedures and Deadlines	184
	Transfers from Other Schools	184
R	egistration	185
	Full-time/Part-Time Status	186
	Time Limits	186
	Additional DMD Program Education Requirements	186
T	uition and Fees	186
	Other Fees and Expenses	186
Α	cademic Requirements	187
	Academic Advisement	187
	Attendance/Absences	187
	Evaluation of Dental Student Academic Performance	188
	Promotion	188
	Graduation	188
St	andards of Academic Progress	189
	Probation or Academic Suspension	189
	Financial Aid Warning Policy	190
	Tutorial Assistance Program	190
	Remediation	190
	Dismissal	191
	Student Appeal Process	191
Α	cademic Integrity	192
E۱	valuation and Grading	192
	CDM Competencies for the General Dentist	192
G	rading Scale	194
	Incomplete	194
	Grade Reports	195
	Credit hour Calculation	195

Grade/Penalty Appeals Process	195
Issues/Dispute Resolution Procedure	195
Commission on Dental Accreditation Policy on Complaints	196
Curriculum Organization	196
Year 1	196
Year 2	197
Year 3	198
Year 4	198
Course Descriptions	199
Honors and Awards	207
Academic Calendar	208
College of Graduate Nursing	209
Accreditation	209
Vision Statement	209
Mission Statement	209
Purpose	209
Philosophy	210
The Profession of Nursing	210
Healthcare Systems	210
Local and Global Communities	210
Nursing Education	210
CGN Core Characteristics	211
Boyer Model of Scholarship	211
References	212
Program Offerings	212
Degrees and Certificate	212
Entry into DNP	212
Entry into MSN	212
MSN Tracks	212
Program Descriptions	212
Post-Masters Doctor of Nursing Practice (DNP)	213

Master of Science in Nursing/Family Nurse Practitioner/Doctor of Nursing Practice	
Post-Master of Science in Nursing Family Nurse Practitioner (Post Master's FNP)	214
Master of Science in Nursing (Completion)	214
Master of Science in Nursing/Ambulatory Care (MSN/AMB)	214
Master of Science in Nursing/Family Nurse Practitioner (MSN/FNP)	214
Master of Science in Nursing/Health Systems Leadership – Administrative Nurse Le	•
Master of Science in Nursing/Health Systems Leadership – Clinical Nurse Leader (N	//SN/CNL) 215
Master of Science in Nursing – Entry Program (MSN-E)	215
Master of Science in Nursing – Associate Degree in Nursing/RN to Master's ProgramMSN)	•
Nursing Curriculum – 30 Unit option	217
Instructional Design	217
Campus Learning (Pre-Licensure Courses)	217
Distance Learning (Post-Licensure Courses)	217
Integrated Courses	218
Personal Competencies for Admission and Matriculation	218
Computer Literacy	218
Intellectual Skills	218
Technical Guidelines for Nursing Practice (Pre-licensure)	218
Reasonable Accommodation for Candidates/Students with Disabilities	219
Certifications and Licensures	220
National Council on Licensure Exam (NCLEX)	220
National Certification as a Nurse Practitioner	220
Admissions Policies and Procedures	220
International Applicants	220
Admission Requirements	220
Prerequisite Requirements	222
Transfer Policy	224
Computer Requirements for MSN-E Program	226
Computer Requirements for Post-Licensure Programs	226

CPR Certification	226
Criminal Background Check for MSN-E Students	226
LiveScan Fingerprinting for MSN-E, ADN to MSN and FNP Students	227
Student Release of Information	227
Registration	227
Orientation	227
Full-time/Part-Time Status	228
Academic Progression	228
Tuition and Fees	229
Other Fees and Expenses	229
Additional Fees and Expenses (Pre-Licensure Programs)	229
Additional Fees and Expenses (Post-Licensure Programs)	230
Administrative and Clinical Fees for Additional Terms	230
Academic Policies and Procedures	230
Required Texts	230
Required Clinical Supplies	230
Academic Year	231
Academic/Clinical Advisement	231
Assignment Due Dates	231
Attendance Policies	232
Electronic Mail Correspondence Policy	233
Social Networking Guidelines	234
American Psychological Association Format	234
Course Drop/Withdrawal	234
Leave of Absence	235
Program Withdrawal	235
Standards of Academic Progress	235
Academic Probation	235
Failed Course Policy	235
Financial Aid Warning Policy (Title IV and Title VII)	235
Tutorial Assistance Program	236
Remediation	236

Academic Suspension	237
Dismissal	237
Student Performance Committee	238
Academic Integrity and Professional Ethics	239
Cheating	240
Plagiarism	240
Policy for Students Suspected of Drug, Substance or Alcohol Abuse/Dependence	241
Clinical Education	243
Clinical Guides	243
Professional Appearance and Dress Code	243
Practice-based Training for DNP Students	245
Clinical Training for FNP Students	246
Clinical/Practical Training for Administrative Nurse Leader Students	248
Clinical Training for Clinical Nurse Leader Students	248
Clinical Rotations Policy – Pre-Licensure	248
Clinical/Practical Training for ADN to MSN Students: Community Health Clinical	248
Student Injuries and Illnesses in the Clinical Setting	248
Outcome Competencies for Graduates	249
Program Completion	249
Evaluation and Grading	251
Pre-Licensure Grading Policy	251
Post-Licensure Grading Policy	252
Clinical, Practicum and RN Seminar Grading Policy	253
Credit Hour Calculation	253
DNP Practice Immersion: The Practice Dissertation/Scholarly Presentation	253
DNP Continuous Enrollment Policy	253
Grade Appeals Process	254
Student Concerns/Continuous Quality Improvement (CQI) & Formal Complaint Policy	254
Student Concern/CQI	254
Formal Complaints	254
Curriculum Organization	257
Pre-Program	257

Master of Science in Nursing, Entry Level (MSN-E), Pre-Licensure RN Preparation Curriculum	. 258
Master of Science in Nursing, Entry Level (MSN-E) , Ambulatory Care Emphasis	. 259
Master of Science in Nursing, Entry Level (MSN-E), Health Systems Leadership-Administrative N Leader Emphasis	
Master of Science in Nursing, Entry Level (MSN-E), Health Systems Leadership – Clinical Nurse Leader Emphasis	. 261
Master of Science in Nursing, ADN/RN-MSN, Ambulatory Care Emphasis	. 262
${\it Master of Science in Nursing, ADN/RN-MSN, Ambulatory Care Emphasis, Three-Year Extended} \; .$	. 263
Master of Science in Nursing, ADN/RN-MSN, Health Systems Leadership – Administrative Nurse Leader Emphasis	
Master of Science in Nursing, ADN/RN-MSN, Health Systems Leadership – Administrative Nurse Leader Emphasis, Three-Year Extended	
Master of Science in Nursing, ADN/RN-MSN, Health Systems Leadership – Clinical Nurse Leader Emphasis	
Master of Science in Nursing, ADN/RN-MSN, Health Systems Leadership – Clinical Nurse Leader Emphasis, Three-Year Extended	
Master of Science in Nursing, BSN/RN-MSN, Ambulatory Care Emphasis	. 272
Master of Science in Nursing, BSN/RN-MSN, Ambulatory Care Emphasis, Three-Year Extended	. 273
Master of Science in Nursing, BSN/RN-MSN, Health Systems Leadership – Administrative Nurse Leader Emphasis	. 275
Master of Science in Nursing, BSN/RN-MSN, Health Systems Leadership – Administrative Nurse Leader Emphasis, Three-Year Extended	. 276
Master of Science in Nursing, BSN/RN-MSN, Health Systems Leadership - Clinical Nurse Leader Emphasis	. 278
Master of Science in Nursing, BSN/RN-MSN, Health Systems Leadership – Clinical Nurse Leader Emphasis, Three-Year Extended	
Master of Science in Nursing, Family Nurse Practitioner (MSN/FNP)	. 281
Master of Science in Nursing, Family Nurse Practitioner (MSN/FNP), Three-Year Extended	. 283
Master of Science in Nursing, Completion	. 285
Master of Science in Nursing, Completion, Two-Year Extended	. 286
Post-Master's FNP	. 287
Post-Master's FNP, Two-Year Extended	. 288
Post-Master's FNP (WesternU MSN-E Alumni)	. 290
Post-Master's FNP. Two-Year Extended (WesternU MSN-E Alumni)	. 291

Doctor of Nursing Practice (DNP)	293
Doctor of Nursing Practice (DNP), Three-Year Extended	294
Master of Science in Nursing/Family Nurse Practitioner/Doctor of Nursing Practice (N	/ISNFNP/DNP)
Dual Degree	296
Master of Science in Nursing/Family Nurse Practitioner/Doctor of Nursing Practice (N	•
Dual Degree, Four-Year Extended	
Course Descriptions	
•	
Honors and Awards	
Academic Calendar	
Fall 2013	
Spring 2014	
College of Optometry	
Doctor of Optometry Program	
Accreditation	
Vision	
Mission	
Core Values	321
Goals and Objectives	321
Student Learning Outcomes	322
Knowledgeable	322
Skillful	323
Professional and Ethical	323
The OD Degree	324
Admissions Policies and Procedures	324
Application Requirements	324
Academic Requirements	325
Prerequisite Courses	326
Recommended Courses	326
Notes Regarding Prerequisite Coursework	326
Student Selection Process	327
Applicants with Foreign Coursework	327

International Students	328
Transfers from Other Schools	328
Registration	329
Full-time/Part-Time Status	329
Time Limits	329
OD Student Requirements	330
Tuition and Fees	330
Other Fees and Expenses	331
National Board Fees	331
Clinical Rotations Expenses	331
Financial Assistance	331
Academic Requirements	331
Academic Support	331
Attendance and Absences	332
Leave of Absence	332
Examinations	332
Standards of Academic and Professional Conduct	332
Student Performance Committee	333
Promotion	333
Graduation	333
Standards of Academic Progress	334
Review of Student Performance	334
Probation or Academic Suspension	334
Financial Aid Warning Policy (Title IV and Title VII)	335
Tutorial Assistance Program	336
Remediation	336
Modified Program	337
Dismissal from the Program	337
Readmission	338
Appeal Process	338
Evaluation and Grading	338
Grading Scale. Didactic Courses	338

	Grading Scale, Clinical Courses	339
	Administrative Grades	339
	Incomplete	339
	Audit	339
	Withdrawal	339
	Grade Reports	339
	Grade Changes/Appeals	340
	Credit Calculations	340
Is	sues/Dispute Resolution Procedure	340
C	urriculum Organization	341
	Instructional Methods	341
	Implementation	342
	Procedural Skills	343
	Year 1	343
	Year 2	344
	Year 3	345
	Year 4	345
C	ourse Descriptions	346
Н	onors, Scholarships, and Awards	357
Α	cademic Calendar	358
TI	ne Optometric Oath	359
Coll	ege of Osteopathic Medicine of the Pacific	360
Doc	tor of Osteopathic Medicine Program	360
Α	ccreditation	360
TI	ne Osteopathic Philosophy	360
N	lission	360
	Core Competencies Supporting WesternU/COMP's Mission Statement	361
	Strategic Plan in Support of the Mission and Core Competencies	361
С	urricular Goals	361
P	ersonal Competencies for Admission and Matriculation	362
	Observation	362
	Communication	363

Motor	363
Intellectual, Conceptual, Integrative, and Quantitative Abilities	363
Behavioral and Social Attributes	363
Physical Health	363
Admissions Policies and Procedures	363
Minimum Entrance Requirements	364
AACOMAS and Secondary Applications	364
Applicants with Foreign Coursework	365
International Students	365
Transfers from Other Schools	366
Deferred Admission	366
Tuition Deposit Policy	366
Registration	366
Substance Abuse Policy	366
Criminal Background Check/Drug Screening Policy	367
Full-time/Part-Time Status	367
Time Limits	367
Tuition and Fees	367
Other Fees and Expenses	368
Clinical Rotations Expenses	368
Shelf Examination Repeat and OSCE Repeat Fees	368
Student Support Services	369
Academic Advisement	369
Supportive Learning Environment	369
Academic Requirements	370
Attendance and Absences from Curricular Activities	370
Leave of Absence	373
Examination Policies	373
COMLEX (National Boards) Requirements	374
Repeated COMLEX Exams (Timelines)	377
Withdrawal	377
Professional Accountability, Academic Performance and Promotion	377

	Academic Integrity/Professionalism	. 378
	Student Honor Code	. 378
	Student Code of Ethics	.378
	Student Honor Code Committee	.379
	Student Performance Committee	.380
	Graduation	.380
	Post Graduate Medical Education	. 381
St	andards of Academic Progress	. 382
	Academic Probation	. 382
	Financial Aid Warning Policy (Title IV and Title VII)	. 383
	Tutorial Assistance Program	. 383
	Course Repeats and Remediations	. 383
	Remediation: Financial Aid Policy	.384
	Suspension	.384
	Dismissal	.384
E۱	valuation and Grading	. 385
	Pre-Clinical Curriculum Grading (OMS I & II)	. 385
	Clinical Curriculum Grading (OMS III & IV):	. 385
	Cumulative Numeric Scores and Class Rank	.386
	Incomplete Grade (I) Courses or Systems	.386
	Incomplete Rotations	.386
	Grade Reports	. 387
	Grade Changes Pre-Clinical (OMS I & II)	. 387
	Grade Changes Clinical (OMS III & IV)	. 387
	Credit hour Calculation	.388
ls	sues/Dispute Resolution Procedure	.388
	Complaints regarding Accreditation Standards	. 388
C	urriculum Organization	. 389
	Medical Gross Anatomy-Intensive Summer Anatomy Course (ISAC)	. 390
	Pre-Clinical Curriculum (OMS I and II)	. 390
	Clinical Curriculum (OMS III and IV)	. 391
<u>_</u>	ourse Descriptions	393

	Honors and Awards	403
	Academic Calendar	405
	The Osteopathic Oath	407
С	ollege of Pharmacy	408
V	laster of Science in Pharmaceutical Sciences	408
	Accreditation	408
	Program Objectives	408
	Program Overview	408
	Program Faculty	408
	Application and Admissions Requirements	408
	Application Deadline	409
	Applicants with Foreign Coursework	409
	International Students	409
	Transfer Credit	409
	Registration	409
	Withdrawing from Courses	409
	Full-time/Part-Time Status	410
	Time Limits	410
	Tuition and Fees	410
	Other Fees and Expenses	410
	Financial Support	410
	Academic Requirements	410
	Attendance and Absences	410
	Vacation and Emergencies	410
	Thesis	411
	Graduation	412
	Standards of Academic Progress	413
	Graduate Student Performance Committee	413
	Probation or Academic Suspension	413
	Financial Aid Warning Policy (Title IV and Title VII)	413
	Tutorial Assistance Program	414
	Dismissal	414

Evaluation and Grading	414
Program Outcomes	414
Grading Scale	415
Incomplete	415
Grade Reports	417
Credit Hour Calculation	417
Grade Appeals Process	417
Appealing a Course Grade	417
Issues/Dispute Resolution Procedure	417
Curriculum Organization	418
Course Descriptions	419
Honors and Awards	421
Academic Calendar	422
College of Pharmacy	426
Doctor of Pharmacy Program	426
Accreditation	426
Vision	426
Mission	426
The Degree	426
The Doctor of Pharmacy Curriculum	426
The Didactic Curriculum Component	426
The Experiential Education Curriculum Component	426
The Interprofessional Curriculum Component	427
The Professionalism Curriculum Component	427
Personal Competencies for Admission and Matriculation	427
Observation Skills	428
Communication Skills	428
Motor Skills	428
Interpretative, Conceptual and Quantitative Skills	428
Behavioral and Social Skills	428
Ability-Based Outcomes	429
Admissions Policies and Procedures	432

Application Requirements	433
Application Procedures and Deadlines	435
Transfers from Other Schools	435
International Post-Baccalaureate PharmD (IPBP) Track	435
Description of the IPBP Program	435
Application Procedure	436
IA/Interview Guidelines	437
Course Waiver Policy	437
Registration	437
Full-time/Part-Time Status	438
Time Limits	438
Computer Technology	438
Tuition and Fees	438
Other Fees and Expenses	438
Financial Assistance	439
Academic Requirements	439
Academic Advisement	439
Course Participation and Attendance	439
Independent Study	440
Research Activities	440
Pharmacy Intern License Requirement	440
Student Performance Committee	441
Academic Progression in the Didactic Curriculum	441
Eligibility to Participate in Advanced Pharmacy Practice Experiences (APPEs)	441
Progression to the Fourth Professional Year	441
Graduation	441
Standards of Academic Progress	442
Failure to Meet Standards – IPPE Rotation Actions	442
Failure to Meet Standards – First APPE Rotation Actions	442
Failure to Meet Standards – Second APPE Rotation Actions	443
Failure to Meet Standards – Advanced Elective Rotation	443
Academic Probation	443

Financial Aid Warning Policy (Title IV and Title VII)	444
Veterans	445
Tutorial Assistance Program	445
Remediation for Courses in the Didactic Curriculum	445
Academic Suspension	446
Permanent Dismissal for Academic Reasons	446
Standards for Academic and Professional Conduct	446
Academic Honesty	446
Professional Conduct	447
Professional Standards	447
Reporting Violations	449
Academic Misconduct	450
Professional Misconduct	450
Conduct Suspension	453
Issues/Dispute Resolution Procedure	453
Accreditation Council for Pharmacy Education (ACPE) Policy on Complaints	454
Evaluation and Grading	454
Grading Scales	454
Administrative Grades	455
Incomplete grade (I)	455
Grade Reports	456
Credit Hour Calculation	456
Course Grade Appeals	456
Curriculum Organization	458
Year 1	458
Year 2, Year 3 – Fall Semester	458
Year 3 – Spring Semester, Year 4	460
Curriculum Organization (International Post-Baccalaureate PharmD Track)	461
Year 1	461
Year 2	461
Year 3	462
Course Descriptions (Descriptions of Blocks)	463

Honors and Awards	474
Academic Calendar	475
College of Podiatric Medicine	476
Doctor of Podiatric Medicine Program	476
Accreditation	476
The Podiatric Medicine Philosophy	476
Mission	476
Core Competencies in Support of The College's Mission	477
Strategic Plan in Support of the Mission and Core Competencies	477
Personal Competencies for Admission and Matriculation	478
Observation	478
Communication	478
Motor	478
Intellectual, Conceptual, Integrative, and Quantitative Abilities	479
Behavioral and Social Attributes	479
Admissions Policies and Procedures	479
Entrance Requirements	479
AACPMAS	480
Applicants with Foreign Coursework	481
International Students	481
Transfers from Other Schools	481
Registration	481
Full-time/Part-Time Status	482
Time Limits	482
Additional DPM Program Education Requirements	482
Tuition and Fees	482
Other Fees and Expenses	482
National Board Fees	483
Clinical Rotations Expenses	483
Academic Policies	483
Academic Advisement	483
Exemption from Individual Preclinical Curriculum Course	483

Attendance and Absences	483
Leave of Absence	484
National Boards (Licensing Examinations)	485
Examination Policies	487
Violations of Examination Policies	487
Student Conduct and Performance Committee	488
Violations of the Standards of Professional Conduct	488
Promotion	488
Graduation	489
Standards of Satisfactory Progress	489
Veterans	489
Probation or Academic Suspension	490
Financial Aid Warning Policy (Title IV and Title VII)	491
Tutorial Assistance Program	491
Remediation	491
Remediation: Financial Aid Policy	492
Dismissal	492
Summary Suspension	493
Student Appeal Process	493
Evaluation and Grading	493
Curricular Outcomes/Goals	493
Grade Reports	494
Pre-Clinical Grading Scale	494
Incomplete Grade (I):	495
Credit Courses (CR/NCR)	495
Evaluation of Students on Clinical Rotations	495
Recording of Clinical Grades	495
Clinical Grading Scale	495
Remediation (Clinical)	496
Incomplete Rotations	496
Cumulative Numeric Scores (GPA)	496
Credit Hour Calculation	496

Grade Appeals/Changes	496
Issues/Dispute Resolution Procedure	497
Complaints Regarding Accreditation Standards	497
Curriculum	498
Implementation	498
Non-Clinical Experiences	498
Procedural Skills	499
Clinical Rotations	499
Rotation Office	499
Summer Medical Science Preparatory Program (SMSPP)	499
Intensive Summer Anatomy Course (ISAC)	499
Curriculum Organization	500
Course Descriptions	503
Honors and Awards	513
Academic Calendar	514
College of Veterinary Medicine	515
Doctor of Veterinary Medicine Program	515
Accreditation	515
Mission Statement	515
The Degree	515
DVM Program Outcomes	515
Admissions Policies and Procedures	516
Application Requirements	516
Student Selection Process	518
Transfers from Other Schools	518
Registration	518
Full-time/Part-Time Status	519
Time Limits	519
Computer Technology	519
Tuition and Fees	519
Other Fees and Expenses	519
Estimated Fees and Expenses	520

Clinical Training Expenses	520
Licensing Examination Fees	520
Academic Requirements	520
Academic Advisement	520
Attendance and Absences	520
Examinations	521
Academic and Professional Misconduct Policies	521
Promotion	522
Graduation	522
Standards of Academic Progress	523
Probation or Academic Suspension	523
Financial Aid Warning Policy (Title IV and Title VII)	524
Tutorial Assistance Program	524
Remediation	524
Dismissal	525
Readmission	526
Evaluation and Grading	526
Grading Scale, Years 1-3	526
Grading Scale, Year 4	526
Administrative Grades	526
Grade Reports	527
Grade Changes	527
Appeal of Recorded Grades	527
Credit Hour Calculations	527
Issues/Dispute Resolution Procedure	528
Curriculum Organization	528
Year 1	528
Year 2	529
Year 3	529
Year 4	530
Course Descriptions	531
Honors and Awards	549

Academic Calendar	550
Veterinarian's Oath	551
Graduate College of Biomedical Sciences	552
Master of Science in Medical Sciences	552
Accreditation	552
Program Goals	552
Program Overview	552
Program Faculty	552
Application and Admissions Requirements	552
Admission Prerequisites	553
Application Process	553
Application Deadline	554
Applicants with Foreign Coursework	554
International Students	554
Transfer Credit	554
Registration	554
Withdrawing from Courses	555
Full-time/Part-Time Status	555
Time Limits	555
Tuition and Fees	555
Other Fees and Expenses	555
Financial Aid and Program Scholarships	555
Graduate College of Biomedical Sciences Dean's Scholarship	556
Academic Requirements	557
Attendance and Participation	557
Program Director and Faculty Mentor Assignment & Duties	557
Capstone Project Requirements	558
Graduation	558
Academic Integrity	558
Standards of Academic and Professional Conduct: GCBS Honor Code	559
MSMS Professional Dress and Behavior	559
Respect	559

	Accountability	560
	Excellence	560
	Standards of Academic Progress	560
	Student Performance Committee	560
	Academic Probation	560
	Financial Aid Warning Policy	561
	Tutorial Assistance Program	562
	Remediation	562
	Repeating a Course	563
	Academic Suspension	563
	Dismissal	563
	Student Appeal Process	564
	Evaluation and Grading	564
	Institutional Outcomes	564
	Program Outcomes	565
	Grading Scale	566
	Incomplete	566
	Grade Reports	566
	Credit Hour Calculation	566
	Grade Appeals Process	566
	Appealing a Course Grade	566
	Issues/Dispute Resolution Procedure	567
	Curriculum Organization	568
	Course Descriptions	569
	Honors and Awards	573
	Academic Calendar	574
Gr	aduate College of Biomedical Sciences	575
M	aster of Science in Biomedical Sciences	575
	Accreditation	575
	Program Goals	575
	Program Overview	575
	Program Faculty	575

Application and Admissions Requirements	575
Application Deadline	576
Applicants with Foreign Coursework	576
International Students	576
Transfer Credit	576
Registration	576
Withdrawing from Courses	576
Full-time Status	576
Time Limits	577
Tuition and Fees	577
Other Fees and Expenses	577
Financial Support	577
Academic Requirements	577
Attendance and Absences	577
Thesis	578
Standards of Academic and Professional Conduct: GCBS Honor Code	579
Graduation	579
Standards of Academic Progress	580
Student Performance Committee	580
Probation or Academic Suspension	580
Financial Aid Warning Policy	581
Tutorial Assistance Program	581
Remediation	581
Dismissal	582
Student Appeal Process	582
Academic Integrity	583
Evaluation and Grading	583
Program Outcomes	583
Grading Scale	584
Incomplete	584
Grade Reports	584
Credit Hour Calculation	585

(	Grade Appeals Process	. 585
	Appealing a Course Grade	. 585
١	lssues/Dispute Resolution Procedure	. 585
(	Curriculum Organization	. 586
(	Course Descriptions	. 587
ı	Honors and Awards	. 590
,	Academic Calendar	. 591
We	estern University of Health Sciences	. 592
١	Board of Trustees, Administration, and Faculty	. 592
	Board of Trustees	. 592
	University Administration	. 593
	College Advisory Council Members	. 596
	Faculty	. 598
	Clinical and Adjunct Faculty	. 620

# **Western University of Health Sciences**

#### **General Information**

Western University of Health Sciences (WesternU) is a non-profit, independent, academic health center, founded as the College of Osteopathic Medicine of the Pacific (COMP) in 1977. The founding mission of the institution was to educate primary care osteopathic physicians for the western United States. Over the past two decades, WesternU has preserved and enhanced its mission, expanding it to include educational programs in the allied health professions, pharmacy, graduate nursing, veterinary medicine, biomedical sciences, dental medicine, optometry and podiatric medicine

#### Vision

To be the graduate university of medical sciences of choice in the western United States.

#### **Institutional Mission**

WesternU is a graduate university of medical sciences that produces, in a humanistic tradition, health care professionals and biomedical knowledge that will enhance and extend the quality of life in our communities.

#### **Values**

The people of WesternU are dedicated to caring as they pursue their educational, scholarly, patient care, and public service activities. The University encourages diversity and interdisciplinary collaboration between programs, students, faculty, staff, and administrators. The ideals of continuous quality improvement, lifelong learning, long-term planning, fiscal strength, adaptability, and agility in the rapidly changing worlds of health care and education are realized through innovation, teamwork, and collaboration within the University, as well as with its network of academic health centers and community partners.

# Goals

To provide top-quality, learner-centered educational programs in selected graduate medical sciences, to educate a health workforce that meets the needs of the state of California and the western United States.

To link educational, research and service activities and programs in a learner-centered environment through partnerships with academic health centers and other health and education related organizations, to improve the quality of life of the surrounding communities.

To ensure top-quality postgraduate education and training opportunities for graduates of its programs.

To be renowned for using the Internet to promote "e-ffectiveness," "e-fficiency," and "e-learning."

To ensure organizational effectiveness and development.

# **University Outcome domains**

The University has adopted a set of eight outcome domains that serve to guide its academic programs in their development and ongoing quality improvement. Within each outcome domain, each academic program has developed specific ability-based outcomes appropriate to the particular degree program. The eight domains are as follow:

- 1. Critical Thinking
- 2. Breadth and Depth of Knowledge in the Discipline/Clinical Competence
- 3. Interpersonal Communication Skills
- 4. Collaboration Skills
- 5. Ethical and Moral Decision Making Skills
- 6. Life-long Learning Skills
- 7. Evidence-based Practice
- 8. Humanistic Practice

# History

The founding institution, the College of Osteopathic Medicine of the Pacific (COMP), was established in 1977 as a direct and important response to a critical shortage of primary care physicians in the western United States. Philip Pumerantz, PhD, accepted the invitation of the college's board of directors to become the founding president in September 1977. In January 1978, COMP received preaccreditation status from the American Osteopathic Association. Provisional accreditation status was achieved in July of 1978 and full accreditation in February 1982.

COMP admitted its charter class of 36 students in 1978, and classes began on October 2. This occasion marked the successful culmination of efforts begun in 1974 by the Society of Osteopathic Physicians and Surgeons of California "to seek the establishment of a college of osteopathic medicine in the state of California." The charter class graduated on June 13, 1982.

In response to a nationwide demand for qualified clinical educators, COMP initiated a Master of Science in Health Professions Education degree program (known on campus as MSHPE) in September 1986. This program was housed within a newly created Graduate Division, and its charter class graduated in June 1987. The program has grown in subsequent years, with an enrollment reflecting a wide spectrum of health professionals.

As a new decade began, COMP accepted its first class of physician assistant (PA) students, who matriculated on February 2, 1990. With the addition of this program, the Graduate Division became the Division of Allied Health Professions, and subsequently, the School of Allied Health Professions. The start of the PA program signaled a new era in which COMP expanded its mission of educating family-oriented health care professionals for the western United States.

In response to a growing need for physical therapists in this country, a master's degree program in physical therapy (the MPT degree) was launched on January 6, 1992. Within the School of Allied Health

Professions, COMP enrolled 49 students in the charter class and hired five faculty members for the program. The two-year, four-month MPT program educates physical therapists to function as generalists in the field who are also concerned about wellness, health promotion and a humanistic approach to the care of the whole patient.

In 1991 the institution achieved the status of an academic health center (AHC) due to its multifaceted programs in medical and allied health education. The academic health center formed a partnership with San Bernardino County Medical Center, which moved to a state-of-the-art facility in Colton, California, and changed its name to the Arrowhead Regional Medical Center (ARMC) in the spring of 1999. The partnership, known as the Academic Center for Excellence in the Health Sciences (ACEHS), provides the University with a primary teaching hospital. ARMC sponsors the largest family practice residency training program in California and the second largest in the nation.

In August 1996, in order to better reflect its stature, COMP was restructured into a university with a new name: Western University of Health Sciences. The College of Pharmacy also welcomed its charter class into the Doctor of Pharmacy (PharmD) program at that time. This program was the fourth college of pharmacy to be established in the state of California, and prepares students in a humanistic, interdisciplinary tradition to become competent, qualified professionals. Graduates of WesternU's College of Pharmacy complement other health care team members by offering their expertise in comprehensive drug therapy management.

In March 1998, WesternU created a College of Graduate Nursing in order to satisfy an increasing demand for advanced practice nurses. The College offers a Master of Science in Nursing (MSN) degree, a Family Nurse Practitioner (FNP) certificate program, and a joint MSN/FNP program for advanced practice nurses in a distance-learning format. The arrival of the Internet as an electronic information management tool provided the university with a unique opportunity to offer students individualized learning experiences that would be impossible through other media. Online discussion forums and e-mail also provide important lines of communication and support among distance learners, faculty, and other program personnel.

WesternU founded the College of Veterinary Medicine -- its fifth college -- in August 1998. Shirley D. Johnston, DVM, PhD, was hired as the founding dean the following month, and was the first female dean of a veterinary college in the United States. WesternU now provides an AVMA-accredited educational program that serves as a new paradigm in veterinary education. The University also founded the Center for Disability Issues and the Health Professions in August 1998. Headed by Brenda Premo, MBA, the former director of the Department of Rehabilitation for the state of California under Governor Pete Wilson, the Center was established to improve the capabilities of primary health care providers to meet the growing needs of people with disabilities. In 2010, the Center's name was changed to the Harris Family Center for Disability and Health Policy.

In August 1999, the University changed its Primary Care Physician Assistant certificate program to the master's degree level, effective with the class entering in August 2000. Students who complete the two-year program are awarded the Master of Science (MS) degree in Physician Assistant Studies. Current with this program change, the faculty developed an online Master of Science in Health Sciences degree program, designed for licensed physician assistants who possess a bachelor's degree and seek advanced education at the graduate level.

In 2001, the Department of Health Professions Education in the College of Allied Health Professions merged the MS in Health Professions Education with the MS in Health Sciences program. The Department was renamed the Department of Health Sciences to be consistent with this degree change.

In 2003, WesternU enrolled its charter students in the Doctor of Veterinary Medicine and in Doctor of Physical Therapy programs. In addition, the College of Pharmacy began offering a MS in Pharmaceutical Sciences degree program. A new Veterinary Medicine Center opened in conjunction with the matriculation of the first class of veterinary medicine students in August 2003. A second building dedicated to the College of Veterinary Medicine, the Banfield Veterinary Clinical Center, opened in August 2008.

In August 2004, the College of Graduate Nursing instituted a new entry-level nursing track into its MSN program. The MSN program itself has been expanded to provide a series of master's level courses with a nurse leadership focus. This effort was followed by the establishment of a new Doctor of Nursing Practice program, which began classes in January 2008.

The 2009-10 academic year opened with the inaugural classes of our Doctor of Dental Medicine, Doctor of Optometry and Doctor of Podiatric Medicine programs. In conjunction with the inauguration of these three new health professions programs, the university initiated the first phase of its interprofessional education program (IPE), which involves interprofessional teams from all of the University's health professions programs in the analysis of clinical cases. In conjunction with these new professional programs, the University opened its newly constructed Health Education Center and adjacent Patient Care Center. In January 2010, the University enrolled the first class of students in its new Master of Science in Biomedical Sciences program, the initial academic program sponsored by WesternU's new Graduate College of Biomedical Sciences. In June 2010, the University enrolled the first class of students in its new Master of Science in Medical Sciences program within the Graduate College of Biomedical Sciences.

In July 2011, WesternU enrolled the inaugural class of Doctor of Osteopathic Medicine students on its campus in Lebanon, Oregon, a facility known as COMP-Northwest. These students will complete the entire four-year DO curriculum on this campus.

# **Key Facts about Western University of Health Sciences**

- Gender
  - o 62% Female, 38% Male
- Average Age: 28
- Total number of degrees awarded (1982 2012): 9,427

Enrollment 2012-2013: 3572

College of Allied Health Professions: 391

Physical Therapy: 167Health Sciences: 33Physician Assistant: 191

College of Dental Medicine: 279College of Graduate Nursing: 313

College of Optometry: 329

o College of Osteopathic Medicine of the Pacific: 1110

o College of Pharmacy: 560

Doctor of Pharmacy: 545

MS in Pharmaceutical Sciences: 15

College of Podiatric Medicine: 137College of Veterinary Medicine: 409

o Graduate College of Biomedical Sciences: 44

# **Diversity Statement**

The students, faculty, administration and staff of Western University of Health Sciences place great value on diversity. For us, it is a philosophy of inclusion, with pluralism and academic freedom as its foundation. WesternU is committed to an open environment that promotes, accepts and celebrates different points of view.

WesternU is a community of individuals in which diversity is recognized as being the core of our intellectual, social, cultural, physical, emotional and moral lives. We are enriched by our encounters with one another, and we strive to learn from each other in an atmosphere of positive engagement and mutual respect. Our understanding and acceptance of one another in the campus environment contributes to our ability to care for our patients, who live in a diverse society.

The University, in accordance with various laws and beliefs, does not discriminate on the basis of race, color, ethnicity, national origin, religion, politics, disability, gender or sexual orientation in any of its policies, procedures or practices. Sexual harassment is unacceptable.

We acknowledge our guaranteed rights of free expression under the First Amendment to the Constitution of the United States. However, we also hold unique responsibilities as individuals, answerable for our own behavior and fully accountable for our actions. Seeking balance between rights and responsibilities makes us keenly aware of the dangers of defamatory, libelous or obscene behavior, the value of community, and the importance of respecting our differences and commonalties.

As individuals committed to health professions education in the osteopathic tradition, we embrace the important principle of caring for the whole person-in body, mind and spirit.

Additional information, including current campus crime statistics, may be found at http://www.westernu.edu/bin/safety/handbook.pdf.

# **Frequently Called Numbers**

# Pomona, California

President	(909) 469-5200
Academic Affairs	(909) 469-5578
Admissions (All Programs)	(909) 469-5335
Bookstore	(909) 469-5416
Bursar	(909) 469-5403
Harris Family Center for Disability & Health Policy	(909) 469-5441
College of Allied Health Professions	(909) 469-5390
Department of Physical Therapy Education	(909) 469-5300
Department of Physician Assistant Education	(909) 469-5378
Department of Health Sciences	(909) 469-5528
College of Dental Medicine	(909) 706-3504
College of Graduate Nursing	(909) 469-5523
College of Osteopathic Medicine of the Pacific	(909) 469-5505
College of Optometry	(909) 706-3506
College of Pharmacy	(909) 469-5500
College of Podiatric Medicine	(909) 706-3505
College of Veterinary Medicine	(909) 469-5628
Graduate College of Biomedical Sciences	(909) 469-5619
Environmental Health and Safety	(909) 469-5528
Financial Aid	(909) 469-5353
Guard Station (from off-campus phone)	(909) 706-3000
Learning Enhancement and Academic Development	(909) 469-5325
Library	(909) 469-5323
Multimedia Services	(909) 469-5432
Office of the Registrar	(909) 469-5491
University Student Affairs	(909) 469-5340
Technical Support Services	(909) 469-5432
Security	(909) 706-3000
Student Health Coordinator	(909) 706-3870
Western University of Health Sciences Patient Care Center	(909) 865-2565

# Lebanon, Oregon (COMP-Northwest)

Admissions	(541) 259-0214
Learning Skills and Accommodations Office	(541) 259-0226
Financial Aid	(541) 259-0360
Office of the Registrar	(909) 469-5491
Office of Student Affairs	(541) 259-0220

# **Student Life: Campus Facilities**

# **Pomona Campus**

Western University of Health Sciences
Pomona Campus
309 E. Second Street
Pomona, CA 91766-1854
(909) 623-6116

The main campus of Western U is in Pomona (see map, inside back cover), a city of approximately 150,000 residents, located about 35 miles east of Los Angeles near the foothills of the San Gabriel Mountains. It is an area with a high concentration of private and state colleges and universities. Mountain resorts are nearby, and Pacific Ocean beaches, Palm Springs, Hollywood, Pasadena, Los Angeles, arboretums, theme parks, museums, art galleries, libraries, theaters, and concert halls are all within about an hour's drive.

The campus has both fall/spring and summer hours; below are the fall/spring hours:

#### **Banfield Veterinary Clinical Center**

The Banfield Veterinary Clinical Center houses the Banfield Pet Hospital, the "Thing" Laboratory, the Gretchen Wyler Media Room, and a student commons area on the ground floor. The Shirley and Gary Johnston Auditorium, additional conference rooms and faculty offices for the College of Veterinary Medicine are housed on the second floor. Banfield the Pet Hospital does not always follow campus hours.

<b>Building Hours</b>	Monday-Friday	7:00 a.m.	to 11:00 p.m.
	C	0.00	

Saturday 8:00 a.m. to 10:00 p.m.

Sunday Closed

Holidays \*Consult CVM Office of Academic Affairs

# **Booth University Bookstore**

The Booth University Bookstore is a convenient source for required textbooks, supplies, and insignia gift items. Personal checks, Visa®, MasterCard, and DiscoverCard® are accepted. Telephone and mail orders are accepted with shipment made via UPS. Located in the rear of the bookstore is a popular gathering place, the Hop Shoppe.

**Building Hours** Monday-Friday 7:30 a.m. to 5:30 p.m.

Saturday – Sunday Closed Holidays Closed

#### **Business Center**

The Business Center houses the departments of Business Services (Bursar's Office, Accounting and the Treasurer's Office) and Student Health Services. Please note that the Student Health Services Office is open Monday – Friday, 8:00 a.m. to 4:30 p.m.

**Building Hours** Monday-Friday 7:00 a.m. to 5:00 p.m.

Saturday-Sunday Closed Holidays Closed

Office Hours 8:00 a.m. to 5:00 p.m.

# Harris Family Center of Disabilities and Health Policy

**Building Hours** Monday-Friday 8:00 a.m. to 5:00 p.m.

Saturday Closed Sunday Closed Holidays Closed

# **Health Profession Center (HPC)**

The Health Professions Center includes facilities for the College of Pharmacy, the College of Graduate Nursing, and the College of Osteopathic Medicine of the Pacific (COMP) as well as other university services.

The first floor includes a 54-seat auditorium; a 200 seat lecture hall; three "in-the-round" high-tech classrooms; break-out rooms for small group learning activities; Feldsher Hall; a large student lounge with two kitchens, 80-inch screen television, pool table, ping pong table, and vending machines; administrative and faculty offices for the College of Pharmacy; and a pharmacy/medical office museum. The offices of the Center for Academic and Professional Education and the office of Learning Enhancement and Development are also located on the first floor of the Health Professions Center.

The second floor of the HPC has a 200-seat lecture hall, administrative and faculty offices for the College of Osteopathic Medicine of the Pacific and the College of Graduate Nursing, clinical skills laboratories, research laboratories and conference rooms.

**Building Hours** Monday-Sunday 7:00 a.m. midnight

\*Open 8:00 a.m. to 5:00 p.m. on some

holidays except for Thanksgiving, Memorial Day, and Labor Day weekends and Winter

Break

#### **Health Education Center (HEC)**

The Health Education Center is a 178,000 square foot educational building. It includes two 350-seat auditoria; six 125-seat lecture halls; 56 small group break-out rooms, teaching laboratories for optometry, dentistry and podiatric medicine; research laboratories for faculty; and faculty and administrative offices for the College of Podiatric Medicine, the College of Dental Medicine, the College of Optometry, and the College of Osteopathic Medicine of the Pacific. The IT Help Desk is located on the first floor in the NW corner.

**Building Hours** Monday-Sunday 6:30 a.m. to midnight

\*Open on some holidays except for

Thanksgiving, Memorial Day, and Labor Day

weekends and Winter Break

#### **Health Sciences Center**

The 72,000 square-foot Health Sciences Center features a unique central staircase. The first floor consists of two large amphitheater-style lecture halls; Tribute Walk, a donor recognition area; and Compatriot's Hall, an elegant meeting room with kitchen facilities.

The first floor also houses the administrative and faculty offices of the College of Allied Health Professions, including the departments of Physician Assistant Education and the Master of Science in Health Professions Education, and some faculty offices for the College of Veterinary Medicine.

The second floor of the Health Sciences Center consists of an anatomy laboratory, the administrative and faculty offices of the Physical Therapy Education Department; physical therapy clinical skills laboratories; physical therapy faculty research laboratories, the osteopathic manipulative medicine teaching laboratory; the office of Institutional Research, and temporary offices for faculty of the College of Veterinary Medicine.

**Building Hours** Monday-Friday 7:00 a.m. to 11:00 p.m. Saturday-Sunday 7:00 a.m. to 10:00 p.m.

> Holidays \*Open on some holidays except for

> > Thanksgiving, Memorial Day, and Labor Day

weekends and Winter Break

## Harriet K. and Philip Pumerantz Library and Learning Resource Center

The Pumerantz Library and Learning Resources Center houses the University's book, journal and media collections. It also provides office space for the library staff and the staff of Information Technology. The ground floor is reserved for library circulation services, the University Archives, history of medicine museum, and study space where students may use laptops to connect to the University's network. Books and serial collections are housed on the second and third floors, respectively. The Edward Tessier Learning Center is on the third floor. Offices for library and information technology staff are found on the fourth floor.

**Building Hours** 7:00 a.m. to 11:00 p.m. Monday – Thursday Fall/Spring Friday 7:00 a.m. to 6:00 p.m. Saturday-Sunday 11:00 a.m. to 7:00 p.m. Holidays Closed

**Building Hours** Monday – Thursday 7:00 a.m. to 9:00 p.m. Summer 7:00 a.m. to 6:00 p.m. Friday Saturday-Sunday 11:00 a.m. to 7:00 p.m.

> Holidays Closed

#### **Nursing Sciences Center**

The Nursing Sciences Center, located at 350 S. Garey Avenue, houses the faculty and administrative offices for the College of Graduate Nursing, as well as the offices for the Office of Institutional Research, on the first floor. The second floor contains the administrative offices for the Colleges of Dentistry, Optometry and Podiatric Medicine and offices for the Assistant Vice President for New Program Development and the Assistant Provost for Interdisciplinary Education.

8:00 a.m. to 5:00 p.m. **Building Hours** Monday-Friday

> Saturday-Sunday Closed **Holidays** Closed

#### **Patient Care Center**

The Patient Care Center is a 68,000 square foot facility providing ambulatory patient care services for family medicine, pediatrics, Osteopathic Manipulative Medicine, optometry, dentistry, medicine and podiatric medicine. The Patient Care Center is also home to the Western Diabetes Institute. The Patient Care Center also contains an optometry dispensary and a full-service outpatient pharmacy. Adjacent to this building is a 611 space parking structure.

**Building Hours** Monday – Friday 7:30 a.m. to 5:00 p.m.

Saturday-Sunday Closed Holidays Closed

Patient Hours Monday – Friday 8:00 a.m. to 5:00 p.m.

Saturday-Sunday Closed Holidays Closed

# Student Services Center/South Campus Building

The offices of University Student Affairs and University Admissions are located on the first floor of the Student Services Center. The second floor houses the office of Financial Aid and the Offices of University Recruitment.

**Building Hours** Monday-Friday 7:00 a.m. to 5:00 p.m.

Saturday-Sunday Closed Holidays Closed

# **University Administration and Academic Center**

The University Administration Center houses the University's executive offices. The first floor contains the offices for the Provost/Chief Operating Officer, Vice President of University Advancement, and the offices of Major Gifts, Special Events, Communications, Publications, University Counsel, and Foundation, Corporate and Government Relations.

The Office of the President and the Office of Senior Vice President for Executive Affairs are located on the second floor. The Saul Bernat Board Room and the VIP Lounge with a kitchen provide space for meetings and special events.

**Building Hours** Monday-Friday 7:00 a.m. to 5:00 p.m.

Saturday-Sunday Closed Holidays Closed

# **University Research Center (URC)**

The University Research Center is a 32,000 square-foot facility, located at the corner of Gibbs and Second Streets. The main level of the University Research Center includes the office of Vice President for Research and three lecture halls: Cooper Hall, Swift Hall and Trendle Hall. The lower level of the University Research Center accommodates various research laboratories and their ancillary facilities.

**Building Hours** Monday-Friday 7:00 a.m. to 5:00 p.m.

Saturday-Sunday Closed Holidays Closed

# **University Services Center**

The University Service Center is a 6,500 square foot building housing administrative offices for the departments of Facilities, Environmental Health and Safety, Special Events, and the Assistant Provost for Strategic Operations and Clinical Services.

**Building Hours** Monday – Friday 7:00 a.m. to 5:00 p.m.

Saturday-Sunday Closed Holidays Closed

Office Hours Monday – Friday 8:00 a.m. to 5:00 p.m.

Saturday-Sunday Closed Holidays Closed

# **Veterinary Medicine Center**

The Veterinary Medicine Center, a building of 25,000 square feet, houses administrative and faculty offices of the College of Veterinary Medicine, Problem Based Learning break-out rooms, conference and meeting rooms, and a gross anatomy laboratory.

**Building Hours** Monday-Saturday 7:00 a.m. to 11:00 p.m.

Sunday 8:00 a.m. to 5:00 p.m.

Holidays Closed

# **Veterinary Pathology Center**

**Building Hours** Monday-Friday 7:00 a.m. to 5:00 p.m.

Saturday-Sunday Closed Holidays Closed

#### **Lebanon Campus**

Western University of Health Sciences Lebanon Campus 200 Mullins Drive

Lebanon, Oregon

#### **Medical Education and Research Center**

The Western University of Health Sciences Medical Education and Research Center is home to the COMP-Northwest program. It is a 55,000 square foot building located on the Samaritan Health Sciences campus in Lebanon, Oregon. The first floor consists of two auditoriums, small-group breakout rooms, standardized patient labs, a student center, and an osteopathic medicine instructional laboratory. The second floor includes anatomy teaching and faculty research labs, student study areas, seminar rooms, and office for faculty and administration.

**Building Hours** Monday – Sunday 8:00 a.m. to 5:00 p.m.

Holidays Closed

# **Personal Safety**

The University strongly suggests the following precautions for its students, faculty and staff:

Since some streets through the campus are open to vehicular traffic, please use extreme caution when crossing between buildings and do not congregate on the street.

Please make sure your car is locked at all times in the parking lot.

You should be advised that the doors to some buildings are locked at 5:00 p.m. It would be to your advantage to walk to the parking lot with a friend or close associate if you are leaving after business hours. If you find it necessary to work or study late, you should advise security personnel on campus before leaving the building so that someone can watch you walk to your car.

Security guards are on campus 24 hours a day 7 days a week, 365 days a year.

Do not admit an unknown person into the building. If someone says they need help, offer to call the proper person (police, paramedics, etc.).

In case of emergency, if someone from the University needs to be informed or contacted, please call:

Pomona Police	911
Pomona Police (Non-Emergency)	(909) 622-1241
Campus Security	(909) 469-6606
Direct Line	(909) 706-3000

Additional information regarding safety on campus, as well as our most recent crime statistics, can be found at http://www.westernu.edu/bin/safety/handbook.pdf .

# **Social Networking Recommendation**

There are many potential benefits to social networking web sites; however, it is important to also recognize and consider the inherent risks that may come with their use. In an effort to inform and protect our students, we recommend that you consider the following:

Understand that your online presence can negatively reflect upon your professional image. Weigh the risks and benefits of self-disclosure.

Remember that electronic sites are never completely secure, and that what is posted can be seen by many.

Respect copyright laws, and reference or cite sources appropriately. Plagiarism applies online as well as in print.

Remember that University/College or Hospital partner logos and trademarks may not be used without written consent from the owner(s) of that logo or trademark.

Always respect the delicate relationship between patient and health care provider; student and faculty member; and employer and employee.

Ensure that information you post complies with existing policies and laws governing privacy and dissemination of data (e.g., HIPAA, FERPA, etc.)

Clearly state that the views expressed are your own and do not represent the views of others.

Review the privacy policy of the sites you use and consider your personal and property safety when posting information online.

#### **Student Services**

#### **Recreational Facilities**

WesternU provides YMCA or designated fitness club individual memberships for students at a minimal cost. If interested, students may sign up at registration. The YMCA is within walking distance of the Pomona campus and offers coeducational facilities for swimming, racquetball, basketball, exercise programs, etc. The fitness club provides Nautilus exercise equipment, aerobics, Jacuzzi, steam rooms, etc. Family memberships may be purchased at reduced rates throughout the year.

On the campus, the Health Professions Center Student Commons provides billiards, television, ping pong; and the parks offer picnic tables, basketball and volleyball. There are also numerous tennis courts, golf courses, ski slopes, and hiking trails in the immediate area.

A variety of discounts to attractions and services are available online at <a href="http://www.westernu.edu/students-discounts">http://www.westernu.edu/students-discounts</a> (California), and <a href="http://www.westernu.edu/students-discounts-or">http://www.westernu.edu/students-discounts-or</a> (Oregon).

# **Community Activities**

"WesternU This Week," which is updated every week, lists WesternU seminars and events that are open to students, faculty, staff and families.

The Office of University Student Affairs also regularly communicates community service opportunities to student leaders that offer an opportunity to both serve the community and practice their clinical skills.

#### **Student Government Association**

Currently, 90 student clubs have been established on the Pomona campus with 19 sibling clubs based in Lebanon, Oregon. The umbrella for all student clubs is the Student Government Association, which is charged with official representation of the student body. Student clubs facilitate hundreds of events every year including community health fairs, general community service, lectures, fundraising for third parties and more.

Student Government Association (SGA) - Students are encouraged, individually and collectively, to express their views on issues and administrative policy on campus. Through the elected representatives of the student body and membership on various University committees, students have the opportunity to participate in the administrative activities of the University. This body represents the students in all matters of concern with regard to faculty and administration.

The objective of the Student Government Association is:

- a. To act as elected representatives of the student body in all matters with regard to the faculty, administration, fellow professionals and the public-at-large.
- b. To ascertain and express student opinion in matters pertaining to the University.
- c. To formulate and execute policy on matters relative to the student body.
- d. To budget and disburse funds for student activities or other related functions.
- e. To organize and implement various educational, social and community service projects.

Students are invited to select representatives on the following University committees:

#### Academic Committee

Each Class Vice-President will be a voting member. The duty of the Committee is to advise the administration and/or college-specific curriculum committees in matters of concert to the faculty and students relevant to the curriculum.

#### Finance Committee

Each Class Treasurer is a voting member of this committee. The purpose of this committee is to formulate annual budget recommendations, and review long range SGA activity projections and needs.

#### **Bylaws Committee**

Each Class President is a voting member of this committee. The purpose of the Committee is to review legislation that has been referred to the Committee by the Student Senate, review the Student Body Bylaws for contraction, ambiguity, or unconstitutionality, and generate legislation regarding such matters with the purpose of correcting them.

#### **Campus Recreation Committee**

Each Class Secretary shall be a member of the committee that coordinates campus recreation and sporting events.

#### **Community Outreach Committee**

Each Class Vice President is a voting member of this committee. The purpose of this committee is to serve the local community and foster students' service efforts. Funds are allocated to this Committee from the SGA budget to execute SGA-sponsored community outreach activities including health fairs, outreach to foster kids and more

## **Newsletter Committee**

Each Class Secretary shall be a member of the Newsletter Committee. This committee will work with the Student Body Secretary to publish a summary of accomplishments, position, and activities of the SGA.

#### Student Organization Committee (SOC)

Each Class Recreation Leader shall be a member of this committee. The SOC is responsible for reviewing all new club applications as well as auditing all student organizations' annual reports.

#### **Student Relations Committee**

Each Class Secretary is a voting member of this Committee. Chaired by the Student Body Secretary, this committee serves to facilitate communication between the SGA and the student body. It works with students, university faculty, administration, and campus media to disseminate information affecting students.

#### **Student Clubs**

WesternU has a wide range of student clubs that allow students to explore particular areas of interest. For a current listing of these clubs and their missions, please see <a href="http://www.westernu.edu/students-clubs-1">http://www.westernu.edu/students-clubs-1</a> (California) and <a href="http://www.westernu.edu/students-clubs-1">http://www.westernu.edu/students-clubs-1</a> (Oregon).

#### **Student Employment**

Because of the nature of the academic programs of the University, students are urged to use great caution in seeking employment during the academic year except when required by the college as part of the curriculum.

# Harriet K. and Philip Pumerantz Library and Learning Resources Center

The mission of the Harriet K. and Philip Pumerantz Library is to support excellence in education, research, and clinical activities of Western University of Health Sciences through the provision of information resources.

Pumerantz Library holds collections in osteopathic medicine, general medicine, dental medicine, optometry, podiatric medicine, basic sciences, veterinary medicine, nursing, pharmaceutical sciences, and allied health. The library has individual and group study spaces, and each area provides network connections, including wireless connectivity, for students who bring laptops.

Librarians and staff provide assistance with locating and using traditional and electronic information sources. In addition to the information resources and basic services the library provides for the students, the library offers many value added services that help students with their studies. The reference staff provides instruction on how to use the resources that can make school life and clinical life easier, in addition to teaching students how to evaluate and effectively use the information. The library also offers research assistance via email, instant messaging, and web conferencing.

Pumerantz Library's collection of electronic resources provides ready access to a wide variety of full-text and multimedia information, both on-campus and off-campus. It is possible to search the library's online catalog, renew books online, and place holds on books via the online catalog. The library offers Interlibrary Loan and Document Delivery service, and maintains partnerships with other academic libraries which provide access to books, articles, and other materials not held in its collections.

**Note**: More detailed information regarding library services, policies, and procedures may be found on the Library's Web site at <a href="http://www.westernu.edu/library">http://www.westernu.edu/library</a>.

# Harris Family Center for Disability and Health Policy (HFCDHP)

The mission of the Harris Family Center for Disability and Health Policy (HFCDHP) at Western University of Health Sciences is to enhance health professions education and to improve access for people with disabilities to health, health education and health care services. The Accommodation and

Resource Center (AARC) is a division of <sup>HF</sup>CDHP which provides accommodations to qualified students with disabilities from the time of admission to graduation. The Center is located on campus at 390 E. Second Street, phone (909) 469-5441, fax (909)469-5503 or email slawler@westernu.edu.

#### **Accommodation and Resource Center (AARC)**

AARC embraces the spirit of providing services to all students at the Pomona and COMP-Northwest campuses with permanent or temporary disabilities ensuring that all university programs and activities are accessible. AARC provides accommodations and services that enable qualified students with disabilities to successfully complete their academic goals. AARC can assist students to maximize their potential while helping them develop and maintain independence. Our philosophy is one that promotes self-awareness, self-determination and self-advocacy in a comprehensively accessible environment. Any student may consult with AARC at the Pomona and COMP-Northwest campuses to determine eligibility to receive accommodations and/or services. Disability categories include but are not limited to: physical, psychological, environmental/chemical, hearing, learning, mobility, speech and vision.

Students seeking AARC assistance are assessed for needs, accommodations and services:

- Academic modifications
- Test accommodations
- Physical access and architectural modifications (i.e., building platforms or adding disabled parking spots)
- Transcription services
- Reader services
- Mobility assistance
- Auxiliary aids
- Disability management advising

In order to provide reasonable and appropriate academic accommodations to students with disabilities, AARC requires documentation which states the current disability and its impact on academic functioning. A student with a documented disability may request accommodations by scheduling an intake appointment and submitting a request to the Assistant Director of AARC.

For additional information, contact Mrs. Sandra Lawler at (909) 469-5297; or check the Center's web page at <a href="https://www.westernu.edu/cdihp">www.westernu.edu/cdihp</a>.

# Office of International and Cross-cultural Programs

The Office of International and Cross-cultural Programs (OICP) was established in 1989 to promote student cross-cultural experiences locally and internationally. The program's goals are to:

• Develop foreign-based clinical training opportunities for interested WesternU students to experience primary health care in foreign countries as part of their professional growth;

- Instill in students the knowledge and skill needed to provide quality health promotion and disease prevention services in cross-cultural settings;
- Develop student and faculty awareness of the principles and goals of the international primary health care movement and its adaptation locally to improve the status of primary health care in our communities, the state, and the country;
- Encourage research in cross-cultural primary health care delivery and education in foreign countries; and
- Advocate for osteopathic approaches to health care delivery and education in foreign countries.

#### **Humanism and the Health Sciences**

In 1996 the University established the Humanism in the Health Sciences Committee. The committee's working definition of humanism is: Humanism is a way of caring that is fundamental to positive interaction and is manifested as a responsiveness to the needs of fellow human beings through respect, compassion, empathy and understanding.

The mission statement of the Humanism in the Health Sciences Committee states: To create a climate for defining, teaching, and implementing humanism throughout the University. Programs are grounded in the philosophy, which fosters valuing the diversity and humanness of persons at our locations and in our communities. The committee will support and encourage scholarly activities that promote humanism.

#### Activities of the committee include:

- The annual publication of a scholarly journal, *Humanism in the Health Sciences*, which features articles, poetry, commentaries and essays. The journal is student run, edited and produced;
- Curriculum development: Belief System and Patient Care Program funded by the National Institute of HealthCare Research; and
- Care Teams and Monthly Care Teams News.

#### **Student Housing**

WesternU offers a secure online listing of available rentals, both local to the campus and nationwide for our students on rotation. Students can access general information about housing and a substantial list of local housing complexes via the Office of University Student Affairs website: <a href="http://www.westernu.edu/students-housing-moving">http://www.westernu.edu/students-housing-moving</a> (California) or <a href="http://www.westernu.edu/students-housing-moving-or">http://www.westernu.edu/students-housing-moving-or</a> (Oregon)

All students on clinicals/clerkships are responsible for making their own housing arrangements. Some hospitals offer housing on a first-come, first-served basis during your assignment at their facility. It is the student's responsibility to contact the hospital for information regarding availability and cost of housing. Please note: the University provides a housing referral service as a courtesy only. The University assumes no responsibility for the accuracy of information provided by property owners or other third parties, and each student should independently verify the condition of any property, its amenities, security arrangements, etc. Under no circumstances shall the University have any responsibility or be

liable for damages, losses, injuries or liabilities of any nature relating to any housing provided by third parties.

#### **Student Parking**

Students have the option to purchase an annual parking permit for \$470.00 or a semester parking permit for \$255.00 The purchase of a yearly parking sticker can be included as part of a student's financial aid package, with the submission of a paid receipt.

The collection of the funds will be conducted by the Bursar's Office, and students will be permitted to charge the parking fees on their student accounts.

The University will provide full-time security for parking lots between the hours of 7:00 a.m. to 11:00 p.m. Monday through Friday. If students are planning to be on campus after 6:00 p.m. during the week, they should move their cars to the Health Sciences Center parking lot after 6:00 p.m. Students should park their cars in the Health Sciences Center parking lots on Saturdays, Sundays or holidays.

City Parking Lots - Those who elect to park in the metered lots without a permit will be required to pay \$2.00 per day per vehicle. Parking along the streets is permitted with certain posted restrictions. (Subject to change by the city)

Motorcycle and secured bicycle parking is available in front of the Health Sciences Center and the Health Professions Center. Annual motorcycle parking permits are available for \$235.00 and semester permits are \$137.50.

# Psychological Counseling Services 1-800-234-5465

In an effort to respond to the needs of our students, the University has developed a student assistance program, which provides confidential psychological counseling services for students and their families. This service is provided by United Behavioral Health and assists students with problems of living (including personal, marital, family, stress, financial and legal issues) that may impair a student's ability to perform adequately in his or her professional training program. The service is accessible 24 hours a day, 365 days per year.

#### Office of Learning Enhancement and Academic Development

The Office of Learning Enhancement and Academic Development (LEAD) is a part of the division of Student Affairs. The LEAD Office's goal is to help each WesternU student successfully complete his or her course of instruction. The Office assists students in many ways. Office counseling personnel interview students in academic difficulty and evaluate their respective approaches to learning, studying, and processing information. The counselor devises and implements methods to solve identified barriers to successful learning and aids individual students during their processes of resolution. Office personnel plan and implement group workshops to enhance learning skills each year for students in each WesternU program. The LEAD Office also prepares and distributes handouts to students on learning styles, time management, group study, processing information, memory, test preparation, group study, anxiety and stress management, listening, note taking, comprehension, and critical reading and thinking. Additional learning enrichment forums, workshops, and the establishment of on-campus reviews for course exams or licensing/certifying examinations are developed by this Office in response to the expressed needs and interest of students.

The LEAD Office administers the Tutorial Assistance Program (TAP), working with tutors, tutees, and the faculty as a team. TAP provides supplemental academic instruction for students in academic difficulty. Competent and sensitive peer tutors, recommended by the faculty from each college, facilitate course content instruction. Students are scheduled individually or in small groups to work with a tutor. The LEAD Office works closely with the tutors and tutees during the tutoring process to ensure that effective tutoring is maintained.

The LEAD Office administers the Summer Medical Sciences Prep Program (SMSPP). Office personnel coordinate, submit and oversee the SMSPP budget, assist the SMSPP Director in program planning, and provide students with individual and group study skills instruction. SMSPP is a five-week program designed to orient in coming, first-year, medical, physician assistant, physical therapy, optometry, dental and podiatry students, to the WesternU campus and community, and to ease adjustment to the demands of their academic environment. It does this by providing an introduction to Gross and Head & Neck Anatomy, Biochemistry/Microbiology, Optics, Adult Medicine, OMM, and Pharmacology taught by WesternU faculty. During the program the LEAD Office endeavors to enhance the students' sense of belonging by working closely with individual students in overcoming environmental, social, cultural, or academic barriers that may interfere with their learning. Students are encouraged to monitor their own personal and social adjustments as well as their academic progress.

The LEAD Office serves all WesternU students. All academic and personal counseling and referrals to other campus support services are completely confidential. Office personnel are available for students on a walk-in basis or appointments can be made by email. The office is located in the Health Sciences Center Building on the First Floor in Room 101. Office hours are 8:00 a.m. to 5:00 p.m., Monday through Friday.

# **University Registrar**

#### **Student Files: Access and Privacy**

The Family Educational Rights and Privacy Act (FERPA) affords eligible students certain rights with respect to their education records. (An "eligible student" under FERPA is a student who is 18 years of age or older or who attends a postsecondary institution.) These rights include:

The right to inspect and review the student's education records within 45 days of the day Western University of Health Sciences receives a request for access. Students should submit to the registrar, dean, head of the academic department, or other appropriate official, a written request that identifies the record(s) they wish to inspect. The University official will make arrangements for access and notify the student of the time and place where the records may be inspected. If the records are not maintained by the University official to whom the request was submitted, that official shall advise the student of the correct official to whom the request should be addressed.

The right to request the amendment of the student's education records that the student believes is inaccurate, misleading, or otherwise in violation of the student's privacy rights under FERPA. A student who wishes to ask the school to amend a record should write the school official responsible for the record, clearly identify the part of the record the student wants changed, and specify why it should be changed. If the school decides not to amend the record as requested, the school will notify the student in writing of the decision and the student's right to a hearing regarding the request for amendment. Additional information regarding the hearing procedures will be provided to the student when notified of the right to a hearing.

The right to provide written consent before the University discloses personally identifiable information (PII) from the student's education records, except to the extent that FERPA authorizes disclosure without consent. The school discloses education records without a student's prior written consent under the FERPA exception for disclosure to school officials with legitimate educational interests. A school official is a person employed by Western University of Health Sciences in an administrative, supervisory, academic, research, or support staff position (including law enforcement unit personnel and health staff); a person serving on the board of trustees; or a student serving on an official committee, such as a disciplinary or grievance committee. A school official also may include a volunteer or contractor outside of Western University of Health Sciences who performs an institutional service of function for which the school would otherwise use its own employees and who is under direct control of the school with respect to the use and maintenance of PII from education records, such as an attorney, auditor, collection agent or a student volunteering to assist another school official in performing his or her tasks. A school official has a legitimate educational interest if the official needs to review an educational record in order to fulfill his or her professional responsibilities to Western University of Health Sciences. Upon request, the school also discloses education records without consent to officials of another school in which the student seeks or intends to enroll.

The right to file a complaint with the U.S. Department of Education concerning alleged failures by Western University of Health Sciences to comply with the requirements of FERPA.

The name and address of the Office that administers FERPA is:

Family Policy Compliance Office U.S. Department of Education 400 Maryland Avenue, SW Washington, DC 20202-4605

#### **Release of Educational Records**

FERPA permits the disclosure of PII from students' education records, without consent of the student, if the disclosure meets certain conditions found in §99.31 of the FERPA regulations. Except for disclosures to school officials, disclosures related to some judicial orders or lawfully ordered subpoenas, disclosures of directory information, and disclosures to the student, §99.32 of FERPA regulations requires the institution to record the disclosure. Eligible students have a right to inspect and review the record of disclosures. A postsecondary institution may disclose PII from the education without obtaining prior written consent of the student ---

To other school officials, including teachers, within the Western University of Health Sciences whom the school has determined to have legitimate educational interests. This includes contractors, consultants, volunteers, or other parties to whom the school has outsourced institutional services or functions, provided that the conditions listed in  $\S99.31(a)(1)(i)(B)(1)$  - (a)(1)(i)(B)(2) are met.  $(\S99.31(a)(1))$ 

To officials of another school where the student seeks or intends to enroll, or where the student is already enrolled if the disclosure is for purposes related to the student's enrollment or transfer, subject to the requirements of §99.34. (§99.31(a)(2))

To authorized representatives of the U. S. Comptroller General, the U. S. Attorney General, the U.S. Secretary of Education, or State and local educational authorities, such as a State postsecondary

authority that is responsible for supervising the university's State-supported education programs. Disclosures under this provision may be made, subject to the requirements of §99.35, in connection with an audit or evaluation of Federal- or State-supported education programs, or for the enforcement of or compliance with Federal legal requirements that relate to those programs. These entities may make further disclosures of PII to outside entities that are designated by them as their authorized representatives to conduct any audit, evaluation, or enforcement or compliance activity on their behalf. (§§99.31(a)(3) and 99.35)

In connection with financial aid for which the student has applied or which the student has received, if the information is necessary to determine eligibility for the aid, determine the amount of the aid, determine the conditions of the aid, or enforce the terms and conditions of the aid. (§99.31(a)(4))

To organizations conducting studies for, or on behalf of, the school, in order to: (a) develop, validate, or administer predictive tests; (b) administer student aid programs; or (c) improve instruction. (§99.31(a)(6))

To accrediting organizations to carry out their accrediting functions. ((§99.31(a)(7))

To parents of an eligible student if the student is a dependent for IRS tax purposes. (§99.31(a)(8))

To comply with a judicial order or lawfully issued subpoena. (§99.31(a)(9))

To appropriate officials in connection with a health or safety emergency, subject to  $\S 99.36. \ (\S 99.31(a)(10))$ 

Information the school has designated as "directory information" under §99.37. (§99.31(a)(11))

To a victim of an alleged perpetrator of a crime of violence or a non-forcible sex offense, subject to the requirements of §99.39. The disclosure may only include the final results of the disciplinary proceeding with respect to that alleged crime or offense, regardless of the finding. (§99.31(a)(13))

To the general public, the final results of a disciplinary proceeding, subject to the requirements of §99.39, if the school determines the student is an alleged perpetrator of a crime of violence or non-forcible sex offense and the student has committed a violation of the school's rules or policies with respect to the allegation made against him or her. (§99.31(a)(14))

To parents of a student regarding the student's violation of any Federal, State, or local law, or of any rule or policy of the school, governing the use or possession of alcohol or a controlled substance if the school determines the student committed a disciplinary violation and the student is under the age of 21. (§99.31(a)(15))

#### **Directory Information**

The Family Educational Rights and Privacy Act (FERPA), a Federal law, requires that Western University of Health Sciences, with certain exceptions, obtain your written consent prior to the disclosure of personally identifiable information from your education records. However, Western University of Health Sciences may disclose appropriately designated "directory information" without written consent, unless you have advised the University to the contrary in accordance with University procedures. The primary purpose of directory information is to allow the Western University of Health Sciences to include this type of information from your education records in certain school publications. Examples include:

- The annual yearbook;
- Dean's List or other recognition lists; and
- Graduation programs.

Under the Family Educational Rights and Privacy Act of 1974, as Amended (FERPA), the following directory information may be made public unless the student desires to withhold any or all of this information. The student's name; local address; permanent address; e-mail address; local telephone number; permanent telephone number; dates of attendance; program of study (college, major, and campus); classification; previous educational agencies/institutions attended; degrees, honors and awards received; and participation in officially recognized activities.

Currently enrolled students wishing to withhold any or all directory information items may do so by completing and returning the Directory Information Waiver form and submitting it to the Office of the Registrar. If a student restricts his/her directory information and leaves the University, the restriction continues until the student removes it by submitting a request in writing to the Office of the Registrar.

#### **Admissions Files**

The Director of Admissions is responsible for maintaining files that contain letters of recommendation for admission to the University, transcripts of work performed at other institutions, required standardized test scores, plus the applicant's supplementary application. The Director of Admissions, Members of the Admissions Committee and the President have access to these files for the purpose of carrying out the admissions function. After an applicant has been admitted and is actually registered, the files are combined with those of the Registrar.

# **Registrar's Files**

The Registrar is responsible for maintaining files that contain official WesternU transcripts and copies of occasional letters written by faculty and administration, along with students' replies. These letters generally concern academic progress, examinations, etc. Members of the faculty and administration have access to the files for use in student advisement. The Registrar also has access to the files to maintain them and to provide authorized data to authorized persons. In addition, the Registrar may also release student information (name, address, etc.) to selected third party agencies working on behalf of the University. A listing of third party agencies currently receiving student information may be accessed by contacting the Registrar's Office at (909) 469-5491.

If any material or document in the educational record of the student includes information on other students, the University will not supply the actual material or document. Instead, only the specific

information contained therein that directly relates to the student seeking access will be provided. In addition, no student may have access to:

- 1. Financial records of parents or any information contained therein, or
- 2. Any confidential recommendations to which the student has properly waived the right of access.

#### **Other Student Files**

Records of students and graduates are maintained by the program in accordance with University rules. The original application and supporting materials are maintained by the Office of the Registrar. In addition, the program maintains an academic profile record for each student, including information related to academic and clinical performance in all phases of the program. Course grades are recorded on the appropriate profile sheet as soon as computed. This file is maintained for department and student use. It is NOT meant to serve as an official record of grades. Final course grades are submitted to the University Registrar and only then become part of the official record/transcripts. Transcripts of the work completed are maintained and may be requested from the University Registrar.

# **Transcripts**

Enrolled students may view their transcript on-line via BanWeb. No verbal grades or class ranks will be given at any time. A grade change report will be generated upon request whenever a grade change occurs. No grade will be changed unless the instructor certifies in writing to the Registrar that an error occurred in computing or recording the grade or that the student has remediated an unsatisfactory grade after being directed to do so by the appropriate College Dean as recommended by the committee in each respective College responsible for student academic progress. All recorded grades remain on the official transcript unless a clerical error occurs. Remediated grades are recorded next to a grade of "U". Only the remediated grade is calculated into the GPA.

A student who drops or is dropped from a course on or before completion of 20% of the course will receive no entry on his/her permanent record. Drops processed after 20% of the course is completed will automatically receive a 'W' (Withdrawal) grade on his/her permanent record (See Tuition Refund Policy for additional information on how the last date of attendance impacts tuition refunds).

Official transcripts may be requested via BanWeb. There is a \$10.00 fee for an official transcript. Official transcripts are mailed directly to the recipient by the University.

Official transcripts bear the signature of the Registrar and the seal of the University. Transcripts will not be provided to students who are delinquent in their financial obligations to the University, including the Library, or to any of its affiliated hospitals or clinics. Transcript requests will be processed within 7-10 business days. If the University has knowledge that a student or graduate is in default on any federal, state, outside agency, institutional loan or service obligation, the University will withhold all official transcripts and letters of recommendation for internships, residencies, employment, staff privileges, specialty certification, and licensing. Remember to allow two weeks for processing of transcript requests. Rush transcripts are available for a \$21 fee for each sent via First Class Mail and a \$25 fee for each sent via Federal Express. Rush transcripts ordered by 5 p.m. will be available for pickup after 9 a.m. the following working day.

To maintain the integrity of academic transcripts, educational institutions certify only academic work completed at that institution. This is the expectation of WesternU when it issues its own official

transcripts, and this is what WesternU respects when official transcripts are entrusted to it during the application process. Therefore, the University will not produce or certify copies of official transcripts from other institutions.

#### **Class Rank**

Student's class ranking, with the exception of MSHS, FNP/MSN and MSPS, may be obtained from the Registrar's Office in writing, with appropriate identification. The class ranking is based on letter grades and/or percentages.

# **Diplomas**

Diplomas will be issued approximately six to eight weeks after the Registrar receives all final grades verifying that a student has completed all academic requirements for a specific program.

### **Student Loan Deferment Processing**

Western University of Health Sciences participates in the National Student Clearinghouse, located in Herndon, Virginia. The University submits a report of students' enrollment status to the Clearinghouse monthly, which in turn supplies verification of enrollment to lending agencies.

A number of lenders and loan servicing organizations that are members of the Clearinghouse participate in a Paperless Deferment Process. With this process, no paper forms need to be completed by either students or schools - the student simply calls his or her servicer to request a deferment. The servicer then posts a deferment to the student's account after the student's verbal order is matched against the Clearinghouse electronic data verifying in-school status.

If a lender needs a deferment form processed, bring it to the Registrar's Office. The Registrar's Office will then forward all deferment forms to the Clearinghouse, which will verify the student's enrollment to the lender. Western University of Health Sciences does not supply this information directly to lending agencies that participate in the National Student Clearinghouse.

If a student has registered late, this information may not be reported until the submission of the next tape. The Clearinghouse requests the student take the following steps if a collection letter has been received:

- 1. Call the lending agency to see if a deferment form was received between the time the Clearinghouse supplied the information and the lending agency sent the collection letter.
- 2. If, after calling the servicer, it still appears that the deferment has not been processed, the student may call the Clearinghouse at (703) 742-7791 and ask for a Student Service Representative. The representative will verify the date on which the deferment form was received by the Clearinghouse, the date the deferment was certified and mailed, the enrollment status that was certified, and where the forms were sent.
- 3. If an emergency exists -- for example, the student is 150 days delinquent and being threatened with default -- the Clearinghouse will intervene on the student's behalf by faxing another enrollment certification to the servicer. Further, it will work with the servicer to ensure that the form is processed on a high-priority basis.

# **University Policies and Procedures**

#### **Non-Discrimination**

The Western University of Health Sciences, in compliance with Titles VI and VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Sections 503 and 504 of the Rehabilitation Act of 1973, and Sections 102 and 302 of the Americans With Disabilities Act of 1990, does not discriminate on the basis of gender, race, color, national origin, religion, handicap or sexual orientation in any of its policies, procedures, or practices. In accordance with sex discrimination laws, the University will not tolerate acts of sexual harassment. In compliance with the Age Discrimination in Employment Act of 1967, Section 402 of the Vietnam Era Veterans Readjustment Act of 1974, and Section 12940 of the State of California Government Code, the University does not discriminate against any employees or applicants for employment on the basis of age, ethnic origin, marital status, sexual orientation, or because of their status as disabled veterans or veterans of the Vietnam Era, or because of medical condition (as defined in Section 12926 of the California Government Code); nor does the University discriminate on the basis of citizenship, within the limits imposed by law. This non-discrimination policy covers admission, access, and service in the University's programs and activities, and application for and treatment in University employment.

#### **Discrimination Complaint Procedure**

Any student believing that he/she has been discriminated against in violation of the above policy of non-discrimination may file a complaint with the Vice President for Enrollment Management and University Student Affairs or her designee. Complaint forms may be obtained from the University Student Affairs office. Retaliation against a person who reports, complains about, or participates in the investigation of alleged discrimination is prohibited. A student who believes that he/she is the victim of sexual harassment should follow the procedures specified in WesternU's Sexual Harassment Policy (See below).

All complaints of discrimination shall be investigated promptly and resolved equitably. The Vice President for Enrollment Management and University Student Affairs will refer the matter to the appropriate College Dean, the Provost/COO, or to Treasurer/Chief Financial Officer, (the "responsible official"), depending upon the nature of the discrimination that is believed to have occurred. The responsible official will investigate the complaint, and make a decision with regard thereto. The responsible official may appoint an *ad hoc* committee to conduct a hearing, and to make recommendations concerning any corrective action to be taken. The responsible official, taking into consideration the recommendations of the ad hoc committee (if applicable), will decide, in writing, what action is appropriate under the circumstances.

If a student is dissatisfied with the decision of the responsible official, he/she may appeal the decision to the President. The appeal shall be made, in writing, within seven working days of the written decision of the responsible official, and shall state any reasons why the person filing the appeal believes that the decision of the responsible official is incorrect. The President may affirm or reverse the decision, modify the action to be taken, or remand the matter for further proceedings. For purposes of action to be taken by WesternU, the decision of the President shall be final. Any person who believes that he/she has been the victim of discrimination is, however, entitled to file a complaint with an applicable state or federal agency at any time during WesternU's proceedings.

#### University Facilities, Resources, and Services for Students with Disabilities

#### **General Policy**

The University endeavors to provide a welcoming and supportive community environment for students with disabilities.

WesternU is committed to the fundamental principles of non-discrimination and accommodation in all of its academic programs as set forth in the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990. These laws establish that students with disabilities may not, on the basis of their disabilities, be excluded from participation in, be denied the benefits of, or otherwise be subjected to discrimination under any program or activity at WesternU.

In that spirit, the University acknowledges its obligations to make reasonable adjustments and accommodations to provide students with disabilities access to its programs in the most integrated setting possible.

#### 1. Programs and Facilities

- a. While the University cannot provide a totally barrier-free environment, it does provide students with disabilities access to its programs and activities. Thus, while not every academic and nonacademic building is fully accessible, sufficient access exists to allow students with disabilities the equal opportunity to participate in the academic and social life of the University.
- b. Although the University endeavors to make its programs accessible to individuals with disabilities, it recognizes that some disabilities may preclude an individual from successfully completing a given academic program. To provide guidance to individuals with disabilities, the University provides a description of what it considers to be the Minimum Technical Standards for Admission and Matriculation to each of its programs. Because it is not possible to address every possible circumstance, these Minimum Technical Standards should be considered as guidelines. A student with a documented disability who believes that a reasonable accommodation would permit him/her to meet the minimum technical standards and complete the program should contact the Accommodations and Resource Center (AARC) of the Harris Family Center for Disability and Health Policy as soon after admission as possible. AARC serves to coordinate disability accommodations and services. If you have questions or would like to schedule an appointment with AARC, please phone at (909) 469-5541. The University will determine whether it is appropriate to modify its Minimum Technical Standards.
- c. As soon after admission to the University as possible, students with disabilities should contact the Learning Enhancement and Academic Development Office, which serves to coordinate disability services and to discuss any reasonable accommodation that may be required. Each case is dealt with on an individual basis.
- d. Since the University is prohibited by law from making pre-admission inquiries regarding disability, the University relies on the voluntary provision of whatever information it needs to make reasonable accommodation for students with disabilities.

#### 2. Resources, Services, and Auxiliary Aids

a. The University provides certain services and reasonable accommodations, the nature and extent of which are based on the Center for Disability Issues and the Health Profession's assessment of individual need to achieve academic success. Those services and accommodations, provided in consultation with the student, are intended to allow qualified students with disabilities to pursue their educational careers in the most equitable and independent fashion possible.

# 3. Accessibility and Construction

a. Western University of Health Sciences, in compliance with sections 503 and 504 of the Rehabilitation Act of 1973, and in compliance with the Americans with Disabilities Act of 1990, does not discriminate on the basis of disability in any of its policies, procedures or practices. It is the policy of the University to provide qualified persons with disabilities with access to its programs in the most integrated setting possible. The following statement on construction, renovation, and alteration flows from the spirit of that non-discrimination principle.

#### 4. Construction of New Buildings and Facilities

- a. New construction will comply with the guidelines and regulations set forth in Section 504, Title 234, and relevant state and local building codes. The primary standards for such construction are derived from the Uniform Federal Accessibility Standards (UFAS, 1984), the Amended Architectural Barriers Act (1984), and the Americans with Disabilities Act of 1990.
- b. The University endeavors to employ the most barrier-free design and materials in new construction to provide superior access to the functions and programs that take place in those new facilities. The University's goal is to ensure full accessibility and usability of its new buildings.

#### 5. Renovation and Alteration of Existing Buildings and Facilities

- a. The renovation and alteration of existing facilities will comply with Section 504 and applicable federal regulations, as well as relevant state and local codes, to enhance program accessibility. The University recognizes that Section 504 does not require structural changes to existing facilities where other methods are effective in achieving overall accessibility to the programs and services of the University.
- b. Any renovation or alteration will, to the maximum extent feasible, be pursued in a way that makes the renovated or altered portion of the building accessible to a student with a disability. However, the design of many existing facilities makes it impractical or prohibitively expensive to renovate or alter them in such a way as to make them barrier-free.

#### **Sexual Harassment**

It is the policy of WesternU that all persons, regardless of their gender, should enjoy freedom from discrimination of any kind. Sexual harassment is a form of sexual discrimination, and WesternU will not tolerate such conduct by any member of the University community.

For purposes of this policy, "sexual harassment" means unwelcome sexual advances, requests for sexual favors, and other verbal, visual, or physical conduct of a sexual nature, made by someone from or in the educational setting, under any of the following circumstances:

- 1. Submission to the conduct is explicitly or implicitly made a term or a condition of an individual's employment, academic status, or progress.
- 2. Submission to or rejection of, the conduct by the individual is used as a basis of employment or academic decisions affecting the individual.
- The conduct has the purpose or effect of having a negative impact upon the individual's work or academic performance, or of creating an intimidating, hostile, or offensive work or educational environment.
- 4. Submission to, or rejection of, the conduct by the individual is used as the basis for any decision affecting the individual regarding benefits and services, honors, programs, or activities available at or through WesternU.
- 5. Creating, transmitting, uploading, or downloading obscene materials not intended for academic use is strictly prohibited.

Examples of sexual harassment include, but are not limited to: pressure, subtle or overt, for sexual favors, accompanied by implied or overt threats concerning one's job, grades, or letters of recommendation; inappropriate display of sexually suggestive objects or pictures; unnecessary touching, pinching, patting or the constant brushing against another's body; use of sexually abusive language (including remarks about a person's clothing, body or bodily movement, or sexual activities).

Any student believing that he/she has experienced sexual harassment should resist such harassment and may file a complaint with the Vice President for Enrollment Management and University Student Affairs, or her designee. Complaint forms may be obtained from the University Student Affairs' office.

To protect all parties involved, WesternU handles sexual harassment complaints as confidentially as the circumstances permit. If the student believes that any official specified in these procedures was involved in any act of sexual harassment, he/she may file a complaint with another appropriate official specified in these procedures. Retaliation against a person who reports, complains about, or participates in the investigations of sexual harassment is prohibited.

All complaints of sexual harassment shall be investigated promptly and resolved equitably. Charges of sexual harassment may be handled through formal procedures, or, with the consent of both the complaining party and the alleged harasser, through informal procedures. Informal resolution of a charge of sexual harassment may take any of the following forms:

a. A meeting among the Vice President for Enrollment Management and University Student Affairs, or her designee, the complainant, and the alleged harasser;

- b. A meeting among the Vice President for Enrollment Management and University Student Affairs, or her designee, and the alleged harasser; or
- c. A recommendation of professional counseling for either principal.

If a formal grievance procedure is requested by either the complainant or the alleged harasser, the Vice President for Enrollment Management and University Student Affairs will refer the matter to an appropriate official of Western University of Health Sciences, as follows:

- a. In the case of an offending student, the complaint will be directed to the appropriate College Dean. The responsible official will investigate the complaint, and may refer the matter to the Student Conduct Committee. In this event, the hearing and appeal procedures applicable to the Student Conduct Committee shall apply.
- b. In all other cases regarding administrators, faculty or staff, the complaint will be made to the Provost/COO, the Treasurer/Chief Financial Officer, or the Director of Human Resources. The responsible official may appoint an ad hoc committee to conduct a hearing, and to make recommendations concerning the appropriate disciplinary action to be taken if the alleged harasser is found to have violated WesternU's policy against sexual harassment. Both the complainant and the alleged harasser will be given notice of, and an opportunity to participate in, any hearing by the ad hoc committee.

Except for matters referred to the Student Conduct Committee, the responsible official, taking into consideration the recommendations of the ad hoc committee (if applicable), will decide, in writing, what action is appropriate under the circumstances. If either the complainant or the alleged harasser is dissatisfied with the decision of the responsible official, he/she may appeal the decision to the President. The appeal shall be made, in writing, within seven working days of the written decision of the responsible official, and shall state any reasons why the person filing the appeal believes that the decision of the responsible official is incorrect. The President may affirm or reverse the decision, modify the action to be taken, or remand the matter for further proceedings. For purposes of action to be taken by WesternU, the decision of the President shall be final. Any person who believes that he/she has been the victim of sexual harassment at WesternU is, however, entitled to file a complaint with an applicable state or federal agency at any time during Western University of Health Sciences' proceedings. The student complainant will receive written notification of the outcome of the results of any committee (Student Conduct or ad hoc) determinations along with the responsible official's decision.

#### **Drug-Free Environment**

WesternU is committed to maintaining a drug-free environment in compliance with applicable laws. The unlawful possession, use, distribution, sale or manufacture of controlled substances is prohibited on the University's campuses or any of its medical facilities. Violation of this policy may result in the appropriate disciplinary action up to and including termination or dismissal.

The illegal use of controlled substances can injure the health of fellow students seriously; adversely impair the performance of their responsibilities; and endanger the safety and well-being of other students and members of the general public. Therefore, the University urges students engaged in the illegal use of controlled substances to seek professional advice and treatment. Any student who has a drug problem is invited to contact the Student Affairs Office anonymously at (909) 469-5341, to obtain

information about available assistance. The WesternU counseling center offers assistance to students. Students are encouraged to check with their private insurance carrier for available programs. For those with WesternU insurance, the name and phone number for the insurance carrier is Ascension Benefits and Insurance Solutions, (800) 537-1777.

No one is immune from state or federal laws regarding the use of drugs. Anyone using drugs runs the risk of legal action and court conviction. Examples of local and state laws are listed below:

- Unlawful possession of a narcotic drug is punishable by imprisonment in the state prison.
- The purchase, possession or consumption of any alcoholic beverage (including beer and wine) by any person under the age of 21 is prohibited.
- It is not permissible to provide alcohol to a person under the age of 21.
- Selling, either directly or indirectly, any alcoholic beverage to anyone, except under the authority of the California alcoholic beverage control license, is prohibited.
- It is a felony to induce another person to take various drugs and "intoxicating agents" with the intent of enabling oneself or the drugged person to commit a felony. The person who induced the other may be a principal in any crime committed.
- It is a misdemeanor for any person found to be under the influence of an intoxicating liquor or drug in a public place and unable to care for his/her own safety or disorderly conduct.

As a condition of employment, an employee of the University, including any work-study students, shall notify his/her supervisor if he/she is convicted of a criminal drug offense occurring in the workplace within five days of the conviction. Failure to report a conviction may be grounds for dismissal. In the event that any such conviction involves an employee working on a federal grant or contract, the University is obligated to notify the granting or contracting federal agency within ten days of receiving notice of the conviction.

Students are required to notify the Vice President for Enrollment Management and University Student Affairs within five days of a conviction if they are convicted of a criminal alcohol or drug offense occurring on the campus. For the purpose of this policy, "campus" includes all experiential sites. Remedial actions and/or sanctions may be applied, up to and including dismissal.

Students who are Pell Grant recipients must report convictions for criminal drug violations, occurring on or off campus, in writing to the Director of Grants and Contracts Service at the U.S. Department of Education within 10 calendar days of such conviction.

This statement is being set in accordance with the Drug-Free Workplace Act of 1988 (Public Law 100-690) and the Drug-Free Schools and Communities Act Amendments of 1989 (Public Law Nos. 101-226, 103 stat 1928 - enacted December 12, 1989). The University will continue its efforts to maintain a drug-free environment by adhering to the above policy and providing drug awareness programs.

#### **Urine Drug Screen Policy**

For all WesternU students, submitting a negative urine drug screen may be a requirement prior to participation in certain clinical education/rotation sites. Failure of the drug test or refusal to cooperate

with any aspect of this policy, or any health system policy on substance abuse may result in an administrative or medical suspension for one year.

All WesternU students must consent to a urine drug screen for any sentinel event. Sentinel events include, but are not limited to: poor academic performance, unprofessional conduct, behaviors that may endanger/intimidate classmates, instructors, staff or any other University employees, a pattern of abnormal or erratic behavior consistent with alcohol or drug abuse, possession of drug paraphernalia, direct observation of drug or alcohol use or possession, or demonstration of physical symptoms of the influence of a drug or alcohol, information of drug use by reliable or credible sources, or information of drug use that is independently corroborated. Refusal to comply with a urine drug screen request from authorized university officials, failing to provide a sample suitable for testing, or attempting to alter or tamper with the specimen will be interpreted as a positive drug screen and may result in an administrative or medical suspension for one year.

The student shall be responsible for paying any and all associated costs of urine drug screening, including necessary retesting for any reason. Lab sites that are NIDA, SAMHA, or HHS certified are the only laboratory sites acceptable.

Test results will be confidential with disclosure of results provided only to the University-designated Medical Review Officer (MRO). Because of the mandate to comply with health system policies, disciplinary actions against students will be imposed for a student with a positive drug screen. Reports are the property of the University and will not be provided to students. They will be kept in a confidential file separate from the student's academic file.

#### **Student Health and Safety**

Matriculants into WesternU's health professions programs must submit evidence that they are in good health and should, therefore, be able to withstand the physical and mental pressures commonly placed upon professional students. All incoming students are required to submit a full medical history as well as the results of a physical examination prior to matriculation.

The nature of health professions education necessarily brings students in close contact with a variety of illnesses and diseases, and the following policy has been established as a protective mechanism for students and patients alike. Students must maintain a health insurance policy for the duration of their education at WesternU. Proof of such coverage is required at the time of each registration, must be active for the entire enrollment period, and must meet University deductible requirements. Student health insurance is available from an outside insurer. Students must maintain continuous coverage, even during non-enrollment periods, while they are attending WesternU. Financial Aid may be available (depending on the student's eligibility) to cover the insurance enrollment fee, but only for periods when the student is actively enrolled in classes. For more information about this policy, please contact the Office of University Student Affairs.

#### **Required Immunizations**

Since students will have some exposure to human and animal patients during their time at WesternU, INCOMING STUDENTS ARE **NOT** ALLOWED TO MATRICULATE UNTIL THEY HAVE SUPPLIED PROOF THAT THEY ARE CURRENT ON THE FOLLOWING IMMUNIZATIONS AND HEALTH SCREENINGS:

 MMR (measles, mumps, rubella) proof of immunization and serologic (blood) titers showing immunity

- Tdap (Tetanus, Diphtheria, Acellular Pertussis) within 10 years
- Hepatitis B proof of completion of 3 vaccines and serologic (blood) titers showing immunity
- Tuberculosis (TB) clearance using PPD (Purified Protein Derivative) in a skin test within the last 6 months
- If student has a history of positive PPD a chest x-ray must be done within the last 6 months along with a completed TB symptoms checklist
- Varicella (chicken pox) proof of completion of the age appropriate immunization series and positive serologic (blood) titers. Note: having the disease does not count as being automatically immune.

Students entering the DVM program must also show proof of completion of the primary rabies vaccination series (a total of 3 vaccines). If your rabies vaccination was given 2 or more years ago, you must provide proof of completing the rabies vaccine series and a serum titer called RFFIT (Rapid Fluorescent Focus Inhibition Test) before you can be cleared to register for classes.

These immunizations/tests may require updating or follow-up serum titers on a more frequent basis prior to beginning clinical training if specified in the affiliation agreement with the clinical training site. Such proof is not required for an individual who submits an affidavit or certificate signed by a physician, duly registered and licensed to practice in the United States, in which it is stated that, in the physician's opinion, the immunization required would be injurious to the health and well-being of the student or any member of his or her family or household. Unless a lifelong condition is specified, the affidavit or certificate is valid for only one year from the date signed by the physician and must be renewed each year for the exclusion to remain in effect.

In order to minimize the risk of an influenza outbreak on campus or in affiliated clinical facilities, all students (both in clinical and non-clinical programs) must receive the annual influenza vaccination (except when medically contraindicated) while matriculating at WesternU. Proof of your receipt of the annual influenza vaccination (or of your physician's documented contraindication) must be submitted to the Student Health Coordinator by December 31<sup>st</sup> of each calendar year.

If the student should have a positive PPD (TB skin test) or chest x-ray, they must be followed up with an appropriate health care provider. A letter from the licensed healthcare provider stating the student was seen, evaluated and determined to not have active pulmonary TB disease is required as part of the TB clearance process. A completed and signed/dated TB symptoms checklist is also required and available online.

#### **Annual Health Clearance Requirements**

All students are required to submit documentation to the Student Health Coordinator on a yearly basis for:

TB clearance

- For those receiving the PPD skin test, it must be done within 365 days of last TB skin test or you will be required to undergo the 2-Step PPD skin test process (takes 14days to complete)
- For those requiring a chest x-ray, you must submit a completed TB symptoms checklist
- Oregon students: if you had the Quantiferon blood test performed, you are required to submit a completed TB symptoms checklist.

# Influenza vaccine

• Must be administered between August 1<sup>st</sup> and December 31<sup>st</sup> of the current academic year.

If you have had an adverse reaction in the past to an influenza vaccination, you must submit a physician's note stating what the reaction is and whether it is contraindicated for you to receive it.

Students who do not comply with these requirements will not be permitted to register or attend classes.

#### **Dress Code/Identification**

Students are required to dress in a professional manner at all times.

During classroom lectures, students are required to wear clothing that is in good repair (no patches). Footwear is required at all times. Dress for skills labs should not be worn outside the laboratory area. Tank tops, halters, scrub suits and headgear (hats/helmets) are not to be worn in the classrooms. Shorts may be worn, but no more than 3" above the knee. Hair, beards, and mustaches must be clean, net, trimmed at all times. Students are expected to conform to the commonly acceptable social standards of personal hygiene.

White clinic jackets must be worn at Honors Day, Awareness Conferences, Health Fairs, and in all clinical settings.

Name pins must be worn at all times on rotations. University identification badges are also provided and must be worn at all times while on campus.

Students must dress professionally throughout the duration of every clinical rotation/assignment unless the preceptor of that rotation/assignment directs otherwise.

Exceptions to the dress code may be requested from the appropriate College Dean.

# **Smoking**

As a graduate university of medical health sciences committed to training and educating health care professionals, we have a responsibility to be a role model for proper health maintenance and prevention. We are concerned about the health and well-being of all individuals who learn and work here, as well as those who visit. Out of respect and loyalty to the University, its mission and its

constituents, smoking is not permitted on campus (except in designated areas) or inside University vehicles. A designated smoking area has been posted to assist in insuring compliance with this policy.

#### Food in Lecture Halls, Laboratories, and Library

Food is not allowed in the lecture halls or laboratories. Drinks in closed containers are permitted. Occasionally, noon-hour lectures or seminars are scheduled in lecture halls. At these times, students are permitted to bring their lunches; however, care must be taken to dispose of all refuse in trash containers after the lecture. The student lounges may be used for eating. Food is allowed on the first floor of the library only.

# Videotaping, Audiotaping, Still Photography and Digitized Note Taking in Laboratories and Lecture

Videotaping, audiotaping, still photography and digitized note taking are not permitted in University laboratories and lecture halls without the express permission of the involved instructor. If a student wishes to utilize one of these recording methods, each student must request permission of the instructor prior to or at the first day of a given lecture series or laboratory class. The Harris Family Center for Disability and Health Policy will obtain permission from the instructor on behalf of any students requiring such approved accommodations prior to the start of a given semester or course, or as soon as possible if a student's disability arises or is declared after the start of a semester or course.

Such materials are only for the personal use of the individual student, and any further duplication, dissemination or retransmission of these materials in any format is prohibited without the expressed written permission of the instructor and the Office of Academic Affairs.

# **Electronic Communications**

Every student of WesternU is provided access to a westernu.edu e-mail address. Most official communications to students will be sent to this e-mail address. It is therefore expected that each student will check their e-mail on a regular basis to keep informed. On the Pomona campus, computer terminals are located on the 1<sup>st</sup> floor of the Health Sciences Center and the Health Professions Center, and on the 1<sup>st</sup>, 2<sup>nd</sup>, and 3<sup>rd</sup> floors of the Health Education Center. Computers for student use are also on the 1<sup>st</sup>, 2<sup>nd</sup>, and 3<sup>rd</sup> floors of the Harriet K. and Philip Pumerantz Library and Learning Resources Center. On the Lebanon campus, computer terminals are available in the student commons on the 1<sup>st</sup> floor.

#### **Network Acceptable Use Policy**

WesternU Computing Resources (WUCR) are intended to support and enhance the mission of the University. This Acceptable Use Policy (AUP) states the rules regarding the use of these technologies. This AUP complements and supplements, rather than replaces, other policies concerning appropriate conduct of employees and students of WesternU. WUCR includes any computer, computer-based network and supporting infrastructure, computer peripheral, operating system, software or any combination thereof, owned by WesternU or under the custody or control of WesternU. This policy also applies to any of the above mentioned items which fall under company and or personal ownership, used in conjunction with any portions of the WesternU Networked infrastructure. In this regard, use of WesternU Computing Resources is granted based on the acceptance of the following rules.

#### Users shall:

a) Be responsible for using these computing resources in an effective, ethical and lawful manner.

- b) Use only those facilities for which they have authorization, whether these facilities are at WesternU or at any other location accessible through a network.
- c) Take all reasonable steps to protect the integrity and privacy of the WUCR including software and data. In particular, users shall not share with others the access codes, account numbers, passwords or other user privileges that have been assigned to them.
- d) Respect the copyrights of the owners of all software and data they use.
- e) Respect the privacy of others. This includes, but is not limited to, respecting the confidentiality of email, files, data and transmissions.
- f) Refrain from using WUCR for any unauthorized or illegal purposes. Such purposes might include destruction or alteration of data owned by others, interference with legitimate access to computing resources or harassment of users of such resources at WesternU or elsewhere, unauthorized disruption of WUCR, attempts to discover or alter passwords or to subvert security systems in WUCR or in any other computing or network facility.
- g) Properly identify themselves in any electronic correspondence and provide valid, traceable identification if required by applications or servers within the WUCR or in establishing connections from the WUCR.
- h) Be responsible for checking their individual WesternU e-mail on a regular basis. WesternU may send official University correspondence to employees and students using their WesternU e-mail address.

The level of privacy granted users does not exceed that of reasonable expectations. System failures or design faults may compromise this privacy, and users should also recognize that authorized WesternU personnel may have access to data and software stored on WUCR while performing routine operations or pursuing system problems. Users should further recognize that, as specified in the relevant policies at WesternU, authorized WesternU personnel have the obligation to take reasonable and appropriate steps to ensure the integrity of the WesternU Computing Resources, and to ensure that these policies are observed.

Individuals are advised that improper use of University resources, as described in this policy, may violate State and/or Federal regulations and subject the University and the individual to legal action. The University will take appropriate, necessary steps to insure its ongoing compliance with all State and Federal laws and protect the University from any legal actions.

WesternU reserves the right to revise, amend, or modify its Acceptable Use Policy at any time and in any manner. Notice of any revision, amendment, or modification will be posted.

Please note: The on-line version of this policy may be updated from time to time. Use the on-line version as the authoritative and current source.

Questions concerning this policy should be directed to the Technical Support Desk. Please call (909) 469-5342, or email techsupport@westernu.edu.

#### **General Academic Policies and Procedures**

The University endeavors to provide an environment in which students may develop into effective health care providers. Freedom of inquiry and expression are essential to a learning environment. Students are encouraged to develop a capacity for critical judgment and engage in an independent search for truth. The responsibility for securing an environment conducive to freedom of inquiry and learning is shared by the students, faculty and administration. As a part of that shared responsibility, the University has adopted Standards of Academic and Professional Conduct.

## **Educational Philosophy**

The educational programs of WesternU are based on the belief that schooling not be allowed to get in the way of education and that the content and substance of the curriculum, as well as the instructional and planning processes used to carry it out, reflect a humanistic approach. In short, the University strives to provide people-oriented programs so that its students become people-centered practitioners.

#### Standards of Academic and Professional Conduct

Complete confidence in the honor and integrity of the health professions student and health care professional is essential. Such confidence depends entirely on the exemplary behavior of the individual health care provider in his or her relations with patients, faculty and colleagues. Strict honesty as a personal way of life should be nurtured during the period of education for professional service.

The student shall conduct all aspects of his or her life with honor and integrity. This includes accountability to oneself and to relationships with fellow students, future colleagues, faculty, and patients who come under the student's care or contribute to his or her training and growth, and members of the general public. This applies to personal conduct that reflects on the student's honesty and integrity in both academic and non-academic settings, whether or not involving a University sponsored activity.

Upon accepting admission to the University, each student subscribes to and pledges complete observance to the Standards of Academic and Professional Conduct as outlined in this Catalog for each academic program. A violation of these standards is an abuse of the trust placed in every student and could lead to suspension or dismissal.

#### Orientation/Registration

Attendance at Orientation is mandatory for all incoming first-year students.

Students will be required to register during the registration dates specified by the Registrar. Assessed tuition and fees and all prior debts must be paid in full on or before registration day each academic year.

Matriculation is subject to satisfactory completion of all academic requirements and payment of all outstanding debts to the University.

The receipt of final transcripts from undergraduate colleges and a physical examination with documentation of required immunizations are additional requirements for incoming students.

All students must show proof of current health insurance coverage at the time of registration. This coverage must be maintained in effect throughout the period of matriculation at Western University of

Health Sciences. If there is no proof of current coverage, a health insurance policy provided by the University from a third party insurer is available.

## Withdrawal from University/Program

Matriculation at the University is a privilege granted in consideration of specified levels of performance and of maintaining the established standards of scholarship and personal and professional conduct. The University reserves the right to require withdrawal at any time it deems necessary to safeguard its standards of scholarship, conduct and orderly operation. The student concedes this right by act of matriculation. See Program Specific sections of this Catalog.

Application for voluntary withdrawal from the University/Program must be made in writing to the appropriate College Dean. Except in rare and special circumstances, the application will be accompanied by a personal interview. Students who do not complete this application for voluntary withdrawal will not be considered for re-admission at a later date. Every effort should be made by the student to assure that no misunderstandings or errors occur in the withdrawal process. Students, who leave the University/Program without notifying the Office of the Dean and the Office of the Registrar, and without completing the established withdrawal procedures within 30 days, will be terminated automatically from the University.

Students who withdraw "in good academic standing" are not assured of re-admission unless it is a part of the final decision and/or agreement made between the appropriate College Dean and the withdrawing student. This final decision and/or agreement must be in writing so that it is clear to all parties involved. Students who are granted re-admission following withdrawal in good academic standing usually re-enter at the beginning of the next academic year and register for all courses scheduled during the academic year of their withdrawal, including those previously completed and passed, unless so stipulated.

Students who withdraw "not in good academic standing" must request re-admission through the University's Admissions Application process unless otherwise stipulated.

#### **Leave of Absence**

A student may request a Leave of Absence with the occurrence of a medical problem, serious personal problems, or health related issues. Students much be in good academic standing to be eligible to apply for a Leave of Absence.

Students requesting a Leave of Absence must apply in writing to the appropriate College Dean or his designee. In the event of a medical problem, the request must be accompanied by a letter from a physician describing the nature of the disability for which the leave is requested and the estimated length of time needed for recovery.

After consultation with the student, the respective College Dean will decide whether or not the leave is to be granted and the conditions under which the student may return to school. A student requesting a leave of absence during or at the end of the academic term must go through the following procedure:

- 1. In writing, request a Leave of Absence from the appropriate College Dean.
- 2. Obtain a Leave of Absence form from the College. After completing the student's portion, meet personally with the appropriate College Dean or designee to discuss the reason for the

leave. After consulting with the appropriate College Dean/designee, the Dean/designee will sign the Leave of Absence form indicating his/her approval to proceed with the remainder of the exit process.

3. Return the signed form to the Registrar, who will sign and date the Leave of Absence form.

Provided the leave of absence is approved, the official date of the leave of absence will be the original date of receipt of the student's request and any tuition charged will be in accordance with the institution's refund policy.

Leaves of absence requested for a full academic year will be for one year only with expected reinstatement at registration for the following year. Leaves of absence requested after registration for any given academic year will be granted for a period not to exceed the number of months remaining until the registration date for the next academic year. During the leave of absence, students are entitled to library privileges with the exception of checking out books, use of the student lounges, and participation in student clubs. It is required that the student maintains a health insurance plan throughout the period of the leave.

A student, who is granted a leave of absence for one year or more, must submit a letter of intent to re-enroll to the appropriate College Dean, at least forty-five days prior to the requested date of return. The letter must also be accompanied by a \$500 tuition deposit. It is the student's responsibility to keep the Registrar informed of any change of address while on a leave of absence.

If the student has not paid 100% of the tuition during the year in which the leave is granted, the balance of the tuition plus any increase of tuition or fees will be payable in the next year of attendance. All appropriate tuition and mandatory fees are due prior to graduation.

Leaves of absence will be limited to a maximum of 2 years.

The term and conditions of any leave will be determined by the appropriate College Dean. In addition, changes in the curriculum or in other university or academic program policies may occur which could have an impact on academic requirements affecting a student's matriculation upon return from a Leave of Absence. Every reasonable attempt will be made to minimize the impact of such changes, and if known at the time that a leave is granted, the student will be informed of these revised requirements as part of the terms and conditions contained in the letter granting a leave of absence. Should these changes occur after a leave has been granted, the student on leave will be informed of these changes and how they may affect the student's future matriculation in writing from the office of the appropriate College Dean.

#### **Academic Advisement**

Students may be assigned a faculty advisor upon matriculation, as per the academic requirements of their specific program (see Program Section of Catalog for specifics). Advisement by a faculty advisor should be viewed by the student as a part of the academic process. If either the student or faculty member does not find the relationship helpful, either is free to seek a change. This request should be made to the appropriate College Dean or designee. It is the student's responsibility to meet periodically with his/her advisor. A student on probation must contact his/her faculty advisor at least once a month.

#### **Attendance and Absences**

Attendance is required at all scheduled instructional periods. Absence from instructional periods for any reason does not relieve the student from responsibility for the material covered during the periods missed.

## **Standards of Professional Conduct: Reporting Alleged Violations**

Upon witnessing a possible professional violation, any member of the academic community should report the incident to the respective College Dean or other appropriate University official. If the conduct involves a particular course of program, the classroom instructor or the clinical training program supervisor should be advised. Depending on the nature of the conduct, an individual witnessing a possible violation may choose to talk to the transgressor on an individual basis to attempt to resolve the problem before reporting it to University officials. The individual receiving the report will dispose of the violation in an appropriate manner. If there appears to be adequate cause, a report should be submitted in writing to the appropriate College Dean. The report should include the name and signature of the individual making the report.

In most circumstances, the College Dean will meet with the student to discuss the nature of the possible violations that have been reported and the actions, if any, the Dean intends to take. The Dean may resolve the matter without convening a hearing before the college's Student Performance Committee, unless the student requests that a hearing be convened. In some circumstances, the College Dean may refer the matter directly to the Student Performance Committee for hearing.

When a matter is referred to the college's Student Performance Committee, the College Dean shall prepare appropriate written charges based on all information reported or known. Any appropriate representative of the University acting with the consent of the Dean may prepare the written charges. The Chair of the Student Performance Committee will notify the student of the time and date of the hearing and shall provide the student with a copy of the written charges.

#### **Student Performance Committee**

Purpose - The College's Student Performance Committee reviews the overall academic progress of each student enrolled in the college and considers violations of the Standards of Professional Conduct when requested by the respective College Dean. These standards and the operation of the college's Student Performance Committee are contained in the appropriate **Program Specific** section of this Catalog.

## **Status of Student Pending Action**

Pending a determination by the appropriate College Dean, the status of the student will not be altered except for reasons of his/her physical and emotional well-being or for reasons relating to the safety of other students and University personnel. Once the College Dean has rendered a decision, the status of the student will not be altered pending determination of a timely appeal by the student, except that the Provost/Chief Operating Officer shall have the discretion and authority to suspend the student or take other action at any time during the appeal process, if consistent with the decision of the College Dean. The University further reserves the right to withhold the award of any degree at any time disciplinary charges are pending against a student.

Right of Appeal - See Student Appeal Process

# Information for Students about Hearings Involving Alleged Violations of the Standards of Professional Conduct

Western University of Health Sciences expects all students to adhere to its standards of professional conduct as published in the University Catalog. Any allegation that a student has violated these standards may be referred to a student conduct/performance committee for investigation.

Because a violation may have serious consequences (which may include dismissal from the University), the University has implemented procedures intended to insure that the student is provided fair notice of any charges, and is afforded a reasonable opportunity to present evidence on his or her behalf. In these proceedings, the student has the following rights and responsibilities:

The student must be notified in writing of the specific charges and the time and date of the hearing where the charges will be considered.

The written charges must notify the student if dismissal from the University may be considered by the Student Performance Committee.

If dismissal is considered, the student may request permission for a mentor to appear at the meeting to assist the student. It is the student's responsibility to make the request to the Chair of the Committee in writing, and to identify the proposed mentor. The Chair will determine whether grant the student's request. However, if the allegations involve charges that may result in criminal charges being brought against the student, the Chair shall authorize a mentor to be present if a proper request has been made. The role of the mentor is to advise the student, and under normal circumstances a mentor is not permitted to ask questions of witnesses or to otherwise directly participate in the hearing.

Any member of the Committee who has a known conflict of interest shall not participate in the proceeding. The student has the responsibility of notifying the Committee if the student believes that any member has a conflict, and the reason for the conflict.

Hearings will be closed to all individuals not directly involved. The Committee may exclude witnesses except during the time they are testifying. It is the responsibility of the Committee, the student and other participants to not disclose information about the proceedings except to individuals with a need to know, or as is necessary for the orderly conduct of the hearing.

The student has the right to ask relevant questions of witnesses, and to present witnesses in his or her own behalf. The student's right to ask questions and present witnesses is subject to the reasonable control of the Committee, which has discretion to limit testimony that is cumulative or not directly relevant to the charges.

The student has the responsibility to testify at the hearing and to answer any questions asked by the Committee.

The Committee may consider affidavits or other written evidence in the proceeding. The student shall be provided with copies of any written evidence that the Committee intends to use at least two days in advance of the hearing, but the student may waive this requirement. The student is also entitled to present affidavits or written evidence provided that the student has provided the Chair with copies at least two days in advance of the hearing.

The student has the responsibility to present all evidence that he or she deems relevant at the scheduled hearing unless such evidence cannot be presented at that time due to circumstances beyond the student's control.

Following the hearing, the Committee will determine whether, based upon the evidence presented, it is more likely than not that the alleged violation of professional conduct has occurred. The student will be informed of the Committee's decision in writing.

If a violation has been found to have occurred, the Committee will convene a second hearing for the purpose of considering recommended sanctions. The student has the right to attend this hearing and to present evidence of any mitigating circumstances that the student believes should be considered. The Committee may consider any prior record of discipline and any other information that is pertinent to recommending sanctions.

The student has the responsibility to inform the Committee as soon as the circumstances permit should there be any deviation from the specified procedures, so as to afford the Committee an opportunity to take appropriate corrective action. The student has the right to waive any procedural requirement, and no deviation shall be grounds for objection unless the student has timely called the error to the attention of the Committee.

The Committee makes its recommendations to the appropriate Dean. The Dean has the authority to accept the recommendations of the Committee, or may make such other decision as he or she deems appropriate under the circumstances.

The student has the right to appeal any decision by the Dean following the procedures specified in the University Catalog.

Additional information about the University's Standards of Professional Conduct and the hearing and appeal process is contained elsewhere in the University's Catalog. Students may also contact Dr. Beverly Guidry, Vice President for Student Affairs, at 909-469-5341 for additional information regarding conduct hearings.

#### **Promotion**

Promotion is defined as progression from one academic year or program phase to the next.

A student will be recommended to the appropriate College Dean for promotion by the respective Student Performance Committee.

A student may not be recommended for progression from one academic year to the next with any outstanding grades of "I", "F", "U", "M", "NP", or "NCR" on his/her academic record or with a yearly grade point average or cumulative percentage score of less than the minimum required for promotion (see appropriate **Program Specific** section of this catalogue).

When considering a student for promotion, his/her professional, ethical, and personal conduct may also be taken into consideration (as described under **Probation a-3**).

A student will be promoted provided that all academic, legal and financial requirements of the University, as stated elsewhere in the *University Catalogue*, have been satisfied.

#### **Satisfactory Academic Progress**

To be eligible for Title IV aid, a student must maintain Satisfactory Academic Progress (SAP). Under the Administration's capability requirements, each college must have established, published and have applied reasonable standards for measuring whether or not students are maintaining SAP

Each college at WesternU has set standards for establishing a reasonable satisfactory academic progress policy for determining whether an otherwise eligible student is making satisfactory academic progress in his or her educational program and may receive assistance under Title IV.

Standards for Satisfactory Academic Progress (as outlined by the Department of Education) are measured by two methods: qualitative, by grade point average (GPA); and quantitative, by pace of completing the requirements as specified and aligned with the maximum time frame permitted to complete the program (please see appropriate **Program Specific** section of this Catalog).

#### **Probation**

Probation is defined as a period of time, specified by the appropriate College Dean, during which the student's progress will be closely monitored by the respective Student Performance Committee and the respective Dean. To monitor a student on probation closely during clinical training, the individual program reserves the right to assign his/her remaining clinical rotations/assignments. A student will be placed on probation for any of the following reasons:

- a) Inadequate academic progress as determined by the specific Student Performance Committee (see appropriate **Program Specific** section of this Catalog).
- b) When directed to repeat a year for academic reasons.
- c) Seriously deficient ethical, professional, or personal conduct.

Professional and personal conduct includes: attendance, cooperation with instructors, interest shown in assigned work, attitude toward fellow students and associates and toward personnel of hospitals, approach to and interaction with patients, as well as personal appearance appropriate to the circumstances.

The terms of probation for ethical, professional, or personal conduct will be specified at the time the student is placed on probation.

When a student is placed on probation, he/she will be notified in writing by the appropriate College Dean and the reasons will be stated. Notification must be sent by Certified Mail or hand-delivered and acknowledged by signatures of the student and the appropriate College Dean or his designee. Copies of the letter will be placed in the student's permanent file and distributed to the Chairman of the Student Performance Committee and the student's Faculty Advisor. The Student Performance Committee will consider when the terms of the academic probation have been satisfied and recommend to the appropriate College Dean that probation can be rescinded.

A student on probation may not serve as an officer of any official University or College club or organization and should not engage in time-consuming extracurricular activities. No student on probation will be permitted to enroll in an elective course.

On-campus students on probation must meet with their faculty advisor at least once each month. Off-campus students on probation must contact their faculty advisor once a month. It is the student's responsibility to contact the faculty advisor to arrange for these meetings.

A student will remain on probation until the program specific minimal acceptable academic standards are met again.

A student will be removed from probation when the specified terms of probation for ethical, professional, or personal conduct are met. The student will be notified in writing.

#### Remediation

Every effort will be made to provide each student ample opportunity to demonstrate competency in each area of the academic program. Students who are required to repeat coursework due to an unsuccessful prior attempt must contact a Financial Aid Counselor with respect to their financial aid eligibility. Please see appropriate **Program Specific** section for remediation policy and procedures.

## **Academic Suspension**

Students who are deemed unable to continue in the curriculum due to inadequate performance and are required to repeat a given academic year or portion thereof will be placed on academic suspension through such time as they can resume their studies by starting the courses the student is required to repeat. Throughout the time the student is academic suspended, he or she is also on academic probation, and remains on academic probation until all coursework has been satisfactorily remediated. A student may not receive financial aid during any time of a suspension.

## **Conduct Suspension**

A conduct suspension is a period of time when a student is barred from matriculation in an academic program as a result of violating the program's Standards of Professional Conduct. The duration of the conduct suspension will be communicated to the student at the time the suspension is imposed, either as a specified period of time or until the student has satisfactorily completed all the terms and conditions imposed to remedy the violation of the program's Standard of Professional Conduct. A student may not receive financial aid during any time of a suspension.

# **Summary Suspension**

Each student is expected to govern his/her conduct with concern for other individuals and for the entire University community. Actions that threaten or endanger, in any way, the personal safety and/or well-being of self or others, or that disrupt or interfere with the orderly operation of the University are cause for immediate disciplinary action.

The President, Provost/COO, or the appropriate College Dean has the authority to summarily suspend a student when the student admits to guilt or when, in the opinion of the President, Provost/COO or appropriate College Dean, such action is appropriate to protect the health or safety of any individual, or to preserve the orderly operation of the University.

When a student is summarily suspended, the student shall be informed, in writing, of the specific charges on which such suspension is based. Such notice shall be delivered personally to the student or mailed by certified mail within forty-eight (48) hours of the imposition of the suspension. Such conduct by a student shall be considered a violation of the Standards of Professional Conduct and suspected violations will be handled by the procedures outlined under Standards of Professional Conduct section of this Catalog.

Appeal of the decision of the respective College Dean can be made to the Provost/COO. Any student who has been summarily suspended may also request, in writing to the appropriate College Dean, a hearing by the Student Performance Committee. Students who are suspended are not entitled to remain in class or on clinical rotations/assignments until a final decision has been rendered, including a final decision on any appeals. A student may not receive financial aid during any time of a suspension.

#### **Dismissal**

The University may dismiss at any time it deems necessary to safeguard its standards of scholarship, conduct and orderly operation. The Student Performance Committee may recommend dismissal of a student for any reason it deems appropriate. Furthermore, conviction of a felony while a matriculant at WesternU may be grounds for dismissal.

Dismissal from a program for reasons of conduct shall include dismissal from the University. If a student is concurrently enrolled in one or more other academic programs of the University, the dismissed student may petition the College Dean of the other academic program(s) to have his/her matriculation maintained in that program, provided that the student's conduct which resulted in his/her dismissal from the academic program does not violate the Standards of Professional and Academic Conduct of any other program the Student is concurrently enrolled.

#### **Student Appeal Process**

The appropriate College Dean shall have the authority to make decisions regarding a student's status in matters of academic suspension, student conduct, academic progression/promotion, and graduation. The decision will be based on input from appropriate sources that may include the following: individual instructors, faculty, and appropriate committees.

Within five (5) working days following written notification to the student of the action of the respective College Dean, the student may appeal the decision in writing to Provost/COO. The appeal request must be accompanied by a narrative explaining the basis for the appeal. The narrative should fully explain the student's situation and substantiate the reason(s) for advocating a reversal of the prior decision of the College Dean. The Provost/COO may grant an appeal only if a claim of (1) bias, (2) the appearance of new, material and documentable evidence that was not available at the time of the College Dean's decision, or (3) procedural error that unfairly affected the decision-making process is substantiated by the Provost/COO. Upon written request from the student, the Provost/COO shall review the case and, within seven (7) working days, shall issue a decision in writing to the student, which may affirm, modify, or reverse the previous action. A copy of that letter shall be sent to the Dean, and other appropriate individuals. The decision of the Provost/COO will be final.

The student may remain in class or on clinical rotations/assignments pending the outcome of appeals, except in cases of summary suspension, and except when the Provost/COO has suspended the student or has otherwise determined that it is inappropriate for the student to remain in class or participate in clinical rotations/assignments, consistent with the decision of the College Dean that is being appealed. While the student may remain in class, his/her change in status will be reported to the National Student Clearinghouse (NSC) in compliance with the US Department of Education regulations. If the student's appeal is granted, the Registrar's Office will immediately notify the NSC of the student's return to active status.

If a student is suspended for any reason, all student financial aid will be withheld until the appeal process is resolved by reinstatement of the student or dismissal of the student. If reinstated, the

financial aid funds can be released to the student. If the student is dismissed, the funds will be returned to the proper agency/lender respectively.

## **Protocol for Input on Matters of Student Concern**

When a student has a personal concern involving a teacher or course that is not of general interest to the class, he/she should speak to the professor directly.

If the concern might involve more of the class, he/she should take the concern to the appropriate class representative (e.g., curriculum representative or class president) so they might sample class opinion to find out the extent of concern.

If, in the opinion of the class representative, the concern is valid, the class representative should bring the matter to the attention of the class professor with the object of resolving it at that level.

If the matter cannot be solved between the class and the professor, it should be taken to the College Dean or designee. If the matter cannot be handled properly by the respective Dean, or if the students feel it was not, it should be taken to the Provost/COO, whose decision shall be final.

**Note**: Grade appeals may not be pursued under this protocol.

## **Legal Limitations on Practice of Health Care**

It is a violation of the law and contrary to the policy of this University for any unlicensed person to attempt to engage in professional practice of health care. Students, therefore, are cautioned to confine such activities to duly licensed and supervised teaching clinics.

## Modification of Academic Policies and Procedures under Extenuating Circumstances

The University reserves the right to modify the particular terms, conditions and deadlines contained within these University-wide and College-specific academic policies and procedures should extenuating circumstances warrant such modification. Such extenuating circumstances include such situations as a major catastrophe which may render either the student or the appropriate academic officer unavailable, serious illness or incapacity of either the student or academic officer which may lead to delay or other inability to follow the policies as present in this catalog, death of an immediate family member of an affected party, or other situations of such similar emergent and grave magnitude. If the student, for reasons outlined above, falls into such a situation that makes him or her unable to comply with the terms and conditions listed in this Catalog, the matter must be reported, preferably in writing, to the appropriate Dean or the Provost/COO, clearly documenting the situation and the need to grant a variance to these policies and procedures as soon as this is feasible. If the University must grant a variance when it finds itself unable to comply with the written policies and procedures in the case of such similar emergent and grave situations, the student will be informed of this need and the proposed alteration as soon as it is feasible to do so.

#### **Background Investigations**

To meet State regulations and hospital accreditation requirements, hospital facilities are requiring students to complete criminal background checks prior to beginning rotations/clinical experiences. Because of this new regulation to assure patient safety, students admitted to programs with clinical training requirements will be required to complete a criminal background check prior to matriculation or as a component of the scheduling of clinical experiences. Certain convictions may prevent students from entering hospital facilities, which may hinder a student's ability to successfully complete his or her

academic program. If a criminal conviction or other relevant sanction is shown on the background check, hospital facilities have discretion as to whether the individual may enter the clinical facility as a nursing student.

Certain convictions may also prevent students from obtaining licensure in the State of California or other states. Applicants and current students are advised to check with the appropriate State(s) licensing boards to determine whether their backgrounds may be a barrier to future licensing. Procedures for obtaining a background investigation will be provided to the student by the appropriate academic program staff.

#### **Tuition and Fees**

Tuition and fees are subject to change without notice upon approval by the Board of Trustees. Mandatory fees for each student are non-refundable. For complete information about tuition and fees, refer to the appropriate section for each program.

#### **Future Tuition Rate Increases**

You can expect that tuition increases will be part of your educational experience at WesternU; however, one should know that the Board of Trustees and the administration of this University strive each year to keep tuition at a reasonable level. While we are committed to quality educational programs, the inevitable increases in operating costs each year make it necessary to adjust tuition accordingly. The administration will communicate tuition rate adjustments as soon as they are determined by the Board of Trustees.

## **Tuition and Mandatory Fees**

#### **Tuition and Fee Payments**

Tuition is assessed in installments, as indicated in the Calendar section for each particular academic program. Depending on the academic program, each required payment corresponds to a "period of enrollment."\* A refund policy for a withdrawal or a leave of absence has been established to address the receipt of private payment and Title IV Student Financial Aid funds (see **Tuition Refund Policy** below).

WesternU charges tuition based on an "academic" year which covers two period of enrollment for most programs. The number of weeks of instructional time during the period of enrollment is measured beginning on the first day of class and/or rotation and ends on the last day of class and/or rotation.

\*Students in the Master of Science in Health Sciences, Master of Science in Physician Assistant Studies, Doctor of Physical Therapy, and in the College of Graduate Nursing programs will pay tuition and fees on a trimester year. Refunds will be based on the trimester.

#### **Audit/Remediation Fees**

The fee charged for auditing or remediating a class will be calculated on a prorata basis.

# Other Fees/Expenses

\$30.00	Registration Late Fee (per business day)
\$30.00	Late Tuition/Fee Payment Fee (per business day)
\$350.00	Graduation Fee
\$470.00	Annual Parking Permit (Auto)
\$25.00	Parking Permit Replacement Fee
\$40.00	Locker Key Replacement Charge
\$10.00	Official Transcript (Each)
\$21.00	Rush Transcript, First Class Mail (Each)
\$25.00	Rush Transcript, Federal Express (Each)
\$10.00	Student ID Replacement Fee
TBD	Breakage Fee (Replacement Cost)
\$60.00	Background Investigation (Estimated Cost)
\$40.00	Drug Screening (Estimated Cost)

#### **Comprehensive Health Plan**

It is mandatory that all WesternU students have a health insurance plan in force at the time of registration. If a student can show valid proof of personal health insurance to the Plan Administrator, with a maximum individual deductible of \$1,000.00 (\$2,000 for family plans), it will not be necessary to purchase any additional insurance. If valid proof of other insurance cannot be shown, the student will automatically be enrolled in the health insurance plan made available by the University. This is described in the health plan brochure provided at the time of registration. Dependent coverage, although not required, is optional at an additional premium (see Health Plan Brochure).

#### **Prepaid Tuition Plan**

The Prepaid Tuition Plan allows for payment of future years' tuition at the current tuition rate. This option will assist in avoiding future tuition increases. The payment must be received at least one year before the start of the next academic year.

Mandatory fees will be charged annually and are not included in the prepayment provisions. For additional information, please contact the Financial Aid Office at (909) 469-5353 or the Bursar's Office at (909) 469-5403.

# **WesternU Tuition Refund Policy**

WesternU has established a refund policy for all students who find it necessary to withdraw from the University. Students who elect to withdraw or take a leave of absence during the academic year must submit prior written notification to the appropriate College Dean according to the procedures specified in this Catalog for their program. WesternU may amend its institutional refund policy at any time. Amendments will become effective for the academic year that follows official notification of the amendment. Any questions concerning WesternU's refund policy should be directed to the Bursar's Office.

# **Calculation of Amount of Eligible Tuition Refund**

The amount of tuition refund for which the student is eligible is computed as follows:

a. If the day the student withdrew was on or before the student completed 60 percent of the enrollment period for which tuition was paid, the percentage refund is computed as one

hundred percent minus the percentage of the enrollment period that has elapsed up to the date of withdrawal.

b. Students who withdraw after completing 60 percent of the enrollment period for which tuition was paid are not entitled to a refund.

## **Determining the Withdrawal Date**

The withdrawal date is:

- a. The date the student begins the withdrawal process prescribed by the respective College;
- b. The date that the student otherwise provided official notification to the respective College of the intent to withdraw; or
- c. The midpoint of the enrollment period for which Student Financial Aid Programs Assistance was disbursed or a later date documented by the respective College, if the student did not begin the withdrawal process or otherwise notify the respective College of the intent to withdraw.

If the College determines that a student did not begin the withdrawal process or otherwise notify the respective College of the intent to withdraw due to illness, accident, grievous personal loss or other circumstances beyond the student's control, the College may determine the appropriate withdrawal date.

For additional information regarding refund policies for student participating in Student Financial Aid Programs, see Financial Aid below.

# **Financial Aid**

Financial aid is not intended to replace the financial responsibility of the student; rather, it is intended to supplement what the family can provide. Students are required to complete the Free Application for Federal Student Aid (FAFSA) each year they are seeking financial aid. The information provided is used to create an analysis of each student's financial ability to contribute toward their educational costs. Students may complete the FAFSA application via the Internet at <a href="www.fafsa.ed.gov">www.fafsa.ed.gov</a>. Students are required to inform WesternU's Financial Aid Office of all financial assistance (including scholarships) they receive.

More detailed information on the various types of scholarships and awards can be found at WesternU's website under "Financial Aid." WesternU reviews and administers all of its programs without discrimination as to race, creed, gender, national origin, or non-disqualifying handicap.

# Financial Aid and the World of Private Philanthropy

Beyond the various federal, state, and other public and commercial funding sources, there is another sector that provides valuable support to WesternU students. It is the world of private philanthropy: those individuals, corporations, and foundations who willingly accept the responsibility of serving as good citizens of the larger society. These benefactors contribute to assisting students in achieving their education goals and, ultimately, to the quality of health care delivered to the public.

#### **Department of Education**

## **Title IV Programs**

## **Federal Financial Aid Program Criteria**

To be eligible for federal financial aid programs, students must be U.S. citizens or permanent residents of the United States, attending at least half-time, and making satisfactory progress toward their degrees. The amount of financial aid awarded by the school can never exceed the educational cost of attendance. Students cannot be in default on any educational loan or owe a refund on any state or federal educational grant. In addition, all male students must have completed U.S. Selective Service registration requirements to qualify.

#### Loss of Subsidized Loan Eligibility for Graduate and Professional Students

The Budget Control Act (BCA) of 2011 (Pub. L. 112-25) was signed into law on August 2, 2011. This Act makes two changes to the William D. Ford Direct Loan Program. Effective for loans made for periods of enrollment (loan periods) beginning on or after July 1, 2012, graduate and professional students are no longer eligible to receive Federal Direct Subsidized Loans (the portion of the loan that the interest does not accrue while the student is enrolled at least half-time). The terms and conditions of Direct Subsidized Loans received by any student for loan periods beginning before July 1, 2012, for either graduate or undergraduate study, are not affected by this change. (Please see the chart below for program specific Stafford loan amount eligibility).

#### **Federal Unsubsidized Stafford Loan**

Federal Unsubsidized Stafford Loans are available to undergraduate and graduate students through the U.S. Department of Education and guaranteed by the federal government with a fixed interest rate of 6.8% (graduate students) and subject to origination fees. Interest begins to accrue as soon as the loan has been disbursed from the lender.

## **Federal PLUS Loan**

Federal PLUS Loans are available to graduate and professional degree students through the U.S. Department of Education guaranteed by the federal government with a fixed interest rate of 7.9% and subject to origination fees. Unlike parent PLUS applicants, graduate and professional degree student PLUS applicants must file a FAFSA. In addition, graduate and professional degree students must have their annual loan maximum eligibility under the Stafford Loan program determined by the school before they apply for a PLUS loan. The Grad Plus loan is a credit based loan. Interest begins to accrue as soon as the loan has been disbursed from the lender.

### Federal Work Study (FWS)

The FWS program provides funds for part-time jobs which allow students to earn money needed to pay for educational expenses. FWS awards are a form of federal financial aid. In order to be eligible students must have completed a current FAFSA, have remaining "unmet need", be a permanent or U.S. citizen, be in good academic standing and be enrolled at least half-time. Currently, all available positions are on campus. Students are encouraged to find positions that provide work experience in their field of study or provide valuable service to the community.

#### **Increased Annual Unsubsidized Loan Limits**

WesternU participated in the Health Education Assistance Loan (HEAL) program before its phase out in 1998. As a result, the school may award the increased unsubsidized amounts to students who are enrolled full-time in a health professions discipline that was eligible under the HEAL program and is accredited by an approved accrediting agency. Because the increased annual unsubsidized Stafford Loan limits are intended to replace funds that would have been available previously under the HEAL program, the annual loan limits for the increased unsubsidized amounts are the same as the HEAL program annual loan limits.

#### **Federal Unsubsidized Annual Loan Limits**

The maximum annual Unsubsidized Stafford loan limits per program are as follows for the 2013/2014 academic year and subject to change:

Doctoral/Professional Programs	Year	Loan Limit
	Year 1	\$47,167.00
Doctor of Dental Medicine (DMD)	Year 2	\$47,167.00
Doctor of Dental Medicine (DIVID)	Year 3	\$47,167.00
	Year 4	\$47,167.00
	Year 1	\$20,500.00
Doctor of Nursing Practice (DNP)	Year 2	\$20,500.00
	Dissertation Phase	N/A
	Year 1	\$42,722.00
Doctor of Ontomotive (OD)	Year 2	\$47,167.00
Doctor of Optometry (OD)	Year 3	\$42,722.00
	Year 4	\$47,167.00
	Year 1	\$44,944.00
Doctor of Octoorathic Madicine (DO)	Year 2	\$42,722.00
Doctor of Osteopathic Medicine (DO)	Year 3	\$47,167.00
	Year 4	\$44,944.00
	Year 1	\$34,389.00
Doctor of Pharmacy (PharmD)	Year 2	\$37,167.00
Doctor of Pharmacy (Pharmb)	Year 3	\$34,389.00
	Year 4	\$37,167.00
Doctor of Physical Therapy (Advanced Standing DPT)	All Years	\$20,500.00
Doctor of Physical Thorony	Year 1	\$20,500.00
Doctor of Physical Therapy (Entry Level DPT)	Year 2	\$20,500.00
(Elitiy Level DF1)	Year 3	\$20,500.00
	Year 1	\$44,944.00
Doctor of Podiatric Medicine (DPM)	Year 2	\$42,722.00
Doctor of Podiatric Medicine (DPM)	Year 3	\$47,167.00
	Year 4	\$47,167.00
	Year 1	\$42,722.00
Doctor of Veterinary Medicine (DVM)	Year 2	\$42,722.00
Doctor of Vetermary Medicine (DVM)	Year 3	\$42,722.00
	Year 4	44,944.00
	Year 1	\$37,167.00
International Post-Baccalaureate Pharmacy (IPBP)	Year 2	\$34,389.00
	Year 3	\$37,167.00

Masters Programs	Year	Loan Limit
Master of Science in Biomedical Sciences (MSBS)	All Years	\$20,500.00
Master of Science in Health Sciences (MSHS)	All Years	\$20,500.00
Master of Science in Medical Sciences (MSMS)	All Years	\$20,500.00
Master of Science in Nursing (ADN-RN-MSN)	All Years	\$20,500.00
Master of Science in Nursing (BSN-MSN)	All Years	\$20,500.00
Master of Science in Nursing (Entry Level)	All Years	\$20,500.00
Master of Science in Nursing/FNP (MSNFNP)	All Years	\$20,500.00
Master of Science in Physician Assistant Studies (MSPA)	All Years	\$20,500.00

Certificate Programs	Year	Loan Limit
Family Nurse Practitioner (FNP)	All Years	\$20,500.00

#### **Aggregate Loan Limits for Subsidized & Unsubsidized Stafford Loans**

A borrower who has reached his or her aggregate borrowing limit may not receive additional loans. Once the loans are repaid, in full or in part, the borrower may apply for additional Stafford loans. Outstanding loans include student loans received while the student completed undergraduate and graduate work. In the case of Consolidation loans, the outstanding amounts of any underlying Stafford loans are counted towards the loan limits.

The total loan debt a student may have outstanding from all Stafford loans differs depending on their academic program. The maximum outstanding total subsidized and unsubsidized Stafford loan debt is \$138,500 for the MBMS, DPT, MSHS, MSMS, MSPA, MSPS, and all Nursing programs, no more than \$65,500 of this aggregate amount may be in the form of subsidized loans.

### **Increased Aggregate Loan Limits, Professional**

The combined subsidized/unsubsidized aggregate loan limit for professional health professions students who are eligible to receive the increased unsubsidized amounts is \$224,000 (not more than \$65,500 of this amount may be in subsidized loans). Programs with this aggregate limit include: DO, IPBP, PharmD, DMD, DPM, DVM and OD programs.

# **Federal Perkins Loan**

Federal Perkins Loans are only available to eligible undergraduate and graduate students and are subject to the availability of funds. The amount awarded varies, depending on financial need and federal allocation to our school. The Perkins undergraduate aggregate is \$20,000, and graduate students have a \$40,000 total aggregate. Perkins loans have a fixed interest rate at five percent.

#### **Satisfactory Academic Progress**

As per federal regulations and institutional policies, financial aid recipients must meet all Satisfactory Academic Progress (SAP) standards as set by each college in order to continue to receive financial aid. SAP is measured at the end of each payment period to ensure that the student is making reasonable academic progress to meet graduation requirements (please see appropriate Program Specific section of this Catalog).

## Financial Aid Warning Policy (Title IV and Title VII)

If a student is not making Satisfactory Academic Progress (SAP) they may be placed on "Financial Aid Warning" status for the next payment period and continue to receive financial aid for that period. Financial Aid is any financial assistance offered to the student for paying for their education, such as loans, scholarships, Federal Work-Study, Grants and stipends (based on the criteria of the stipend). Students who fail to make SAP by the end of that payment period lose financial aid eligibility.

It is the policy of the Financial Aid Office (FAO) that once a student has been placed on academic probation for not meeting SAP standards as defined by the college, the Financial Aid Office will automatically place the student in a Financial Aid Warning status. During the next academic term if the student does not meet SAP standards and the college places the student on academic suspension the student will no longer be eligible for financial aid. If the student appeals the academic suspension and the appeal is approved, financial aid will be reinstated. If the student is directed to audit courses; those courses will **not** be covered by financial aid.

#### Remediation/Repeat Coursework

Students that are required to repeat coursework are encouraged to meet with a financial aid counselor with respect to their financial aid eligibility. Please, also see appropriate Program Specific section for remediation policy and procedures.

# **Department of Health and Human Services**

## **Title VII Program Loans & Scholarships**

#### **Health Professions Student Loan Program (HPSL)**

The Health Professions Student Loan Program (HPSL) provides long-term, five percent interest loan to eligible students in the dental, optometry, podiatric, pharmacy and veterinary medicine programs. HPSL loans are subject to fund availability and yearly allocations.

#### **Loans for Disadvantaged Students (LDS)**

The Loans for Disadvantages Students (LDS) program provides long-term, five percent interest loans to eligible osteopathic medical and pharmacy students from disadvantaged backgrounds. LDS loans are subject to fund availability and yearly allocations.

## **Primary Care Loans (PCL)**

Primary Care Loans (PCL) are available for eligible medical students and subject to availability of funds and yearly allocations. The long-term five percent fixed simple interest loan amounts vary, depending on financial need and federal allocation. Eligibility is determined by the student's independent status. In order to be classified as an independent student you must meet the following criteria:

- At least 24 years of age AND,
- Not listed as a dependent on his/her parent's tax forms within the last three years

Students receiving PCL will only need to practice as a primary care physician for 10 years. After 10 years the student no longer has to practice in primary care even though there is a remaining balance. If

the student pays off the loan before the 10 year commitment the student no longer has to practice as a primary care physician.

# **Nursing Student Loans (NSL)**

Nursing Student Loans (NSL) are used to provide loans to students enrolled in an eligible advanced degree program in nursing (doctoral). It provides long-term, five percent interest loans to eligible full-time or half-time financially needy students. Awarding is subject to availability of funds and yearly allocations.

# **Nursing Faculty Loan Program (NFLP)**

The Nursing Faculty Loan Program (NFLP) is used to provide loans to students enrolled in an eligible advanced degree program in nursing (doctoral). After graduation from the advanced education nursing degree program, loan recipients may cancel up to 85 percent of the NFLP loan over a consecutive 4-year period while serving as full-time nurse faculty at a school of nursing (i.e. baccalaureate or higher degree, associate degree or diploma schools of nursing). Awarding is subject to availability of funds and yearly allocations.

# Scholarship for Disadvantaged Students (SDS)

The Scholarship for Disadvantaged Students (SDS) program provides funds to full-time health profession and nursing students from disadvantaged backgrounds with a demonstrated financial need. A disadvantaged background is defined the U.S. Department of Health and Human Services as follows:

An individual from a disadvantaged background is defined as one who comes from an environment that has inhibited the individual from obtaining the knowledge, skill, and abilities required to enroll in and graduate from a health professions school, or from a program providing education or training in an allied health profession; or comes from a family with an annual income below a level based on low income thresholds according to family size published by the U.S. Bureau of Census, adjusted annually for changes in the Consumer Price Index, and adjusted by the Secretary, HHS, for use in health professions and nursing programs.

Scholarships for Disadvantaged Students (SDS) are subject to fund availability and yearly allocations.

#### **Scholarships with Service Requirements**

## National Health Service Corps Scholarships (NHSC)

This scholarship fully covers tuition, fees, and books while also providing a monthly stipend. The NHSC program is open to osteopathic medical, dental, physician assistant, and family nurse practitioner students. Students must serve in a designated medically underserved area (rural, inner city or Indian health). The scholarships' minimum obligation is two years and a student must be a U.S. citizen. NHSC monthly stipends to the student are counted as a financial aid resource.

## Military Health Professions Scholarships

The Army, Navy and Air Force offer Health Professions Scholarship programs to students for tuition, fees, books and supplies, as well as a monthly stipend. While in school, students are expected to serve forty-five days of active duty per year with pay, when possible. One year of active service as a medical officer (after internship and/or residency) is required for each year of support in the scholarship program, with a minimum requirement of three years. The scholarship is available to all programs with

the exception of, MSBS, MSHS, MSMS, DPT and Master's in PharmD. Military monthly stipends to the student are counted as a financial aid resource.

## **University Administered Scholarships**

## The Dr. Robert E. Corey Memorial Scholarship Fund

The Dr. Robert E. Corey Memorial Scholarship Fund was established in January of 1983 as a memorial to Robert E. Corey, DO. Recipients are selected from the second, third, or fourth year for their commitment to osteopathic medicine, outstanding community service and demonstrated financial need as determined by the institution.

## The Albert Victor and Mary P. Kalt Scholarship Fund

The Albert Victor and Mary P. Kalt Scholarship Fund was established in June of 1977, and is available to osteopathic medical students who express a desire to work in primary care in an underserved/rural area. Students must have a GPA of 3.00 or higher to be eligible.

# The East West Scholarship

The East West Scholarship is available to students of all disciplines who have a minimum GPA of 3.20, demonstrated community service involvement, and demonstrated financial need as determined by the institution.

#### The Academic Excellence Scholarship

The Academic Excellence Scholarship is designated for incoming students and is based on the student's outstanding academic achievements as well as his/her contributions to the community as determined by their application process. Subject to available funding, Western University of Health Sciences will award the scholarship to all academic programs. These scholarships consist of single-year and multiple-year awards provided that the student remains in good academic standing.

# **Emergency Loan Program**

Students in need of an emergency loan should contact a financial aid counselor to discuss their emergency need of funds. Students must complete and return an Emergency Loan Application to the Bursar's Office to apply for the short term loan. This form is available at the Bursar's Office and on the Bursar's Office website.

Students receiving financial aid can use their financial aid award as collateral. The financial aid funds will be automatically applied towards the loan repayment prior to any additional charges. All emergency loans will be repaid from the student's financial aid proceeds or by a personal payment. Emergency loans must be repaid within 90 days, or upon receipt of financial aid funds, whichever occurs first.

All delinquent loans will result in a hold on the student account which will prevent the student from registering for classes or receiving transcripts and/or a diploma. Delinquent loans will also be assessed a late fee of \$10 per month until the emergency loan is repaid. Only one emergency loan will be granted per term.

#### **Veteran's Educational Benefits**

The Registrar's Office will provide certification of enrollment services for veterans and will serve as a direct liaison between our University and the Veterans' Administration regarding underpayment, overpayment, or non-payment of VA educational benefits. Students expecting to collect educational benefits may obtain further information from WesternU's Registrar's Office

(http://www.westernu.edu/registrar-veterans) or Financial Aid Office. As of this publication all programs are eligible. In order to continue collecting benefits, a veteran must be making satisfactory progress towards a degree.

The U.S. Department of Veteran Affairs Education Service provides information on obtaining V.A. benefits. V.A. application forms are available at http://www.gibill.va.gov/. WesternU does not participate in the Yellow Ribbon Program.

# Graduating Teaching Fellows in the Department of Neuromusculoskeletal Medicine/Osteopathic Manipulative Medicine

This Fellowship program in the Department of Neuromusculoskeletal Medicine/Osteopathic Manipulative Medicine of the College of Osteopathic Medicine of the Pacific (COMP) is designed to expand the educational opportunities for osteopathic medical students while they assist in all phases of the department's operation. NMM/OMM Fellows assist in lecturing and teaching practical skills to medical students. In order to participate in the Fellowship program, each student takes five years, instead of four, to complete all of their educational requirements, including hospital and private practice clinical rotations, for the Doctor of Osteopathic Medicine degree. Fellows receive a full tuition/fees waiver their third and fourth years and an annual stipend for the fifth year. Fellows are selected in their second year annually.

# **Tuition Refund Policy**

Western University of Health Sciences has adopted the Department of Education refund policy for all students who find it necessary to withdraw from the University or take a leave of absence during the academic year. It is a universal policy that applies to all students, regardless of their use of financial aid. Students who elect to withdraw or take a leave of absence during the academic year must submit prior written notification to the appropriate Academic Dean according to the procedures specified in the University Catalog. WesternU may amend its institutional refund policy at any time. Amendments will become effective for the academic year that follows official notification of the amendment. Any questions concerning WesternU's refund policy should be directed to the Bursar's Office.

#### **General Requirements**

Federal Student Aid funds are awarded to a student under the assumption the student will attend school for the entire period for which the assistance is awarded. When a student withdraws, the student may no longer be eligible for the full amount of Title IV funds the student was originally scheduled to receive. If a recipient of Federal Student Aid loan funds withdraws from school after beginning attendance, the amount of Federal Student Aid loan assistance earned by the student must be determined. If the amount disbursed to the student is greater than the amount the student earned, unearned funds must be returned. If the amount disbursed to the student is less than the amount the student earned, and for which the student is otherwise eligible, he or she is eligible to receive a post-withdrawal disbursement for the earned aid that was not received.

## **Definition of a Title IV Recipient**

A recipient of loan assistance is a student who has actually received Title IV funds or has met conditions that entitle the student to a late disbursement. If the student never actually began attendance for the payment period or period of enrollment, the refund policy does not apply. Similarly, if a student began attendance, but was not and could not have been disbursed Title IV funds prior to withdrawal, the student is not considered to have been a Title IV recipient and the requirements of this refund policy do not apply.

#### **Title IV Aid Disbursed**

The calculation of earned Federal Student Aid includes all Title IV loan funds that were disbursed or could have been disbursed to a student. This includes the net amount of loan funds from the subsidized and unsubsidized Stafford, Federal Perkins and PLUS loan programs.

A student's Title IV funds are disbursed when the school credits a student's account with the funds or pays a student directly with Title IV funds received from the U.S. Department of Education. A student's aid is deemed as disbursed if it is disbursed as of the date of the institution's determination that the student withdrew.

## Percentage of Title IV Aid Earned

The withdrawal date is used to determine the point in time that the student is considered to have withdrawn so the percentage of the enrollment period completed by the student can be determined. The percentage of Title IV Aid earned is equal to the percentage of the enrollment period completed. If the day the student withdrew occurs on or before the student completed 60 percent of the enrollment period for which the assistance was awarded, the percentage earned is equal to the percentage of the enrollment period that was completed. If the day the student withdrew occurs after the student has completed more than 60 percent of the enrollment period, the percentage earned is 100 percent.

#### Determining a Student's Withdrawal Date at a School that is not Required to Take Attendance

The chart below lists the withdrawal date for the various types of withdrawals, as well as the date of the institution's determination that the student withdrew for each type of withdrawal.

Withdrawal Type	Circumstance	Student's Withdrawal Date <sup>1</sup>	Date of the Institution's  Determination that the Student has Withdrawn
Official Notification	The student begins the school's withdrawal process, or	The date the student begins the school's withdrawal process, or	The student's withdrawal date, or the date of notification, whichever is later.
	The student otherwise provides official notification to the school of intent to withdraw.	The date that the student otherwise provides the notification.	
		(If both circumstances occur, use the earlier withdrawal date.)	

Withdrawal Type	Circumstance	Student's Withdrawal Date <sup>1</sup>	Date of the Institution's  Determination that the Student has Withdrawn
Official Notification Not Provided	Official notification not provided by the student because of circumstances beyond the student's control.	The date that the school determines is related to the circumstance beyond the student's control.	The date that the school becomes aware that the student has ceased attendance. <sup>2</sup>
	All other instances where student withdraws without providing official notification.	The midpoint of the payment period or period of enrollment, as applicable.	
Leave of Absence Related	The student does not return from an approved leave of absence, or  The student takes an unapproved leave of absence	The date that the student began the leave of absence.	The earlier of the dates of the end of the leave of absence or the date the student notifies the school he or she will not be returning to that school.
	a a a a a a a a a a a a a a a a a a a		(In the case of an unapproved absence, the date that the student began the leave of absence.)
Withdrawal After Rescission of Official Notification	The student withdraws after rescinding a previous official notification of withdrawal.	The student's original withdrawal date from the previous official notification.	The date the school becomes aware that the student did not, or will not complete the program period or period of enrollment.

<sup>&</sup>lt;sup>1</sup>In place of the dates listed, a school may always use as a student's withdrawal date the student's last date of attendance at an academically related activity, if the school documents that the activity is academically related and that the student attended the activity.

## Title IV Aid to be Returned

If a student receives more Federal Student Aid than the amount earned, the school, or the student, or both must return the unearned funds in a specific order. The amount of Federal Student Aid to be

<sup>&</sup>lt;sup>2</sup>For a student who withdraws without providing notification to the school, the school must determine the withdrawal date no later than 30 days after the end of the earliest of the (1) payment period or period of enrollment (as appropriate), (2) academic year, or (3) educational program.

returned is determined by subtracting the amount of earned Title IV aid from the amount of Title IV aid that was actually disbursed to the student.

#### Amount of Unearned Title IV Aid due from the School

When a return of Title IV funds is due, the school and the student may both have a responsibility for returning funds. Funds that are not the responsibility of the school to return must be returned by the student. Although these requirements talk in terms of returning funds, a school is not required to actually return its share before the student. Rather, it is the calculation of the amount of assistance the school is responsible for returning to the Title IV accounts that must be performed first. The student's repayment obligation is determined after the school's share is calculated. The school must return the lesser of

- The amount of Title IV funds that the student does not earn; or
- The amount of institutional charges that the student incurred for the payment period or period of enrollment multiplied by the percentage of funds that was not earned.

## Return of Funds by the School: Order of Return of Title IV Funds

A school must return Title IV funds to the programs from which the student received aid during the payment period or period of enrollment as applicable, in the following order, up to the net amount disbursed from each source:

- Unsubsidized Direct Stafford loans
- Subsidized Direct Stafford loans
- Federal Perkins loans
- Direct PLUS loans

#### Time Frame for the Return of Title IV Funds

A school is required to return unearned funds for which it is responsible as soon as possible, but no later than forty-five days from the determination of a student's withdrawal.

## **Repayment of Student Loans**

The student loans that remain outstanding consist of the loans disbursed to the student minus any loans the school repaid. These outstanding loans are repaid in accordance with the terms of the student's promissory notes.

Reference: Federal Student Aid Handbook 2012-2013 Award Year

# **University Calendar**

All colleges at Western University of Health Sciences maintain specific, detailed program calendars. Please consult the appropriate program to determine additional official dates. In addition, students completing clinical experiences or rotations must follow their preceptor's schedule, which may or may not include working on federal holidays.

Thursday, July 4, 2013	Independence Day, No Classes
Monday, July 8, 2013	Classes Resume
July 31, 2013 – August 2, 2013	Orientation Week (Lebanon Campus)
August 3, 2013	Convocation/White Coat Ceremony (Lebanon Campus)
August 5, 2013 – August 9, 2013	Orientation Week (Pomona Campus)
August 10, 2013	Convocation/White Coat Ceremonies (Pomona Campus)
Monday, September 2, 2013	Labor Day, No Classes
Monday, October 14, 2013	Columbus Day, No Classes
Wednesday, November 27, 2013	Thanksgiving Recess Begins (Classes dismiss @ 5:00 p.m.)
Monday, December 2, 2013	Classes Resume
Friday, December 20, 2013	Winter Recess Begins (Classes dismiss @ 5:00 p.m.)
Monday, January 6, 2014	Classes Resume
Monday, January 20, 2014	Martin Luther King Day (No Classes)
Monday, February 17, 2014	President's Day (No Classes)
May 14, 2013 – May 16, 2014	Commencement
Monday, May 26, 2014	Memorial Day (No Classes)

# **College of Allied Health Professions**

# Mission

The College of Allied Health Professions supports the mission of Western University of Health Sciences by providing high quality professional and graduate education. The College utilizes the team approach to develop competent and compassionate professionals who provide service to the community and continually develop their skills, knowledge, and abilities through independent lifelong learning activities.

#### Goals

- 1. To educate an allied health workforce that helps to meet the healthcare and educational needs of the State of California and the west.
- 2. To achieve an environment and culture that supports all members of the College.
- 3. To ensure an environment and culture that empower all persons in the College to maximize their potential as contributing members in the education of students, in research and clinical activities, and in service to the community.

# **Master of Science in Health Sciences Program**

Department of Health Sciences Education

#### Accreditation

Western University of Health Sciences is accredited by the Accrediting Commission for Senior Colleges and Universities of the Western Association of Schools and Colleges (WASC, 895 Atlantic Avenue, Suite 100, Alameda, California, 94501, phone number: 510-748-9001), a regional accrediting body recognized by the Council on Higher Education Accreditation and the U.S. Department of Education.

#### **Mission Statement**

The Department of Health Sciences Education supports Western University of Health Sciences' mission by increasing the availability of health care educators. The department further meets the health care needs of the community by preparing graduate level Community Health Educators.

The Department mission relates to the institutional mission in that health professions educators are integral to the production of humanistic, competent health care providers. The Department further relates to the institutional mission in producing Community Health Educators whose primary role is to enhance and extend the quality of life of our communities.

#### Vision

The Department of Health Sciences Education seeks to become the leader in providing educational programs. Graduates will be experts and leaders in health education, promotion, and delivery, dedicated to fostering the development of future professionals and contributing to the body of knowledge in the health sciences.

# **Goals of the Department of Health Sciences**

The Department of Health Sciences Education provides students with the necessary background and skills in theory and practical application in both clinical and non-clinical settings. In fulfillment of the mission of the University, the Department's goals are to educate students and graduates who:

- 1. Develop, implement and evaluate evidence-based educational programs;
- Create, implement and analyze valid research projects in health professions education and community health education contribute scholarly research to the health sciences and health care professions, and participate as team members with academic health care specialists to further the advancement of health sciences;
- Create, implement and evaluate educational and information materials for a variety of health care professionals and consumers; implement appropriate changes to enhance the access and quality of didactic or community based programs;
- 4. Demonstrate proficiency in oral and written communications of health professions education and community health education concepts and principles;

5. Demonstrate ethical values, humanism, caring and compassion in the health professions education and community health education professions.

# **Basic Competencies (Outcomes)**

The Department of Health Sciences education offers opportunities for students to pursue a Master of Science in Health Sciences degree specializing in Health Professions Education and Community Health Education. Additional emphasis is placed on the acquisition of executive skills and leadership for advancement in the health professions. Course delivery is accomplished within an integrated context of theory and practice that meets the academic requirements for a graduate degree in Health Sciences. The broad interest of the faculty provides special opportunities to cross the boundaries between various health care disciplines and education, depending on the unique scope of the student's experience. Course work is formulated and designed to promote knowledge, values and skills essential for competence in the following four domains:

## 1. Basic statistical analysis and research methodologies:

a. Students will engage in the application of statistics for the purpose of interpreting statistics and scholarly literature. The information extrapolated is intended to prepare the learner to assess and utilize scientific literature accurately and appropriately. Research methodologies are employed with an emphasis on conducting program evaluation.

## 2. Didactic curriculum design, implementation, and evaluation:

a. Students will explore teaching and learning theories and apply them to the development of educational interventions in the traditional health professions classroom environment. Test construction, student learning evaluation, applied teaching strategies for cultural competence and the use of educational modalities and instructional technology are some of the major components of this aspect of the curriculum.

### 3. Clinical and community based program design, implementation, and evaluation:

a. Students will engage in the development, implementation and evaluation of health education interventions and programs in clinical and non-traditional educational environments. The application of skills in various agency structures form the foundation of exploration in networking and collaborating for service learning, program/project funding, marketing, and community outreach. Emphasis is placed on understanding and overcoming barriers to success in clinical teaching settings and community based educational interventions.

## 4. Executive skills for health professions education leaders:

a. Recognizing the challenge in balancing the business of health care delivery and health education with patient centered care and learner centered education, students will apply essential functions of executive management to the traditional, clinical and non-traditional educational environments. Emphasis is placed on the application of leadership theories, strategic planning models, organizational dynamics and structure. Basic competence in fiscal operations, human relations and administrative decision making form the basis for preparing students to function as leaders in academic, clinical and community based health education environments.

# **Objectives and Student Learning Outcomes**

The program is designed to prepare health care professionals with skills in teaching, learning, curriculum design, evaluation of individuals and programs, scholarship, leadership and research. The following illustrates the alignment between student learning outcomes at Western U, the mission of the College of Allied Health Professions, and the MSHS program goals and expected student outcomes

WU Student Learning Outcome	#7 – Conduct evidence-based practice
CAHP Mission	Prepare educators and clinicians to teach and serve in the health professions
MSHS Program Goal 1	Students and graduates will develop, implement, and evaluate evidence-based educational programs.
Expected Outcome	Students will demonstrate proficiency in adult education practices by applying educational theories, models, and concepts in the healthcare setting.
WU Student Learning Outcome	#6 – Life-long learning
CAHP Mission	Promote and model excellence, cost-effectiveness, and innovation in healthcare; participating in health care research, and disseminating health information to the public
MSHS Program Goal 2	Students and graduates will create, implement, and analyze valid research projects in HPE and CHE, contribute scholarly research to the health sciences and health care professions, and participate as team members with academic health care specialists to further the advancement of health sciences.
Expected Outcome	Students will demonstrate the ability to analyze, design, conduct, and defend research data; apply quantitative and qualitative research methods in the evaluation of learning and educational programs; and produce scholarly writing suitable for publication in evidence-based journals.

	#1 – Critical thinking
WU Student Learning Outcome	#2 – Breadth and Depth of Knowledge in the Discipline/Clinical Competence
CAHP Mission	Provide excellent educational programs for allied health professions students including physician assistant and physical therapy students
MSHS Program Goal 3	Students and graduates will create, implement and evaluate educational and informational materials for a variety of healthcare professionals and consumers; implement appropriate change to enhance the access and quality of didactic or community based programs.
Expected Outcome	Students will demonstrate the ability to utilize critical thinking in designing and conducting programs and experiments, analyzing results, and solving problems in HPE and CHE.
WU Student Learning Outcome	#3 – Interpersonal and effective communication #4 – Collaboration skills
CAHP Mission	Promote understanding and appreciation of other health professionals through student and faculty participation in interprofessional education.
MSHS Program Goal 3	Graduates will demonstrate proficiency in oral and written communications of HPE and CHE concepts and principles.
Expected Outcome	Students will demonstrate the ability to communicate effectively in both oral and written forms to create collaborations in an interprofessional environment, and to contribute scholarly publications to the HPE and CHE communities.

WU Student Learning Outcome	#5 – Ethical and moral decision making
	#8 – Humanistic, caring, and compassionate care
CAHP Mission	Providing allied health students with the knowledge and skills basic to the practice of their disciplines, instilling them with the fundamental attitudes of professionalism, teaching, compassionate care, for a diverse patient population
MSHS Program Goal 3	Students and graduates will demonstrate ethical values, humanism, caring and compassion in the HPE and CHE professions.
Expected Outcome	Students identify ethical issues in HPE and CHE, and present a plan of action that demonstrates ethical awareness, humanism, and compassion.

# **Personal Competencies for Admission and Matriculation**

A candidate for admission to the degree program in the Department of Health Sciences Education must have the use of certain sensory and motor functions, or reasonable accommodations thereto; to permit them to carry out the activities described in the sections that follow. Graduates of the program are eligible for employment in a wide variety of academic and clinical teaching programs, using an extensive variety of educational methodologies. As a result, they must have the intellectual ability to learn, integrate, analyze, and synthesize numerical, visual and textual information in the health professions fields. They must also be able to effectively and accurately integrate this information and communicate it to others by both oral and written means.

A candidate for the degree program in the Department of Health Sciences Education ordinarily must have abilities and skills of five general varieties, including: (1) observation; (2) communication; (3) motor; (4) intellectual, conceptual, integrative and quantitative; and (5) behavioral and social. Reasonable accommodations will be provided in appropriate situations. Under all circumstances, however, a candidate should be able to perform in a reasonably independent manner. The following provides an overview of the five general varieties of minimal technical standards that must be met by all successful applicants to the degree programs in the Department of Health Sciences.

- Observation: Candidates and students must have sufficient vision, with or without reasonable accommodations, to be able to observe demonstrations and presentations by faculty and other students.
- Communication: Candidates and students must be able to communicate with students and colleagues. They should be able to hear, with or without reasonable accommodations. Candidates and students must be able to read, write, and speak English.

- 3. Motor: Candidates and students should have sufficient motor function, or reasonable accommodations to enable them to operate commonly used educational equipment (including, but not limited to, computers, videotape players, overhead projectors) and design and produce educational materials. These activities require coordination of both gross and fine muscular movements, equilibrium, and functional use of the senses of touch or vision.
- 4. **Intellectual, Conceptual, Integrative, and Quantitative Abilities:** Students must demonstrate problem-solving skills, which include measurement, calculation, reasoning, analysis, and synthesis. Instructional design and the preparations of a thesis or special project require all of these intellectual abilities.
- 5. **Behavioral and Social Abilities:** Candidates and students must possess the emotional health required for full utilization of the intellectual abilities, the exercise of good judgment, the prompt completions of all responsibilities attendant to an instructor in an educational setting, and the development of mature, sensitive, and effective relationships with students and colleagues. Candidates and students must be able to adapt to changing environments and display flexibility in dealing with students at various educational levels in the health professions. Compassion, integrity, concerns for others, interpersonal skills, interest, and motivation are all personal qualities to be assessed during the admissions and educational processes.

# **Admissions Policies and Procedures**

Students may apply for admission in either the fall or spring semesters. Western University of Health Sciences is committed to admitting competitive, qualified individuals with disabilities.

# **Application Requirements**

Applicants to the Department of Health Sciences Education should possess a strong desire to master the skills germane to the development, implementation and evaluation of health care curricula and community based health education programs. Candidates must meet the following academic requirements:

- A bachelor's degree from a regionally accredited institution is preferred. However, consideration will be given on a case-by-case basis provided that the applicant has completed at least 90 semester hours at the undergraduate level from an accredited college or university. Thirty (30) units must consist of upper division coursework, i.e., junior or senior level courses. Advanced placement, CLEP examination or credit for experiential learning is not recognized by the program as meeting these requirements.
- 2. A 2.70 GPA or above for undergraduate work is required. A GPA of 3.00 or above is required for graduate work.

Applicants must also submit the following materials for application:

- 1. Official transcripts from all undergraduate and graduate institutions attended.
- 2. A Statement of Purpose Preference will be given to applicants who demonstrate professional goals that align with the mission and vision of the Department of Health Sciences.

- Proof of scholarly writing ability demonstrated by a Graduate Record Examination (GRE) score of
  or above on the analytical writing test. The GRE may be waived by applicants with a GPA of 3.00
  or higher. For questions regarding the GRE requirement, please contact the Department of
  Health Sciences Education at (909) 469-5397.
- 4. International applicants are required to take the Test of English as a Foreign Language (TOEFL) exam. For information, please consult the TOEFL services website at: http://www.ets.org/toefl.
- 5. Three letters of recommendation from academic of professional affiliates.
- 6. Current Curriculum Vitae.
- 7. Completed application form and a \$35.00 nonrefundable application fee.

#### **Application Procedures and Deadlines**

Students are advised to submit application materials as early as possible prior to the semester during which they wish to begin their program of studies. Deadline for receipt of application materials is **no** *later than 60 days prior to the first day of classes* for each semester. Upon receipt of all application materials, the file is transferred to the Department of Health Sciences for review by the faculty. Applications for the fall term become available January 1<sup>st</sup> and are due by May 31<sup>st</sup> of the calendar year in which the student plans to enter. Applications for the summer term become available June 1<sup>st</sup> and are due by October 31<sup>st</sup> of the calendar year in which the student plans to enter.

To request an informational brochure, contact the admissions office at

Office of Admissions
Western University of Health Sciences
309 E. 2nd Street
Pomona, CA 91766
(909) 469-5336
http://prospective.westernu.edu/health-sciences/apply-3/

# **International Students**

It is highly recommended that international applicants apply as early as possible to allow time to apply for an international student visa, which is required for study in the U.S. Allow at least two weeks for airmail to reach us. General questions about visas, academic documentation, or legal issues related to studying in the U.S. should be directed to the Director of International Student Services at (909) 469-5542.

#### **Transfer of Credits**

The maximum number of graduate level units that may be transferred from another regionally accredited institution is six semester units. Only graduate credit relevant to the Master of Science in Health Sciences Education degree concentrations at Western University of Health Sciences, which has been completed within the last five years, may be applied toward completion of the Master of Science degree. To be considered for transfer credit, the course must have been taken after the award of a bachelor's degree and be eligible for graduate studies credit at the issuing institution. The student must have received a grade B or above in the course. An official transcript and a course description should be

submitted to the Chair of the Department of Health Sciences for consideration of the faculty. The Department of Health Sciences faculty will determine whether courses undertaken at other institutions qualify for transfer. No transfer credit will be given for HSCI 5999.

## **Continuing Education and Non-Degree Students**

An applicant who does not wish to pursue a master's degree in health sciences at Western University of Health Sciences at the present time, but who wishes to engage in graduate study for (a) personal development, (b) continuing education, (c) specialty certification requirements or (d) other professional development needs, may consider enrollment as a non-degree seeking student. Tuition is assessed at the published rate. Applicants must contact the Department of Health Sciences to request admission as a non-degree seeking student. A completed application and Statement of Purpose detailing the reasons for attending courses is required.

Admission as a non-degree student does not assure acceptance as a degree candidate should the student at a later time wish to change enrollment status. A maximum of nine (9) semester units may be completed while matriculating in a non-degree status. Should the student wish to change enrollment status, the usual admission procedures must be followed. Questions about transferring from non-degree to degree status should be directed to the Chairperson, Department of Health Sciences Education.

#### Readmission

Graduate students who have not been enrolled for more than one calendar year must submit a new application form and fee. The application will be assessed according to the current admissions policies, and students will be required to fulfill program requirements in place at the time of readmission.

#### Teaching Fellows in the College of Osteopathic Medicine of the Pacific

Students in the College of Osteopathic Medicine of the Pacific who elect to participate in the Health Professions Education and Research in Osteopathic Medicine degree track for teaching fellows must complete all of the usual application processes. Teaching fellows enrolled in COMP should refer to the curriculum specifications under Academic Program, below.

#### Students in the College of Podiatric Medicine

Students in the College of Podiatric Medicine (CPM) who elect to participate in the Health Professions Education and Research in Podiatric Medicine track must be approved by the CPM for admission to the track and complete all of the required MSHS degree program application processes. Podiatric students should refer to the curriculum specifications under Academic Program below.

## Registration

All MSHS students are required to register by the registration deadlines specified by the University Registrar. Registration dates are posted at: <a href="http://www.westernu.edu/registrar-online-information">http://www.westernu.edu/registrar-online-information</a>. Failure to register by the deadline may be grounds for administrative withdrawal. All students registering after the posted deadline will be assessed a \$30.00 per business day late fee.

Prior to each semester, a class schedule is distributed to students by the Registrar. All candidates for the MSHS degree are required to register on-line. Advisement is available from the Department Chair and faculty in order to promote greater efficiency in the registration and enrollment process. Incoming students must meet with an academic advisor prior to enrollment.

#### **Continuous Registration**

Students are required to maintain continuous registration until all requirements for the degree have been met, including, HSCI 5999 Thesis/Special Project. Students not enrolled in coursework or culminating options during the fall or spring semesters are required to complete Continuous Registration and pay an administrative fee of \$50.00. Students are responsible for contacting the Office of Financial Aid to verify the minimum enrollment required by their funding source.

#### Add, Drop and Withdrawal

- 1. Add: In order to add a course, the student must attend class at the beginning of the semester and obtain the permission of the course instructor. The faculty reserves the right to refuse the addition of a course in the event that the course is full or if the student has not been attending class. Students adding a course must submit a Change of Registration/Add-Drop Form on-line or to the Department of Health Sciences no later than the end of the first week of class. The add period closes at 5:00 PM on Friday of the first week of the semester.
- 2. **Drop:** Students are responsible for observing the drop deadline published each semester in order to drop a course without it being recorded on the permanent transcript. Following the close of the drop period, a student may withdraw from a course and the action will be reflected on the transcript.
- **3. Withdrawal:** Withdrawal from a course (not the program) requires completion and submission of the appropriate withdrawal form. Withdrawal from a course after the third week of classes will result in a W being placed on the transcript. Students who neglect to complete the withdrawal form will receive a grade of U for the course.

#### **Course Load**

Students in the Master of Science in Health Sciences program are responsible for contacting the Office of Financial Aid to determine full-time equivalent enrollment requirements for their funding source. Due to the rigor of graduate work, all students must receive permission from the Department Chair before enrolling in more than 9 units during any one semester.

# **Full-Time/Part-Time Status**

Students enrolled in at least 6 or more units of MSHS coursework are considered full-time. Student enrolled in 3-6 units of MSHS coursework are considered part-time.

#### **Time Limits**

It is preferred that all requirement for the degree be completed in three (3) academic years. In the event of extenuating circumstances, students may take as much as five (5) years from the date of initial registration to complete the MSHS degree. Extensions of this time limit may be granted through petition to the faculty.

#### **Tuition and Fees**

By action of the Board of Trustees, MSHS tuition and fees for the 2013-2014 academic year (subject to change) are as follows:

\$556.00	Tuition, per credit our
\$20.00	Student Body Fee (Assessed both fall and spring)
Other Fees and Expenses	
\$35.00	Application Fee
·	• •
\$30.00	Student-length white coat with CAHP arm patch
\$13.00	Name badge, to be worn on white coat
\$500.00 - \$800.00	Course materials, computer software, required texts
\$556.00	HSCI 5999A – Special Project/Continuation Fee
\$50.00	Continuous Registration Fee
\$30.00	Registration Late Fee (per business day)
\$350.00	Graduation Fee
\$470.00	Annual Parking Permit (Auto)
\$25.00	Parking Permit Replacement Fee
\$40.00	Locker Key Replacement Charge
\$10.00	Official Transcript (Each)
\$21.00	Rush Transcript, First Class Mail (Each)
\$25.00	Rush Transcript, Federal Express (Each)
\$10.00	Student ID Replacement Fee
TBD	Breakage Fee (Replacement Cost)

# **Computer-related Costs**

When calculating costs, students must also include the costs, if any, associated with the following personal computer/laptop requirements: (a) Microsoft Office Suite (including Word, Excel, and PowerPoint). Mac users should have a comparable productivity suite, such as iWorks, (b) high-speed internet service, and (c) Windows Moviemaker (included on most PC computers) or iMovie for Mac computers).

## **Academic Policies and Procedures**

# **Student Rights and Responsibilities**

It is the responsibility of the student to be familiar with the contents of the catalog and to observe all policies and procedures relative to the completion of requirements for the graduate degree that were in effect at the time of initial enrollment in the Department of Health Sciences Education. A student may opt to complete the program of study and degree requirements described in the catalog at the time of his or her graduation, provided all revised policies of the later catalog are followed.

#### Communication

All students will be assigned an email account by the Office of Student Affairs. The WU email address is the primary means of communication utilized by the University and the MSHS program. Students are required to check their email accounts daily. The WU communication policy requires that all email

messages receive a response within 48 hours. Students are required to keep the Registrar informed of their current address and telephone number by updating their information online.

#### **Attendance**

Course instructors reserve the right to determine the class attendance policy. The course instructor may drop a student for non-attendance at the first class meeting, or in the event of habitual absenteeism, or non- participation in instructional activities. Many courses include participation as part of the overall grading of student performance. All students are also required to attend the following events:

- 1. Orientation in early August of the first year of the program, usually spanning from Wednesday to Friday for fall term admits. Orientation in December for spring term admits.
- Convocation and White Coat ceremonies on Saturday before the start of the fall semester of the first year of the program.
- 3. The first session of every course taken throughout the entire program. (Students in on-line courses must log into their course on the first day of the semester).
- 4. The Comprehensive Examination to be scheduled by the student upon completion of the coursework or approval of the faculty.
- 5. The oral defense of the five-chapter paper is to be scheduled by the student upon approval of the faculty.
- 6. Commencement exercises, usually held on a week day in the month of May.

### **Declaration of Academic Track of Study**

Students must elect their track of study within the MSHS degree program per the following schedule:

- 1. **Full-time Students:** By the end of the Drop deadline in the second semester of full time enrollment.
- 2. Part-time Students: Upon completion of 9 semester units in Core Block I.

Forms may be accessed via Blackboard on the MSHS Electronic Student Center and are to be submitted to the Department for approval. Students must complete a total of 6 units within their selected track. Students may elect to change tracks; however these required units are non-transferrable between the tracks. Students who elect to complete the required courses for both the HPE and CHE tracks are not required to complete two culminating options or comprehensive examinations. Students completing both track requirements will select a focus from either track for the culminating option work and the comprehensive examination. The MS degree will not be conferred until the requirements for both tracks are completed.

# **Advancement to Candidacy**

All students must file an Application for Advancement to Candidacy upon completion of 24 semester units, and no later than one semester prior to the completion of the degree requirements. The Master of Science in Health Sciences degree is awarded following satisfactory completion of all degree requirements. Names of candidates for graduation are presented to the Student Progress Committee,

the Dean of The College of Allied Health Professions, and to the Western University of Health Sciences Board of Trustees for approval.

# Graduation

A student will be recommended for the Master of Science in Health Sciences Degree provided he/she:

- Is not on probation and has completed all prescribed academic and clinical requirements with a cumulative grade point average of above 3.00 and has no outstanding grade of "I," "NCR," or "U".
- 2. Has an approved Advancement to Candidacy application on file.
- 3. Has passed the Comprehensive Examination.
- 4. Has successfully completed and defended their Thesis/Special project.
- 5. Has demonstrated no serious deficiencies in ethical, professional, or personal conduct, as defined in Probation guidelines, which would make it inappropriate to award the degree of Master of Science in Health Sciences degree.
- 6. Has complied with all the legal and financial requirements of the University as stated in the University Catalog.
- 7. Has attended in person and participated in the Commencement ceremony at which time the Master of Science in Health Sciences degree is conferred. Unless special permission has been granted by the Dean, each student must participate in their respective commencement ceremony. If the Dean grants special permission for excusal from commencement, the graduate may be required to present themselves to the Dean or their designee at another specified date to take their profession's oath before their diploma will be released. Requests for excusal will only be granted for extenuating circumstances, such as a prior military commitment.

Students may participate in commencement activities provided they will complete all requirements of the program by December 31<sup>st</sup> of that calendar year. No student will receive his or her degree until the student has completed all requirements for graduation. Degrees will be dated as appropriate to completion date.

# **Standards of Academic Progress**

Students whose performance falls below the minimum acceptable standards for any area of study will be notified of such deficiency by the instructor of the course or the Department Chair as soon as evidence of such sub-standard performance is available. Students whose performance is considered unacceptable as a result of not meeting the minimum requirements, or who are not able to bring their performance to the minimum standard within the allotted time in the academic term will be placed on probation. The duration and conditions of the probationary period will be determined by the Student Performance Committee. The Committee may recommend remedial study or repetition of a unit of study, resulting in extending the length of the program. (See section on Probation in the General Academic Policies and Procedures section in the Overview section of the University Catalog).

#### **Academic Standing**

An overall grade point average of 3.00 (B) must be maintained during graduate work undertaken at Western University of Health Sciences in order to qualify for advancement to candidacy. Any student whose grade point average falls below a 3.00 average will be placed on probation. A 2.00 (C) grade earned in any class may be applied toward graduation only if the overall grade point average continues at a minimum 3.00 (B). Any grade below a 2.00 (C) may not be applied toward graduation. Students who are on probation are not in good academic standing and may not advance to Candidacy, register for culminating options courses, participate in commencement, or schedule an oral defense or comprehensive examination without the written approval of the Department Chair.

# **Reasonable Academic Progress**

All students are expected to make reasonable progress each year toward the degree objective. Full-time graduate students are considered to be making reasonable academic progress when they maintain an overall GPA of at least 3.0 and complete 12 semester hours during the academic year. Both part-time and full-time students must complete the graduation requirements within the time limits described under Graduation Requirements. For part-time students, reasonable academic progress will be determined by the faculty on an annual basis upon consultation with the student.

# **Thesis/Special Project Continuation**

In the event that a student requires additional time to complete the thesis/special project coursework during either Part I or Part II, s/he will continue their work under the direction of the faculty. Should the student require more than two (2) semesters of continuation, the faculty will assess the work to date for reasonable progress. In the event that reasonable progress is not evident by the end of three (3) semesters, the student may be recommended for dismissal for failing to make reasonable progress toward degree completion. Registration in Thesis/Special Project Continuation is not required during the summer term however students will continue to work toward the completion of the requirements online.

#### **Probation**

Probation is defined as a period of time specified by the Dean of the College of Allied Health Professions during which the student's progress will be closely monitored by (a) the Student Performance Committee, (b) program faculty, and c) the department chairperson. A student will be recommended for probation and may be asked to appear at a Student Academic Progress Committee (SPC) meeting for any of the following reasons:

- 1. Immediately upon receipt of a course grade of U in any course.
- 2. A course or semester grade point average below 3.00.
- 3. A cumulative grade point average less than 3.00.
- 4. Seriously deficient ethical, professional or academic reasons.

The MSHS Chairperson will render a written recommendation or invoke the College Conduct Committee to render a recommendation to the Dean of the College of Allied Health Professions regarding any student whose professional or personal conduct is deemed unsatisfactory. Professional and personal conduct includes, but is not limited to, (a) attendance, (b) cooperation with faculty, (c) interest shown in assigned work, (d) attitude towards fellow students and associates or toward personnel of the University or its affiliate organizations, (e) approach to and interaction with patients,

research subjects and all other colleagues, as well as (f) personal appearance appropriate to the circumstances. The terms of probation for ethical, professional or personal misconduct will be specified at the time the student is placed on probation.

When a student is recommended for probation, s/he will be notified in writing by the MSHS program and the reasons will be stated. The written notification will be sent via mail, email or hand-delivered. A copy of the letter will be placed in the student's permanent file, and a copy sent to the Chairperson of the Student Academic Performance Committee (SPC). SPC will determine the final terms and conditions of probation.

A student on probation may not serve as an officer of any official University club or organization and shall not engage in time-consuming extra-curricular activities. A MSHS student on probation may not participate in service learning projects at affiliate organizations or facilities in which there is not direct supervision by MSHS faculty.

Students are removed from probation under the following conditions:

- 1. After one semester provided s/he has regained both a semester and cumulative GPA of at least 3.00
- 2. When all U grades have been satisfactorily remediated.
- 3. When the specified terms of probation for ethical, professional or personal conduct are met.

For information concerning the handling of infractions to the standards of professional conduct, the function of the Student Performance Committee, the status of a student with an action pending, academic suspension, conduct suspension, summary suspension, dismissal and the student appeals process, all MSHS students are referred to the **General Academic Policies and Procedures** section of the University catalog.

# Financial Aid Warning Policy (Title IV and Title VII)

If a student is not making Satisfactory Academic Progress (SAP) they may be placed on Financial Aid Warning status for the next payment period and continue to receive financial aid for that period. Financial Aid is any financial assistance offered to the student for paying for their education, such as loans, scholarships, Federal Work-Study, grants and stipends (judged on the criteria of the stipend). Students who fail to make SAP by the end of the payment period lose Financial Aid eligibility.

It is the policy of the Financial Aid Office (FAO) that once a student has been placed on academic probation for not meeting SAP standards as defined by the college, the FAO will automatically place the student in a Financial Aid Warning status. During the next academic term, if the student does not meet SAP standards and the college places the student on academic suspension, the student will no longer be eligible for financial aid. If the student appeals the academic suspension and the appeal is approved, financial aid will be reinstated. If the student is directed to audit courses, those courses will **not** be covered by financial aid.

#### **Tutorial Assistance Program**

A Tutorial Assistance Program (TAP) has been established to assist students experiencing academic difficulty. Students may be required to participate in the TAP. Students may also self-identify for a

referral to TAP for voluntary participation. The tutors will be chosen on the recommendation of the faculty in each discipline. For assistance, contact the Learning Enhancement and Academic Development Office.

#### Remediation

Every effort will be made to give each student ample opportunity to demonstrate proficiency in each area of the academic program. Remediation is to be regarded as a privilege that must be earned through active participation in the educational program as demonstrated by regular attendance, individual initiative, and utilization of available resources.

If a student receives a grade totaling less than 3.00 for any course or has a semester or cumulative GPA less than 3.00, the student will be reviewed by the MSHS faculty who will make a recommendation for remediation to the Student Performance Committee (SPC). Course scores that fall between 65% and 69% meet the criteria for remediation. Course scores below 65% are not eligible for remediation and the course must be repeated. Upon review, the SPC renders the final approval allowing a student to remediate unsatisfactory performance.

In reviewing the student's academic deficiencies, the following guidelines shall be used:

- 1. Educational objectives underlie remedial teaching, and evaluation should be the same as the educational objectives that underlie regular courses in the curriculum. Where deemed appropriate, the SPC, following consultation with the MSHS faculty, may recommend one or a combination of the following options:
  - a. Take a comprehensive examination.
  - b. Complete special projects or studies in the deficient area(s)
  - c. Repeat the course (Students repeating a course(s) will be charged full tuition for the course).
  - d. Dismissal from the university.
- 2. The grade achieved by remediation will be the grade recorded EXCEPT that the highest grade a student may earn on options (a) or (b) is a grade of B. The grade achieved by remediation will be recorded on the transcript next to the original grade.
- 3. The grade achieved by remediation of a course will be reviewed critically by the SPC. Failure to earn at least a B or CR grade may result in dismissal from the University or repeating the course.
- 4. Decisions regarding remediation will be made on an individual basis after considering all pertinent circumstances in each case. The SPC will base its recommendation on the student's academic record and considerations based upon the MSHS faculty recommendation and the student consultation.
- 5. Any student who is required to remediate a course or a portion of a course will be notified in writing at least two weeks prior to the date of remediation (or within two weeks of the close

of the academic year, whichever comes first). Notification will be by mail, email or handdelivered to the student.

#### **Dismissal Recommendations**

A student may be subject to dismissal from the MSHS program for substandard academic or professional performance, as follows:

- 1. A student who earns two or more unacceptable grades (U or NCR), regardless of prior successful remediation of an unacceptable grade.
- 2. Attaining a semester GPA below 3.0 where remediation of a course is not an option. c). Violating the terms of probation.
- 3. Any event that could result in either academic or professional probation for a student currently on academic or professional probation.
- 4. Failure to successfully pass a course remediation exam as directed by the Dean or the Dean's designee.
- 5. Lack of professional attributes considered appropriate for continuance in the program and profession.

The Department Chairperson will draft a recommendation for dismissal to the SPC based on the advice of the MSHS faculty. The Chairperson of the SPC will invite the student to address the Committee. Thereafter, the SPC will formulate a recommendation to the Dean of the College of Allied Health Professions who will render the final decision.

# **Student Conduct Committee**

The College of Allied Health Professions (CAHP) Student Conduct Committee (SCC) shall consist of three elected CAHP faculty members, one appointed faculty member from outside the CAHP, and as exofficio non-voting members, the Vice President of Student Affairs/designee and the University legal counsel. The chair of the committee is elected by the members and the committee meets at the call of the chair. The term of membership is three years with staggered terms. The committee is charged to set the Standards of Professional Conduct and to investigate violation(s) of professional conduct.

#### **Standards of Professional Conduct**

Upon accepting admission to the University, each student agrees to abide by basic standards of academic integrity, professional and ethical behavior. The student is responsible to read and abide by the University Student Catalog.

#### **Violations of Professional Standards**

The standards for student professional conduct require honesty and accountability in the educational process of professional development. Alleged violation(s) include, but are not limited to:

- Academic dishonesty
- Unprofessional conduct
- Illegal acts

Failure to comply with University, College, and Department regulations

# **Reporting and Processing Procedures**

- 1. Upon witnessing or becoming aware of violation(s) of professional conduct, a report will be generated and turned into the department chair. The report will include the following information:
  - a. Name and signature of the individual making the report, and date, time, and place of alleged violation(s)
  - b. Name of the accused student
  - c. Alleged violation(s)
- 2. If the conduct involves a particular course or clinical experience, the classroom instructor, clinical instructor/preceptor or clinical coordinator will advise the department chair.
- 3. The department chair will meet with the student, the instructor or clinical coordinator, and/or the student's faculty advisor, individually or in a group, to discuss the nature of the alleged violation(s) that have been reported and the actions, if any that the Department Chair intends to take. The Department Chair may resolve minor infractions or refer the matter to the Dean.
  - a. The Department Chair gives written notification of the violation(s), including date, and involved student's name, and resolution to the involved student, with copies to the SCC and to the Dean within five business days.
  - b. The Department Chair also places a copy of the notification in the student's file, to be removed if no further incidents occur prior to graduation.
  - c. The student involved in the alleged violation(s) may request a hearing with SCC.
- 4. Matters which could not be resolved at a program level will be referred to the Dean for review. The matter may be resolved by the Dean, or the Dean may refer the case to SCC for a hearing. The student may accept the Dean's resolution or request a hearing by the SCC.
  - a. The Dean sends written notification of the violation(s), including date, involved student's name, and resolution to the involved student, with copies to the SCC, Department Chair, and Faculty Advisor within five business days.
  - b. The Dean also places a copy of the resolution in the student's file.
  - c. The student involved in the alleged violation(s) may request a hearing with SCC.
- 5. Hearing by CAHP SCC with recommendation to the Dean. The Dean or the student may request a hearing by the CAHP SCC. Because a violation(s) may have serious consequences (which may include dismissal from the University), the University has implemented procedures intended to insure that the student is provided fair notice of any charges, and is afforded a reasonable opportunity to present evidence on his or her behalf.
  - a. The Dean sends a written request to CAHP SCC, with the alleged violation(s) within five business days.

- b. The CAHP SCC will convene a hearing that follows procedures outlined in the University Policies and Procedures manual "Protocol for Handling the Alleged Violations of Professional Conduct by Student Performance Committees" policy number (A14.38.0.1) within five business days.
- 6. Information for Students about Hearings Involving Alleged Violations of the Standards of Professional Conduct. For a full account of the process, please refer to the General Section of the University Catalog.
- 7. Status of Student Pending Action. Pending a determination by the CAHP Dean following a hearing and a recommendation by the CAHP SCC, the student's status will not be altered except for reasons of his/her physical and emotional well-being or for reasons relating to the safety of other students and University personnel. Once the CAHP Dean has rendered a decision, the status of the student will not be altered pending determination of a timely appeal by the student, except that the Provost/Chief Operating Officer shall have the discretion and authority to suspend the student or take other action at any time during the appeal process. The University further reserves the right to withhold the awarding of any degree at any time disciplinary charges are pending against a student.
- 8. **Appeals Procedures.** The CAHP Dean shall have the authority to make decisions regarding a student's status in matters of academic suspension, student conduct, academic progression/promotion and graduation. The decision will be based on input from appropriate sources that may include the following: individual instructors, faculty, and appropriate committees.
  - a. Within five business days following written notification to the student of the action of the CAHP Dean, the student may appeal the decision in writing to the Provost/Chief Operating Officer. The appeal request must be accompanied by a narrative explaining the basis for the appeal. The narrative should fully explain the student's situation and substantiate the reason(s) for advocating a reversal of the prior decision of the CAHP Dean. The Provost/Chief Operating Officer may grant an appeal only if one or more of the following claims are made and substantiated:
    - i. Bias
    - ii. The appearance of new, material and documentable evidence that was not available at the time of the CAHP Dean's decision
    - iii. Procedural error that unfairly affected the decision-making process
  - b. Upon written request from the student, the Provost/Chief Operating Officer shall review the case and, within seven business days, shall issue a decision in writing to the student, which may affirm, modify, or reverse the previous action. A copy of that written decision shall be sent to the Dean, and other appropriate individuals. The decision of the Provost/Chief Operating Officer will be final.
- 9. Procedures Pending Outcome. The student may remain in class or on clinical rotations or assignments pending the outcome of appeals, except in cases of summary suspension, and except when the Provost/Chief Operating Officer has suspended the student or has otherwise determined that it is inappropriate for the student to remain in class and/or

participate in clinical rotations/assignments, consistent with the decision of the CAHP Dean that is being appealed.

- 10. **Suspension Pending Outcome.** If a student is suspended for any reason, all financial aid to that student will be held until the appeal process is resolved by reinstatement of the student or dismissal of the student. If reinstated, the financial aid funds can be released to the student. If the student is dismissed, the funds will be returned to the proper agency/lender.
- 11. **Additional information**. Additional information about the University's Standards of Professional Conduct and the hearing and appeal process is contained in the University's Catalog. Students may also contact Dr. Beverly Guidry, Vice President for Student Affairs at 909/469-5341 for additional information regarding the appeal process.

# **Evaluation and Grading**

The following grading scale is applied to students enrolled in the Master of Science in Health Sciences program:

# **Grading Scale**

Final course grades are given based upon the traditional 4-point letter system, as follows:

<u>Grade</u>	<u>Equivalent</u>	<b>GPA Points</b>
Α	93-100%	4.00
A-	90-92%	3.70
B+	87-89%	3.30
В	83-86%	3.00
B-	80-82%	2.70
C+	77-79%	2.30
С	73-76%	2.00
U	Less than 73%	0.00
CR	Credit	N/A
NCR	No Credit	N/A

# **ADMINISTRATIVE GRADES**

<u>Grade</u>	<u>Equivalent</u>	<b>GPA Points</b>
AU	Audit	N/A
1	Incomplete	N/A
IP	In Progress	N/A
W	Withdrawal	N/A
M	Missing	N/A

The grade point average is calculated at the end of each semester as the sum of earned grade points divided by the sum of semester hours passed and failed. A cumulative grade point average will be calculated and posted on the transcript.

#### **Credit Hour Calculation**

Courses are rated at one credit hour for every 12 contact hours.

#### **Incomplete Grades**

An Incomplete grade ("I") will only be assigned to students whose professional commitments and/or personal responsibilities prevent him or her from completing the requirements of the course where not less than 80% of the course requirements have been completed. The student must petition the instructor for an incomplete grade not less than two (2) weeks prior to the close of the semester and specify the elements of a learning contract. The student must complete the remaining coursework in compliance with the learning contract, no later than the close of the following semester. The instructor must certify any grade changes. In the event a student does not complete the coursework by the end of the semester following the term for which the Incomplete was given, the course grade will revert to a U or —NCR and the student must register for and complete the entire course at another time.

# **Grade Appeals Process**

# **Appealing a Course Grade**

If a student believes there is just cause to dispute a grade for a course, the procedure is as follows: Within five (5) days of receipt of the course grade, the student must make an appointment with the course instructor(s) who issued the grade. Upon written request from the student, the course instructor(s) shall review the case with the student, and a decision shall be made by the course instructor to affirm or modify the grade. Within ten (10) working days of the student's written request, the course instructor shall notify the student in writing of the decision. A copy of the Grade Change Form shall be sent to the student and the Department of Health Sciences Chairperson.

Within five (5) working days following written notification to the student regarding the instructor's decision, the student may appeal the decision in writing to the Department of Health Sciences Chairperson. The appeal request must be accompanied by a narrative explaining the basis for the appeal. The narrative should fully explain the student's situation and substantiate the reason(s) for advocating a review of the prior decision of the instructor. The Department of Health Sciences Chairperson may grant an appeal only if a claim of (1) bias, (2) the appearance of new material and documentable evidence that was not available at the time of the instructor's decision, or (3) procedural error that unfairly affected the decision-making process is substantiated by the Chair. Upon written request from the student with a valid appeal rationale, the Department of Health Sciences Education Chairperson shall review the case and within seven (7) working days shall issue a decision in writing to the student, which may affirm, modify, or reverse the previous action of the instructor.

The Chairperson's decision is final in all course grade appeals except when the Chairperson is the official instructor of the course in question. In such a case, the student will direct his or her appeal to the Dean of the College of Allied Health Professions, following the same guidelines for an appeal to the Chairperson. The decision of the Dean in this instance is final.

The student may remain in class pending the outcome of appeals, except in cases of summary suspension or when the Provost, Vice Provost or the Dean of the College of Allied Health Professions has suspended the student or has otherwise determined that it is inappropriate for the student to remain in class.

# **Issues/Dispute Resolution Procedure**

When an issue or dispute arises between students, the issue/dispute resolution process starts with communication among the involved students. If a satisfactory resolution is not arrived at that level, the matter should then be addressed with the course instructor or the faculty advisor. If the problem is not resolved at the faculty advisor/course instructor level, the matter should be brought to the Department Chair, followed by the Dean and then the Provost/COO. If the matter has not been resolved at those levels, the final arbiter is the President.

When an incident arises involving a faculty member, the first step in the issue/dispute resolution process is discussion with the faculty member. If the matter is not satisfactorily resolved at that level, then the matter should be referred to the Department Chair, Dean, and Provost/COO, in that order. The final arbiter is the Board of Trustees.

When an incident arises involving a staff member, the dispute resolution process begins with the Department Chair, followed by the Dean. The Office of Human Relations is the final arbiter.

Failure to follow this sequence of steps will only serve to delay the appropriate resolution of the issue or dispute as the matter will only be referred back to the correct level in this chain of responsibility.

# **Professional Development**

Students are expected to pursue robust opportunities to develop professional skills and attributes through curricular and community-based activities. Opportunities for growth include:

#### **Community Field Service Program**

The Community Field Service Program (CFSP) facilitates pathways through which students and faculty become involved in the work carried out by the Department, constituent organizations, collaborators, researchers and partners of Western University of Health Sciences. These experiences include opportunities to apply clinical, interpersonal, administrative, analytical, and leadership skills that foster learning and development through application in real world environments. As part of the informal curricula, the program provides a means through which Health Science students and faculty will a) learn through giving service, b) participate as team members, (c) demonstrate humanism, caring and compassion in the HPE and CHE professions, and d) conduct action and community-based research.

#### **CAHP Research and Publication Center**

The CAHP Research and Publication Center provides students and faculty important information related to conducting and publishing research. Through active communication and information sharing students and faculty locate others with similar research interests. All MSHS students must complete the National Institute of Health (NIH) course protecting human research participants. All proposals for scholarly enquiry must be submitted to the Associate Dean of Research in the College of Allied Health Professions prior to submission to the Institutional Review Board (IRB).

# **MSHS Electronic Student Center**

Students will maintain professional responsibility for obtaining program information, and conducting all aspects of the student life in a timely manner by maintaining frequent contact with others utilizing the Blackboard-based Electronic Student Center throughout their tenure in the MSHS program.

# **Annual Leadership Symposium**

Students enrolled in *HSCI 5204 Educational Leadership* will conduct the annual Leadership Symposium during which a panel of leaders in the community will join students and faculty for an interactive experience and discussion of leadership issues affecting a) professional development, b) health education, c) healthcare delivery, and d) the ethical application of leadership to decision making.

#### **Student Government Association**

MSHS students may serve as representatives of the program within the Student Government Association to ensure the active engagement of the HPE and CHE professions in the WU student-centered initiatives and outreach.

# **Professional Organizations and Outreach**

Students are expected to participate in professional organizations outreach throughout the academic year to promote awareness of the HPE and CHE professions, and to conduct outreach to the community. Examples of opportunities for student enrichment include the annual Health Education Week, the American Association for Health Education, the American Public Health Association, the Society for Public Health Education, the Alpha Eta Society, the annual Health Science Department Fundraiser, the Boys and Girls Club of America, the WU Alumni Association, and others.

# **Curriculum Organization**

### Overview

The Master of Science in Health Sciences is designed to be completed in two academic years. Most students complete the Master of Science in Health Sciences degree in 2 - 3 years, although students may take up to 5 years to fulfill the 34-unit requirement for degree completion. Unless otherwise noted, a total of 27 credit hours of Core Master of Science in Health Sciences Courses are required of all MSHS candidates. Students must also complete 6 Career Track Units in one of two tracks: 1) Health Professions Education (HPE); or 2) Community Health Education (CHE). Students must also complete a minimum of 2 units in Thesis/Special Project, and the Comprehensive Examination.

### Tracks of study within the MSHS degree program

All students must complete a minimum of 34 units for the MSHS degree, regardless of the track of study elected. Students electing more than one track must complete all requirements in each track before the MSHS degree may be conferred. Courses not included in a degree track may be taken as an elective, however; elected courses do not fulfill specific requirements of another track.

# Health Professions Education (HPE) Track

Subject/Course #	Course Title	Credit Hours
HSCI 5020	Grant Proposal Writing	3.00
HSCI 5100	Learning Theories and Student Behaviors	3.00
HSCI 5102	Principles of Instructional Design	3.00
HSCI 5106	Applied Statistics	3.00
HSCI 5108	Instructional Media	3.00
HSCI 5110*	Writing for Publication	2.00
HSCI 5130	Foundations of the U.S. Health Care System	3.00
HSCI 5202	Human Resources and Fiscal Operations	3.00
HSCI 5204	Educational Leadership	3.00
HSCI 5206	Research and Program Evaluation Methods	3.00
HSCI 5306	Clinical Teaching	3.00
HSCI 5998*	Thesis/Special Project I	1.00
HSCI 5999*	Thesis/Special Project II	1.00
	Total Required Units:	34.00

# Community Health Education (CHE) Track

Subject/Course #	Course Title	Credit Hours
HSCI 5011	Community Healthy Principles, Policy, and Advocacy	2.00
HSCI 5013	Epidemiology and Population Health	3.00
HSCI 5014	Community Health Education	3.00
HSCI 5015	Community Needs Assessment	2.00
HSCI 5017	Program Planning	2.00
HSCI 5018	Competencies for Community Health Educators	3.00
HSCI 5019	Program Implementation	2.00
HSCI 5020	Grant Proposal Writing	3.00
HSCI 5106	Applied Statistics	3.00
HSCI 5108	Instructional Media	3.00
HSCI 5130	Foundations of the U.S. Health Care System	3.00
HSCI 5206	Research and Program Evaluation Methods	3.00
HSCI 5998*	Thesis/Special Project I	1.00
HSCI 5999*	Thesis/Special Project II	1.00
	Total Required Units:	34.00

# NMM/OMM Teaching Fellowship Track

Students selecting the NMM/OMM Teaching Fellowship Track must be admitted to the NMM/OMM Fellowship in the College of Osteopathic Medicine of the Pacific (COMP).

Subject/Course #	Course Title	Credit Hours
HSCI 5020	Grant Proposal Writing	3.00
HSCI 5100	Learning Theories and Student Behaviors	3.00
HSCI 5102	Principles of Instructional Design	3.00
HSCI 5106	Applied Statistics	3.00
HSCI 5108	Instructional Media	3.00
HSCI 5110*	Writing for Publication	2.00
HSCI 5206	Research and Program Evaluation Methods	3.00
HSCI 5306	Clinical Teaching	3.00
HSCI 5400	Evidence-based Educational Research	3.00
HSCI 5401	Executive Skills and Curriculum Delivery	3.00
HSCI 5402	Leadership for Clinicians	3.00
HSCI 5998*	Thesis/Special Project I	1.00
HSCI 5999*	Thesis/Special Project II	1.00
	Total Required Credits:	34.00

# Health Professions Education and Research in Podiatric Medicine Track

Students selecting the Health Professions Education and Research in Podiatric Medicine Track must be admitted to the DPM program in the College of Podiatric Medicine and have prior approval of the CPM Assistant Dean of Clinical Affairs.

Subject/Course #	Course Title	Credit Hours
HSCI 5020	Grant Proposal Writing	3.00
HSCI 5100	Learning Theories and Student Behaviors	3.00
HSCI 5102	Principles of Instructional Design	3.00
HSCI 5106	Applied Statistics	3.00
HSCI 5108	Instructional Media	3.00
HSCI 5110*	Writing for Publication	2.00
HSCI 5206	Research and Program Evaluation Methods	3.00
HSCI 5306	Clinical Teaching	3.00
HSCI 5400	Evidence-based Educational Research	3.00
HSCI 5401	Executive Skills and Curriculum Delivery	3.00
HSCI 5402	Leadership for Clinicians	3.00
HSCI 5998*	Thesis/Special Project I	1.00
HSCI 5999*	Thesis/Special Project II	1.00
	Total Required Credits:	34.00

<sup>\*</sup>Students entering the MSHS program prior to fall 2012 may have completed HSCI 5110 when it was offered at 1.00 credit hour, rather than 2.00 credit hours. If so, the student is exempt from HSCI 5998 and is required to take HSCI 5999 for 3 credit hours, rather than 1.00 credit hour.

#### **Final Integrative Exercises**

### The Comprehensive Examination

All students are required to pass a comprehensive examination upon completion of all course requirements prior to conferring of the MSHS degree. The examination is created and reviewed by a faculty committee of content experts. An average of the scores will be taken for a grade of pass/fail. All students must achieve a minimum score of 83% (B) on the comprehensive examination. Any student scoring less than 83% may remediate the examination before the close of the following semester. A student may make a total of two (2) attempts at passing the Comprehensive Examination. Any student who does not accomplish at least 83% on the second attempt may be dismissed from the program, and the degree of Master of Science in Health Sciences will not be awarded.

### **Portfolio**

All MSHS students must complete a portfolio containing artifacts that demonstrate benchmarks and achievements relevant to the students targeted profession. The Portfolio is a graduation requirement and must be submitted at the time of the Comprehensive Examination for assessment by the faculty. The MSHS degree will not be conferred until all graduation requirements are met.

# Thesis/Special Project

A total of two (2) units of Thesis/Special Project are required for the conferral of the MSHS degree. Under the direction of the assigned faculty mentor, students will complete a scholarly work that is relevant to the declared track of study. Students undertaking a thesis will obtain IRB approval prior to data collection. Students completing a Special Project may find that the work qualifies for IRB exemption. All Thesis and Special Projects will utilize APA style, five-chapter paper format and be of sufficient rigor and innovation to add to the body of knowledge in the selected topic area. The Special Project option does not involve original research. The new application(s) of secondary data are stressed in the Special Project and will result in an educational product or resource.

### Thesis/Special Project Preparation (NCR)

Under the supervision of the MSHS faculty, all students will be enrolled in the Thesis/Special Project Preparation Blackboard course. The course is of no credit value, but allows students to begin scholarly work as soon as possible upon entry to the MSHS program. Students are strongly encouraged to begin work on the Thesis/Special Project requirement well in advance of registering for Part I.

# Thesis/Special Project Part I (1 unit)

Students may enroll in Thesis/SP Part I upon completion of nine (9) units of study. Part I will include topic approval, IRB submission, establishment of the scholarly committee, and the completion of chapters 1-3. Any student not completing the course elements will register for Thesis/Special Project Continuation Part I.

# Thesis/Special Project Continuation Part I (course fee per semester)

In the event that a student requires additional time to complete the Thesis/SP Part I, s/he will continue their work under the direction of the faculty. Should the student require more than two (2) semesters of continuation, the faculty will assess the work to date for reasonable progress. In the event that reasonable progress is not evident by the end of three (3) semesters, the student may be recommended for dismissal for failing to make reasonable progress toward degree completion. (Registration in Thesis/Special Project Continuation is not required during the summer term however students will continue to work toward the completion of the requirements online).

# Thesis/Special Project Part II (1 Unit)

Upon completion of Part I, students may register for Part II during which they will complete chapters 4 and 5, and the oral defense presentation. It is assumed that the student will continue working with the same scholarly committee and faculty mentor throughout the Thesis/Special Project process.

# Thesis/Special Project Continuation Part II (course fee per semester)

In the event that a student requires additional time to complete the Thesis/SP Part II, s/he will continue their work under the direction of the faculty. Should the student require more than two (2) semesters of continuation, the faculty will assess the work to date for reasonable progress. In the event that reasonable progress is not evident by the end of three (3) semesters, the student may be recommended for dismissal for failing to make reasonable progress toward degree completion. (Registration in Thesis/Special Project Continuation is not required during the summer term however students will continue to work toward the completion of the requirements online).

# **Course Descriptions**

# HSCI 5011 Community Health Principles, Policies & Advocacy (2 credit hours)

Students will use evaluation and research findings to conduct policy analysis, identify current and emerging issues that may influence health and health education, identify the impact of existing and proposed policies on health and factors that influence decision makers. Students will learn to engage stakeholders in advocacy and develop advocacy plans in compliance with local, state and/or federal policies and procedures.

# **HSCI 5013 Epidemiology & Population Health (3 credit hours)**

Students will examine data to understand the distribution and determinant of health and diseases, morbidity, injuries, disability and mortality in populations. Findings will be applied to disease prevention and health promotion education strategies.

# **HSCI 5014 Community Health Education (3 credit hours)**

The course provides an overview of the development and implementation of health education programs in the community and a variety of educational environments. It will provide an overview of present issues related to community health education, settings and roles for community health education, and professional skills and practice necessary to develop and implement effective community health education programs. Topics will include health education programs in government health agencies, voluntary health agencies, school settings, and university environments. Applications of learning theories, early intervention, media relations, and outreach in the 21<sup>st</sup> Century will be the focus of the course.

# **HSCI 5015 Community Needs Assessment (2 credit hours)**

Students will determine the appropriate data points and collection instruments to understand and describe the community, analyze community problems, identify community assets and resources, develop baseline measures of behavior, and to determine culturally sensitive methods to best engage the community in communication. Topics will include commonly employed tools, approaches to communicating findings, and determining community readiness for change.

### **HSCI 5017 Program Planning (2 credit hours)**

Students will examine planning models commonly employed in Public Health, develop measurable program objectives based on specific findings identified by the needs assessment process, develop program scope and sequencing of activities to leverage resources for the maximum outcome.

# HSCI 5018 Competencies for Community Health Educators (3 credit hours)

The National Commission for Health Education Credentialing, Inc. (NCHEC) competencies for Community Health Educators are integrated throughout the MSHS curriculum. Designed to represent the fundamental skills underlying the practice of Community Health Education this course reviews the following 7 core areas of the profession in preparation for the national certification examination: 1) Assess Individual and Community Needs for Health Education; 2) Plan Health Education Strategies, Interventions, and Programs; 3) Implement Health Education Strategies, Interventions, and Programs; 4) Conduct Evaluation and Research Related to Health Education; 5) Administer Health Education Strategies, Interventions and Programs; 6) Serve as a Health Education Resource Person; 7) Communicate and Advocate for Health and Health Education.

# **HSCI 5019 Program Implementation (2 credit hours)**

The student will develop the phases of program implementation commonly employed in Public Health intervention programs and establish a system of program management and record keeping. Other topics include the training of staff and program facilitators, medical and legal concerns, program safety, reporting and documentation.

# **HSCI 5020 Grant Proposal Writing (3 credit hours)**

The course provides an overview of proposal writing, researching and funding strategies for special projects and general support, in all organizational settings. Participants will 1) develop a program or project plan; 2) select approaches and plan a program evaluation; and 3) prepare a proposal budget. Other topics include identifying appropriate grantors, reaching and establishing relationships with government, foundations and corporations. Students will complete a grant proposal that is suitable for submission upon completion of the course.

# **HSCI 5100 Learning Theories and Student Behaviors (3 credit hours)**

The course explores the major learning theories involved in health education. Emphasis is placed on the interrelationship between learning and teaching styles and their impact on the learning environment. Students will focus on the recognition of common behaviors that contribute to the decline of the learning environment and develop strategies for maintaining and restoring a positive learning environment.

# **HSCI 5102** Principles of Instructional Design (3 credit hours)

The course is designed to provide the student with the skills needed to develop educational interventions. Emphasis is placed on teaching, learning and evaluating student performance. Students will conduct educational needs assessment, and data analysis. Writing instructional objectives, defining instructional strategies, designing learning activities, selecting media, test construction and evaluation of student learning complete the course objectives.

### **HSCI 5106 Applied Statistics (3 credit hours)**

This course is designed to prepare the student to understand and apply principles of statistics in the analysis and interpretation of quantitative data in health science research. Topics covered include, but are not limited to: 1) definitions of variables; 2) descriptive statistics; 3) measures of central tendency; 4) measures of dispersion; 5) hypothesis testing; 6) T-test, ANOVA, linear regression, Pearson Product, and Chi Square for descriptive and inferential statistics in the interpretation of data.

# **HSCI 5108 Instructional Media (3 credit hours)**

Students will learn to formulate educational materials that are Americans with Disability Act (ADA) compliant and appropriate for varied and diverse audiences. Students will prepare to conduct community, classroom and online teaching through the effective application of print media, presentations, web formats, and audio/video tools.

# **HSCI 5110 Writing for Publication (2 credit hours)**

The course is designed to provide students with skills to do well in an academic career and in scientific writing. Emphasis is placed on the process of manuscript and thesis/dissertation preparation in anticipation of scholarly publication.

#### HSCI 5130 Foundation of the U.S. Health Care System (3 credit hours)

The course explores the various components of the U.S. health care system, the scope of practice and the public, private and governmental influences affecting health care delivery. Students will understand the interrelationship between medical education and health care delivery systems. Primary, secondary, tertiary and alternative systems are examined. The survey of health service delivery will include the challenges encountered in balancing patient centered care with how the health care system functions as a business.

# **HSCI 5202 Human Resources and Fiscal Operations (3 credit hours)**

The course examines the primary legal obligations and common ethical dilemmas involved in fiscal operations, management and administration. Topics such as recruitment, hiring, performance evaluations, risk management, purchasing, credentialing, development and implementation of policies will be covered. Additionally, budgeting, forecasting, compensation and the utilization of tools and methods of financial management and decision making will be applied. Communication strategies for dealing with difficult people, negotiation, conflict resolution, e-manners and public relations will be discussed.

# **HSCI 5204 Educational Leadership (3 credit hours)**

The course will introduce the student to selected leadership theories and the development of mission, vision and core beliefs as tools for directing the work of organizations and programs. Strategic planning models and managing change effectively is underscored. Students will assess their leadership style(s) and utilize organizational dynamics to lead effective teams. The course will also prepare students to develop an integrated approach to key roles and responsibilities in health professions.

# HSCI 5206 Research and Program Evaluation Methods (3 credit hours)

The course provides students with an understanding of how productive research and evaluation questions are formulated, the critical distinction between empirical observation and inference, and factors governing the types of conclusions which can be drawn from empirical data. Issues such as sample size and type, correlations vs. experimental research designs, objective vs. subjective data are addressed. Special issues of qualitative research and single case studies are addressed. The material is presented with the primary intent of training the student to be discriminating consumers of research. Students are introduced to program evaluation, and design and evaluation of health education programs.

# **HSCI 5306 Clinical Teaching (3 credit hours)**

This course provides an overview of teaching in the clinical, laboratory, and practical settings. Utilization of teaching moments in unstructured and practical environments, teaching in the presence of patients and clients, principles of formative feedback and assessing competence vs. capacity are emphasized.

### HSCI 5400 Evidence-based Educational Research (3 credit hours)

Prerequisite: Acceptance into the NMM/OMM Fellowship or the College of Podiatric Medicine. This course provides the student with a combination of quantitative and qualitative methods in reading, understanding, critiquing and conducting research. Experiences and literature review are utilized to demonstrate best practices in educational research. Evidence based enquiry is emphasized by two means: (1) the importance of data driven decision making and (2) explicit guidelines for conducting empirical studies.

#### HSCI 5401 Executive Skills and Curriculum Delivery (3 credit hours)

Prerequisite: Acceptance into the NMM/OMM Fellowship or the College of Podiatric Medicine. Under the direction of the MSHS faculty and the OMM faculty in the College of Osteopathic Medicine or the faculty in the College of Podiatric Medicine, students will design and implement learning activities that constitute the core academic curriculum of osteopathic principles and practices. Students will demonstrate competence in lecturing and teaching, course management, production of educational materials, test construction, test assessment, student performance evaluation, develop and conduct clinical and laboratory instruction, master the components necessary for teaching clinical skills in the psychomotor domain, effectively assess competence in inter-rater reliability, and facilitate journal club activities. In addition, students will participate in ongoing delivery and assessment of the OMM curriculum and formulate recommendations for program development.

# **HSCI 5402 Leadership for Clinicians (3 credit hours)**

Prerequisite: Acceptance into the NMM/OMM Fellowship or the College of Podiatric Medicine. Under the direction of the MSHS faculty and the OMM faculty of the College of Osteopathic Medicine or the faculty of the College of Podiatric Medicine, students will fulfill leadership roles in the delivery of the OMM curriculum. Students will recognize the challenge of balancing the business of health professions education with patient centered care and learner centered instruction, demonstrate executive and problem solving skills germane to the daily operation of a teaching unit, allocate department resources effectively, and make recommendations that enhance the delivery of an academic within the health professions.

# HSCI 5998 Thesis/Special Project Part I (1 credit hour, CR/NCR)

Prerequisite: Students must have completed 9 units of study. Both Thesis and Special Project follow the traditional five-chapter format. Students will complete the elements necessary for Chapters 1 - 3.

# HSCI 5998-A Thesis/Special Project Part I Continuation (0 credit hours, CR/NCR)

Prerequisite: HSCI 5998 Thesis/SP Part I. Students who do not complete the elements of Thesis/Special Project Part I in the semester in which they enrolled will continue their work in HSCI 5998-A. Students may register for continuation for a total of two (2) semesters. Should the student require more than two (2) semesters of continuations, the faculty will assess the work to date for reasonable progress. In the event that reasonable progress is not evident by the end of three (3) semesters, the student may be recommended for dismissal for failing to make reasonable progress toward degree completion. Enrollment in this course is not required during the summer term. Student is assessed a \$541.00 continuation fee.

# HSCI 5999 Thesis/Special Project Part II (1 credit hour, CR/NCR)

Prerequisite: Completion of HSCI 5998 Thesis/Special Project Part I. Students will complete the elements necessary for chapters 4 and 5 of the five-chapter paper. Upon approval of the faculty, the student will schedule and successfully complete the oral defense of the paper.

# HSCI 5999-A Thesis/Special Project Part II Continuation (0 credit hours, CR/NCR)

Prerequisite: Completion of HSCI 5999 Thesis/SP Part II. Students who do not complete the elements of Thesis/Special Project Part I in the semester in which they enrolled will continue their work in HSCI 5998-A. Students may register for continuation for a total of two (2) semesters. Should the student require more than two (2) semesters of continuations, the faculty will assess the work to date for reasonable progress. In the event that reasonable progress is not evident by the end of three (3) semesters, the student may be recommended for dismissal for failing to make reasonable progress toward degree completion. Enrollment in this course is not required during the summer term. Student is assessed a \$541.00 continuation fee.

# **Honors and Awards**

The following awards are presented annually at the University's commencement ceremony that is typically held in May.

Alumni Memorial Award
Bertha Oliver Memorial Award
Dean's Award
Don and Jean Griva Memorial Award
Outstanding Thesis/Special Project Award

Additional awards for which MSHS students are eligible include:

Arthur Madorsky, MD Memorial Scholarship Award
Guy M. Allmond Scholarship Fund
Linda Fox Memorial Endowment Fund
President's Society Award
The Alumni Association Scholarship
Who's Who among Students in American Universities and Colleges Nominations

### **Academic Calendar**

### Fall 2013

Wednesday, August 7, 2013
Orientation

<u>Saturday, August 11, 2013</u> Convocation/White Coat Ceremony

Monday, August 12, 2013 Fall Classes Begin

Monday, August 16, 2013
Last Day to Add Fall Classes

Monday, August 30, 2013
Last Day to Drop Fall Classes

Monday, September 2, 2013 Labor Day – No Classes

Monday, October 14, 2013 Columbus Day – No Classes

Wednesday, November 4, 2013 Last Day to File Advancement to Candidacy for 2014 Graduates

Friday, November 22, 2013
Fall Classes End

### Spring 2014

Monday, January 6, 2014 Spring Classes Begin

Friday, January 10, 2014
Last Day to Add Spring Classes

Friday, January 24, 2014
Last Day to Drop Spring Classes

Monday, January 20, 2014

Martin Luther King Day – No Classes

Monday, February 17, 2014

President's Day – No Classes

Monday, March 17, 2014 Spring Break Begins

Monday, March 24, 2014 Spring Classes Resume

Friday, April 18, 2014 Spring Classes End

#### Summer 2014

Monday, April 28, 2014 Summer Classes Begin

<u>Friday, May 2, 2014</u> Last Day to Add Summer Classes

Friday, May 9, 2014 Last Day to Drop Summer Classes

Wednesday - Friday, May 14-16, 2014 Commencement

Monday, May 26, 2014 Memorial Day – No Classes

Friday, June 27, 2014 Summer Classes End

# **Master of Science in Physician Assistant Studies**

Department of Physician Assistant Education

#### Accreditation

The Accreditation Review Commission on Education for the Physician Assistant (ARC-PA) has granted **Accreditation-Continued** to the **Western University of Health Sciences Physician Assistant Program** sponsored by the **Western University of Health Sciences**. 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 2020**. The review date is contingent upon continued compliance with the Accreditation *Standards* and ARC-PA policy.

# **Vision Statement**

The Western University of Health Sciences Department of Physician Assistant Education will be nationally respected and recognized as an innovative leader in Physician Assistant education. Our faculty will continue to be leaders in our profession as educators and clinicians. Our faculty will continue to educate a diverse student body, who will provide compassionate and comprehensive primary care medicine.

The program will continue to foster student attributes that will enhance his/her role as effective health care professionals.

Our students, graduates and faculty will continue to serve in key leadership positions on a local, state and national level, to influence the future of the physician assistant profession, while striving to continue personal and professional development. Physicians and health care delivery teams will seek our graduates. Through these partnerships, comprehensive patient care will be accessible for all populations.

#### **Mission Statement**

The Department of Physician Assistant Education supports the University's mission by educating Physician Assistants to deliver high quality, competent and compassionate health care as team members within the health care delivery system.

# The Physician Assistant Role

Physician Assistants (PA) are health care professionals who are authorized by a state to practice medicine as part of a team with physicians. PAs are certified by the National Commission of Certification of Physician Assistants and are licensed, certified, or registered in the state in which they practice. PAs deliver a broad range of medical and surgical services including conducting physical exams, obtaining medical histories, diagnosing and treating illness, ordering and interpreting tests, counseling on preventive health care, assisting in surgery, and prescribing medications.

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.

The specific tasks performed by an individual physician assistant cannot be delineated precisely because of variations in practice requirements mandated by geographic, political, economic, and social factors. At a minimum, however, physician assistants are educated in biomedical science, critical clinical reasoning and patient education. Physician Assistant practice is characterized by clinical knowledge and skills in the areas traditionally defined as family medicine, internal medicine, pediatrics, obstetrics, gynecology, surgery, and psychiatry/behavioral medicine.

Physician assistants practice in inpatient, outpatient, and long-term settings. Physician assistants provide health care services to diverse patient populations of all ages with a range from acute to chronic medical and surgical conditions. PAs acquire knowledge and skills which allow them to function effectively in an ever changing health care environment.

Services performed by physician assistants include, but are not limited to the following:

- 1. **Evaluations:** eliciting a detailed and accurate history, performing an appropriate physical examination, ordering appropriate diagnostic studies, delineating problems, developing management plans, and recording and presenting data.
- 2. **Diagnostics:** ordering, performing and/or interpreting diagnostic studies to identify and follow pathophysiology process.
- 3. **Monitoring:** implementing patient management plans, recording progress notes and participating in the process of the continuity of care.
- 4. **Therapeutic:** performing therapeutic procedures and managing or assisting in the management of medical and surgical conditions, which may include assisting surgeries in the conduct of operations and taking initiative in performing evaluations and therapeutic procedures in life-threatening procedures.
- 5. **Patient Evaluation:** counseling patients regarding issues of health care management to include compliance with prescribed therapeutic regimens, normal growth and development, family planning, and emotional problems of daily living.
- 6. **Referral:** facilitating the referral of patients to other health care providers or agencies as appropriate.

# Certification/Licensure

The written examination for certification as a physician assistant is administered by the National Commission on Certification of Physician Assistants (NCCPA). Successful completion requires that the applicant achieve the passing score established by the NCCPA for that examination. It is the responsibility of the applicant to ensure that certification of his or her examination score is received by the Physician Assistant Committee (PAC). The NCCPA phone number 678-417-8100 and their

website address is <a href="http://www.nccpa.net/">http://www.nccpa.net/</a>. The PAC phone number is 916-561-8780 and their website is <a href="http://www.pac.ca.gov/">http://www.pac.ca.gov/</a>.

To practice as a physician assistant in California, one must apply for and receive licensure from the Physician Assistant Committee (PAC) and pass the Physician Assistant National Certification Exam (PANCE). The PAC does not issue interim permits to practice as a physician assistant.

# **Program Goals**

The primary goal of the WesternU Physician Assistant Program is to educate individuals to serve as physician assistants in primary care medicine. PA students are educated to provide health care to all patient populations. PAs work with the direction and supervision of a physician. The education provided by the program will prepare the entry-level graduate with the knowledge skills and attitudes to perform in a primary care setting and function in a variety of roles within numerous clinical settings. Educating individuals to serve as PAs in primary care medicine is founded on the understanding that the broad-based education needed to prepare an individual to serve in a primary care setting is the most effective form of initial preparation. Primary Care education also permits the development of attributes that will serve the graduate in the greatest spectrum of potential employment opportunities.

- 1. Physician assistant students must demonstrate competency in established and evolving core medical and clinical sciences knowledge with an application to patient care in diverse settings.
- 2. Physician assistant students must demonstrate interpersonal and communication skills that result in effective information exchange with patients, families, health care providers, professional associates, and the health care system.
- 3. Physician assistant students must demonstrate care that is effective, patient-centered, compassionate, timely, efficient, and equitable for the treatment of health problems and the promotion of wellness.
- 4. Physician assistant students must demonstrate a high level of responsibility, ethical practice, sensitivity to a diverse patient population, and adherence to legal and regulatory requirements.
- 5. Physician assistant students must be able to critically analyze, evaluate, and improve patient care practices throughout their ongoing education and practice.
- 6. Physician assistant students must demonstrate an awareness of and responsiveness to the larger system of health care to provide patient care that is of optimal value.

The program has also incorporated elements of osteopathic philosophy into physician assistant education. These elements include:

• Caring for, and appreciation of, the patient as a whole person.

- Emphasis on those aspects of health education that stress health promotion and disease prevention.
- An appreciation of the role of physical assessment in the diagnosis and management of illness.

The curriculum is designed to accomplish the preceding goals. Students attain these goals as they progress through the curriculum.

# **Functions and Tasks of Physician Assistant Graduates**

# **General Entry-Level Competencies Expected of a Graduate**

The physician assistant will be able to:

- Elicit a comprehensive, history and perform a complete routine physical examination on patients of any age group; elicit a pertinent and accurate history and perform a problemoriented physical examination in situations requiring an interval evaluation.
- Select, perform and/or interpret the appropriate routine patient laboratory and diagnostic studies/ procedures.
- Identify patient problems, organize and integrate data, record patient findings.
- Accurately present an oral case.
- Implement a management plan.
- Instruct and counsel patients regarding physical and mental health to include diet, health maintenance, therapy, normal growth and development, family planning, referral and follow-up services.
- Provide life support and emergency evaluation/care in response to life-threatening situations in the absence of a physician and/or other appropriate health professionals.
- Initiate and follow up on appropriate referrals to specialists.

# **Personal Competencies for Admission and Matriculation**

A candidate for admission to the Physician Assistant Program must have the use of certain sensory and motor functions to permit them to carry out the activities described in the sections that follow. Graduation from the program signifies that the individual is prepared for entry into clinical practice or into postgraduate training programs. Therefore, it follows that graduates must have the knowledge and skills needed to function in a broad variety of clinical situations and to render a wide spectrum of diagnostic and therapeutic care. The candidate must be able to consistently, quickly and accurately integrate all information received by whatever sense(s) are employed. Also, they must have the intellectual ability to learn, integrate, analyze and synthesize data.

A candidate for the Master of Science in Physician Assistant Studies degree ordinarily must have abilities and skills of five varieties including: observation; communication; motor; intellectual, conceptual, integrative and quantitative; and behavioral and social. Where technological assistance is available in the program, it may be permitted as a reasonable accommodation when appropriate.

Under all circumstances, a candidate should be able to perform in a reasonably independent manner.

- **a. Observation:** Candidates and students ordinarily must have sufficient vision to be able to observe demonstrations, experiments and laboratory exercises. They must be able to observe a patient accurately at a distance and close at hand.
- **b. Communication:** Candidates and students must be able to communicate with patients and colleagues. They should be able to hear, with or without a reasonable accommodation. Candidates and students must be able to read, write, and speak English.
- c. Motor: Candidates and students ordinarily should have sufficient motor function such that they are able to execute movements reasonably required to provide general care and emergency treatment to patients. Examples of emergency treatment reasonably required of physician assistants are cardiopulmonary resuscitation, administration of intravenous medication, the application of pressure to stop bleeding, the opening of obstructed airways, the suturing of simple wounds, and the performance of simple obstetrical maneuvers. These actions require coordination of both gross and fine muscular movements, equilibrium and functional use of the senses of touch and vision.
- d. Intellectual, Conceptual, Integrative and Quantitative Abilities: These abilities include measurement, calculation, reasoning, analysis and synthesis. Problem solving, the critical intellectual skill demanded of a physician assistant, requires all of these intellectual abilities. In addition, candidates and students should be able to comprehend three-dimensional relationships and understand the spatial relationships of structures.
- e. Behavioral and Social Abilities: Candidates and students must possess the emotional health required for full utilization of the intellectual abilities, the exercise of good judgment, the prompt completion of all responsibilities attendant to the assessment and care of patients, and the development of mature, sensitive and effective relationships with patients. Candidates and students must be able to tolerate physically taxing workloads, adapt to changing environments, display flexibility, and learn to function in the face of uncertainties inherent in the clinical problems of many patients. Compassion, integrity, concern for others, interpersonal skills, interest and motivation are all personal qualities to be assessed during the admissions and educational processes.

The Department of Physician Assistant Education, along with all the other programs at Western University of Health Sciences, shares a commitment to develop creative ways of opening the PA curriculum to competitive, qualified disabled individuals. In doing so, however, the Department of Physician Assistant Education must maintain the integrity of its curriculum and preserve those elements deemed essential to educating candidates to become effective physician assistants.

### **Admissions Policies and Procedures**

Admission to the PA program is on a competitive basis and is open to citizens and permanent residents of the United States and international students. WesternU is committed to admitting competitive, qualified disabled individuals. All applicants are expected to fulfill the same requirements. For technical guidelines, please see **Personal Competencies for Admission and Matriculation**.

# **International Applicants**

International applicants who are not U.S. citizens and who are living in the U.S. should be prepared to provide proof of legal U.S. residency at the time of interview. Proof of legal U.S. residency is required prior to any offer of acceptance. For more detailed information, please visit our web page for International Students.

### **Application Requirements**

The admissions committee will consider applicants with a minimum of a bachelor's degree from a regionally accredited institution or who will complete their bachelor's degree before matriculation. The minimum overall GPA required is 2.70, the minimum science GPA is 2.70, and the prerequisite GPA is 2.70, all on a 4.00 scale. Grades of "C-" in any of the prerequisite courses are not accepted. Candidates should possess the oral and written communication skills necessary to interact with patients and colleagues.

# 1. Prerequisite Courses

Course	<u>Units</u>
College English and English Composition*	6 semester units, a full year sequence
College Algebra	3 semester units
Human Anatomy with Lab**	3 semester units
Human Physiology with Lab**	3 semester units
Microbiology with Lab	3 semester units
General or Inorganic Chemistry with Lab	6 semester units, a full year sequence
Psychology (General or Introductory only)	3 semester units
Sociology (General or Introductory only)	3 semester units
Humanities	9 semester units
Introductory Statistics***	3 semester units
Genetics	3 semester units
Spanish	Encouraged, but not required

<sup>\*</sup> English prerequisites must be taken from the English department. English as a Second Language (ESL) courses are not accepted for the English prerequisites.

A seven (7) year time limit is enforced for all science prerequisites and labs (anatomy, physiology, chemistry, microbiology, and genetics).

Advanced placement, transfer of credit, CLEP examination, or credit for experiential learning is not recognized by the program as meeting these prerequisites.

Introductory level courses in the sciences are not acceptable (i.e., courses taken in the sciences for non-science majors).

<sup>\*\*</sup> Anatomy and physiology must be taken out of the anatomy, physiology, A&P, biology, or zoology departments. If anatomy and physiology are combined, a minimum of five semester units is required.

<sup>\*\*\*</sup>Preferably from math or statistics department.

Prerequisite courses must be transferable. Transferable courses are those designated for baccalaureate credit by the college or university offering the courses.

# 2. Health Care Experience

Health care experience is not required. However, engagement in extracurricular or community activities that reflect people or service orientation is essential. The extracurricular or community activity does not need to be medical in nature.

# **Application Procedures and Deadlines**

The Central Application Service for Physician Assistants (CASPA) was created by the Physician Assistant Education Association (PAEA) as a service to applicants and member programs. CASPA will collect one set of materials from each applicant. CASPA will then authenticate, photocopy, and distribute them to each member school an applicant designates. WesternU's application deadline to apply to CASPA is November 1st of the year prior to beginning the PA program. Applicants are considered without discrimination on the basis of race, color, national origin, age, or gender.

To request an informational brochure and/or information about the CASPA application, contact the Office of Admissions or the CASPA office at:

Office of Admissions CASPA

Western University of Health Sciences <a href="http://www.caspaonline.org">http://www.caspaonline.org</a>

309 E. Second Street (617) 612-2080

Pomona, CA 91766-1854

(909) 469-5541

A mandatory supplemental application (provided by WesternU) is available on-line to all applicants. However, completion of the supplemental does not ensure admission. A final evaluation and calculation will be completed upon receipt of your supplemental application. The supplemental application deadline is December 1<sup>st</sup> of the year prior to which the applicant intends to matriculate in the PA program. The supplemental application consists of forms requesting additional information and an essay for re-applicants. A non-refundable application fee of \$50 must be submitted with the supplemental application materials. All application materials must be returned as part of one supplemental application packet.

Applicants who have undertaken any coursework outside of the United States, including Canada, must submit their transcripts for evaluation to World Education Services or Josef Silny and Associates. In preparation for CASPA, a course-by-course evaluation is required, and all course work must be designated as undergraduate, graduate, or professional. Western University of Health Sciences will only honor evaluations from the above services. The evaluation must be submitted to CASPA.

Once the applicant's file is reviewed, the applicant may be granted an on-campus interview. During the interview process, the applicant meets individually with an interview team, which may consist of the PA Program Director, PA Admissions Committee Chair, PA faculty, Dean of the College of Allied Health Professions, University faculty, students, PA alumni, and community PAs. The interviewers question the applicant regarding academics, personal preparedness and commitment to the PA program and the PA profession. Interviewees are rated on a standard evaluation form

relative to each of these variables. After the conclusion of the interviews, the evaluation forms are reviewed by the PA Admissions Committee, which decides to admit, deny admission, or place the applicant on an alternate list. An applicant previously on the alternate list must reapply for admissions into the PA Program. The WesternU PA program does not accept transfer students, nor is admission to the program deferrable. Decisions of the Admissions Committee regarding the admission of applicants to the Master of Science in Physician Assistant Studies program are final. Candidates accepted to WesternU must have a complete set of official transcripts mailed to the Admissions Office no later than July 1<sup>st</sup> of the year of matriculation in the PA program. For your information, CASPA retains the original set of transcripts it receives from applicants.

To meet State regulations and hospital accreditation requirements, health care facilities are requiring students to complete criminal background checks and urine drug screenings prior to beginning rotations/clinical experiences. Because of these requirements, designed to assure patient safety, students admitted to the PA program will be required to complete a criminal background check upon program acceptance and again prior to clinical rotations. Certain convictions may prevent students from entering hospital facilities, which may hinder a student's ability to complete the PA program successfully. If a criminal conviction or other relevant sanction is shown on the background check, hospital facilities have discretion as to whether the individual may enter the clinical facility as a student.

Certain convictions may also prevent students from obtaining licensure as a PA in the State of California or other states. Applicants and current students are advised to check with the appropriate State licensing board to determine whether their backgrounds may be a barrier to future licensing. Procedures for obtaining a background investigation and the costs to the student are available from the PA Clinical Education staff.

### Linkage Program(s)

The PA program has developed a special linkage program with California Polytechnic State University at Pomona, in which Cal Poly, Pomona, students meeting requirements mandated by the Pre-Professional advisor from Cal Poly, Pomona, and the PA program at WesternU, are given special consideration for admission. This is not an early admissions process. Applications for this linkage are handled by the Cal Poly, Pomona, Pre-professional advisor, Dr. John Chan, who can be contacted at 909-869-4086.

# **Transfers from Other Schools**

The Department of Physician Assistant Education does not accept transfer PA students.

# Registration

All MSPA students are required to register by the registration deadlines specified by the University Registrar. Registration dates are posted at: <a href="http://www.westernu.edu/registrar-online-information">http://www.westernu.edu/registrar-online-information</a>. Failure to register by the deadline may be grounds for administrative withdrawal. All students registering after the posted deadline will be assessed a \$30.00 per business day late fee.

Full tuition and fees and all prior debts must be paid in full on or by posted deadlines each academic year. Matriculation is subject to the satisfactory completion of all academic requirements and payment of all outstanding debts to the University. The receipt of a final transcript(s) from all colleges/universities attended and a physical examination with documentation of required immunizations prior to registration are additional requirements for incoming students. Also, all students must show proof of current health insurance coverage by the deadlines provided by the

University Registrar. This coverage must be maintained or in effect throughout the academic year. If there is no proof of current coverage, students will be automatically enrolled in the school sponsored insurance plan.

Attendance at Orientation is mandatory for all incoming first-year students.

#### **Full-time/Part-Time Status**

All students enrolled in at least one class/rotation are considered full-time students.

### **Time Limits**

The Master of Science in Physician Assistant Studies program is designed to be completed in two (2) years of full-time study. The requirements for the degree must be fulfilled within 3 years from the date of matriculation to the program.

# **Additional PA Program Education Requirements**

All students are required to have a laptop computer with internet access. Course assignments will be given that necessitate access to a computer and the Internet.

All students are required to participate as practice partners in physical examinations and clinical skills activities. This role necessitates the modest exposure of certain body parts such as the head, face, neck, torso, and extremities. At no time will breasts or genitalia be exposed or examined. Students are expected to practice exams on other students. Similarly, students are expected to be mock patients receiving physical examinations. The course instructor will randomly assign practice partners. Female/male pairing as practice partners is expected, and such pairings can only be changed in special circumstances as deemed appropriate by the PA Program Chair.

#### **Tuition and Fees**

By action of the Board of Trustees, PA tuition and fees for the 2013-2014 academic year (subject to change) are as follows:

\$35,740.00	Annual Tuition
\$40.00	Student Body Fee, Class of 2015
\$20.00	Student Body Fee, Class of 2014

### Other Fees and Expenses

\$1,900.00	Required and recommended texts
\$45.00	Uniform Jacket/Patch, Name Badge
\$1,200.00	Diagnostic Equipment Kit
\$1,000.00	Laptop Computer
\$60.00	Criminal Background Investigation (approx.)
\$40.00	Drug Screen (approx.)
\$30.00	Registration Late Fee (per business day)
\$350.00	Graduation Fee
\$470.00	Annual Parking Permit (Auto)
\$25.00	Parking Permit Replacement Fee
\$40.00	Locker Key Replacement Charge
\$10.00	Official Transcript (Each)
\$21.00	Rush Transcript, First Class Mail (Each)
\$25.00	Rush Transcript, Federal Express (Each)
\$10.00	Student ID Replacement Fee

TBD

The Department of Physician Assistant Education requires that each PA student purchase a classroom audience response system from the University Bookstore. Individual responders must be registered to only one (1) student. Classroom responders are electronic devices that will be used to enhance interactive learning in classrooms. The device will enable faculty to gauge student understanding of concepts, introduce more innovative teaching and assessment methods, improve student involvement in learning, and facilitate classroom learning to become more dynamic. The responders will also be used to administer and score assessments. Therefore, PA students are also required to bring responders to each class.

# **Academic Requirements**

#### **Academic Advisement**

Students will be assigned a faculty advisor by the Dean or the Dean's representative upon matriculation. Advisement by faculty should be viewed by the student as a part of the academic process. The student or faculty member may seek a change of advisor/advisee. This request should be made to the Chair of the Department of Physician Assistant Education. It is the student's responsibility to meet periodically with his/her advisor. A student on probation must meet with his/her faculty advisor at least once a month.

#### **Promotion**

A student's progress through the program is based upon successful completion of expected competencies and demonstration of expected professional behaviors and attitudes. At the completion of each phase of the program, before the student is allowed to progress to the next phase, the student's record of achievement is reviewed by the Program Chair and faculty.

The faculty determines if the student has demonstrated the knowledge, skills, and attitudes necessary to be eligible to progress to the next phase.

In special instances, the faculty may be convened at other than the scheduled times to consider cases relating to unusual circumstances, such as probation or dismissal.

Promotion is defined as progression from one academic semester or phase to the next.

- **a.** A student may not be recommended for progression from one semester or phase to the next with any outstanding grades of "I", "U" or "NCR" on his/her academic record or with a semester grade point average of 2.75 or less. Grades of "U" or "NCR" must be appropriately remediated before progression to the next semester or phase (see section entitled **Remediation**).
- **b.** When considering a student for promotion, professional, ethical, and personal conduct may also be taken into consideration (as described under Probation, a-5).
- **c.** A student will be promoted provided that all legal and financial requirements of the University as stated in the University Catalog have been satisfied.

#### Graduation

A student will be recommended for the Master of Science in Physician Assistant Studies Degree provided he/she:

- a. Has completed at least two years of the WesternU MSPA program.
- b. Has been enrolled in the WesternU MSPA program during his/her final academic year.
- c. Is not on probation and has completed all prescribed academic and clinical requirements with a cumulative grade point average of above 2.75 and has no outstanding grade of "I," "NCR," or "U".
- d. Has demonstrated no serious deficiencies in ethical, professional, or personal conduct, as defined in Probation guidelines, which would make it inappropriate to award the degree of Master of Science in Physician Assistant Studies.
- e. Has complied with all the legal and financial requirements of the University as stated in the University Catalog.
- f. Has attended in person and participated in the Commencement ceremony at which time the Master of Science in Physician Assistant Studies degree is conferred. Unless special permission has been granted by the Dean, each student must participate in their respective commencement ceremony. If the Dean grants special permission for excusal from commencement, the graduate may be required to present themselves to the Dean or their designee at another specified date to take their profession's oath before their diploma will be released. Requests for excusal will only be granted for extenuating circumstances, such as a prior military commitment.

Students may participate in commencement activities provided they will complete all requirements of the program by December 31<sup>st</sup> of that calendar year. No student will receive his or her degree until the student has completed all requirements for graduation. Degrees will be dated as appropriate to completion date.

# **Standards of Academic Progress**

Good academic standing implies that a student has not been requested to withdraw and is not under academic probation/suspension.

Academic performance encompasses those areas of knowledge and skills outlined in the section entitled "Program Goals". Students are expected to attain these goals as they progress through the Program.

All grading and evaluation is based on the student's ability to attain the competencies within the objectives outlined for each area of study.

A student whose performance falls below the minimum acceptable standard(s) for any area of study will be notified of such deficiency by the instructor of the course as soon as evidence of such sub-standard performance is available.

The following academic standards apply to students enrolled in the Physician Assistant Program. Academic performance is considered sub-standard and unacceptable if any one or more of these standards are not met:

#### Phase I

During Phase I (Didactic Phase), students must earn a minimum grade of "C" or "CR" in each course. All "U's" and "NCR's" will be remediated (see Remediation Section). If a remediated grade of "C" or "CR" is not earned, the student may be dismissed or be required to repeat the entire course of study.

Students must maintain a GPA of greater than 2.75. In addition, the following applies regarding cumulative GPA:

- 1. Students whose GPA is 2.75 or less must meet with their mentor at least monthly.
- 2. Students whose GPA is 2.75 or less are not eligible for further registration unless probationary status is granted by the Dean of the College of Allied Health Professions Education.
- 3. Students will not be allowed to advance to Phase II (clinical education) until all deficient grades are remediated.
- 4. First year students who receive a "U" of "NCR" in any course may only advance from one semester to the next with special consent from the Chair of the Department of Physician Assistant Education.

#### Phase II (Didactic and Clinical)

Didactic: Senior Seminar I, II and III and Applied Clinical Project Courses

- 1. In Senior Seminar I and II, a grade of "C" or better must be earned. Clinical rotations may be reassigned by the Clinical Education Coordinator to assist the student academically if the student receives a grade of "C" or less. Students must maintain a GPA of greater than 2.75.
- 2. If a student receives a "U" in Senior Seminar I, he/she must repeat the course; however, the student is allowed to progress to Senior Seminar II. If the Student receives a "U" in Senior Seminar II, he/she must repeat the course, and he/she will not be able to advance to Phase III.
- 3. If a student receives a "U" in Senior Seminar III, he/she must remediate the grade.
- 4. If a student receives a "NCR" in Applied Clinical Project I, II or III, the grade must be remediated.

# Phase II and Phase III (Clinical)

Students' progress through the program is based upon successful completion of expected competencies and demonstration of expected professional behaviors and attitudes. If students fail to meet the pre-designated clinical objectives, their academic achievements will be reviewed by the PA faculty. The faculty and preceptors determine if students have demonstrated the knowledge, skills and attitudes necessary to be eligible for progress to the next phase. Upon eligibility, the faculty recommends advancement to the College of Allied Health Professions Student Progress Committee.

If a student receives a grade of "U" in Phase II clinicals, he/she must repeat the rotation before advancing to Phase III. Clinical rotations may be reassigned by the Clinical Education Coordinator.

The College of Allied Health Professions Student Progress Committee and the Professional Conduct Committee may be convened to consider cases relating to unusual circumstances.

# Attendance/Absences

As the rigors of PA education are challenging, students are not permitted to work while in the PA Program. Attendance is expected for all lectures, classes, and academic-related activities. The individual faculty members will make their own policy about attendance in their syllabus. It is required that students observe the following policy:

#### **a.** Absences

- 1. <u>All</u> unanticipated absences due to illness, accident, or other unexpected events must be reported to the program within 24 hours.
- 2. Absences requested for physician/dentist appointments for student or dependents will be considered only if requested in advance of the appointment. Due to the intense nature of the curriculum, students are strongly encouraged to schedule appointments for evening and Saturday hours to avoid class conflicts.
- 3. All anticipated absences for any reason, including religious days, regardless of length, must have the prior approval by the faculty. All requests for anticipated absences must be submitted in writing at least two weeks prior to the proposed absence. Requests will be considered on an individual basis and written notification of approval or disapproval will be provided to the student within one week of receipt of request.
- 4. Students in clinical education/preceptorship are responsible for notifying both their supervising physician(s), and the Physician Assistant program, regarding all absences whether anticipated or unanticipated. Prolonged absences require notification each day to preceptors and the program. All time missed on a rotation due to an anticipated or unanticipated absence must be made up.
- 5. When an absence is the result of a sudden unavoidable circumstance, the program should be notified as soon as possible and provided with an explanation for the absence.
- 6. Clinical rotation education/preceptorship absences and tardies will be made up at the convenience of the preceptor or the program.
- 7. Five or more excused or unexcused absences from a clinical rotation education will result in repeating the entire rotation. Special circumstances will be considered by the clinical education coordinator or the PA Department Chair.

# **Student Behavior during Examinations**

**a.** Students are not to communicate in any way during the examination and are to face the front of the classroom at all times.

- **b.** During scheduled examination hours, students are highly discouraged from going to the bathroom, but will be allowed to go one at a time. The student will be required to turn in the exam and Scantron sheet as he/she goes to the bathroom.
- **c.** Once a student finishes an exam, the student will turn in the exam and the Scantron form to the proctor, and after he/she leaves the examination room, he/she will not be permitted to re-enter the room until the exam is declared over.
- **d.** All students' belongings, i.e., notebooks, calculators, headsets, backpacks and computers, etc., will be kept in front of the room.
- **e.** No questions will be permitted during the examination period.
- f. Alternate seating shall be utilized for all examinations unless precluded by space availability.
- g. All pagers, cellular phones, etc. are to be turned to vibrate mode or "off."

Any violation of these examination policies and/or Standards of Academic and Social Conduct will be brought before the Student Conduct Committee.

The course instructor sets the date of assignments, midterms, and final examination. All tests and assignments are to be taken as indicated in the course syllabus. Examination dates can only be changed by the instructor after reviewed and approved by the department chair.

## Children in the Classroom/Labs

The PA classroom is an environment for enhanced learning and should be free from unnecessary distraction. For this reason, children are not permitted in the classroom during examinations, no exceptions.

During the Pediatrics Course children will be invited to class to participate in the pediatric workshop.

# **Academic Warning (Probation)**

The student who demonstrates unacceptable performance in any unit of study during any phase of the program is notified of such performance by the Instructor of the course, faculty advisor, or Program Chair as soon as it becomes evident. He/she is notified that continued poor academic performance can lead to academic probation and dismissal.

Students whose performance is considered unacceptable as a result of not meeting the Standards of Academic Progress will be placed on probation. The duration and conditions of the probationary period will be recommended to the Dean of the College of Allied Health Professions on an individual basis by the College of Allied Health Professions Student Progress Committee. The Committee may recommend remedial study and/or repetition of a unit of study. This may result in extending the length of the program beyond 24 months. See, also, section on Probation, in the *General Academic Policies and Procedures* section for the University.

#### **Probation**

a. Probation is defined as a period of time specified by the Dean of the College of Allied Health Professions during which the student's progress will be closely monitored by the Allied Health Student Progress Committee, faculty advisor and the Department Chair. In order to closely monitor 2nd year students on probation, the PA program reserves the right to assign their clinical rotations. A student will be recommended for probation and may be asked to appear at a Student Progress Committee (SPC)meeting for any of the following reasons:

- 1. For first year students, achieving a cumulative score of less than 70% in three or more courses at the end of the first nine weeks of the curriculum.
- 2. Immediately upon receiving a course grade of "U" or "NCR" in any course.
- 3. A grade point average of 2.75 or less.
- 4. When directed to repeat a year for academic reasons.
- 5. Seriously deficient ethical, professional or personal conduct.

The Department of Physician Assistant Education Chair may render a written recommendation, or invoke the College Conduct Committee to render a recommendation, to the Dean of the College of Allied Health Professions regarding any student whose professional or personal conduct is deemed unsatisfactory. Professional and personal conduct includes, but is not limited to, attendance, cooperation with faculty, interest shown in assigned work, attitude toward fellow students and associates and toward personnel of hospitals, approach to and interaction with patients, as well as personal appearance appropriate to the circumstances.

The terms of probation for ethical, professional, or personal conduct will be specified at the time the student is placed on probation.

- b. When a student is placed on probation, he/she will be notified in writing by the Dean of the College of Allied Health Professions or designee and the reasons will be stated. The written notification will be sent via certified mail, email with receipt confirmation, or hand delivered and acknowledged by signatures of the student and the Dean of the College of Allied Health Professions or his/her designee. Copies of the letter will be placed in the student's permanent file and distributed to the Chairman of the Allied Health Student Progress Committee and the student's faculty advisor. The Allied Health Student Progress Committee will ascertain when the terms of the probation have been satisfied and recommend to the Dean that probation can be rescinded.
- c. A student on probation may not serve as an officer of any official University club or organization and shall not engage in time-consuming extracurricular activities.
- d. A 1st year student on probation must meet with his/her faculty advisor at least once a month. A 2nd year student on probation must contact his/her Faculty Advisor once a month.
- e. A 1<sup>st</sup> year on probation must visit the LEAD office for an Adult Learner's Assessment and obtain a tutor for the necessary areas of study to help insure program success.
- f. Students are removed from probation when the following occur:

- 1. At the end of the first semester of the first year provided that he/she has attained a grade point average of greater than 2.75.
- 2. After one semester, provided he/she has regained both a semester and cumulative grade point average of greater than 2.75.
- 3. When all "U" or "NCR" grades have been satisfactorily remediated according to the Remediation section of the Catalog (below).
- 4. When the specified terms of probation for ethical, professional or personal conduct are met.
- 5. When 2<sub>nd</sub> year students are on probation for a clinical rotation grade of "U", they will be removed from probation when they have met the terms of their probation.

#### Financial Aid Warning Policy (Title IV and Title VII)

If a student is not achieving satisfactory academic progress (SAP) they may be placed on "Financial Aid Warning" status for the next payment period and continue to receive financial aid for that period. Financial Aid is any financial assistance offered to the student for paying for their education, such as loans, scholarships, Federal Work-Study, grants and stipends (judged on the criteria of the stipend). Students who fail to make SAP by the end of the payment period lose Financial Aid eligibility.

It is the policy of the Financial Aid Office (FAO) that once a student has been placed on academic probation for not meeting SAP standards as defined by the College, the FAO will automatically place the student in a Financial Aid Warning status. During the next academic term, if the student does not meet SAP standards and the college places the student on academic suspension, the student will no longer be eligible for financial aid. If the student appeals the academic suspension and the appeal is approved, financial aid will be reinstated. If the student is directed to audit courses, those courses will **not** be covered by financial aid.

# **Tutorial Assistance Program**

A Tutorial Assistance Program (TAP) has been established to assist students experiencing academic difficulty. Students will be recommended for this program by a faculty advisor or professor. Students may self-identify to TAP to receive assistance. The tutors will be chosen on the recommendation of the faculty in each discipline. Group tutoring is the methodology most used by the TAP department. For assistance, contact the Learning Enhancement and Academic Development Office (LEAD).

## Remediation

a. Every effort will be made to give each student ample opportunity to demonstrate competency in each area of the academic program. However, remediation is to be regarded as a privilege that must be earned by a student through an active participation in the educational program as demonstrated by regular attendance, individual initiative, and utilization of resources available to him/her.

- b. If a student receives a "U" or "NCR" grade in a course, that student will be reviewed by the Physician Assistant Faculty who will make a recommendation regarding the student. The Department Chair will either:
  - 1. Implement the remediation process and place the student on academic probation.

This option is only for students who have not demonstrated previous academic difficulties, and have not remediated classes prior, and have not been recommended to the Student Progress Committee (SPC) in the past.

The Department Chair or designee will inform the student of the remediation and probation in writing. The student will acknowledge the remediation by signing and returning the document to the Department Chair or designee. A copy of the document will be forwarded to the SPC committee.

A student who needs to remediate two or more courses throughout the 24 month curriculum may be recommended for dismissal (See Dismissal Section).

2. Or submit the PA Faculty recommendation in writing to the SPC, who in turn provides a recommendation to the Dean of the College of Allied Health Professions.

In reviewing the student's academic deficiencies, the following guidelines shall be used:

- Educational objectives underlie remedial teaching and evaluation should be the same as the educational objectives that underlie regular courses in the curriculum. Where deemed appropriate, the Allied Health Student Progress Committee, after consultation with the course instructor and/or Physician Assistant Faculty, may recommend one or a combination of the following options:
  - a. Take a comprehensive examination (this option is not available if the student's final point score for a course is below 65%).
  - b. Repeat the course, with or without promotion into the subsequent semester. The student cannot start Phase II (clinical) or Phase III until the grade of "U" has been remediated. Students repeating a course will be charged full tuition for the course.
  - c. Repeat the academic year.
  - d. Dismissal from the University (see *Dismissal* section for criteria for this option).
- 2. Students receiving a "U" grade for a clinical rotation education/preceptorship will repeat the entire rotation/preceptorship. The above a-d options do not apply to

clinical education. Students will not be allowed to advance to Phase III (Advanced Clinical Preceptorship) until all deficient clinical rotation education grades are completed/remediated. Remediation will delay the student's progress to preceptorship and extend the program completion date. Additional tuition may be charged for the remediation.

- 3. The grade achieved by remediation will be the grade recorded EXCEPT that the highest grade a student may earn by option (a) is a grade of "C" or "CR". The grade achieved by remediation will be recorded on the transcript next to the original grade.
- 4. Grades earned during an attempted remediation of a course will be reviewed critically by the Allied Health Student Progress Committee and the Dean of the College of Allied Health Professions. Failure to earn at least a "C" or "CR" grade may result in dismissal from the University or repeating the course.
- 5. Decisions regarding remediation will be made on an individual basis after considering all pertinent circumstances in each case. The decision will be made by the Dean of the College of Allied Health Professions Education (or the Dean's designee), based upon the recommendation of the Allied Health Student Progress Committee. The Allied Health Student Progress Committee will base its recommendation on the student's academic record and considerations after consultation with the Physician Assistant Faculty and/or, course instructor, and the student.
- 6. Any student who is required to remediate a course will be notified in writing by the Dean or designee of the College of Allied Health Professions at least two weeks prior to the remediation date (or within four weeks after the close of the academic year in which the student is presently enrolled, whichever comes first). Notification must be by certified mail, email with receipt confirmation, or hand-delivered to the student and must be acknowledged with the signatures of the Dean of the College of Allied Health Professions, or his/her designee, and the student.
- c. Students who have been required by the Dean or designee of the College of Allied Health Professions to repeat a course(s) due to unsatisfactory grades (GPA) or in cases where there is a satisfactory GPA, but deficiencies are noted which impedes promotion, the following criteria must be met to be eligible for financial aid:
  - 1. Full-time attendance recorded
  - 2. Placed on at least one semester probation
  - 3. Must be tested and graded
  - 4. Close monitoring

It is the student's choice if he/she has made satisfactory progress such as GPA, but wants to audit only to strengthen skills, as long as he/she is fully aware he/she will not be eligible to apply for any financial aid. Students will be financially responsible for themselves until promoted by the Dean of the College of Allied Health Professions.

## Returning from Leave of Absence While in Phase II or Phase III

A student returning from a leave of absence of 3 months or more is required to complete one ½ day review session (arranged by the Clinical Education Department). The review session must be completed successfully before continuing with clinical education.

#### Student must:

- a. Demonstrate proficiency performing:
  - a. Complete Physical Exam
  - b. POP with a SOAP Note
- b. Review the following topics:
  - a. Universal Precautions
  - b. Sterile Techniques

A second session may be scheduled if deficiencies are noted by the faculty.

#### **Dismissal Recommendations**

A student may be subject to dismissal from the program for substandard academic or professional performance, as follows:

- **a.** Students who earn two or more unacceptable grades ("U's" or "NCR's") throughout the 24-month program may be dismissed from the program.
- **b.** Failure to successfully pass a course remediation exam as directed by the Dean or the Dean's designee.
- **c.** Attaining a semester GPA of 2.75 or less for two or more semesters.
- **d.** Lack of professional attributes considered appropriate for continuance in the program and profession.
- **e.** Any event that could result in either academic or professional probation for a student currently on academic or professional probation.
- **f.** Violation of the terms of probation.
- g. Presenting him/herself as a physician.
- **h.** Failing to complete the PA Program in the maximum 36 months from initial matriculation. Usual program completion is 24 months from initial matriculation.

## **Student Progress Committee**

a. The Student Progress Committee is comprised of department chairs and faculty members of the College of Allied Health Professions.

- b. Each year, the Student Progress Committee shall periodically review the academic achievements and the performance of all students. The names and grades of students in academic difficulty shall be made available to the Student Progress Committee by the department chairs and faculty members.
- c. After reviewing the student's achievement and performance records, the Student Progress Committee may recommend to the Dean of the College of Allied Health Professions any of the following courses of action for a student: promotion, probation, remediation, dismissal from the College, psychological and educational assessment and recommendation, or no action.
- d. The Student Progress Committee also has the responsibility of recommending to the Dean of the College of Allied Health Professions the candidates to receive the Master of Science in Physician Assistant Studies degree upon satisfactory completion of all requirements for graduation as stated in the University Catalog.
- e. All recommendations from the Student Progress Committee shall be made in writing and submitted to the Dean of the College of Allied Health Professions. The Dean of the College of Allied Health Professions provides the final decision regarding the student's outcome.

#### **Student Conduct Committee**

The College of Allied Health Professions (CAHP) Student Conduct Committee (SCC) shall consist of three elected CAHP faculty members, one appointed faculty member from outside the CAHP, and as ex-officio non-voting members, the Vice President of Student Affairs/designee and the University legal counsel. The chair of the committee is elected by the members and the committee meets at the call of the chair. The term of membership is three years with staggered terms. The committee is charged to set the Standards of Professional Conduct and to investigate violation(s) of professional conduct.

#### **Standards of Professional Conduct**

Upon accepting admission to the University, each student agrees to abide by basic standards of academic integrity, professional and ethical behavior. The student is responsible to read and abide by the University Student Catalog.

#### **Violations of Professional Standards**

The standards for student professional conduct require honesty and accountability in the educational process of professional development. Alleged violation(s) include, but are not limited to:

- Academic dishonesty
- Unprofessional conduct
- Illegal acts
- Failure to comply with University, College, and Department regulations

## **Reporting and Processing Procedures**

- 12. Upon witnessing or becoming aware of violation(s) of professional conduct, a report will be generated and turned into the department chair. The report will include the following information:
  - a. Name and signature of the individual making the report, and date, time, and place of alleged violation(s)
  - b. Name of the accused student
  - c. Alleged violation(s)
- 13. If the conduct involves a particular course or clinical experience, the classroom instructor, clinical instructor/preceptor or clinical coordinator will advise the Department Chair.
- 14. The Department Chair will meet with the student, the instructor or clinical coordinator, and/or the student's faculty advisor, individually or in a group, to discuss the nature of the alleged violation(s) that have been reported and the actions, if any that the Department Chair intends to take. The Department Chair may resolve minor infractions or refer the matter to the Dean.
  - a. The Department Chair gives written notification of the violation(s), including date, and involved student's name, and resolution to the involved student, with copies to the SCC and to the Dean within five business days.
  - b. The Department Chair also places a copy of the notification in the student's file, to be removed if no further incidents occur prior to graduation.
  - c. The student involved in the alleged violation(s) may request a hearing with
- 15. Matters which could not be resolved at a program level will be referred to the Dean for review. The matter may be resolved by the Dean, or the Dean may refer the case to SCC for a hearing. The student may accept the Dean's resolution or request a hearing by the SCC.
  - a. The Dean sends written notification of the violation(s), including date, involved student's name, and resolution to the involved student, with copies to the SCC, Department Chair, and Faculty Advisor within five business days.
  - b. The Dean also places a copy of the resolution in the student's file.
  - c. The student involved in the alleged violation(s) may request a hearing with SCC.
- 16. Hearing by CAHP SCC with recommendation to the Dean. The Dean or the student may request a hearing by the CAHP SCC. Because a violation(s) may have serious consequences (which may include dismissal from the University), the University has implemented procedures intended to insure that the student is provided fair notice of

any charges, and is afforded a reasonable opportunity to present evidence on his or her behalf.

- a. The Dean sends a written request to CAHP SCC, with the alleged violation(s) within five business days.
- b. The CAHP SCC will convene a hearing that follows procedures outlined in the University Policies and Procedures manual "Protocol for Handling the Alleged Violations of Professional Conduct by Student Performance Committees" policy number (A14.38.0.1) within five business days.
- 17. Information for Students about Hearings Involving Alleged Violations of the Standards of Professional Conduct. For a full account of the process, please refer to the General Section of the University Catalog.
- 18. **Status of Student Pending Action.** Pending a determination by the CAHP Dean following a hearing and a recommendation by the CAHP SCC, the student's status will not be altered except for reasons of his/her physical and emotional well-being or for reasons relating to the safety of other students and University personnel. Once the CAHP Dean has rendered a decision, the status of the student will not be altered pending determination of a timely appeal by the student, except that the Provost/Chief Operating Officer shall have the discretion and authority to suspend the student or take other action at any time during the appeal process. The University further reserves the right to withhold the awarding of any degree at any time disciplinary charges are pending against a student.
- 19. **Appeals Procedures.** The CAHP Dean shall have the authority to make decisions regarding a student's status in matters of academic suspension, student conduct, academic progression/promotion and graduation. The decision will be based on input from appropriate sources that may include the following: individual instructors, faculty, and appropriate committees.
  - a. Within five business days following written notification to the student of the action of the CAHP Dean, the student may appeal the decision in writing to the Provost/Chief Operating Officer (COO). The appeal request must be accompanied by a narrative explaining the basis for the appeal. The narrative should fully explain the student's situation and substantiate the reason(s) for advocating a reversal of the prior decision of the CAHP Dean. The Provost/Chief Operating Officer may grant an appeal only if one or more of the following claims are made and substantiated:
    - i. Bias
    - ii. The appearance of new, material and documentable evidence that was not available at the time of the CAHP Dean's decision
    - iii. Procedural error that unfairly affected the decision-making process
  - b. Upon written request from the student, the Provost/Chief Operating Officer shall review the case and, within seven business days, shall issue a decision in writing to the student, which may affirm, modify, or reverse the previous

action. A copy of that written decision shall be sent to the Dean, and other appropriate individuals. The decision of the Provost/Chief Operating Officer will be final.

- 20. Procedures Pending Outcome. The student may remain in class or on clinical rotations or assignments pending the outcome of appeals, except in cases of summary suspension, and except when the Provost/Chief Operating Officer has suspended the student or has otherwise determined that it is inappropriate for the student to remain in class and/or participate in clinical rotations/assignments, consistent with the decision of the CAHP Dean that is being appealed.
- 21. Suspension Pending Outcome. If a student is suspended for any reason, all financial aid to that student will be held until the appeal process is resolved by reinstatement of the student or dismissal of the student. If reinstated, the financial aid funds can be released to the student. If the student is dismissed, the funds will be returned to the proper agency/lender.
- 22. **Additional information**. Additional information about the University's Standards of Professional Conduct and the hearing and appeal process is contained in the University's Catalog. Students may also contact Dr. Beverly Guidry, Vice President for Student Affairs at 909/469-5341 for additional information regarding the appeal process.

#### **Clinical Education**

#### **Out-of-Area Clinical Education**

Clinical Education that is greater than a 60 mile radius in any direction from WesternU, Pomona Campus, is considered an out-of-area rotation clinical education. Permission for out-of-area rotations is granted by the Clinical Education Coordinators and the PA Faculty.

To participate in out-of-area rotations, students must:

- Have a computer with internet access.
- Exemplify ethical and professional behavior throughout his/her didactic and clinical rotations phase.
- Have a GPA of 3.00 at the time of rotation scheduling and maintain a semester and cumulative GPA of 3.00 for the entire program.
- Receive a "B" or better on all preceptor assigned grades and maintain a "B" or better in Senior Seminars I, II, and III.
- Have a 3.50 cumulative/semester GPA at the time of clinical education scheduling to
  participate in out of area rotations during the first and second months of clinical
  rotations and the student will be returning to within the 60 mile radius by the third
  month of rotations.
- Have confirmation of housing and travel arrangements available to the clinical coordinators at the time of scheduling.

 Provide the Clinical Education Coordinator(s) with transportation and room and board for out-of-area site visits as warranted.

The Clinical Education Coordinator has the right to reassign rotations if the preceding criteria are not met.

# **Clinical Rotation Education Assignment**

Clinical rotations will be assigned by the clinical coordinator(s) for students with semester or cumulative GPAs less than 3.00. The clinical coordinator(s) may seek input regarding rotation assignments from the PA faculty and/or chair. The student will meet with the clinical coordinator for their scheduling appointment to discuss the rotation assignments. If a student is successful in raising his or her semester and cumulative GPA to a 3.00 at the end of a semester, the clinical coordinator(s) will attempt to reschedule the rotations(s) if requested by the student, pending site availability. Students requesting to reschedule rotations based upon an improved GPA must follow the procedures outlined in the section entitled **Clinical Rotation Education Assignment Appeal** (below).

# **Clinical Rotation Education Assignment Appeal**

A change in clinical rotation education assignment may be requested in writing by the student for the following reasons:

- After completing one week in the rotation, the student deems the rotation is not of high quality.
- The student is requesting a change in a clinical rotation assignment for a specific month under a preceptor not affiliated with the PA Program.
- The student is being used to substitute for regular clinical or administrative staff.

Completed paperwork requesting an upcoming rotation change must be submitted to the Clinical Education Coordinator(s) 60 days before the rotation is scheduled to begin. The student will be notified of the approval/non-approval of the request within 24 hours.

#### **Reassignment of Clinical Rotation Education**

Any student who receives one or more "C's" on a preceptor assigned grade for the clinical rotation or receives a "C" grade in any Senior Seminar Course, may have the remainder of their clinical rotations reassigned by the Clinical Education Coordinator(s) to more closely monitor clinical development and academic performance.

#### **Rotational Clinical Education Observation**

Any student who has been "deemed unsafe" may be placed in an observational mode for the remainder of his/her rotation. A student may be placed in observation mode for one month only, and then a summary suspension may occur. Summary suspension may be implemented instead of observation mode.

## **Personal Appearance**

Personal appearance is extremely important in facilitating acceptance by other health professionals and patients. The poor appearance of one individual is often generalized to the entire profession. Adherence to the following dress code is, therefore, the responsibility of each student while in clinical training.

- 1. Physician Assistant Program name tags/badges are to be worn at all times while on campus, and at clinical rotation education sites.
- 2. Short white "intern" type jackets are required at all times, beginning with Phase II of the curriculum.
- 3. Female students may wear slacks (minimum length is at the ankle), or other appropriate dress or skirt. Modesty must be a consideration for necklines and hemlines (minimum knee length).
- 4. Shirt and tie are considered appropriate dress for male students when they are present in a setting where patient contact can be expected. Students must receive the approval of the supervising practitioner to wear "scrubs" during the rotation. The white coat must be worn over scrubs except while in the surgical suite.
- 5. "Blue jeans" are NOT appropriate dress for either male or female students during the clinical phases.
- 6. "Tennis Shoes", "Joggers", and other forms of athletic shoes are NOT considered appropriate attire.
- 7. Students should consider the image projected to the patient and others with regard to hairstyle and length, beards, mustaches and jewelry. Long hair should be worn up.

## **Professional Conduct during Clinical Education**

Professional and personal conduct includes, but is not limited to attendance, cooperation with preceptors, interest shown in assigned work, attitude toward fellow students, associates and personnel of hospitals and approach to and interaction with patients.

- Students will introduce themselves as physician assistant students.
- Students will wear their WesternU identifying nametags when in a clinical setting at all times.
- Students will be able to explain what a PA is concisely and confidently to patient(s) and staff.
- Students who introduce themselves as a physician are subject to dismissal from the program.
- Students will not engage in any activity that may be construed as being unethical, immoral or inconsistent with the practice of medicine.

Students breaching the Professional Conduct Policy will go through the following process:

The student will be required to have a student conference with the Department Chair and/or Clinical Education Coordinator(s). The breach of conduct will be investigated and the student will be notified of the results of the investigation. A verbal warning may be issued and/or a letter of unprofessional conduct may be placed in the student's file. Program dismissal may be recommended. A student may be placed in observational mode by the Department Chair during the investigation, or may request that the student be summarily suspended during the investigation.

## **Confidentiality of Medical Record and Health History Information**

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

- a. Students should not discuss a patient's records in a manner or a situation that would reveal any information about that patient or his/her records to persons not involved in his/her health care.
- b. Charts or contents, e.g., lab reports, etc., are not to be removed from the hospital or clinical setting.

## **Patient Records - Physician Review and Countersignature**

On each clinical rotation education, it is the student's responsibility to insure that ALL patients seen by the student are also seen by the supervising practitioner. The supervising practitioner should also review all student notes written in medical records and countersign these documents. Countersignatures should be obtained before the patient is released on outpatient and inpatient rotations.

If using electronic health records, students are expected to use their own login and password provided to them by the appropriate individuals at the rotation site. Students cannot use the preceptor's personal login or password to enter patient information into the electronic record.

Under no circumstances should a student initiate orders for any patient on any clinical educational rotation without immediate physician consultation and countersignature. In addition, under no circumstances should a student sign medical drug orders.

Under no circumstances should a student accept samples from pharmaceutical representatives on behalf of the preceptor or himself/herself.

These guidelines must be strictly adhered to for the student's protection and the protection of the patients seen by students. Violations of these policies are viewed as transgressions in professional and/or academic standards.

#### Falsifying a patient's exam findings or record is considered a breach of professional conduct.

# **Title Identification/Representation**

Role and title confusion are common problems encountered in dealing with patients, e.g., some patients identify all those wearing short white coats as physicians. Students should be aware of this problem and avoid misrepresentation by politely explaining their role and position.

- **a.** In professional interactions with patients and others, a student should introduce himself or herself as a "physician assistant student" using the title of Mr. or Miss, Mrs., or Ms.
- **b.** Students should use the designation, "P.A.-Student" (PA-S), following all notations in charts, records, and other medical forms.

# **Evaluation and Grading**

- a. General: Competency is expected of all program graduates upon completion of the professional curriculum as defined by the "Program Goals". The curricular components of the program are designed so that students' work toward achievement of these competencies is measured via written and practical examinations and by evaluations of clinical performance and professional development. Specific behavioral objectives have been defined for each curricular component to assist the student and the program faculty in evaluating the degree of attainment of these expected competencies throughout the 24-month curriculum.
- **b. Evaluation Methods:** Overall student performance is evaluated using one or a combination of the following methods:
  - a. **Written examinations:** Written examinations will vary based on the content of the individual course. A combination of single answers multiple choice, matching, short answer, essay and patient management type questions are used.
  - b. **Practical or Laboratory Examinations:** In selected courses, students will be observed obtaining histories or performing physical exam components on simulated patients. They may also be asked to "problem solve" based on a patient database. At times, they will be evaluated on their ability to perform laboratory tests.
  - c. **Student Presentations:** Students may be asked to orally present individual or group projects, patient cases, research papers, etc. These oral presentations may or may not be accompanied by a written report.
  - d. **Written reports:** At various times, students will be evaluated on written reports of assigned topics, written histories, physicals, discharge summaries, research papers, etc.
  - e. **Professional Development Assessments:** Assessments of each student's academic, professional and interpersonal growth and development are shared with them on an individual basis periodically during each phase of training.
  - f. Clinical Evaluations: Supervising preceptors are asked to assess the student's level of attainment of competencies related to selected parameters within the domains of knowledge, skills and attitudes, and to evaluate the student's overall performance while on clerkship. Evaluation forms, which incorporate these areas to be evaluated, are utilized.

Students are responsible for securing these evaluations from the supervising preceptor(s) on each rotation and ensuring that they are completed and returned to the program office in a timely fashion. Preceptors are encouraged to discuss the student's performance and progress throughout the rotation with him/her and to discuss the final evaluation prior to completion of the rotation.

Since the clinical evaluation is an essential part of the overall assessment of the student's performance on a given rotation, course grades will not be computed

without it. Students who fail to obtain clinical evaluations prior to the end of the respective clinical rotation will be given a grade of incomplete "I" for that clinical course. Courses with incomplete grades must be completed prior to advancing to preceptorship (Phase III).

Clinical evaluation forms become a part of the student's academic profile record. Students are urged to sign each evaluation and are encouraged to sign at the time the evaluation is discussed with the supervising preceptor. Students are provided copies of all their clinical evaluations when these are submitted by the preceptor to the program.

- g. **Patient Write-ups:** Students on clinical rotations are required to submit a minimum of one patient write-up each month in the S.O.A.P. format. The chosen case must represent conditions listed in the objectives for each module. The write-ups are due in the PA Program Office on or before the last day of the clinical rotation.
- h. **Literature Review:** Students can be requested to review current literature and complete a critique. The critique will be evaluated on content, validity, clarity and clinical relevance.
- i. Final Comprehensive Examination: A comprehensive examination is administered during the Senior Seminar III and serves as a summative examination. This examination evaluates the student's accumulated knowledge, skills and attitudes needed for PA practice while familiarizing him/her with the format of the certification examination. Like the NCCPA certification examination, this examination consists of a written multiple choice exam including questions on clinical skills competency.
- j. **Grade Reports:** Official grades are turned in to the Registrar from Department of PA Education, at which time the online student records system, BanWeb, is updated. Official grade reports and unofficial transcripts will be available on the BanWeb student records systems throughout the academic year. For more information on how to access the BanWeb student records system, visit the Registrar's website at http://www.westernu.edu/registrar.

Due to the nature of the clinical curriculum, i.e., variable duration and sequencing of clinical education courses, course completion dates rarely coincide with traditional grading periods.

In these cases when final grades are not available at grade reporting time beyond the control of the student and/or program, a grade of "M" is submitted to the Registrar in lieu of the course clinical education grade. "M" grades are entered on the grade reports and are converted to student achieved grades at the earliest possible opportunity.

An up-to-date summary of student performance is maintained in the Program Office Files and is available to each student for his/her review.

k. **Review of Examinations:** Multiple choice examinations are graded no later than one working week after the exam and ten (10) working days for written examination

administration, and copies of the examination are kept on file for student review for five (5) working days after the grades have been released to the students.

# **Grading Scale**

Final course grades are given based upon the traditional 4-point letter system, as follows:

<u>Grade</u>	<u>Equivalent</u>	<b>GPA Points</b>
Α	90-100%	4.00
В	80-89%	3.00
С	70-79%	2.00
U	Less than 69%	0.00
CR	Credit	N/A
NCR	No Credit	N/A

#### **ADMINISTRATIVE GRADES**

<u>Grade</u>	<u>Equivalent</u>	<b>GPA Points</b>
AU	Audit	N/A
1	Incomplete	N/A
W	Withdrawal	N/A
M	Missing	N/A

## **Clinical Rotation Education Grading Criteria**

The Clinical Education grade is based on the student's performance as assessed by the preceptor, the student's participation and rotation exam.

#### **Credit Hour Calculation**

One semester hour of credit equates to 12 hours of lecture or 24 hours of laboratory work.

# **Grade Appeals Process**

## **Appealing a Course Grade**

No course grade will be changed unless the instructor or department chair certifies in writing to the Registrar that an error in computing or recording the grade occurred. If the student believes there is just cause to dispute a grade for a course, the procedure is as follows:

Within five (5) days of receipt of the course grade, students must schedule an appointment to talk to the course instructor(s) who issued the grade. Upon written request from the student, the course instructor(s) shall review the case with the student and a decision shall be made by the course instructor to affirm or modify the grade. Within ten (10) working days of the student's written request, the course instructor shall notify the student in writing of the decision. A copy of the letter shall be sent to the student and the Department Chair of the PA program.

Within five (5) working days following written notification to the student regarding the instructor's decision, the student may appeal the decision in writing to the PA Department Chairperson. The appeal request must be accompanied by a narrative explaining the basis of the appeal. The narrative should fully explain the student's situation and substantiate the reason(s) for advocating a reversal of the instructor's prior decision. The PA Department Chairperson may grant an appeal only if a claim of (1) bias, (2) the appearance of new material and documentable evidence

that was not available at the time of the instructor's decision, or (3) procedural error that unfairly affected the decision-making process is substantiated by the PA Department Chairperson. Upon written request from the student with a valid appeal rationale, the PA Program Chairperson shall review the case and within seven (7) working days shall issue a decision in writing to the student, which may affirm, modify, or reverse the previous action. A copy of that decision will be provided to the instructor. The Chairperson's decision is final in all course grade appeals (didactic and clinical), except when the Chairperson is also the official instructor of the course in question. In such a case, the student will direct his or her appeal to the Dean of the College of Allied Health Professions, following the same guidelines for an appeal to the Chairperson. Also in such a case, the decision of the Dean is final.

The student may remain in class or on clinical rotations pending the outcome of appeals, except in cases of summary suspension or when the Provost/COO or the Dean of the College of Allied Health Professions has suspended the student or has otherwise determined that it is inappropriate for the student to remain in class or participate in clinical rotations.

## **Appealing a Clinical Education Grade**

Any student, who has a dispute with a grade that was assigned by their clinical preceptor, will utilize the following appeal process:

- 1. Contact the Clinical Education Coordinator(s), and notify them in writing of their concerns in reference to their clinical performance grade.
- 2. The Clinical Education Coordinator(s) will contact the preceptor to schedule a meeting to discuss the student's grade. The grade may or may not be re-assigned contingent upon the information that is gathered by the Clinical Education Coordinator(s). The Clinical Education Coordinator(s) will provide the student with a written decision of the outcome of this review within fourteen (14) working days of the student request. The decision of the Clinical Education Coordinator(s) may be appealed following the procedure for Grade Appeals as described above.

# Communications: Lockers, Email, Mail

To improve the communication network and to foster student-staff and student-student interchanges, lockers are located in the Health Professions Center (HPC). Students are expected to follow the guidelines below in checking their lockers and will be held accountable for absences at activities announced via the locker system. In the event that time constraints necessitate quick dispersal of information, the program will disseminate this information via e-mail or through telephone communication.

- **a.** Each first-year student will be assigned one locker during orientation.
- **b.** During the didactic year in the Physician Assistant Program your locker should be checked on a daily basis.
- **c.** Email should be checked twice daily. It is suggested to check in the morning and in the evening.
- **d.** Correspondence from the program will occur as either traditional mail or E-mail, with E-mail being the preferred delivery choice.

**e.** During any portion of the program for which the student is out of town, e.g., remote clinical site, holidays, correspondence from the program will be mailed or electronically mailed to the student.

# Telephone

- **a.** Each student is responsible for advising the Registrar and the PA program's departmental secretary of telephone number changes as soon as they occur.
- **b.** Students are not to make or receive personal calls on the office telephones.
- **c.** Pagers and cell phones must be in silent/vibrate mode during all class times and examinations.

# **Issue/Dispute Resolution Procedure**

When an issue or dispute arises between students, the issue/dispute resolution process starts with communication among the involved students. If a satisfactory resolution is not arrived at that level, the matter should then be addressed with the course instructor or the faculty advisor. If the problem is not resolved at the faculty advisor/course instructor level, the matter should be brought to the Department Chair, followed by the Dean and then the Provost/COO. If the matter has not been resolved at those levels, the final arbiter is the President.

When an incident arises involving a faculty member, the first step in the issue/dispute resolution process is discussion with the faculty member. If the matter is not satisfactorily resolved at that level, then the matter should be referred to the Department Chair, Dean, and Provost/COO, in that order. The final arbiter is the Board of Trustees.

When an incident arises involving a staff member, the dispute resolution process begins with the Department Chair, followed by the Dean. The Office of Human Relations is the final arbiter.

Failure to follow this sequence of steps will only serve to delay the appropriate resolution of the issue or dispute as the matter will only be referred back to the correct level in this chain of responsibility.

# **Curriculum Organization**

# Year 1

Phase I, First Year, F	Phase I, First Year, Fall Semester		
Course	Title	Credit Hours	
PA 5005	Medical Terminology	1.00	
PA 5010	Structure & Function I	4.00	
PA 5020	Clinical Skills I	2.00	
PA 5030	Physical Assessment I	3.00	
PA 5040	Health Promotion/Disease Prevention I	3.00	
PA 5050	Introduction to Adult Medicine	4.00	
PA 5060	Pharmacology and Therapeutics I	3.00	
PA 5100	Pediatrics I	2.00	
PA 5170	Pathophysiology I	2.00	
IPE 5000	Patient Centered Cases I	1.00	
	Semester Total:	25.00	
Phase I, First Year, S	pring Semester		
Course	Title	Credit Hours	
PA 5011	Structure & Function II	4.00	
PA 5021	Clinical Skills II	3.00	
PA 5031	Physical Assessment II	3.00	
PA 5041	Health Promotion/Disease Prevention II	2.00	
PA 5051	Introduction to Adult Medicine II	4.00	
PA 5061	Pharmacology and Therapeutics II	3.00	
PA 5101	Pediatrics II	2.00	
PA 5171	Pathophysiology II	2.00	
HSCI 5206	Research Methods II	3.00	
IPE 5100	Patient Centered Cases	1.00	
	Semester Total:	27.00	
Phase I, First Year, S			
Course	Title	Credit Hours	
PA 5070	Psychosocial Dynamics	3.00	
PA 5110	OB/GYN	3.00	
PA 5120	Geriatrics	3.00	
PA 5130	Emergency Medicine	3.00	
PA 5140	Professional Roles & Responsibilities	2.00	
PA 5160	Health Care Delivery System	2.00	
PA 5180	Transitional Skills Seminar	1.00	
	Semester Total:	17.00	

# Year 2

Phase II, Second Ye	Phase II, Second Year, Fall Semester		
Course	Title	Credit Hours	
PA 6020	Senior Seminar I	3.00	
###	Clinical Rotations (4 rotations)	12.00	
PA 6970	Applied Clinical Project I	1.00	
	Semester Tota	al: 16.00	
Phase II, Second Year, Spring Semester			
Course	Title	Credit Hours	
PA 6030	Senior Seminar II	3.00	
###	Clinical Rotations (4 rotations)	12.00	
PA 6980	Applied Clinical Project II	1.00	
	Semester Tota	al: 16.00	
Phase II, Second Year, Fall Semester			
Course	Title	Credit Hours	
PA 6040	Senior Seminar III	2.00	
###	Clinical Rotations (3 rotations)	9.00	
PA 6990	Applied Clinical Project III	6.00	
	Semester Tota	al: 17.00	
	Program Tota	al: 118.00	

# **Course Descriptions**

## **HSCI 5206 Research Methods II (3 credit hours)**

The purpose of this course is to introduce students to a variety of research methodologies. Included will be historical studies, case studies, observational studies, the survey, quasi-experimental designs, and experimental designs. Generalizability issues and validity/reliability issues related to research are presented. HPE 5106 or its equivalent is a prerequisite for this course.

# IPE 5000 Patient Centered Cases I – An Interprofessional Approach (1 credit hour, CR/NCR)

This course is offered as part of the College curriculum for all first year entry level health professional students and is a university graduation requirement for all participating colleges. The course is designed to prepare the health care student to practice patient-centered, collaborative care through a team approach. Working in small interprofessional teams, students will explore cases representing conditions across the human lifespan.

# IPE 5100 Patient Centered Cases II— An Interprofessional Approach (1 credit hour, CR/NCR) Continuation of IPE 5000.

# OM 5001 Summer Medical Sciences Preparatory Program (0 credit hours, CR/NCR, Optional)

The Summer Preparatory Program prepares incoming students for the anatomy course and provides an introduction to biochemistry. The anatomy component focuses on the skeletal, muscular, cardiovascular and nervous systems, yet provides a brief overview of other body systems. It is designed for the student without prior coursework in anatomy. Acceptance into this program is at the discretion of the instructor/coordinator. The course is an elective and does not meet any requirements for graduation. A separate tuition of \$750 is charged.

# PA 5005 Medical Terminology (1 credit hour, CR/NCR)

This course is designed to provide a framework for building a comprehensive medical vocabulary. The basic techniques of medical word building will be used to enhance appropriate use and spelling of medical terms in oral and written presentations.

#### PA 5010 Structure and Function I (4 credit hours)

This course is designed to elucidate the characteristics of human anatomy and physiology as a basis for understanding normal homeostasis and the abnormalities associated with disease. Course content includes biochemical homeostasis, microbiology, the anatomy and physiology of the body including special senses (eyes, ears), blood and lymphatic systems, respiratory system, the cardiovascular system, and the integumentary.

# PA 5011 Structure and Function II (4 credit hours)

Continuation of PA 5010. Course content includes the anatomy and physiology of the gastrointestinal system, musculoskeletal system, neurological system, the endocrine system, the immune system, and the role of genetics and molecular mechanisms in health and disease.

#### PA 5020 Clinical Skills I (2 credit hours)

This practical course exposes the physician assistant student to basic clinical skills used in the primary care office. Skills include, but are not limited to, venipuncture, universal precautions, suturing, casting and sterile procedures.

## PA 5021 Clinical Skills II (3 credit hours)

Continuation of PA 5020.

# PA 5030 Physical Assessment I (3 credit hours)

This course is designed to provide students with fundamental cognitive knowledge of interviewing, formulating write-ups and physical assessment techniques. Students also learn how to analysis data and the formulation of a therapeutic plan based on the health history, and physical examination. This course is correlated with the Introduction to Adult Medicine.

# PA 5031 Physical Assessment II (3 credit hours)

Continuation of PA 5030.

# PA 5040 Health Promotion and Disease Prevention I (3 credit hours)

This course stresses the principles of wellness including detailed discussions of nutrition, exercise, alcohol and tobacco as they relate to culturally diverse patient populations.

#### PA 5041 Health Promotion and Disease Prevention II (2 credit hours)

Continuation of PA 5040.

# PA 5050 Introduction to Adult Medicine I (4 credit hours)

This course represents an introduction to clinical adult medical and surgical disorders as well as pathophysiology from a primary health care perspective. This course is correlated with structure and function, pharmacology, and physical assessment. It also incorporates signs, symptoms, differential diagnosis, laboratory diagnosis and treatment modalities for selected disciplines.

#### PA 5051 Introduction of Adult Medicine II (4 credit hours)

Continuation of PA 5050.

## PA 5060 Pharmacology and Therapeutics I (3 credit hours)

This course stresses the principles of drug action and is correlated with the system orientation of the "Introduction to Adult Medicine." Current aspects of drug therapy are studied with particular emphasis on the activity.

# PA 5061 Pharmacology and Therapeutics II (3 credit hours)

Continuation of PA 5060.

# PA 5070 Psychosocial Dynamics (3 credit hours)

This course provides students with the necessary skills to diagnose and treat common mental health disorders seen in an ambulatory family practice population. It also provides the students with information that enable them to factor "humanity" into their assessment, diagnosis and intervention strategies. The course also includes modules on family structure and functioning, the dynamics of aging, death and dying, and human sexuality.

## PA 5100 Pediatrics I (2 credit hours)

This course will provide the primary care physician assistant student with an introduction to the basic principles of pediatrics. This pediatric course will provide the students with the basic cognitive skills required to obtain and perform an appropriate newborn, pediatric and adolescent history and physical.

# PA 5101 Pediatrics II (2 credit hours)

Continuation of PA 5100.

## PA 5110 Obstetrics/Gynecology (3 credit hours)

This course is designed to introduce the PA student to the fundamental principles and practice of obstetrics and gynecology and the unique physical and emotional health care needs of female patients. Emphasis will be placed on the pathophysiology, etiology, management and prevention of clinical problems that transpire in a woman's life cycle from infancy through menopause. Students will also learn the essential details of the OB-GYN clinical evaluation and strategies in the diagnosis and treatment of common OB-GYN medical, surgical, and obstetric disorders of women.

# PA 5120 Geriatrics (3 credit hours)

This course introduces the students to all aspects of geriatrics. The course provides a framework for common geriatric illness, diseases, diagnoses and treatment. It discusses normal and pathologic changes of aging. It explores health care financing for the elderly. Common ethical and legal issues in caring for the elderly are discussed.

#### PA 5130 Emergency Medicine (3 credit hours)

This course emphasizes assessment skills in emergency medicine. It would provide students with an overview of emergency medicine, history and physical examinations. The course will introduce current diagnosis and treatment for commonly encountered medical emergencies. The student should be able to develop a working knowledge and framework for the evaluation and treatment of common medical and surgical procedures.

#### PA 5140 Professional Roles and Responsibilities (2 credit hours)

This course examines the different professional roles that can be assumed by a physician assistant. Also included are discussions of the laws in which PA's are required to follow to practice medicine and the health care delivery system.

# PA 5160 Health Care Delivery Systems (2 credit hours)

This course will introduce the student to the current models of health care delivery systems utilized within healthcare. It will also identify the roles of a PA within the current health care delivery systems.

# PA 5170 Pathophysiology I (2 credit hours)

This course is designed to enhance student knowledge in recognizing and identifying pathophysiology states for specific disease processes. This course is correlated with the Introduction to Adult Medicine course.

## PA 5171 Pathophysiology II (2 credit hours)

Continuation of PA 5170.

# PA 5180 Transitional Skills Seminar (1 credit hour, CR/NCR)

This course assists the PA students' transition from the classroom to a clinical environment. Students will refine the skills necessary to complete clinical education rotations successfully.

## PA 6020 Senior Seminar I (3 credit hours)

Senior Seminar consists of a series of examinations and discussions. Clinical skill problems, case presentations, and problem oriented physical examinations are used as teaching tools to help the physician assistant student understand his/her role as a practicing PA.

## PA 6030 Senior Seminar II (3 credit hours)

Senior Seminar II consists of a series of examinations and discussions. The purpose of the course is to further develop the physician assistant student's clinical skills and test-taking abilities.

## PA 6040 Senior Seminar III (2 credit hours)

Senior Seminar III consists of a comprehensive examination and a problem oriented physical. The purpose of the course is to further develop the physician assistant students' clinical skills and prepare for the National Certification examination.

## PA 6970 Applied Clinical Project I (1 Credit Hour, CR/NCR)

Preparation of a clinical project, under the supervision of a member of the PA faculty, which will be completed and presented in PA 6990.

#### PA 6980 Applied Clinical Project II (1 Credit Hour, CR/NCR)

Continuation of PA 6970.

#### PA 6990 Applied Clinical Project III (6 credit hours, CR/NCR)

In this course, the student presents the Clinical Project in partial fulfillment of requirements for the degree of Master of Science in Physician Assistant Studies.

# PA 7010 Family Practice /Common Psychiatry (3 credit hours)

A clinical rotation that provides students with experience in a primary health care setting and will focus on medical and behavioral/psychiatric problems most commonly encountered by a family practitioner and certified physician assistant. Repeatable to a maximum of 15 credit hours.

#### PA 7030 Internal Medicine (3 credit hours)

A clinical rotation that provides students with the opportunity to diagnose, manage, and treat patients in an in/outpatient setting. The student will participate in the direct care of patients including initial interview, physical examination, hospital rounds, clinical conferences and management decision sessions. Repeatable to a maximum of 12 credit hours.

#### PA 7040 Emergency Medicine (3 credit hours)

Students obtain experience in the management of acute medical and surgical care with an emphasis on the development of skills required to treat life-threatening illness and injury. Repeatable to a maximum of 12 credit hours.

#### PA 7060 Pediatrics (3 credit hours)

Students gain knowledge in the care of infants and children, including an understanding of normal development, and the recognition and management of common childhood illness, immunization updates and patient education opportunities. Repeatable to a maximum of 6 credit hours.

# PA 7070 Obstetrics and Gynecology (3 credit hours)

Students learn about women's health issues: preventive care, prenatal care and post natal care, current contraceptive technology, and medical therapeutics which aid in the well-being of the female patient. Repeatable to a maximum of 6 credit hours.

# PA 7080 General Surgery I (3 credit hours)

Students are involved in the direct care of patients undergoing surgery including both presurgical evaluation and post-surgical maintenance. Students may select either in-patient or outpatient surgical settings. Repeatable to a maximum of 6 credit hours.

## PA 7130 Geriatrics (3 credit hours)

Students develop the ability to recognize, diagnose, and treat the most commonly encountered health conditions of a geriatric population. The students will be able to assess and treat chronic medical conditions in various stages of progression.

# PA 7500 Extended Core Selectives (3 credit hours)

Students can pursue additional experience in a variety of clinical specialties and sub-specialties or they can extend their knowledge by repeating one of the required clinical rotations up to the maximum limits permitted per lettered course. PA 7500 Extended Core Selectives that do not indicate that the course is repeatable can only be repeated with special approval of the Clinical Education Coordinator.

<u>Course</u>	<u>Title</u>	Repeatable?
PA 7500A	Orthopedics	Yes, 9 credit hour maximum
PA 7500B	Oncology	No
PA 7500D	Infectious Disease	No
PA 7500E	Cardiology	Yes, 9 credit hour maximum
PA 7500F	Cardiothoracic Surgery	No
PA 7500G	Urgent Care	Yes, 6 credit hour maximum
PA 7500J	Rheumatology	No
PA 7500K	Endocrinology	No
PA 7500L	Dermatology	Yes, 6 credit hour maximum
PA 7500M	Occupational Medicine	No
PA 7500N	Trauma Surgery	No
PA 7500P	Psychiatry	Yes, 6 credit hour maximum
PA 7500R	Community Medicine	Yes, 6 credit hour maximum
PA 7500S	Neurology	No
PA 7500T	Critical Care	No
PA 7500Z	Other	Yes, only upon approval of PA department.

# **Honors and Awards**

The following are presented at the Graduation Awards Ceremony:

Alpha Eta Honor Society

Alumni Memorial Award

Andrea J. Reina Memorial Award

Arthur Madorsky, MD Memorial Scholarship Award

Blake Award of Academic Excellence

Class Award

Class Morale Award

Dean's Award

Linda Fox Memorial Endowment Fund Award

St. Martin Award

The Bertha Oliver Memorial Award

The Clymer Award for Academic and Professional Excellence

The National Dean's List Nominations

The President's Society Award

Western University of Health Sciences Physician Assistant Service Award

Who's Who Among Students in American Universities and Colleges Nominations

# **Academic Calendar**

\*Students in clinical rotations observe their preceptors hours, which may include working on federal holidays.

Fall 2013	Spring 2014

Wednesday, August 7, 2013 Tuesday, January 1, 2014

Orientation Spring Rotations Begin (Year 2)

Saturday, August 11, 2013 Monday, January 6, 2014
Convocation/White Coat Ceremony Spring Classes Begin (Year 1)

Monday, August 12, 2013

Fall Classes Begin (Year 1)

Monday, January 20, 2014

Martin Luther King Day – No Classes\*

Sunday, September 1, 2013 Monday, February 17, 2014
Fall Rotations Begin (Year 2) President's Day – No Classes\*

Monday, September 2, 2013
Labor Day – No Classes\*

Monday, March 17, 2014
Spring Break Begins (Year 1)

Monday, October 14, 2013

Columbus Day – No Classes\*

Monday, March 24, 2014

Spring Classes Resume (Year 1)

Wednesday, November 27, 2013 Wednesday, April 30, 2014
Thanksgiving Recess Begins @ 5:00 p.m.\* Spring Rotations End (Year 2)

Monday, December 2, 2013

Classes Resume

Friday, May 9, 2014

Last Day of Lectures for Spring Semester (Yr 1)

Friday, December 13, 2013

Last Day of Lectures for Fall Semester (Year 1)

Mon., May 12 – Fri., May 16, 2014

Finals Week

Mon., December 16 – Fri., December 20, 2013

Wednesday-Friday, May 14-16, 2014

Commencement

Friday, December 20, 2013

End of Fall Semester Classes (Year 1)

Friday, May 16, 2014

End of Spring Semester Classes (Year 1)

Monday, December 23, 2013

<u>Tuesday, December 31, 2013</u> *End of Fall Semester Rotations (Year 2)* 

Winter Recess Begins (Year 1)

#### Summer 2014

Thursday, May 1, 2014

Summer Rotations Begin (Year 2)

Monday, May 26, 2014

Memorial Day - No Classes\*

Monday, June 2, 2014

Summer Classes Begin (Year 1)

Friday, July 4, 2014

Independence Day – No Classes\*

Mon., July 28 - Fri., August 1, 2014

Finals Week

Thursday, July 31, 2014

End of Summer Semester Rotations (Year 2)

Friday, August 1, 2014

End of Summer Semester Classes (Year 1)

# The Physician Assistant Oath

I pledge to perform the following duties with honesty, integrity, and dedication, remembering always that my primary responsibility is to the health, safety, welfare, and dignity of all human beings:

I recognize and promote the value of diversity and I will treat equally all persons who seek my care.

I will uphold the tenets of patient autonomy, beneficence, non-maleficence, justice, and the principle of informed consent.

I will hold in confidence the information shared with me in the course of practicing medicine, except where I am authorized to impart such knowledge.

I will be diligent in understanding both my personal capabilities and my limitations, striving always to improve my practice of medicine.

I will actively seek to expand my intellectual knowledge and skills, keeping abreast of advances in medical art and science.

I will work with other members of the health care team to assure compassionate and effective care of patients.

I will uphold and enhance community values and use the knowledge and experience acquired as a PA to contribute to an improved community.

I will respect my professional relationship with the physician and act always with guidance and supervision provided by that physician, except where to do so would cause harm.

I recognize my duty to perpetuate knowledge with in the profession.

These duties are pledged with sincerity and on my honor.

# **Doctor of Physical Therapy Program**

Department of Physical Therapy Education

#### Accreditation

The Entry Level Doctor of Physical Therapy program in the Department of Physical Therapy Education at Western University of Health Sciences (WesternU), College of Allied Health Professions, is accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE), 1111 North Fairfax Street, Alexandria, Virginia 22314; telephone: 703-706-3245; email: <a href="mailto:accreditation@apta.org">accreditation@apta.org</a>; website: <a href="https://www.capteonline.org">www.capteonline.org</a>.

#### **Mission Statement**

The mission of the Department of Physical Therapy Education supports the mission of Western University of Health Sciences by educating culturally competent and patient-centered practitioners who are committed to interprofessional practice, life-long learning, scientific inquiry, critical thinking, and evidence based practice to meet the healthcare needs of the community.

# **About the Doctor of Physical Therapy Program**

The Doctor of Physical Therapy (DPT) program is designed to give students a didactic and clinical education experience that provides current knowledge and skills necessary to practice physical therapy in any clinical setting. The courses included in this curriculum reflect and are consistent with the patient/client management model described in the *Guide to Physical Therapist Practice* and the curricular content for professional education in *A Normative Model of Physical Therapist Professional Education: Version 2004*, and meets criteria set forth by CAPTE.

The DPT degree is based on the new and expanding role of the physical therapist. Changes are occurring in the field and the future role will include practice in primary care and direct access. As such, physical therapists will be expected to perform medical screening, have a stronger knowledge base of the medical and clinical sciences, and be able to perform higher level problem solving and clinical decision-making.

In addition to the entry level doctoral degree, the program offers an advanced standing DPT degree to licensed physical therapists. The clinician who holds a certificate, bachelors, or master's degree in physical therapy may enter the DPT program as a student with advanced standing to complete requirements for the DPT degree. The required courses will depend upon the student's previous academic coursework and clinical/professional experiences. The student with advanced standing will take courses online with two to three weekends during a semester required to be on campus. The mission and program goals are the same for both the entry level and advanced standing students. Policies related to admissions, registration, and tuition and fees are different for students entering with advanced standing. A description of the policies for students with advanced standing is provided separately at the end of the section on the entry level DPT program. All other policies are the same for both entry level DPT students and those admitted to the advanced standing DPT program.

#### **Program Goals**

The graduate of the DPT program will be a mature individual whose professional education is based on a foundation of the requisite preparation in the biological, behavioral and social sciences, and humanities. The graduate will have the necessary knowledge, skills, and attitudes to function as a clinician generalist; will have an appreciation for the value of the research process; and will be a

responsible member of the community and the profession. The goal of the Department of Physical Therapy Education and its DPT program is to achieve the following outcomes:

- Provide educational experiences that facilitate critical thinking and clinical decision-making skills.
- 2. Provide educational experiences for current practice in patient care, community service, research, and education.
- 3. Prepare students to demonstrate interpersonal and communication skills in a variety of clinical settings and across cultures.
- 4. Provide educational experiences that facilitate and encourage interdisciplinary practice.
- 5. Encourage engagement in ethical behaviors and attitudes that result in collaborative relationships.
- 6. Encourage engagement in humanistic behaviors and attitudes that result in productive professional relationships.
- 7. Educate and model for graduates and students life-long learning and advances in current practice in patient care, community service, research, and education.
- 8. Prepare students to practice as evidence based clinicians.

# **Description of the DPT (Entry Level) Program**

The curriculum for the Doctor of Physical Therapy (DPT) Program will prepare the graduate to be a physical therapist generalist. The curriculum consists of nine semesters, each having a particular emphasis that is expanded and built upon previous semesters.

#### **Curriculum Design**

The DPT program is three years in length. Didactic education includes interactive classroom instruction, lab practice and training. In addition, classes utilize standardized cases, simulation labs, and actual patient experiences to prepare students for clinical rotations. The clinical education experiences occur in a variety of clinical settings and occur each year of the curriculum. Year I consists of one 18-week semester, one 19-week semester (which includes a two-week clinical experience and a one-week spring break), and one 9-week semester. Year II consists of two 18-week semesters (the second semester having a one-week spring break) and one 12-week clinical experience. Year III consists of one 17-week semester, two 12-week clinical experiences, and a 4-week final semester.

DPT students will complete their education in August, but will participate in the University-wide graduation held in the prior May. State licensure examinations are computerized and can be taken following successful completion of the program. The faculty includes scholars, researchers, administrators, and clinicians from the professions of physical therapy, pharmacology, education, osteopathic medicine, medicine and the basic biological sciences. All faculty are committed to the preparation of the Doctor of Physical Therapy professional who will be well versed in all aspects of physical therapy and dedicated to their profession and the patients they serve.

## **Program Learning Outcomes (PLO)**

Upon completion of the DPT program, students will be able to:

**PLO 1:** Apply problem-solving strategies and critical thinking skills in patient care.

**PLO 2A:** Identify the physical therapy needs of patients.

PLO 2B: Re-assess and modify physical therapy plan of care in response to assessment

outcomes.

**PLO 3:** Demonstrate and facilitate professional behaviors and attitudes.

**PLO 4:** Engage in and promote interdisciplinary practice.

**PLO 5:** Demonstrate safe, ethical and legal practice.

**PLO 6:** Demonstrate accurate self-assessment and participation in scientific inquiry and

life-long learning.

**PLO 7:** Apply principles of evidence based practice in clinical decision making and the

delivery of patient care.

**PLO 8:** Design and implement a physical therapy plan of care reflecting compassionate

culturally competent patient centered care.

# **Personal Competencies for Admission and Matriculation**

A candidate for admission to the DPT program must have the use of certain sensory and motor functions to permit them to carry out the activities described in the sections that follow. Graduation from the program signifies that the individual is prepared for entry into clinical practice. Therefore, it follows that graduates must have the knowledge and skills needed to function in a broad variety of clinical situations and to render a wide spectrum of physical therapy evaluation and treatment techniques. The candidate and student must be able to consistently, quickly, and accurately integrate all information received by whatever sense(s) are employed. In addition, they must have the intellectual ability to learn, integrate, analyze, and synthesize data.

Examples of essential functions of a physical therapist include, but are not limited to:

- 1. Use of appropriate verbal, non-verbal, and written communication with patients, families, and others.
- 2. Determination of the physical therapy needs of any patient with potential movement dysfunction.
- 3. Safe, reliable, and efficient performance of appropriate physical therapy procedures used to assess the function of the movement system.
- 4. Performance of treatment procedures in a manner that is appropriate to the patient's status and desire goals.

A candidate for the DPT ordinarily must have abilities and skills of five varieties including (1) observation; (2) communication; (3) motor; (4) intellectual, conceptual, integrative and quantitative; and (5) behavioral and social. Where technological assistance is available in the program, it may be permitted for persons with disabilities in certain areas to enter the program. Under all circumstances, a candidate should be able to perform all physical therapist functions at entry level competency in an independent and timely manner.

- Observation: Candidates and students ordinarily must have sufficient vision to be able to
  observe demonstrations and laboratory exercises. They should be able to see, but if
  technological compensation is available, applicants and students with a visual disability may be
  permitted in the program. They must be able to observe a client accurately at a distance and
  close at hand.
- Communication: Candidates and students ordinarily must be able to communicate with clients and colleagues. They should be able to hear, but if technological compensation is available, applicants and students with a hearing disability may be permitted in the program. Candidates and students must be able to read, write, and communicate verbally in English.
- Motor: Candidates and students ordinarily must have sufficient motor function such that they
  are able to execute movements commonly required to provide assessment and physical therapy
  treatment procedures to clients.

Examples of commonly required assessment procedures include, but are not limited to:

- Functional abilities
- Pain
- Gait
- Strength
- Joint motion and stability
- Balance
- Movement patterns

Examples of commonly required treatment procedures include:

- Balance training
- Exercise techniques
- Gait training
- · Activities of daily living training and functional activities
- Manual therapy

These actions require coordination of both gross and fine muscular movements, equilibrium and functional use of the senses of touch and vision. The role of the physical therapist often requires upright posture with sufficient upper and lower extremity strength, as well as overall body strength; therefore, individuals with significant limitations in these areas would be more challenged and potentially less likely to succeed in a clinical setting.

4. **Intellectual, Conceptual, Integrative, and Quantitative Abilities**: These abilities include measurement, calculation, reasoning, analysis, and synthesis. Problem solving, the critical intellectual skill demanded of a physical therapist, requires all of these intellectual abilities. In

addition, candidates and students should be able to comprehend three-dimensional relationships and understand the spatial relationships of structures.

5. Behavioral and Social Abilities: Candidates and students must possess the emotional health required for full utilization of the intellectual abilities, the exercise of good judgment, the prompt completion of all responsibilities attendant to the assessment and care of clients, and the development of mature, sensitive, and effective relationships with clients, colleagues and other healthcare professionals. Candidates and students must be able to tolerate physically taxing workloads, adapt to changing environments, display flexibility, and learn to function in the face of uncertainties inherent in the clinical problems of many clients. Compassion, integrity, concern for others, interpersonal skills, interest, and motivation are all personal qualities to be assessed during the admissions and educational processes.

The DPT program, along with all other programs at Western University of Health Sciences, shares a commitment to develop creative ways of opening the DPT curriculum to competitive, qualified individuals with disabilities. In doing so, however, the DPT program must maintain the integrity of its curriculum and preserve those elements deemed essential to educating candidates to become effective physical therapists.

#### **Admissions Policies and Procedures**

Western University of Health Sciences will accept applications for admission from all qualified candidates for the entry level DPT degree. WesternU participates in the Physical Therapist Centralized Application Service (PTCAS) for its admissions process. A primary application must be filed with the PTCAS and a secondary application filed with WesternU, both subject to designated deadlines.

#### **International Students**

International students and any other applicants who are not U.S. citizens and who are living in the U.S. should be prepared to provide proof of legal U.S. residency at the time of interview. Proof of legal U.S. residency is required prior to any offer of acceptance. For more detailed information, please visit our web page for <u>International Students</u>.

#### **Application Requirements**

The applicant must have earned a BA or BS degree from a regionally accredited (exceptions will be made on a case-by-case basis) college or university by the time he/she matriculates in the DPT program.

The DPT program seeks students with the baccalaureate degree obtained in any field of study other than physical therapy. A high degree of intellectual curiosity and accomplishment along with excellent verbal and written communication skills need to be evident in the applicant. The graduate of WesternU will be able to problem solve in clinical practice and will be able to communicate appropriately with the client/patient and other health care providers about the client/patient care plan.

#### 1. Prerequisite Courses

Course	<u>Units</u>
English Composition	3 semester units
Psychology*	6 semester units
Statistics	3 semester units
Human Anatomy with Lab**, ***	4 semester units
Human Physiology with Lab**, ***	4 semester units
General Chemistry with Lab**	8 semester units, a full year sequence
Physics with Lab**, #	8 semester units, a full year sequence

<sup>\*</sup>At least one course must be taken from the Psychology department.

#Emphasis on mechanics, light, heat, sound, and electricity

In addition, the following courses are recommended to enhance success in the program:

- Oral communication skills
- Computer literacy
- General biology
- Microbiology
- Kinesiology/biomechanics
- Exercise Physiology
- Nutrition
- Human/Child Development
- Additional Psychology courses

Grades of "C" or better are required in each prerequisite course. A grade of "C-" or less in any prerequisite course is not acceptable. Only one prerequisite course may be taken on an advanced-placement, pass/no pass or credit/no credit basis. For courses completed in California, all science prerequisites must be University of California (UC) or California State University (CSU) transferable. Advanced Placement (AP) may be accepted for one prerequisite course; this will not be calculated into the GPA.

No more than one science (if semester-based course; two if the course is quarter-based) and one non-science prerequisite courses can be in progress after the fall term prior to matriculation. All prerequisite courses must be completed by the end of the spring semester/quarter prior to matriculation. Please submit official transcripts directly to the Admissions Office upon completion of coursework in progress. Final transcripts and/or final grades (including degree verification) for all coursework in progress must be received prior to orientation in early August.

<sup>\*\*</sup>All science courses must include laboratories and cannot be at an 'introductory' level.

<sup>\*\*\*</sup>Anatomy and Physiology must be taken from the Anatomy, Physiology, A&P, Biology, or Zoology department. The Anatomy and Physiology must be 'human'. Combined Anatomy and Physiology courses will be considered only if a combined course sequence (2 semesters) is completed.

#### 2. Prerequisite and Overall GPAs

The minimum overall GPA and the minimum GPA for all prerequisite courses must each be 2.80 on a 4-point scale. To be competitive, these GPA's should be consistent with current incoming class averages, which are above 3.00 on a 4-point scale.

#### 3. Graduate Record Examination (GRE)

The GRE scores are **not** required.

# 4. Clinical Experience

A minimum of 100 hours of volunteer or paid work experience in two or more physical therapy facilities and/or clinical settings is required, with a minimum of 40 hours per setting. Forty or more hours in an in-patient clinical setting is highly recommended.

#### 5. Recommendations

Three satisfactory recommendations are required as part of the admissions application. One is required from a supervising physical therapist and one from a college course instructor. The third letter may be from either a supervising physical therapist or college course instructor; a physical therapist is preferred.

#### 6. Interviews

Applications are forwarded to the Admissions Committee for review. Applicants selected by the Admissions Committee will be invited to interview.

The WesternU DPT program is committed to admitting individuals with a disability provided they meet all of the qualifications listed above as well as the technical guidelines listed in the previous section with reasonable accommodations.

## **Application Procedures and Deadlines**

The DPT program has an August orientation and matriculation date. The application submission deadline is November 1st of the year prior to anticipated enrollment. Students with complete application packets are encouraged to apply early. Applicants who do not meet the criteria by the time of matriculation and wish to reapply for the following year must submit new primary and secondary applications and will be considered with the new applicant pool. A primary application must be submitted to PTCAS with a response to the designated personal essay question contained therein. Three letters of recommendation forms are available to download, print, and have the completed copies sent to PTCAS, along with official transcripts from all colleges attended. To initiate the primary application with PTCAS, visit the PTCAS website at: <a href="https://www.ptcas.org">www.ptcas.org</a>.

The applicant must also submit the secondary application online and pay the non-refundable application fee of \$60. To request an information brochure, contact the Admissions Office at:

Office of Admissions
Western University of Health Sciences
309 E. 2<sup>nd</sup> Street
Pomona, CA 91766-1854
(909) 469-5541

http://prospective.westernu.edu/physical-therapy-e/apply-22/

After receipt of the applicant's packet from PTCAS and the secondary application, an Admissions Committee member will review and evaluate the applicant's entire submission.

Applicants who wish to use coursework completed outside of the United States or Canada must submit their transcripts for evaluation to World Education Services or Josef Silny and Associates. A course-by-course evaluation is required and all coursework must be designated as undergraduate, graduate or professional. WesternU will only honor evaluations from the above services. The evaluation must be received by the Office of Admissions by the designated application deadline.

The Admissions Committee will review all completed applicant packets and determine which potential candidates will be invited for personal interviews. These interviews are designed to allow the applicant to learn more about WesternU's DPT program as well as allow the Admissions Committee to learn about the applicant. The interview process is conducted in the fall and spring months of admissions cycle.

Decisions of the Admissions Committee regarding the admission of applicants to the Doctor of Physical Therapy program are final.

#### **Transfers from Other Schools**

The Department of Physical Therapy Education does not accept transfer candidates to advance standing in the DPT (Entry Level) program.

# Registration

All DPT students are required to register by the registration deadlines specified by the University Registrar. Registration dates are posted at: <a href="http://www.westernu.edu/registrar-online-information">http://www.westernu.edu/registrar-online-information</a>. Failure to register by the deadline may be grounds for administrative withdrawal. All students registering after the posted deadline will be assessed a \$30.00 per business day late fee.

Full tuition and fees and all prior debts must be paid in full on or by posted deadlines each academic year. Matriculation is subject to the satisfactory completion of all academic requirements and payment of all outstanding debts to the University. The receipt of a final transcript(s) from all colleges/universities attended and a physical examination with documentation of required immunizations prior to registration are additional requirements for incoming students. Also, all students must show proof of current health insurance coverage by the deadlines provided by the University Registrar. This coverage must be maintained or in effect throughout the academic year. If there is no proof of current coverage, students will be automatically enrolled in the school sponsored insurance plan.

Attendance at Orientation is mandatory for all incoming first-year students.

#### Full-time/Part-Time Status

All students enrolled in at least six credit hours are considered full-time students.

#### Time Limits

The Doctor of Physical Therapy (Entry Level) program is designed to be completed in three (3) years of full-time study. The requirements for the degree must be fulfilled within 6 years from the date of matriculation to the program. Extensions of this time limit may be granted through petition to the faculty and Department Chair.

#### **Tuition and Fees**

By action of the Board of Trustees, DPT tuition and fees for the 2013-2014 academic year (subject to change) are as follows:

\$35,940.00	Annual Tuition, DPT (Entry Level)
\$40.00	Student Body Fee, Class of 2016
\$20.00	Student Body Fee. Classes of 2015 and 2014

# **Other Fees and Expenses**

\$1,300.00	Required and recommended texts
\$500.00	Personal PT supplies and equipment
\$60.00	Criminal Background Investigation (approx.)
\$40.00	Drug Screen (approx.)
\$30.00	Registration Late Fee (per business day)
\$350.00	Graduation Fee
\$470.00	Annual Parking Permit (Auto)
\$25.00	Parking Permit Replacement Fee
\$40.00	Locker Key Replacement Charge
\$10.00	Official Transcript (Each)
\$21.00	Rush Transcript, First Class Mail (Each)
\$25.00	Rush Transcript, Federal Express (Each)
\$10.00	Student ID Replacement Fee
TBD	Breakage Fee (Replacement Cost)

# **Academic Requirements**

### **Academic Advisement**

Students will be assigned a faculty advisor upon matriculation. Advisement by faculty should be viewed by the student as a part of the academic process. If either the student or faculty member does not find the relationship helpful, either is free to seek a change. This request should be made to the Department Chair.

It is the student's responsibility to meet periodically with his/her advisor. A student on probation must meet with his/her faculty advisor at least once a month or as recommended by the student performance committee.

# Attendance/Absences

Students are expected to attend all scheduled activities. In the event of an absence or tardiness, it is the student's professional responsibility to notify the Department Secretary, who will inform the appropriate faculty. If an absence, lateness, or early departure is anticipated, it is considered a professional courtesy to discuss this with the appropriate course instructor(s) at the earliest possible date. It is expected that students will report unanticipated absences due to illness, accident, or unanticipated events immediately to the Department Secretary or Department Chair. Unanticipated lateness should be discussed with the course instructor as soon as possible.

The student is responsible for all course material covered during an absence. Should an absence, lateness, or early departure occur on the day of an examination or announced/unannounced quiz, any make- up exams or guizzes may or may not be allowed, at the discretion of the course instructor.

Excessive absences, tardiness, and/or early departures are considered a violation of the Standards of Professional Conduct and are handled under the General University Academic Policies and Regulations section of this catalog. Excessive or unexcused absences, tardiness, and/or early departures may impact the student's final course grade.

# **Student Test Taking Protocol and Guidelines**

- 1. Backpacks/bags and all personal belongings will be left at the front of the room.
- 2. Cell phones/electronics must be on "silent" or "off" and be placed within a backpack/bag in front of the room.
- 3. Students will come to the examination with three to four #2 pencils.
- 4. Students will sit spaced apart every other seat, provided that the room is of sufficient size to accommodate this seating arrangement. Each row of students should sit directly behind the student in the row in front of them.
- 5. Students will fill in all Scantron information, including Student ID number. If the form is not properly completed, 2% will be deducted from the total test score.
- 6. Students who have their gaze elsewhere except on their own paper can give a false appearance of seeking help. If students tend to move their heads around, they need to sit in the front rows.
- 7. If water is needed during the examination session, the student needs to bring a bottle with the labels removed.
- 8. If a student needs a bathroom break, the following steps should be taken: (1) ask the instructor/proctor for a bathroom break; (2) turn in the test and Scantron from to the instructor/proctor; (3) make your visit to the restroom brief and efficient; (4) return and pick up the test and Scantron form from the instructor/proctor; (5) an escort of the same gender may be assigned at the discretion of the instructor/proctor; and (6) only one student may be out of the room at a time.
- 9. In the case of a lab practical exam, read all provided instructions carefully. Arrive 30 minutes before the student is scheduled.

#### **Confidentiality of Medical Records and Health History Information**

All data gathered by students about patients and their illnesses, including all items within patients' medical histories are privileged information.

Students should not discuss patients' records in a manner or a situation that would reveal
any information about these patients or their records to persons not involved in their health
care.

2. Charts or contents, e.g., lab reports, etc., are not to be removed from the hospital or clinical setting.

This also applies to individuals such as classmates, faculty, and staff who volunteer as patients in class.

# **Use of Physical Therapy Equipment and Laboratories**

The DPTE policy for use of the PT equipment in the PT Skills Laboratories is as follows:

- 1. No one is to use the PT equipment except DPT students who have received education and have had practice on the equipment in the laboratory.
- 2. A faculty member must clear a student as being competent to use the equipment.
- 3. DPT students using the equipment should be doing so in conjunction with a class they are taking, in preparation for a clinical experience, or to conduct a clinical research project.
- 4. If equipment is used for a research project, the DPT faculty advisor will be responsible to check out the student's competency in using the equipment.
- 5. Physical therapy skills and research labs may be used after regular class hours with permission of the Department Chair. Use of these facilities must be scheduled with the Department Chair five (5) working days in advance.
- 6. Students may sign out specified equipment (i.e., goniometers) to use off campus for special events or personal practice. The Department Chair will approve what equipment may be taken out of the laboratory and off campus.

### **Clinical Education Policies and Procedures**

Students should refer to the current Department of Physical Therapy Education "Clinical Education Manual" for all policies and procedures governing physical therapy clinical education. If a difference in language is found between the two documents, the then-current WesternU Student Catalog will take precedent.

### **Promotion**

Promotion is defined as progression from one academic year to the next.

- a) A student will be recommended to the Dean of the College of Allied Health Professions for promotion by the PT faculty and the Student Progress Committee.
- b) A student may not be recommended for progression from one academic year to the next with any outstanding grades of "I," "U" or "NCR" on his/her academic record or with a cumulative grade point average of less than 2.8.
- c) When considering a student for promotion, professional, ethical, and personal conduct may also be taken into consideration.
- d) A student will be promoted provided that all legal and financial requirements of the University as stated in the Catalog have been satisfied.

#### Graduation

A student will be recommended for the Doctor of Physical Therapy Degree provided he/she:

- g. Has satisfactorily completed a minimum of three years education in the DPT curriculum, unless the student has been granted advanced standing in the program.
- h. Is not on probation and has completed all prescribed academic and clinical requirements with a cumulative grade point average of above 2.80 and has no outstanding grade of "I," "NCR," or "IJ".
- i. Has demonstrated no serious deficiencies in ethical, professional, or personal conduct, as defined in Probation guidelines, which would make it inappropriate to award the degree of Doctor of Physical Therapy.
- j. Has complied with all the legal and financial requirements of the University as stated in the University Catalog.
- k. Has attended in person and participated in the Commencement ceremony at which time the Doctor of Physical Therapy degree is conferred. Unless special permission has been granted by the Dean, each student must participate in their respective commencement ceremony. If the Dean grants special permission for excusal from commencement, the graduate may be required to present themselves to the Dean or their designee at another specified date to take their profession's oath before their diploma will be released. Requests for excusal will only be granted for extenuating circumstances, such as a prior military commitment.

Students may participate in commencement activities provided they will complete all requirements of the program by December 31<sup>st</sup> of that calendar year. No student will receive his or her degree until the student has completed all requirements for graduation. Degrees will be dated as appropriate to completion date.

# **Standards of Academic Progress**

# **Academic Standing**

Good academic standing implies that a student maintains a minimum GPA of 2.80 or higher. All grading and evaluation is based on the student's ability to attain the competencies within the objectives outlined for each area of study.

A student whose performance falls below the minimum acceptable standard(s) for any area of study will be notified of such deficiency by the instructor of the course and Department Chair as soon as evidence of such substandard performance is available.

# **Academic Warning**

The student who demonstrates unacceptable performance in any unit of study during any portion of the program is notified in writing of such performance by the course instructor, as soon as it becomes evident. This constitutes an academic warning. Continued poor academic performance can lead to academic probation and/or dismissal.

#### **Probation**

Probation is defined as a period of time specified by the Dean of the College of Allied Health Professions (CAHP) during which the student's progress will be closely monitored by the CAHP Student Progress Committee, faculty advisor, and the Department Chair. In order to closely monitor students on probation, the DPT program reserves the right to assign their clinical education experiences. A student will be recommended for probation and asked to appear at a Student Progress Committee (SPC) meeting for any of the following reasons:

- 1. For first year students, achieving a score of less than 73% in two or more courses by the end of the first nine weeks of the semester.
- 2. Immediately upon receiving a course grade of "U" or "NCR" in any course.
- 3. A semester and/or cumulative GPA of less than 2.80.
- 4. When directed to repeat a year for academic reasons.
- 5. Seriously deficient ethical, professional or personal conduct.

Students are removed from probation when any of the following occur:

- At the end of the first semester of the first year, provided that he/she has attained a GPA of 2.80
  or more
- 2. After one semester, provided he/she has regained both a semester and cumulative GPA of 2.80.
- 3. When all "U" or "NCR" grades have been satisfactorily remediated according to the Remediation section of the Catalog (below).
- 4. When the specified terms of probation for ethical, professional or personal conduct are met.
- 5. When students are on probation for a clinical education experience grade of "U", they will be removed from probation when they have met the terms of their probation.

# Financial Aid Warning Policy (Title IV and Title VII)

If a student is not making Satisfactory Academic Progress (SAP) they may be placed on "Financial Aid Warning" status for the next payment period and continue to receive financial aid for that period. Financial Aid is any financial assistance offered to the student for paying for their education, such as loans, scholarships, Federal Work-Study, grants and stipends (judged on the criteria of the stipend). Students who fail to make SAP by the end of the payment period lose Financial Aid eligibility.

It is the policy of the Financial Aid Office (FAO) that once a student has been placed on academic probation for not meeting SAP standards as defined by the college, the FAO will automatically place the student in a Financial Aid Warning status. During the next academic term, if the student does not meet SAP standards and the college places the student on academic suspension, the student will no longer be eligible for financial aid. If the student appeals the academic suspension and the appeal is approved, financial aid will be reinstated. If the student is directed to audit courses, those courses will **not** be covered by financial aid.

# **Tutorial Assistance Program**

A Tutorial Assistance Program (TAP) has been established to assist students experiencing academic difficulty. Students will be recommended for this program by a faculty advisor or professor. Students may self-identify to TAP to receive assistance. The tutors will be chosen on the recommendation of the faculty in each discipline. Group tutoring is the methodology most used by the TAP department. For assistance, contact the Learning Enhancement and Academic Development Office.

#### Remediation

Every effort will be made to give each student ample opportunity to demonstrate competency in each area of the academic program. However, remediation is to be regarded as a privilege, which must be earned by a student through an active participation in the educational program as demonstrated by regular attendance, individual initiative, professional behaviors, and utilization of resources available to him or her. Except for repeating the course in its entirety, the highest grade a student can receive through the remediation process is a "C" (passing grade). However, if the entire course is repeated the following year, the new course grade will be used in calculating the student's cumulative GPA.

# **Unsatisfactory or No Credit Course Grades**

"U" or "NCR" in any required course (didactic or clinical experience) constitutes a failing grade and places the student on academic probation. The student will be required to remediate or retake the course, based upon the decision of the Dean of the College of Allied Health Professions. The Student Progress Committee will recommend to the Dean such an action after input from the department faculty. A grade of "U" or "NCR" in a required course will prevent participation in a clinical experience until the course is successfully remediated, and requires that the Director of Clinical Education (DCE) determine an appropriate clinical placement.

- 1. As in all cases in which remediation of a course is required, this requirement may extend the length of the program beyond 36 months.
- 2. The highest grade a student may achieve by obtaining a 73 percent or higher score through remediation of a course is a grade of "C" or "CR." The "C" or "CR" grade achieved by this means will be recorded on the official transcript next to the original course grade of "U" (Unsatisfactory) or "NCR" (No Credit).
- 3. Failure to earn a grade of "C" or "CR" when remediation of a course is attempted will render the student subject to dismissal from the program or require that the student repeat the entire course.
- 4. If a student repeats a course the next time the course is offered in the DPT curriculum, the student will have the new grade for the course recorded on the official transcript beneath the original course grade of "U" (Unsatisfactory) or "NCR" (No Credit). Students will be charged full tuition for repeated coursework.
- 5. If a student earns two "U's" or "NCR's" in the same academic year and has a cumulative GPA at or greater than 2.8, he/she may be required to repeat the entire academic year.

# Semester/Overall GPA

1. Students must attain a semester GPA of 2.8 and maintain an overall GPA of 2.8. The semester and overall GPA will be calculated at the end of each semester.

- 2. A student whose semester or overall GPA falls below 2.80 must meet with the Department Chair and the DCE. In order to closely monitor clinical performance, the DCE will determine any subsequent clinical placements.
- 3. If the semester or overall GPA falls below 2.80, a student will be placed on academic probation immediately. Length of academic probation will be determined by the Dean of the College of Allied Health Professions.
- 4. If a student has two didactic semesters in the same academic year with a GPA less than 2.80 and a cumulative GPA at or greater than 2.80, she/he may be required to repeat the entire academic year.

#### **Dismissal Recommendation**

A student will be subject to dismissal from the program for substandard academic or professional performance as follows:

- 1. A third grade of "U" or "NCR" in three different required courses (didactic or clinical experiences).
- 2. A second grade of "U" or "NCR" in the same required course (didactic or clinical experiences) whether earned by repeating the course or as a result of unsatisfactory performance upon attempted remediation via examination.
- 3. Attainment of a semester GPA less than 2.80 for two consecutive didactic semesters with a cumulative GPA of less than 2.80.
- 4. Attainment of a semester GPA less than 2.80 in more than two consecutive didactic semesters.
- 5. Failure to attain a cumulative GPA of 2.80 or higher at the end of the academic year.
- 6. Lack of professional or personal attributes considered appropriate for continuance in the program and profession.
- 7. Any event that could result either in academic or professional probation for a student currently on academic or professional probation.
- 8. Violation of the terms of probation as stated in a letter at the time the student is placed on probation.

# **Student Progress Committee**

- a. The Student Progress Committee of the College of Allied Health Professions is comprised of Department Chairs, the Vice President of Student Affairs/designee, and elected faculty members.
- b. Each year, the Student Progress Committee shall review as needed the academic achievements and the performance of all students. The names and grades of students in

academic difficulty shall be made available to the Student Academic Progress Committee by the Department Chair.

- c. After reviewing a student's achievement and performance records, the Student Progress Committee may recommend to the Dean of the College of Allied Health Professions any of the following courses of action for a student: Promotion, probation, remediation, dismissal from the University, psychological and educational assessment and recommendation, or no action.
- d. The Student Progress Committee also has the responsibility of recommending to the Faculty as a whole the awarding of the degree of Doctor of Physical Therapy upon satisfactory completion of all requirements for graduation as stated in the University Catalogue.
- e. All recommendations of the Student Progress Committee shall be made in writing to the Dean of the College of Allied Health Professions, who will make a final decision and inform the student in writing.

### **Student Conduct Committee**

The College of Allied Health Professions (CAHP) Student Conduct Committee (SCC) shall consist of three elected CAHP faculty members, one appointed faculty member from outside the CAHP, and as exofficio non-voting members, the Vice President of Student Affairs/designee and the University legal counsel. The chair of the committee is elected by the members and the committee meets at the call of the chair. The term of membership is three years with staggered terms. The committee is charged to set the Standards of Professional Conduct and to investigate violation(s) of professional conduct.

### **Standards of Professional Conduct**

Upon accepting admission to the University, each student agrees to abide by basic standards of academic integrity, professional and ethical behavior. The student is responsible to read and abide by the University Student Catalog.

### **Violations of Professional Standards**

The standards for student professional conduct require honesty and accountability in the educational process of professional development. Alleged violation(s) include, but are not limited to:

- Academic dishonesty
- Unprofessional conduct
- Illegal acts
- Failure to comply with University, College, and Department regulations

#### **Reporting and Processing Procedures**

- 1. Upon witnessing or becoming aware of violation(s) of professional conduct, a report will be generated and turned into the department chair. The report will include the following information:
  - a. Name and signature of the individual making the report, and date, time, and place of alleged violation(s)

- b. Name of the accused student
- c. Alleged violation(s)
- 2. If the conduct involves a particular course or clinical experience, the classroom instructor, clinical instructor/preceptor or clinical coordinator will advise the department chair.
- 3. The department chair will meet with the student, the instructor or clinical coordinator, and/or the student's faculty advisor, individually or in a group, to discuss the nature of the alleged violation(s) that have been reported and the actions, if any that the Department Chair intends to take. The Department Chair may resolve minor infractions or refer the matter to the Dean.
  - a. The Department Chair gives written notification of the violation(s), including date, and involved student's name, and resolution to the involved student, with copies to the SCC and to the Dean within five business days.
  - b. The Department Chair also places a copy of the notification in the student's file, to be removed if no further incidents occur prior to graduation.
  - c. The student involved in the alleged violation(s) may request a hearing with SCC.
- 4. Matters which could not be resolved at a program level will be referred to the Dean for review. The matter may be resolved by the Dean, or the Dean may refer the case to SCC for a hearing. The student may accept the Dean's resolution or request a hearing by the SCC.
  - a. The Dean sends written notification of the violation(s), including date, involved student's name, and resolution to the involved student, with copies to the SCC, Department Chair, and Faculty Advisor within five business days.
  - b. The Dean also places a copy of the resolution in the student's file.
  - c. The student involved in the alleged violation(s) may request a hearing with SCC.
- 5. Hearing by CAHP SCC with recommendation to the Dean. The Dean or the student may request a hearing by the CAHP SCC. Because a violation(s) may have serious consequences (which may include dismissal from the University), the University has implemented procedures intended to insure that the student is provided fair notice of any charges, and is afforded a reasonable opportunity to present evidence on his or her behalf.
  - a. The Dean sends a written request to CAHP SCC, with the alleged violation(s) within five business days.
  - b. The CAHP SCC will convene a hearing that follows procedures outlined in the University Policies and Procedures manual "Protocol for Handling the Alleged Violations of Professional Conduct by Student Performance Committees" policy number (A14.38.0.1) within five business days.
- Information for Students about Hearings Involving Alleged Violations of the Standards of Professional Conduct. For a full account of the process, please refer to the General Section of the University Catalog.

- 7. Status of Student Pending Action. Pending a determination by the CAHP Dean following a hearing and a recommendation by the CAHP SCC, the student's status will not be altered except for reasons of his/her physical and emotional well-being or for reasons relating to the safety of other students and University personnel. Once the CAHP Dean has rendered a decision, the status of the student will not be altered pending determination of a timely appeal by the student, except that the Provost/Chief Operating Officer shall have the discretion and authority to suspend the student or take other action at any time during the appeal process. The University further reserves the right to withhold the awarding of any degree at any time disciplinary charges are pending against a student.
- 8. **Appeals Procedures.** The CAHP Dean shall have the authority to make decisions regarding a student's status in matters of academic suspension, student conduct, academic progression/promotion and graduation. The decision will be based on input from appropriate sources that may include the following: individual instructors, faculty, and appropriate committees.
  - a. Within five business days following written notification to the student of the action of the CAHP Dean, the student may appeal the decision in writing to the Provost/Chief Operating Officer. The appeal request must be accompanied by a narrative explaining the basis for the appeal. The narrative should fully explain the student's situation and substantiate the reason(s) for advocating a reversal of the prior decision of the CAHP Dean. The Provost/Chief Operating Officer may grant an appeal only if one or more of the following claims are made and substantiated:
    - i. Bias
    - ii. The appearance of new, material and documentable evidence that was not available at the time of the CAHP Dean's decision
    - iii. Procedural error that unfairly affected the decision-making process
  - b. Upon written request from the student, the Provost/Chief Operating Officer shall review the case and, within seven business days, shall issue a decision in writing to the student, which may affirm, modify, or reverse the previous action. A copy of that written decision shall be sent to the Dean, and other appropriate individuals. The decision of the Provost/Chief Operating Officer will be final.
- 9. Procedures Pending Outcome. The student may remain in class or on clinical rotations or assignments pending the outcome of appeals, except in cases of summary suspension, and except when the Provost/Chief Operating Officer has suspended the student or has otherwise determined that it is inappropriate for the student to remain in class and/or participate in clinical rotations/assignments, consistent with the decision of the CAHP Dean that is being appealed.
- 10. **Suspension Pending Outcome.** If a student is suspended for any reason, all financial aid to that student will be held until the appeal process is resolved by reinstatement of the student or dismissal of the student. If reinstated, the financial aid funds can be released to the student. If the student is dismissed, the funds will be returned to the proper agency/lender.

11. **Additional information**. Additional information about the University's Standards of Professional Conduct and the hearing and appeal process is contained in the University's Catalog. Students may also contact Dr. Beverly Guidry, Vice President for Student Affairs at 909/469-5341 for additional information regarding the appeal process.

# **Evaluation and Grading**

The program semesters are designed so that students' work toward achievement of competencies is measured by written and practical examinations and by evaluations of clinical performance and professional development. Specific behavioral objectives are defined for each program component to assist the students and the faculty members in evaluating the degree of attainment of the objectives throughout the 36-month curriculum.

#### **Evaluation Methods**

Overall student performance is evaluated during each phase using one or a combination of the following methods:

- 1. **Written examinations:** Written examinations will vary based on the content of the individual course. A combination of multiple choice, matching, true/false, short answer, essay and patient problem solving questions are used.
- 2. Practical or Laboratory Examinations: In selected courses, students will be observed performing components of physical therapy practice activities on lab exams. They also may be asked to "problem solve" based on a patient database, and in some cases students will be videotaped for evaluation and/or self-evaluation. Audio-visual media may also be used in examinations.
- 3. **Student Presentations:** Students may be asked to orally present individual or group projects, patient cases, research papers, etc. These oral presentations may or may not be accompanied by a written report.
- 4. **Written reports:** At various times, students will be evaluated on written reports of assigned or selected topics, special projects, patient care documentation, evaluations, treatment plans and home programs.
- 5. Clinical Evaluations: Supervising Clinical Instructors (CIs) are asked to assess the student's level of attainment of competencies related to selected parameters within the domains of knowledge, skills and attitudes, and to evaluate the student's overall performance while on clinical education experiences. The Clinical Performance Instrument (CPI), which incorporates physical therapist clinical performance criteria, is one of the clinical evaluations utilized. Students are responsible for completing the requirements for use of the PT CPI Web prior to starting a 12-week clinical experience and ensuring that the PT CPI is completed and all supporting documents are returned to the Director of Clinical Education after each clinical experience. CI's or Center Coordinators of Clinical Education (CCCEs) are encouraged to discuss the student's performance and progress throughout the clinical assignment and to discuss the final evaluation prior to completion of the experience. The CI will indicate whether the clinical experience was successful in accordance with designated objectives, or was unsuccessful in meeting clinical objectives. While the CI may recommend success or failure of the clinical experience, the Director of Clinical Education determines and administers the actual course grade.

#### **Professional Performance**

### **Ability-Based Assessment**

The faculty supports the concept of development of professional behaviors throughout the program. The behaviors that have been identified include: (1) commitment to learning; (2) interpersonal skills; (3) communication skills; (4) effective use of time; (5) use of constructive feedback; (6) problem solving; (7) professionalism; (8) responsibility; (9) critical thinking; and (10) stress management.

Professional behavior is vital to the success of each student, the WesternU Physical Therapy program, and the physical therapy profession. The process of becoming an effective physical therapist involves attaining competency in professional knowledge, skill, and behavior. Thus, the ten Generic Abilities that exemplify the professional behaviors valued by the physical therapy profession will be used as a guide throughout this program. To facilitate development of competency in the Generic Abilities, the faculty will provide the students opportunities to practice them and provide formal and informal feedback throughout the program. The student will be responsible for ongoing self-assessment and for seeking feedback from faculty, clinical instructors, and fellow students.

Students' progress through the program is based upon successful completion of expected competencies and demonstration of expected professional behavior and attitudes. At the completion of each semester/year of the program, before the student is allowed to progress to the next semester/year, the student's record of achievement is reviewed by the faculty. The quality of professional behavior expected of WesternU DPT graduates is exemplified by the Generic Abilities and the three levels of associated behavioral criteria. Satisfactory progress is demonstrated by exhibiting beginning-level criteria by the end of the first year, developing-level criteria by the end of the second year, and entry level criteria by the end of the final clinical internship.

The faculty determines if the student has demonstrated the knowledge, skills, and attitudes necessary to be eligible for progress for the next semester/year. In special instances, the faculty may be convened at other than scheduled times to consider cases of unusual circumstances, such as probation or dismissal.

#### **Grading Scale**

Final course grades are given based upon the traditional 4-point letter system, as follows:

<u>Grade</u>	<u>Equivalent</u>	<b>GPA Points</b>
Α	93-100%	4.00
A-	90-92%	3.70
B+	87-89%	3.30
В	83-86%	3.00
B-	80-82%	2.70
C+*	77-79%	2.30
C*	73-76%	2.00
U	Less than 73%	0.00
CR	Credit	N/A
NCR	No Credit	N/A

<sup>\*</sup> A "C" or "C+" grade in and of itself is a passing grade. However, a "C" or "C+" grade is below the required overall grade point average of 2.80. If the number of "C's" and "C+'s" totals an amount to bring

the student's GPA to below 2.80, then the performance, based on professional expectations, is considered unsatisfactory.

#### **ADMINISTRATIVE GRADES**

<u>Grade</u>	<u>Equivalent</u>	<b>GPA Points</b>
AU	Audit	N/A
1	Incomplete	N/A
W	Withdrawal	N/A
M	Missing	N/A

### Incomplete

A student may be assigned an Incomplete grade ("I") only when a personal situation arises during a semester that prevents him/her from completing the course requirements or clinical experience. A student must remove an Incomplete by fulfilling all course requirements by the end of the following semester. An Incomplete that is not removed will become a "U" grade.

In the event that the student receives an "I" in a clinical experience, arrangements to fulfill the requirements will be made by the Director of Clinical Education (DCE) in consultation with the student. Arrangements for the Incomplete and its removal must be approved by the course instructor/DCE prior to the end of the semester in which the original incomplete grade was assigned. An Incomplete that is not removed will become a "NCR" grade.

# **Grade Reports**

Final grade reports are issued at the completion of each semester and will be available on BanWeb. Due to the nature of the curriculum, semester completion dates may not coincide with traditional grading periods. In some courses when final grades are not available at grade reporting time, a grade of "M" (Missing) is submitted to the Registrar in lieu of the course grade. "M" grades are entered on the grade reports and are converted to student achieved grades at the earliest possible opportunity. An upto-date summary of student performance is maintained in the Department Office and is available to each student for review.

#### **Credit Hour Calculation**

Courses are rated at one credit hour for 15 hours of lecture or 30 hours of laboratory and/or practice sessions. One credit hour will be assigned for every two weeks of clinical education experience.

# **Grade Appeals Process**

### **Review of Examinations**

Examinations are graded within 2-weeks of completion unless otherwise notified by the class instructor. Graded exams are kept on file for student review. Student performance in clinical education courses is monitored by the Director of Clinical Education. Students whose performance in any portion of the curriculum is determined to be unsatisfactory are notified of such substandard performance as soon as it can be determined.

#### **Appealing a Course Grade**

No course grade will be changed unless the instructor certifies in writing to the Registrar that an error in computing or recording of the grade occurred. If the student believes there is just cause to dispute a grade for a course, the procedure is as follows:

- 1. Within five (5) business days of receipt of the course grade, make an appointment to talk with the course instructor(s) who issued the grade. Upon written request from the student, the course instructor(s) shall review the case with the student and a decision shall be made by the course instructor(s) to affirm or modify the grade. Within ten (10) business days of the student's written request, the course instructor shall notify the student in writing of the decision. A copy of the letter shall be sent to the student and the Department Chair.
- 2. Within five (5) business days following written notification to the student regarding the instructor's decision, the student may appeal the decision in writing to the Department Chair. The appeal request must be accompanied by a narrative explaining the basis of the appeal. The narrative should fully explain the student's situation and substantiate the reason(s) for advocating a reversal of the instructor's prior decision. The Department Chair may grant an appeal only if a claim of (1) bias, (2) the appearance of new material and documentable evidence that was not available at the time of the instructor's decision, or (3) procedural error that unfairly affected the decision-making process is substantiated by the Department Chair. Upon written request from the student with a valid appeal rationale, the Department Chair shall review the case and within seven (7) working days shall issue a decision in writing to the student, which may affirm, modify, or reverse the previous action. A copy of that decision will be provided to the instructor. The Chair's decision is final in all course grade appeals (didactic and clinical), except when the Chair is also the official instructor of the course in question. In such a case, the student will direct his or her appeal to the Dean of the College of Allied Health Professions, following the same guidelines for an appeal to the Department Chair. Also, in such a case, the decision of the Dean is final.

# **Issues/Dispute Resolution Procedure**

When an issue or dispute arises between students, the issue/dispute resolution process starts with communication among the involved students. If a satisfactory resolution is not arrived at that level, the matter should then be addressed with the course instructor or the faculty advisor. If the problem is not resolved at the faculty advisor/course instructor level, the matter should be brought to the Department Chair, followed by the Dean and then the Provost/COO. If the matter has not been resolved at those levels, the final arbiter is the President.

When an incident arises involving a faculty member, the first step in the issue/dispute resolution process is discussion with the faculty member. If the matter is not satisfactorily resolved at that level, then the matter should be referred to the Department Chair, Dean, and Provost/COO, in that order. The final arbiter is the Board of Trustees.

When an incident arises involving a staff member, the dispute resolution process begins with the Department Chair, followed by the Dean. The Office of Human Relations is the final arbiter.

Failure to follow this sequence of steps will only serve to delay the appropriate resolution of the issue or dispute as the matter will only be referred back to the correct level in this chain of responsibility.

# **Curriculum Organization**

The DPT curriculum is continually evaluated to assure the best educational experience and outcomes. With this consideration, the following is an outline of the curriculum organization.

# Year 1

Year 1, Fall	Semester	
Course	Title	Credit Hours
IPE 5000	Patient Centered Cases I	1.00
PT 5000	Psychosocial and Ethnical Aspects of Health Care	3.00
PT 5030	Anatomy I	4.00
PT 5050	Kinesiology I	3.00
PT 5070	Patient Care Skills I	3.00
PT 5100	Physiology and Pathophysiology	5.00
PT 5130	Research Methodology in Health Care	3.00
	Semester Total:	22.00
Year 1, Spri	ng Semester	
Course	Title	<b>Credit Hours</b>
IPE 5100	Patient Centered Cases II	1.00
PT 5015	Professional and Practice Issues in Physical Therapy	3.00
PT 5035	Anatomy II	4.00
PT 5055	Kinesiology II	5.00
PT 5075	Physical Agents and Procedures	3.00
PT 5140	Evidence Based Practice: Application of Research to Clinical Practice	3.00
PT 5141	Professional Development and Reflective Practice	1.00
PT 5230	Screening for Medical Referral I	2.00
PT 7010	Clinical Education I (2 weeks)	1.00
PT 8100	Introduction to Pharmacology for Physical Therapists	1.00
	Semester Total:	24.00
Year 1, Sum	mer Semester	
Course	Title	Credit Hours
PT 5120	Human Life Sequence	2.00
PT 5215	Motor Control and Motor Learning	2.00
PT 5233	Foundations of Patient Examination	2.00
PT 5235	Screening for Medical Referral II	2.00
PT 8110	Structural Imaging: Musculoskeletal	2.00
PT 8400	Capstone Project	1.00
	Semester Total:	11.00

# Year 2

Year 2, Fall Semester		
Course	Title	Credit Hours
IPE 6000	Team Training in Healthcare I	1.00
PT 5205	Examination and Management of Musculoskeletal Dysfunction I	5.00
PT 6008	Neuroscience	5.00
PT 6030	Physiological Basis of Therapeutic Exercise	4.00
PT 6040	Evaluation and Treatment of Problems of the Cardiopulmonary System	4.00
PT 6060	Prosthetics, Orthotics, and Gait	3.00
PT 6630	Structural Imaging II: Neurological	1.00
	Semester Total:	23.00
Year 2, Spri	ng Semester	
Course	Title	Credit Hours
IPE 6100	Team Training in Healthcare II	1.00
PT 5142	Professional Development and Clinical Education	1.00
PT 5210	Examination and Management of Musculoskeletal Dysfunction II	5.00
PT 5220	Principles of Teaching, Learning, and Communication	2.00
PT 6010	Examination and Management of Neurological Disorders I	5.00
PT 6020	Electrotherapeutic Principles	2.00
PT 6045	Differential Diagnosis of the Integumentary System/Wound Care	2.00
PT 6075	Prevention and Management of Problems in the Pediatric Population	4.00
	Semester Total:	22.00
Year 2, Summer Semester		
Course	Title	Credit Hours
PT 7020	Clinical Education II	6.00
	Semester Total:	6.00

#### Year 3

Year 3, Fall S	Year 3, Fall Semester		
Course	Title	<b>Credit Hours</b>	
PT 5143	Professional Development and Clinical Practice	1.00	
PT 6015	Examination and Management of Neurological Disorders II	5.00	
PT 6050	Principles of Administration and Management	3.00	
PT 6065	Patient Care Skills II	2.00	
PT 6070	Prevention and Management of Problems in the Aging Adult	3.00	
PT 6090	Differential Diagnosis and Management of the Complex Patient	3.00	
PT 8401	Capstone Project II	1.00	
	Semester Total:	18.00	
Year 3, Sprin	g Semester		
Course	Title	<b>Credit Hours</b>	
PT 7030	Clinical Education III	6.00	
	Semester Total:	6.00	
Year 3, Sumr	mer Semester		
Course	Title	<b>Credit Hours</b>	
PT 7040	Clinical Education IV	6.00	
PT 8402	Capstone Project III	3.00	
PT 8500	Selected Topics	2.00	
PT 8600	Community Service	2.00	
	Semester Total:	13.00	
	Program Total:	145.00	

# **Modified DPT Curriculum**

The DPT program offers a modified curriculum for students experiencing documented personal health-related issues that can have an impact on academic performance. This modified program is a multi-year curriculum. The decision to enter the modified curriculum is a one-time student option. Recommendation of individual students for the modified curriculum shall be made through the Dean of the College of Allied Health Professions (CAHP) upon recommendations from the Department of Physical Therapy Education faculty and the CAHP Student Progress Committee. The student's progress will be monitored each semester by the Department Chair, CAHP Student Progress Committee, and the Dean of the CAHP.

# **Exemption from Individual Course**

Students with advanced work or degrees in a particular subject formally may petition the instructor and the Department Chair for credit for an individual course. The petition must include the reasons for the request and all necessary documentation and must be submitted by the end of the first week of the course, and preferably prior to registering for the course. If enrolled in the course, the student must comply with the attendance policy until notification that exemption has been granted by the Dean, based upon recommendation of the Department Chair. The instructor, before recommending exemption, may require acceptable performance on an examination. The instructor, in consultation with the Department Chair, may suggest other alternative or additional criteria for determining exemption.

# **Description of the DPT (Advanced Standing) Program**

# **Curriculum Design**

The DPT program for students with advanced standing is designed for the adult learner. Adult learners are students who have life roles other than student, which make demands on their time and resources, such as being a parent and/or an employee. The design uses contemporary educational and instructional learning theories that emphasize outcome behaviors as the desired goal, rather than time on task. Individualized instructional strategies that include mediated learning as well as classroom instruction are also used. The program features several non-traditional instructional strategies.

Advanced students may choose to take web-based courses or enroll in the same on-campus classes offered to the first professional degree students. The instructional modality that is most evident in the curriculum for advanced students is web-based distance learning. Students are prepared to understand the characteristics of the adult learner role and are shown how to acquire adequate computer literacy during an introductory course entitled "Strategies for Successful Learning" (PT 6600). They are expected to be online and engaged in learning activities from the first day of the first semester. The DPT web site is designed to provide the learner with all of the direction that is needed to be successful in each course, including learning objectives, content, learning activities, evaluation methods, and grading criteria.

A mandatory on-campus orientation is required prior to starting the first course of the program. The PT 6600 Strategies for Successful Learning course is completed at that time. One or more on-campus seminar weekends are held each semester, depending on the individual courses enrolled in during that semester. At least two weekend seminar classes are held for each course. Weekend classes may be held Friday evening, Friday afternoon through Saturday, all day Saturday only, or Saturday morning through Sunday afternoon. Seminar sessions may include lecture, testing, skills training, student presentations, and student group work. The seminar periods are conducted as problem solving sessions where the learner has the opportunity to demonstrate knowledge and skill that have been acquired through self-directed study and obtain feedback and stimulation from instructors and fellow students.

Cooperative learning is emphasized throughout the program. Students may be assigned to groups to work on applying their collective problem solving skills toward the resolution of case-based scenarios. The online courses require student participation in asynchronous discussions. Students are required to submit original comments based on relevant research as part of evidence based practice. In addition, they are expected to respond to other comments from students and the instructor(s).

# **Admissions Policies and Procedures**

Admission to the DPT (Advanced Standing) program is through the Admissions Office. Students may apply for the fall, spring, or summer semesters.

#### **International Students**

International students and any other applicants who are not U.S. citizens and who are living in the U.S. should be prepared to provide proof of legal U.S. residency at the time of interview. Proof of legal U.S. residency is required prior to any offer of acceptance. For more detailed information, please visit our web page for <a href="International Students">International Students</a>.

# **Application Requirements**

The applicant to the DPT (Advanced Standing) program must have graduated from a Commission on Accreditation in Physical Therapy Education (CAPTE) accredited physical therapy program and/or be

licensed to practice in the United States. Foreign-prepared therapists must be licensed to practice physical therapy in the State of California.

Additional requirements include:

- 1. A minimum of one year (2000 hours) clinical experience in any setting.
- 2. Letters of recommendation (three with at least one from a PT supervisor/colleague; remaining letters may be from non-PT health care professionals).
- 3. Writing sample including why the applicant desires to pursue this degree and what he/she will plan to accomplish with it; i.e., a statement of purpose.
- 4. Computer access and skills.

Students who do not meet the admissions requirements may petition the Admissions Committee for special consideration.

The Western University of Health Sciences DPT program is committed to admitting individuals with a disability provided they meet all of the qualifications listed above as well as the technical guidelines listed in the previous section with reasonable accommodations.

# **Application Procedures and Deadlines**

Students are advised to submit application materials as early as possible prior to the semester in which they wish to begin their program of studies. Students are allowed to take up to two classes prior to enrolling, but must have their admission packet to the admissions office before the end of their second class in order for those classes to count towards their degree.

To request an informational brochure and/or an application, contact the Admissions Office at:

Office of Admissions
Western University of Health Sciences
309 E. 2<sup>nd</sup> Street
Pomona, CA 91766-1854
(909) 469-5335

http://prospective.westernu.edu/physical-therapy-a/apply-21/

In addition to submitting an application, the applicant must submit a non-refundable application fee of \$60 and official transcripts from all undergraduate and graduate institutions attended.

# **Portfolio Review**

Upon acceptance to the program, as part of the application process, students will be asked to submit a portfolio of past education and experiences related to physical therapy. This information will be reviewed by the faculty advisor and may be analyzed by a credentialing agency. There is a separate fee if the credentialing agency is used to analyze the portfolio. Decisions regarding required courses will be based on review of the portfolio. Some courses may be waived if sufficient evidence is provided to demonstrate fulfillment of competencies and program outcomes in specified areas.

#### **Transfer Credit**

The maximum number of graduate units that may be transferred from past education related to physical therapy is 133 units. This portfolio information will be review by the faculty advisor and may be analyzed by a credentialing agency. There is a separate fee if a credentialing service is used to analyze the portfolio. A minimum of 12 units must be completed with coursework offered by the DPT (Advanced Standing) program at WesternU.

#### **Conditional Admission**

Conditional admission may be granted to DPT (Advanced Standing) applicants with the stipulation that the student achieve and maintain a 2.80 GPA in the program.

#### Readmission

Students with advanced standing who have not been enrolled for more than one calendar year must submit a new application form and fee, unless other arrangements have been made at the time of withdrawal/leave from the program. The application will be assessed according to the current admissions policies, and students will be required to fulfill all program requirements in place at the time of readmission.

#### **Continuing Education and Non-Degree Students**

An applicant holding a bachelor's or master's degree in Physical Therapy and a license to practice in the United States, who does not wish to pursue the DPT (Advanced Standing) degree at Western University of Health Sciences at the present time, but who wishes to engage in graduate study for personal development, continuing education, or other professional development needs, may consider enrollment as a non-degree student. A limited number of applicants may enroll in any DPT course as non-degree students, depending on space availability. Application must be made directly to the Chair of the Department of Physical Therapy Education. The department registration procedures must be followed.

Admission as a non-degree student does not assure acceptance as a degree candidate, should the student at a later time wish to change enrollment status. A maximum of two courses may be taken while in non-degree status. Should the student wish to change enrollment status, the usual admissions procedures must be followed. No more than two courses taken as a non-degree student at Western University of Health Sciences can be transferred into the DPT (Advanced Standing) degree program. A minimum of 12 units, including the two prior courses (if applicable) must be completed after acceptance to the program to meet degree requirements. All criteria for admissions to the DPT (Advanced Standing) program and the admitted student's degree requirements are based on the catalog in place at the time of application and acceptance to the program. Questions about transferring from non-degree to degree status should be directed to the Chair, Department of Physical Therapy Education.

#### **Computer Requirements**

For computer requirements please refer to: <a href="http://www.westernu.edu/computing-students">http://www.westernu.edu/computing-students</a> - section titled "Computer Requirements for Specific Programs".

### Registration

#### **New Students**

New students admitted with advanced standing are notified by mail of their admission status. Classes may fill quickly; therefore, the student is encouraged to register early. The registration dates are

set by the Registrar. A DPT (Advanced Standing) student, who is registering for the first time, whether they are accepted or non-degree seeking, will register through the office of the Department Chair. Course information and schedule of classes are available from the Department of Physical Therapy Education office.

# **Continuing Students**

All continuing DPT (Advanced Standing) students are required to register by the registration deadlines specified by the University Registrar. Registration dates are posted at: <a href="http://www.westernu.edu/registrar-online-information">http://www.westernu.edu/registrar-online-information</a>. Failure to register by the deadline may be grounds for administrative withdrawal. All students registering after the posted deadline will be assessed a \$30.00 per business day late fee.

Full tuition and fees and all prior debts must be paid in full on or by posted deadlines each academic year. Matriculation is subject to the satisfactory completion of all academic requirements and payment of all outstanding debts to the University.

# Adding, Dropping, or Withdrawing from a Course(s)

In order to add or drop a class, the student must obtain an Add/Drop/Withdrawal form from the office of the Department Chair or from the Office of the Registrar. Withdrawal from a course (not the program) after the second week and prior to the last day of class requires completion and submission of the appropriate withdrawal form obtained from the Registrar. Please note that this will result in a "W" grade.

# Full-time/Part-Time Status

A student enrolled in the DPT (Advanced Standing) program at Western University of Health Sciences must enroll in at least six (6) units per term to be considered full-time. It is expected that students with advanced standing in the DPT program will be enrolled less than full-time, i.e., one course per semester. To be eligible for financial aid, a student must be enrolled at least half time (three (3) units) per semester.

### Time Limits

The DPT (Advanced Standing) program may be completed within 2 - 2 ½ years of part-time study. All requirements for the degree must be fulfilled within five years from the date of acceptance to the program. Extensions of this time limit may be granted through petition to the faculty and Department Chair.

# **Tuition and Fees**

By action of the Board of Trustees, DPT (Advanced Standing) tuition and fees for the 2013-2014 academic year (subject to change) are as follows:

\$402.00 Per Credit Hour Tuition

# **Other Fees and Expenses**

\$30.00	Registration Late Fee (per business day)
\$350.00	Graduation Fee
\$40.00	Locker Key Replacement Charge
\$10.00	Official Transcript (Each)
\$21.00	Rush Transcript, First Class Mail (Each)
\$25.00	Rush Transcript, Federal Express (Each)
\$10.00	Student ID Replacement Fee
TBD	Breakage Fee (Replacement Cost)

#### **Academic Policies and Procedures**

Unless otherwise stipulated in this section, all other Academic Policies and Procedures, Standards of Academic Progress, and Standards of Professional Conduct of the DPT (Entry Level) program must also be met.

# Attendance/Absences

Attendance is mandatory for all seminars. Dates of the weekend seminar program are published and distributed at the beginning of each semester and are subject to change. Students who are unable to attend a weekend session must contact the course instructor immediately to make other arrangements regarding missed exams and/or course information. Students who consistently do not comply with this policy may be dismissed from the program. The department faculty may make a recommendation for dismissal to the College of Allied Health Professions Student Progress Committee (SPC). The SPC will review the student's performance and make a recommendation to the Dean of the College of Allied Health Professions who will make a determination about the student's continued enrollment.

# **Residency Requirements**

A minimum of 12 units must be completed with course work offered by the DPT program at Western University of Health Sciences.

# **Standards of Academic Progress**

All students admitted to the DPT (Advanced Standing) program are expected to make reasonable progress each year toward the degree objective. Students with advanced standing are considered to be making reasonable academic progress when they maintain an overall GPA of at least 2.80 (2.70 for students who began matriculation prior to fall 2009) and complete four to six units during the calendar year.

# Financial Aid Warning Policy (Title IV and Title VII)

If a student is not making Satisfactory Academic Progress (SAP) they may be placed on "Financial Aid Warning" status for the next payment period and continue to receive financial aid for that period. Financial Aid is any financial assistance offered to the student for paying for their education, such as loans, scholarships, Federal Work-Study, grants and stipends (judged on the criteria of the stipend). Students who fail to make SAP by the end of the payment period lose Financial Aid eligibility.

It is the policy of the Financial Aid Office (FAO) that once a student has been placed on academic probation for not meeting SAP standards as defined by the college, the FAO will automatically place the student in a Financial Aid Warning status. During the next academic term, if the student does not meet SAP standards and the college places the student on academic suspension, the student will no longer be eligible for financial aid. If the student appeals the academic suspension and the appeal is approved,

financial aid will be reinstated. If the student is directed to audit courses, those courses will **not** be covered by financial aid.

# **Curriculum Organization**

Students must meet all the requirements for the DPT (Entry Level) program as listed in the previous section. Credit will be given for previous coursework. It is anticipated that students will be required to complete at least the following courses, unless their portfolio shows evidence of mastery of course content:

Course	Title	Credit Hours
PT 6600	Strategies for Successful Learning	0.00
PT 8101	Pharmacology for the Physical Therapist	3.00
PT 8111	Structural Imaging in Physical Therapy Diagnosis	3.00
PT 8120	Medical Screening and Differential Diagnosis	4.00
PT 8130	Advanced Differential Diagnosis I	2.00
PT 8133	Advanced Differential Diagnosis II	2.00
PT 8135	Advanced Differential Diagnosis III	2.00
PT 8140	Application of Research to Evidence-Based Practice	3.00
	Total:	19.00

### **Additional Courses**

These additional courses have been specifically designed for students with advanced standing who may not have met a minimal level of proficiency in these areas prior to admission to the program. Proficiency level will be determined through a review of the applicant's portfolio. Students may opt to take an equivalent course offered in the first professional DPT degree program to fulfill content not obtained through previous academic programs, continuing education, or clinical experience. Another option offered to students is to complete a group or individual independent studies course to fulfill course requirements.

Course	Title	<b>Credit Hours</b>
PT 8200	Professional Leadership and Ethics	2.00
PT 8210	Documentation and Health Care Financing	2.00
PT 8230	Wellness and Prevention/Community Education	3.00
PT 8698	Group Independent Studies	1.00 - 3.00
PT 8699	Individual Independent Studies	1.00 - 3.00

# **Course Descriptions**

All courses are awarded letter grades, except when indicated otherwise. Prerequisite course requirements refer to the successful completion of a designated course(s) or approval/permission of the individual course instructor prior to enrollment. A student is required to petition the faculty in writing if they wish to be considered for advancement without successfully meeting the course prerequisite(s). The faculty may waive compliance of successful completion of a course prerequisite in order to progress to the next required course(s). The Department Chair/designee will provide the student with written approval or denial of the requested waiver within two working days of receipt of the petition. The student may remain in class or on a clinical education experience pending notice of the outcome from the Department Chair/designee.

# IPE 5000 Patient Centered Cases I- An Interprofessional Approach (1 credit hour, CR/NCR)

Prerequisite: Acceptance to the program. IPE 5000 is offered as part of the college curriculum for all first year entry level health professional students and is a university requirement for all participating colleges. The course is designed to prepare the health care student to practice patient-centered collaborative care through a team approach. Working in small interprofessional teams, students will explore cases representing conditions across the human lifespan.

# IPE 5100 Patient Centered Cases II - An Interprofessional Approach (1 credit hour, CR/NCR)

Continuation of IPE 5000.

# IPE 6000 Team Training in Healthcare I (1 credit hour, CR/NCR)

IPE 6000 will continue to build upon the knowledge from the IPE 5000 series, but will expand upon that knowledge and require the student to learn and apply advanced tools and strategies that are crucial to develop a collaborative healthcare team. The majority of the course is independent study with students engaging in a large scale tabletop activity where they apply team tools necessary to solve a healthcare dilemma.

# IPE 6100 Team Training in Healthcare II (1 credit hour, CR/NCR)

Continuation of IPE 6000.

# OM 5001 Summer Medical Sciences Preparatory Program (0 credit hours, CR/NCR, Optional)

The Summer Preparatory Program prepares incoming students for the anatomy course and provides an introduction to biochemistry. The anatomy component focuses on the skeletal, muscular, cardiovascular and nervous systems, yet provides a brief overview of other body systems. It is designed for the student without prior coursework in anatomy. Acceptance into this program is at the discretion of the instructor/coordinator. The course is an elective and does not meet any requirements for graduation. A separate tuition of \$750 is charged.

### PT 5000 Psychosocial and Ethical Aspects of Health Care (3 credit hours)

Prerequisite: Acceptance to program. Introduction to the psychological, sociological, and cultural aspects of acute, chronic, terminal, traumatic, and congenital medical problems on the patient, family and therapist. Includes impact of verbal and non-verbal communication and patient advocacy. Overview of basic legal and ethical principles, as well as application of ethical decision-making in relationship to professional health care dilemmas. Lecture.

# PT 5015 Professional and Practice Issues in Physical Therapy (3 credit hours)

Emphasis on elements of the professional therapeutic relationship and concepts presented in the *Guide to Physical Therapist Practice*. This course will cover a broad perspective of world, national and state health care issues, professional advocacy and professional aspects of physical therapy practice, including reimbursement in a variety of practice settings. Lecture.

# PT 5030 Anatomy I (4 credit hours)

Prerequisite: Acceptance to the program. The first of two courses covering normal human anatomy, including thorax, abdomen and the upper extremities. Incorporates surface palpation of the entire body. Cadaver dissection is included. Lecture and Laboratory.

# PT 5035 Anatomy II (4 credit hours)

Prerequisite: Successful completion of PT 5030 and 5050. The second of two courses covering normal human anatomy, including lower extremities, spine, head, and neck. Emphasis is placed on the neuromusculoskeletal system. Cadaver dissection is included. Lecture and Laboratory.

# PT 5050 Kinesiology I (3 credit hours)

Prerequisite: Acceptance to the program. Introduction to the theoretical principles and clinical applications of kinetics and kinematics to the axial and extremity joints and muscles, with an emphasis on normal function. Pathokinesiology is addressed as an aid to identify major concepts and to introduce clinical relevance. The course includes basic evaluation of the musculoskeletal system. Lecture and Laboratory.

# PT 5055 Kinesiology II (5 credit hours)

Prerequisites: Successful completion of PT 5030 and 5050. Continuation of PT 5050 on the theoretical principles and clinical applications of kinetics and kinematics to the axial and extremity joints and muscles, with emphasis on normal function and the specific joint analysis in complex tasks. Lecture and Laboratory.

### PT 5070 Patient Care Skills I (3 credit hours)

Prerequisite: Acceptance to program. Introduction to the basic physical therapy skills of transfers, mobility, soft tissue mobilization, and medical terminology. Introduction to documentation in a variety of physical therapy settings. Lecture and Laboratory.

#### PT 5075 Physical Agents and Procedures (3 credit hours)

Prerequisite: Successful completion of PT 5030 and 5100. This course will cover tissue healing and impairments with didactic and clinical application of selected physical agents used in physical therapy practice. Emphasis on clinical decision making in the selection, application and evaluation of modalities within a comprehensive plan of care to address impairments and functional limitations. Lecture and Laboratory.

# PT 5100 Physiology and Pathophysiology (5 credit hours)

Prerequisite: Acceptance to program. This course is designed to elucidate the functional characteristics of human physiology. Principles of emphasis include structural basis of function as well as integrational elements underlying homeostatic regulation. The course is also designed to elucidate the characteristics and pathophysiology of certain common and significant diseases that are encountered by physical therapists. Lecture.

#### PT 5120 Human Life Sequences (2 credit hours)

Prerequisites: Successful completion of PT 5000, 5030, 5035, 5050, 5055 and 5100. The developmental process from conception to death with the emphasis on human motor performance. Sequence of study includes fetal life, infancy, early and middle childhood, late childhood, adolescence, early and middle adulthood, and the aging adult including neuroanatomical and neurophysiological mechanisms in relationship to developmental changes in performance, and musculoskeletal development in relationship to the human life span. Lecture and Laboratory.

# PT 5130 Research Methodology in Health Care (3 credit hours)

Prerequisite: Acceptance to program. This course will cover basic quantitative, qualitative, and epidemiologic methods and designs of research. Topics include ethical issues related to research, validity and reliability of measures, sampling methods, and appropriate statistical analysis for various types of research. Lecture.

# PT 5140 Evidence-based Practice: Application of Research to Clinical Practice (3 credit hours)

Prerequisite: Successful completion of PT 5130. This course provides students with an opportunity to apply principles and concepts from research methodology in the critical analysis of clinical literature. Emphasis is placed on the practical application of research principles and the scientific process as utilized by an evidence- based practitioner. Lecture.

# PT 5141 Professional Development and Reflective Practice (1 credit hour)

Overview of clinical education in physical therapy to include the APTA guidelines, legal aspects, and professional development through reflective practice and self-assessment. Portfolio development, scheduling, and assignment for Clinical Education I are incorporated herein. Lecture.

#### PT 5142 Professional Development and Clinical Education (1 credit hour)

Prerequisite: Successful completion of PT 5141. Continuation of PT 5141 on various aspects of professional development and clinical education, including expectations and evaluation of clinical performance and utilization of the clinical evaluation tool, the CPI. Portfolio management, scheduling and assignment for Clinical Education II are incorporated. Lecture.

# PT 5143 Professional Development and Clinical Practice (1 credit hour)

Prerequisite: Successful completion of PT 5141, and 5142. Continuation of PT 5142 on various aspects of professional development and clinical practice to include completion of the portfolio, resume writing and interview skills, and an overview of the licensure process. Scheduling and assignment for Clinical Education III and IV are included herein. Optional opportunity for an extended internship via application and interview process. Lecture.

# PT 5205 Examination and Management of Musculoskeletal Dysfunction I (5 credit hours)

Prerequisite: Successful completion of PT 5120, 5215, 5233, 5235, and 8110. Regional, problem solving approach to neuromusculoskeletal problems in the adult population including underlying foundational principles. Emphasis is on clinical examination and management skills, including physical therapy differential diagnosis, causal factors, impairments, symptoms and evidence based treatment. Introduction of applicable pharmacology used in the patient population, including drug actions and screening for signs of toxicity and adverse effects. Lecture and Laboratory.

### PT 5210 Examination and Management of Musculoskeletal Dysfunction II (5 credit hours)

Prerequisite: Successful completion of PT 5205, 6030, 6040, and 6060. Continuation of PT 5205.

# PT 5215 Motor Control and Motor Learning (2 credit hours)

Prerequisite: Successful completion of PT 5030, 5035, 5050, 5055, and 5100. Introduction to the theories, structures, and processes of motor control and motor learning. Lecture and laboratory.

# PT 5220 Principles of Teaching, Learning, and Communication (2 credit hours)

Prerequisite: Successful completion of PT 5215 and 5233. Communication and teaching-learning theory applied to clinical practice. Includes teaching techniques for being a Clinical Instructor, functioning as a member of an interdisciplinary team, and delivering clinical and professional presentations. Lecture.

# PT 5230 Screening for Medical Referral I (2 credit hours)

Prerequisite: Successful completion of PT 5030 and 5100. This course uses a systems approach to discuss common medical conditions, their epidemiology, etiology, clinical manifestations, medical management, and issues related to PT screening, examination, interventions and appropriate referral to other medical practitioners. Lecture and Laboratory.

# PT 5233 Foundations of Patient Examination (2 credit hours)

Prerequisite: Successful completion of PT 5000, 5030, 5035, 5050, 5055, 5070 and 5230. Foundational principles and practice of evidence based clinical physical therapy examination and management of persons with orthopedic and neurologic disorders. Emphasis on critical thinking though focused patient communication in a culturally sensitive manner. Lecture and Laboratory.

# PT 5235 Screening for Medical Referral II (2 credit hours)

Prerequisite: Successful completion of PT 5230. This course continues from PT 5230 with a focus on screening for the complex patient. A systems approach is utilized to discuss common medical conditions, their epidemiology, etiology, clinical manifestations, medical management, and issues related to PT screening, examination, interventions and appropriate referral to other medical practitioners. Lecture and Laboratory.

### PT 6008 Neuroscience (5 credit hours)

Prerequisite: Successful completion of PT 5120, 5215, and 5233. Systematic, problem solving approach to the anatomical and physiological structure and function of the normal and injured central, peripheral and autonomic nervous systems. Students will develop sufficient knowledge of neurophysiological principles to comprehend nervous system function and alternations resulting from damage. Three-dimensional relationships and functional connectivity will be examined in detail with the ultimate goal of developing the ability to diagnose lesions of CNS based on presenting deficits. Assessment of numerous case studies will familiarize students with organized, logical strategies for deduction of deficits and localization of lesions. Lecture and laboratory.

# PT 6010 Examination and Management of Neurological Disorders I (5 credit hours)

Prerequisite: Successful completion of PT 5025, 5215, 5233, 6008, 6030, 6040, 6060 and 6630. This course will present a systematic, problem solving approach to neurological disorders in the adult population, including underlying foundational principles. Emphasis is on clinical examination and management skills, including physical therapy differential diagnosis, causal factors, impairments, symptoms and evidence based treatment. Introduction of applicable pharmacologic principles appropriate for this population including drug actions and screening for signs of toxicity and adverse effects is included. Lecture and Laboratory.

# PT 6015 Examination and Management of Neurological Disorders II (5 credit hours)

Prerequisite: Successful completion of PT 5210, 6010, 6020, and 6065. Continuation of PT 6010.

# PT 6020 Electrotherapeutic Principles (2 credit hours)

Prerequisite: Successful completion of PT 5205, 5233, 5235, 6008, 6030, 6040, and 6060. This course provides practical clinical application of electrotherapeutic strategies in the physical therapy management of dysfunction. This will include basic foundational concepts, parameters, electrical safety, and instrumentation. Lecture and laboratory.

# PT 6030 Physiological Basis of Therapeutic Exercise (4 credit hours)

Prerequisite: Successful completion of PT 5120, 5215, 5233, and 5235. The physiological basis of therapeutic exercise is the foundation for this course, as well as the application of therapeutic exercise to treat acute, sub-acute and chronic conditions. This course addresses bioenergetics, basic nutritional principles, therapeutic exercise and exercise prescription based upon the acute and chronic physiological responses of the human body during exercise and other special conditions. Lecture and laboratory.

# PT 6040 Evaluation and Treatment of Problems of the Cardiopulmonary System (4 credit hours)

Prerequisite: Successful completion of PT 5233, 5235, and 8110. This course serves as an introduction to evaluation and treatment of diseases of the cardio-pulmonary system. It will include physiology and pathophysiology, evaluation methods, treatment methods, and prevention with a focus on differential diagnosis. Introduction of applicable pharmacologic principles for the patient population, including drug actions and screening for signs of toxicity and adverse effects. Lecture and laboratory.

# PT 6045 Differential Diagnosis of the Integumentary System/Wound Care (2 credit hours)

Prerequisite: Successful completion of PT 5233, 5235, and 6060. This course introduces screening for pathological conditions of the integumentary system including examination and interdisciplinary medical management. Emphasis on wound healing and intervention techniques. This course also introduces aspects of pharmacology used in this patient population, including drug actions and screening for signs of toxicity and adverse effects. Lecture and laboratory.

# PT 6050 Principles of Administration and Management (3 credit hours)

Prerequisite: Successful completion of PT 5015, 5220, and 5233. Organization and administration of a physical therapy department including budget considerations, hiring-interviewing techniques, marketing, and medical-legal issues. Lecture.

# PT 6060 Prosthetics, Orthotics, and Gait (3 credit hours)

Prerequisite: Successful completion of PT 5120, 5125, 5233, 5235, 6008 and 8110. Assessment, appropriate selection, and application of prosthetic and orthotic devices to physical therapy clients with common neurological and musculoskeletal impairments. Analysis and differentiation of pathological gait patterns related to use of prosthetic and orthotic devices. Lecture and laboratory.

# PT 6065 Patient Care Skills II (2 credit hours)

Prerequisite: Successful completion of PT 5215, 5233, 5235, 6030 and 6040. Continuation of PT 5070. A case based approach to patient care with a focus on the acute care setting. Emphasis is on examination and patient care skills of complex patients in an interdisciplinary setting. Critical thinking elements focus on effective communication and patient care documentation. Lecture and Laboratory.

# PT 6070 Prevention and Management of Problems in the Aging Adult (3 credit hours)

Prerequisite: Successful completion of PT 5120, 5210, 5233, 6010, 6020, 6030, 6040, 6045, 6060 and 6065. Systematic, problem solving approach to the elderly patient/client with emphasis on prevention, etiology, clinical manifestations, evaluation and treatment, and resources. This course also introduces aspects of pharmacology used in this patient population, including drug actions and screening for signs of toxicity and adverse effects. Lecture.

# PT 6075 Prevention and Management of Problems in the Pediatric Population (4 credit hours)

Prerequisite: Successful completion of PT 5120, 5215, 5233, 5235, 6008, 6040, 6060, 6630 and 8100. Systematic, problem solving approach to the pediatric client with emphasis on prevention, etiology, clinical manifestations, evaluation, and treatment. This course also introduces aspects of pharmacology used in the patient population, including drug actions and screening for signs of toxicity and adverse effects. Lecture and laboratory.

# PT 6090 Differential Diagnosis and Management of the Complex Patient (3 credit hours)

Prerequisite: Successful completion of PT 5210, 5215, 5233, 5235, 6010, 6020, 6030, 6040, 6045, 6065, and 6075. This course employs a mixed traditional and problem-based approach using a case study context. Students learn to differentially diagnose and manage patients with multisystem dysfunction within the scope of physical therapy practice. Lecture and laboratory.

# PT 6600 Strategies for Successful Learning (0 credit hours, CR/NCR)

Prerequisite: Acceptance to program. This course provides new students entering with advanced standing an introduction to the DPT program. Following an overview of the most important services, policies, instructional methods and resources, students will have an opportunity to assess their readiness for the program. The awareness, knowledge, and skills derived from this part of the course will help ensure successful completion of the program. This course is provided on campus only and must be taken prior to beginning the first semester in the program.

### PT 6630 Structural Imaging in Physical Therapy Differential Diagnosis – Neurologic (1 credit hour)

Prerequisite: Successful completion of PT 5233 and 8110. This course will provide an introduction to indications, instrumentation, and clinical interpretation of various medical imaging techniques. The focus will be on test selection, clinical interpretation, and practical integration of imaging data into diagnosis of neurological conditions for planning and communication with other medical professionals. Lecture.

# PT 7010 Clinical Education I (1 credit hour, CR/NCR)

Prerequisite: Successful completion of Semesters I and II. Forty hours per week for two weeks under the direct supervision of a physical therapist serving as the clinical instructor. Application of course content in Semesters I and II will be emphasized in this clinical experience.

# PT 7020 Clinical Education II (6 credit hours, CR/NCR)

Prerequisite: Successful completion of PT 5141, 5242, and 5233. Forty hours per week for twelve weeks under the direct supervision of a physical therapist serving as the clinical instructor. Application of course content in Semesters I through V (musculoskeletal and/or cardiopulmonary pathologies) will be emphasized in this clinical experience.

# PT 7030 Clinical Education III (6 credit hours, CR/NCR)

Prerequisite: Successful completion of PT 5143, 6015, 6050, 6070, and 6090. Forty hours per week for twelve weeks under the direct supervision of a physical therapist serving as the clinical instructor. Application of all course content in Semesters I though VII will be emphasized in this clinical experience.

# PT 7040 Clinical Education IV (6 credit hours, CR/NCR)

Prerequisites: Successful completion of PT 7030. Forty hours per week for twelve weeks under the direct supervision of a physical therapist serving as the clinical instructor. Application of all course content in Semesters I though VIII will be emphasized in this clinical experience.

# PT 7050 Clinical Internship (0 credit hours)

Prerequisite: Successful completion of all prior coursework and selection of clinical facility. An optional 1-year clinical experience via extension of PT 7030and 7040 in the same clinical facility.

# PT 8100 Introduction to Pharmacology for the Physical Therapist (1 credit hour)

Prerequisite: Basic and applied pharmacology for the physical therapist. Includes pharmacokinetics, pharmacodynamics, classes of drugs, screening for drug toxicities and adverse effects related to physical therapy. Lecture.

# PT 8101 Pharmacology for the Physical Therapist (3 credit hours)

Basic and applied pharmacology for the physical therapist. Includes the effects of pharmacotherapy on the health and well-being of patients, and clinical incorporation of pharmacologic information into treatment selection and delivery. Open to students enrolled in the DPT (Advanced Standing) program only.

### PT 8110 Structural Imaging in Physical Therapy Diagnosis- Musculoskeletal (2 credit hours)

Prerequisite: Successful completion of PT 5030 and 5035. This course will provide an introduction to indications, instrumentation, and clinical interpretation of various medical imaging techniques. The focus will be on test selection, clinical interpretation, and practical integration of imaging data into diagnosis of musculoskeletal conditions for planning and communication with other medical professionals. Lecture.

### PT 8111 Structural Imaging in Physical Therapy Diagnosis (3 credit hours)

This course will familiarize the DPT student with the indication, instrumentation, & clinical interpretation of orthopedic imaging techniques, including plain film x-ray, magnetic resonance, computerized tomography, &radioisotope imaging. Selection protocols for each will be discussed to acquaint the student with advantages & disadvantages of each method & what type of information each technique best presents. This course will focus on the clinical interpretation & practical integration of imaging data into rehabilitation regimen design & communication with other medical professionals. Course may be offered online. Open to students enrolled in the DPT (Advanced Standing) program only.

#### PT 8120 Medical Screening and Differential Diagnosis (4 credit hours)

Prerequisite: Acceptance to the program as a student with advanced standing. The course uses a systems approach to discuss common medical conditions, their epidemiology, etiology, clinical manifestations, medical management and issues related to PT screening, examination, interventions, and red flags. An introduction to differential diagnosis and systems review in physical therapy is provided with emphasis on the integumentary system. Includes labs on physical exam related to visceral structures for purposes of medical screening and indications for referral to medical practitioner or other appropriate health care providers. May include online lectures/discussions and in class laboratory.

# PT 8130 Advanced Differential Diagnosis I (2 credit hours)

Prerequisites: Licensed physical therapist with at least one year of clinical experience. This course includes detailed skills for differentiating pathologies within the musculoskeletal system as described in the *Guide to Physical Therapist Practice*. The reliability and validity of relevant PT tests and measures will be explored. The physical therapist will develop higher level clinical reasoning skills related to developing a PT diagnosis and interventions. Cases will include those with complex presentations, multi-systems involvement, and will encompass the life span.

# PT 8133 Advanced Differential Diagnosis II (2 credit hours)

Prerequisite: Licensed physical therapist with at least one year of clinical experience. This course includes detailed skills for differentiating pathologies within the cardiovascular and pulmonary systems as described in the *Guide to Physical Therapist Practice*. The reliability and validity of relevant PT tests and measures will be explored. The physical therapist will develop higher level clinical reasoning skills related to developing a PT diagnosis and interventions. Cases will include those with complex presentations, multi-system involvement, and will encompass the life span.

### PT 8135 Advanced Differential Diagnosis III (2 credit hours)

Prerequisites: Licensed physical therapist with at least one year of clinical experience. This course includes detailed skills for differentiating pathologies with the neurologic system as described in the Guide to Physical Therapist Practice. The reliability and validity of relevant PT tests and measures will be explored. The physical therapist will develop higher level clinical reasoning skills related to developing a PT diagnosis and interventions. Cases will include those with complex presentations or multi-system involvement and will encompass the life span.

# PT 8140 Application of Research to Evidence Based Practice (3 credit hours)

Prerequisite: PT 5130 or equivalent. Examines research methods used for the objective and systematic study and evaluation of clinical practices. Applies evidence in the area of physical therapy administration and management to current practice settings following the five steps of evidence based practice. Includes individual reviews and group on-line discussions.

### PT 8200 Professional Leadership and Ethics (2 credit hours)

Potential leadership roles of the physical therapist will be discussed. Issues related to professional development and reflective practice, collaboration with other health care providers, and knowledge of advocacy will be examined. Group discussions will include legal/ethical issues experienced in the clinical setting and in relation to the role of the physical therapist in primary care/direct access.

# PT 8210 Documentation and Health Care Financing (2 credit hours)

Government, private insurance and managed care changes in health care financing will be presented. Students will review and critique documentation as a means to developing their own skills in this area.

# PT 8230 Wellness and Prevention/Community Education (3 credit hours)

The application of primary, secondary and tertiary prevention and the therapist's role in wellness and health promotion will be discussed. Teaching/learning principles are applied to community education programs including those related to wellness, prevention and health promotion.

# PT 8400 Capstone Project I (1 credit hour, CR/NCR)

Prerequisite: Successful completion of PT 5130 and 5140. This course provides the opportunity to select a capstone project in one of three areas: a community service partnership project; a comprehensive case study from a clinical education experience; or an empirical research project. It is expected that the final product will contribute to the community, clinical practice, or professional literature at a level consistent with presentation to a professional audience. Completed projects will be presented as posters or platform presentations prior to graduation.

# PT 8401 Capstone Project II (1 credit hour, CR/NCR)

Prerequisite: Successful completion of PT 5233 and 8400. This course provides the continued development of the capstone project. Continuation of PT 8400.

# PT 8402 Capstone Project III (3 credit hours)

Prerequisite: Successful completion of PT 8401. This course is a continuation of PT 8400 and 8401. Completed projects will be presented as posters or platform presentations prior to graduation.

### PT 8500 Selected Topics (2-4 credit hours, CR/NCR)

Prerequisite: Approval of instructor. Special topics in physical therapy presented in workshop format. Laboratory experiences may be included.

### PT 8600 Community Service (2 credit hours)

Prerequisite: Acceptance to program. Contributions student make beyond their professional role though interaction and service are experienced through practical application. Emphasis on developing the role and responsibility of the physical therapist within a given community.

### PT 8698 Group Independent Studies (1-3 units)

Prerequisite: Acceptance to program as a student with advanced standing. Students will work in small groups to fulfill competency in a specified area of physical therapy practice. Course content and assignments will be individualized to meet the group's needs.

### PT 8699 Individual Independent Studies (1-3 units)

Prerequisite: Acceptance to program. Students will work on individual assignments/projects to fulfill competency in a specified area of physical therapy practice. Course content and assignment will be individualized to meet the student's needs.

# **Honors and Awards**

The following awards are considered for presentation to PT students annually:

Alumni Award (Advanced Standing students)

Bertha Oliver Memorial Award

Class Morale Award

Dean's Award

John Wallace Award

Leadership and Service Award (Advanced Standing students)

Physical Therapy Academic Achievement Award

Physical Therapy Faculty Award

Physical Therapy Outstanding Clinical Performance Award

Physical Therapy Outstanding Service Award

Rebecca E. Pabst Memorial Scholarship Award

The Phoenix Award (Entry or Advanced Standing students)

The Roy G. and Marion L. Kramer Endowment Award

# **Academic Calendar**

\*Students in clinical rotations observe their preceptor's hours, which may include working on federal holidays.

#### Fall 2013

Spring 2014

Wednesday, August 8, 2013

Orientation

Saturday, August 10, 2013
Convocation/White Coat Ceremony

Monday, August 12, 2013
Fall Classes Begin (Years 1 and 2)

Monday, August 19, 2013 Fall Classes Begin (Year 3)

Monday, September 2, 2013 Labor Day – No Classes\*

Monday, October 14, 2013

Columbus Day – No Classes\*

Wednesday, November 27, 2013
Thanksgiving Recess Begins @ 5:00 p.m.\*

Monday, December 2, 2013
Classes Resume

Friday, December 13, 2013
End of Fall Semester Classes (Years 1-3)

Monday, December 23, 2013
Winter Recess Begins (Years 1-3)

Monday, January 6, 2014
Spring Classes Begin (Years 1-3)

Monday, January 20, 2014

Martin Luther King Day – No Classes\*

Monday, February 17, 2014

President's Day – No Classes\*

Monday, March 24, 2014
Spring Break Begins (Years 1-2)

<u>Friday, March 28, 2014</u> *End of Spring Semester Classes (Year 3)* 

Monday, March 31, 2014
Spring Classes Resume (Years 1-2)

Friday, May 9, 2014 End of Spring Semester Classes (Year 2)

Wednesday - Friday, May 14-16, 2014 Commencement

Friday, May 16, 2014 End of Spring Semester Classes (Year 1)

### **Summer 2014**

# Monday, April 7, 2014

Summer Classes Begin (Year 3)

# Monday, May 19, 2014

Summer Classes Begin (Year 2)

# Monday, May 26, 2014

Memorial Day – No Classes\*

# Tuesday, May 27, 2014

Summer Classes Begin (Year 1)

# Friday, July 4, 2014

Independence Day - No Classes\*

# Friday, July 25, 2014

End of Summer Semester Classes (Year 1)

# Friday, August 1, 2014

End of Summer Semester Classes (Year 3)

# Friday, August 8, 2014

End of Summer Semester Classes (Year 2)

# College of Dental Medicine Doctor of Dental Medicine Program

#### Accreditation

The College of Dental Medicine's Doctor of Dental Medicine (DMD) program was granted "Initial Accreditation" by the Commission on Dental Accreditation of the American Dental Association at its January 29, 2009 meeting.

The Commission on Dental Accreditation authorized the use of the following statement for Western University of Health Sciences to announce its dental program's accreditation status:

"The dental education program is accredited by the Commission on Dental Accreditation [and has been granted the accreditation status of initial accreditation]. The Commission is a specialized accrediting body recognized by the United States Department of Education. The Commission on Dental Accreditation can be contacted at (312) 440-4653 or at 211 East Chicago Avenue, Chicago, IL 60611-2678."

#### Vision

Western University of Health Sciences College of Dental Medicine will be a premier center for integrative educational innovation, basic and translational research, and high quality, patient-centered, interprofessional health care; all conducted in a setting that utilizes advanced technology and promotes individual dignity and potential for personal and professional growth.

## Mission

The WesternU College of Dental Medicine will realize this vision by educating and training highly competent, diverse groups of clinical practitioners who have the ability to provide complex, integrative, high-quality, evidence-based care for patients, families and communities. WesternU College of Dental Medicine will produce graduates who will be ethical, caring life-long learners; who will collectively engage in clinical oral health care, public health practice, biomedical and health services research, education and administration; and who will fulfill their professional obligation to improve the oral health of all members of society, especially those most in need. They will embrace scientific and technological advances and understand the connections between oral health and general health. They will be partners in the interprofessional health care delivery systems of the future, as well as leaders of their own oral health care teams, as they enhance and extend the quality of life in their communities.

# Values/Goals

- Education/Teaching
- Patient Care
- Research
- Service

# **Personal Competencies for Admission and Matriculation**

Candidates for the Doctor of Dental Medicine program must have the intellectual, emotional and physical abilities, with or without accommodations, to acquire the knowledge, technical and clinical skills needed to successfully complete the curriculum in order to pursue a career in dentistry. Reasonable

accommodations for persons with disabilities will be considered on an individual basis, but a candidate must be able to perform in an independent manner.

The practice of dentistry requires the performance of specific functions that fall into five broad skills categories: observation, communication, motor, interpretive/conceptual/quantitative, and behaviors/social.

#### **Observation Skills**

**Basic Sciences:** A candidate must be able to acquire a defined level of required information as presented through demonstrations and experiences in the basic and dental sciences. This includes, but is not limited to, information conveyed through physiologic and pharmacological demonstrations in animals and microscopic images of microorganisms and human or animal tissues in normal and pathologic states. A candidate must be able to acquire information from written documents and to visualize information presented as paper, films, slides, video and computer images. A candidate must be able to interpret radiographs (x-rays) and other graphic images, with or without the use of assistive devices. A candidate must have functional use of visual, auditory, and somatic sensation while using appropriate enhancement of sensory modalities (such as microscopes, stethoscopes, etc.).

**Clinical Sciences:** A candidate must be able to observe a patient accurately, at a distance and close at hand, and observe and appreciate non-verbal communications when performing general dentistry treatment or administering medications.

A candidate must be able to perform visual and tactile dental examinations and treatment including use of visual acuity, with or without accommodations, to discern slight differences and variations in color, shape, and general appearance between normal and abnormal soft and hard tissues. Use of tactile senses may be either direct palpation or indirect through instrumentation. A candidate must also possess the visual acuity to read charts, records, small print and handwritten notation, and distinguish small variations in colors both intra- and extra-orally.

## **Communication Skills**

A candidate must be able to communicate clearly and effectively with a degree of sensitivity with patients, parents and/or guardians; establish good rapport, convey or exchange information at a level allowing development of a health history; identify problems presented; explain alternative solutions; and give directions during treatment and post-treatment. For effective patient treatment, the candidate must be able to communicate with patients, parents, guardians, and all members of the dental and medical health care team effectively and efficiently. Communication must be culturally appropriate. Communication includes oral and written modes. This requires the ability to understand, write and speak fluent English. The candidate must also be able to recognize nonverbal communication cues.

#### **Motor Skills**

A candidate should have a sufficient level of manual dexterity such that he/she is able to execute the fine movements required to provide general dental care and treatment to patients within a specified amount of time. It is required that a candidate possess the manual motor skills necessary to directly perform diagnostic and treatment maneuvers associated with the practice of general dentistry. Such maneuvers require coordination of both gross and fine muscular movements, equilibrium, and functional uses of the senses of touch, hearing and vision. A candidate must be able to perform basic life support, transfer and position disabled patients, and position and reposition self around patients in various treatment settings. The candidate must be able to operate dental equipment controls utilizing

fine hand movements, position and move dental instruments and move in all directions within one millimeter of tolerance. Candidates must be able to work in the proper ergonomic positions appropriate to the delivery of dental treatment for extended periods of time.

## Interpretive/Conceptual/Quantitative Skills

A candidate must be able to measure, calculate, reason, analyze, integrate and synthesize information. A candidate must be able to comprehend and mentally visualize three-dimensional relationship and to understand the spatial relationships of structures. Problem solving and clinical decision making and critical thinking skills demanded of a general dentist require all of these intellectual abilities. A candidate must be able to perform these problem-solving and critical thinking skills in a timely fashion for effective patient treatment.

#### **Behaviors and Social Skills**

A candidate must possess the emotional health and maturity required for full utilization of his or her intellectual abilities, the exercise of good judgment, maintenance of patient confidentiality, 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, faculty, staff and fellow students. A candidate must recognize that the curriculum is physically, mentally and emotionally demanding. She/he must be able to tolerate physically and emotionally demanding workloads, function effectively under stress, adapt to changing environments, display flexibility and learn to function in the face of uncertainties inherent in the clinical problems of patients

## **Physical Health**

To insure compliance with California State Health Department requirements and exhibit exemplary commitment to the rights and integrity of all parties in the education of health care professional students, the College of Dental Medicine has established medical status credentialing requirements that must be completed prior to matriculation. In addition to the skills listed above, candidates for the Doctor of Dental Medicine degree also must be sufficiently free of any serious communicable diseases. Medical status credentialing is designed to ensure that the safety of patients is not compromised while protecting the rights and safety of students as well. For more detailed information, contact stuemphealth@westernu.edu.

The Doctor of Dental Medicine (DMD) program, along with all programs at Western University of Health Sciences, shares a commitment to develop creative ways of opening the DMD curriculum to competitive, qualified individuals with disabilities. In doing so, however, the DMD degree program must maintain the integrity of its curriculum and preserve those elements deemed essential to educating candidates to become effective dentists.

#### **Admissions Policies and Procedures**

Candidates for admission to the College of Dental Medicine must demonstrate that they are prepared to function as highly competent, caring students and future health care professionals. The College of Dental Medicine seeks a diverse and balanced student population and considers factors such as grade point average (GPA), a well-rounded background, dentistry related work experiences, community service, interpersonal skills, letters of recommendation, Dental Admission Test (DAT) scores and a commitment to compassionate health care.

#### **Application Requirements**

- 1. A minimum of 90 semester hours or 135 quarter hours at an accredited college or university. Candidates who have received or will receive a baccalaureate degree or who have completed units in excess of the minimum required will be given preference. Exceptions may be made on a case-by-case basis.
- 2. Computer literacy in the operation and management of a laptop computer.
- 3. All applicants are required to complete the DAT
- 4. Applicants must complete the following prerequisite courses:

Course	<u>Units</u>
General Biology with Lab	8 semester or 12 quarter units
General or Inorganic Chemistry with Lab	8 semester or 12 quarter units
Organic Chemistry with Lab	8 semester or 12 quarter units
General Physics with Lab	8 semester or 12 quarter units
College English/English Composition	6 semester or 9 quarter units

- a. Prerequisite courses must be successfully completed with a grade of "C" or better at an accredited college or university. A grade of "C-" in any prerequisite course is not acceptable.
- b. Prerequisite courses must be transferable. Transferable courses are those designated for baccalaureate credit by the college or university offering the courses.
- c. Prerequisites may not be satisfied by CLEP or credit for experiential learning.
- d. Introductory level courses in the sciences are not accepted.
- e. All prerequisite coursework in progress at the time of application must be completed no later than the spring semester or quarter prior to registration date in August. Summer session courses taken immediately prior to matriculation at WesternU are not accepted.
- f. WesternU does not waive any of the prerequisite courses.
- g. English as a Second Language (ESL) courses are not accepted for the English requirement.
- h. Only English may be taken on an advanced-placement basis.
- 5. Highly Recommended Courses:
  - Biochemistry
  - Human Anatomy
  - Human Physiology
  - Genetics

- Cellular Biology
- Microbiology
- Calculus I
- Psychology
- Conversational Spanish

# **Experience**

All applicants must have documented a minimum of 30 hours of dental experience, either paid or volunteer. Demonstrated community service through volunteerism or service-oriented employment is encouraged.

#### **Standardized Examinations**

- 1. Dental Admissions Test (DAT)
  - a. All applicants are required to take the DAT. Please visit the <u>American Dental Association</u> website for more testing information.
  - b. DAT scores are valid for 3 years
  - c. DAT must be taken by October 15 of the year you are applying
  - d. Canadian DAT's are not accepted
  - e. DAT scores must be received before the application will be considered
- 2. Test of English as a Foreign Language (TOEFL)
  - a. The TOEFL, including essay, is required for all applicants submitting coursework from foreign schools, and all permanent and temporary residents of the United States. Exception: The TOEFL exam will be waived for students who have graduated with a confirmed baccalaureate or higher degree from a United States institution at the time of application.
  - b. A minimum score of 213 for the Computer Based test or 79 for the Internet Based TOEFL test must be submitted at the time of application.
  - c. TOEFL scores are valid for two (2) years.
  - d. TOEFL scores will not be waived for pending baccalaureate degrees or pending naturalization appointments.
  - e. For more information regarding the TOEFL test, please visit their website at www.toefl.org

## **Applicants with Foreign Coursework**

Applicants who wish to use coursework completed outside the United States must submit their transcripts for evaluation to a <u>Western University of Health Sciences Approved Service</u> at the candidate's expense. A course-by-course evaluation is required and all coursework must be designated as

undergraduate, graduate or professional. WesternU only honors evaluations from one of the above services. The official evaluation must be submitted to AADSAS.

#### International Students

International students and any other applicants who are not U.S. citizens and who are living in the U.S. should be prepared to provide proof of legal U.S. residency at the time of interview. Proof of legal U.S. residency is required prior to any offer of acceptance. For more detailed information, please visit our web page for <u>International Students</u>.

## **Application Procedures and Deadlines**

The Associated American Dental Schools Application Service (ADEA AADSAS) simplifies the application process by providing one standardized form, relieving students of the need to complete multiple applications. For additional information regarding the AADSAS application process and associated deadlines, please visit: <a href="https://portal.aadsasweb.org/">https://portal.aadsasweb.org/</a>.

A mandatory supplemental application (provided by WesternU) is available on-line to all applicants. The supplemental application deadline is December 1<sup>st</sup> of the year prior to which the applicant intends to matriculate in the DMD program. A non-refundable application fee of \$60 must be paid via credit/debit card at the time of application submission.

To request an informational brochure and/or information about the CDM application process, contact the Office of Admissions or visit our website at:

Office of Admissions
Western University of Health Sciences
309 E. 2<sup>nd</sup> Street
Pomona, CA 91766-1854
(909) 469-5335

http://prospective.westernu.edu/dentistry/welcome-2/

#### **Transfers from Other Schools**

## Eligibility

To be eligible for admission with advanced standing as a transfer student, applicants must be currently enrolled in a United States (US) or Canadian dental school, and in good academic and professional standing. First consideration will be given to applicants whose personal circumstances compel them to transfer.

#### **Application Process**

While the Western University of Health Sciences, College of Dental Medicine does not have a specific program designed for candidates seeking admission to the DMD program with advanced standing, it is possible for dental students currently enrolled in a US or Canadian dental school to be considered for admission with advanced standing contingent on space availability. To initiate the process, applicants need to submit a detailed letter describing the reason for the transfer request to the Office of Admissions no later than February 1<sup>st</sup> of the year that they wish to matriculate. After review of the submitted request and the projected space availability for the upcoming academic year, the Admissions and Selection Committee will forward an application to the applicant. The completed application should be returned to the Office of Admissions along with the following:

- a) The supplemental application fee (payable to the Western University of Health Sciences)
- b) A letter from the Dean of the applicant's current dental school, verifying that the student is currently enrolled and is in good academic and professional standing
- c) Official DAT score report
- d) Official undergraduate transcript
- e) Official dental school transcript
- f) National Board Dental Examination score report (where applicable)
- g) Current dental school catalog

#### **Preliminary Review**

Once the required documents have been submitted, the College of Dental Medicine's Admissions and Selection Committee will review the applicant's completed application. Candidates being considered for admission with advanced standing will be interviewed by the Committee.

## Review by Course Directors

Based on the outcome of the interview, and at the request of the Admissions and Selection Committee, candidates who are recommended for possible admission with advanced standing will need to provide copies of all course syllabi for courses completed and in progress at their current dental school. College of Dental Medicine Course Directors (or their designees) will review the course syllabi and, if necessary, communicate directly with candidates when further clarification is needed. Course Directors /designees will provide the Office of Academic Affairs with recommendations regarding the candidate's placement within the curriculum.

#### **Admissions and Placement Decisions**

The Admissions and Selection Committee makes the final recommendation regarding admission. The Student Performance Committee develops specific recommendations regarding placement or modification to the student's curriculum or course requirements to accommodate individual needs. The Office of Admissions and the Office of Academic Affairs coordinate final placement arrangements. The Admissions and Selection Committee will make a recommendation to the Dean who will make the final decision no later than April 1st. The Dean notifies applicants regarding admission decisions and, if indicated, placement decisions. Space must be available within the projected class in order for an offer of admission to be extended.

#### Registration

All DMD students are required to register by the registration deadlines specified by the University Registrar. Registration dates are posted at: <a href="http://www.westernu.edu/registrar-online-information">http://www.westernu.edu/registrar-online-information</a>. Failure to register by the deadline may be grounds for administrative withdrawal. All students registering after the posted deadline will be assessed a \$30.00 per business day late fee.

Full tuition and fees and all prior debts must be paid in full on or by posted deadlines each academic year. Matriculation is subject to the satisfactory completion of all academic requirements and payment of all outstanding debts to the University. The receipt of a final transcript(s) from all colleges/universities

attended and a physical examination with documentation of required immunizations prior to registration are additional requirements for incoming students. Also, all students must show proof of current health insurance coverage by the deadlines provided by the University Registrar. This coverage must be maintained or in effect throughout the academic year. If there is no proof of current coverage, students will be automatically enrolled in the school sponsored insurance plan.

Attendance at Orientation is mandatory for all incoming first-year students.

#### **Full-time/Part-Time Status**

All students enrolled in at least one class/rotation are considered full-time students.

#### **Time Limits**

The Doctor of Dental Medicine program is designed to be completed in four (4) years of full-time study. The requirements for the degree must be fulfilled within 6 years from the date of matriculation to the program.

## **Additional DMD Program Education Requirements**

All students are required to have a laptop computer with internet access; specification will be provided prior to matriculation.

#### **Tuition and Fees**

By action of the Board of Trustees, DMD tuition and fees for the 2013-2014 academic year (subject to change) are as follows:

\$63,325.00	Annual Tuition
\$40.00	Student Body Fee

## **Other Fees and Expenses**

\$5,375.00	Dental Instrument Lease Fee
\$1,000.00	Electronic Textbook and Digital Media Fees
\$1,000.00	Surgical Magnification Kit
\$30.00	Registration Late Fee (per business day)
\$350.00	Graduation Fee
\$470.00	Annual Parking Permit (Auto)
\$25.00	Parking Permit Replacement Fee
\$40.00	Locker Key Replacement Charge
\$10.00	Official Transcript (Each)
\$21.00	Rush Transcript, First Class Mail (Each)
\$25.00	Rush Transcript, Federal Express (Each)
\$10.00	Student ID Replacement Fee
TBD	Breakage Fee (Replacement Cost)

The College of Dental Medicine also requires that each dental student have a classroom responder, approved by the College, which is to be purchased from the University Bookstore. Individual responders must be registered to only one (1) student. Classroom responders are electronic devices that will be used to enhance interactive learning in classrooms. The device will enable faculty to gauge student understanding of concepts, introduce more innovative teaching and assessment methods, improve student involvement in learning, and facilitate classroom learning to become more dynamic. The

responders will also be used to administer and score assessments. Therefore, dental students are also required to bring responders to each class.

# **Academic Requirements**

## **Academic Advisement**

Students will be assigned a faculty advisor by the Office of Academic Affairs in the College of Dental Medicine. Advisement by faculty should be viewed by the student as part of the academic process. The student may seek a change of advisor by meeting with the Director of Student Services. It is the student's responsibility to meet periodically with their advisor. A student on probation must meet with their advisor at least once a month.

## **Attendance/Absences**

Attendance is required at all scheduled instructional period. Absence from instructional periods for any reason does not relieve the student from the responsibility for the material covered during the period of absence. Frequent absences will be viewed as violations of the Standards of Academic and Professional Conduct. Students are expected to participate fully in all classroom, laboratory, and clinic activities. Monitoring of the attendance policy will be the responsibility of the CDM Office of Academic Affairs. Excused absences include illness with a doctor's excuse, bereavement time for immediate family, CDM approved business (for example attendance as student reps at CDA, ASDA or ADEA). Student notification of absence does not constitute an excused absence. A written explanation of the absence, using the Absence Request Form (including documentation on physician letterhead, in the case of illness), must be provided to the Office Academic Affairs and the Course Director.

For all scheduled and unscheduled quizzes, a time allotment for participation will be specified by the faculty member(s) administering the quiz. Students arriving late for a quiz are permitted to participate; however they will still be required to turn in the quiz at the end of the allotted time with the rest of the class. There will be no make-up quizzes.

Students are required to be present for all scheduled examinations and cannot begin an examination after the scheduled time. For a student to take any examination outside of the scheduled time, the student must have prior approval of the CDM Office of Academic Affairs. A student, who cannot attend an exam due to unforeseen circumstances, including illness, should phone 909-706-3492 or 909-706-8261 or e-mail the Assistant/Associate Dean for Academic Affairs at CDMOAA@westernu.edu and the Course Director as soon as possible prior to or after the exam has been administered. A written explanation of the absence (including documentation on physician letterhead in the case of illness) must be provided to the Office of Academic Affairs and the Course Director the next day the student is on campus. The requirement of a physician's note to document illness may be suspended by the University in response to any epidemic or pandemic situation when access to a physician may be limited.

If a student misses an examination, the CDM Office of Academic Affairs, in consultation with the Course Director, will determine whether the absence is excused or unexcused. If the absence is excused, the student will be permitted to take a make-up examination, the nature and time of which will be at the discretion of the Course Director. The student will receive full credit for the make-up examination.

If the absence is unexcused (e.g., failure to show up for a written or practice examination without a valid excuse as determined by the CDM Office of Academic Affairs and the Course Director), this is grounds for summary failure (a score of zero) for that examination.

In the case of an unexcused absence and subsequent summary failure, the student will be referred to the Course Director regarding required remediation. The maximum score that the student can achieve on the remediated examination will be 70%. If the student fails to take either a make-up or a remediation examination at the time designated by the Course Director (without a valid excuse as delineated above) this will be grounds for summary failure (a score of zero) of that examination and referral to the Student Performance Committee. In such a case, a written report will be sent by the Course Director to the CDM Office of Academic Affairs, with a copy sent to the chair of the Student Performance Committee and Dean of the College of Dental Medicine for appropriate disposition.

#### **Evaluation of Dental Student Academic Performance**

The College of Dental Medicine's Student Performance Committee (SPC) is charged: To develop policies for the evaluation of dental student performance, including policies for grading, promotion and graduation of students. It shall also be responsible for implementing and enforcing policies and shall make recommendations to the Dean of the College regarding promotion or graduation of each student. The SPC shall follow guidelines in full accord with the rules of the Western University of Health Sciences and the requirements of due process. The SPC will convene to review student clinical progress throughout the four-year curriculum, meeting to review student progress following each term. During the D3 and D4 year, students are reviewed to determine their readiness to enter the Community-Based Education Program, based on the demonstration of adequate progress towards clinical competence.

#### **Promotion**

Promotion is defined as academic and professional progression from one academic year to the next. The Student Performance Committee (SPC) will recommend students to the Dean of the College for promotion. The SPC may not recommend a student for progression from one academic year to the next with a grade of "I" or "F" in a required course, final grade point average (GPA) below a 2.0 or a yearly cumulative GPA below a 2.0. An essential element of the academic program is professionalism. Professionalism will be emphasized throughout the curriculum and is a stand-alone element in determining academic advancement and achievement.

When considering a student for promotion, ethical, professional, and personal conduct will also be taken into consideration (see Probation in University Academic Policies section). A student will be promoted provided that all academic, legal and financial requirements of the University, as stated in the University Catalog, have been satisfied. All coursework in the College of Dental Medicine must be completed within six (6) years of beginning the DMD program. Exceptions may be made only upon the recommendation of the Student Performance Committee in consultation with the Dean.

#### Graduation

A student will be recommended for the Doctor of Dental Medicine Degree provided he/she:

- Is not on probation or suspension and has completed all prescribed academic and clinical requirements with a cumulative grade point average of above 2.00 and has no outstanding grade of "I," "NCR," or "F".
- m. Has successfully taken and passed the National Board Dental Examination, Part I.

- n. Has demonstrated no serious deficiencies in ethical, professional, or personal conduct, as defined in University Catalog, "General Academic Policies and Procedures" section, which would make it inappropriate to award the degree of Doctor of Dental Medicine.
- o. Has complied with all the legal and financial requirements of the University as stated in the University Catalog.
- p. Has attended in person and participated in the Commencement ceremony at which time the Doctor of Dental Medicine degree is conferred. Unless special permission has been granted by the Dean, each student must participate in their respective commencement ceremony. If the Dean grants special permission for excusal from commencement, the graduate may be required to present themselves to the Dean or their designee at another specified date to take their profession's oath before their diploma will be released. Requests for excusal will only be granted for extenuating circumstances, such as a prior military commitment.

Students may participate in commencement activities provided they will complete all requirements of the program by December 31<sup>st</sup> of that calendar year. No student will receive his or her degree until the student has completed all requirements for graduation. Degrees will be dated as appropriate to completion date.

## **Standards of Academic Progress**

Dental students must maintain a cumulative grade point average (GPA) of at least 2.00 on a yearly basis to be considered making satisfactory academic and professional progress.

#### **Probation or Academic Suspension**

Students may be placed on Probation or Academic Suspension for the following reasons (these are in addition to the reasons listed in the WesternU General Academic Requirements section on Probation in the Overview Section of this Catalog):

- 1. Inadequate academic progress as determined by the Student Performance Committee. This includes, but is not limited to, receiving an "F" in any course or system.
- 2. A grade point average below 2.00.
- 3. When directed to repeat a year for academic reasons.
- 4. Failure to perform in a professional manner.
- 5. Serious deficiencies in ethical or personal conduct.

Students on Academic Suspension are not registered as an active matriculant and should use this time to remediate for the deficiency for which the Academic Suspension was levied. On campus students on probation must meet with their faculty advisor at least once a month. Off campus students on probation must contact their faculty advisor once a month. It is the student's responsibility to contact the faculty advisor to arrange these meetings.

A first or second year student on probation for receiving a grade of "F" or for a GPA less than 2.00 in the first semester will be removed from probation after one semester provided he/she has regained a cumulative GPA of at least 2.00 and has remediated the failed course. A first or second year student will be removed from probation when all grades of "F" have been remediated satisfactorily according to the following Remediation section.

A third or fourth year student on probation because of a grade of "F" must remediate the course or clinical rotation. The student will then be reviewed by the Student Performance Committee at the end of the academic year and may be recommended for continuation on or removal from, probation. Students on probation are to remove themselves from all leadership roles in co-curricular activities associated with the University and/or with professional associations.

#### **Financial Aid Warning Policy**

If a student is not achieving satisfactory academic progress (SAP) they may be placed on "Financial Aid Warning" status for the next payment period and continue to receive Title IV aid for that period. Students who fail to make SAP by the end of that payment period lose Title IV aid eligibility.

It is the policy of the Financial Aid Office (FAO) that once a student has been placed on academic probation for not meeting SAP standards as defined by the college, the FAO will automatically place the student in a Financial Aid Warning status. During the next academic term if the student does not meet SAP standards and the college places the student on academic suspension the student will no longer be eligible for financial aid. If the student appeals the academic suspension and the appeal is approved, financial aid will be reinstated. If the student is directed to audit courses those courses may not be covered by financial aid.

#### **Tutorial Assistance Program**

A Tutorial Assistance Program (TAP) has been established to assist students experiencing academic difficulty. Students will be recommended for this program by a faculty advisor or professor. Students may self-identify to TAP to receive assistance. The tutors will be chosen on the recommendation of the faculty in each discipline. Group tutoring is the methodology most used by the TAP department. For assistance, contact the Learning Enhancement and Academic Development Office (LEAD).

#### Remediation

The educational objectives that underlie remedial teaching and evaluation should be the same as the educational objectives that underlie regular courses in the curriculum. Dental students, who receive an "F" in a course or system or a cumulative GPA below a 2.00, will be reviewed by the Student Performance Committee.

Where deemed appropriate, the Student Performance Committee, after consultation with the course instructor, system coordinator, and/or the Dean (or his/her designee) may recommend any one of the following options:

- 1. Take a comprehensive examination.
- 2. Complete special projects or studies in the deficient area(s).
- 3. Repeat the course, system, or rotation.

- 4. Repeat the academic year.
- 5. Dismissal from the University

The score/grade achieved by remediation will be the score/grade recorded except that the highest score/grade a student may earn by options 1 or 2 (above) is a score of 70% or a "C". The grade achieved by remediation will be re-recorded on the transcript next to the original grade.

Numerical scores or grades earned during an attempted remediation of a course, system, or clinical rotation will be reviewed critically by the Student Performance Committee and the Dean of the College of Dental Medicine. Failure to earn at least a 70% or a "C" may result in dismissal from the College or repeating the academic year.

If a student is directed to repeat a course, the grade for the repeated course will be recorded on the official transcript. Only the most recent grade received for a repeated course will be included in the student's GPA calculation. Students will be charged full tuition for repeated coursework.

Decisions regarding remediation will be made on an individual basis after considering all pertinent circumstances. The decision will be made by the Dean of the College of Dental Medicine, based upon the recommendation of the Student Performance Committee. The Committee will base its recommendation on the student's academic record and other considerations after consultation with the student's faculty advisor, course instructor, system coordinator, Dean (or his/her designee) clinical preceptor, and the student involved, as is appropriate.

A student who is required to remediate a course must be notified in writing by the Dean at least 15 working days prior to the remediation date, or within 15 working days after the close of the academic year in which the student is presently enrolled, whichever comes first. Notification must either be sent by Certified Mail or hand-delivered to the student and must be acknowledged with the signatures of the Dean (or his/her designee) and the student.

#### Dismissal

The University may require withdrawal at any time it deems necessary to safeguard its standards of scholarship, conduct, and orderly operation. Examples of reasons the Student Performance Committee may recommend dismissal of a student include, but are not limited to the following:

- 1. Receiving a cumulative grade point average below 2.00 at the end of an academic year.
- 2. Receiving a final grade of "F" in more than 25% of the total credit hours in an academic year. \*
- 3. Receiving a final percentage score of below 70% (a letter grade of "F") in a remediated course, system, or clinical course.

\*The Committee may recommend dismissal for a student receiving a final grade of "F" in three or more courses or systems, even if the total unsatisfactory credit hours do not exceed 25% of the total credit hours for the academic year.

#### **Student Appeal Process**

At the conclusion of each academic year, the Student Performance Committee will review whether students have met the established criteria for progression in the dental curriculum. Recommendations

by the Student Performance Committee for repeat of an academic year or dismissal from the dental program are advisory to the Dean of the College of Dental Medicine, who will make the decision.

In the event that the Student Performance Committee has made a preliminary determination to recommend an adverse action, such as dismissal or the repeat of an academic year, the student is offered an opportunity to meet in person with the Student Performance Committee, prior to the Committee forwarding its final recommendation to the Dean of the College of Dental Medicine. At such time, the student may present any information relative to the preliminary recommendation. The student may also be accompanied by a representative for support; however, the representative may not be an attorney. The Student Performance Committee will have an opportunity to review the additional information, if presented, and will then make a final recommendation to the Dean.

In accordance with WesternU policy, the Dean's decision may be appealed by the student to the Provost of Western University of Health Sciences. The Provost may convene an advisory panel, and the decision of the Provost is final. (See Student Appeal Process in University Academic Policies section).

# **Academic Integrity**

Complete confidence in the honor and integrity of the health professions student and health care professional is essential. Such confidence depends entirely on the exemplary behavior of the individual health care provider in his/her relations with patients, faculty and colleagues. Strict honesty as a personal way of life should be nurtured during the period of education for professional service. The student shall conduct all aspects of his/her life with honor and integrity. This includes accountability to oneself and to relationships with fellow students, future colleagues, faculty, and patients who come under the student's care or contribute to his/her training and growth, and members of the general public. This applies to personal conduct that reflects on the student's honesty and integrity in both academic and non-academic settings, whether or not involving a University sponsored activity. Upon accepting admission to the University, each student subscribes to and pledges complete observance to the Standards of Academic and Professional Conduct as outlined in the University Catalog for each academic program. A violation of these standards is an abuse of the trust placed in every student and could lead to suspension or dismissal.

# **Evaluation and Grading**

## **CDM Competencies for the General Dentist**

Dentistry requires the integration of knowledge, skill and values to provide care for the individual patient and contribute to improving the oral health of society. The general dentist is the primary oral health care provider and leader of the oral health care team. The following competency statements describe the competencies WesternU College of Dental Medicine graduates will possess to successfully enter the profession as general dentists or pursue advanced training / specialization.

## **Domains**

- Critical Thinking
- Professionalism/Leadership Skills
- Communication and Interpersonal Skills
- Health Promotion
- Practice Management and Informatics
- Patient Care

- Assessment, Diagnosis and Treatment Planning
- Establishment and Maintenance of Oral Health

## **Critical Thinking**

Graduates must be competent to:

- 1.1 Evaluate and integrate emerging advances in health care.
- 1.2 Utilize critical thinking and problem-solving skills in providing patient care.
- 1.3 Evaluate and integrate scientific inquiry and research methodology with clinical expertise and patient values for evidence-based practice.

## Professionalism/Leadership Skills

Graduates must be competent to:

- 2.1 Apply ethical and legal standards in decision making and demonstrate professional responsibility.
- 2.2 Practice within one's scope of competence by consulting with or referring to professional colleagues when indicated.

## **Communication and Interpersonal Skills**

Graduates must be competent to:

- 3.1 Use effective interpersonal and communication skills with patients, other health care professionals and dental team members.
- 3.2 Apply psychosocial and behavior principles in patient care.
- 3.3 Communicate effectively with individuals from diverse populations.

#### **Health Promotion**

Graduates must be competent to:

- 4.1 Provide prevention, intervention, and educational strategies for patients.
- 4.2 Participate with dental team members and other health care professionals in the management of care and health promotion for patients.

#### **Practice Management and Informatics**

Graduates must be competent to:

- 5.1 Apply principles of practice management to function successfully in an oral health care team and integrate in various models of oral health care delivery.
- 5.2 Incorporate principles of risk management in patient care.
- 5.3 Comply with local, state and federal regulations pertaining to infection control standards, OSHA and HIPAA.

#### Patient Care

## Assessment, Diagnosis, and Treatment Planning

Graduates must be competent to:

- 6.1 Accurately obtain and interpret patient data to formulate a diagnosis.
- 6.2 Use diagnosis, evidence and patient values to formulate and effectively communicate comprehensive treatment plans.
- 6.3 Diagnose and manage oral diseases and abnormalities, including head and neck, osseous, and mucosal disorders.

#### **Establishment and Maintenance of Oral Health**

Graduates must be competent to:

- 6.4 Prevent, diagnose, and manage pain and anxiety in the dental patient.
- 6.5 Provide preventive and restorative procedures that preserve or replace tooth structure and support esthetics and health of the soft and hard tissues.
- Provide and manage the replacement of teeth for partially and completely edentulous patients that supports esthetics and the health of the soft and hard tissues.
- 6.7 Prevent, diagnose, and manage periodontal diseases.
- 6.8 Prevent, diagnose, and manage pulpal and periradicular diseases.
- 6.9 Provide and manage hard and soft tissue oral surgical procedures.
- 6.10 Prevent, diagnose, and manage dental emergencies.
- 6.11 Diagnose and manage developmental or acquired malocclusion and space discrepancies. Evaluate outcomes of comprehensive dental care.
- 6.13 Prevent, diagnose, and manage medical emergencies including implementation of CPR and basic life support.
- 6.14 Recognize manifestations of systemic disease, assess treatment needs for patients with special needs, and modify treatment plans accordingly.

# **Grading Scale**

Final course grades are given based upon the traditional 4-point letter system, as follows:

<u>Grade</u>	<u>Equivalent</u>	<b>GPA Points</b>
Α	90-100%	4.00
В	80-89%	3.00
С	70-79%	2.00
F	Less than 70%	0.00
CR	Credit	N/A
NCR	No Credit	N/A

#### **ADMINISTRATIVE GRADES**

<u>Grade</u>	<u>Equivalent</u>	<b>GPA Points</b>
AU	Audit	N/A
I	Incomplete	N/A
W	Withdrawal	N/A
M	Missing	N/A

#### Incomplete

An Incomplete (I) indicates that a student has not been able to finish all required work for issuance of a letter grade. An "I" is not counted in the grade point calculations until a letter grade is issued to replace the "I." An "I" must be replaced before the student registers for the next academic year, unless other arrangements are made with the instructor and the Dean of the College of Dental Medicine.

Replacement of an "I" will be under the direction of the instructor with the approval of the Dean or his/her designee. If the required work is not completed within the specified time, the "I" will be converted to an "F". It is to the student's advantage to arrange to make up any incomplete work as soon as possible. The incomplete (I) remains on the transcript and is followed by the grade earned (i.e., I/B).

#### **Grade Reports**

Official grades are turned in to the Registrar by the Dean of the College of Dental Medicine (CDM), at which time the online student records system, BanWeb, is updated. Official grade reports and unofficial transcripts will be available on the BanWeb student records system throughout the academic year.

#### **Credit hour Calculation**

The College of Dental Medicine defines one credit hour as 15 contact hours plus an average of 30 hours of out of class student work.

#### Classroom, Online, and Other Distance Learning Instruction

One credit hour is assigned for 15 hours of instruction.

## Labs, Small Group Activities, Independent Study, and Workshops

One credit hour is assigned for 30 hours of contact time.

# Experiential (Clinical) Education

One credit hour is assigned for 40 hours of rotations and other clinical experiences.

# **Grade/Penalty Appeals Process**

(e.g., Grade, a Final Grade, and Exclusion from a course, lab or clinic)

The first level of the appeal is at the course level from which the grade or penalty was issued. Within five (5) working days after receipt of the grade or penalty, the student must request a review by the College's course director. In the event of an inability to satisfactorily resolve the matter at this level, the student must submit his/her appeal in writing to the Assistant/Associate Dean for Academic Affairs within ten (10) days after the grade or penalty was received.

Should the Assistant/Associate Dean for Academic Affairs be unable to resolve the dispute, the student may direct a written appeal to the College of Dental Medicine's Dean within thirty (30) days after receipt of the grade or penalty. The decision of the College Dean is final.

## **Issues/Dispute Resolution Procedure**

When an issue or dispute arises between students, the issue/dispute resolution process starts with communication among the involved students. If a satisfactory resolution is not arrived at that level, the matter should then be addressed with the course director or the faculty advisor. If the problem is not resolved at the faculty advisor/course director level, the matter should be brought to the Assistant Dean for Academic Affairs, followed by the Dean and then the Provost/COO. If the matter has not been resolved at those levels, the final arbiter is the President.

When an incident arises involving a faculty member, the first step in the issue/dispute resolution process is discussion with the faculty member. If the matter is not satisfactorily resolved at that level, then the matter should be referred to the appropriate Assistant/Associate Dean, Dean, and Provost/COO, in that order. The final arbiter is the Board of Trustees.

When an incident arises involving a staff member, the dispute resolution process begins with the supervisor, followed by the appropriate Assistant/Associate Dean. The Office of Human Relations should be included in the process if it proceeds beyond the supervisor.

Failure to follow this sequence of steps will only serve to delay the appropriate resolution of the issue or dispute as the matter will only be referred back to the correct level in this chain of responsibility.

## **Commission on Dental Accreditation Policy on Complaints**

The Commission on Dental Accreditation will review complaints that relate to a program's compliance with the accreditation standards. The Commission is interested in the sustained quality and continued improvement of dental and dental-related education programs but does not intervene on behalf of individuals or act as a court of appeal for treatment received by patients or individuals in matters of admission, appointment, promotion or dismissal of faculty, staff or students.

A copy of the appropriate accreditation standards and/or the Commission's policy and procedure for submission of complaints may be obtained by contacting the Commission on Dental Accreditation at 211 East Chicago Avenue, Suite 1900, Chicago, IL 60611-2678 or by calling 1-800-621-8099 extension 4653 or at Commission on Dental Accreditation.

## **Curriculum Organization**

#### Year 1

Year 1, Fall S	emester, DMD 2017	
Course	Title	Credit Hours
DMD 5025	The Molecular and Cellular Basis of Medicine	10.00
DMD 5030	Gross Anatomy	12.00
DMD 5050	Essentials of Clinical Dentistry I	8.00
DMD 5099	Service Learning I	1.00
IPE 5000	Patient Centered Cases I	1.00
	Semester Total:	32.00
Year 1, Spring	g Semester, DMD 2017	
Course	Title	<b>Credit Hours</b>
DMD 5125	Neuroscience System	11.50
DMD 5130	Musculoskeletal System	5.00
DMD 5145	Introduction to Disease, Immunity, and Therapeutics	7.00
DMD 5150	Essentials of Clinical Dentistry II	8.00
DMD 5155	Behavioral Science and Dentistry	5.50
DMD 5175	Blood and Lymphatic System	4.00
DMD 5199	Service Learning II	2.00
IPE 5100	Patient Center Cases II	1.00
	Semester Total:	44.00
Year 1, Sumn	ner Semester, DMD 2017	
Course	Title	<b>Credit Hours</b>
DMD 5250	Essentials of Clinical Dentistry III	4.00
DMD 5260	Clinical Service Learning and Community Dentistry	2.00
DMD 5210	Oral and Maxillofacial Pathology I	3.00
	Semester Total:	9.00
	Year 1 Total:	85.00

# Year 2

Year 2, Fall S	emester, DMD 2016	
Course	Title	Credit Hours
DMD 6010	Oral and Maxillofacial Pathology II	3.00
DMD 6020	Cardiovascular System	8.50
DMD 6035	Renal System	4.50
DMD 6040	Respiratory System	8.50
DMD 6045	Endocrine System	5.50
DMD 6050	Essentials of Clinical Dentistry IV	8.00
DMD 6060	Clinical Service Learning and Community Dentistry II	2.00
IPE 6000	Team Training in Healthcare I	1.00
	Semester Total:	41.00
Year 2, Sprin	g Semester, DMD 2016	
Course	Title	<b>Credit Hours</b>
DMD 6115	Dermal System	3.00
DMD 6140	Gastrointestinal System and Nutrition	6.50
DMD 6150	Essentials of Clinical Dentistry V	8.00
DMD 6160	Clinical Service Learning and Community Dentistry III	2.00
DMD 6173	Geriatrics	1.50
DMD 6176	Pediatrics	2.50
IPE 6100	Team Training in Healthcare II	1.00
	Semester Total:	24.50
Year 2, Sumr	ner Semester, DMD 2016	
Course	Title	<b>Credit Hours</b>
DMD 6205	Clinical Comprehensive Care Dentistry I	7.00
DMD 6210	Ethics and Jurisprudence	1.50
DMD 6250	Essentials of Clinical Dentistry VI	6.00
DMD 6260	Clinical Service Learning and Community Dentistry IV	2.00
	Semester Total:	16.50
	Year 2 Total:	82.00

# Year 3

Year 3, Fall Semester, DMD 2015		
Course	Title	<b>Credit Hours</b>
DMD 7005	Clinical Comprehensive Care Dentistry I	7.00
DMD 7050	Essentials of Clinical Dentistry VI	6.00
DMD 7060	Clinical Service Learning and Community Dentistry IV	2.00
DMD 7105	Clinical Comprehensive Care Dentistry II	21.00
DMD 7110	Ethics and Jurisprudence	1.50
DMD 7150	Essentials of Clinical Dentistry VII	8.00
DMD 7160	Clinical Service Learning and Community Dentistry V	2.00
DMD 7210	Practice Management I	1.50
	Semester Total:	49.00
Year 3, Sprin	g Semester, DMD 2015	
Course	Title	<b>Credit Hours</b>
DMD 7205	Clinical Comprehensive Care Dentistry III	21.00
DMD 7310	Practice Management II	1.50
DMD 7250	Essentials of Clinical Dentistry VIII	6.00
DMD 7260	Clinical Service Learning and Community Dentistry VI	2.00
	Semester Total:	30.50
	Year 3 Total:	79.50

# Year 4

Year 4, Fall Semester, DMD 2014		
Course	Title	Credit Hours
DMD 8005	Clinical Comprehensive Care Dentistry IV	8.00
DMD 8050	Essentials of Clinical Dentistry IX	4.00
DMD 8060	Clinical Service Learning and Community Dentistry VII	1.00
DMD 8105	Clinical Comprehensive Care Dentistry V	21.00
DMD 8110	Ethics and Jurisprudence	1.50
DMD 8150	Essentials of Clinical Dentistry X	3.50
DMD 8160	Clinical Service Learning and Community Dentistry VIII	1.00
DMD 8550	Dental Elective	5.00 – 15.00
	Semester Total:	46.50 – 56.50
Year 4, Sprin	g Semester, DMD 2014	
Course	Title	Credit Hours
DMD 8010	Practice Management III	1.50
DMD 8205	Clinical Comprehensive Care Dentistry VI	21.00
DMD 8260	Clinical Service Learning and Community Dentistry IX	1.00
DMD 8550	Dental Elective	5.00 – 15.00
	Semester Total:	28.50 - 38.50
	Year 4 Total:	75.00 – 95.00

# **Course Descriptions**

All courses are awarded letter grades, except when indicated otherwise.

## DMD 5025 The Molecular and Cellular Basis of Medicine (10 credit hours)

This course presents an integration of molecular biology, biochemistry, cellular physiology and metabolism, introductory genetics and developmental histology within the context of their clinical application of basic biomedical sciences.

#### DMD 5030 Gross Anatomy (12 credit hours)

This course represents an understanding of the surface and deep anatomical structures and their arrangement to one another while emphasizing normal function and clinical features of the human body. Through laboratory dissections of cadavers, radiology, and didactic lectures, students will learn the language of anatomy and clinically important relationships. Particular attention will be paid to the neurovascular bundle throughout the entire body. In addition to dissections, models, radiographs, clinical presentations, and special demonstrations are employed to emphasize current clinically relevant structure and presentations.

## DMD 5050 Essentials of Clinical Dentistry I (8 credit hours)

This course is designed to give the new dental student an introduction to the healthcare profession, the clinical practice of dentistry and the College of Dental Medicine Clinical Program and procedures. The course provides the student with basic skills and knowledge to allow a smooth transition into initial patient care interactions as a dental assistant. The course provides the student with clinical foundational knowledge in the areas of dental morphology, head and neck anatomy, the relationships between the teeth and supporting structures, operative and restorative dentistry, and dental materials sciences. Students will learn basic clinical skills including preventive procedures, diagnostic techniques, oral hygiene instruction and patient education, and operative dentistry.

#### DMD 5060 Clinical Service Learning and Community Dentistry (2 credit hours)

Prerequisite: DMD 5199. Continuation of DMD 5199.

#### DMD 5099 Service Learning I (1 credit hour)

Through interaction and service in the community, this course develops the role and responsibility of the dentist in society. Topics, including health education, public health, epidemiology and biostatistics, are learned through practical application.

#### DMD 5110 Oral and Maxillofacial Pathology I (3 credit hours)

This course will build upon the foundational pathology concepts and information given in the MCBM and IDIT courses. It will also integrate, expand, and correlate with other biomedical science courses and the concomitant clinical sciences taught in Essential of Clinical Dentistry. Specifically, the course will describe the etiology, pathogenesis, clinical features, radiographic features (if applicable), treatment and prognosis of classical and traditional categories of oral and maxillofacial pathology. Lastly, the course will introduce and strengthen the art and science of differential diagnosis formulation, of soft and hard tissue lesions. The information, concepts, and differential skills developed during this course will prepare the student for arriving at a provisional diagnosis of their clinic patients and will allow them to fully participate in the third and fourth year oral pathology seminars.

## DMD 5125 Neuroscience System (11.5 credit hours)

This system presents basic understandings of the brain, spinal cord and peripheral nervous system. Basic science topics include embryology, histology, neuroanatomy, biochemistry, physiology and pharmacology. Clinical topics include infections of the nervous system, pathology, neurology, ophthalmology, otorhinolaryngology, and overview of sleep disorders, cerebrovascular disorders, aging and dementia.

## DMD 5130 Musculoskeletal System (5 credit hours)

This system presents common conditions and disorders of the musculoskeletal system. The system also presents embryology, histology, and functional anatomy – including kinesiology, biochemistry, pharmacology, physiology, and microbiology. The pathology and clinical aspects of this system are discussed, as are the related aspects of sports medicine, rehabilitative medicine, exercise, rheumatoid diseases and orthopedics.

## DMD 5145 Introduction to Disease, Immunity and Therapeutics (7 credit hours)

This is an integrated course introducing microbiology, immunology, pathology, and pharmacology to prepare students for more in-depth study during the systems. Genetics, as related to these disciplines, is also included. Clinical applications of the basic sciences are emphasized.

#### DMD 5150 Essentials of Clinical Dentistry II (8 credit hours)

This course continues to build the foundation for students to become patient care providers in clinical dentistry and is a continuation of DMD 5050. The course will focus on the development of skills through simulation clinical activities and peer-to-peer clinic related activities. Topics include dental anatomy and morphology; fundamentals of oral radiology; periodontal and tooth embryology, histology and development; direct composite restorations; diagnosis of caries; treatment of gross caries; and clinical management software.

## DMD 5155 Behavioral Science and Dentistry (5.5 credit hours)

This course presents the psychological and social aspects of patient and provider behavior within the context of dental medicine. Interpersonal communication skills are discussed and practiced, which lead to the development of the doctor-patient relationship and a therapeutic alliance. Barriers to this alliance are addressed, including cultural, personality and psychological factors of both the patient and dentist. Methods to facilitate behavioral change within the patient are explored and practiced. The etiology, implications and management techniques of dental anxiety are addressed as well. Also introduced are topics in developmental psychology, the stages of life and their implications of dental care, as well as specific psychological conditions that directly affect oral health. The health of the dental provider is discussed, including self-management, self-esteem, life-long learning, and leadership. This course develops the dental provider's ability to recognize common and prevalent behavioral patterns and conditions that are seen in the field of oral healthcare and develop strategies to employ positive interventions, and nurture the doctor-patient relationship.

## DMD 5175 Blood and Lymphatic System (4 credit hours)

Students work as teams in small groups to address a variety of clinical cases that involve the hematopoietic and lymphoreticular organs, including anemia, clotting disorders, blood-borne infections, myeloproliferative and myelodysplastic disorders. Each case allows for integration of basic and clinical science concepts. Large group, interactive sessions provide guidance and expert facilitation regarding the clinical application of the histology, physiology, pharmacology, biochemistry, microbiology and pathology as well as the epidemiology and evidence-based approaches to diagnosis and management.

## DMD 5199 Service Learning II (2 credit hours)

Prerequisite: DMD 5099. This course is a continuation of DMD 5099.

# DMD 5250 Essentials of Clinical Dentistry III (4 credit hours)

This course continues to build the foundation for students to become patient care providers in clinical dentistry. Continuation of DMD 5150

## DMD 6005 Clinical Comprehensive Care Dentistry I (7 credit hours)

Prerequisite: Passing Grade in DMD 6150 Essentials of Clinical Dentistry V. Open to the DMD class of 2016 only. Students begin the transition into their role as a patient-care provider when they enter their third year curriculum, integrating with their Comprehensive Care Group Practices. Students continue to expand their role as a clinical provider in their group practice. Special emphasis for the term is on comprehensive care dentistry, including providing patients with basic procedures in all disciplines.

# DMD 6010 Oral & Maxillofacial Pathology II (3 credit hours)

This course will build upon the foundational pathology concepts and information given in the Oral Pathology I course. It will also integrate, expand, and correlate with other biomedical science courses and the concomitant clinical sciences taught in Essential of Clinical Dentistry. Specifically, the course will describe the etiology, pathogenesis, clinical features, radiographic features (if applicable), treatment and prognosis of classical and traditional categories of oral and maxillofacial pathology. Lastly, the course will introduce and strengthen the art and science of differential diagnosis formulation, of soft and hard tissue lesions. The information, concepts, and differential skills developed during this course will prepare the student for arriving at a provisional diagnosis of their clinic patients and will allow them to fully participate in the third and fourth year oral pathology seminars.

## DMD 6020 Cardiovascular System (8.5 credit hours)

Students work as teams in small groups to address a variety of clinical cases that involve valvular disease, congenital abnormalities, aortic pericardial arrhythmias, heart failure, hypertension and ischemic diseases. Each case allows for integration of basic and clinical science concepts. Large group, interactive sessions provide guidance and expert facilitation regarding the clinical application of the histology, physiology, pharmacology, biochemistry, microbiology and pathology as well as the epidemiology and evidence-based approaches to diagnosis and management.

#### DMD 6035 Renal System (4.5 credit hours)

Students work as teams in small groups to address a variety of clinical cases that involve fluid and electrolyte disorders, acid-base disturbances, urinary tract infections, and acute as well as chronic kidney diseases. Each case allows for integration of basic and clinical science concepts. Large group, interactive sessions provide guidance and expert facilitation regarding the clinical application of the histology, physiology, pharmacology, biochemistry, microbiology and pathology as well as the epidemiology and evidence-based approaches to diagnosis and management.

#### DMD 6040 Respiratory System (8.5 credit hours)

Students work as teams in small groups to address a variety of clinical cases that involve important pulmonary diseases characterized by a variety of symptoms and chest radiographic patterns. Each case allows for integration of basic and clinical science concepts. Large group, interactive sessions provide guidance and expert facilitation regarding the clinical application of the histology, physiology, pharmacology, biochemistry, microbiology and pathology as well as the epidemiology and evidence-based approaches to diagnosis and management. Critical care medicine concepts will be integrated with concepts already learned in the preceding endocrine, cardiovascular and renal systems.

#### DMD 6045 Endocrine System (5.5 credit hours)

Students work as teams in small groups to address a variety of clinical cases involving disorders of the hypothalamus and pituitary glands, diabetes, lipids, the thyroid gland, and calcium/bone metabolism. Each case allows for integration of basic and clinical science concepts. Large group, interactive sessions provide guidance and expert facilitation regarding the clinical application of the histology, physiology, pharmacology, biochemistry, microbiology and pathology as well as the epidemiology and evidence-based approaches to diagnosis and management.

## DMD 6050 Essentials of Clinical Dentistry IV (8 credit hours)

This course continues to build the clinical foundational knowledge and skills for entry into the clinic. Students will expand their training in operative dentistry to include simulation of amalgam, composite and complex restorations; basic occlusal concepts; and oral radiology techniques. Biomaterials topics are couple with the above topics.

## DMD 6060 Clinical Service Learning and Community Dentistry I (2 credit hours)

This course is a continuation of DMD 5199. In this course, students will be assigned to participate in community service learning programs.

## DMD 6061 Clinical Service Learning and Community Dentistry II (2 credit hours)

In this course, students will be assigned to participate in community service learning programs.

#### DMD 6110 Ethics and Jurisprudence (1.50 credit hours)

This course offered as primarily as a small group seminar, focuses on advanced topics in dental ethics and jurisprudence. Case presentations and discussions of assigned topics will be facilitated by faculty group leaders, community-based preceptor faculty, specialist faculty and dental students. Topics will focus on professionalism and ethics related to the practice of dentistry in a variety of clinical settings. Students will learn the practical steps in obtaining a state dental license, utilizing the California State Dental Practice Act as a model.

#### DMD 6115 Dermal System (3 credit hours)

Students work as teams in small groups to address a variety of clinical cases involving the largest organ in the body. Cases will involve primary or secondary, as well as benign or malignant skin lesions that may or may not be manifestations of internal disease, immunologic disease, drug reactions, or photosensitivity. Large-group interactive sessions provide guidance and expert facilitation with emphasis on distinguishing normal from abnormal findings and significant from trivial lesions as well as the epidemiology and evidence-based approaches to diagnosis and management.

#### DMD 6140 Gastrointestinal System and Nutrition (6.5 credit hours)

Students work as teams in small groups to address a variety of clinical cases involving important diseases of the gut, hepatobiliary and pancreatic ductal systems that manifest as alterations in nutrient assimilation and waste evacuation. Each case allows for integration of basic and clinical science concepts. Large group, interactive sessions provide guidance and expert facilitation regarding the clinical application of the histology, physiology, pharmacology, biochemistry, microbiology and pathology as well as the epidemiology and evidence-based approaches to diagnosis and management.

## DMD 6150 Essentials of Clinical Dentistry V (8 credit hours)

This course is a continuation of DMD 6050. This course is a prerequisite for Clinical Comprehensive Care Dentistry I.

#### DMD 6160 Clinical Service Learning and Community Dentistry III (2 credit hours)

In this course, students will be assigned to participate in community service learning programs.

#### DMD 6173 Geriatrics (1.5 credit hours)

This course is devoted to the special problems that can occur in the elderly. Additionally, diseases and conditions learned during the systems are explored in the context of this population.

#### DMD 6176 Pediatrics (2.5 credit hours)

This course is devoted to the special problems that can occur in the period between infancy to adolescence. Diseases and conditions learned during the systems are now explored in light of this population. Additionally, aspects specific to pediatric oral health are explored. This course will also present the anatomy, embryology, and histology of both the female and male reproductive systems and principles regarding the relationships between mother and fetus during pregnancy.

## DMD 6250 Essentials of Clinical Dentistry VI (6 credit hours)

This is a continuation of DMD 6150, focusing on foundational knowledge and skills to support the student's transition as a provider in the Comprehensive Care Group Practices.

#### DMD 6260 Clinical Service Learning and Community Dentistry IV (2 credit hours)

Students continue to expand their role as a clinical provider by participating in community service learning programs.

#### DMD 7005 Clinical Comprehensive Care Dentistry I (7 credit hours)

Students begin the transition into their role as a patient-care provider when they enter their third year curriculum, integrating with their Comprehensive Care Group Practices. Students continue to expand their role as a clinical provider in their group practice. Special emphasis for the term is on comprehensive care dentistry, including providing patients with basic procedures in all disciplines.

## DMD 7050 Essentials of Clinical Dentistry VI (6 credit hours)

Open to members of the DMD 2015 class only. This is a continuation of DMD 6150, focusing on foundational knowledge and skills to support the student's transition as a provider in the Comprehensive Care Group Practices.

#### DMD 7060 Clinical Service Learning and Community Dentistry IV (2 credit hours)

Students continue to expand their role as a clinical provider by participating in community service learning programs.

#### DMD 7105 Clinical Comprehensive Care Dentistry II (21 credit hours)

Students provide Comprehensive Care for the patients of their Comprehensive Care Group Practices. Students may also participate in specialty rotations, both on campus and at community-based clinics. Clinical experiences will be multidisciplinary, reflecting the general dentistry clinical care model.

## DMD 7110 Ethics and Jurisprudence (1.5 credit hours)

This course offered as primarily as a small group seminar, focuses on advanced topics in dental ethics and jurisprudence. Case presentations and discussions of assigned topics will be facilitated by faculty group leaders, community-based preceptor faculty, specialist faculty and dental students. Topics will focus on professionalism and ethics related to the practice of dentistry in a variety of clinical settings. Students will learn the practical steps in obtaining a state dental license, utilizing the California State Dental Practice Act as a model.

## DMD 7150 Essentials of Clinical Dentistry VII (8 credit hours)

This course broadly covers all disciplines of clinical dentistry.

## DMD 7160 Clinical Service Learning and Community Dentistry V (2 credit hours)

Students continue to expand their role as a clinical provider by participating in community service learning programs.

## DMD 7205 Clinical Comprehensive Care Dentistry III (21 credit hours)

Students continue to provide Comprehensive Care for the patients of their Comprehensive Care Group Practices. Students may also participate in specialty rotations, both on campus and at community-based clinics. Clinical experiences will be multidisciplinary, reflecting the general dentistry clinical care model.

#### DMD 7210 Practice Management I (1.5 credit hours)

This course builds upon the basic business, jurisprudence and ethical principles of the "Essentials of Clinical Dentistry" course series. Utilizing a multifaceted approach including seminars, case-based learning, group projects, one-on-one mentoring and clinical learning labs, students use their on-campus and community-based clinical experiences to apply practice management principles within their group practices.

#### DMD 7250 Essentials of Clinical Dentistry VIII (6 credit hours)

This course continues to broadly cover all disciplines of clinical dentistry.

#### DMD 7260 Clinical Service Learning and Community Dentistry VI (2 credit hours)

Students continue to expand their role as a clinical provider by participating in community service learning programs.

## DMD 7310 Practice Management II (1.5 credit hours)

Students continue to build upon the basic business, jurisprudence and ethical principles of the DMD 7110. Utilizing a multifaceted approach including seminars, case-based learning, group projects, one-on-one mentoring and clinical learning labs, students use their on-campus and community-based clinical experiences to apply practice management principles within their group practices.

#### DMD 8005 Clinical Comprehensive Care Dentistry IV (8 credit hours)

Students continue to provide Comprehensive Care for the patients of their Comprehensive Care Group Practices. Students will also participate in limited specialty rotations.

## DMD 8010 Practice Management III (1.5 credit hours)

Students will prepare a portfolio related project related to a practice management topic of their choice as approved by their group practice faculty mentor. Practice management topics may include a practice valuation, development of an associate employment agreement, development of a practice purchase agreement, analysis of an office lease, development of an employee manual, or a community needs assessment.

# DMD 8050 Essentials of Clinical Dentistry IX (4 credit hours)

This seminar course broadly covers all disciplines of clinical dentistry.

## DMD 8060 Clinical Service Learning and Community Dentistry VII (1 credit hour)

Students continue to expand their role as a clinical provider by participating in community service learning programs.

## DMD 8105 Clinical Comprehensive Care Dentistry V (21 credit hours)

Students continue to provide Comprehensive Care for the patients of their Comprehensive Care Group Practices. Students will also participate in limited rotations, both on campus and at community-based clinics.

## DMD 8110 Ethics and Jurisprudence (1.5 credit hours)

This course offered as primarily as a small group seminar, focuses on advanced topics in dental ethics and jurisprudence. Case presentations and discussions of assigned topics will be facilitated by faculty group leaders, community-based preceptor faculty, specialist faculty and dental students. Topics will focus on professionalism and ethics related to the practice of dentistry in a variety of clinical settings. Students will learn the practical steps in obtaining a state dental license, utilizing the California State Dental Practice Act as a model.

## DMD 8150 Essentials of Clinical Dentistry X (3.5 credit hours)

This course broadly covers all disciplines of clinical dentistry and is a continuation of DMD 8050.

# DMD 8160 Clinical Service Learning and Community Dentistry VIII (1.0 credit hour)

Students continue to expand their role as a clinical provider by participating in community service learning programs.

## DMD 8205 Clinical Comprehensive Dentistry VI (21 credit hours)

Students continue to provide Comprehensive Care for the patients of their Comprehensive Care Group Practices. Students will also participate in limited rotations, both on campus and at community-based clinics.

#### DMD 8260 Clinical Service Learning and Community Dentistry IX (1 credit hour)

Students continue to expand their role as a clinical provider by participating in community service learning programs.

#### DMD 8550 Dental Elective (5-15 credit hours)

This course provides didactic instruction through a series of seminars and/or supervised clinical education in one of the dental specialties or dental careers, including Oral & Maxillofacial Surgery, Orthodontics, Periodontics, Endodontics, Pediatric Dentistry, Prosthodontics, Oral & Maxillofacial Radiology, Oral & Maxillofacial Pathology, Public Health, Dental research and Dental academics. The discipline and clinical training site must be approved in advance by the CDM Office of Academic Affairs. Credits earned for DMD 8550 to not count toward credit units needed from graduation from the DMD program. A maximum of 15 credits allowable per term, repeatable to a maximum of 30 credit hours.

#### IPE 5000 Patient Centered Cases – An Interprofessional Approach I (1 credit hour, CR/NCR)

This course is a required university seminar for all first year health professional students. This course prepares students to practice health care services through a team approach. Working in small interprofessional teams, students will explore cases representing conditions across the life span. The cases will integrate elements common to all professionals such as ethical, behavioral, social and psychological issues. This course is a graduation requirement for all health professional programs.

## IPE 5100 Patient Centered Cases – An Interprofessional Approach II (1 credit hour, CR/NCR)

This course is a required university seminar for all first year health professional students. This course prepares students to practice health care services through a team approach. Working in small interprofessional teams, students will explore cases representing conditions across the life span. The cases will integrate elements common to all professionals such as ethical, behavioral, social and psychological issues. This course is a graduation requirement for all health professional programs.

## IPE 6000 Team Training in Healthcare I (1 credit hour, CR/NCR)

IPE 6000 will continue to build upon the knowledge from the IPE 5000 series, but will expand upon that knowledge and require the student to learn and apply advanced tools and strategies that are crucial to develop a collaborative healthcare team. The majority of the course is independent study with students engaging in a large scale tabletop activity where they apply team tools necessary to solve a healthcare dilemma.

## IPE 6100 Team Training in Healthcare II (1 credit hour, CR/NCR)

This course is a continuation of IPE 6000.

#### OM 5001 Summer Medical Sciences Preparatory Program (0 credit hours, CR/NCR, Optional)

The Summer Preparatory Program prepares incoming students for the anatomy course and provides an introduction to biochemistry. The anatomy component focuses on the skeletal, muscular, cardiovascular and nervous systems, yet provides a brief overview of other body systems. It is designed for the student without prior coursework in anatomy. Acceptance into this program is at the discretion of the instructor/coordinator. The course is an elective and does not meet any requirements for graduation. A separate tuition of \$750 is charged.

# **Honors and Awards**

The following awards are considered for presentation to DMD students annually:

American Student Dental Association Award of Excellence
Dean's Award
Dean' List
Excellence in Leadership Award
Glen and Virginia Henson Outstanding Dental Student Award
Monehen Award of Academic Excellence
Pierre Fauchard Scholarship Award
President's Society Award
Who's Who Among Students in American Colleges and Universities

## **Academic Calendar**

\*Students in clinical rotations observe their preceptor's hours, which may include working on federal holidays.

Fall	201	3
ган	LVU	3

Monday, June 10, 2013

Fall Classes Begin (Years 3 and 4)

Thursday, July 4, 2013

Independence Day - No Classes\*

<u>August 5 – August 9, 2013</u>

Orientation Week (Year 1)

Saturday, August 10, 2013

Convocation/White Coat Ceremony

Monday, August 12, 2013

Fall Classes Begin (Years 1 and 2)

Monday, September 2, 2013

Labor Day - No Classes\*

Monday, October 14, 2013

Columbus Day – No Classes\*

Wednesday, November 27, 2013

Thanksgiving Recess Begins @ 5:00 p.m.\*

Monday, December 2, 2013

Classes Resume

Friday, December 20, 2013

End of Fall Semester Classes (Years 1-4)

Monday, December 23, 2013

Winter Recess Begins (Years 1-4)

## Spring 2014

Monday, January 6, 2014

Spring Classes Begin (Years 1-4)

Monday, January 20, 2014

Martin Luther King Day - No Classes\*

Monday, February 17, 2014

President's Day - No Classes\*

Monday, March 24, 2014

Spring Break Begins (Years 1-4)

Monday, March 31, 2014

Spring Classes Resume (Years 1-4)

Wednesday, May 14, 2014

End of Spring Semester Classes (Year 4)

Wednesday-Friday, May 14-16, 2014

Commencement

Friday, May 23, 2014

End of Spring Semester Classes (Years 1-3)

#### Summer 2014

Monday, June 9, 2014

Summer Classes Begin (Years 1-2)

Friday, July 4, 2014

Independence Day - No Classes\*

Friday, July 25, 2014

End of Summer Semester Classes (Years 1-2)

# **College of Graduate Nursing**

Doctor of Nursing Practice Post-Master's Family Nurse Practitioner Certificate Master of Science in Nursing

Entry into MSN

Master of Science in Nursing (Completion)
Master of Science in Nursing (ADN/RN to MSN)
Master of Science in Nursing (BSN/RN to MSN)
Master of Science in Nursing-Entry (Bachelor's to RN/MSN)

## **MSN Tracks:**

Ambulatory Care Nursing
Family Nurse Practitioner
Health Systems Leadership – Administrative Nurse Leader
Health Systems Leadership – Clinical Nurse Leader

## Accreditation

All programs offered by the College of Graduate Nursing are California Board of Registered Nursing approved and professionally accredited by the Commission on Collegiate Nursing Education (CCNE). Graduates are eligible to apply for state certification and to sit for the appropriate national certification examinations.

#### **Vision Statement**

To continue to lead in the innovative use of best practices in graduate nursing education.

## **Mission Statement**

Using a learner centered model, the College of Graduate Nursing faculty create an environment that cultivates capacity for the nursing student to:

- Meet the diverse patient and population needs
- Function as a transformational leader
- Advance science and technology to deliver and enhance safe, quality and effective care
- Engage in health policy change to advance the profession of nursing
- Work independently and collaboratively to improve patient and population health outcomes
- Build foundations for lifelong learning

## **Purpose**

The College of Graduate Nursing (CGN) at Western University of Health Sciences offers a variety of programs for students to achieve a Master of Science or Doctor of Nursing Practice degree through both campus-based programs and a hybrid web- based and seminar campus-based delivery model, to meet the needs of working professionals and adult learners. All CGN graduate programs are Board of Registered Nursing (BRN) approved and professionally accredited by the Commission on Collegiate Nursing Education (CCNE).

The CGN model assumes that students are active, self- directed adult learners, who are committed to safe and effective professional practice and rigorous courses of study. As learning is a personal responsibility, students, guided by faculty mentors, are accountable for the integrity of academic

accomplishments, professional practice, and self-assessment. Students bring distinct professional and personal backgrounds and have differing responses to the learning process. CGN successes include high licensing and certification pass rates (NCLEX, advanced practice certification), employer satisfaction and student satisfaction.

# **Philosophy**

The Western University of Health Sciences (WesternU) College of Graduate Nursing (CGN) prepares nursing leaders entering the profession (Master's Entry), or advancing their education to the masters and/or doctoral level (MSN and DNP). The CGN graduates are prepared to lead patient and family healthcare innovation in multiple practice settings. The following philosophy reflects the beliefs of the CGN regarding the profession of nursing, nursing education, and student-centered learning environments.

## The Profession of Nursing

The Profession of Nursing is an art and a science requiring foundational knowledge in both liberal arts and sciences. The societal demand to improve health care outcomes provides the context for nursing theory, research, and evidence-based nursing practice. Professional nurses are autonomous in providing preventative care, population health management, and direct patient-centered care based on the American Nursing Association social policy contract (ANA, 2010). Nurses strive to prevent illness and attain, maintain, and regain the health of patients, families, and communities through multiple roles. Within the healthcare systems of local and global communities, these roles include advocates, coordinators of care, direct care providers, administrators, educators, and researchers.

# **Healthcare Systems**

The Institute of Medicine report on the future of nursing, articulates that advancing nursing leadership will improve the care of patients and communities (IOM, 2010). The CGN is uniquely positioned with its programs led by expert faculty and administrators to prepare nursing leaders to meet this challenge. Improvement of quality of life and patient satisfaction serves as indicators of nursing excellence. At the same time, healthcare cost containment must assure patient centered care while providing an efficient and effective use of resources. Therefore, nursing must encompass the larger context of the healthcare system and participate in economic solutions.

#### **Local and Global Communities**

The CGN consists of individuals representing a variety of unique backgrounds and regions. Embracing this diversity provides the opportunity to enrich one another as well as influence local and global communities. Through the unique distance format the CGN students and faculty reach beyond the walls of the University creating innovative learning environments. In doing so, more local and global communities are impacted by the scholarship and core characteristics seeded in our students, graduates, faculty, and staff.

# **Nursing Education**

Nursing Education is a process that provides opportunities to expand and extend multiple ways of knowing for continued growth and competency for the student and the nursing profession. Nursing education draws upon various disciplines and involves organized learning experiences that augment previous knowledge and skill in the preparation to practice advanced nursing. The educational process supports personal, social, and intellectual development while assisting students to attain academic and professional goals. The CGN seeks to evoke honesty and the excitement of discovery, encourage self-expression, and serve as a catalyst for life-long learning.

Nursing education at the CGN is supported by eight pillars. Four represent the core characteristics of our graduates, faculty, and staff, and four represent the Boyer Model of Scholarship.

#### **CGN Core Characteristics**

## Leadership

Nursing professionals, as leaders, must be strategically placed at the forefront of healthcare change as full partners with other health care professionals. Therefore, graduating masters and doctorally prepared nurses is essential to advance healthcare and lead reform.

#### **Innovation**

The current healthcare system demands innovation and creative solutions to enhance quality patient outcomes in a safe environment. The future of healthcare will require new thinking, competencies, and inter-professional collaboration to create new systems of care.

#### **Collaboration**

Optimizing the use of resources for the best outcomes requires working together in an interprofessional and intra-professional collaborative effort. Interdisciplinary collaboration enhances the capacity of others for mutual benefit. A common purpose is achieved by sharing risks, resources, responsibilities, and rewards. Nurses in advanced practice go beyond the basic communication, coordination, and cooperation to become fully engaged collaborative partners.

## Compassion

Compassion is caring in action and humanism is also a core value of WesternU. Together compassion and humanism guide the nursing curriculum in the context of valuing the quality of life for individuals, families, and communities. The recipients of compassionate and humanistic nursing care are complex organisms influenced through genetic, biological, behavioral, cultural, and environmental factors.

## **Boyer Model of Scholarship**

Scholarship is integral to the learning environment and helps define outcomes achieved by students, faculty, and staff. The CGN embraces the Boyer Model of Scholarship as a dynamic framework fitting for leaders in advanced practice nursing who engage in activities that transcend knowledge acquisition and traditional learning.

#### Discovery

The pursuit of new knowledge through research and creative activities such as publishing journal articles, authoring/editing books, presenting at conferences, reporting on new research, and/or literary works.

#### Integration

The connection of knowledge and discovery into larger patterns and contexts, creating new perspectives, and transcending disciplinary boundaries to give meaning to isolated facts.

#### **Application**

The employment of disciplinary expertise to results that can be shared and/or evaluated by peers. The application advances beyond the provision of service to those within WesternU to the greater community of health care and education.

#### Sharing knowledge

Theory, evidence-based practice, and research go hand in hand creating a dynamic process that fosters creativity, independence, clinical reasoning, and moral imagination.

#### **Student-Centered Learning Environments**

Student-Centered Learning Environments position students to be active participants in the learning experience. In safe and respectful environments, faculty and staff engage in interactive processes with

students. In this atmosphere, faculty act as facilitators and role models while focusing on the provision and organization of the curriculum to guide students to construct and structure their nursing knowledge. Together, students and faculty co-create a milieu of respectful questioning, mutual growth, and evaluation. Students bring self-directed learning, a desire to excel, reflection, a respectful attitude, and willingness to participate in active engagement. The CGN staff guide the students through university and college processes and requirements to assure students are correctly placed and supported within the learning environments.

#### References

ANA (American Nurses Association). (2010). *Nursing's social policy statement: The essence of the profession*. Silver Spring, MD: Nursesbooks.org

Benner, P., Sutphen, M., Leonard, V., & Day, L. (2010). *Educating nurses: A call for radical transformation*. San Francisco, CA: Jossey-Bass.

# **Program Offerings**

The College of Graduate Nursing currently offers two degrees and one professional certification. There are currently two possible paths of entry into the Doctor of Nursing Practice program, four paths into the Master of Science in Nursing program and four tracks within the MSN degree offerings:

#### **Degrees and Certificate**

- Doctor of Nursing Practice
- Master of Science in Nursing
- Post-Master's Family Nurse Practitioner Certificate

#### **Entry into DNP**

- Doctor of Nursing Practice Post-Masters (DNP Completion)
- Master of Science in Nursing/Family Nurse Practitioner/Doctor of Nursing Practice Dual Degree (BSN/RN to MSN/FNP/DNP)

## **Entry into MSN**

- Master of Science in Nursing (Completion)
- Master of Science in Nursing (BSN/RN to MSN)
- Master of Science in Nursing-Entry (Bachelor's to RN/MSN)
- Master of Science in Nursing (ADN/RN to MSN)

#### **MSN Tracks**

- Ambulatory Care Nursing
- Family Nurse Practitioner
- Health Systems Leadership Administrative Nurse Leader
- Health Systems Leadership Clinical Nurse Leader

## **Program Descriptions**

Web-based learning is used in all programs. Graduate level courses combine web-based learning with campus-based seminars. Web-based learning consists of asynchronous discussion boards, group projects, written assignments, competency assessments, and other learning activities. On-campus sessions include didactic classes, clinical training, and workshop simulation experiences, faculty and peer interaction, student presentations, competency assessments and guest presentations. This educational model is designed to meet the needs of adult learners, minimize time on campus, and prepare graduate-level professional nurses. MSN-Entry students are prepared for web-based learning as early as their first

semester of study. Pre-licensure courses include web-enhanced learning, clinical simulation, and interactive computer-based exercises in an on-campus environment.

#### **Post-Masters Doctor of Nursing Practice (DNP)**

The Post-Masters Doctor of Nursing Practice (DNP) program is designed for master's level prepared nurses. The curriculum requires the completion of 30 didactic semester units over a two year period and 1000 hours of supervised direct or indirect practice. Supervised clinical and practice hours completed in the student's MSN program may contribute to the DNP practice hours. Practice hours are integrated into six of the eight program courses. The last two semesters of the program are an immersion experience in which students complete a practice based dissertation/scholarly presentation. Graduates will be prepared for the expanding role functions and the needs of future advanced nursing practice. Transforming health care delivery recognizes the critical need for clinicians to design, evaluate, and continuously improve the context within which care is delivered. Nurses prepared at the doctoral level with a blend of clinical, organizational, economic, and leadership skills will be able to significantly impact health care outcomes. Prior to the Fall start of the program, students are required to complete CGN 5000 (Communication and Information Management) and attend one on-campus pre-program session for this course during the required orientation week. CGN 5000 takes place during the month of August. This course will orient students to using web-based learning for all subsequent course work, and orients the student to CGN policy and resources.

## Master of Science in Nursing/Family Nurse Practitioner/Doctor of Nursing Practice (MSN/FNP/DNP)

The Master of Science in Nursing /Family Nurse Practitioner/Doctor of Nursing Practice Dual Degree Pilot Program (MSN/FNP/DNP) students will be selected to transfer into this program after acceptance into the MSN/FNP program and the successful completion of their first year of FNP clinically focused courses. The curriculum requires the completion of 72 didactic semester units, 15 clinical semester units of FNP practice and an additional 325 DNP practice hours over a three - or four-year period. A four year curriculum option is recommended for those students who need to work full time while progressing in the program. Students begin clinical experiences in their first semester, after they have been cleared by the FNP faculty in basic clinical assessment skills and will average 8-12 clinical hours per week. DNP Practice hours are integrated into six of the eight DNP courses. Throughout the 9 or 12 semesters the student's work will contribute to their body of knowledge and prepare them for their final practice based dissertation/scholarly presentation.

Graduates will be prepared for the expanding role functions and the needs of future advanced nursing practice. Transforming health care delivery recognizes the critical need for clinicians to design, evaluate, and continuously improve the context within which care is delivered. Nurses prepared at the doctoral level with a blend of clinical, organizational, economic, and leadership skills will be able to significantly impact health care outcomes. Graduates will also be prepared to meet the criteria established by the California Board of Registered Nursing as advanced practice nurses and be eligible for national certification. Family Nurse Practitioners work in a variety of health care settings independently, or in groups of health care professionals, under collaboratively developed and agreed upon standardized procedures. Prior to the fall start of the program, students are required to complete a one unit course and attend the on-campus pre-program session during orientation. The course is CGN 5000 (Communication and Information Management) and takes place during the month of August. This course will orient students to using web-based learning for all subsequent course work and orients the student to CGN policy and resources.

#### Post-Master of Science in Nursing Family Nurse Practitioner (Post Master's FNP)

The Post-Master of Science in Nursing Family Nurse Practitioner Program (Post Master's FNP) curriculum requires 29 didactic semester units and 15 clinical units and can be completed in three semesters (one year). A two year option is available. The two year option is recommended for those students who need to work full time while completing the program. This program requires the completion of 675 precepted clinical hours. The Post-Masters FNP program is for nursing professionals who have a Master of Science in Nursing degree (MSN) and/or a doctorate in nursing and want to become certified as a Family Nurse Practitioner. The Post-Master of Science in Nursing FNP Certificate requires three to six semesters to complete, depending upon enrollment status. Individuals who complete the curriculum will be prepared to meet the criteria established by the California Board of Registered Nursing as advanced practice nurses and be eligible for national certification. Students are required to enroll in CGN 5000 (Communication and Information Management) and attend the preprogram orientation session in the month of August. This course will orient students to using webbased learning for all subsequent coursework, and orients the student to CGN policy and resources.

# **Master of Science in Nursing (Completion)**

The Master of Science in Nursing Program (Completion) requires a minimum of 29 semester units and is designed for nurses holding a Nurse Practitioner certificate, and can be completed in three semesters (one year). A two year option is available. This program is designed for family and specialty nurse practitioners (FNP, ANP, PNP, GNP, CRNA, CNM, Women's Health Practitioners) to obtain a master's degree that is focused on the functional role of the clinical specialty. Therefore for the Master's Capstone Experience students are asked to complete a clinical improvement project incorporating evidence-based guidelines and quality indicators to advance patient care. Graduates are then able to obtain national certification in their specialty. Students are required to complete CGN 5000 prior to their fall entry during the month of August. This course will orient students to web-based learning for all subsequent course work and orients the student to CGN policy and resources.

## Master of Science in Nursing/Ambulatory Care (MSN/AMB)

The Master of Science in Nursing / Ambulatory Care Program (MSN/AMB) requires students to complete 37 semester units and embedded clinical experiences within the courses. This program can be completed in six semesters (two years). A three year option is available. This program is designed to advance primary care for patients, families and communities in a variety of ambulatory settings. This master's degree prepared nurse utilizes evidence-based practice to ensure that patients and their families benefit from the latest knowledge to optimize their health in outpatient ambulatory settings such as, but not limited to, public health, community health, home health, school health and occupational health. Students are required to complete CGN 5000 prior to their Fall entry during the month of August. This course will orient students to web-based learning for all subsequent course work, and orients the student to CGN policy and resources.

## Master of Science in Nursing/Family Nurse Practitioner (MSN/FNP)

The Master of Science in Nursing/Family Nurse Practitioner (MSN/FNP) curriculum requires the completion of 49 didactic semester units and 15 clinical semester units over a two- or three-year period. A three year curriculum option is recommended for those students who need to work full time while progressing in the program. This program requires the completion of 675 precepted clinical hours. Students begin clinical experiences in their first semester, after they have been cleared by the FNP faculty in basic clinical assessment skills and will average 8-12 clinical hours per week. Graduates will be prepared to meet the criteria established by the California Board of Registered Nursing as advanced practice nurses and be eligible for national certification. Family Nurse Practitioners work in a variety of health care settings independently, or in groups of health care professionals, under collaboratively developed and agreed upon standardized procedures. Prior to the Fall start of the program, students are required to complete a one unit course and attend the on-campus pre-program session during

orientation. The course is CGN 5000 (Communication and Information Management) and takes place during the month of August. This course will orient students to using web-based learning for all subsequent course work and orients the student to CGN policy and resources.

## Master of Science in Nursing/Health Systems Leadership – Administrative Nurse Leader (MSN/ANL)

The Master of Science in Nursing/Health Systems Leadership - Administrative Nurse Leader (MSN/ANL) requires students to complete 38 didactic and 3 clinical (leadership practicum) semester units and can be completed in six semesters (two years). A three year option is available. This program is designed for bachelor's prepared Registered Nurses interested in obtaining a master's degree in nursing with a role emphasis in leadership. Accountabilities focus on assuring care environment conditions, resources, and capabilities for delivering safe, appropriate, effective, and efficient care. Effective nurse leaders integrate clinical, organizational leadership, education, and research knowledge and skills. The curriculum focuses on preparing transformational nurse leaders who are able to lead complex care systems at every level, from the point of care (bedside/unit-based/microsystem level), to leadership of numerous types of unit-based or departmental levels of service (mesosystems), to executive level leadership of organizations (macrosystems) that is focused on clinical leadership and management in a variety of health care settings. Completion of this program meets the educational qualifications for certification as a nurse manager and leader (CNML) and nurse executive (NE-BC). Prior to the fall start of the program, students are required to complete a one unit course and attend the oncampus pre-program session during orientation. The course is CGN 5000 (Communication and Information Management) and takes place during the month of August. This course will orient students to web-based learning and orients the student to CGN policy and resources.

## Master of Science in Nursing/Health Systems Leadership – Clinical Nurse Leader (MSN/CNL)

The Master of Science in Nursing/Health Systems Leadership – Clinical Nurse Leader (MSN/CNL) requires students to complete 50 semester units (41 didactic units and 9 clinical units). This program can be completed in six semesters (two years). A three year option is available. This program is designed for bachelor's prepared Registered Nurses interested in obtaining clinical practice leadership skills for the health care setting, with an emphasis on patient safety and health systems improvement.

The CNL engages highly skilled interprofessional clinicians in outcomes-based practice and quality improvement. The CNL oversees the care coordination of a distinct group of patients and actively provides direct patient care in complex situations. This master's degree-prepared clinician puts evidence-based practice into action to ensure that patients benefit from the latest innovations in care delivery. The CNL evaluates patient outcomes, assesses cohort risk, and has the decision-making authority to change care plans when necessary. The CNL is a leader in the health care delivery system, and the implementation of this role will vary across settings (as retrieved from the AACN website: www.aacn.nche.edu/publications/cnl6-04.doc). Prior to the fall start of the program, students are required to complete a one unit course and attend the on-campus pre-program session during orientation. The course is CGN 5000 (Communication and Information Management) and takes place during the month of August. This course will orient students to web-based learning and orients the student to CGN policy and resources.

## Master of Science in Nursing – Entry Program (MSN-E)

The Master of Science in Nursing – Entry Program (MSN-E). This program is designed as an entry into Masters level nursing for students with bachelor's degrees that are not in nursing. MSN-E students complete 61 units (36 units didactic and 25 units clinical) in the pre-licensure portion of the curriculum and 34 didactic units and 1-10 clinical units in the post-licensure portion of the curriculum, depending on the master's track selected. The RN pre-licensure portion of the MSN-E program (semesters 1-4) prepares students to meet society's need for professional nurses who think critically and exercise leadership in providing competent nursing care. These semesters focus on the application of the

nursing process, which incorporates clinical decision making for assessing, diagnosing, implementing and evaluating a plan of care. The nursing process provides a framework for making decisions that require humanistic technical skills and scientific knowledge for nursing interventions. Nursing education and the nursing process incorporate the care components of health promotion, disease prevention, and restoration of health, client advocacy, cultural sensitivity, client safety/protection, hygiene, care, and comfort. Students who complete the pre-licensure semesters are prepared to sit for the California NCLEX board examination, and practice as care providers, health educators, and coordinators of client care and client care systems. These students will contribute to improving the quality of health care for their clients, families and the health care institutions and communities they serve.

The pre-licensure curriculum for the MSN-E program combines didactic learning on campus and clinical training at regional clinical facilities, as well as skills practice and critical experiences in simulation. Students can expect to be on campus a minimum of two days a week and at a clinical agency an additional two to three days per week.

Post-licensure courses will be delivered using web-based learning and campus-based seminar sessions. This design provides students flexibility to become employed as an RN as they complete graduate coursework.

The post-licensure curriculum (beginning in semester 5) builds on the foundation of the pre-licensure curriculum. MSN-E students must pass the NCLEX exam by the end of the fifth semester in order to progress any further into the master's portion of the program. Upon securing their RN license, students are expected to be employed as registered nurses as they complete graduate coursework. This provides students with the unique opportunity to apply and integrate advanced knowledge and skills in their new professional role.

The MSN-E post-licensure curriculum has three track options: Ambulatory Care Nursing, Health Systems Leadership – Administrative Nurse Leader, or Health Systems Leadership – Clinical Nurse Leader.

MSN-E students who wish to enter the FNP program will first receive their MSN degree and will be required to submit their Post-Masters application. Students wishing to enter the FNP program immediately following the completion of the MSN must complete an internal CGN application to enter the program. Any student who chooses to enter the program at a later date must submit an application to the FNP program through the Office of Admissions. MSN graduates will be required to have completed 2080 hours (1 year, full time) RN work experience prior to acceptance into the FNP program. All WesternU College of Graduate Nursing graduates will be given first consideration and guaranteed a seat in the FNP program.

#### Master of Science in Nursing – Associate Degree in Nursing/RN to Master's Program (ADN/RN-MSN)

The Master of Science in Nursing – Associate Degree in Nursing/RN to Master's Program (ADN/RN to MSN). This program is designed for students who have an RN license and an Associate Degree in Nursing to complete the Baccalaureate in Nursing Essentials (bridge) courses and progress into the master's track of their choice. ADN-MSN students complete 46 didactic and 11 clinical semester units for the Health Systems Leadership - Clinical Nurse Leader track, 43 didactic and 5 clinical semester units for Health Systems Leadership – Administrative Nurse Leader, or 43 didactic units and 2 clinical semester units for the Ambulatory Care Nursing Track. This program can be completed in six semesters but extended three year curriculum grids are available for those students who wish to continue to work full time while in the program.

Students who do not have previous RN work experience are expected to be employed as a registered nurse prior to acceptance into the program and must continue working as an RN as they complete

graduate coursework. This provides students with the unique opportunity to apply and integrate advanced knowledge and skills in their new professional role.

ADN/RN students who wish to enter the FNP program will first receive their MSN degree and will be required to submit their Post-Masters application. Students wishing to enter the FNP program immediately following the completion of the MSN must complete an internal CGN application to enter the program. Any student who chooses to enter the program at a later date must submit an application to the FNP program through the Office of Admissions. Any student who chooses to re-apply at a later date will be expected to follow the same application process as listed on the university website. MSN graduates will be required to have completed 2080 hours (1 year, full time) RN work experience prior to acceptance into the FNP program. All WesternU College of Graduate Nursing graduates will be given first consideration and guaranteed a seat in the FNP program.

Upon completion of the ADN/RN to MSN program, students will have met the BSN Essential competencies and MSN Essential competencies either through previous ADN or continuing education coursework or in the ADN/RN to MSN curriculum. A Non-BSN Prior Learning Assessment Portfolio will be used as a part of the application process to the program. Applicants will complete the Portfolio in addition to all other application requirements to demonstrate BSN Essentials.

Prior to the fall start of the program, students are required to complete a one unit course and attend the on-campus pre-program session during orientation. The course is CGN 5000 (Communication and Information Management) and takes place during the month of August. This course will orient students to web-based learning and orients the student to CGN policy and resources.

## Nursing Curriculum - 30 Unit option

The California Board of Registered Nursing mandates a 30 unit option and candidates completing this are eligible to take the National Council of State Boards of Nursing Examination (NCLEX) to acquire licensure as a Registered Nurse in the State of California. Other states may not recognize this option as valid preparation for R.N. licensure and, therefore, not grant interstate licensure. Individuals completing this option are not graduates of Western University of Health Sciences and a Master's Degree in Nursing is not awarded upon completion of the 30 unit option. Applicants are admitted on a space available basis. Students seeking this option should contact the College of Graduate Nursing Student Affairs office during the month of May each year to determine space availability. Accepted students will need to show verification of a current LVN license and complete a Non-Degree Seeking Student Application.

## **Instructional Design**

## **Campus Learning (Pre-Licensure Courses)**

The pre-licensure curriculum for the MSN-E program is designed for the adult learner and uses both traditional campus-based learning and introduction to web-based learning. Didactic courses include lecture, simulated clinical experiences, clinical skills training, and structured laboratory experiences. Students will begin acute care hospital experiences in semester one.

#### **Distance Learning (Post-Licensure Courses)**

The College of Graduate Nursing programs are designed for the adult learner. The design uses educational and instructional learning theories that emphasize outcome competencies as the desired goal, rather than time on task, and individualized instructional strategies as well as classroom and clinical instruction.

The instructional modality that is most evident in this curriculum is web-based learning. The majority of courses include required asynchronous discussion sessions in which students and faculty participate

in collaborative learning. Students are expected to be on-line and engaged in learning activities from the first day of the first semester. The CGN course delivery mode is Blackboard, designed to provide the learner with the information needed to be successful in each course including learning objectives, content, learning activities, evaluation methods and grading criteria.

## **Integrated Courses**

For the Nurse Practitioner tracks (MSN/FNP, Post Master's FNP and MSN/FNP/DNP) health care issues are studied across the life span with a focus on groups of specific health care problems, namely, common, acute, chronic and complex health care problems for each age group. The course of study is planned to allow for integration of knowledge and skills across each area of study.

# **Personal Competencies for Admission and Matriculation**

## **Computer Literacy**

Students are expected to have basic computer literacy skills prior to enrollment. Students should demonstrate skill in basic word processing, Microsoft applications (Word, PowerPoint, Excel), use of the internet, e-mail, and on-line literature searches. Students will be expected to meet Basic Computer Competencies, Information Literacy, and Clinical Information Management competencies as outlined in the TIGER (Technology Informatics Guiding Education Reform) Initiative.

# (http://tigercompetencies.pbworks.com

#### **Intellectual Skills**

In addition to essential academic content and performance skills, each course requires learning activities that foster intellectual skill development for critical thinking and decision making as well as oral and written communication.

#### **Technical Guidelines for Nursing Practice (Pre-licensure)**

Nursing education requires not only the accumulation of scientific knowledge, but also the simultaneous acquisition of technical skills and professional attitudes and behavior. Nursing school faculties have the responsibility to society to matriculate and graduate the best possible nurses. Admission to nursing school has been offered to those most qualified for the practice of nursing. Technical standards presented in this document are prerequisite for admission and graduation from the College of Graduate Nursing at Western University of Health Sciences. Graduates of the CGN must have the knowledge and skills to function in a broad variety of clinical situations and to render a wide spectrum of patient care services. All courses in the pre-licensure curriculum are required in order to develop the essential skills necessary to become a competent nurse.

There are essential functions or abilities necessary for admission and progression in the College of Graduate Nursing program at Western University of Health Sciences. The candidate must be able to perform all of the essential functions (with or without accommodations). The College of Graduate Nursing follows the Western University of Health Sciences non-discrimination policy, and students requesting accommodations should contact the Harris Family Center for Disability and Health Policy (HFCDHP) at (909) 469-5441. These essential functions include, but are not limited to, the following:

# Observation (sensory)

Candidates must be able to accurately observe patients and demonstrations close up and at a distance to learn skills and to gather patient data (e.g., observe a patient's gait, appearance, posture, etc.). Candidates also must possess functional use of the sense of vision and somatic sensation. Observation is enhanced by the functional use of the sense of smell.

#### **Communication**

Candidates must have the ability to communicate orally and in writing with patients, families, groups, and other members of the healthcare team, as well as faculty and peers. Candidates must also be able to effectively interpret communication of others. Candidates also must be able to read and comprehend written material.

## **Psychomotor Skills**

Candidates must have sufficient motor function to perform nursing tasks and to obtain data from patients using tactile, auditory and visual maneuvers. Candidates must be able to execute motor movements to provide required general nursing care as well as emergency treatments.

## **Mobility and Stamina**

A student must possess sufficient gross and fine motor skills and endurance to provide safe and effective nursing care in all health care settings. Students must have the ability to perform basic life support (including CPR); function in an emergency situation; safely assist a patient in moving (e.g., from wheelchair to commode, from chair to bed, lift and transfer from gurney to bed); calibrate and use equipment; perform treatments and procedures; apply pressure to stop bleeding; manipulate diagnostic instruments to adequately perform a physical assessment; and sit, stand and move about in patient environments for 12-hour periods.

#### **Tactile**

A student must have sufficient tactile ability to perform a physical assessment of a patient and to perform procedures necessary for nursing care. Students must have the ability to perform palpation and other functions necessary for a physical exam; assess texture, shape, size and vibration; note temperature changes in skin and equipment; perform therapeutic functions (e.g., inserting a urinary catheter or IV, change dressings, give medications).

## **Intellectual and Cognitive Abilities**

Candidates must be able to measure, calculate, reason, analyze, synthesize, integrate and apply information in making clinical judgments. Problem-solving, a clinical skill required of nurses, requires all of these intellectual abilities. In addition, candidates must be able to comprehend 3-D relationships and to understand the special relationships of structures.

#### **Behavioral and Social Attributes**

Candidates must possess the emotional health required to use their intellectual abilities fully. This may be demonstrated by exercising good judgment, promptly completing all responsibilities attendant to the care of patients and aggregates, and developing mature, sensitive and effective relationships with patients, families and other health care workers as well as faculty and peers. Candidates must be able to tolerate physically taxing workloads and to function effectively under stress. They must be able to adapt to changing environments, to display flexibility and to learn to function in the face of uncertainties and ambiguities.

## **Ethical Standards**

A candidate must demonstrate the ability to reason morally and practice nursing in a professional and ethical manner with patients, families, and other health care workers as wells as with faculty and peers.

#### Reasonable Accommodation for Candidates/Students with Disabilities

Students must be able to perform all the essential functions of the program with or without accommodation. A student who discloses a disability and requests accommodation will be referred to the HFCDHP. The student may be asked to provide documentation of the disability for the purposes of

determining appropriate accommodations. The College of Graduate Nursing will provide reasonable accommodations, but is not required to make modifications that would substantially alter the nature or requirements of the program. A student with questions regarding reasonable accommodation can contact the HFCDHP Office.

## **Certifications and Licensures**

## **National Council on Licensure Exam (NCLEX)**

The Board of Registered Nursing (BRN) allows the candidates for RN licensure to complete the necessary paperwork for the NCLEX exam four months prior to taking the examination. Students are directed to the California BRN website at <a href="www.rn.ca.gov">www.rn.ca.gov</a> for current information regarding the NCLEX application. The college will submit required verification of courses completed four weeks prior to students sitting for the NCLEX exam. Official transcripts need to be ordered by the student in order for the College of Graduate Nursing to send them to the BRN. If the student fails the exam the first time he or she will be required to wait forty-five days before retaking the exam. Pre-licensure students must pass the NCLEX exam by the end of the fifth semester in order to progress any further into the master's portion of the program. Students who do not pass the NCLEX by the end of the fifth semester will be put on Academic Suspension. Students who are subject to academic suspension for this reason may petition the Student Performance Committee for an extension of the time needed to pass the NCLEX examination. Students are required to be finger-printed to be licensed as an RN. Students must divulge any prior convictions or misdemeanors during the license application process. If prior infractions of the law are not divulged, students may be banned from licensure.

## **National Certification as a Nurse Practitioner**

Graduates are required to take one of the national certification examinations as a family nurse practitioner within six months of graduation. Most states require students to pass a national certification exam for state recognition, and most employers require certification. Therefore, students are encouraged to contact their Board of Registered Nursing prior to enrollment to clarify state requirements. Currently there are two bodies which provide certification for nurse practitioners: the American Nurses Credentialing Center (ANCC) of the American Nurses Association and the American Academy of Nurse Practitioners (AANP). Students should check with their state's board of nursing to determine if a specific exam is required. Preparation for this national certification examination is done throughout the FNP courses, and during a mandatory 3 day review course that is held on campus in conjunction with the July seminar session.

## **Admissions Policies and Procedures**

# **International Applicants**

International applicants who are not U.S. citizens and who are living in the U.S. should be prepared to provide proof of legal U.S. residency at the time of interview. Proof of legal U.S. residency is required prior to any offer of acceptance. For more detailed information, please visit our web page for International Students.

#### **Admission Requirements**

# DNP

- Completed Application
- Personal Statement (career trajectory)
- Three Letters of Recommendation (from persons who can attest to the applicant's capacity for doctoral level work)
- Curriculum Vitae/Résumé

- Sample of scholarly writing (publication, unpublished manuscript, academic thesis or paper, work product or report, curriculum, other examples)
- Application Fee
- Official transcripts from all colleges/universities attended
- Copies of all applicable licenses and certifications
- Phone interview (for selected applicants)

# Master of Science in Nursing/Family Nurse Practitioner/Doctor of Nursing Practice Duel Degree Pilot (MSN/FNP/DNP)

- Students are selected to transfer into this program after acceptance into the MSN/FNP program
  and the successful completion of their first year in the MSN/FNP program. See MSN/FNP for
  admissions requirements.
- In-house applications will be made available to students once they are accepted into the MSN/FNP program.

## Post-Masters FNP, MSN Completion, MSN/FNP, MSN/ANL, MSN/CNL, MSN/AMB

- Completed Application
- Three Reference Forms (faculty & employers within past two years)
- Curriculum Vitae/Résumé
- Personal Statement
  - MSN/FNP, MSN Completion, and MSN/AMB, FNP programs: Address your understanding of advanced practice nursing, your personal career goals and how your background strengthens your aptitude with regard to becoming an advanced practice nurse.
  - MSN/ANL, MSN/CNL programs: Address your understanding of professional nursing, your personal career goals and how your background strengthens your aptitude to become a master's prepared nurse leader
- Application Fee
- Official transcripts from all colleges/universities attended
- Copies of all applicable licenses
- Phone interview (for selected applicants)

#### MSN-E

- Completed application
- Three Reference Forms (1 from professional colleague, 2 from faculty/employers)
- Curriculum Vitae/Résumé
- Personal Statement which addresses your motivation for graduate study to become a nurse, personal career goals, and how your background strengthens your aptitude to become a master's prepared nurse
- Application fee
- Official transcripts from all colleges/universities attended
- TOEFL scores for ESL applicants
- On-campus interview

## ADN/RN to MSN

- Completed Application
- Three Reference Forms (1 from professional colleague, 2 from faculty/employers)
- Curriculum Vitae/Résumé

- Personal Statement which addresses your motivation for graduate study to become a Masters
  prepared nurse, personal career goals, and how your background strengthens your aptitude to
  become a master's prepared nurse
- Application fee
- Official transcripts from all colleges/universities attended
- Non-BSN Portfolio
- Copy of active RN license from the state in which you will be practicing
- TOEFL scores for ESL applicants
- Phone interview (for selected applicants)

Decisions of the Admissions Committee regarding the admission of applicants to its programs are final.

## **Prerequisite Requirements**

## Post Masters Doctor of Nursing Practice (DNP)

- Master of Science in Nursing from a National League of Nursing (NLN) or Commission on Collegiate Nursing Education (CCNE) accredited program
- Professional certification or the completion of a minimum of 41 graduate units
- Nursing Theory (3 graduate semester units)
- Nursing Research (3 graduate semester units)
- Registered Nurse (RN) licensure in the state where practice hours will be completed

# Master of Science in Nursing/Family Nurse Practitioner/Doctor of Nursing Practice Duel Degree (MSN/FNP/DNP)

• Students are selected to transfer into this program after acceptance into the MSN/FNP program and the successful completion of their first semester. See MSN/FNP prerequisite requirements.

## Post-Master of Science in Nursing Family Nurse Practitioner Track (FNP Only)

- Master of Science in Nursing
- Bachelor of Science in Nursing\* from a National League of Nursing (NLN) or Commission on Collegiate Nursing Education (CCNE) accredited program
- GPA of 3.0 in the last 60 semester units or 90 guarter units
- Statistics (3 semester units)
- Registered Nurse (RN) licensure in the state where precepted clinical hours will be completed
- 1 year (2080 hours) of experience as a Registered Nurse (RN)

# Master of Science in Nursing Completion Track (MSN-Only)

- Bachelor of Science in Nursing\* from a National League of Nursing (NLN) or Commission on Collegiate Nursing Education (CCNE) accredited program
- Nurse Practitioner certificate (FNP, PNP, ANP, GNP, CRNA, CNM, or WHNP)
- GPA 3.0 in the last 60 semester units or 90 quarter units
- Statistics (3 semester units)
- Registered Nurse (RN) licensure
- 1 year (2080 hours) of experience as a Registered Nurse (RN)

## Master of Science in Nursing / Ambulatory Care Track (MSN/AMB)

- Bachelor of Science in Nursing\* from a National League of Nursing (NLN) or Commission on Collegiate Nursing Education (CCNE) accredited program
- GPA 3.0 in the last 60 semester units or 90 quarter units
- Statistics (3 semester units)

- Registered Nurse (RN) licensure
- 1 year (2080 hours) of experience as a Registered Nurse (RN)
- Students who do not have previous RN work experience are expected to be employed as registered nurses as they complete graduate coursework.

## Master of Science in Nursing/Family Nurse Practitioner (MSN/FNP)

- Bachelor of Science in Nursing\* from a National League of Nursing (NLN) or Commission on Collegiate Nursing Education (CCNE) accredited program
- GPA of 3.0 in the last 60 semester units or 90 quarter units
- Statistics (3 semester units)
- Registered Nurse (RN) licensure in the state where precepted clinical hours will be completed
- 1 year (2080 hours) of experience as a Registered Nurse (RN)

## Master of Science in Nursing / Health Systems Leadership – Administrative Nurse Leader (MSN/ANL)

- Bachelor of Science in Nursing\* from a National League of Nursing (NLN) or Commission on Collegiate Nursing Education (CCNE) accredited program
- GPA 3.0 in the last 60 semester units or 90 quarter units
- Statistics (3 semester units)
- Registered Nurse (RN) licensure
- 1 year (2080 hours) of experience as a Registered Nurse (RN)
- Students who do not have previous RN work experience are expected to be employed as registered nurses as they complete graduate coursework.

# Master of Science in Nursing / Health Systems Leadership - Clinical Nurse Leader (MSN/CNL)

- Bachelor of Science in Nursing\* from a National League of Nursing (NLN) or Commission on Collegiate Nursing Education (CCNE) accredited program
- GPA 3.0 in the last 60 semester units or 90 quarter units
- Statistics (3 semester units)
- Registered Nurse (RN) licensure
- 1 year (2080 hours) of experience as a Registered Nurse (RN)
- Students who do not have previous RN work experience are expected to be employed as registered nurses as they complete graduate coursework.

## Master of Science in Nursing – Entry Track (MSN-E)

- Bachelor Degree in any field other than nursing from an accredited institution
- GPA of 3.0 in the last 60 semester units or 90 quarter units
- Completion of the following prerequisite courses with a grade of C or better in each:
- Communications/English Composition (6 semester units)
- Statistics (3 semester units)
- Social Sciences (3 semester units)
- Psychology (3 semester units)
- Nutrition (3 semester units)
- Human Anatomy (4 semester units) with lab (minimum of 5 units if combined with Physiology)
- Human Physiology (4 semester units) with lab (minimum of 5 units if combined with Anatomy)
- Microbiology (4 semester units) with lab

#### Master of Science in Nursing – Associate Degree/RN to Masters Track (ADN/RN - MSN)

Associate's Degree in Nursing from a BRN approved institution

<sup>\*</sup>Bachelor's in a nursing related field will be reviewed on a case-by-case basis.

- GPA of 3.0 in the last 60 semester units or 90 quarter units
- Completion of the following prerequisite courses with a grade of C or better in each:
- Communications/English Composition (6 semester units)
- Statistics (3 semester units)
- Social Sciences (3 semester units)
- Psychology (3 semester units)
- Nutrition (3 semester units) (may be waived if integrated in your ADN program)
- Human Anatomy (4 semester units) with lab (minimum of 5 units if combined with Physiology)
- Human Physiology (4 semester units) with lab (minimum of 5 units if combined with Anatomy)
- Microbiology (4 semester units) with lab
- Non-BSN Prior Learning Assessment Portfolio
- Demonstrated capacity to succeed at a graduate degree level
- Registered Nurse (RN) licensure
- 1 year (2080 hours) of experience as a Registered Nurse (RN)
- Students who do not have previous RN work experience are expected to be employed as registered nurses before being accepted into the program and must continue working as an RN as they complete graduate coursework.

Students who do not meet the GPA requirements for admission into any of the College of Graduate Nursing programs may petition the Admissions Committee for special consideration. If admitted on probationary status, a student must achieve a GPA of 3.0 in pre-program and/or first semester courses with no options for remediation.

## **Transfer Policy**

The College of Graduate Nursing does not accept undergraduate course work for graduate level credit, (with the exception of the MSNE Pre-licensure RN courses or ADN-MSN bridge courses). Graduate level courses taken at accredited institutions can be used for credit transfer provided that the course work meets the corresponding requirements of the CGN course.

A student may request transfer of credit in the following situation: If he/she can demonstrate a similar graduate level course was taken at another accredited academic institution, within the past five years, with a minimum grade of C+ (pre-licensure) or B- (post-licensure) earned in that course and with equivalent semester units. A similar course is defined as a course that covers a significant portion of the WesternU course content (to be determined by the WesternU course instructor).

No transfer credit will be given for the following courses:

- CGN 5000 Communication and Information Management
- IPE 5000 Patient Centered Cases I
- IPE 5100 Patient Centered Cases II
- IPE 6000 Team Training in Healthcare I
- IPE 6100 Team Training in Healthcare II
- CGN 5170 Introduction to the Theory and Science of Nursing
- CGN 5610 Professional Role
- CGN 5690 Clinical Comps I
- CGN 5691 Clinical Comps II (if applicable)
- CGN 5692 Clinical Comps III (if applicable)
- CGN 5811 Leadership and Professional Role Transition
- CGN 5900 Collaborative Project
- CGN 5990 APN Master's Project
- CGN 5999 Master's Project

- CGN 6202 Health Assessment (clinical)
- CGN 6411 Nursing Fundamentals (clinical)
- CGN 6502 Nursing of Adults and Older Adults I (clinical)
- CGN 6552 Nursing of Adults and Older Adults II (clinical)
- CGN 6602 Mental Health Nursing (clinical)
- CGN 6711 Obstetric Nursing (clinical)
- CGN 6721 Pediatric Nursing (clinical)
- CGN 7541 Administrative Nurse Leader Clinical Experience I
- CGN 7542 Administrative Nurse Leader Clinical Experience II
- CGN 7543 Administrative Nurse Leader Clinical Experience III
- CGN 7550 RN Clinical Seminar
- CGN 7561 CNL Clinical Experience I
- CGN 7562 CNL Clinical Experience II
- CGN 7563 CNL Clinical Experience III
- CGN 8090 Practice Immersion Project
- CGN 8999 Continuous Enrollment/Dissertation

# **Procedure for Transfer Credit**

Any student who wishes to receive transfer credit must submit in writing to the Program Director at least Thirty (30) days prior to matriculation in the program:

- 1. his/her intent transfer course credit, and
- 2. documentation, including course description, course outlines, course syllabus, completed work, transcripts, etc., to demonstrate course equivalency.

It is the responsibility of the student to provide sufficient documentation to show equivalency to WesternU coursework. Upon receipt of the student's intent to use transfer credit and the written documentation of course equivalency, the Program Director will submit the written documentation to the faculty member teaching the WesternU course that is being challenged for review and consideration of credit transfer approval. The faculty member will review the documentation and issue a recommendation to allow or deny the transfer to the Program Director at least 10 days prior to the date of registration. No tuition fees are paid for transfer credits, and the courses do not count in the computation of the GPA.

## Partial Course Waiver (Challenge) Policy

Course challenge is defined as a student's request for exemption from a specific CGN course requirement (assignment, clinical hours or partial course requirement) due to prior similar coursework. The College of Graduate Nursing recognizes that our nursing students come into the college with previous academic experience or nursing degrees and that not all courses meet the full transfer requirements. Therefore a student may choose to challenge a portion of the course or request to have a portion of the clinical hours waived.

Requests for waivers must meet the same standards and follow the same required procedure as listed in the Course Transfer policy. See the Clinical Policy section of this catalog for more information regarding FNP clinical hours waiver.

#### **Appealing Course Transfer or Waiver Decisions**

Students have a right to appeal the faculty member's recommendation to deny a course transfer or waiver. Such appeals will be forwarded to the Dean of the CGN who has final authority in the waiver determination. The Registrar will be informed of the final determination of the course transfer request.

## **Residency Requirement**

A minimum of 17 units must be taken in residence at Western University of Health Sciences to receive a Nurse Practitioner Certificate or Master of Science in Nursing degree from the University and 18 units for the Doctor of Nursing Practice degree.

## **Computer Requirements for MSN-E Program**

Due to the nature of the pre-licensure portion of the MSN-E program, laptop computers and internet access will be required for the first four semesters of the program. The minimum and recommended specifications can be found at <a href="http://www.westernu.edu/bin/computing/laptop-requirements-COMP-CPM-CDM-Pharm-AH-GCBS-MSNE.pdf">http://www.westernu.edu/bin/computing/laptop-requirements-COMP-CPM-CDM-Pharm-AH-GCBS-MSNE.pdf</a>.

## **Computer Requirements for Post-Licensure Programs**

The following is a list of the MINIMUM computer equipment necessary for the Web-based programs: <a href="http://www.westernu.edu/bin/computing/computer-requirements.pdf">http://www.westernu.edu/bin/computing/computer-requirements.pdf</a>

These requirements are based on a PC system. Students who choose to work on Macintosh may have difficulties and will not be supported by the IT department.

Although the College of Graduate Nursing does not require distance students to purchase a laptop computer, at this time, it is highly recommended. CGN post-licensure programs are web-based, and students may benefit from the use of a laptop computer during the scheduled on-campus Seminar Weekends. For those students who wish to purchase a laptop computer instead of the basic desktop, the following are the minimum and recommended specifications:

http://www.westernu.edu/bin/computing/computer-requirements.pdf

#### **CPR Certification**

Current American Heart Association Basic Life Support for Healthcare Providers certification is required throughout all programs of study. All students are required to successfully complete an American Heart Association Basic Life Support for Healthcare Providers course prior to beginning courses. It is the responsibility of the student, not the College of Graduate Nursing to assure that requirements are met and maintained. A copy of a current card verifying completion of a course must be on file in the College prior to beginning the program. If not completed, students will be blocked from registration or removed from classes. Students can contact the American Heart Association at <a href="https://www.americanheart.org">www.americanheart.org</a> for dates, times, and location of CPR certification classes.

## **Criminal Background Check for MSN-E Students**

To meet State regulations and hospital accreditation requirements, health care facilities require nursing students to complete criminal background checks prior to matriculation. This new regulation serves to assure patient safety.

Students admitted to the MSN-E program will be required to complete a criminal background check prior to matriculation. Certain convictions may prevent students from entering hospitals or clinics, which may hinder a student's ability to successfully complete the program. If a criminal conviction is shown on the background check, hospitals or other health care facilities have discretion as to whether the individual may enter the clinical facility as a nursing student. In certain cases, the results of the background check may require that our offer of acceptance be revoked.

Certain convictions may also prevent students from obtaining RN licensure in the State of California or other states. Please visit the California Board of Registered Nursing website at <a href="https://www.rn.ca.gov">www.rn.ca.gov</a> for more information about background checks required for RN licensure.

Upon acceptance of admission to the MSN-E program, applicants will be given the necessary information for completing the required criminal background check. If a student takes a leave of absence or is placed on academic suspension during the program, the student will be required to submit a new background check prior to returning.

## LiveScan Fingerprinting for MSN-E, ADN to MSN and FNP Students

Students admitted to the MSN-E program will be required to complete the LiveScan fingerprinting process at the end of their third semester, in preparation for Community Health Nursing and in preparation for taking the nursing boards.

Students admitted to the ADN to MSN program will be required to complete LiveScan fingerprinting at the end of their first semester in preparation for entering Community Health clinical in their second semester.

Students admitted to the FNP program may be asked to complete LiveScan fingerprinting before entering county facilities or when listed as a requirement with the affiliated site.

#### **Student Release of Information**

All entering students will need to sign a release of information form authorizing the College of Graduate Nursing to release the student's social security number, health and immunization status, background check results, BLS verification, and health insurance coverage to any requesting agency that enters into a clinical partnership with the College. Additionally, some facilities may require fingerprinting. This is required for government and military health facilities who serve clients 18 years of age or younger.

# Registration

All CGN students are required to register by the registration deadlines specified by the University Registrar. Registration dates are posted at: <a href="http://www.westernu.edu/registrar-online-information">http://www.westernu.edu/registrar-online-information</a>. Failure to register by the deadline may be grounds for administrative withdrawal. All students registering after the posted deadline will be assessed a \$30.00 per business day late fee.

Full tuition and fees and all prior debts must be paid in full on or by posted deadlines each academic year. Matriculation is subject to the satisfactory completion of all academic requirements and payment of all outstanding debts to the University. The receipt of a final transcript(s) from all colleges/universities attended and a physical examination with documentation of required immunizations prior to registration are additional requirements for incoming students. Also, all students must show proof of current health insurance coverage by the deadlines provided by the University Registrar. This coverage must be maintained or in effect throughout the academic year. If there is no proof of current coverage, students will be automatically enrolled in the school sponsored insurance plan.

#### Orientation

All students enrolled in the College of Graduate Nursing will be required to attend the University campus orientation in August prior to beginning classes their first year. During orientation, students will participate in both college and university sessions. Students will be provided with information regarding the orientation program. Students are welcome to invite their family members to attend the annual Convocation and White Coat ceremonies which occur at the end of orientation week. Students will have

the opportunity to purchase medical equipment, textbooks, and uniforms (if applicable) during the oncampus Orientation/Welcome Week.

## **Pre-Program (Orientation and CGN 5000)**

During Orientation, students in all programs are required to attend mandatory sessions which will include distance learning strategies and requirements along with an overview of the college policies, resources and curriculum. All students will begin CGN 5000 Communication and Information Management, which prepares students for success in Western University of Health Sciences' courses, prior to orientation. All students must successfully complete the CGN 5000 pre-program course prior to beginning fall courses.

## **Full-time/Part-Time Status**

Graduate nursing students enrolled in 5 or more units are considered full-time students. Graduate nursing students enrolled in less than 5 units are considered part-time students.

## **Academic Progression**

Standard admission and matriculation to the CGN programs are intended for full-time enrollment. Depending upon the particular program some students may select a part-time curriculum. Each of the programs offered is built around a sequence of courses that builds on knowledge and skills attained in prior courses. Consequently, academic progression is based on successful completion of each course in a program, in sequence. Students are expected to enroll in and successfully complete each course in a sequential progression. Most CGN programs offer an extended curriculum that meets full time semester status to meet financial aid requirements.

Part-time or extended enrollment is possible for all programs except the pre-licensure (RN) portion of the MSN-E program. Students requiring part-time enrollment are encouraged to meet with the program director prior to matriculation. Students who decide that they need to switch from full-time enrollment to part-time enrollment are required to meet with the program director.

The maximum time allowed for the completion of all academic requirements is as follows:

- 6 years for the DNP program
- 4 years for the post-master's FNP program
- 3 years for the MSN completion
- 6 years for the MSN/FNP program
- 6 years for the MSN in Administrative Nurse Leader, Ambulatory Care or CNL tracks
- 8 years for the MSN-E program (all tracks)
- 6 years for the ADN/RN to MSN program (all tracks)

On-time completion will depend on whether a student has selected the original curriculum plan or the extended curriculum grid option made available for their program (upon entry). The <u>on-time</u> completion time allowed is as follows:

- 4 years for the Post-Masters DNP program
- 6 years for the MSN/FNP/DNP Dual Degree program
- 1 or 2 years for the MSN completion (depending on curriculum grid chosen)
- 2 or 3 years for the MSN/FNP program (depending on curriculum grid chosen)
- 2 or 3 years for the MSN in Administrative Nurse Leader, Ambulatory Care or CNL tracks (depending on curriculum grid chosen)
- 4 years for the MSN-E program (all tracks)

 2 or 3 years for the ADN/RN to MSN program (all tracks) (depending on curriculum grid chosen)

# **Tuition and Fees**

By action of the Board of Trustees, the tuition and fees for the 2013-2014 year are as follows:

\$1,035.00	Per credit hour tuition, DNP
\$791.00	Per credit hour tuition, Post Master's FNP
\$791.00	Per credit hour tuition, MSN (Completion)
\$791.00	Per credit hour tuition, MSN/AMB
\$791.00	Per credit hour tuition, MSN/FNP
\$791.00	Per credit hour tuition, MSN/ANL
\$791.00	Per credit hour tuition, MSN/CNL
\$977.00	Per credit hour tuition, MSN-E (Pre-Licensure)
\$791.00	Per credit hour tuition, MSN-E (Post-Licensure)
\$791.00	Per credit hour tuition, ADN/RN-MSN
\$583.00	Clinical Fee, per semester for clinical enrollment
\$40.00	Annual Student Body Fee*

<sup>\*</sup>A portion of the student body fee will go toward the cost of food on Seminar Weekends (Sat/Sun only)

# Other Fees and Expenses

\$15.00	Name Tag (One time cost)
\$30.00	Registration Late Fee (per business day)
\$350.00	Graduation Fee
\$470.00	Annual Parking Permit (Auto)
\$40.00	Locker Key Replacement Charge
\$10.00	Official Transcript (Each)
\$21.00	Rush Transcript, First Class Mail (Each)
\$25.00	Rush Transcript, Federal Express (Each)
\$10.00	Student ID Replacement Fee
\$25.00	Parking Permit Replacement Fee

# **Additional Fees and Expenses (Pre-Licensure Programs)**

\$2,200.00	Required texts
\$200.00	Uniforms (approximate)
\$144.00	Per semester, On-line Curriculum Support Tool
\$350.00	One time Kaplan NCLEX Prep
\$60.00	Background Check (approximate)
\$40.00	Drug Screening (approximate)
\$110.00	2-day Odyssey Conference (required)
\$500.00	RN Licensure Application Fees
\$75.00	Public Health Nursing Certificate
\$320.00	Required Clinical Supplies

## Additional Fees and Expenses (Post-Licensure Programs)

\$2,000.00	Required texts
\$400.00	Medical Equipment (approximate)
\$1,850.00	Computer
\$TBD	Lodging/Meals/Travel (varies based on distance/mode of travel)
\$800.00	ANCC FNP Review Course Fee (approximate, FNP students only)
\$350.00	Required Clinical Supplies (FNP students only)
\$87.00	Foliotek Program (DNP students only)

### **Administrative and Clinical Fees for Additional Terms**

Students who are extending their program to complete their program requirements must pay the clinical fee if applicable and/or the administrative fee (\$500) for each semester that enrollment is continued. This option is only available with the approval of the Program Director and the Dean.

DNP students who are in progress with the dissertation/scholarly presentation will register for the 8999 continuous enrollment course and will be assessed the \$750 administrative fee for each semester until presentation status is reached.

#### Academic Policies and Procedures

## **Required Texts**

Students are responsible for obtaining all textbooks prior to the beginning of each semester. Students are encouraged to purchase textbooks through the WesternU Bookstore. Students may explore other purchasing options as well (i.e. other medical bookstores, on-line book sellers, etc.), however the expectation is that students will be in possession of all required textbooks by the first day of the semester, regardless of the purchase source.

WesternU Bookstore hours are 7:30 am to 5:00 p.m. Monday-Friday with some Saturday options during seminar sessions. Summer hours are reduced to 8:00 am to 4:30 pm. In addition, books can be ordered from the Web by linking to the bookstore from the University's home page. Software and media resources are also available. For students using credit cards, textbooks may be ordered by phone or via the Web and mailed directly to a student's home. The WesternU Bookstore phone number is (909) 469-5416.

#### **Required Clinical Supplies**

#### MSN-E Pre-Licensure

Students must have the following items:

- Watch with a second hand
- Two (2) Official CGN Uniforms
- Western U CGN Name Tag (to be worn at all times in clinical setting)
- Stethoscope with bell and diaphragm
- Penlight
- Kelly clamp
- Bandage Scissors
- Calipers
- Calculator

## MSN/FNP, Post-Masters FNP

Students must have the following items:

- White Lab Coat (to be worn at all times in clinical setting)
- Western U CGN Name Tag (to be worn at all times in clinical setting)
- Ophthalmoscope/Otoscope (encouraged, but optional)
- Reflex Hammer (optional)
- Stethoscope with bell and diaphragm

All equipment may be purchased from any medical supply company or the University Bookstore.

#### **Academic Year**

The College of Graduate Nursing has a twelve-month academic calendar which begins in August and includes three semesters with intersessions between each semester as well as a one week spring and summer break. Approximate times for semesters are:

Fall: August – December
Spring: January – April
Summer: April – August

The first year MSN-E students may have one additional week in their first semester of study at the start of term (depending on the academic calendar) and may have an additional week at the end of the semester for IPE studies.

## **Academic/Clinical Advisement**

All students are assigned a faculty advisor upon matriculation into the program. Entering students are encouraged to contact their faculty advisor no later than the first month of enrollment in the program. Such contact may take place in person, on-line, or on the telephone. Although advisors are assigned, the student may, with the agreement of the Program Director, request a different advisor. Reasonable efforts will be made to assign a student to the advisor of choice.

Continuing students have the opportunity to contact designated faculty advisors and/or individual instructors on-line, by appointment in person or telephone, or at any seminar weekend. Regular and ongoing contact with the academic advisor is encouraged as one method to enhance success in the program.

#### **Assignment Due Dates**

Assignments for all classes will be submitted to the instructor on the date listed in the syllabus. Each instructor will clarify these dates at the beginning of each semester. It is the student's responsibility to contact the instructor if any due date is unclear. If an assignment is submitted on-line, the student is responsible for ensuring that the assignment was received or posted in a timely manner. It is each individual instructor's discretion whether to accept late work. The instructor has the right to refuse to accept an assignment turned in after the due date. Late assignments may, at a minimum, receive point deductions. The instructor will notify the student at the beginning of each semester of the process for late assignments, if any. Postings after the closing of an on-line discussion board will receive a grade of zero.

#### **Attendance Policies**

#### Seminar Weekend Attendance

Students are required to attend all seminar sessions and report to class on time. Face-to-face learning is a valued part of the curriculum. Attendance is required at all scheduled instructional periods, be they on-line or during a seminar weekend. Absence or tardiness from instructional periods for any reason does not relieve the student from the responsibility for the material covered during instructional periods. Tardiness or absence patterns will be viewed as violations of Professional Student Conduct and students will be referred to the Student Performance Committee for review. Further, students who submit discussion board postings during class time will not receive credit for that work as students are required to be engaged in learning activities.

## **Unscheduled Emergent Issues**

If extenuating or emergent circumstances preclude seminar attendance (i.e. military obligations, serious illness, extreme weather), the student is required to notify the director of their program as soon as possible. The director in consultation with program faculty will determine if remediation for missed courses can be accommodated through alterative assignments, technology, or make-up exams. The exact details of the remediation will be determined by the Director in consultation with the Associate Dean of Distance Education. The student must understand that missed seminar classes could result in academic suspension or the need for the student to take a leave of absence. Additionally, students who extend their program beyond the normal expected date of completion may be required to attend missed seminar sessions (curriculum) and are subject to administrative fees (continuation fees).

## **Non-Emergent Issues**

Absences from seminar sessions due to non-urgent issues will result in an automatic failed grade for the courses(s) and students will be referred to the Student Performance Committee.

## DNP Clinical/Practice Experience Attendance

1000 hours of practice experience (direct or indirect) are required to meet the DNP standards. A minimum of 500 of the required hours must be obtained at the Post-Masters DNP level or 325 at the DNP level for the MSN/FNP/DNP pilot students (above their required 675 FNP clinical hours). Practice hours are integrated into six of the program courses. The last course, CGN 8090 Practice Project, serves as a practice immersion experience. During courses containing practice hours the course faculty will serves as a coordinator for the course's practice experience. In addition each student will have a clinical resource person at each agency in which they complete practice hours. As a practice-based program, it is expected that students complete all practice hour requirements of each course and the practice project. Students are responsible for notifying the clinical agency and/or clinical coordinator before the scheduled time if he/she is unable to attend a planned practice experience.

Note: Once accepted into the Post-Masters DNP program, DNP students are required to show verification of supervised clinical hours from their MSN program.

#### **FNP Clinical Attendance**

As a clinically-based program, it is expected that students will follow the guidelines as presented in the syllabus for the CGN 7570 (Clinical Experience) course and in the Clinical Preceptor Guide. Unexcused absences from planned clinical experiences are not acceptable. The Clinical Preceptor will inform the Clinical Administrator of all unexcused absences within 72 hours of the absence. As stated in the syllabus for CGN 7570 (Clinical Experience) course, students are responsible for notifying the Clinical Preceptor before the scheduled clinical time if he/she is unable to attend. It is understood that all clinical experiences are concurrent with the didactic content of the program. To this end, students

begin their clinical rotations the first semester of the program after they have completed competency assessments of their Physical Assessment skills.

## MSN-E Pre-licensure Attendance for Campus-based Courses

Students may not miss any more than 2 class sessions per course for campus-based courses (offered in semesters 1-4). The student must notify the professor prior to the scheduled beginning of the class period of his/her absence. If a student misses more than 2 class sessions of a course, the student will be required to meet with the faculty member to determine if remediation is required to meet course objectives. The student may also be required to meet with the Program Director.

#### MSN-E Pre-licensure Clinical Attendance

Clinical rotations are required for students to successfully complete this program. Students are required to report to all clinical rotations and to be on time. If the student expects to be late or absent, the student must notify the clinical instructor and the rotation unit prior to the scheduled rotation start time. Because clinical time is mandated by the Board of Registered Nursing, students who miss clinical hours will still be held responsible for mastering the clinical objectives within instructor approved settings. To meet the objectives for clinical courses, students may not miss more than 15% of the required clinical hours for the course. If a student misses more than 15% of the required clinical hours for a course, the student will fail the course. The student may appeal this decision through a written petition to the Director of the program. The Director, in consultation with the clinical faculty, will determine whether the student will be allowed to continue in the clinical rotation or seek a referral with the Student Performance Committee for further consideration.

## ADN/MSN bridge courses, ANL, CNL Clinical Attendance

It is expected that students will follow the guidelines as presented in the syllabus for their clinical experience courses and in the Clinical Preceptor Guide. Unexcused absences from planned clinical experiences are not acceptable. The Clinical Preceptor will inform the Faculty of Record of all unexcused absences within 72 hours of the absence. As stated in the syllabus for the clinical experience courses, students are responsible for notifying the Clinical Preceptor before the scheduled clinical time if he/she is unable to attend.

## **Electronic Mail Correspondence Policy**

Faculty, staff and students of the CGN are expected to respond to electronic communication within 72 hours of receipt. All CGN e-mail users must adhere to the following guidelines, in addition to the University's Appropriate Use policies.

- Every student, faculty and staff member of the CGN must have a current version of Antivirus software installed on any computer used to send and receive files or correspondence with other members of WesternU.
- Faculty, staff and students may only forward appropriate e-mail content and must carefully review all parts of an e-mail, including wording written by another person prior to forwarding an e-mail.
- 3. E-mail is not a completely secure communication medium. Faculty, staff and students must take responsibility for e-mail content and be sensitive to confidential information.
- 4. The CGN bans the mass forwarding of social media and non-academic messages.
- 5. Faculty, staff, and students need to be aware that hoaxes, urban legends and unsubstantiated virus warnings perpetuate fear and waste time. Prior to forwarding such messages, the sender

must first substantiate it to the best of his/her ability and then only forward it to CGN for distribution to students and faculty.

## **Social Networking Guidelines**

The CGN understands the potential benefits of electronic social networking sites, but also recognizes the inherent risks that come with their misuse. In an effort to help protect our faculty, staff and students the college has established the following guidelines.

- 1. Respect copyright laws, and reference or cite sources appropriately. Plagiarism rules apply to online usage as well.
- 2. Be aware that University/College or Hospital partner logos and trademarks may not be used without written consent.
- 3. Understand that your online presence will also reflect upon your professional image. Weigh the risks and benefits of self-disclosure.
- 4. Always respect the delicate relationship between patient and healthcare provider, student and faculty, and employer and employee.
- 5. Information that you post should comply with existing policies and laws governing privacy and dissemination of data.
- 6. Be sure to clearly state that the view expressed are your own and do not represent the views of others.
- 7. Remember that electronic sites are never completely secure and that what you post, when seen by one, will eventually be shared with others.

#### **American Psychological Association Format**

Scholarly writing is the cornerstone and capstone of critical thinking and evidence-based knowledge in graduate education. Students are expected to conduct professional nursing and interprofessional health literature reviews and analyze findings in scholarly formal papers and designated discussion boards throughout their course of study. Students are required to follow the guidelines of the American Psychological Association (APA) for all scholarly submissions.

The College of Graduate Nursing requires the most current edition of the APA formatting style for all formal papers. The *Publication Manual of the American Psychological Association* may be purchased at the University Bookstore.

#### **Course Drop/Withdrawal**

Students may voluntarily drop a class by working with the Assistant Dean of Student Affairs and completing the necessary paperwork. A drop from a class is not recorded on the student's transcript if the effective date is within the first 2 weeks of the semester. A "W" entry is recorded from the 3<sup>rd</sup> week through the 9<sup>th</sup> week when a class is dropped. The final date to drop a class, whether initiated by student or instructor, is Friday of the 9<sup>th</sup> week of the semester. After the 9<sup>th</sup> week, the student receives the grade earned at the end of the semester.

For students enrolling in Pre-licensure courses, students may voluntarily drop a class by working with the Assistant Dean of Student Affairs and completing the necessary paperwork. A drop from a class is not recorded on the student's transcript if the effective date is within the first 1/5<sup>th</sup> of the contact hours for the course. A "W" entry is recorded if 1/5<sup>th</sup> to 3/5<sup>th</sup> of contact hours are complete when the class is dropped. The final time to drop a class, whether initiated by the student or the instructor, is once 3/5<sup>th</sup>

of the contact hours are completed. After the 3/5<sup>th</sup> point has passed, the student receives the grade earned at the end of the course.

#### **Leave of Absence**

Students who find that they are unable to continue in the program due to personal or medical reasons may apply for a Leave of Absence. A Leave of Absence may only be granted to a student in good academic standing. The request for a Leave of Absence must be submitted in writing and approved by the Dean. Leaves are granted for personal and medical reasons only. Leaves for academic reasons will be recorded as an Academic Suspension and can only be granted by the Dean in conjunction with the Student Performance Committee. Leaves may be granted for one academic year and may be extended for one additional year if the student seeks approval from the Dean at least three months prior to the start of the subsequent academic year. Students pursuing clinical tracks taking a leave of absence may be subject to clinical skills evaluation and competency demonstration prior to returning to the clinical setting. See the **University Leave of Absence Policy** in the Overview section of the catalog for more information.

## **Program Withdrawal**

After considering all the options, if it is the student's intent to withdraw from the CGN, the student must complete all necessary university documents. At the time of withdrawal, the student will be required to surrender their WesternU ID badge. Any student who withdraws from the program must contact the Financial Aid Office, Bursar's Office and the Library to discuss any issues related to tuition and fees. (See SPC section of this catalog for process). See the **University Withdrawal** policy in the Overview section of the Catalog for more information.

# **Standards of Academic Progress**

For successful progression through the curriculum, the College of Graduate Nursing has a standard of academic performance which is higher than that for undergraduate education. An overall grade point average of 3.00 is required for progression in all programs and for graduation. Each student's progress is based on successful attainment of the Outcome Competencies (as outlined in the curriculum) and through demonstration of critical thinking skills and competency in written and oral communication. The faculty determines if the student has demonstrated the knowledge, skills and attitudes necessary to be eligible to progress to the next semester.

## **Academic Probation**

Students must maintain a cumulative GPA of at least 3.00 each semester. If a student's GPA is below 3.00 for a semester or receives two or more "Incomplete" grades in one semester, the student will be placed on academic probation. Students may only be on academic probation for a maximum of two semesters. Students who are subject to academic probation for a third semester will be reviewed by the Student Performance Committee and may be at risk for dismissal. (See SPC section of this catalog section for process)

## **Failed Course Policy**

If a student fails a course, they may <u>not</u> take an equivalent course at another institution and transfer the course to Western University of Health Sciences. Students who fail a CGN course must retake and pass the course through the College of Graduate Nursing. Students failing a course may be reviewed by the Student Performance Committee and placed on academic suspension or potential dismissal. (See SPC section of this handbook for process)

## Financial Aid Warning Policy (Title IV and Title VII)

If a student is not making Satisfactory Academic Progress (SAP) they may be placed on "Financial Aid Warning" status for the next payment period and continue to receive financial aid for that period.

Financial Aid is any financial assistance offered to the student for paying for their education, such as loans, scholarships, Federal Work-Study, grants and stipends (judged on the criteria of the stipend). Students who fail to make SAP by the end of the payment period lose Financial Aid eligibility.

It is the policy of the Financial Aid Office (FAO) that once a student has been placed on academic probation for not meeting SAP standards as defined by the college, the FAO will automatically place the student in a Financial Aid Warning status. During the next academic term, if the student does not meet SAP standards and the college places the student on academic suspension, the student will no longer be eligible for financial aid. If the student appeals the academic suspension and the appeal is approved, financial aid will be reinstated. If the student is directed to audit courses, those courses will **not** be covered by financial aid.

## **Tutorial Assistance Program**

A Tutorial Assistance Program (TAP) has been established to assist students experiencing academic difficulty. Students will be recommended for this program by a faculty advisor or professor. Students may self-identify to TAP to receive assistance. The tutors will be chosen on the recommendation of the faculty in each discipline. Group tutoring is the methodology most used by the TAP department. For assistance, contact the Learning Enhancement and Academic Development Office (LEAD).

#### Remediation

## Remediation of a Specific Learning Assignment

Remediation of learning activities within a course is at the discretion of the faculty. **Remediation within a course is a privilege and not a right**. Students are allowed to remediate one learning activity within a course to meet the grading policy for the course. The student must make arrangements for remediation within ten (10) business days of receiving a grade for that assignment. The instructor will outline required remediation and work with the student to establish a mutually agreed upon time frame to complete. The minimum passing grade of 77% pre-licensure or 80% post-licensure is the highest possible grade that can be achieved through remediation. If a student does not comply with the remediation contract, a grade of "U" will be received.

## Remediation of a Course

A student who does not achieve a grade of C+ (pre-licensure) or B- (post-licensure) or higher in theory or clinical courses will receive a grade of "U". The College will provide each student with the opportunity to demonstrate competency, however, remediation is a privilege, not a right. Students must have demonstrated the likelihood of success in the remediation process by active participation in the educational program including course attendance and participation, active involvement in clinical experiences, individual initiative, and use of resources. Students who demonstrate the potential for remediation will be placed on academic probation or suspension by the Student Performance Committee (SPC) with a formal remediation contract. The remediation contract will outline the activities required for remediation, the outcomes expected for successful completion, and a date for completion. Copies of the remediation contract, signed by the faculty member and the student, will be filed with the CGN. The student may not enroll in any other CGN courses until a remediation contract has been approved by the SPC. In an effort to ensure a timely process, the Committee will strive to have a decision within ten business days of receipt of all relevant materials.

Students who receive a grade of U or NCR in a course must submit a formal petition to the SPC requesting to repeat the course and continue in the program. This petition must be received within one week of receipt of the failing grade. This petition should include a discussion of the reasons for course failure as well as the strategies the student has identified to increase the likelihood of successful completion of the course in the future. Upon receipt of the student's petition to continue in the

program, the SPC will review the student's petition and either recommend dismissal or a remediation contract will be created, in consultation with the instructor of record for the failed course. Two copies of the contract will be generated and will include all conditions necessary for course repetition and program continuation, with a statement that the student understands the terms of the contract. The student will sign one copy and return it to the College within one week of receipt.

Students are allowed to remediate only two courses in the program. Options for remediation may include, but are not limited to, the following:

- Taking a comprehensive examination on the course content,
- Completing special projects or studies in the area(s) of deficiency,
- Repeating a specific learning objective, and/or
- Repeating the course\*.

\*Students repeating the entire course as a condition of their remediation contract will be recharged for the course as well as any associated clinical education fees.

Upon completion of the remediation contract, the instructor will submit a recommendation to the Student Performance Committee and the Dean. A grade of C+ is the highest possible grade that can be achieved through remediation in pre-licensure courses and a B- in all other courses.

#### **Academic Suspension**

Students who have dropped below a 3.00 or who have failed a course will be placed on academic suspension by the Dean or Student Performance Committee as an alternative to withdrawal from the program. MSN-E students who do not pass the NCLEX exam and are unable to begin work as an RN by the end of their fifth semester may also be placed on academic suspension. Students pursuing clinical tracks who are placed on academic suspension may be subject to clinical skills evaluation prior to returning to the clinical setting (see SPC section of this catalog for process). See the **University Academic Suspension Policy** in the Overview section of the catalog for more information.

## **Dismissal**

All information related to academic dismissal from the programs of the College of Graduate Nursing will be reviewed by the Student Performance Committee. Dismissal decisions are presented in writing to the Dean by the college Student Performance Committee. The Dean has the authority to accept or reject the decision.

Dismissal criteria include:

- a) Failure to meet required minimum grade for a course(s) within the program.
- b) A pattern of "Incompletes" in courses resulting in failure to complete the program in a timely manner.
- c) Failure to meet the professional expectations of the University as outlined in the University Policies and Procedures section of the University Catalog.
- Failure to complete all aspects of remediation as specified in the remediation contract for specific course(s).
- e) Failure to meet standards for professional conduct as stated in the University catalog, and any breach of professional behavior in the clinical setting which could jeopardize patient care or relationships at clinical agencies used for training.

Any student who is dismissed from the program must contact the Financial Aid Office and the Bursar's Office to discuss any issues related to tuition and fees. Any dismissed student must immediately return his/her student ID badge to the Vice President for Enrollment Management and University Student Affairs. (See SPC section of this catalog for process). See the **University Dismissal** policy in the Overview section of this catalog for more information.

#### **Student Performance Committee**

The Student Performance Committee (SPC) is composed of the Chair, a minimum of four faculty members representing the CGN's diverse programs, and one CGN staff member as an ex-officio member for record keeping. The Chair and two of the faculty members shall have a minimum of three years of full-time graduate level teaching experience and the other faculty members shall have a minimum of one full-time year graduate level teaching experience. Members are approved by the CGN faculty. The responsibilities of the Committee include, but are not limited to:

- 1. Student performance and progression review for determination of student academic probationary status.
- 2. Student professional conduct review, including but not limited to alleged dishonesty, plagiarism, cheating, and/or other forms of misconduct.
- 3. Consultation for the development of academic performance and professional conduct policies.
- 4. Review of grade appeals.
- 5. Review of course remediation due to failure or the inability to complete course requirements.
- 6. Review of application for readmission to the College.
- 7. Review of other academic disputes or grievances.

When a matter is referred to the committee and the committee has received all relevant documentation the committee will notify the student that all documentation has been submitted and the review process has begun. A review will be completed within 10 business days (excluding University holiday or inter-sessions occurring during the evaluation period). The procedure for Committee review is as follows:

- To initiate a review, a petition requesting the review is forwarded to the Chair from the faculty
  of record or Program Director including a detailed description of the course failure or incident to
  be reviewed.
- 2. Once the request has been forwarded to the Committee the student will be requested to submit a response (petition).
- The Committee may perform additional fact finding which may include requesting additional documentation from the faculty of record, student, or other persons with knowledge of the issue.
- 4. If a Committee decision involves the potential academic dismissal or suspension of a student, the student has the right to meet with the Committee for the purpose of discussion and clarification prior to the Committee vote. The student will be notified of the SPC meeting date and time.

5. All recommendations of the Student Performance Committee shall be made in writing to the Dean of the College of Graduate Nursing, who will make a final decision and inform the student in writing within 5 business days.

SPC decisions are the result of a majority vote. A Committee Member who is the advisor or instructor of record for a student whose progress is being evaluated by the Committee may recuse them self from voting. If a quorum cannot be established for the purpose of a vote the Dean may appoint a temporary member from the CGN faculty to establish a quorum for that vote. The Chair will be responsible for communicating all committee recommendations to the Dean. Recommendations of the committee and/or action of the Dean may include, but are not limited to:

- 1. Clearance from alleged violation
- 2. Remediation
- 3. Requirement of psychological and/or educational assessment and intervention with documentation that student is able to meet all CGN program requirements
- 4. Requirement of physical examination and/or diagnostic evaluation by a physician or nurse practitioner with documentation that student is able to meet all CGN program requirements
- 5. Academic and/or Conduct probation
- 6. Academic and/or Conduct suspension
- 7. Dismissal

# **Academic Integrity and Professional Ethics**

Honesty and ethical standards are dimensions of integrity. The CGN faculty and administration believe that professional integrity begins with the student nurse and the nurse as student. Academic integrity is essential to scientific knowledge and competent skill acquisition required for successful completion of all CGN programs and safe patient care. Integrity is support by three domains of the American Nurses Association Code of Ethics for Nurses. These are:

- The nurse owes the same duties to self as to others, including the responsibility to preserve integrity and safety, to maintain competence, and to continue personal and professional growth.
- The nurse participates in the advancement of the profession through contributions to practice, education, administration, and knowledge development.
- The profession of nursing, as represented by associations and their members, is responsible for articulating nursing values, for maintaining the integrity of the profession and its practice, and for shaping social policy.

American Nurses Association (2001) *Code of Ethics for Nurses with Interpretive Statements*, Silver Spring, MD: American Nurses Publishing.

As such, the CGN has no leniency for students engaging in cheating, plagiarism and fabrication. Students charged with any of these violations will be entered into a discipline process. The following definitions of cheating, plagiarism and fabrication are presented as examples and are not inclusive.

## Cheating

Cheating is defined as: "intentionally using or attempting to use unauthorized materials, information or study aids in any academic exercise. Examples of cheating include:

- Unauthorized use of notes, text, or other aids during an examination.
- Copying from another student's examination, research paper, case write-up, lab report, course assignment, computer disc, etc.
- Talking during an examination.
- Handing in the same paper for more than one course without the explicit permission of the instructor.
- Perusing a test or faculty notes/handouts before it is given.
- Collaboration on a test, quiz, assignment, or project with others without course faculty authorization
- Using unauthorized materials to complete an exam or assignment.
- Using a communication device such as a cell phone, page, PDA, or electronic translator to obtain unauthorized information during an exam
- Using online resources such as Web sites or e-mail while completing an online exam without the permission of the course faculty
- Copying computer files from another person and representing the work as you own
- Taking an exam for another student or permitting someone else to take a test for you
- Allowing others to do research or writing of an assignment (including application), e.g., using the services of a commercial term paper company, using the services of another person (family member, tutor, etc.) inappropriately, without acknowledgement.
- Sharing a take-home examination, course assignment, case write-up, lab report, etc., with another without expressed permission from the faculty."

(Brady, 2005; Office of Student Conduct and Conflict Resolution, Northeastern University, 2006).

#### **Plagiarism**

The University does not tolerate plagiarism in any form. Plagiarism involves the use of another's work without properly giving credit for that work. This includes not properly citing information from another person's work when stating facts or statistics or when paraphrasing. Plagiarism is grounds for dismissal from the College. To assure that students understand CGN's policy on academic honesty, students are required to sign this policy during orientation.

Plagiarism is defined as:

"Presenting as one's own work the work of another person (for example, the words, ideas, information, data, evidence, organizing principles, or style of presentation of someone else) is plagiarism. Plagiarism includes paraphrasing or summarizing without acknowledgment, submission of another student's work as one's own, the purchase of prepared research or completed papers or projects, and the unacknowledged use of research sources gathered by someone else. Failure to indicate accurately the extent and precise nature of one's reliance on other sources is also a form of plagiarism. The student is responsible for understanding the legitimate use of sources, the appropriate ways of acknowledging academic, scholarly, or creative indebtedness, and the consequences for violating University regulations. Examples of plagiarism include:

- Failure to acknowledge the source(s) of even a few phrases, sentences, or paragraph
- Quotation or paraphrase of paragraph-length sections of a paper
- Failure to acknowledge the source(s) of a major idea or the source(s) for an ordering principle central to the paper's or project's structure
- Failure to acknowledge the source (quoted, paraphrased, or summarized) of major sections or passages in the paper or project.
- The unacknowledged use of several major ideas or extensive reliance on another person's data, evidence, or critical method.
- Submitting as one's own work, work borrowed, stolen, or purchased from someone else."

(State University of New York, Albany, 2007)

Fabrication is defined as: "Intentional and unauthorized falsification, misrepresentation, or invention of any information, data, or citation in an academic exercise. Examples of fabrication include:

- Making up the data for a research paper.
- Altering the results of an experiment or survey.
- Listing a citation for a source not used.
- Stating an opinion as a scientifically proven fact."
- Falsely recording attendance at clinical and/or completion of required clinical hours.

(Northeastern University, 2006).

Please note that all issues regarding plagiarism apply to all written assignments, including, but not limited to, papers, discussion boards, presentations and all testing.

## Policy for Students Suspected of Drug, Substance or Alcohol Abuse/Dependence

Drug, substance, and alcohol abuse and dependency are prevalent in American society, including nursing students. Nursing students who are impaired or abusing drugs, substances, or alcohol pose a risk for themselves, their peers, patients under their care, and others. Drug, substance, and alcohol abuse and dependency have been determined to be treatable illnesses. Nursing faculty, preceptors, institutional staff, and fellow students have an obligation to act when drug, substance, or alcohol abuse

or dependency is suspected as required by the California Board of Registered Nursing and outlined in this policy and procedure.

The College of Graduate Nursing adheres to zero tolerance regarding drug, substance, and alcohol abuse and dependence.

- Students may not have in their possession for their use at any time on campus or at sites where
  they are completing clinical hours any medications which have not been prescribed for them,
  illegal drugs, substances, or alcohol.
- 2. Students may not be under the influence of any illegal drugs, substances, or alcohol at any time on campus or at sites where they are completing clinical hours.
- 3. Students may not be under the influence of prescribed medications that impair the student's ability to learn or safely perform nursing care at any time on campus or at sites where they are completing clinical hours.
- 4. Consistent with the University's Drug Free Schools and Campus policy, nursing students may not be involved in or associated with the illegal possession, distribution, purchase, sale, or diversion of drugs, substances, or alcohol.

#### **Procedure**

If students are suspected of any of the above, through direct observation or report, nursing faculty are obligated to take the following action.

- 1. If a student exhibits or has been reported to exhibit behaviors where impairment, or drug, substance, or alcohol abuse or dependency is suspected, the student will be immediately referred for testing which may include a blood alcohol level, urine toxicity screen, or other test as appropriate, at the most convenient facility as determined by faculty.
- 2. Refusal of immediate testing may result in dismissal from the College.
- 3. If testing results in the discovery of illegal drugs, substances, and/or alcohol the student will be placed on summary suspension and will not be allowed to continue in the program, effective immediately. A written contract will be developed which will specifically outline a timeline and all conditions the student must complete before the student is considered for reinstatement in the program. For RN students the contract will be written in accordance with Board of Registered Nursing (BRN) policy. The contract may include the following:
  - a) Referral to the student's medical provider.
  - b) Referral to University counseling resources.
  - c) Referral for treatment through the Substance Abuse Treatment Facility Locator (<a href="http://findtreatment.samhsa.gov/ufds/detailedsearch\_more">http://findtreatment.samhsa.gov/ufds/detailedsearch\_more</a>).
  - d) Required psychological or rehabilitative counseling.
  - e) Episodic body fluid screening for drugs, substances, or alcohol.
  - f) Other conditions.

- 4. All costs incurred by testing and/or being placed on a contract are the responsibility of the student.
- 5. Violation of the terms of a contract may result in permanent dismissal from the program.
- 6. If a student has fulfilled the contract and wishes to re-enter the program the student must petition the Student Performance (SPC) Committee for re-entry and provide documentation that all of the conditions of the contract have been fulfilled, and any other relevant documentation per SPC policy.
- 7. The SPC Committee may allow the student to re-enter the program if and when space permits, or may deny the petition.
- 8. If the petition is denied the student will be permanently dismissed from the program.

# Guidelines Governing Re-entry of Students after Contract Fulfillment

Students allowed to re-enter the program will receive a written contract which specifically outlines expectations for student behavior and required conditions for continuation in the program. For RN students the contract will be written in accordance with Board of Registered Nursing (BRN) policy. The contract will be kept by the Dean. The contract may include the following:

- a) Notification of all nursing faculty involved with the student of the need for the contract and conditions of the contract.
- b) Behavioral expectations.
- c) Restricted participation in clinical.
- d) Restricted or supervised access to medications and/or controlled substances in the clinical setting.

#### **Clinical Education**

#### **Clinical Guides**

In addition to the information contained in this catalog, each student enrolled in a clinical program in the College of Graduate Nursing will receive a clinical/mentor handbook specific to their program. Students will be responsible for following all clinical/practice policies contained in the clinical/mentor handbook for their program of study.

## **Professional Appearance and Dress Code**

All students of the College of Graduate Nursing are expected to maintain a professional appearance. Professional appearance relates to clothing, hair, nails, shoes, carriage and communication. Students' appearance should not risk offending or disturbing clients. Students must recognize that nursing is a service-oriented profession.

While on-campus, students must follow the WesternU Dress Code. In clinical agencies, students are active learners and are, in essence, guests in these agencies. Recognition of this status means that students must adhere to all agency policies and guidelines including acceptable attire and behavior.

#### Pre-licensure

Unless otherwise instructed, the uniform requirements are as follows:

- A laboratory coat is required and must be worn, with the Western University of Health Sciences name tag, when in the hospital other than for clinical labs, for example, when selecting patients, going to medical records, or reviewing charts. Appropriate and professional attire is always required. Casual attire such as shorts, jeans, open-toed shoes, short tops showing midriff, etc., are never permissible in the clinical setting. This is in accordance with contractual agreements with clinical agencies for individuals when in the agency in a professional student role.
- The student will wear a uniform of burgundy pants and a burgundy tunic style top. An identifying patch will be sewn on the left sleeve. Name tags must be worn at all times. Undergarments should not be visible through the uniform. A short white lab coat may be worn over uniforms for added warmth while working with clients. If needed, white clothing may be worn under uniforms for warmth. Name tags can be purchased at the University Bookstore.
- The professional looking student uniform is clean and pressed and reflects frequent laundering.
- Clean, white or black, rubber-soled, enclosed heel and toe shoes with clean, white or black shoelaces are required. They should be designated for clinical use only. Strapless/backless shoes are unacceptable.
- Hosiery must be worn and match the uniform or shoes.
- Hair should be worn away from the face, collar, and neck. It should be confined appropriately if long or full in style. Hairstyles should reflect professional comportment, i.e., no extreme styling, no excessive hair ornaments. Hair coloring should remain in the realm of what can be genetically transmitted.
- No fragrances should be worn in clinical settings. Because of the close and physical nature of
  direct care nursing, students are expected to be clean and odor free. If an offensive odor is
  noticed by faculty, staff, clients or peers, the student will be asked to take corrective action.
- Jewelry is limited to a watch, one plain ring, and one pair of plain, inconspicuous earrings if ears are pierced. There should be no other visible jewelry. Any piercing other than earrings (i.e. nose, eyebrow, lip, tongue, etc.) should be removed when in the clinical setting.
- Tattoos should be covered with clothing, if possible.
- Nails should be appropriately groomed and any nail polish should be clear or a pale color. False
  fingernails, tips and acrylic nail covers harbor a wide variety bacteria and fungi and by law are
  not permitted in hospital settings.
- Some specialty areas may require uniform adaptations. Unless specifically instructed to do otherwise, the complete uniform, i.e., shirts, pants, shoes, and name badges will be worn in all clinical areas.
- It is advisable that all students own at least one pair of dress slacks that are appropriate for wearing in the community setting.
- Although gum chewing is not appropriate in clinical situations, breath mints may be advisable.

The College of Graduate Nursing must comply with the policies of various hospitals, clinics, and other agencies where clinical practice is scheduled. Students should be aware that additional dress

restrictions and infection control policies might be required in specific departments of agencies or hospitals. Any other concerns will be addressed through your clinical instructor who has the final decision on dress code implementation. If unprofessional attire is reported in clinical agencies, clinical grades may be lowered, or preclinical access to patient records may be restricted; additionally, the student may be placed on probation for unprofessional behavior.

## **Practice-based Training for DNP Students**

Practice-based assignments begin in the first semester of the program and after the student has complied with all University health, safety and immunization documentation requirements. A total of 1000 hours is required in order to meet the DNP outcome competencies. A minimum of 500 hours must be obtained within the Post-Masters DNP program and 325 within the MSN/FNP/DNP dual degree program.

#### Mentors

Practice hours are integrated into six of the program courses. In addition the last course, CGN 8090 Practice Project, serves as a practice immersion experience. During practice courses the course faculty will serve as the coordinator for the practice work of the course. During the completion of the practice project the student's practice dissertation committee will serve as consultants for the student. Each student will have a clinical mentor at each agency in which they complete clinical assignments. As a practice-based program, it is expected that students complete all practice assignments within each course and the practice dissertation/scholarly presentation.

The College encourages multiple sites for specific experiences if needed to optimize student learning. A student's practice mentor and/or clinical resource person may suggest or assist with identifying and coordinating these experiences. Due to the distance delivery of the program, students are encouraged to identify qualified clinical resource persons in their community prior to starting the program. However, no practice hours may be initiated or completed until matriculated into CGN. If students have difficulty identifying practice mentors or resource persons course faculty will assist students with securing qualified mentors or resource persons.

As expected with professional practice, all data gathered about an agency or individual patient and his/her health/illness, including all items within the medical record, are privileged information. Agency and client confidentiality must be maintained.

Students are encouraged to wear student identification and lab coats when appropriate while in the clinical/practice setting. Western University of Health Sciences maintains malpractice and accident insurance coverage for enrolled students. Professional nursing malpractice insurance (in the student role) is recommended but not required.

#### **Notification of Practice Hours**

The College requires students to notify the clinical/practice site and mentor or resource person when the student will be at the practice site.

### **Practice Hours**

The DNP program is a completion program for MSN prepared nurses and takes into account previous clinical experiences; therefore, clinical/practice hours will be adjusted accordingly, to meet the needs of the AACN requirement of 1000 clinical hours and the required minimum of 500 hours that are to be obtained at the DNP level.

## **Record Keeping and Practice Hour Logs**

Students will maintain and document the hours and the assignments they have completed during their clinical/practice experiences for their course faculty and in their clinical logs using de-identified

data to ensure HIPAA compliance. Students will receive an orientation on how to record practice hours prior to any clinical assignments. Electronic documentation of the practice hours will be submitted at the completion of the course in which the experience was completed. In addition, students may be required to submit other documentation pertaining to their practice experiences both during and at the end of the semester. Failure to do so may result in an incomplete grade and/or failure to progress in the curriculum.

## **Clinical Training for FNP Students**

Clinical training begins after the student has: (1) successfully completed the Advanced Physical Assessment competency based physical assessment testing, and (2) complied with all the University health, safety and immunization documentation requirements.

## **Preceptors**

A student's preceptor may be a physician trained in family practice or internal medicine, preferably board certified, or a master's degree prepared, certified NP. Additionally, Certified Nurse Midwives are acceptable preceptors for prenatal and gynecology rotations. The College encourages multiple rotations for specific experience if needed to optimize student learning. A student's preceptor and/or clinical instructor may suggest or assist with identifying and scheduling these rotations. If the preceptor is a physician, the student should also work with a nurse practitioner to promote role development. Due to the distance delivery of the program, students are encouraged to identify qualified preceptors in their community prior to starting the program. However, no clinical hours may be initiated or completed until matriculated into the CGN. If students do not have a preceptor the Clinical Administrator will assist students with securing a qualified preceptor.

Preceptors working within specific guidelines established by the program will be responsible for assuring appropriate and adequate learning experiences, as well as supervising students for safe practice. Preceptors and clinical sites must be approved by the faculty and Western University of Health Sciences. A *Preceptor Guide* will be provided to all preceptors.

As expected with professional practice, all data gathered about a patient and his/her health/illness, including all items within the medical record, are privileged information. Client confidentiality must be maintained.

Students must consult with their preceptors on all patients seen by the student. The supervising practitioner must review and countersign all student notes written in the medical record. Students are not allowed to prescribe medications or sign any prescription order.

Students are required to wear student identification and lab coats at all times while in the clinical setting. WesternU maintains malpractice and accident insurance coverage for enrolled students. Professional nursing malpractice insurance (in the student role) is recommended but not required.

#### Scheduling

The College encourages students to schedule the same clinical day(s) each week to provide consistency for the agency and patient follow-up. Additional days should be scheduled to accommodate for illness, employment, or family responsibilities.

#### **Clinical Hours**

Eight to twelve hours per week of clinical training are required of full-time students throughout a two year course of study to complete 675 hours or twelve to twenty four hours per week for a one year course of study. Following successful completion of the Physical Assessment course competency testing, full-time students are expected to complete 1-5 units of clinical training each semester. Forty-

five hours must be completed for each unit, for a total of 15 units. Administrative and clinical fees will be charged for the additional semester(s) to complete the 15 units. Students who fail to meet the 45 hours minimum per semester for two consecutive semesters will be placed on academic probation or suspension and are at risk for dismissal.

## **Clinical Progression**

Student productivity is expected to increase with each semester's experience. Initially, students may see approximately 4-6 patients per day. The student is expected to gather complete subjective and objective data on each patient, even though early in the program the student may not be able to fully assess the problem or develop a complete treatment plan. Later in the program, students will be expected to see approximately 4-8 patients per day and provide comprehensive care including assessment and plan of treatment. Students will be guided to transition from novice to advanced clinician as they progress in the clinical practicum.

It is recommended that FNP students see approximately 810 patients during their program. The goal for patient mix is: Pediatrics 15%, Adults 40%, Geriatrics 20%, GYN 15%, and OB 10%.

Students are encouraged to obtain other rotations to complete clinical objectives if they are not in a family practice setting. In addition, students are advised to find Urgent Care and Emergency Room rotations for short rotations for skills and procedures experience. The clinical faculty of record will review students' clinical logs every two weeks in each semester. In addition, Preceptor Evaluations of the student are documented each semester.

#### **Record Keeping and Clinical Hours**

The College of Graduate Nursing uses an electronic system to record clinical hours. Students will record each patient visit into the clinical log using de-identified data to ensure HIPAA compliance. Students will receive an orientation to the use of the electronic system. Clinical hours will be evaluated biweekly, and at other times, if requested by the faculty. In addition, students are required to submit other documentation (i.e. Preceptor Evaluation, Student Evaluation of the Preceptor, Student Objectives) at the end of the semester. Failure to do so may result in an incomplete grade and/or failure to progress in the curriculum.

## Clinical Site Visits:

Faculty and contracted NP site visitor evaluations of a clinical site are conducted each semester. These Clinical Site visits are completed in one of three ways: 1) in-person site visits; 2) virtual site visit via Webcam; or 3) virtual site visit via teleconference. If an in-person site visit is conducted, student clinical competency will be evaluated at this time by direct observation of the student's performance and interaction with patients, preceptors, and staff. If Webcam or teleconferencing is used for the site visit, then the clinical competency is assessed by direct observation of the student's performance and interaction with Standardized Patients in the Spring term each year. ALL students participate in a clinical competency assessment session using Standardized Patients and standardized clinical scenarios reflecting first- and second- year outcome competency assessments. In addition, the clinical faculty provides guidance and support as well as assistance with clinical decision making during all forms of site visits. Students who receive an unsatisfactory site visit evaluation must complete a remediation process with the possibility of additional clinical hours added to their 675 clinical hour minimum.

#### Waiver of Clinical Hours - FNP

The faculty believes in granting credit for previous, appropriate professional experience. Students who are licensed NPs in a specialty area other than Family may submit a written request for a waiver of the required clinical hours. It is the view of the faculty that to complete such a broad specialty area such as the family nurse practitioner, more clinical hours are required than the national or state minimum of

350-540 hours. Currently, students in the Family Nurse Practitioner program are required to complete 675 clinical hours.

Students who petition to receive credit for previous clinical education for their nurse practitioner specialty must provide an official transcript that documents clinical hours. If hours are not listed on the transcript, a letter from the Dean or Director of the NP program is required to verify clinical hours completed in the program. Certified or licensed Nurse Practitioners who did not complete a formal nurse practitioner education program from an accredited institution of higher education must submit a written request, as well as a portfolio, which verifies clinical competence in his or her specialty to the Program Director. The portfolio could include: national certification; letters from collaborating or supervising physicians, advanced practice nurses, or faculty; CEU; clinical evaluations completed by Western University of Health Sciences faculty; and/or clinical coursework. The student's request and documentation will be forwarded to the Student Performance Committee for consideration. Students will be notified in writing of the Committee's decision. Students will not be exempt from tuition fees if hours are granted.

# **Clinical/Practical Training for Administrative Nurse Leader Students**

Introductory discussions will occur in the third semester of the two year program to introduce the ANL student to the outcome competencies for the administrative nurse leader role. Preceptor, clinical agency, and clinical requirements will be identified in this semester to prepare the student for the ANL clinical experience. In the second year of the curriculum, the student will complete a minimum of 45 hours per semester for a total of 135 clinical hours. Working with their faculty advisory and a CGN-approved preceptor(s), the student will complete learning activities that demonstrate integration of the semester objectives and advance the competencies of a nurse leader/manager.

## **Clinical Training for Clinical Nurse Leader Students**

Introductory discussions will occur in the third semester of the two year program to introduce the CNL student to the outcome competencies for the clinical nurse leader role. Preceptor, clinical agency, and clinical requirements will be identified in this semester to prepare the student for the CNL clinical experience. Beginning in the fall of year two, the student will begin the immersion experience for a total of nine clinical units (405 hours) to operationalize the CNL role.

#### Clinical Rotations Policy – Pre-Licensure

Students achieve many of the course requirements through practical experience in many different health care agencies. Clinical rotations may occur on any day of the week; however, weekend rotations are kept to a minimum. Student access to facilities is regulated by contracts between the University and the agency. Students who do not meet an agency's requirements will be denied access to that facility. The student is not considered an employee of the agencies involved, and has no claim for any employee benefits such as sick leave, vacation pay, social security, retirement benefits, worker's compensation or unemployment benefits. Students cannot make their own clinical agency arrangements as University and agency legal contracts are required.

## Clinical/Practical Training for ADN to MSN Students: Community Health Clinical

During their second semester, students will complete a minimum of two clinical units (90 hours) for the CGN 5904 Community Health Nursing Clinical Practicum. Working with their faculty advisor and a CGN-approved preceptor(s), the student will complete learning activities that demonstrate integration of the semester objectives and advance clinical competencies relating to community health nursing.

## Student Injuries and Illnesses in the Clinical Setting

If a student is injured or is exposed to potentially infectious (includes blood borne pathogens) or hazardous substances during a clinical rotation the student is required to notify the clinical instructor

immediately and seek assessment and/or treatment per facility policy. Follow-up care should be continued at the contracted clinical facility as needed and ordered by the evaluating health care professional. Expenses incurred are to be submitted to the university, for the reported incident only.

The Incident Report Form can be found in the Clinical Handbook and must be completed by the student and the faculty and submitted to CGN. The Risk Management Office at the University must be notified as soon as possible at (909) 469-5254.

## **Outcome Competencies for Graduates**

Graduates of the Western University of Health Science's College of Graduate Nursing MSN and DNP Programs will:

- 1. Integrate knowledge from the humanities and sciences into the role and practice of the professional nurse.
- 2. Assume increasingly complex leadership roles within the healthcare system to ensure quality care of populations, especially vulnerable populations.
- 3. Translate the best available evidence to improve health systems.
- 4. Critically analyze and integrate evidence for evaluating health systems and practice outcomes.
- 5. Participate in the application of nursing knowledge through the integration of theory and research.
- 6. Utilize information systems and other technologies/tools to support and improve patient care and health systems.
- 7. Interpret ethical, legal, and social factors involved in healthcare and healthcare policy.
- 8. Use interpersonal skills to establish and maintain collaborative relationships with patients, members of the healthcare team, and other stakeholders.
- 9. Integrate health promotion, illness prevention, and health maintenance strategies into holistic care provided for diverse individuals, families, and communities.
- 10. Empower clients for collaborative decision-making to achieve desired health outcomes and quality of life.
- 11. Engage in professional, community and/or organizational development activities.

# **Program Completion**

Unless the Dean of the College of Graduate Nursing has granted special permission, all students must attend and participate in the Commencement program. If the Dean grants special permission to be excused from the Commencement ceremony, the graduate may be required to present himself or herself to the Chief Academic Officer or appropriate Dean at another time to receive his or her diploma. Due to the nature of the CGN academic calendar, the Commencement ceremony takes place before the end of the academic year. In order to be placed on the list to participate in Commencement, the student must be on schedule for completing at least 75% of their coursework by May of the then current academic year, and on schedule to complete 100% by December of that year.

#### DNP

Students who have met the following requirements will be considered candidates for the degree of Doctor of Nursing Practice:

- Completion of all course requirements with a minimum overall GPA of 3.00.
- Completion of a minimum of 1000 direct or indirect supervised graduate level clinical/practice hours. Students will be held responsible for gathering verification of clinical/practice hours to be used from their MSN program. Students must satisfactorily demonstrate all program competencies.
- Satisfactory completion and presentation of the Practice project/dissertation.
- Compliance with all the legal and financial requirements of the University as stated in the University Catalog.
- Demonstrated no serious deficiencies in ethical, professional or personal conduct as outlined in the universities Standards of Professional Conduct.

## MSN/FNP/DNP Dual Degree Pilot

Completion of all requirements as set forth for both the DNP and the MSN/FNP programs.

## Post-Licensure MSN/FNP, Post Master's FNP

Students who have met the following requirements will be considered candidates for the degree of Master of Science in Nursing and/or Family Nurse Practitioner Certificate:

- Completion of all course requirements with a minimum overall GPA of 3.00.
- Completion of 675 FNP clinical practice hours for students pursuing the FNP Certificate. Students must satisfactorily demonstrate all clinical competencies.
- Compliance with all the legal and financial requirements of the University as stated in the University Catalog.
- Demonstrated no serious deficiencies in ethical, professional or personal conduct as outlined in the universities Standards of Professional Conduct.

#### Post-Licensure MSN/CNL, MSN/ANL, MSN/AMB:

Students who have met the following requirements will be considered candidates for the degree of Master of Science in Nursing:

- Completion of all course requirements with a minimum overall GPA of 3.00.
- Completion of all required clinical hours and clinical objectives.
- Compliance with all the legal and financial requirements of the University as stated in the University Catalog.
- Demonstrated no serious deficiencies in ethical, professional or personal conduct as outlined in the universities Standards of Professional Conduct.

#### **Pre-Licensure**

Students who have met the following requirements will be considered for continuation into the post-licensure portion of the MSN-E program:

- Students must have a minimum cumulative GPA of 3.00 for first four semesters of the program.
- Students will have one semester (semester 5) in which to pass the NCLEX exam and obtain RN employment in order to continue to progress into the 6<sup>th</sup> semester of the post-licensure curriculum, unless granted an extension by the SPC or Dean of the College of Graduate Nursing.

### **Evaluation and Grading**

Inquiry-based and competency-based assessments are the underlying principles for the instructional design of the CGN program and the evaluation of student achievement. To this end, each course has specific learning objectives, evaluative criteria and expected outcomes. Assessment methods are stated in each course syllabus.

#### **Pre-Licensure Grading Policy**

(MSN-E Program)

A grade of C+ or higher is required in each course in the pre-licensure portion. Pre-licensure courses are courses numbered in the 6000s (CGN 6000 – CGN 6999). Minimum competency, as outlined in the course syllabi for each course, is required to achieve a passing grade of C+ or higher. Attainment of a grade below a C+ denotes unacceptable performance and is grounds for dismissal from the program.

Students are required by the College to maintain a 3.0 GPA or higher each semester of the MSN-E program in order to remain in good standing. If a student does not maintain an overall GPA of 3.0 or higher for each semester, the student will be referred to the Student Performance Committee for review and be placed on Academic Probation.

MSN-E students will be required to have a cumulative GPA of 3.0 or higher for the first four semesters (pre-licensure courses) to progress to the post-licensure courses.

#### Pre-Licensure Grading Scale

Final course grades for the pre-licensure RN portion of the MSN-E program are given based upon the traditional 4-point letter system, as follows:

<u>Grade</u>	<u>Equivalent</u>	<b>GPA Points</b>
Α	94-100	4.00
A-	90-93	3.70
B+	87-89	3.30
В	83-86	3.00
B-	80-82	2.70
C+	77-79	2.30
U	Below 77	0.00
CR	Credit	N/A
NCR	No Credit	N/A

#### **ADMINISTRATIVE GRADES**

<u>Grade</u>	<u>Equivalent</u>	<b>GPA Points</b>
AU	Audit	N/A
1	Incomplete	N/A
W	Withdrawal	N/A
M	Missing	N/A

### **Post-Licensure Grading Policy**

The cumulative grade of 80% (B-) or better is required to demonstrate an acceptable level of performance and enable the student to progress in the curriculum. Graded assignments for each course are included in the course syllabus. Students may be given the opportunity to remediate one learning component within a course to meet the cumulative letter grade requirement.

### Post-Licensure Grading Scale

Final course grades for post-licensure classes are given based upon the traditional 4-point letter system, as follows:

<u>Grade</u>	<u>Equivalent</u>	<b>GPA Points</b>
Α	94-100	4.00
A-	90-93	3.70
B+	87-89	3.30
В	83-86	3.00
B-	80-82	2.70
U	Below 80	0.00
CR	Credit	N/A
NCR	No Credit	N/A

#### **ADMINISTRATIVE GRADES**

<u>Grade</u>	<u>Equivalent</u>	<b>GPA Points</b>
AU	Audit	N/A
1	Incomplete	N/A
IP	In Progress	N/A
W	Withdrawal	N/A
M	Missing	N/A

### Incomplete ('I') Grades

Achievement of an "I" denotes an Incomplete, which signifies that a portion of the required coursework has not been completed and evaluated. Students must submit a plan for completion that meets approval by the faculty of record. Students who receive two incomplete grades in one semester will be placed on academic probation. Students who are enrolled in sequential theory courses will not be able to progress in the curriculum unless the course is completed successfully prior to the next semester or instructor approval is given. The grade of Incomplete will be recorded on the official transcript and a final grade will be assigned upon completion of course work. If the student does not satisfactorily complete the contractual agreement within the time frame agreed to by the faculty of record or has not completed the work within one year, a grade of U will be given with recommendation for dismissal from the College of Graduate Nursing.

## In Progress ('IP') Grades

A grade of "IP" denotes a grade that is in progress, which signifies acceptable continuation of coursework.

### Unsatisfactory ('U') Grades

A grade of "U" denotes unacceptable performance. Students who do not meet the remediation standards for an Incomplete will be given the grade of "U". Students who receive a "U" for any course will be placed on probation and will be unable to progress in the curriculum without a formal review by the Student Performance Committee, who will then give their recommendation to the Dean.

### **Clinical, Practicum and RN Seminar Grading Policy**

CGN 7570 (Primary Care Clinical), CGN 7541, 7542 and 7543 (ANL Clinical Experience) CGN 7561, 7562 and 7563 (CNL Clinical Experience), CGN 7550 (RN Seminar), CGN 8090 (DNP Practice Immersion), and CGN 8999 (DNP Continuous Enrollment) are graded as credit/no-credit and are not included in the numerical values for computing grade point averages.

### Credit (CR) Grades

Achievement of the grade "Credit" signifies that a student meets the acceptable level of performance in a graduate level course. Students cannot achieve credit for clinical hours if they fail the clinical site visit (whether virtual or on-site).

#### No Credit (NCR) Grades

Achievement of the grade "No Credit" indicates an unacceptable level of performance in a graduate level course. A grade of "No Credit" is the equivalent of a "U" grade. Students who receive an "NCR" grade for a clinical rotation may be dismissed from the program or may be required to repeat all hours obtained during that experience. If a student does not comply with the remediation contract, the student will be dismissed from the College.

#### In Progress (IP) Grades

A grade of "IP" denotes a grade that is in progress, which signifies acceptable continuation of coursework.

#### Incomplete (I) Grades

Achievement of the grade "incomplete" signifies that all required clinical hours for the enrolled number of units have not been completed. Students who receive two incomplete grades in one semester will be placed on academic probation. The grade of "I" will be recorded on the official transcript and a final grade assigned upon the satisfactory completion of all clinical hours.

#### **Credit Hour Calculation**

1 semester unit is equal to 45 hours of time spent directly on course related activities.

#### **DNP Practice Immersion: The Practice Dissertation/Scholarly Presentation**

The practice immersion project will be an independent individual student demonstration of program outcome competencies facilitated by project committee. The structure, charge and mentoring role of the committee will be determined by the type of project to be carried out. Detailed discussion of the project format, development and implementation process is outlined in the Dissertation/Scholarly Presentation Guideline. Final approval of all project committee members will be made by the College of Graduate Nursing DNP Director.

### **DNP Continuous Enrollment Policy**

If a DNP student does not finish his/her practice dissertation/Scholarly Presentation within the two years of coursework, he/she must enroll in CGN 8999 – Continuous Enrollment each semester, up to the

six year time limit for the completion of the degree. Students who do not enroll in CGN 8999 will be administratively withdrawn from the program. A \$750 extension fee is charged for each term of enrollment. CGN 8999 is a 3 unit repeatable course that is not required for the DNP degree and is therefore not covered by financial aid. Students enrolled in CGN 8999 are considered half-time and eligible for loan deferment. Students are awarded IP grades for CGN 8999 until the practice dissertation/Scholarly Presentation has been successfully presented. Upon successful presentation, all CGN 8999 course grades will be changed to CR.

#### **Grade Appeals Process**

A student who believes that a grade for a course does not accurately reflect his/her performance in that course should first submit a written request for a grade appeal to the faculty of record. All grade appeals must be submitted in writing to the faculty member of record within ten (10) business days of when the grade was posted. The written request should include supporting documentation. The faculty member of record will either revise the grade or will retain it as originally assigned. If the grade remains unchanged, the student may appeal to the Student Performance Committee (SPC). The SPC will review the course syllabus and student work and either revise the grade, retain it as originally assigned or send the matter forward to the Dean (See SPC section of this handbook for process).

### Student Concerns/Continuous Quality Improvement (CQI) & Formal Complaint Policy

#### **Student Concern/CQI**

The College of Graduate Nursing welcomes constructive comments from students and values comments as a resource for positive change. Most complaints or issues of concern will be resolved through informal avenues such as:

- direct communication between parties,
- anonymous submission via the suggestion box in the CGN classroom,
- guidance from faculty advisor or other resources,
- completion of course evaluations at the end of each semester
- information sharing with the class representatives.

#### **Formal Complaints**

The college encourages the use of informal resolution in all cases but recognizes the need for a formal complaints process for issues that cannot be resolved informally or that are of a more serious nature. Complaints may be regarding a 'student to student' matter, 'student to faculty', 'student to staff' or a general college based issue. Formal complaints must be submitted in writing within 30 days of the initial incident and must be signed by the student in order to be considered a formal complaint. Due to the nature of our distance programs, an email coming directly from the student's WesternU email account will be considered as a signature by the student. Formal student complaints can be submitted to the CGN Administrative offices in person or via mail, fax, or email and should be addressed to the following people, in subsequent order, starting with #1, until the student feels their issue has been resolved:

- 1. Faculty member,
- 2. Program Director,
- 3. Assistant Dean of Student Affairs,

- 4. Dean,
- 5. University Vice President of Student Affairs or Provost,
- 6. President.

Emailed correspondence is sent to the person in the chain above. Mailed correspondence for 1-4 above can be sent to:

#### **Western University of Health Sciences**

College of Graduate Nursing, Attn. Student Affairs 309 East Second Street Pomona, CA 91766-1854

Faxed correspondence to CGN is sent to 909-469-5521.

Each recipient of the formal complaint will acknowledge receipt and will process the formal complaint within 10 business days by either:

- 1. Resolving the issue from a neutral perspective.
- 2. Referring the issue to the Student Performance Committee (if academically or student conduct related).
- 3. Forwarding the case to the University Vice President of Student Affairs or Provost (when it is a matter of discrimination or sexual harassment that cannot be resolved within the college) or
- 4. Determining that no action is warranted.

The complainant will then be notified of the results and any next steps to be taken.

Any complaint being reported more than 30 days after the initial incident shall be considered already resolved unless there are extenuating circumstances. Students shall not be retaliated against for filing a formal complaint but correspondingly should not use the formal complaint process irresponsibly. All formal complaints shall be tracked along with their outcomes to identify quality improvements in the college programs and all pertaining files kept in the CGN Office of Student Affairs.

The College of Graduate Nursing strives for continuous program improvement in compliance with the accreditation standards as set forth by CCNE. Any student directly affected by the policies or actions of the College of Graduate Nursing may send a formal complaint to the accrediting body or to the Board of Registered Nursing at the following locations:

**Commission on Collegiate Nursing Education (CCNE):** 

One Dupont Circle, NW, Suite 530, Washington, DC 20036 (202) 887-6791

Board of Registered Nursing for the State of California

http://www.rn.ca.gov/enforcement/complaint.shtml#cpltfile

Complaints may be filed by completing the **complaint form** and submitting to:

## **Board of Registered Nursing**

Attn: Complaint Intake PO Box 944210 Sacramento, CA 94244-2100 Fax: (916) 574-7693

## **Curriculum Organization**

### **Pre-Program**

Students entering the following programs are required to complete GN 5000, Communications, prior to the start of their first fall term:

- Post-Master's Family Nurse Practitioner (FNP)
- Master of Science in Nursing (Completion)
- Master of Science in Nursing (ADN/RN-MSN)
- Master of Science in Nursing (BSN/RN-MSN)
- Master of Science in Nursing/Family Nurse Practitioner (MSNFNP)
- Doctor of Nursing Practice (DNP)

Students entering the Post-Master's Family Nurse Practitioner program upon graduation from WesternU with a MSN are exempt from the pre-program requirement. Students entering the Master of Science in Nursing, Entry Level program (MSN-E) are also exempt from the pre-program requirement. The GN 5000 course cannot be covered by Financial Aid funds; therefore, the cost of the course must be paid out-of-pocket.

## Master of Science in Nursing, Entry Level (MSN-E), Pre-Licensure RN Preparation Curriculum

First Year	, Fall Semester		
	ee Assessed for Term? Yes		
Course	Title	Credit Hours	
IPE 5000	Patient Centered Cases I – An Interprofessional Approach*	1.00	
GN 6010	Introduction to Nursing Theory	2.00	
GN 6110	Pathophysiology	4.00	
GN 6201	Health Assessment	3.00	
GN 6202	Clinical Practicum: Health Assessment	1.00	
GN 6301	Professional Nursing Role	1.00	
GN 6410	Nursing Fundamentals	3.00	
GN 6411	Clinical Practicum: Nursing Fundamentals	2.00	
	Semester Total:	17.00	
First Year	, Spring Semester		
Clinical Fe	e Assessed for Term? Yes		
Course	Title	<b>Credit Hours</b>	
IPE 5100	Patient Centered Cases II – An Interprofessional Approach*	1.00	
GN 6140	Pharmacology	3.00	
GN 6501	Nursing of Adults and Older Adults I	4.00	
GN 6502	Clinical Practicum: Nursing of Adults and Older Adults I	4.00	
GN 6601	Mental Health Nursing	2.00	
GN 6602	Clinical Practicum: Mental Health Nursing	2.00	
	Semester Total:	16.00	
First Year	, Summer Semester		
Clinical Fe	e Assessed for Term? Yes		
Course	Title	Credit Hours	
GN 6551	Nursing of Adults and Older Adults II	4.00	
GN 6552	Clinical Practicum: Nursing of Adults and Older Adults II	4.00	
GN 6710	Obstetric Nursing	2.00	
GN 6711	Clinical Practicum: Obstetric Nursing	2.00	
GN 6720	Pediatric Nursing	2.00	
GN 6721	Clinical Practicum: Pediatric Nursing	2.00	
	Semester Total:	16.00	
	ear, Fall Semester		
	e Assessed for Term? Yes		
Course	Title	Credit Hours	
IPE 6000	Team Training in Healthcare I*	1.00	
GN 6160	Introduction to Research	2.00	
GN 6801	Leadership and Management in the Clinical Setting	2.00	
GN 6802	Clinical Practicum: Leadership and Management	3.00	
GN 6901	Community Health Nursing 2.00		
GN 6902	Clinical Practicum: Community Health Nursing	2.00	
	Semester Total:	12.00	

<sup>\*</sup>Course(s) not charged tuition.

## Master of Science in Nursing, Entry Level (MSN-E), Ambulatory Care Emphasis

See Master of Science in Nursing, Entry Level (MSN-E), Pre-Licensure RN Preparation Curriculum for pre-licensure portion of curriculum.

Second Ye	ear, Spring Semester		
Clinical Fe	e Assessed for Term?	Yes	
Course	Title		Credit Hours
GN 5603	Societal and Ethical Issue	5	1.00
GN 5703	Introductory Nursing Info	rmatics	3.00
GN 7550	RN Clinical Seminar*		1.00
		Semester T	Total: 5.00
Second Ye	ear, Summer Semester		
Clinical Fe	e Assessed for Term?	No	
Course	Title		Credit Hours
GN 5103	Advanced Health System		3.00
GN 5306	Biostatistics and Epidemic	ology	3.00
GN 5606	Complementary and Alte	rnative Therapies	1.00
		Semester T	Total: 7.00
Third Year	r, Fall Semester		
Clinical Fe	e Assessed for Term?	No	
Course	Title		Credit Hours
GN 5200	Nursing Theory		3.00
GN 5304	Nursing Research I	3.00	
GN 5605	Advanced Human Diversi	1.00	
GN 5810	Management Practice Iss	2.00	
		Semester T	Total: 9.00
Third Year	r, Spring Semester		
Clinical Fe	e Assessed for Term?	No	
Course	Title		Credit Hours
GN 5305	Nursing Research II		1.00
GN 5602	Health Promotion and Dis	sease Prevention	1.00
GN 5620	Advanced Health and Pop	ulation Assessment	3.00
GN 5820	Professional Practice Issu	es	2.00
GN 5900	Collaborative Project		2.00
		Semester T	Total: 9.00
Third Year	r, Summer Semester		
Clinical Fe	e Assessed for Term?	No	
Course	Title		Credit Hours
GN 5830	Business Practice Issues		2.00
GN 5999	Master's Project		3.00
		Semester T	Total: 5.00
		Total Program U	Jnits: 96.00

<sup>\*</sup>Course(s) not charged tuition.

# Master of Science in Nursing, Entry Level (MSN-E), Health Systems Leadership-Administrative Nurse Leader Emphasis

See Master of Science in Nursing, Entry Level (MSN-E), Pre-Licensure RN Preparation Curriculum for pre-licensure portion of curriculum.

	ear, Spring Semester			
Clinical Fe	ee Assessed for Term?	Yes		
Course	Title			Credit Hours
GN 5702	Management Principles a	nd Leadership Theories		3.00
GN 5703	Introductory Nursing Info	rmatics		3.00
GN 7550	RN Clinical Seminar I*			1.00
			Semester Total:	7.00
Second Ye	ear, Summer Semester			
Clinical Fe	ee Assessed for Term?	No		
Course	Title			Credit Hours
GN 5306	Biostatistics and Epidemic	ology		3.00
GN 5710	Advanced Nurse Leaders	as Educators		3.00
			Semester Total:	6.00
Third Yea	r, Fall Semester			
Clinical Fe	ee Assessed for Term?	Yes		
Course	Title			Credit Hours
GN 5103	Advanced Health Systems			3.00
GN 5200	Nursing Theory			3.00
GN 5304	Nursing Research I			3.00
GN 7541	Administrative Nurse Leader Clinical Experience I*		1.00	
			Semester Total:	10.00
Third Yea	r, Spring Semester			
Clinical Fe	ee Assessed for Term?	Yes		
Course	Title			Credit Hours
GN 5305	Nursing Research II			1.00
GN 5620	Advanced Health and Pop	ulation Assessment		3.00
GN 5704	Accounting and Finance			3.00
GN 7542	Administrative Nurse Lead	der Clinical Experience II*		1.00
			Semester Total:	8.00
Third Yea	r, Summer Semester			
Clinical Fe	e Assessed for Term?	Yes		
Course	Title			Credit Hours
GN 5610	Professional Role			3.00
GN 5999	Master's Project			3.00
GN 7543	Administrative Nurse Lead	der Clinical Experience III*		1.00
			Semester Total:	7.00
		Tota	l Program Units:	99.00

<sup>\*</sup>Course(s) not charged tuition.

# Master of Science in Nursing, Entry Level (MSN-E), Health Systems Leadership – Clinical Nurse Leader Emphasis

See Master of Science in Nursing, Entry Level (MSN-E), Pre-Licensure RN Preparation Curriculum for pre-licensure portion of curriculum.

Second Ye	ear, Spring Semester		
Clinical Fe	e Assessed for Term?	Yes	
Course	Title		Credit Hours
GN 5702	Management Principles a	and Leadership Theories	3.00
GN 5703	Introductory Nursing Info	ormatics	3.00
GN 7550	RN Clinical Seminar I*		1.00
		Semester Total:	7.00
Second Ye	ear, Summer Semester		
Clinical Fe	e Assessed for Term?	No	
Course	Title		<b>Credit Hours</b>
GN 5306	Biostatistics and Epidemi	ology	3.00
GN 5710	Advanced Nurse Leaders	as Educators	3.00
		Semester Total:	6.00
Third Year	r, Fall Semester		
Clinical Fe	e Assessed for Term?	Yes	
Course	Title		<b>Credit Hours</b>
GN 5103	Advanced Health System	S	3.00
GN 5200	Nursing Theory		3.00
GN 5304	Nursing Research I		3.00
GN 7561	CNL Clinical Experience I*		3.00
		Semester Total:	12.00
	r, Spring Semester		
Clinical Fe	e Assessed for Term?	Yes	
Course	Title		Credit Hours
GN 5305	Nursing Research II		1.00
GN 5505	Pharmacotherapeutics ar	nd Technology for Advanced Practice Nurses	3.00
GN 5620	Advanced Health and Pop	oulation Assessment	3.00
GN 7562	CNL Clinical Experience II	*	3.00
		Semester Total:	10.00
	r, Summer Semester		
Clinical Fe	e Assessed for Term?	Yes	
Course	Title		Credit Hours
GN 5610	Professional Role		3.00
GN 5999	Master's Project		3.00
GN 7563	CNL Clinical Experience II	<b> </b> *	3.00
		Semester Total:	9.00
		Total Program Units:	105.00

<sup>\*</sup>Course(s) not charged tuition.

## Master of Science in Nursing, ADN/RN-MSN, Ambulatory Care Emphasis

First Year,	, Fall Term		
Clinical Fe	ee Assessed for Term? No		
Course	Title		Credit Hours
GN 5170	Intro to the Theory and Science of Nursing		3.00
GN 5811	Leadership and Professional Role Transition		4.00
		Semester Total:	7.00
First Year,	, Spring Term	<u> </u>	
Clinical Fe	ee Assessed for Term? Yes		
Course	Title		Credit Hours
GN 5603	Societal and Ethical Issues		1.00
GN 5703	Introductory Nursing Informatics		3.00
GN 5903	Community Health Nursing for the ADN		2.00
GN 5904	Clinical Practicum: Community Health Nursing for th	e ADN*	2.00
		Semester Total:	8.00
First Year,	, Summer Term	<u> </u>	
Clinical Fe	ee Assessed for Term? No		
Course	Title		Credit Hours
GN 5103	Advanced Health Systems		3.00
GN 5306	Biostatistics and Epidemiology		3.00
GN 5606	Complementary and Alternative Therapies		1.00
		Semester Total:	7.00
Second Ye	ear, Fall Term	<u> </u>	
Clinical Fe	ee Assessed for Term? No		
Course	Title		Credit Hours
GN 5200	Nursing Theory	3.00	
GN 5304	Nursing Research I 3.00		
GN 5605	Advanced Human Diversity		1.00
GN 5810	Management Practice Issues		2.00
		Semester Total:	9.00
Second Ye	ear, Spring Term		
Clinical Fe	ee Assessed for Term? No		
Course	Title		<b>Credit Hours</b>
GN 5305	Nursing Research II		1.00
GN 5602	Health Promotion and Disease Prevention		1.00
GN 5620	Advanced Health and Population Assessment		3.00
GN 5820	Professional Practice Issues		2.00
GN 5900	Collaborative Project		2.00
		Semester Total:	9.00
	ear, Summer Term		
	ee Assessed for Term? No		
Course	Title		Credit Hours
GN 5830	Business Practice Issues		2.00
GN 5999	Master's Project		3.00
		Semester Total:	5.00
	Tot	al Program Units:	45.00

## Master of Science in Nursing, ADN/RN-MSN, Ambulatory Care Emphasis, Three-Year Extended

First Year	, Fall Term		
Clinical Fe	e Assessed for Term?	No	
Course	Title		Credit Hours
GN 5170	Intro to the Theory and S	cience of Nursing	3.00
GN 5811	Leadership and Professio	nal Role Transition	4.00
		Semester Total:	7.00
First Year,	Spring Term		
Clinical Fe	e Assessed for Term?	Yes	
Course	Title		Credit Hours
GN 5603	Societal and Ethical Issue	s	1.00
GN 5903	Community Health Nursin	ng for the ADN	2.00
GN 5904	Clinical Practicum: Comm	unity Health Nursing for the ADN*	2.00
		Semester Total:	5.00
First Year,	Summer Term		
Clinical Fe	e Assessed for Term?	No	
Course	Title		Credit Hours
GN 5103	Advanced Health Systems	S	3.00
GN 5606	Complementary and Alte	rnative Therapies	1.00
		Semester Total:	4.00
Second Ye	ear, Fall Term		
Clinical Fe	e Assessed for Term?	No	
Course	Title		Credit Hours
GN 5200	Nursing Theory		3.00
GN 5605	Advanced Human Diversi	ty	1.00
		Semester Total:	4.00
Second Ye	ear, Spring Term		
Clinical Fe	e Assessed for Term?	No	
Course	Title		Credit Hours
GN 5620	Advanced Health and Pop	pulation Assessment	3.00
GN 5703	Introductory Nursing Info	rmatics	3.00
GN 5820	Professional Practice Issu	es	2.00
		Semester Total:	8.00
	ear, Summer Term		
Clinical Fe	e Assessed for Term?	No	
Course	Title		Credit Hours
GN 5306	Biostatistics and Epidemi	ology	3.00
GN 5830	Business Practice Issues		2.00
		Semester Total:	5.00

Third Year, Fall Term					
Clinical Fe	Clinical Fee Assessed for Term? No				
Course	Title		Credit Hours		
GN 5304	Nursing Research I		3.00		
GN 5810	Management Practice Issu	ues	2.00		
		Semester Total:	5.00		
Third Year	r, Spring Term				
Clinical Fe	e Assessed for Term?	No			
Course	Title		Credit Hours		
GN 5305	Nursing Research II		1.00		
GN 5602	Health Promotion and Dis	ease Prevention	1.00		
GN 5900	Collaborative Project		2.00		
		Semester Total:	4.00		
Third Year	r, Summer Term				
Clinical Fe	e Assessed for Term?	No			
Course	Title		Credit Hours		
GN 5999	Master's Project		3.00		
		Semester Total:	3.00		
Total Program Units: 45.00					

<sup>\*</sup>Course(s) not charged tuition.

# Master of Science in Nursing, ADN/RN-MSN, Health Systems Leadership – Administrative Nurse Leader Emphasis

First Year	, Fall Term		
Clinical Fe	ee Assessed for Term?	No	
Course	Title		Credit Hours
GN 5170	Intro to the Theory and S	3.00	
GN 5811	Leadership and Professio	nal Role Transition	4.00
	,	Semester Total:	7.00
First Year	, Spring Term		
Clinical Fe	ee Assessed for Term?	Yes	
Course	Title		Credit Hours
GN 5702	Management Principles a	nd Leadership Theories	3.00
GN 5903	Community Health Nursin	ng for the ADN	2.00
GN 5904	Clinical Practicum: Comm	unity Health Nursing for the ADN*	2.00
		Semester Total:	7.00
First Year,	, Summer Term		
Clinical Fe	e Assessed for Term?	No	
Course	Title		<b>Credit Hours</b>
GN 5306	Biostatistics and Epidemi	ology	3.00
GN 5710	Advanced Nurse Leaders	as Educators	3.00
		Semester Total:	6.00
Second Ye	ear, Fall Term		
Clinical Fe	ee Assessed for Term?	Yes	
Course	Title		Credit Hours
GN 5103	Advanced Health Systems	3.00	
GN 5200	Nursing Theory	3.00	
GN 5304	Nursing Research I		3.00
GN 7541	ANL Clinical Experience I*	•	1.00
		Semester Total:	10.00
	ear, Spring Term		
Clinical Fe	e Assessed for Term?	Yes	
Course	Title		Credit Hours
GN 5305	0		1.00
	Advanced Health and Pop		3.00
GN 5703	Introductory Nursing Info	rmatics	3.00
GN 5704	Accounting and Finance		3.00
GN 7542	ANL Clinical Experience II		1.00
		Semester Total:	11.00
	ear, Summer Term		
	e Assessed for Term?	Yes	
Course	Title		Credit Hours
GN 5610	Professional Role		3.00
GN 5999	Master's Project	3.00	
GN 7543	ANL Clinical Experience II	*	1.00
		Semester Total:	7.00
	t charged tuition	Total Program Units:	48.00

<sup>\*</sup>Course(s) not charged tuition.

# Master of Science in Nursing, ADN/RN-MSN, Health Systems Leadership – Administrative Nurse Leader Emphasis, Three-Year Extended

First Year	, Fall Term				
Clinical Fe	ee Assessed for Term?	No			
Course	Title		Credit Hours		
GN 5170	Intro to the Theory and S	cience of Nursing	3.00		
GN 5811	Leadership and Professio	nal Role Transition	4.00		
	Semester Total:				
	, Spring Term				
Clinical Fe	ee Assessed for Term?	Yes			
Course	Title		Credit Hours		
GN 5903	Community Health Nursi		2.00		
GN 5904	Clinical Practicum: Comm	nunity Health Nursing for the ADN*	2.00		
		Semester Total:	4.00		
	, Summer Term	1			
	ee Assessed for Term?	No			
Course	Title		Credit Hours		
GN 5710	Advanced Nurse Leaders	and Educators	3.00		
		Semester Total:	3.00		
	ear, Fall Term				
	ee Assessed for Term?	No			
Course	Title		Credit Hours		
GN 5103	Advanced Health System	S	3.00		
GN 5200	Nursing Theory		3.00		
		Semester Total:	6.00		
	ear, Spring Term	1			
	ee Assessed for Term?	No	0 1:-11		
Course	Title		Credit Hours		
GN 5702	Management Principles a	•	3.00		
GN 5703	Introductory Nursing Informatics		3.00		
Control	C	Semester Total:	6.00		
	ear, Summer Term ee Assessed for Term?	No.			
		No	Crodit Harris		
Course	Title	ala m.	Credit Hours		
GN 5306	Biostatistics and Epidemi	ology	3.00		
GN 5610	Professional Role	Compativities	3.00		
		Semester Total:	6.00		

Health Systems Leadership – Administrative Nurse Leader, Three-Year Extended, Continued

Third Yea	Third Year, Fall Term			
Clinical Fe	Clinical Fee Assessed for Term? Yes			
Course	Title		Credit Hours	
GN 5304	Nursing Research I		3.00	
GN 7541	ANL Clinical Experience I*		1.00	
		Semester Tot	al: 4.00	
Third Yea	r, Spring Term			
Clinical Fe	ee Assessed for Term?	Yes		
Course	Title		Credit Hours	
GN 5305	Nursing Research II		1.00	
GN 5620	Advanced Health and Pop	ulation Assessment	3.00	
GN 5704	Accounting and Finance		3.00	
GN 7542	ANL Clinical Experience II*	•	1.00	
		Semester Tot	al: 8.00	
Third Yea	r, Summer Term			
Clinical Fe	e Assessed for Term?	Yes		
Course	Title		Credit Hours	
GN 5999	Master's Project		3.00	
GN 7543	ANL Clinical Experience III	*	1.00	
	Semester Total:			
		Total Program Uni	ts: 48.00	

<sup>\*</sup>Course(s) not charged tuition.

# Master of Science in Nursing, ADN/RN-MSN, Health Systems Leadership – Clinical Nurse Leader Emphasis

First Year,	Fall Term		
Clinical Fe	e Assessed for Term? No		
Course	Title		Credit Hours
GN 5170	Intro to the Theory and Science	of Nursing	3.00
GN 5631	Advanced Pathophysiology I		1.00
GN 5811	Leadership and Professional Ro	le Transition	4.00
		Semester Total:	8.00
First Year,	Spring Term		
Clinical Fe	e Assessed for Term? Yes		
Course	Title		Credit Hours
GN 5702	Management Principles and Lea	adership Theories	3.00
GN 5632	Advanced Pathophysiology II		1.00
GN 5903	Community Health Nursing for	the ADN	2.00
GN 5904	Clinical Practicum: Community	Health Nursing for the ADN*	2.00
		Semester Total:	8.00
First Year,	Summer Term		
Clinical Fe	e Assessed for Term? No		
Course	Title		Credit Hours
GN 5306	Biostatistics and Epidemiology		3.00
GN 5633	Advanced Pathophysiology III		1.00
GN 5710	Advanced Nurse Leaders as Educators		3.00
Semester Total:			7.00
	ar, Fall Term		
-	e Assessed for Term? Yes		
Course	Title		Credit Hours
GN 5103	Advanced Health Systems		3.00
GN 5200	Nursing Theory		3.00
GN 5304	Nursing Research I		3.00
GN 7561	CNL Clinical Experience I*		3.00
		Semester Total:	12.00
	ar, Spring Term		
1	e Assessed for Term? Yes		
Course	Title		Credit Hours
GN 5305	Nursing Research II		1.00
GN 5505 Pharmacotherapeutics and Technology for Advanced Practice Nurses		3.00	
GN 5620 Advanced Health and Population Assessment		3.00	
GN 5703	Introductory Nursing Information	CS	3.00
GN 7562	CNL Clinical Experience II*		3.00
		Semester Total:	13.00

## Health Systems Leadership – Clinical Nurse Leader, Continued

Second Ye	Second Year, Summer Term				
Clinical Fe	Clinical Fee Assessed for Term? Yes				
Course	Title	<b>Credit Hours</b>			
GN 5610	Professional Role	3.00			
GN 5999	Master's Project	3.00			
GN 7563	CNL Clinical Experience III*	3.00			
	Semester Total:	9.00			
	57.00				

<sup>\*</sup>Course(s) not charged tuition.

# Master of Science in Nursing, ADN/RN-MSN, Health Systems Leadership – Clinical Nurse Leader Emphasis, Three-Year Extended

First Year	, Fall Term		
Clinical Fe	e Assessed for Term?	No	
Course	Title		Credit Hours
GN 5170	Intro to the Theory and So	cience of Nursing	3.00
GN 5631	Advanced Pathophysiolog	ду І	1.00
GN 5811	Leadership and Profession	nal Role Transition	4.00
		Semester Total:	8.00
First Year, Spring Term			
Clinical Fe	e Assessed for Term?	Yes	
Course	Title		Credit Hours
GN 5632	Advanced Pathophysiolog	gy II	1.00
GN 5903	Community Health Nursir	ng for the ADN	2.00
GN 5904	Clinical Practicum: Comm	unity Health Nursing for the ADN*	2.00
		Semester Total:	5.00
	, Summer Term		
Clinical Fe	e Assessed for Term?	No	
Course	Title		Credit Hours
GN 5633	Advanced Pathophysiolog	gy III	1.00
GN 5710	Advanced Nurse Leaders	as Educators	3.00
Semester Total:			4.00
Second Ye	ear, Fall Term		
Clinical Fe	e Assessed for Term?	No	
Course	Title		Credit Hours
GN 5103	Advanced Health Systems	5	3.00
GN 5200	Nursing Theory		3.00
		Semester Total:	6.00
	ear, Spring Term		
	e Assessed for Term?	No	
Course	Title		Credit Hours
GN 5505	Pharmacotherapeutics an	nd Technology for Advanced Practice Nurses	3.00
GN 5620	Advanced Health and Population Assessment		3.00
GN 5702	Management Principles a	nd Leadership Theories	3.00
		Semester Total:	9.00
	ear, Summer Term		
	e Assessed for Term?	No	
Course	Title		Credit Hours
GN 5306	Biostatistics and Epidemic	ology	3.00
GN 5610	Professional Role		3.00
		Semester Total:	6.00

<sup>\*</sup>Course(s) not charged tuition.

Health Systems Leadership —Clinical Nurse Leader, Three-Year Extended, Continued

Third Yea	Third Year, Fall Term				
Clinical Fe	Clinical Fee Assessed for Term? Yes				
Course	Title		<b>Credit Hours</b>		
GN 5304	Nursing Research I		3.00		
GN 7561	CNL Clinical Experience I*		3.00		
		Semester Total:	6.00		
Third Yea	r, Spring Term				
Clinical Fe	e Assessed for Term?	Yes			
Course	Title		Credit Hours		
GN 5305	Nursing Research II		1.00		
GN 5703	Introductory Nursing Info	rmatics	3.00		
GN 7562	CNL Clinical Experience II*	k	3.00		
		Semester Total:	7.00		
Third Yea	r, Summer Term				
Clinical Fe	e Assessed for Term?	Yes			
Course	Title		Credit Hours		
GN 5999	Master's Project		3.00		
GN 7563	CNL Clinical Experience III	*	3.00		
		Semester Total:	6.00		
		Total Program Units:	57.00		

<sup>\*</sup>Course(s) not charged tuition.

## Master of Science in Nursing, BSN/RN-MSN, Ambulatory Care Emphasis

Clinical Fee Assessed for Term?  Course Title  GN 5103 Advanced Health Systems  GN 5200 Nursing Theory  GN 5605 Advanced Human Diversity	3.00 3.00 1.00
GN 5103 Advanced Health Systems GN 5200 Nursing Theory	3.00 3.00 1.00
GN 5200 Nursing Theory	3.00 1.00
GN 5200 Nursing Theory	1.00
	4.00
GN 5631 Advanced Pathophysiology I	1.00
Semester Total:	8.00
First Year, Spring Term	
Clinical Fee Assessed for Term? No	
Course Title	<b>Credit Hours</b>
GN 5602 Health Promotion and Disease Prevention	1.00
GN 5603   Societal and Ethical Issues	1.00
GN 5632 Advanced Pathophysiology II	1.00
GN 5703 Introductory Nursing Informatics	3.00
Semester Total:	6.00
First Year, Summer Term	
Clinical Fee Assessed for Term? No	
Course Title	Credit Hours
GN 5306 Biostatistics and Epidemiology	3.00
GN 5606 Complementary and Alternative Therapies	1.00
GN 5633 Advanced Pathophysiology III	1.00
Semester Total:	5.00
Second Year, Fall Term	
Clinical Fee Assessed for Term? No	
Course Title	<b>Credit Hours</b>
GN 5304 Nursing Research I	3.00
GN 5810 Management Practice Issues	2.00
Semester Total:	5.00
Second Year, Spring Term	
Clinical Fee Assessed for Term? No	
Course Title	Credit Hours
GN 5305 Nursing Research II	1.00
GN 5620 Advanced Health and Population Assessment	3.00
GN 5820 Professional Practice Issues	2.00
GN 5900 Collaborative Project	2.00
Semester Total:	8.00
Second Year, Summer Term	
Clinical Fee Assessed for Term? No	
Course Title	<b>Credit Hours</b>
GN 5830 Business Practice Issues	2.00
GN 5999 Master's Project	3.00
Semester Total:	5.00
Total Program Units:	37.00

## Master of Science in Nursing, BSN/RN-MSN, Ambulatory Care Emphasis, Three-Year Extended

First Year	, Fall Term		
Clinical Fe	ee Assessed for Term?	No	
Course	Title		Credit Hours
GN 5200	Nursing Theory		3.00
GN 5631	Advanced Pathophysiolog	1.00	
		Semester Total:	4.00
First Year	, Spring Term		
Clinical Fe	e Assessed for Term?	No	
Course	Title		Credit Hours
GN 5603	Societal and Ethical Issue	S	1.00
GN 5632	Advanced Pathophysiolog	gy II	1.00
GN 5703	Introductory Nursing Info	ormatics	3.00
		Semester Total:	5.00
First Year	, Summer Term		
Clinical Fe	ee Assessed for Term?	No	
Course	Title		Credit Hours
GN 5103	Advanced Health Systems	s	3.00
GN 5606	Complementary and Alte	rnative Therapies	1.00
GN 5633	Advanced Pathophysiolog	gy III	1.00
	Semester Total:		
Second Ye	ear, Fall Term		
Clinical Fe	e Assessed for Term?	No	
Course	Title		<b>Credit Hours</b>
GN 5605	Advanced Human Diversi	ty	1.00
GN 5810	Management Practice Iss	ues	2.00
		Semester Total:	3.00
Second Ye	ear, Spring Term		
Clinical Fe	ee Assessed for Term?	No	
Course	Title		<b>Credit Hours</b>
GN 5620	Advanced Health and Pop	oulation Assessment	3.00
GN 5820	Professional Practice Issu	2.00	
		Semester Total:	5.00
Second Ye	ear, Summer Term		
Clinical Fe	ee Assessed for Term?	No	
Course	Title		Credit Hours
GN 5306	Biostatistics and Epidemi	ology	3.00
GN 5830	Business Practice Issues		2.00
		Semester Total:	5.00

## Ambulatory Care Emphasis, Three-Year Extended, Continued

Third Year, Fall Term				
Clinical Fee Assessed for Term? No				
Course	Title		Credit Hours	
GN 5304	Nursing Research I		3.00	
		Semester Total:	3.00	
Third Year	r, Spring Term			
Clinical Fe	e Assessed for Term?	No		
Course	Title		Credit Hours	
GN 5305	Nursing Research II		1.00	
GN 5602	Health Promotion and Dis	sease Prevention	1.00	
GN 5900	Collaborative Project		2.00	
		Semester Total:	4.00	
Third Year	r, Summer Term			
Clinical Fe	e Assessed for Term?	No		
Course	Title	·	Credit Hours	
GN 5999	Master's Project		3.00	
		Semester Total:	3.00	
	Total Program Units: 37.00			

# Master of Science in Nursing, BSN/RN-MSN, Health Systems Leadership – Administrative Nurse Leader Emphasis

First Year	, Fall Term			
Clinical Fe	ee Assessed for Term?	No		
Course	Title		Credit Hours	
GN 5200	Nursing Theory		3.00	
GN 5811	Leadership and Profession	nal Role Transition	4.00	
		Semester Total:	7.00	
First Year	, Spring Term			
Clinical Fe	ee Assessed for Term?	No		
Course	Title		Credit Hours	
GN 5702	Management Principles a	nd Leadership Theories	3.00	
GN 5703	Introductory Nursing Info	rmatics	3.00	
		Semester Total:	6.00	
	, Summer Term	,		
Clinical Fe	ee Assessed for Term?	No		
Course	Title		Credit Hours	
GN 5306	Biostatistics and Epidemic	ology	3.00	
GN 5710	Advanced Nurse Leaders		3.00	
		Semester Total:	6.00	
	ear, Fall Term			
	ee Assessed for Term?	Yes		
Course	Title		Credit Hours	
GN 5103	Advanced Health Systems	3.00		
GN 5304	Nursing Research I	3.00		
GN 7541	ANL Clinical Experience I*	1.00		
		Semester Total:	7.00	
	ear, Spring Term			
	ee Assessed for Term?	Yes		
Course	Title		Credit Hours	
GN 5305	Nursing Research II		1.00	
GN 5620	Advanced Health and Pop	pulation Assessment	3.00	
GN 5704	Accounting and Finance		3.00	
GN 7542	ANL Clinical Experience II		1.00	
		Semester Total:	8.00	
	Second Year, Summer Term			
	ee Assessed for Term?	Yes	0 11	
Course	Title		Credit Hours	
GN 5610	Professional Role		3.00	
GN 5999	Master's Project (Independent) 3.00			
GN 7543	ANL Clinical Experience III		1.00	
		Semester Total:	7.00	
		Total Program Units:	41.00	

<sup>\*</sup>Course(s) not charged tuition.

# Master of Science in Nursing, BSN/RN-MSN, Health Systems Leadership – Administrative Nurse Leader Emphasis, Three-Year Extended

First Year	, Fall Term			
Clinical Fe	ee Assessed for Term?	No		
Course	Title			Credit Hours
GN 5811	Leadership and Profession	al Role Transition		4.00
		Se	emester Total:	4.00
First Year,	, Spring Term			
Clinical Fe	ee Assessed for Term?	No		
Course	Title			<b>Credit Hours</b>
GN 5702	Management Principles ar	nd Leadership Theories		3.00
		Se	emester Total:	3.00
First Year,	, Summer Term			
Clinical Fe	e Assessed for Term?	No		
Course	Title			<b>Credit Hours</b>
GN 5306	Biostatistics and Epidemic	logy		3.00
		Se	emester Total:	3.00
	ear, Fall Term			
Clinical Fe	ee Assessed for Term?	No		
Course	Title			Credit Hours
GN 5103	Advanced Health Systems			3.00
GN 5200	Nursing Theory			3.00
		Se	emester Total:	6.00
	ear, Spring Term			
Clinical Fe	e Assessed for Term?	No		
Course	Title			Credit Hours
GN 5620	Advanced Health and Pop			3.00
GN 5703	Introductory Nursing Infor			3.00
		Se	emester Total:	6.00
Second Year, Summer Term				
	e Assessed for Term?	No	,	
Course	Title			Credit Hours
GN 5610				3.00
GN 5710	Advanced Nurse Leaders a			3.00
		Se	emester Total:	6.00

Health Systems Leadership – Administrative Nurse Leader Emphasis, Three-Year Extended, Continued

Third Year, Fall Term					
Clinical Fe	Clinical Fee Assessed for Term? Yes				
Course	Title		Credit Hours		
GN 5304	Nursing Research I		3.00		
GN 7541	ANL Clinical Experience I*		1.00		
		Semester Total:	4.00		
Third Yea	r, Spring Term				
Clinical Fe	ee Assessed for Term?	Yes			
Course	Title		Credit Hours		
GN 5305	Nursing Research II		1.00		
GN 5704	Accounting and Finance		3.00		
GN 7542	ANL Clinical Experience II'	*	1.00		
		Semester Total:	5.00		
Third Yea	r, Summer Term				
Clinical Fe	ee Assessed for Term?	Yes			
Course	Title		<b>Credit Hours</b>		
GN 5999	Master's Project		3.00		
GN 7543	ANL Clinical Experience III	*	1.00		
		Semester Total:	4.00		
		Total Program Units:	41.00		

<sup>\*</sup>Course(s) not charged tuition.

# Master of Science in Nursing, BSN/RN-MSN, Health Systems Leadership - Clinical Nurse Leader Emphasis

First Vear	, Fall Term		
	e Assessed for Term?	No	
Course	Title	110	Credit Hours
GN 5200	Nursing Theory		3.00
GN 5631	Advanced Pathophysiology	(1	1.00
GN 5811	Leadership and Professiona		4.00
GIN 2011	Leadership and Professions	Semester Total:	8.00
First Voor	, Spring Term	Semester rotal.	8.00
		No	
Course	Title	110	Credit Hours
GN 5632	Advanced Pathophysiology	, II	1.00
GN 5702	Management Principles an		3.00
GN 5702	Introductory Nursing Infor	·	3.00
GIN 5705	introductory Nursing infor	Semester Total:	<b>7.00</b>
Eirct Voor	, Summer Term	Semester rotal.	7.00
		No	
Course	Title	140	Credit Hours
GN 5306	Biostatistics and Epidemiol	O.G.V.	3.00
GN 5633	Advanced Pathophysiology	-	1.00
GN 5710	Advanced Pathophysiology Advanced Nurse Leaders as		
GN 5/10	Advanced Nurse Leaders as		3.00
Second Ve	ear, Fall Term	Semester Total:	7.00
		Yes	
Course	Title	163	Credit Hours
GN 5103	Advanced Health Systems		3.00
GN 5304	Nursing Research I		3.00
GN 7561	CNL Clinical Experience I*		3.00
GIN 7301	CIVE CHILICAL EXPERIENCE I	Semester Total:	9.00
Second Va	ear, Spring Term	Semester rotal.	9.00
		Yes	
Course	Title	103	Credit Hours
GN 5305	Nursing Research II		1.00
GN 5505	_	Technology for Advanced Practice Nurses	3.00
GN 5620			3.00
GN 7562	Advanced Health and Population Assessment  CNL Clinical Experience II*		
GIV 7302	CIVE CHINEAU EXPENSION	Semester Total:	3.00 <b>10.00</b>
Second Ve	ear, Summer Term	Semester rotal.	10.00
		Yes	
Course	Title	1.00	Credit Hours
GN 5610	Professional Role		3.00
GN 5999	Master's Project (Independ	dent)	3.00
GN 7563	CNL Clinical Experience III*	·	3.00
2.1.7505		Semester Total:	9.00
		Total Program Units:	50.00
		Total Flogram Silics:	30.00

# Master of Science in Nursing, BSN/RN-MSN, Health Systems Leadership – Clinical Nurse Leader Emphasis, Three-Year Extended

First Year	Fall Term		
Clinical Fe	e Assessed for Term? N	lo	
Course	Title		Credit Hours
GN 5631	Advanced Pathophysiology I	1.00	
GN 5811	Leadership and Professional	4.00	
		Semester Total:	5.00
	Spring Term		
		lo	
Course	Title		Credit Hours
GN 5632	Advanced Pathophysiology II	I	1.00
GN 5702	Management Principles and	Leadership Theories	3.00
		Semester Total:	4.00
	Summer Term		
Clinical Fe		lo	
Course	Title		Credit Hours
GN 5633	Advanced Pathophysiology II	II	1.00
GN 5710	Advanced Nurse Leaders as E	Educators	3.00
		Semester Total:	4.00
	ear, Fall Term		
Clinical Fe	e Assessed for Term? N	lo	
Course	Title		Credit Hours
GN 5103	Advanced Health Systems	3.00	
GN 5200	Nursing Theory		3.00
		Semester Total:	6.00
	ear, Spring Term		
Clinical Fe	e Assessed for Term? N	lo	
Course	Title		Credit Hours
GN 5505	Pharmacotherapeutics and T	Technology for Advanced Practice Nurses	3.00
GN 5620	Advanced Health and Population Assessment		3.00
		Semester Total:	6.00
	ear, Summer Term		
Clinical Fe	e Assessed for Term? N	lo	
Course	Title		Credit Hours
GN 5306	Biostatistics and Epidemiolog	gy	3.00
GN 5610	Professional Role		3.00
		Semester Total:	6.00

Health Systems Leadership – Clinical Nurse Leader Emphasis, Three-Year Extended, Continued

Third Year, Fall Term				
Clinical Fe				
Course	Title		<b>Credit Hours</b>	
GN 5304	Nursing Research I		3.00	
GN 7561	CNL Clinical Experience I*		3.00	
		Semester Total:	6.00	
Third Yea	r, Spring Term			
Clinical Fe	Clinical Fee Assessed for Term? Yes			
Course	Title		<b>Credit Hours</b>	
GN 5305	Nursing Research II		1.00	
GN 5703	Introductory Nursing Informatics		3.00	
GN 7562	CNL Clinical Experience II*		3.00	
Semester Total:			7.00	
Third Yea	Third Year, Summer Term			
Clinical Fe	ee Assessed for Term?	Yes		
Course	Title		<b>Credit Hours</b>	
GN 5999	Master's Project		3.00	
GN 7563	CNL Clinical Experience III	*	3.00	
		Semester Total:	6.00	
Total Program Units:			50.00	

<sup>\*</sup>Course(s) not charged tuition.

## Master of Science in Nursing, Family Nurse Practitioner (MSN/FNP)

First Year	, Fall Term		
Clinical Fe	ee Assessed for Term?	Yes	
Course	Title		Credit Hours
GN 5401	Primary Care Manageme	nt I	2.00
GN 5601	Advanced Physical Assess	ment	3.00
GN 5631	Advanced Pathophysiolog	ду І	1.00
GN 5641	Clinical Applications I		2.00
GN 7570	Clinical Experience*	1.00	
		Semester Total:	9.00
First Year	, Spring Term		
Clinical Fe	e Assessed for Term?	Yes	
Course	Title		Credit Hours
GN 5402	Primary Care Manageme	nt II	2.00
GN 5501	Pharmacology I		2.00
GN 5602	Health Promotion and Dis	sease Prevention	1.00
GN 5603	Societal and Ethical Issue	S	1.00
GN 5632	Advanced Pathophysiolog	gy II	1.00
GN 5642	Clinical Applications II		2.00
GN 7570	Clinical Experience*		2.00
		Semester Total:	11.00
	, Summer Term		
Clinical Fe	e Assessed for Term?	Yes	
Course	Title		Credit Hours
GN 5403	Primary Care Management III		2.00
GN 5502	Pharmacology II		2.00
GN 5606	Complementary and Alternative Therapies		1.00
GN 5633	Advanced Pathophysiolog	gy III	1.00
GN 5643	Clinical Applications III		2.00
GN 5690	Clinical Comprehensive E	valuation I	1.00
GN 7570	Clinical Experience*		2.00
		Semester Total:	11.00
Second Ye	ear, Fall Term		
Clinical Fe	e Assessed for Term?	Yes	
Course	Title		Credit Hours
GN 5200	Nursing Theory		3.00
GN 5304	Nursing Research I		3.00
GN 5605	Human Diversity		1.00
GN 5810	Management Practice Issues		2.00
GN 7570	Clinical Experience*		3.00
		Semester Total:	12.00

<sup>\*</sup>Course(s) not charged tuition.

## Master of Science in Nursing/Family Nurse Practitioner (MSN/FNP) Continued

Second Ye	Second Year, Spring Term				
Clinical Fe	Clinical Fee Assessed for Term? Yes				
Course	Title	<b>Credit Hours</b>			
GN 5103	Advanced Health Systems	3.00			
GN 5305	Nursing Research II	1.00			
GN 5820	Professional Practice Issues	2.00			
GN 5900	Collaborative Project	2.00			
GN 7570	Clinical Experience*	3.00			
	Semester Total:				
Second Ye	ear, Summer Term				
Clinical Fe	ee Assessed for Term? Yes				
Course	Title	<b>Credit Hours</b>			
GN 5691	Clinical Comprehensive Evaluation II	1.00			
GN 5830	Business Practice Issues	2.00			
GN 5990	APN Master's Project	3.00			
GN 7570	Clinical Experience*	4.00			
	Semester Total:				
	Total Program Units:				

<sup>\*</sup>Course(s) not charged tuition.

## Master of Science in Nursing, Family Nurse Practitioner (MSN/FNP), Three-Year Extended

First Year,	, Fall Term		
Clinical Fe	e Assessed for Term? Yes		
Course	Title		Credit Hours
GN 5401	Primary Care Management I	2.00	
GN 5601	Advanced Physical Assessment		3.00
GN 5631	Advanced Pathophysiology I		1.00
GN 5641	Clinical Applications I		2.00
GN 7570	Clinical Experience*		1.00
		Semester Total:	9.00
First Year,	Spring Term	·	
Clinical Fe	e Assessed for Term? Yes		
Course	Title		Credit Hours
GN 5402	Primary Care Management II		2.00
GN 5501	Pharmacology I		2.00
GN 5602	Health Promotion and Disease Preve	ntion	1.00
GN 5632	Advanced Pathophysiology II		1.00
GN 5642	Clinical Applications II		2.00
GN 7570	Clinical Experience*		1.00
		Semester Total:	9.00
First Year,	, Summer Term	·	
Clinical Fe	e Assessed for Term? Yes		
Course	Title		Credit Hours
GN 5403	Primary Care Management III	2.00	
GN 5502	Pharmacology II		2.00
GN 5633	Advanced Pathophysiology III		1.00
GN 5643	Clinical Applications III	2.00	
GN 5690	Clinical Comprehensive Evaluation I**		1.00
GN 7570	Clinical Experience*		1.00
		Semester Total:	9.00
Second Ye	ear, Fall Term	·	
Clinical Fe	e Assessed for Term? Yes		
Course	Title		Credit Hours
GN 5605	Human Diversity		1.00
GN 5810	Management Practice Issues		2.00
GN 7570	Clinical Experience*		2.00
		Semester Total:	5.00
Second Ye	ear, Spring Term		
Clinical Fe	e Assessed for Term? Yes		
Course	Title		Credit Hours
GN 5603	Societal and Ethical Issues		1.00
GN 5900	Collaborative Project 2.0		
GN 7570	Clinical Experience*		2.00
		Semester Total:	5.00

Second Ye	ear, Summer Term		
Clinical Fe	e Assessed for Term?	Yes	
Course	Title		Credit Hours
GN 5103	Advanced Health Systems	;	3.00
GN 5606	Complementary and Alter	rnative Therapies	1.00
GN 5691	Clinical Comprehensive Ev	valuation II**	1.00
GN 5830	Business Practice Issues		2.00
GN 7570	Clinical Experience*		2.00
		Semester Total:	9.00
Third Year	r, Fall Term		
Clinical Fe	e Assessed for Term?	Yes	
Course	Title		<b>Credit Hours</b>
GN 5200	Nursing Theory		3.00
GN 5304	Nursing Research I		3.00
GN 7570	Clinical Experience*		2.00
	Semester Total:		
Third Year	r, Spring Term		
Clinical Fe	e Assessed for Term?	Yes	
Course	Title		<b>Credit Hours</b>
GN 5305	Nursing Research II		1.00
GN 5820	Professional Practice Issue	es	2.00
GN 7570	Clinical Experience*		2.00
		Semester Total:	5.00
Third Year	r, Summer Term		
Clinical Fe	e Assessed for Term?	Yes	
Course	Title		<b>Credit Hours</b>
GN 5692	Clinical Comprehensive Ev	valuation III**	1.00
GN 5990	APN Master's Project		3.00
GN 7570	Clinical Experience*		2.00
	Semester Total:		
		Total Program Units:	65.00

<sup>\*</sup>Course(s) not charged tuition.

<sup>\*\*</sup>Students who extend the FNP year will be required to register for additional units of Clinical Comprehensive Evaluation at the end of each additional year.

## Master of Science in Nursing, Completion

First Year	First Year, Fall Term				
Clinical Fe	Clinical Fee Assessed for Term? No				
Course	Title		<b>Credit Hours</b>		
GN 5103	Advanced Health Systems		3.00		
GN 5200	Nursing Theory		3.00		
GN 5304	Nursing Research I		3.00		
GN 5810	Management Practice Issues	S	2.00		
		Semester Total:	11.00		
	, Spring Term				
Clinical Fe	e Assessed for Term? N	No .			
Course	Title		Credit Hours		
GN 5305	Nursing Research II		1.00		
GN 5501	Pharmacology I*		2.00		
GN 5603	Societal and Ethical Issues		1.00		
GN 5820	Professional Practice Issues		2.00		
GN 5900	Collaborative Project		2.00		
		Semester Total:	8.00		
	, Summer Term				
Clinical Fe		No			
Course	Title		Credit Hours		
GN 5306	Biostatistics and Epidemiology		3.00		
GN 5502	Pharmacology II*		2.00		
GN 5830	Business Practice Issues		2.00		
GN 5990	APN Master's Project		3.00		
		Semester Total:	10.00		
		Total Program Units:	29.00		

<sup>\*</sup>Pharmacology courses may be waived if Advanced Practicing Nurse has an active furnishing license.

## Master of Science in Nursing, Completion, Two-Year Extended

First Year	, Fall Term		
Clinical Fe	ee Assessed for Term?	No	
Course	Title		Credit Hours
GN 5103	Advanced Health System	s	3.00
GN 5200	Nursing Theory		3.00
		Semester Total:	6.00
First Year	, Spring Term		
Clinical Fe	ee Assessed for Term?	No	
Course	Title		Credit Hours
GN 5501	Pharmacology I*		2.00
GN 5603	Societal and Ethical Issue	S	1.00
GN 5900	Collaborative Project		2.00
		Semester Total:	5.00
First Year	, Summer Term		
Clinical Fe	ee Assessed for Term?	No	
Course	Title		Credit Hours
GN 5306	Biostatistics and Epidemi	ology	3.00
GN 5502	Pharmacology II*		2.00
		Semester Total:	5.00
Second Ye	ear, Fall Term		
Clinical Fe	ee Assessed for Term?	No	
Course	Title		Credit Hours
GN 5304	Nursing Research I		3.00
GN 5810	Management Practice Iss	ues	2.00
		Semester Total:	5.00
Second Ye	ear, Spring Term		
Clinical Fe	ee Assessed for Term?	No	
Course	Title		Credit Hours
GN 5305	Nursing Research II		1.00
GN 5820	Professional Practice Issu	es	2.00
		Semester Total:	3.00
Second Ye	ear, Summer Term		
Clinical Fe	ee Assessed for Term?	No	
Course	Title		Credit Hours
GN 5830	Business Practice Issues		2.00
GN 5990	APN Master's Project		3.00
		Semester Total:	5.00
		Total Program Units:	29.00

<sup>\*</sup>Pharmacology courses may be waived if Advanced Practicing Nurse has an active furnishing license.

#### Post-Master's FNP

First Year	, Fall Term			
Clinical Fe	ee Assessed for Term?	Yes		
Course	Title			Credit Hours
GN 5401	Primary Care Managemer	t I		2.00
GN 5601	Advanced Physical Assess	ment		3.00
GN 5605	Human Diversity			1.00
GN 5631	Advanced Pathophysiolog	y I		1.00
GN 5641	Clinical Applications I			2.00
GN 7570	Clinical Experience*			5.00
GN 5810	Management Practice Iss	ues (Elective)		2.00
			Semester Total:	14.00 – 16.00
	, Spring Term			
Clinical Fe	ee Assessed for Term?	Yes		
Course	Title			Credit Hours
GN 5402	Primary Care Managemer	it II		2.00
GN 5501	Pharmacology I			2.00
GN 5602	Health Promotion and Dis	ease Prevention		1.00
GN 5603	Societal and Ethical Issues			1.00
GN 5632	Advanced Pathophysiolog	y II		1.00
GN 5642	Clinical Applications II		2.00	
GN 5820	Professional Practice Issu	es		2.00
GN 7570	Clinical Experience*			5.00
			Semester Total:	16.00
First Year	, Summer Term			
Clinical Fe	ee Assessed for Term?	Yes		
Course	Title			Credit Hours
GN 5403	Primary Care Managemer	it III		2.00
GN 5502	Pharmacology II			2.00
GN 5606	Complementary and Alternative Therapies			1.00
GN 5633	Advanced Pathophysiology III			1.00
GN 5643	Clinical Applications III			2.00
GN 5690	Clinical Comprehensive Ev	aluation I**		1.00
GN 7570	Clinical Experience*			5.00
GN 5830	Business Practice Issues (	Elective)		2.00
			Semester Total:	14.00 – 16.00
		To	otal Program Units:	44.00 - 48.00

<sup>\*</sup> Course(s) not charged tuition.

<sup>\*\*</sup>Students who extend the FNP year will be required to register for additional units of Clinical Comprehensive Evaluation at the end of each additional year.

## Post-Master's FNP, Two-Year Extended

First Year,	First Year, Fall Term				
Clinical Fe	Clinical Fee Assessed for Term? Yes				
Course	Title		Credit Hours		
GN 5401	Primary Care Managemer	nt I	2.00		
GN 5601	Advanced Physical Assess	ment	3.00		
GN 5631	Advanced Pathophysiolog	gy I	1.00		
GN 5641	Clinical Applications I		2.00		
GN 7570	Clinical Experience*		1.00		
		Semester Total:	9.00		
	Spring Term				
Clinical Fe	e Assessed for Term?	Yes			
Course	Title		<b>Credit Hours</b>		
GN 5402	Primary Care Managemer	nt II	2.00		
GN 5501	Pharmacology I		2.00		
GN 5602	Health Promotion and Disease Prevention		1.00		
GN 5632	Advanced Pathophysiology II		1.00		
GN 5642	Clinical Applications II		2.00		
GN 7570	Clinical Experience*		1.00		
		Semester Total:	9.00		
<u> </u>	, Summer Term				
Clinical Fe	e Assessed for Term?	Yes			
Course	Title		Credit Hours		
GN 5403	Primary Care Managemer	nt III	2.00		
GN 5502	Pharmacology II		2.00		
GN 5633	Advanced Pathophysiolog	gy III	1.00		
GN 5643	Clinical Applications III		2.00		
GN 5690	Clinical Comprehensive Ev	valuation I**	1.00		
GN 7570	Clinical Experience*		1.00		
		Semester Total:	9.00		

Second Ye	Second Year, Fall Term				
Clinical Fe	e Assessed for Term?	Yes			
Course	Title			<b>Credit Hours</b>	
GN 5605	Human Diversity			1.00	
GN 7570	Clinical Experience*			5.00	
GN 5810	Management Practice Issu	ues (Elective)		2.00	
			Semester Total:	6.00 - 8.00	
Second Ye	ear, Spring Term				
Clinical Fe	e Assessed for Term?	Yes			
Course	Title			Credit Hours	
GN 5603	Societal and Ethical Issues	}		1.00	
GN 5820	Professional Practice Issue	Professional Practice Issues			
GN 7570	Clinical Experience*			4.00	
			Semester Total:	7.00	
Second Ye	ear, Summer Term				
Clinical Fe	e Assessed for Term?	Yes			
Course	Title			Credit Hours	
GN 5606	Complementary and Alter	native Therapies		1.00	
GN 5691	Clinical Comprehensive Ev	/aluation II**		1.00	
GN 7570	Clinical Experience*			3.00	
GN 5830	Business Practice Issues (I	Elective)		2.00	
			Semester Total:	5.00 - 7.00	
			<b>Total Program Units:</b>	45.00 – 49.00	

<sup>\*</sup> Course(s) not charged tuition.

<sup>\*\*</sup>Students who extend the FNP year will be required to register for additional units of Clinical Comprehensive Evaluation at the end of each additional year.

## Post-Master's FNP (WesternU MSN-E Alumni)

For WesternU students who previously graduated with a MSN in Ambulatory Care

First Year,	Fall Term		
Clinical Fe	e Assessed for Term?	Yes	
Course	Title		Credit Hours
GN 5401	Primary Care Managemer	nt I	2.00
GN 5601	Advanced Physical Assess	ment	3.00
GN 5631	Advanced Pathophysiolog	y I	1.00
GN 5641	Clinical Applications I		2.00
GN 7570	Clinical Experience*		5.00
GN 5810	Management Practice Issu	ues (Elective)	2.00
		Semester Total:	13.00 – 15.00
	, Spring Term		
Clinical Fe	e Assessed for Term?	Yes	
Course	Title		Credit Hours
GN 5402	Primary Care Managemer	t II	2.00
GN 5501	Pharmacology I		2.00
GN 5632	Advanced Pathophysiology II		1.00
GN 5642	Clinical Applications II		2.00
GN 7570	Clinical Experience*		5.00
		Semester Total:	12.00
	, Summer Term		
Clinical Fe	e Assessed for Term?	Yes	
Course	Title		Credit Hours
GN 5403	Primary Care Managemer	t III	2.00
GN 5502	Pharmacology II		2.00
GN 5633	Advanced Pathophysiolog	1.00	
GN 5643	Clinical Applications III	2.00	
GN 5690	Clinical Comprehensive Ev	/aluation I**	1.00
GN 7570	Clinical Experience*		5.00
GN 5830	Business Practice Issues (E	Elective)	2.00
		Semester Total:	13.00 – 15.00
		Total Program Units:	38.00 – 42.00

<sup>\*</sup> Course(s) not charged tuition.

<sup>\*\*</sup>Students who extend the FNP year will be required to register for additional units of Clinical Comprehensive Evaluation at the end of each additional year.

## Post-Master's FNP, Two-Year Extended (WesternU MSN-E Alumni)

For WesternU students who previously graduated with a MSN in Ambulatory Care

First Year,	, Fall Term		
Clinical Fe	e Assessed for Term?	Yes	
Course	Title		Credit Hours
GN 5401	Primary Care Managemer	nt I	2.00
GN 5601	Advanced Physical Assess	ment	3.00
GN 5631	Advanced Pathophysiolog	y I	1.00
GN 5641	Clinical Applications I		2.00
GN 7570	Clinical Experience*		1.00
		Semester Total:	9.00
First Year,	Spring Term		
Clinical Fe	e Assessed for Term?	Yes	
Course	Title		<b>Credit Hours</b>
GN 5402	Primary Care Managemer	nt II	2.00
GN 5501	Pharmacology I		2.00
GN 5632	Advanced Pathophysiolog	y II	1.00
GN 5642	Clinical Applications II		2.00
GN 7570	Clinical Experience*		1.00
		Semester Total:	8.00
First Year,	Summer Term		
Clinical Fe	e Assessed for Term?	Yes	
Course	Title		Credit Hours
GN 5403	Primary Care Managemer	nt III	2.00
GN 5502	Pharmacology II		2.00
GN 5633	Advanced Pathophysiolog	1.00	
GN 5643	Clinical Applications III		2.00
GN 5690	Clinical Comprehensive Ev	valuation I**	1.00
GN 7570	Clinical Experience*		1.00
		Semester Total:	9.00

## Post Master's FNP, Two-Year Extended Continued

Second Ye	Second Year, Fall Term				
Clinical Fe	Clinical Fee Assessed for Term? Yes				
Course	Title		Credit Hours		
GN 7570	Clinical Experience*		5.00		
GN 5810	Management Practice Issu	ues (Elective)	2.00		
		Semester Total:	5.00 - 7.00		
Second Ye	ear, Spring Term				
Clinical Fe	e Assessed for Term?	Yes			
Course	Title		Credit Hours		
GN 7570	Clinical Experience*		4.00		
		Semester Total:	4.00		
Second Ye	ear, Summer Term				
Clinical Fe	e Assessed for Term?	Yes			
Course	Title		Credit Hours		
GN 5691	Clinical Comprehensive Ev	valuation II**	1.00		
GN 7570	Clinical Experience*		3.00		
GN 5830	Business Practice Issues (I	Elective)	2.00		
		Semester Total:	4.00 - 6.00		
		Total Program Units:	39.00 - 43.00		

<sup>\*</sup> Course(s) not charged tuition.

<sup>\*\*</sup>Students who extend the FNP year will be required to register for additional units of Clinical Comprehensive Evaluation at the end of each additional year.

## **Doctor of Nursing Practice (DNP)**

First Year	, Fall Term		
Clinical Fe	ee Assessed for Term?	Yes	
Course	Title		Credit Hours
GN 5306	Biostatistics and Epidemi	ology	3.00
GN 8010	Philosophy and Science f	or Nursing Practice	3.00
GN 8030	Clinical Scholarship, Rese	arch, and Evidence-Based Practice	3.00
		Semester Total:	9.00
First Year	, Spring Term		
Clinical Fe	ee Assessed for Term?	Yes	
Course	Title		Credit Hours
GN 8020	Quality and Leadership in	the 21 <sup>st</sup> Century Health Care System	3.00
GN 8050	Social Justice, Health Car	e Advocacy, and Policy in Nursing Practice	3.00
		Semester Total:	6.00
First Year	, Summer Term		
Clinical Fe	e Assessed for Term?	Yes	
Course	Title		Credit Hours
GN 8060	Outcome Based Collabor	ation and Collaborative Models	3.00
GN 8080	Care Delivery Improveme	ent: Models and Strategies	3.00
		Semester Total:	6.00
Second Ye	ear, Fall Term		
Clinical Fe	ee Assessed for Term?	Yes	
Course	Title		<b>Credit Hours</b>
GN 8040	Transformational Information	3.00	
GN 8070	Population Based Preven	tion in Vulnerable Populations	3.00
		Semester Total:	6.00
	ear, Spring Term		
Clinical Fe	e Assessed for Term?	Yes	
Course	Title		Credit Hours
GN 8001	The Scholarship of Teach	ing Nursing*	3.00
GN 8090	Practice Immersion Proje	ct	3.00
		Semester Total:	3.00 - 6.00
Second Ye	ear, Summer Term		
Clinical Fe	ee Assessed for Term?	Yes	
Course	Title		Credit Hours
GN 8002	Advanced Scholarship an	d Leading Change in Nursing Education*	3.00
GN 8090	Practice Immersion Proje	ct	3.00
		Semester Total:	3.00 - 6.00
		Total Program Units:	33.00 - 39.00
Continuo	us Enrollment (ABD Stude	nts)	
	ee Assessed for Term?	No	
Clinical Fe	e Assesseu for Territ:	1 112	
Clinical Fe	Title		<b>Credit Hours</b>

<sup>\*</sup>Required for NFLP recipients, elective for non-NFLP recipients \*\*Students are required to register for this 3 unit course every semester after completion of DNP coursework until defense of dissertation or scholarly presentation. A continuous registration fee of \$750.00 is assessed.

## **Doctor of Nursing Practice (DNP), Three-Year Extended**

First Year,	, Fall Term		
Clinical Fe	e Assessed for Term?	Yes	
Course	Title		Credit Hours
GN 5306	Biostatistics and Epidemic	ology	3.00
GN 8030	Clinical Scholarship, Rese	arch, and Evidence-Based Practice	3.00
		Semester Total:	6.00
	, Spring Term		
Clinical Fe	e Assessed for Term?	Yes	
Course	Title		Credit Hours
GN 8020	Quality and Leadership in	the 21 <sup>st</sup> Century Health Care System	3.00
		Semester Total:	3.00
First Year,	, Summer Term		
Clinical Fe	e Assessed for Term?	Yes	
Course	Title		Credit Hours
GN 8060	Outcome Based Collabora	ation and Collaborative Models	3.00
		Semester Total:	3.00
Second Ye	ear, Fall Term		
Clinical Fe	e Assessed for Term?	Yes	
Course	Title		Credit Hours
GN 8010	Philosophy and Science for	or Nursing Practice	3.00
GN 8070	Population Based Prevent	tion in Vulnerable Populations	3.00
		Semester Total:	6.00
	ear, Spring Term		
	e Assessed for Term?	No	
Course	Title		Credit Hours
GN 8050	Social Justice, Health Care	e Advocacy, and Policy in Nursing Practice	3.00
		Semester Total:	3.00
	ear, Summer Term		
Clinical Fe	e Assessed for Term?	Yes	
Course	Title		Credit Hours
GN 8080	Care Delivery Improveme	ent: Models and Strategies	3.00
		Semester Total:	3.00

## Doctor of Nursing Practice (DNP), Three-Year Extended Continued

Third Year	Third Year, Fall Term				
Clinical Fe	Clinical Fee Assessed for Term? Yes				
Course	Title		<b>Credit Hours</b>		
GN 8040	Transformational Informa	tion Systems for Health Care	3.00		
		Semester Total:	3.00		
Third Year	r, Spring Term				
Clinical Fe	e Assessed for Term?	Yes			
Course	Title		Credit Hours		
GN 8001	The Scholarship of Teachi	ng Nursing*	3.00		
GN 8090	Practice Immersion Project	ct	3.00		
		Semester Total:	3.00 - 6.00		
Third Year	r, Summer Term				
Clinical Fe	e Assessed for Term?	Yes			
Course	Title		Credit Hours		
GN 8002	Advanced Scholarship and	d Leading Change in Nursing Education*	3.00		
GN 8090	Practice Immersion Project	ct	3.00		
		Semester Total:	3.00 - 6.00		
	Total Program Units: 33.00				
Continuous Enrollment (ABD Students)					
Clinical Fe	e Assessed for Term?	No			
Course	Title		Credit Hours		
GN 8999	Continuous Enrollment/D	issertation**	3.00		

<sup>\*</sup>Required for NFLP recipients, elective for non-NFLP recipients

<sup>\*\*</sup>Students are required to register for this 3 unit course every semester after completion of DNP coursework until defense of dissertation or scholarly presentation. A continuous registration fee of \$750.00 is assessed.

## Master of Science in Nursing/Family Nurse Practitioner/Doctor of Nursing Practice (MSNFNP/DNP) Dual Degree

First Year,	, Fall Term		
Clinical Fe	ee Assessed for Term? Yes		
Course	Title		Credit Hours
GN 5401	Primary Care Management I		2.00
GN 5601	Advanced Physical Assessment		3.00
GN 5605	Human Diversity		1.00
GN 5631	Advanced Pathophysiology I		1.00
GN 5641	Clinical Applications I		2.00
GN 7570	Clinical Experience*		1.00
		Semester Total:	10.00
	, Spring Term		
Clinical Fe	ee Assessed for Term? Yes		
Course	Title		Credit Hours
GN 5402	Primary Care Management II		2.00
GN 5501	Pharmacology I		2.00
GN 5602	Health Promotion and Disease Prevention		1.00
GN 5632	Advanced Pathophysiology II		1.00
GN 5642	Clinical Applications II		2.00
GN 7570	Clinical Experience*		2.00
		Semester Total:	10.00
	, Summer Term		
Clinical Fe	ee Assessed for Term? Yes		
Course	Title		Credit Hours
GN 5403	Primary Care Management III		2.00
GN 5502	Pharmacology II		2.00
GN 5606	Complementary and Alternative Therapies		1.00
GN 5633	Advanced Pathophysiology III		1.00
GN 5643	Clinical Applications III		2.00
GN 5690	Clinical Comprehensive Evaluation I		1.00
GN 7570	Clinical Experience*		1.00
		Semester Total:	10.00
	ear, Fall Term		
	ee Assessed for Term? Yes		
Course	Title		Credit Hours
GN 5306	Biostatistics and Epidemiology		3.00
GN 7570	Clinical Experience*		1.00
GN 8010	Philosophy and Science for Nursing Practice		3.00
GN 8030	Clinical Scholarship, Research, and Evidence-Based F		3.00
		Semester Total:	10.00

Second Ye	ear, Spring Term		
	e Assessed for Term?	Yes	
Course	Title		Credit Hours
GN 5603	Societal and Ethical Issue	S	1.00
GN 5820	Professional Practice Issu	2.00	
GN 7570	Clinical Experience*	1.00	
GN 8020		the 21 <sup>st</sup> Century Health Care System	3.00
GN 8050		e Advocacy, and Policy in Nursing Practice	3.00
		Semester Total:	10.00
Second Ye	ear, Summer Term		
Clinical Fe	e Assessed for Term?	Yes	
Course	Title		<b>Credit Hours</b>
GN 5691	Clinical Comprehensive E	valuation II	1.00
GN 5840	Management and Busine	ss Practice Issues	2.00
GN 7570	Clinical Experience*		1.00
GN 8060	Outcome Based Collabora	ation and Collaborative Models	3.00
GN 8080	Care Delivery Improveme	nt: Models and Strategies	3.00
		Semester Total:	10.00
Third Year	r, Fall Term		
Clinical Fe	e Assessed for Term?	Yes	
Course	Title		Credit Hours
GN 7570	Clinical Experience*	2.00	
GN 8040	Transformational Informa	3.00	
GN 8070	Population Based Prevention in Vulnerable Populations		
GN 8090	Practice Immersion Proje	ct	2.00
		Semester Total:	10.00
	r, Spring Term		
Clinical Fe	e Assessed for Term?	Yes	
Course	Title		Credit Hours
GN 7570	Clinical Experience*		3.00
GN 8001	The Scholarship of Teachi	ing Nursing	3.00
GN 8090	Practice Immersion Proje		2.00
		Semester Total:	8.00
	r, Summer Term		
	e Assessed for Term?	Yes	
Course	Title		Credit Hours
GN 5692	Clinical Comprehensive E	valuation III	1.00
GN 7570	Clinical Experience* 3.00		
GN 8002		d Leading Change in Nursing Education	3.00
GN 8090	Practice Immersion Proje		2.00
		Semester Total:	9.00
		Total Program Units:	87.00

## MSNFNP/DNP Continued

Continuous Enrollment (ABD Students)				
Clinical Fe	Clinical Fee Assessed for Term? No			
Course	Title Credit			
GN 8999	Continuous Enrollment/Dissertation**		3.00	

<sup>\*</sup> Course(s) not charged tuition.

<sup>\*\*</sup>Students are required to register for this 3 unit course every semester after completion of DNP coursework until defense of dissertation or scholarly presentation. A continuous registration fee of \$750.00 is assessed.

## Master of Science in Nursing/Family Nurse Practitioner/Doctor of Nursing Practice (MSNFNP/DNP) Dual Degree, Four-Year Extended

First Year	, Fall Term		
Clinical Fe	e Assessed for Term?	Yes	
Course	Title		Credit Hours
GN 5401	Primary Care Management I		2.00
GN 5601	Advanced Physical Assess	ment	3.00
GN 5631	Advanced Pathophysiolog	gy I	1.00
GN 5641	Clinical Applications I		2.00
GN 7570	Clinical Experience*		1.00
		Semester Total:	9.00
First Year	, Spring Term		
Clinical Fe	ee Assessed for Term?	Yes	
Course	Title		<b>Credit Hours</b>
GN 5402	Primary Care Manageme	nt II	2.00
GN 5501	Pharmacology I		2.00
GN 5602	Health Promotion and Disease Prevention		1.00
GN 5603	Societal and Ethical Issues		1.00
GN 5632	Advanced Pathophysiology II		1.00
GN 5642	Clinical Applications II		2.00
GN 7570	Clinical Experience*		2.00
		Semester Total:	11.00
	, Summer Term		
	e Assessed for Term?	Yes	
Course	Title		Credit Hours
GN 5403	Primary Care Management III		2.00
GN 5502	Pharmacology II		2.00
GN 5606	Complementary and Alternative Therapies		1.00
GN 5633	Advanced Pathophysiology III		1.00
GN 5643	Clinical Applications III		2.00
GN 5690	Clinical Comprehensive Evaluation I		1.00
GN 7570	Clinical Experience*		1.00
		Semester Total:	10.00
	ear, Fall Term	1	
	ee Assessed for Term?	Yes	
Course	Title		Credit Hours
GN 5306	Biostatistics and Epidemiology		3.00
GN 7570	Clinical Experience*		1.00
GN 8010	Philosophy and Science for Nursing Practice		3.00
GN 8030	Clinical Scholarship, Rese	arch, and Evidence-Based Practice	3.00
		Semester Total:	10.00

Second Ye	ear, Spring Term		
	ee Assessed for Term?	Yes	
Course	Title		Credit Hours
GN 7570	Clinical Experience*		1.00
GN 8020	Quality and Leadership in the 21 <sup>st</sup> Century Health Care System		3.00
GN 8050	·	e Advocacy, and Policy in Nursing Practice	3.00
	,	Semester Total:	7.00
Second Ye	ear, Summer Term		
Clinical Fe	ee Assessed for Term?	Yes	
Course	Title		Credit Hours
GN 5691	Clinical Comprehensive E	valuation II	1.00
GN 5840	Management and Business Practice Issues		2.00
GN 7570	Clinical Experience*		1.00
GN 8060	Outcome Based Collabor	ation and Collaborative Models	3.00
	ı	Semester Total:	7.00
Third Year	r, Fall Term		
Clinical Fe	ee Assessed for Term?	Yes	
Course	Title		Credit Hours
GN 5605	Advanced Human Diversity		1.00
GN 7570	Clinical Experience*		1.00
GN 8070	Population Based Preven	tion in Vulnerable Populations	3.00
		Semester Total:	5.00
Third Yea	r, Spring Term		
Clinical Fe	ee Assessed for Term?	Yes	
Course	Title		<b>Credit Hours</b>
GN 5820	Professional Practice Issues		2.00
GN 7570	Clinical Experience*		2.00
		Semester Total:	4.00
Third Year	r, Summer Term		
Clinical Fe	e Assessed for Term?	Yes	
Course	Title		<b>Credit Hours</b>
GN 7570	Clinical Experience*		1.00
GN 8080	Care Delivery Improveme	ent: Models and Strategies	3.00
		Semester Total:	4.00
Fourth Ye	ar, Fall Term		
Clinical Fe	ee Assessed for Term?	Yes	
Course	Title		Credit Hours
GN 7570	Clinical Experience*		1.00
GN 8040	Transformational Information Systems in Health Care		3.00
GN 8090	Practice Immersion Proje	ect	2.00
		Semester Total:	6.00

Fourth Year, Spring Term		
Clinical Fee Assessed for Term? Yes		
Course	Title	Credit Hours
GN 7570	Clinical Experience*	3.00
GN 8001	The Scholarship of Teaching Nursing	3.00
GN 8090	Practice Immersion Project	2.00
Semester Total:		8.00
Fourth Year, Summer Term		
Clinical Fe	e Assessed for Term? Yes	
Course	Title	Credit Hours
GN 5692	Clinical Comprehensive Evaluation III	1.00
GN 7570	Clinical Experience*	1.00
GN 8002	Advanced Scholarship and Leading Change in Nursing Education	3.00
GN 8090	Practice Immersion Project	2.00
Semester Total: 7.00		
	Total Program Units:	87.00
Continuous Enrollment (ABD Students)		
Clinical Fee Assessed for Term? No		
Course	Title	Credit Hours
GN 8999	Continuous Enrollment/Dissertation**	3.00

<sup>\*</sup> Course(s) not charged tuition.

<sup>\*\*</sup>Students are required to register for this 3 unit course every semester after completion of DNP coursework until defense of dissertation or scholarly presentation. A continuous registration fee of \$750.00 is assessed.

#### **Course Descriptions**

#### GN 5000 Communication and Information Management (1 credit hour)

This introductory course provides new College of Graduate Nursing advanced practice nursing students with a comprehensive introduction to WesternU's distance learning programs. In addition to learning about Western University of Health Sciences and the College of Graduate Nursing, students will complete a series of assignments designed to prepare them for the technical and academic policy requirements of the College of Graduate Nursing. Emphasis will be placed on necessary computer skills and proficient use of the software required for use in the curriculum, and the academic writing skills necessary for successful completion of the program.

#### **GN 5103 Advanced Health Systems (3 credit hours)**

This course will focus on developing health care systems safety and quality competencies needed by today's advanced practice nurses to lead improvement at microsystem, mesosystem, and macrosystem levels. National reports and health policy drive changes in health care as the system transforms to become more accountable and transparent to its stakeholders. Nursing leadership in patient safety, quality management, interprofessional practice, and health policy will be explored as avenue from improving population health, disease management, and care delivery.

#### **GN 5170 Introduction to the Theory and Science of Nursing (3 credit hours)**

This bridge course introduces the student to the theoretical frameworks and research that inform and shape nursing knowledge and practice. Content includes the evolution of knowledge development; multiple ways of knowing; structural components of theory; contributions of theoretical knowledge in evidence-based nursing practice; research methodologies; the use of research evidence to inform practice; and analysis and critique of published research.

#### **GN 5200 Nursing Theory (3 credit hours)**

This course explores the theoretical context of contemporary nursing practice which serve to guide nursing practice and primary health care that optimizes health and self-care in families. In addition, this course will integrate knowledge from the physical, biological, and behavioral sciences to systematically and critically apply selected conceptual frameworks to the development of nursing, family systems, and the response to illness. It is expected that the graduate nursing student will develop an appreciation of the process of theory development in nursing, compare and contrast various theoretical perspectives, and apply nursing theories critically.

#### **GN 5304 Nursing Research I (3 credit hours)**

Nursing Research I provides a foundation for understanding research as an essential component of evidenced-based practice and core competency of graduate nursing practice. The historical, scientific, and theoretical context of research in nursing examined. During this course students complete Human Subjects Protection certification, and examine and critique—the components of a research study including the research question, literature review, theoretical framework, methodology, analysis, and interpretation of findings for application to practice. In addition, students examine strategies to stay abreast of current research and changes in therapeutic management. This course provides the foundation for the design of a research study, or clinical project involving data collection, in Nursing Research II.

#### GN 5305 Nursing Research II (1 credit hour)

Nursing Research II builds on the foundation established in 5304. Students design a research study, or a clinical project involving data collection, which could be implemented as the student's culminating experience. Prerequisite: CGN 5304.

#### **GN 5306 Biostatistics and Epidemiology (3 credit hours)**

This course focuses on the interpretation and use of biostatistics for graduate nursing practice including basic epidemiological concepts, quantitative methodology for evidence based practice, and statistical utility for decision making. The student is introduced to statistical analysis software; the process of instrument development, validity and reliability assessment, and pilot testing; decision theory; and the critical analysis and evaluation of the methods, results, and discussion sections of a research report.

#### GN 5401 Primary Care Management I: Common and Acute Conditions (2 credit hours)

This first course in Primary Care Management will help students integrate basic knowledge of human anatomy and physiology with an understanding of the pathologic changes and clinical manifestations that characterize common and acute disorders in adult, obstetric, pediatric, and geriatric clients. Students will apply new understanding of pathophysiology and evolving clinical decision making skills to the interpretation of assessment data and the diagnosis and treatment of primary care clients and their families across the life cycle.

#### GN 5402 Primary Care Management II: Chronic and Complex Conditions (2 credit hours)

This second course in Primary Care Management continues to help students integrate their basic knowledge of human anatomy and physiology with an understanding of the pathological changes and clinical manifestations that characterize common, chronic, and complex disorders in pediatric, adult, obstetric, and geriatric clients. Students will apply their new understanding of pathophysiology and their evolving clinical decision making skills to the interpretation of assessment data and the diagnosis and treatment of primary care clients and their families across the life cycle. Prerequisite: CGN 5401.

#### GN 5403 Primary Care Management III: Application to Special Populations (2 credit hours)

This third course in Primary Care Management enhances the student's ability to integrate a basic knowledge of human anatomy and physiology with an understanding of the pathologic changes and clinical manifestations that characterize common, acute, chronic, and complex disorders in pediatric, obstetric, and geriatric clients. Students will apply their understanding of pathophysiology and their evolving clinical decision-making skills to the interpretation of assessment data and the diagnosis and treatment of primary care clients and their families across the life cycle within the special populations of pediatrics, obstetrics and geriatrics. Prerequisite: CGN 5401and CGN 5402.

#### GN 5501 Pharmacology I: Common Conditions and Acute Conditions (2 credit hours)

This is the first of two pharmacology courses that will focus on the pharmacotherapy of health care problems covered in the Primary Care Management series. In CGN 5401, students learned the pathophysiological basis of acute and common health care problems of patients seen in the primary care setting. In this course, students will continue to develop their primary care clinical management skills by learning and incorporating the pharmacotherapy of acute and common health care problems into the care of patients seen in this setting.

#### GN 5502 Pharmacology II: Chronic Conditions and Complex Conditions (2 credit hours)

This is the second of two pharmacology courses that will focus on the pharmacotherapy of health care problems covered in the Primary Care Management series. In CGN 5402 and CGN 5403, students learn the pathophysiological basis of chronic and complex health care problems of patients seen in the primary care setting. In Pharmacology II, students will continue to develop primary care clinical management skills by learning and incorporating the pharmacotherapy of chronic and complex health care problems into the care of patients seen in this setting. Prerequisite: CGN 5501.

#### GN 5505 Pharmacotherapeutics and Technology for Advanced Practice Nurses (3 credit hours)

This advanced pharmacology course will provide students with an in-depth knowledge of pharmacological management of patients with complex conditions and illnesses. Emphasis will be given on assuring safe, efficacious, and ethical delivery of pharmacotherapeutics, Students will explore health systems applications for using new and emerging technologies designed to reduce medical error and enhance the effectiveness of pharmacotherapeutics.

#### **GN 5601 Advanced Physical Assessment (3 credit hours)**

This course examines the role of the Family Nurse Practitioner as a clinical decision maker in a sociocultural context. To help students transition to this advanced practice role, the course introduces skills that build on undergraduate education and experience with respect to basic physical assessment. These advanced skills, which draw on knowledge from nursing, medicine, and other disciplines, include recognition and interpretation of clinical assessment data, diagnostic reasoning and treatment decision-making, and medical record keeping. Over the course of the program, students will be expected to integrate these skills with knowledge of common, acute, chronic, and complex illnesses in order to assess and manage patients across the life cycle.

#### **GN 5602 Health Promotion and Disease Prevention (1 credit hour)**

This course is designed to transition the Family Nurse Practitioner student from building physical assessment skills to an application of preventive health concepts and health promotion across the life span, using the Health People 2010 guidelines as a resource. Students will learn how to apply health promotion lifestyle changes, disease prevention concepts and genetics screening options in the primary care patient population. Clinical preventive services and health promotion concepts that will be examined include: health screening, counseling, immunization / chemoprevention in pediatric and adult clients, genetic risk identification, and evidence based medicine practice applications. Methods for counseling clients in lifestyle behaviors such as nutrition, physical activity, smoking cessation, and violence prevention will also be explored.

#### **GN 5603 Societal and Ethical Issues (1 credit hour)**

This course focuses on the social and ethical issues that often arise when providing primary health care to clients over the life span. The interdependence of these social and clinical issues mandate that the health care provider become aware of the relevant legal, ethical, and medical implications of physical and sexual child abuse, domestic violence, elder abuse, underage pregnancy, substance abuse, and elder clients at risk for polypharmacy, dementia, depression and/or homelessness. It is expected that the student will critically reflect on and analyze the ethical challenges and societal factors that influence the provider-patient relationship.

#### **GN 5605 Advanced Human Diversity (1 credit hour)**

In this role development course, students will examine the skills used to be culturally competent and sensitive to human diversity. The graduate nursing student will begin by gaining an understanding of the principles of delivering culturally sensitive care. The course requires that students open their minds and examine their own cultural and humanistic beliefs and values, and explore the impact of those beliefs and values on clinical practice as a health care professional. Students will also explore strategies for successful patient-provider relationships when the patients' culture, race/ethnicity, prejudice and lifestyle beliefs conflict with the health models used in medicine and nursing science.

#### **GN 5606 Complementary and Alternative Therapies (1 credit hour)**

This course focuses on the practices of alternative or complementary therapy utilized by the consumers of health care in this country. Among the complementary therapies students will consider in this course are acupuncture, yoga, biofeedback, chiropractic, dietary supplements, exercise, herbs, homeopathy, hypnosis, imagery, massage, relaxation, meditation, spiritual healing, symbols and rituals, folk medicine and energy work.

#### **GN 5610 Professional Role (3 credit hours)**

This course focuses on professional roles traditionally assumed by master's prepared nurses including care giver, communicator, problem solver, change agent, client advocate, educator, leader, manager, researcher and coordinator. Role theory is presented as a framework for examining how nursing roles overlap and at times conflict. The Administrator role will be emphasized and other advanced practice nursing roles will be examined. Population and workforce demographics as well as trends in health care are explored in terms of their impact on these roles as well as future nursing roles. Finally, the need for nurses to develop interdisciplinary role relationships is emphasized, including challenges to those relationships.

#### **GN 5620 Advanced Health and Population Assessment (3 credit hours)**

This course will address advanced health assessment for both individual and communities of clients. The focus will include concepts of population-based assessments for high risk clients in both acute care and community-based settings. Students will build on their graduate knowledge of health assessment and utilize diagnostic reasoning and evidence- based research to enhance client outcomes. Emphasis will include risk assessment, health promotion, illness prevention and protection and to promote improved management of high acuity clients or populations of clients in multiple health settings.

#### GN 5631 Advanced Pathophysiology I (1 credit hour)

This first course in a three part series builds on basic pathophysiology principles and explores the principles of normal body functions and pathophysiological changes that occur as a result of disease, lifestyle, and homeostatic changes in the body. Altered pathophysiological health is explored at the genetic, cellular and organ system level. Epidemiology, pathophysiological processes and related system interaction are examined. Disease processes across the life span are explored and case studies are used to demonstrate the clinical assessment approach for the advanced practice student. This first course focuses on common and acute pathophysiological processes.

#### GN 5632 Advanced Pathophysiology II (1 credit hour)

This course is the second in the series of pathophysiology principles and explores the principles of normal body functions and pathophysiological changes that occur as a result of disease, lifestyle, and homeostatic changes in the body across the lifespan. Disease processes across the life span are explored and case studies are used to demonstrate the clinical assessment approach for the advanced practice student. This second course focuses on chronic and complex pathophysiological processes. Prerequisite: CGN 5631.

#### **GN 5633 Advanced Pathophysiology III (1 credit hour)**

This course is the third in the series of pathophysiological principles and explores the principles of normal body functions and pathophysiological changes that occur as a result of disease, lifestyle, and homeostatic changes in the body across the lifespan. This third course enhances the student's ability to integrate a basic knowledge of pathologic changes and clinical manifestations that characterize common, acute, chronic, and complex disorders in pediatric, obstetric, and geriatric clients. Students will apply their understanding of pathophysiology and their evolving integration across the life cycle within the special populations of pediatrics, obstetrics and geriatrics. Prerequisite: CGN 5631and CGN 5632.

#### GN 5641 Clinical Applications I: Clinical Reasoning & Diagnostics (2 credit hours)

This course is designed to enhance the student nurse practitioner's physical assessment, diagnostic reasoning and diagnostic procedure interpretation skills. Building on the practitioner's knowledge and skills to identify and distinguish normal from abnormal findings, basic health assessment often moves from a general survey of a body system to specific observations or tests of function.

The student nurse practitioner will learn how to apply this new level of understanding to build on basic health appraisal using clinical cases including common, acute, chronic and complex health conditions. Through these cases, students will learn to gather further evidence and analyze this evidence to arrive at a hypothesis that will lead to a further narrowing of differential diagnoses in order to manage patients across the life cycle. Clinical diagnostics will be incorporated into the assessment process and these will include: laboratory diagnostics, radiology diagnostics and cardiovascular monitoring and diagnostics. Students will also refine documentation and medical record-keeping skills. The skills gained in this course will provide the basic foundations of diagnostic reasoning that will guide students through other courses throughout the program including Primary Care Management, Pharmacology, and Clinical Experience.

#### **GN 5642 Clinical Applications II (2 credit hours)**

In this second course in the Clinical Applications series, students will continue to learn diagnostic and therapeutic procedures and skills critical to the advanced practice nurse. The area of focus in this course is Women's Health diagnostics and therapeutics across the lifespan. These procedures and skills include: the clinical breast examination and practicum; gynecologic procedures and diagnostics [e.g. endometrial biopsies, inserting/removing IUDs, and cervical cancer diagnostics & therapeutics; sexually transmitted infection diagnostics; infertility diagnostics and therapeutics; contraceptive technology; obstetric surveillance and diagnostics (e.g. obstetric ultrasonography, stress tests, Triple Marker testing, etc.)]. Prerequisite: CGN 5641.

#### **GN 5643 Clinical Applications III (2 credit hours)**

In this third course in the Clinical Applications series, students will continue to learn diagnostic and therapeutic procedures and skills critical to the advanced practice nurse. The area of focus in this course is pediatric, adult and geriatric health diagnostics and therapeutics across the lifespan. These procedures and skills include: microscopy; office orthopedic appliances and treatment techniques; dermatologic diagnostic/therapeutic procedures; local anesthesia use and suturing techniques; eyes, ears, nose and throat diagnostic/therapeutic procedures; gastrointestinal examination techniques and therapies; and techniques for clinical emergencies and other urgent conditions. Prerequisite: CGN 5641and CGN 5642.

#### GN 5690/5691/5692 – Clinical Comprehensive Evaluation I, II or III (1 credit hour each)

These courses provide an opportunity for students to synthesize concepts, skills and techniques from previous courses and apply their learning toward assessing and managing case studies across the life span. The student will participate in various methodologies for assessing their application of knowledge learned. To assess clinical performance and knowledge, students will engage in observed structured clinical examinations (OSCE), with the assistance of standardized patients with common, acute, chronic or complex conditions (depending on the students year in the program and level of experience); create written clinical case management evaluations ("Day in the Clinic") of common, acute, chronic or complex conditions; and complete certification review by taking initial or final evaluation assessment. The certification review provides prospective graduates with an opportunity to validate the knowledge they have acquired throughout the program, and assess their readiness for the national certification exam. Students are required to be registered for Clinical Comps in the summer semester of each year in the program.

#### **GN 5702 Management Principles and Leadership Theories (3 credit hours)**

This course builds upon CGN 6801 and introduces learners to the directing and controlling phases of the management process. Emphasis is given to issues common to first and middle level managers including motivation, communication, delegation, conflict management, unions and employment laws, quality control, performance appraisal, discipline, and advocacy. Accountability for legal and ethical management practice is emphasized. Various modes of inquiry, including nursing process, problem-solving models, and decision making tools are emphasized. Motivation theory, communication theory, conflict theory, management theories, leadership theories, behavioral theories, ethical theory, legal concepts, and communication strategies are emphasized.

#### **GN 5703 Introductory Nursing Informatics (3 credit hours)**

This course explores the nursing specialty of Nursing Informatics and its value and impact on nursing practice, research, and education. It focuses on the use of computers and technology to access and manage information related to nursing practice, telehealth, and clinical management. It examines technology's role in evidence-based practice, nursing education, and health care applications of information technology. Topics will also include health care applications, ethical and legal issues, and challenges related to the use of Informatics.

#### **GN 5704 Accounting and Finance (3 credit hours)**

This course introduces financial concepts, financial management and accounting methods applied within the context of contemporary integrated health systems. Analysis of cost, quality and outcomes as factors in delivery of health care will be explored.

#### **GN 5710 Advanced Nurse Leaders as Educators (3 credit hours)**

This course introduces the graduate student to the core knowledge and understanding of patient and nursing education, as well as strategies for creating and sustaining learning organizations. Transformational and experiential learning theories will be used to analyze and develop learning activities in both practice and academic settings. Standards and regulations will be explored for education within health care systems and academia.

#### **GN 5810 Management Practice Issues (2 credit hours)**

This course presents a variety of role-related topics designed to prepare the prospective Nurse Practitioner for management practice. Additionally, this course will help prepare the student for the CGN 5900 Collaborative Project in the next semester and the CGN 5990 Culminating Project in the last semester. The course will explore fundamental business principles related to: management and leadership theory, effective decision making, project management, business planning, financial risk assessment and management, creating and using financial information, grant writing, business ethics, employee relations and supervision management, and marketing and sales.

#### **GN 5811 Leadership and Professional Role Transition (4 credit hours)**

This course examines leadership practices in the context of complex, highly regulated, and constantly changing healthcare environments. Emphasis is placed on leading patient safety and quality efforts. Leadership and management theories, principles, and evidence-based practices are examined, drawing from a variety of resources that include research, professional standards, expert wisdom, and the student's own experience. In addition, strategies to begin the process of transitioning from an undergraduate-prepared nurse to one with an advanced degree will be explored. Content will focus on tools for scholarly success, mentorship, group dynamics, historical influences, patterns of knowing in nursing, and an exploration of various advanced nursing practice roles.

#### **GN 5820 Professional Practice Issues (2 credit hours)**

This course presents a variety of role-related topics designed to prepare the prospective Nurse Practitioner for professional practice. Beginning with a historical overview of the NP profession, the course will examine some of the critical issues that determine the practitioner's scope of practice, career options, peer review, protocols and standardized procedures, practice profiling, leadership and political involvement. In addition, the course presents guidelines for resolving professional legal and ethical issues that are often confronted by the NP. Students will also be introduced to valuable tools for ongoing professional development such as professional organizations and journals.

#### **GN 5830 Business Practice Issues (2 credit hours)**

This course presents a variety of role-related topics designed to prepare the prospective Nurse Practitioner for business practice. The business practice concepts explored will prepare the nurse practitioner graduate to enter the business of health care with the tools needed to be successful. The areas of focus will include: reimbursement (Medicare, Medicaid, indemnity insurance, fee for service, managed care organizations and business contracts for special services); billing and coding; evaluation and management codes; state regulations; federal regulations; office laboratory evaluations under CLIA; malpractice; employment law; facility access to disabled persons; HIPAA; credentialing and privileging; entrepreneurial issues and strategies; business ethics; and business management and fundamentals.

#### GN 5840 Management and Business Practice Issues (2 credit hours)

This course presents a variety of role-related topics designed to prepare the prospective Nurse Practitioner for business and management practice. The course will explore fundamental business principles related to: management and leadership theory, effective decision making, project management, business planning, financial risk assessment and management, creating and using financial information, grant writing, business ethics, employee relations and supervision management, and marketing and sales. The business practice concepts explored will prepare the nurse practitioner graduate to enter the business of health care with the tools needed to be successful. The areas of focus will include: reimbursement (Medicare, Medicaid, indemnity insurance, fee for service, managed care organizations and business contracts for special services); billing and coding; evaluation and management codes; state regulations; federal regulations; office laboratory evaluations under CLIA; malpractice; employment law; facility access to disabled persons; HIPAA; credentialing and privileging; entrepreneurial issues and strategies; business ethics; and business management and fundamentals.

#### **GN 5900 Collaborative Project (2 credit hours)**

The CGN 5900 collaborative exercise is based on a health care project. The graduate student learns to approach, evaluate and design an intervention for a community health care project with the assistance of colleagues in a group effort. The skills learned in this collaborative project will help prepare the student in developing the independent culminating project for the CGN 5990 course.

#### **GN 5903 Community Health Nursing for the ADN (2 credit hours)**

This course is an online version of CGN 6901, developed for the ADN/RN student that focuses on the nursing care and health promotion of individuals, families, groups and communities. The health of the community and subgroups within the community are the focus of this course. Students will apply nursing and public health concepts to promote health, prevent disease, and restore the health of population groups.

#### GN 5904 Clinical Practicum: Community Health Nursing for the ADN (2 credit hours)

This course, for ADN/RN students, will be a clinical practice to develop critical thinking, psychomotor and communication skills in the care and health promotion of individuals, families and groups. The roles of communicator, caregiver, teacher, advocate and manager of care are emphasized.

#### GN 5990 APN Master's Project (3 credit hours)

The APN Master's Project provides the Advanced Practice Nurse prospective graduate with a final opportunity to demonstrate his or her ability to integrate and apply concepts learned throughout the master's program in the practice setting. The culminating course requires the student to develop a health care improvement project, which is broad in scope and has implications for community or practice settings. The project should offer insight into the unique contributions nurse practitioners make for a specified population(s). Prerequisites: All program courses. CGN 5990 must be taken at the end of the program.

#### GN 5995 Special Topics in Health Systems Leadership (1-4 credit hours)

Students may select this option to participate in an in-depth study of a new leadership topic developed and approved by the Health Systems Leadership faculty. The application for this course must be submitted and approved by the program director by the registration deadline for the course. Clinical/Practice hours may be embedded in the course

#### GN 5999 Master's Project (3 credit hours)

The Master's Project requires comprehensive integration of all facets of the nursing process in the form of a feasibility study, business plan, or change project to improve patient care, patient outcomes, or work design. As such, students are responsible for identifying the need for the project, driving and restraining forces for the project, an implementation plan, a budget, a timeline, and evaluation criteria to assess project outcomes. Prerequisites: All program courses. CGN 5999 must be taken at the end of the program.

#### **GN 6010 Introduction to Nursing Theory (2 credit hours)**

This course introduces the student to theory in nursing. The structural components of theory are defined. The evolution of knowledge development in nursing is presented. Implications for the application of nursing theory to research and practice in nursing are explored. This course explores the theoretical foundations of nursing as an applied science.

#### **GN 6110 Pathophysiology (4 credit hours)**

This course focuses on alterations in the function of human systems over the lifespan. The content will include cardiovascular, respiratory, renal, gastrointestinal, respiratory, endocrine and nervous systems, and the processes of metabolism and homeostasis. Students will compare normal body functioning to the physiologic changes associated with disease, as well as compensatory responses.

#### **GN 6140 Pharmacology (3 credit hours)**

This course integrates pharmacology and pathophysiological applications using a systems approach. Topics include drugs and classifications, mechanism of actions, side effects, drug interactions, and monitoring of drug therapies.

#### GN 6160 Introduction to Research (2 credit hours)

This course focuses on the process of research and its role within the profession of nursing. Students will explore research methodology, use of evidenced based medicine and analysis and critique of published research.

#### GN 6201 Health Assessment (3 credit hours)

This course will focus on theoretical concepts of physical assessment, health history, cultural, psychosocial, and nutritional assessment for individuals across the lifespan.

#### GN 6202 Clinical Practicum: Health Assessment (1 credit hour)

This course consists of clinical laboratory exercises and experiences to develop psychomotor, perceptual and critical thinking skills for health assessment. Students will develop skills in history taking, physical examination techniques, and documentation of client assessments in client records.

#### **GN 6301 Professional Nursing Role (1 credit hour)**

This course explores the historical, political, social, cultural, educational, and economic factors that have influenced the advancement of the profession of nursing. In addition, current professional issues will be explored.

#### **GN 6410 Nursing Fundamentals (3 credit hours)**

Foundational nursing concepts, skills and techniques are introduced in this course. This course is designed to assist the student to develop critical thinking abilities utilizing the nursing process in the roles of communicator, caregiver, and teacher. Students will learn principles of professional nursing practice and the application of selected fundamental skills including therapeutic communication, maintaining a safe and hygienic environment, assessing vital signs medical asepsis and infection control, principles of body mechanics and mobility, basic gastrointestinal and genitourinary care, oxygen therapy and airway management, calculation of drug doses, medication administration via oral, topical, subcutaneous, and intramuscular routes, and initiation and maintenance of intravenous fluid.

#### GN 6411 Clinical Practicum: Nursing Fundamentals (2 credit hours)

Students will apply theory, critical thinking, and the nursing process to gain mastery of selected fundamental skills through practice and return demonstration of simulated clinical experiences in the learning resource laboratory. Clinical experience in selected sub-acute or skilled nursing facilities will provide opportunities to utilize the nursing process and fundamental skills in patient care.

#### GN 6501 Nursing of Adults and Older Adults I (4 credit hours)

This course focuses on acute and chronic health problems of the adult and older adult. Emphasis will be placed on selected physiological processes, pharmacotherapy, developmental theories and human responses to illness.

#### GN 6502 Clinical Practicum: Nursing of Adults and Older Adults I (4 credit hours)

Using hospitals and long term care facilities, students will develop the psychomotor and critical thinking skills to provide nursing care. Students will integrate developmental theories and the roles of communicator, caregiver, advocate, and teacher as students care for adult and older adult clients in the clinical setting.

#### **GN 6551 Nursing of Adults and Older Adults II (4 credit hours)**

This course focuses on complex health problems of the adult and older adult. Emphasis will be placed on selected physiological processes, developmental theories and human responses to illness of adults and older adults with emergent and complex health problems.

#### GN 6552 Clinical Practicum: Nursing of Adults and Older Adults II (4 credit hours)

This course will be a clinical practice to further develop psychomotor and critical thinking skills in the care of adults and older adults. The roles of communicator, caregiver, advocate, teacher and coordinator of care will be emphasized for clients with complex health problems.

#### **GN 6601 Mental Health Nursing (2 credit hours)**

This course will focus on clients with psychosocial problems, mood disorders, and mental health diseases. Psychiatric concepts, neurophysiology, interventions and the nursing role will be discussed.

#### **GN 6602 Clinical Practicum: Mental Health Nursing (2 credit hours)**

This course will be a clinical practice designed to develop critical thinking, communication skills and nursing interventions when caring for clients with identified psychosocial and mental health issues.

#### **GN 6710 Obstetric Nursing (2 credit hours)**

This course will focus on the theory and application of nursing process and nursing roles related to the care of women and childbearing families of diverse psychosocial and cultural backgrounds. Family systems theory, development theories and the nursing process will serve as the organizing framework for this group of clients. Employing established standards, students will gain knowledge and apply essential principles for professional roles and nursing practice in the care of childbearing women, families, and newborns. Students are expected to apply the theoretical concepts in the clinical setting.

#### **GN 6711 Clinical Practicum: Obstetric Nursing (2 credit hours)**

Clinical practice to develop critical thinking, psychomotor and communication skills will provide students with opportunities to develop competence in the care of childbearing women, families, and newborns. The roles of communicator, caregiver, advocate, and teacher are emphasized.

#### **GN 6720 Pediatric Nursing (2 credit hours)**

This course will focus on the theory and application of nursing process and nursing roles related to the care of children and the families that care for them. Family systems theory, developmental theories, vulnerable population theory and the nursing process will serve as the organizing framework for this group of clients. Employing established standards, students will gain knowledge and apply essential principles for professional roles and nursing practice in the care of children and their families within a culturally-diverse population. Students are expected to apply the theoretical concepts in the clinical setting.

#### **GN 6721 Clinical Practicum: Pediatric Nursing (2 credit hours)**

Clinical practice to develop the psychomotor, critical thinking and communication skills will provide students with the opportunities to develop competence in the care of pediatric patients and their families. Emphasis will be placed on the integration of classroom knowledge and clinical practice as students continue to develop their roles of caregiver, care coordinator, communicator, advocate, and teacher for pediatric clients and their families in the clinical setting.

#### GN 6801 Leadership and Management in the Clinical Setting (2 credit hours)

This course provides an overview of contemporary leadership and management theories. Using the context of the management process, learners are introduced to the planning, organizing, and staffing phases of the management process. Emphasis is given to issues common to first and middle level managers including strategic planning, planned change, time management, organizational structure, power, authority and power in organizations, and staffing models. Various modes of inquiry, including nursing process, problem-solving models, and decision making tools are emphasized. Organizational theory, management theories, leadership theories, behavioral theories, and communication strategies are emphasized.

#### **GN 6802 Clinical Practicum: Leadership and Management (3 credit hours)**

This clinical course provides an opportunity for students to integrate leadership and management principles at the clinical level.

#### **GN 6901 Community Health Nursing (2 credit hours)**

This course focuses on the nursing care and health promotion of individuals, families, groups and communities. The health of the community and subgroups within the community are the focus of this course. Students will apply nursing and public health concepts to promote health, prevent disease, and restore the health of population groups.

#### **GN 6902 Clinical Practicum: Community Health Nursing (2 credit hours)**

This course will be a clinical practice to develop critical thinking, psychomotor and communication skills in the care and health promotion of individuals, families and groups. The roles of communicator, caregiver, teacher, advocate and manager of care are emphasized.

#### GN 7541 Administrative Nurse Leader Clinical Experience I (1 credit hour, CR/NCR)

This course is designed to provide students with opportunities to apply transformational leadership, administration, and management theories, principles, and research-based evidence into a practice within a selected health care agency. Roles and practices of the nurse leader in management, patient safety, and quality care are explored. Roles and practices of nursing management will be guided by ANA's Scope and Standards of Nurse Administrators and AONE leadership competencies.

#### GN 7542 Administrative Nurse Leader Clinical Experience II (1 credit hour, CR/NCR)

This course is designed to provide progressive opportunities for developing and refining transformational leadership, administration, and management skills, with continued hours of preceptored clinical experience in leadership practice. The student will synthesize content and concepts from concurrent courses into leadership practices and continue to build practice knowledge and skills in preparation for certified leadership practice.

#### GN 7543 Administrative Nurse Leader Clinical Experience III (1 credit hour, CR/NCR)

This course is designed to provide progressive opportunities for developing and refining leadership and management skills, with continued hours of preceptored clinical experience. Students will continue to integrate new sources of evidence into practice, with clinical immersion experiences in the last semester that integrate knowledge and skills for designing an implementable leadership plan for improvement in addressing a key safety, quality, or organizational effectiveness project.

#### GN 7550 RN Clinical Seminar (1 credit hour, CR/NCR)

This seminar class provides the opportunity for students to discuss experiences and issues related to their new professional nursing role.

#### GN 7561 CNL Clinical Experience I (3 credit hours, CR/NCR)

Students will begin to develop and refine the clinical skills needed to succeed as a CNL, working with a qualified preceptor in a practice setting. The focus will be on developing required competencies and hours of preceptored clinical experience in preparation for CNL certification. Students will identify the clinical agency, preceptor and unit for the clinical experience. Clinical hours will include project-based practicum experiences to provide opportunities for integration of research and theory to inform evidence-based practice.

#### GN 7562 CNL Clinical Experience II (3 credit hours, CR/NCR)

This course is designed to provide progressive opportunities for developing and refining CNL skills, with continued hours of preceptored clinical experience in preparation for CNL certification. Students will continue to integrate new sources of evidence into practice, focusing on project design and outcomes measurements that are used to assess clinical practice effectiveness.

#### GN 7563 CNL Clinical Experience III (3 credit hours, CR/NCR)

This course is designed to provide progressive opportunities for developing and refining CNL skills, with continued hours of preceptored clinical experience in preparation for CNL certification. Students will continue to integrate new sources of evidence into practice, with clinical immersion experience. During this semester students will focus on knowledge and skills for designing an implementable plan for improvement relating to patient safety, care quality, or clinical effectiveness.

#### GN 7570 Clinical Experience (1-6 credit hours, CR/NCR)

This course is designed to provide students with progressive opportunities to develop and refine the clinical skills needed to succeed as a Family Nurse Practitioner. Over the course of the MSN/FNP or FNP-Only program, students will be expected to integrate their undergraduate nursing education, previous clinical experience, and concurrent learning to achieve advanced practice nursing clinical objectives appropriate for diverse and complex patients over the life span. Course is repeatable.

#### **GN 8001** The Scholarship of Teaching Nursing (3 credit hours)

This course is designed to examine the content and context of the scholarship of teaching for any level of nursing education. Recent reports calling for a transformation in nursing education are explored with detailed course development informed by those reports, educational philosophy and theory, and regulatory guidelines. The classroom, skills lab, and clinical learning environments will be examined to facilitate and evaluate learning across these environments. Required for NFLP students.

#### GN 8002 Advanced Scholarship and Leading Change in Nursing Education (3 credit hours)

This course is designed to inform the development of a personal philosophy of nursing education and explore the scholarship of teaching at the curriculum level. Innovations in teaching nursing will be examined, culminating in an evidence-based practice project regarding an innovative strategy that will leverage change in the academic setting. Required for NFLP students.

#### **GN 8010 Philosophy and Science for Nursing Practice (3 credit hours)**

This course focuses on an examination of the philosophical and scientific foundations which reflect the complexity of practice at the doctoral level including the development of nursing science and the phenomenon of concern to nursing practice; the principals of the biology of human structure, function and disease; behavioral and population science, including vulnerable populations; and middle range theories which support practice.

#### GN 8020 Quality and Leadership in the 21<sup>st</sup> Century Health Care System (3 credit hours)

This course focuses on an examination of safety and quality improvement and cost effectiveness for clinical practice. Includes principals of business planning, business finance, health law, organizational theory, care delivery models, risk management, negotiation, and leadership especially with the care of vulnerable populations. Examines nursing's leadership role in shaping the health care system of the future. Includes Practice Hours.

#### GN 8030 Clinical Scholarship, Research, and Evidence-Based Practice (3 credit hours)

This course focuses on an examination and strategies for clinical scholarship and research methods for critique and literacy focusing on epidemiology and evidence-based practice. Includes data base and policy development, databases evaluation, and quality and practice improvement. Includes population based research methods, outcome analysis techniques, and participative research. Includes Practice Hours.

#### GN 8040 Transformational Information Systems for Health Care (3 credit hours)

This course focuses on an examination of information and technology systems which support research for evidence-based practice, quality improvement, outcome evaluation, best practices, management, and education. Principals for selecting and evaluating information systems, and the ethical, regulatory, and legal issues which surround information technologies. Includes Practice Hours.

#### GN 8050 Social Justice, Health Care Advocacy, and Policy in Nursing Practice (3 credit hours)

This course examines nursing's role in the care of underserved and vulnerable populations. Includes concepts of social justice, health care advocacy, and policy formation and implementation. Examines the structure and function of legislative and regulatory organizations, governance, public relations, and global health care issues.

#### GN 8060 Outcome Based Collaboration and Collaborative Models (3 credit hours)

This course examines the role, scope, practice, and culture of different health care professions with a focus on building multidisciplinary and interprofessional collaborative teams. Collaborative communication patterns and synergistic decision making will be examined in the context of the interprofessional dimensions of health care and health care organizations focusing on the care of vulnerable populations. Includes Practice Hours.

#### **GN 8070 Population Based Prevention in Vulnerable Populations (3 credit hours)**

This course examines comprehensive surveillance, prevention, and health promotion approach with underserved and vulnerable populations based on community health and vulnerable population theory. Focuses on the use of epidemiological, biostatistical, environmental, geographic, genetic, behavioral, and socioeconomic data to design, develop, and implement interventions to improve health care access and address gaps in care. Includes Practice Hours.

#### GN 8080 Care Delivery Improvement: Models and Strategies (3 credit hours)

This course focuses on outcome measurement with individuals, families, populations, including vulnerable populations, and organizations within traditional and innovation care delivery models and settings, using clinical epidemiology and reasoning, systems for leveling evidence, and ethics. Also included are the development of strategies and protocols that reflect nursing's accountability and the highest level of nursing care. Includes Practice Hours.

#### GN 8090 Practice Immersion Project (2-3 credit hours, CR/NCR)

This course focuses on the completion of a practice immersion experience and independent evidence-based project in a vulnerable population, which provides an illustration of the essential competencies of the practice doctorate. Includes Practice Hours. Repeatable up to 6 credit hours.

#### GN 8999 Continuous Enrollments/Dissertation (3 credit hours, IP/CR)

Supervised creation of a dissertation or scholarly project under the guidance of a dissertation/scholarly project committee, demonstrating scholarship skills in writing, reasoning, and interrelating theory and practice. The dissertation/scholarly project is defended in a public oral exam. Repeatable.

#### IPE 5000 Patient Centered Cases I- An Interprofessional Approach (1 credit hour, CR/NCR)

Prerequisite: Acceptance to the program. IPE 5000 is offered as part of the college curriculum for all first year entry level health professional students and is a university requirement for all participating colleges. The course is designed to prepare the health care student to practice patient-centered collaborative care through a team approach. Working in small interprofessional teams, students will explore cases representing conditions across the human lifespan.

## IPE 5100 Patient Centered Cases II – An Interprofessional Approach (1 credit hour, CR/NCR) Continuation of IPE 5000.

#### IPE 6000 Team Training in Healthcare I (1 credit hour, CR/NCR)

IPE 6000 will continue to build upon the knowledge from the IPE 5000 series, but will expand upon that knowledge and require the student to learn and apply advanced tools and strategies that are crucial to develop a collaborative healthcare team. The majority of the course is independent study with students engaging in a large scale tabletop activity where they apply team tools necessary to solve a healthcare dilemma.

#### **Honors and Awards**

The following awards are considered for presentation to CGN students annually:

Academic Achievement Award
Bobbi Stahl Leadership Award
College of Graduate Nursing Alumni Memorial Award
Corrine Faith Donatini Memorial Award
Excellence in Scholarship Award
Nursing Community Excellence Award
Nursing Excellence Award
President's Society Award
Primary Care Award
Professional Leadership Award
Rosaleen Egan Clark Memorial Scholarship
Student Service Appreciation Award
The Dean's Award
The Roy G. and Marion L. Kramer Endowment Award

**Vulnerable Population Service Award** 

## **Academic Calendar**

### Fall 2013

DNP, FNP, MSN Pre-program Begins - Incoming Students	August 5, 2013
All Incoming Students - Welcome Week	August 7-10, 2013
Pre-program Ends - Incoming Students	August 23, 2013
Fall Semester Begins MSN-E 1st Year - Incoming Students	August 19, 2013
Fall Semester CLASSES Begin - All Students	August 26, 2013
Seminar Weekend #1 - Distance Students (week 2)	Sept 6-8, 2013
Seminar Weekend #1 - ADN/MSN Students (week 2)	Sept 7, 2013
Seminar Weekend #1 - DNP Students (week 2)	Sept 7-8, 2013
Seminar Weekend #2 - Distance Students (week 9)	October 25-27, 2013
Seminar Weekend #2 - ADN/MSN Students (week 9)	October 26, 2013
Seminar Weekend #2 - DNP Students (week 9)	October 26-27, 2013
Fall Semester Ends - All Distance Students	November 29, 2013
Fall Semester Ends - MSN-E 1st Year Students	November 22, 2013
Fall Semester Ends - MSN-E 2nd Year Students	December 6, 2013

### Spring 2014

Spring Semester Begins (Wednesday)	January 8, 2014
Seminar Weekend #1 - FNP 1st Year Core Courses (week 5)	February 7-9, 2014
Seminar Weekend #1 - MSN Distance Courses (week 5)	February 8, 2014
Seminar Weekend #1 - DNP Courses (week 5)	February 8-9, 2014
Seminar Weekend #2 - FNP 1st Year Core Courses (week 10)	March 14-16, 2014
Seminar Weekend #2 - MSN Distance Courses (week 10)	March 15, 2014
Seminar Weekend #2 - MSN Distance Courses (week 10)  Seminar Weekend #2 - DNP Courses (week 10)	March 15, 2014  March 15-16, 2014
	·
Seminar Weekend #2 - DNP Courses (week 10)	March 15-16, 2014

#### Summer 2014

Summer Semester Begins	April 28, 2014
Commencement - Graduating Students	May 14-16, 2014
Seminar Weekend #1 - ALL Graduating Students (week 4)	May 16, 2014
Seminar Weekend #1 - Non-Grads: FNP 1st Yr Core Courses (week 4)	May 16-17, 2014
Seminar Weekend #1 - Non-Grads: DNP Courses (week 4)	May 23, 2014
Seminar Weekend #1 - Non-Grads: MSN Distance Courses (week 4)	May 24, 2014
Summer Break Begins	June 16, 2014
Summer Break Ends	June 22, 2014
Seminar Weekend #2 - "FNP Review" (Mandatory All FNP Students)	July 9-11, 2014
Seminar Weekend #2 - FNP 1st Year Core Courses (week 10)	July 11-12, 2014
Seminar Weekend #2 - MSN Distance Courses (week 10)	July 12, 2014
Seminar Weekend #2 - DNP Courses (week 10)	July 13, 2014
DNP, FNP, MSN Pre-program Begins - Incoming Students	August 4, 2014
All Incoming Students - Welcome Week (Mandatory)	August 6-9, 2014
Summer Semester Ends - All Distance Continuing Students	August 1, 2014
Summer Semester Ends - MSNE Continuing Students	August 8, 2014

# College of Optometry Doctor of Optometry Program

#### Accreditation

The Doctor of Optometry program at Western University of Health Sciences is fully accredited by The Accreditation Council on Optometric Education (ACOE). The ACOE (243 North Lindbergh Avenue, St. Louis, Missouri: telephone number 800-365-2219) is the accrediting body for professional degree programs offered by all optometric institutions in the United States.

#### Vision

Our vision is to be a progressive leader in optometric education and to improve the way health care is delivered world-wide.

#### Mission

The mission of the Western University of Health Sciences College of Optometry is to graduate caring, comprehensive health care professionals who will serve the needs of a diverse global society. The College emphasizes rehabilitation of the visual system, neuro-optometry, and interprofessional education. We advance the profession of optometry trough innovation in health care education, research and patient care.

#### **Core Values**

We value a rich, humanistic tradition and are committed to professional collaboration, community involvement, accountability, integrity, and respect.

#### **Goals and Objectives**

The College goals include teaching and learning, research and scholarly activity, and community and public service.

- 1. Matriculates will complete the educational and clinical programs successfully.
- 2. Graduates will interact with patients and other health care professionals in a competent, caring and humanistic way.
- 3. Graduates will be prepared for diverse cultures, experiences and practice settings.
- 4. The curriculum will emphasize the distinctive elements of the program.
- 5. The expertise of the faculty will be aligned with the program emphases as part of a comprehensive educational program
- 6. Research conducted will align with the program emphases as part of a comprehensive educational program.
- 7. High quality patient care will be provided in the program emphases as part of a comprehensive educational program.

- 8. The College will develop, implement, and evaluate improved aspects of health care education, research, and patient care and disseminate best practices and innovations.
- 9. Interprofessional, collaborative, and community-based projects in health care education, research and patient care will be conducted.

#### **Student Learning Outcomes**

A graduating Doctor of Optometry from the Western University of Health Sciences College of Optometry must demonstrate ethical and professional standards appropriate to a health care professional, as well as demonstrating the biomedical knowledge required to enhance and extend the quality of life in our communities by enhancing visual function.

Western University of Health Sciences College of Optometry adopts the definition of entry level attributes for students graduating from schools and college of optometry as recommended by the Association of Schools and Colleges of Optometry (ASCO). The "30 Attributes" of the graduate are shown below.

The graduate shall be:

#### Knowledgeable

The graduate shall demonstrate knowledge of:

- Basic body systems, with special emphasis on the ocular and visual system and their interrelationships to the body as a whole.
- The various processes and causes that lead to dysfunction and disease, and the effect that these
  processes can have on the body and its major organ systems, with special emphasis on the
  ocular and visual systems.
- Mechanisms of actions of the various classes of pharmaceutical agents. Their interactions and their safe and effective use for the treatment of disease and conditions affecting the eye and visual system.
- The structures and processes contributing to the development of refractive error and other optical and perceptual abnormalities of the visual system.
- The optics of the eye and ophthalmic lens systems (including spectacles, contact lenses and low vision devices) used to correct refractive, oculomotor and other vision disorders.
- Visual development and vision function with respect to deviation and enhancement such as, but not limited to, strabismus, amblyopia, oculomotor, accommodation, and visual perception.
- Vision therapy and other rehabilitative methods used for the management of common visual disorders.
- The psychosocial dynamics of the doctor/patient relationship and an understanding of the social, psychological, and economic forces affecting diverse patient populations.

- Practice management structures and strategies as they pertain to the various practice settings.
- The critical elements of verbal and written communications and, clear and appropriate documentation of patient encounters.

#### Skillful

The graduate shall demonstrate the ability to:

- All the skills required for the diagnosis, triage, management and/or treatment of common visual conditions and ocular diseases
- The ability to order and interpret frequently needed laboratory and diagnostic procedures.
- The critical thinking skills needed to assess the patient's visual and physical status and to interpret and synthesize the data to formulate and execute effective management plans.
- The ability to prescribe and/or use ophthalmic materials, contact lenses, vision therapy, low vision systems, pharmaceuticals, and certain surgical procedures, to treat and otherwise manage common vision disorders and disease.
- The ability to recognize and initiate the coordination of care for patients requiring advanced medical or specialty care.
- The ability to recognize life threatening conditions and to initiate intervention.
- Effective communication skills, both orally and in writing, as appropriate for maximizing successful patient care outcomes.
- The ability to realistically assess personal competencies and limitations.
- The ability to appropriately use all resources including the use of ancillary personnel, intra- and inter-professional consultation, co-management and referral in ensuring the best quality patient care.
- The ability to access knowledge, (including through the use of information technology), and manage information, and to apply that information in making decisions about patient care and health care delivery.

#### **Professional and Ethical**

The graduate shall demonstrate:

- A commitment to life-long learning and providing the highest standard of care.
- The ability to incorporate ethical principles into decisions affecting patient care and the practice of optometry.
- The ability to acquire, analyze and apply new information while making reasonable and informed decisions that are consistent with the interests and needs of the patient and broader community.

- Problem-solving and critical thinking skills that integrate current knowledge, scientific advances, and the human/social dimensions of patient care to assure the highest quality of care for each patient.
- The ability to recognize personal limitations regarding optimal patient care and to work with the broader health care community in providing the best care possible.
- An understanding and application of professional ethics and standards in the practice of optometry, always keeping patient's welfare foremost.
- Professionalism, by demonstrating honesty and integrity in all interactions with patients and their families, colleagues, and others with whom the optometrist must engage in his/her professional life.
- A respect for the dignity of every patient and a commitment to empathetic and confidential care.
- Professionalism in understanding the challenges to the optometric profession posed by potential conflicts of interest inherent in health care delivery.
- A commitment to be actively involved in organized optometry and the community.

# The OD Degree

The Doctor of Optometry degree (OD) is awarded in recognition of the highest level of professional education in optometry in the United States. To earn the OD degree, students must successfully complete four years of professional study subsequent to completion of their undergraduate, preprofessional prerequisites at an accredited college or university. Students who successfully complete this program are eligible to take state optometric licensing examinations. Most states have replaced the written examination with the National Board of Examiners in Optometry (NBEO) examinations which the students take during their academic career. Information on the NBEO licensing examination is available at <a href="http://www.optometry.org">http://www.optometry.org</a>. After passing this examination, graduates are licensed to perform all the duties and responsibilities of a practicing optometrist.

## **Admissions Policies and Procedures**

The College of Optometry at Western University of Health Sciences accepts applications from all qualified candidates without regard to race, religion, sex, sexual preference, or nation of origin. While grades and Optometry Admissions Test (OAT) scores are important in selecting candidates for admission, and may suggest future academic success, the Admissions Committee recognizes that these statistics, by themselves, do not guarantee later success as a doctor of optometry. Therefore, non-academic criteria are also important in making the selection. The College of Optometry seeks a diverse and balanced student population and considers factors such as a well-rounded background, work experiences, letters of recommendation, interest in and knowledge of the profession of optometry, and professional promise. To ascertain these factors, an on-campus interview is required prior to a final decision on an application. The College may exercise its discretion to rely upon additional considerations.

# **Application Requirements**

An application to the College of Optometry includes the following items:

- Primary Application: Submit primary application online through OptomCAS (Optometry Centralized Application Service). Applicants must pay a fee of \$150 to apply to one school or college of optometry. An additional \$50 fee will be charged for each additional school or college.
- **2. Supplemental Application:** All supplemental applications must be submitted electronically on or before May 1<sup>st</sup> of the year of entry.
- **3. Supplemental Application Fee:** There is a non-refundable \$65.00 application fee payable at the time of submission of your online supplemental application.
- **4. Prerequisite Course Worksheet:** Please list all prerequisite courses you are currently taking or plan to take. Prerequisite courses may be in progress during the academic year prior to matriculation. Final transcripts and/or final grades for all course work in progress must be received prior to orientation week.
- **5.** Letters of Recommendation (should be submitted through OptomCAS): We require three (3) recommendation letters. It is suggested that one letter be from an optometrist and one be from a faculty member or pre-health advisor who is familiar with your academic work.
- **6. Official Optometry Admission Test (OAT) Score Report:** The OAT is required and should be taken as soon as possible with the results released to the Western University of Health Sciences College of Optometry (#10).
- 7. International Student Application (ISA): International applicants, applicants who are not U.S. citizens and who are living in the U.S., and applicants who have applied for permanent residency but have not been approved at the time of application must answer all questions in the International Information section of the supplemental application.
- 8. Re-Applicants: You will need to submit a new set of official transcripts directly to OptomCAS. You will need to complete a new secondary application to WesternU. If you submitted the three required letters of recommendation in your previous application, you need to submit one new letter of recommendation. The additional letter should provide insight into the activities you have participated in since your last application submission and should be submitted through OptomCAS. If you did not submit at least three letters of recommendation in your previous application, you need to provide additional letters to meet our three letter requirement. At least one letter should provide insight into the activities you have participated in since your last application submission. New letters should be submitted through OptomCAS. If you have retaken your OAT since your last application, please request that a new official score report be released to WesternU.

## **Academic Requirements**

Academic requirements for admission include:

- 1. Completion of prerequisite courses as outlined below
- 2. Minimum 90 semester or 135 quarter units of undergraduate coursework
- 3. Although not required, having earned a BS or BA will likely strengthen your application

- 4. Optometry Admissions Test (OAT) scores
- 5. Letters of Recommendation
- 6. Proof of legal US residency, if required
- 7. Test of English as a Foreign Language (TOEFL) results, if required
- 8. Access to a portable personal computer meeting the minimum requirements (see below)

## **Prerequisite Courses**

The following courses must be completed at an accredited institution, in the United States or Canada, with a grade of "C" or better, prior to enrollment and are the minimum requirements for all applicants:

- 1. General Biology or Zoology with lab 8 semester or 12 quarter units
- 2. General (Inorganic) Chemistry with lab 8 semester or 12 quarter units
- 3. General Physics with lab 8 semester or 12 quarter units
- 4. English 6 semester or 8 quarter units
- 5. Organic Chemistry with lab 3 semester or 4 quarter units
- 6. General Microbiology or Bacteriology with lab 3 semester or 4 quarter units
- 7. Calculus –3 semester or 4 quarter units
- 8. Biochemistry –3 semester or 4 quarter units
- 9. Psychology –3 semester or 4 quarter units
- 10. Statistics 3 semester or 4 quarter units

# **Recommended Courses**

The following courses are not required, but are highly recommended.

- 1. Anatomy 3 semester or 4 quarter units
- 2. Physiology 3 semester or 4 quarter units

#### **Notes Regarding Prerequisite Coursework**

- 1. Introductory level courses in the sciences are not accepted
- 2. All prerequisite courses must be completed by the spring term of the matriculating year. No summer courses prior to matriculation will be accepted.
- 3. Pass/No Pass grades are not accepted for prerequisite coursework

- 4. One course cannot be used to satisfy more than one prerequisite
- 5. Advanced Placement courses will be accepted for English or Calculus courses only. AP courses will be accepted only if the undergraduate college has accepted the credit and the student has achieved a score of 4 or 5 on the College Board Advanced Placement Test.

#### **Student Selection Process**

The WesternU Student Affairs/Admissions Office assists the College in preparation, distribution and handling of all admissions-related materials, as well as in application processing. Applications for admission will be accepted each year from July  $\mathbf{1}^{\text{st}}$  to May  $\mathbf{1}^{\text{st}}$  for classes beginning in August of the next academic year. The College of Optometry will begin scheduling interviews as academically qualified applications are received.

After the applicants' file is complete, the College of Optometry Admissions Committee will review it to determine whether the minimum academic qualifications have been met, and whether the candidate will be granted an interview. If the candidate is deemed promising, he or she will be invited to the campus at his or her expense. The candidate should plan to spend a full day on campus for orientation and the interview. Orientation will consist of information on the curriculum, financial aid, student services, a tour of the campus, and time to meet with current WesternU students.

The interview team conducting the on-campus interview will complete a standardized assessment form. The admissions Committee will review the report from the interview and will also review the applicant file again to determine whether the candidate will be accepted. The options for a decision could include an offer of acceptance, placing a candidate on a wait list, or denial of admission. The applicant will be notified of the committee decision within three weeks of the interview.

The College of Optometry uses a rolling admissions process, which means that qualified candidates will be accepted on a first-applied basis throughout the open admissions period (July through May). Candidates who apply early have the best chance at acceptance.

All accepted applicants must complete a matriculation agreement form and send a tuition deposit of \$500, which applies to the first-year tuition, to confirm their space in the class. If an applicant fails to register, the tuition deposit is forfeited.

#### **Applicants with Foreign Coursework**

Applicants who wish to use coursework completed outside the United States must submit their transcripts for evaluation to a <u>Western University of Health Sciences Approved Service</u> at the candidate's expense. A course-by-course evaluation is required and all coursework must be designated as undergraduate, graduate or professional. WesternU only honors evaluations from one of the above services. The official evaluation must be submitted to OptomCAS.

#### International Students

International students and any other applicants who are not U.S. citizens and who are living in the U.S. should be prepared to provide proof of legal U.S. residency at the time of interview. Proof of legal U.S. residency is required prior to any offer of acceptance. For more detailed information, please visit our web page at <a href="http://www.westernu.edu/international-welcome">http://www.westernu.edu/international-welcome</a>. It is the responsibility of the applicant/matriculant to assure that they are fully and legally qualified to attend an educational program in the United States for the duration of the program.

#### **Transfers from Other Schools**

# **Eligibility**

To be eligible for admission with advanced standing as a transfer student, applicants must be currently enrolled in a United States (US) or Canadian Optometry school, and in good academic and professional standing. First consideration will be given to applicants whose personal circumstances compel them to transfer.

#### **Application Process**

While the Western University of Health Sciences, College of Optometry does not have a specific program designed for candidates seeking admission to the OD program with advanced standing, it is possible for optometry students currently enrolled in a US or Canadian Optometry school to be considered for admission with advanced standing contingent on space availability. To initiate the process, applicants need to submit a detailed letter describing the reason for the transfer request to the Office of Admissions no later than February 1<sup>st</sup> of the year that they wish to matriculate. After review of the submitted request and the projected space availability for the upcoming academic year, the Admissions and Selection Committee will forward an application to the applicant. The completed application should be returned to the Office of Admissions along with the following:

- The supplemental application fee (payable to the Western University of Health Sciences)
- i) A letter from the Dean of the applicant's current optometry school, verifying that the student is currently enrolled and is in good academic and professional standing
- j) Official OAT score report
- k) Official undergraduate transcript
- Official optometry school transcript
- m) National Board of Examiners in Optometry (NBEO) score reports (where applicable)
- n) Current optometry school catalog

#### **Preliminary Review**

Once the required documents have been submitted, the College of Optometry's Admissions and Selection Committee will review the applicant's completed application. Candidates being considered for admission with advanced standing will be interviewed by the Committee.

#### **Review by Course Directors**

Based on the outcome of the interview, and at the request of the Admissions and Selection Committee, candidates who are recommended for possible admission with advanced standing will need to provide copies of all course syllabi for courses completed and in progress at their current optometry school. College of Optometry Course Directors (or their designees) will review the course syllabi and, if necessary, communicate directly with candidates when further clarification is needed. Course Directors /designees will provide the Office of Academic Affairs with recommendations regarding the candidate's placement within the curriculum.

#### **Admissions and Placement Decisions**

The Admissions and Selection Committee makes the final decision regarding admission. The Student Performance Committee develops specific recommendations regarding placement or modification to the student's curriculum or course requirements to accommodate individual needs. The Office of Admissions and the Office of Academic Affairs coordinate final placement arrangements. The Admissions and Selection Committee will make a recommendation to the Dean who will make the final decision no later than April 1st. The Dean notifies applicants regarding admission decisions and, if indicated, placement decisions. Space must be available within the projected class in order for an offer of admission to be extended.

# Registration

All OD students are required to register by the registration deadlines specified by the University Registrar. Registration dates are posted at: <a href="http://www.westernu.edu/registrar-online-information">http://www.westernu.edu/registrar-online-information</a>. Failure to register by the deadline may be grounds for administrative withdrawal. All students registering after the posted deadline will be assessed a \$30.00 per business day late fee.

Full tuition and fees and all prior debts must be paid in full on or by posted deadlines each academic year. Matriculation is subject to the satisfactory completion of all academic requirements and payment of all outstanding debts to the University. The receipt of a final transcript(s) from all colleges/universities attended and a physical examination with documentation of required immunizations prior to registration are additional requirements for incoming students. Also, all students must show proof of current health insurance coverage by the deadlines provided by the University Registrar. This coverage must be maintained or in effect throughout the academic year. If there is no proof of current coverage, students will be automatically enrolled in the school sponsored insurance plan.

Attendance at Orientation is mandatory for all incoming first-year students.

#### **Full-time/Part-Time Status**

All students enrolled in at least one class/rotation are considered full-time students.

#### **Time Limits**

The Doctor of Optometry program is designed to be completed in four (4) years of full-time study. The requirements for the degree must be fulfilled within 6 years from the date of initial matriculation to the program.

#### **OD Student Requirements**

## **Classroom Responders**

The College of Optometry requires that each student have a classroom responder, approved by the College, which is to be purchased from the University Bookstore. Classroom responders are electronic devices that will be used to enhance interactive learning in classrooms. Individual responders must be registered to only one (1) student. The responders may be used to administer and score assessments; therefore, students are required to bring their responders to each class.

## On-Line Educational Portfolio

The College of Optometry requires each student to participate in the development and management of an on-line educational portfolio. The portfolio will be used to keep track of the student's educational experiences and his/her progress toward the achievement of the educational standards as set forth by the College.

# Personal Computers (PC)

Students are required to have a personal computer and will begin using it the first day of class. PCs must meet pre-determined technical specifications that are updated annually. Specifications can be accessed by visiting the WesternU website at:

http://www.westernu.edu/bin/computing/laptop-requirements-COO.pdf

The PCs will be used for e-mail communication with classmates and faculty, for accessing computer and server-based course information and instructional software, for searching online bibliographic databases and creating electronic bibliographies, and for participating in exercises in clinical education and pre-clinical laboratory assignments. PCs are required to run Electronic Health Records software and must meet exact specifications to support these needs. In addition, it is recommended that each student have access to a printer.

Computers will be needed by students on campus as well as at their pre-clinical laboratories, clinical assignments, and community-based screening programs; therefore, portable computers are required instead of desktop models. WesternU does not support Apple computers. Vendors of software used by students at the College of Optometry have stated that their products cannot be guaranteed to work on Apple products.

#### **Tuition and Fees**

By action of the Board of Trustees, OD tuition and fees for the 2013-2014 academic year (subject to change) are as follows:

\$33,740.00	Annual Tuition (OD Classes of 2016-2017)
\$32,945.00	Annual Tuition (OD Classes of 2014-2015)
\$40.00	Student Body Fee (1 <sup>st</sup> -3 <sup>rd</sup> year)
\$20.00	Student Body Fee (4 <sup>th</sup> year)

#### **Other Fees and Expenses**

\$1,000.00	Recommended Text Books (per year, estimate)
\$2,500.00	Required Equipment (1 <sup>st</sup> year, estimate)
\$4,000.00	Required Equipment (2 <sup>nd</sup> year, estimate)
\$1,500.00	Required Equipment (3 <sup>rd</sup> and 4 <sup>th</sup> years, estimate)
\$550.00	Board Review Course Materials (3 <sup>rd</sup> year, estimate)
\$2,500.00	Required personal computer (estimate)
65.00	Classroom Responder
\$75.00	Educational Portfolio Software
\$40.00	AOSA Annual Dues (optional)
\$60.00	Criminal Background Investigation (estimate)
\$30.00	Registration Late Fee (per business day)
\$350.00	Graduation Fee
\$470.00	Annual Parking Permit (Auto)
\$25.00	Parking Permit Replacement Fee
\$40.00	Locker Key Replacement Charge
\$10.00	Official Transcript (Each)
\$21.00	Rush Transcript, First Class Mail (Each)
\$25.00	Rush Transcript, Federal Express (Each)
\$10.00	Student ID Replacement Fee
TBD	Breakage Fee (Replacement Cost)

#### **National Board Fees**

All states require passage of the National Board of Examiners in Optometry (NBEO) examinations for licensure. Students will be eligible to take NBEO exams in their third and fourth years of study. Fees are subject to change by NBEO and are updated regularly. These fees can be found online at <a href="http://www.optometry.org/fees.cfm">http://www.optometry.org/fees.cfm</a>. Fees and application requirements are the responsibility of the student.

#### **Clinical Rotations Expenses**

During the third and fourth years of the curriculum, students may be required to rotate through off-campus clinical experiences away from the Pomona area, which is a self-imposed expense. In addition, students may be required to return to campus several times during the clinical years for various educational experiences, conferences, etc. Any travel, food, housing or other expenses incurred by participating in these activities are the responsibility of the student.

#### **Financial Assistance**

All Optometry students are eligible to apply for need-based financial aid. For more information, please call the Financial Aid Office at 800-346-1610 or visit the Financial Aid Web site at http://www.westernu.edu/xp/edu/financial/financial-about.xml.

## **Academic Requirements**

#### **Academic Support**

The faculty and administration of the College of Optometry are committed to providing support for academic success in the program. Students are encouraged to take an active role in monitoring their own academic progress to ensure adequate performance in all assignments. Student academic performance is monitored on an ongoing basis by faculty members, the Assistant Dean of Student

Affairs, and the Associate Dean of Academic Affairs. The College of Optometry's Assistant Dean of Student Affairs serves as the primary contact for students seeking support.

#### **Attendance and Absences**

Attendance is required at all scheduled instructional periods, including orientations, group meetings with tutors, scheduled educational laboratories and experiences, and all clinical assignments. Absence from instructional periods for any reason does not relieve the student from responsibility for the material covered during these periods.

Students are required to be present for all scheduled examinations and cannot begin an examination more than 15 minutes after the scheduled starting time. There are no planned unexcused absences in advance for scheduled course examinations. In the case of emergency circumstances (e.g., illness or accident) students may request an excused absence allowing them to take a make-up examination. Requests for excused absences (with appropriate documentation) must be made to the Associate Dean of Academic Affairs, who in turn will provide the decision for excused absences to the course instructor.

Absence from an examination due to unforeseen circumstances, including illness, should be reported to the Associate Dean of Academic Affairs by telephone or email as soon as possible prior to or after the exam has been administered. A written explanation of the absence (including documentation on physician letterhead, in the case of illness) must be provided to the Associate Dean of Academic Affairs the next day the student is on campus.

If a student misses an examination, the Associate Dean of Academic Affairs will determine whether the absence is excused or unexcused. If the absence is excused, the student will be permitted to take a make-up examination, the nature and time of which will be determined at the discretion of the course instructor, and the student will receive full credit for the make-up examination.

If the absence is unexcused this is grounds for summary failure (a score of zero) for that examination. The course instructor may grant a score of zero or may offer the student the option of completing an alternate assignment or alternate test for partial credit at his or her discretion.

#### **Leave of Absence**

A leave of absence may be initiated at the request of the student for personal reasons. Students requesting a leave of absence should communicate directly with the Assistant Dean of Student Affairs. The duration, terms, and standards for readmission will be communicated by the Assistant Dean of Student Affairs in writing to the student. The Leave of Absence policy will be administered in alignment with the University's General Academic Policies and Procedures.

#### **Examinations**

Examination schedules will be provided at the beginning of every course and included in each course syllabus. In addition, unannounced examinations may occur during any portion of the curriculum at the discretion of the course instructor.

#### Standards of Academic and Professional Conduct

Honesty and integrity are among the most valued traits of an optometrist, and each student is expected to assume personal responsibility for those traits. Academic dishonesty includes cheating, plagiarism, using unauthorized resources during examination(s), and signing another person's name to an attendance or examination document.

Matters of academic dishonesty and professional misconduct will be handled consistently with the University's guidelines for Hearings involving alleged violations of the standards of professional conduct as described in the University's General Academic Policies and Procedures.

#### **Student Performance Committee**

The Student Performance Committee is responsible for maintaining the academic and conduct standards within the College of Optometry.

For purposes of clarification, "performance" is defined as those activities of behavioral-conduct or academic nature that negatively affects or impairs the continued ability of a student to maintain good academic standing within the College of Optometry.

The Student Performance Committee also has the responsibility of recommending to the Faculty as a whole the awarding of the degree of Doctor of Optometry to all students who satisfactorily complete all requirements for graduation as stated in the University Catalog.

All recommendations of the Student Performance Committee shall be in writing to the Dean or Associate Dean of Academic Affairs, who will make the information available to the affected student. The Committee Chair will provide recommendations on remediation, probation, or suspension to the Associate Dean of Academic Affairs. The Committee Chair will provide recommendations on dismissal to the Dean. Guidelines for committee actions are included in the following section.

#### **Promotion**

Promotion is defined as academic and professional progression from one academic year to the next. The Student Performance Committee will recommend students to the faculty for promotion. A student may not be recommended for progression from one academic year to the next with an outstanding grade of "I", "U", "NP", or "NCR" in a required course, a semester GPA less than 2.00 for two consecutive semesters, or a cumulative GPA less than 2.00. When considering a student for promotion, the faculty will consider ethical, professional, and personal conduct as well as academic performance (see University's General Academic Policies and Procedures section of the catalog).

# Graduation

A student will be recommended for the Doctor of Optometry degree provided he/she:

- q. Is not on probation or suspension and has completed all prescribed academic and clinical requirements with a cumulative grade point average of above 2.00 and has no outstanding grade of "I," "NCR," or "U".
- r. Has demonstrated no serious deficiencies in ethical, professional, or personal conduct, as defined in University Catalog, "General Academic Policies and Procedures" section, which would make it inappropriate to award the degree of Doctor of Optometry.
- s. Has complied with all the legal and financial requirements of the University as stated in the University Catalog.
- t. Has attended in person and participated in the Commencement ceremony at which time the Doctor of Optometry degree is conferred. Unless special permission has been granted by the Dean, each student must participate in their respective commencement ceremony. If the

Dean grants special permission for excusal from commencement, the graduate may be required to present themselves to the Dean or their designee at another specified date to take their profession's oath before their diploma will be released. Requests for excusal will only be granted for extenuating circumstances, such as a prior military commitment.

Students may participate in commencement activities provided they will complete all requirements of the program by December 31<sup>st</sup> of that calendar year. No student will receive his or her degree until the student has completed all requirements for graduation. Degrees will be dated as appropriate to completion date.

# **Standards of Academic Progress**

A student who is neither eligible for dismissal nor on academic probation is considered to be in satisfactory academic standing. A student who is eligible for dismissal or on academic promotion is considered not to be in satisfactory academic standing. Students must maintain a semester and cumulative grade point average of C (2.00) on a yearly basis during all four years of the curriculum to be considered making satisfactory academic and professional progress. All grades of Incomplete (I) must be successfully completed, and "U," "F," or "NCR" grades in any course or clinical assignment must be satisfactorily remediated prior to promotion or graduation. If a student leaves a clinical assignment before it is finished without the permission of the Associate Dean of Academic Affairs, or is asked to leave an assignment by the Clinical Site Coordinator, a grade of "NP" will be assigned.

#### **Review of Student Performance**

Student performance is reviewed on an ongoing basis by the Associate Dean of Academic Affairs. Determination of eligibility for dismissal or for probation will be assessed at the conclusion of each course as well as at the end of each semester. Since courses may conclude prior to the end of the semester, a student may be placed on probation or become eligible for dismissal prior to the end of an academic term.

The Student Performance Committee makes recommendations to the Dean or Associate Dean of Academic Affairs regarding actions to be taken in cases of poor student performance. A range of options may be recommended, including, but not limited to, dismissal from the program, remediation of an individual course or activity, a modified program or repetition of an entire year of the program. The Dean or Associate Dean of Academic Affairs will make the final decision on this recommendation and inform the student of that decision. The student has a right to appeal such decisions to the Provost (excepting decisions that only place a student on academic probation).

# **Probation or Academic Suspension**

Students whose performance is not so poor as to render them eligible for dismissal will nevertheless be placed on academic probation or academic suspension for inadequate academic progress if any of the following occur:

Students will be placed on academic probation if any of the following occur:

- Cumulative grade point average is below 2.00
- Grade point average is below 2.00 in two consecutive semesters
- Student earns a final course grade of U (Fail), NP (No Pass), NCR (No Credit), or R (Remedial)

- Student earns three or more final course grades of "D" in one semester
- Student earns three or more final course grades of "D" within one curriculum track or course series (e.g., Optical Science)
- Student earns two or more grades of I (Incomplete) in one semester
- Students will be placed on *disciplinary probation* if any of the following occur:
- A pattern of unexcused absences from scheduled learning activities is demonstrated
- When a student demonstrates deficient ethical, professional or personal conduct

When the Associate Dean of Academic Affairs determines that a student is placed on probation according to the conditions listed above, he/she will call for a Probation Hearing, unless the grade was earned in a course in the fourth-year externship Patient Care Services track (OPTM 7008, OPTM 7009, OPTM 7010, OPTM 7011), and so inform the affected student, the Assistant Dean of Student Affairs, and the Chair of the Student Performance Committee.

Students who are on probation must meet with the Associate Dean of Academic Affairs or their designee to monitor progress at least once a month. It is the student's responsibility to contact the Assistant Director of Optometric Education to arrange these meetings or contacts. Students who earn a grade of NP or R in a course in the fourth-year externship Patient Care Services track (OPTM 7008, OPTM 7009, OPTM 7010, and OPTM 7011) must work with the Assistant Director of Optometric Education or the Coordinator of the fourth-year externship program to devise a learning plan that leads to remediation or a non-pass.

Students on academic probation must bring their cumulative GPA to a 2.00 or greater average and satisfactorily remediate every failed course within two semesters of the imposition of academic probation in order to be removed from probation. If they do not meet these requirements, the student will be eligible for dismissal from the Doctor of Optometry program (see section on Eligibility for Dismissal below). A student who earns a new final course grade of U, NP, NCR, or R while on probation by virtue of not having remediated a previously earned probation will be considered to have been placed on probation again. Students on academic probation for any reason are not permitted to hold leadership positions in extra-curricular activities associated with the University (i.e. work study) and/or with professional associations.

Students who are directed to discontinue enrollment and return to repeat course(s) or an entire year at a later date will be placed on Academic Suspension. Students on Academic Suspension are not registered as an active matriculant and should use this time to remediate for the deficiency for which the Academic Suspension was levied.

#### Financial Aid Warning Policy (Title IV and Title VII)

If a student is not making Satisfactory Academic Progress (SAP) they may be placed on "Financial Aid Warning" status for the next payment period and continue to receive financial aid for that period. Financial Aid is any financial assistance offered to the student for paying for their education, such as loans, scholarships, Federal Work-Study, grants and stipends (judged on the criteria of the stipend). Students who fail to make SAP by the end of the payment period lose Financial Aid eligibility.

It is the policy of the Financial Aid Office (FAO) that once a student has been placed on academic probation for not meeting SAP standards as defined by the college, the FAO will automatically place the student in a Financial Aid Warning status. During the next academic term, if the student does not meet SAP standards and the college places the student on academic suspension, the student will no longer be eligible for financial aid. If the student appeals the academic suspension and the appeal is approved, financial aid will be reinstated. If the student is directed to audit courses, those courses will **not** be covered by financial aid.

#### **Tutorial Assistance Program**

A Tutorial Assistance Program (TAP) has been established to assist students experiencing academic difficulty. Students will be recommended for this program by a faculty advisor or professor. Students may self-identify to TAP to receive assistance. The tutors will be chosen on the recommendation of the faculty in each discipline. Group tutoring is the methodology most used by the TAP department. For assistance, contact the Learning Enhancement and Academic Development Office (LEAD).

#### Remediation

The educational objectives that underlie remedial teaching and evaluation are the same as the educational objectives that underlie regular courses in the curriculum. Students who are placed on probation or who are eligible for dismissal may be given the opportunity to remediate their weaknesses when deemed appropriate. After consultation with the course instructor the Student Performance Committee may recommend one of the following means for remediation.

- The taking, and passing, of a comprehensive examination
- Completion of special projects or studies in the deficient area(s)
- Repeating of the course or clinical assignment
- Repeating of the academic year

The Associate Dean of Academic Affairs will decide the means for remediation. The grade(s) achieved in the remediation will be the grade(s) recorded on the student's transcript, except that the highest grade a student may earn by options 1 or 2 (above) is the lowest passing grade offered in the course. The grade achieved by remediation will be re-recorded on the transcript next to the original grade. Grades earned during remediation of a course or clinical assignment will be reviewed critically by the Student Performance Committee.

A student who is required to repeat a course must be notified in writing by the Associate Dean of Academic Affairs at least fifteen (15) working days prior to the start date, or within fifteen (15) working days after the close of the academic year (June 30) in which the student is presently enrolled, whichever comes first. Notification must either be sent by Certified Mail or hand-delivered to the student and must be acknowledged with the signatures of the Associate Dean of Academic Affairs and the student.

If a student is directed to repeat a course, the grade for repeated course will be recorded on the official transcript. Only the most recent grade received for a repeated course will be included in the student's GPA calculation. Students will be charged full tuition for repeated coursework.

If a student fails to achieve remediation within the designated time frame for any reason, then that student will automatically become eligible for dismissal and will be referred to the Student Performance Committee by the Associate Dean of Academic Affairs, as described above.

### **Modified Program**

Under unusual circumstances, a student may be offered the opportunity to take a modified curriculum or program, such that the time to complete the program could be extended beyond four years, but not to exceed six years. A modified program may consist of a reduced course load, alternative course sequencing, the addition of OPTM 7101 and/or 8122, and/or other modifications in support of the college's learning outcomes. The particular sequence and timing of courses in the modified program is to be arrived at through consultation among the student, the Assistant Dean of Students, and the Dean or her designate. The student will have the right to accept or to reject the modified program as offered. A student who has failed to remediate a course in which he has earned a grade of U may be offered the opportunity to remediate the course by retaking it as part of a modified program. Students enrolled in either 7101 or 8122 are required to adhere to the above mentioned academic standards.

# **Dismissal from the Program**

The Faculty of the College of Optometry may require dismissal of a student from the optometry curriculum for failure to meet standards of scholarship, attendance, or conduct. A student will become eligible for dismissal under at least one of the following conditions:

- Cumulative grade point average at the end of the first professional year of less than 1.50
- Cumulative grade point average below 2.00 after having been on probation in any previous semester (see conditions for Probation below)
- Student earns more than one grade of "U", "F", or "NCR" in an academic term
- Student is placed on probation for the third time
- Student fails to successfully remediate any required course or clinical assignment
- Student fails to achieve remediation for any reason within the designated time frame
- Student demonstrates a pattern of unexcused absences from scheduled learning activities
- Student demonstrates deficient ethical, professional or personal conduct

When the Associate Dean of Academic Affairs determines that a student has become eligible for dismissal according to the conditions listed above, he/she will call for a Dismissal Hearing, and so inform the affected student, the Assistant Dean of Student Affairs, and the Chair of the Student Performance Committee in a timely manner. The Student Performance Committee will schedule a hearing with the student in a timely manner after being notified. The Student Performance Committee makes recommendations regarding dismissal directly to the Dean. The decision to dismiss the student will be rendered by the Dean of the College based on committee recommendations, adherence to procedures and processes, and any new information provided by the student. In the event that the student is dismissed by the College, he or she has the option to appeal the decision to the Provost of the University

as specified in the University's General Academic Policies and Procedures contained in the Overview section of this Catalog.

A student who becomes eligible for dismissal, but is not dismissed immediately, will be considered to be on Probation and/or Academic Suspension.

#### Readmission

Students dismissed from the program must reapply to be considered for readmission. All students readmitted after being dismissed will be subject to all curricular requirements in effect at the date of rematriculation. Failure to achieve these requirements will result in permanent dismissal from the program. All readmitted students will be placed on academic probation for the remainder of the program and may be dismissed at any time due to unsatisfactory performance. Exceptions to these requirements may be granted by the Dean after consultation with the Associate Dean for Academic Affairs.

#### **Appeal Process**

Students may appeal decisions regarding suspension, student conduct, academic progression/promotion, and graduation according to the regulations listed in the General Academic Policies and Procedures section in the Overview section of the University Catalog.

# **Evaluation and Grading**

The College of Optometry uses letter grades A through U and Pass/Fail with clinical grading levels of Honors, Pass, Remedial, or Fail. Honors/Pass/Remedial/Fail courses will not be assigned letter grades. The student must satisfy the requirements of these courses, as determined by the faculty teaching the courses, to receive credit. Course grading scales will be published in each course syllabus. Letter grades assigned may vary from course to course, depending on the type of material and required competencies. Courses that are taken jointly within the COMP curriculum will have their own College of Optometry course number and course requirements and grading standards as determined by the College of Optometry faculty. The Patient Care Services course sequence will be graded on an Honors, Pass, Remedial, or Fail basis.

## **Grading Scale, Didactic Courses**

<u>Grade</u>	<u>Equivalent</u>	<b>GPA Points</b>
Α	Excellent	4.00
В	Good	3.00
С	Satisfactory	2.00
D	Unsatisfactory	1.00
U	Fail	0.00
CR	Credit	N/A
NCR	No Credit	N/A

#### **Grading Scale, Clinical Courses**

<u>Grade</u>	<u>Equivalent</u>	<b>GPA Points</b>
НО	Honors	N/A
Р	Pass	N/A
R	Remedial	N/A
NP	No Pass/Fail	N/A

#### **Administrative Grades**

<u>Grade</u>	<u>Equivalent</u>	<b>GPA Points</b>
AU	Audit	N/A
1	Incomplete	N/A
W	Withdrawal	N/A
M	Missing	N/A

## Incomplete

A grade of Incomplete (I) indicates that a student has not been able to finish all required work for issuance of a letter grade. An "I" is not counted in the grade point calculations until a letter grade is issued to replace the "I".

Replacement of an "I" will be under the direction of the instructor-of-record with the approval of the Associate Dean of Academic Affairs. Grades of Incomplete must be replaced with a letter grade at a time designated by the instructor-of-record but no later than three weeks following the end of the semester. Incomplete grades that are not replaced with a letter grade within three weeks of the end of the term will automatically be changed to a grade of "U," "F", or "NCR". Students earning an incomplete grade in a clinical assignment may have the completion deferred for a period of time greater than three weeks with approval from the instructor-of-record and the Associate Dean of Academic Affairs.

#### **Audit**

An "AU" (Audit) is assigned to a student who pays tuition for the course and attends class activities but does not complete examinations and does not receive course credit.

#### Withdrawal

A "W" (Withdrawal) is assigned to a student who initiates voluntary withdrawal prior to the administration of the final exam or the final day of a clinical course or rotation. Students may also be assigned a "W" by the instructor of record.

# **Grade Reports**

Course grades are electronically entered by the Course Leader into BanWeb. Grades may be viewed and unofficial transcripts are available on the BanWeb student record system. For more information on how to access the BanWeb student record system, visit the Registrar's website at <a href="http://www.westernu.edu/registrar-about">http://www.westernu.edu/registrar-about</a>. The student must satisfy course requirements as defined by the course syllabus and clinical handbook to receive academic credit. Course syllabi inform students of the levels of academic accomplishment required for each grade.

A semester and cumulative grade point average are calculated and posted on each student's transcript. Courses graded on a Credit/No Credit or Honors/Pass/Remedial/No Pass basis do not

contribute to the calculation of the grade point average. Class ranking is also available upon request from the Registrar's Office.

#### **Grade Changes/Appeals**

For all courses, no grade will be changed unless the course instructor-of-record certifies in writing to the Associate Dean of Academic Affairs and the Registrar that an error in computing or recording the grade occurred. For on-campus courses, students have a maximum of three weeks from the time examination results are returned to them to bring any errors or irregularities in grading to the attention of the instructor. All recorded grades remain on the official transcript unless a clerical error has occurred. A student has no more than four (4) weeks to appeal a course grade after the grade has been entered into the student's official transcript by the university Registrar. An appeal of a course grade should be directed to the Associate Dean of Academic Affairs, who will initiate an investigation.

Within the above-designated time, grade changes for clinical assignments will be considered only under the following circumstances:

- 1. When the Associate Dean of Academic Affairs receives a signed written statement from the clinical site coordinator specifying that a clerical error has been made regarding a grade, and that the purpose of the change is to correct the clerical error.
- 2. When the clinical site coordinator to whom the student was assigned submits a signed written request to have the grade changed. The request must include justification for making the change.

#### **Credit Calculations**

Credit hours for the curriculum will be allocated in accordance with the following ratios: 12 hours of assigned lecture will be equivalent to 1.00 credit hours; 24 hours of laboratory instruction and/or practice sessions will be equivalent to 1.00 credit hour. Credit hours for clinical patient care (Patient Care Services course sequence) will be assigned as 16 hours to 1.00 credit hour. Credit hours are rounded to the nearest 0.50.

# **Issues/Dispute Resolution Procedure**

When an issue or dispute arises between students, the issue/dispute resolution process starts with communication among the involved students. If a satisfactory resolution is not arrived at that level, the matter should then be addressed with the course leader. If the problem is not resolved at the course leader level, the matter should be brought to the Assistant Dean for Academic Affairs, followed by the Dean and then the Provost/COO. If the matter has not been resolved at those levels, the final arbiter is the President.

When an incident arises involving a faculty member, the first step in the issue/dispute resolution process is discussion with the faculty member. If the matter is not satisfactorily resolved at that level, then the matter should be referred to the Dean, and Provost/COO, in that order. The final arbiter is the Board of Trustees.

When an incident arises involving a staff member, the dispute resolution process begins with the Dean. The Office of Human Relations is the final arbiter.

Failure to follow this sequence of steps will only serve to delay the appropriate resolution of the issue or dispute as the matter will only be referred back to the correct level in this chain of responsibility.

# **Curriculum Organization**

The curriculum at the College of Optometry is a four-year, full-time academic and clinical program leading to granting the degree of Doctor of Optometry (OD). The over-arching themes of the curriculum include:

- Early entry into patient care
- Integration of basic and clinical sciences
- Interprofessional education in collaboration with other health disciplines
- Preparation for entry-level optometric care along with a special emphasis on optometric rehabilitation

#### **Instructional Methods**

A number of different instructional methods will be used to support optimal teaching and learning. Years one through three of the curriculum will include didactic lectures, biomedical laboratories, preclinical laboratories, small group learning, clinical education, and service learning. A variety of pedagogical techniques will be used including case-based learning, development of critical thinking techniques, and fostering of clinical though processes. The fourth and final year of the curriculum will consist of full-time patient care experiences.

Because WesternU graduates are expected to practice in all states and regions, they must be prepared for the broadest scope of practice of any state in the United States. State optometric practice acts have been considered in the curriculum design. Mastery of advanced diagnostic techniques and cutting-edge clinical skills (as demonstrated through lab proficiencies) will enable graduates to practice full-scope optometric care.

A key to the proposed curriculum is to support and encourage collaboration between the various health professions. Interprofessional integration will be incorporated into the curriculum in several areas. It is anticipated that in the first year of the curriculum, optometry students will be enrolled in several didactic courses with the medical, dental, and podiatric students, including:

- 1. Introduction to the Study of Medicine
- 2. Head & Neck Anatomy
- 3. The Molecular and Cellular Basis of Medicine
- 4. Introduction to Disease, Immunity & Therapeutics
- 5. Neuroscience
- 6. Behavioral Medicine & Psychiatry

Students in the first and second years of the curriculum will also engage in integrated case-based learning within small groups, which will include representatives from each of the health disciplines on the WesternU campus. In the first and third years of the program, students from the College of Optometry will be enrolled, along with students from all health professions, in courses that include a

service learning component. The service learning curriculum will incorporate the design, implementation, and evaluation of community-based projects such as outreach to elementary schools and senior citizen groups. The service learning courses will include practical applications of health education, public health, epidemiology and biostatistics.

Interprofessional integration will also carry over to the clinical environment with the development of an interprofessional clinical service in the Patient Care Center, the on-campus facility. Faculty and students from different disciplines will learn from each other as they provide a team approach to the delivery of health care services. Videotaped patient care encounters that take place in the interprofessional clinic will form a unique digital case library for use in planned Interprofessional Grand Rounds.

The College of Optometry has incorporated into its mission a special emphasis on a unique learning opportunity: optometric rehabilitation. To set the foundation for a deeper understanding of neurological processes, students from the optometry program will enroll in the course, Neuroscience, which is presented in the medical school curriculum. This course integrates basic science disciplines of embryology, histology, neuroanatomy, biochemistry, physiology and pharmacology within a clinical context. Toward the goal of creating this special emphasis in optometric rehabilitation, the curriculum will also include didactic and laboratory instruction dedicated to the specialized discipline of optometric rehabilitation in the third year of the program. Ocular sequelae and visual consequences of neurological disease, along with perceptual problems and techniques for rehabilitation will be discussed.

In addition to preparing students for full scope optometric practice, the clinical education curriculum will also include components emphasizing optometric rehabilitation. The on-campus clinical programs will also be developed to include hands-on training in optometric rehabilitative patient care and community-based opportunities for optometric rehabilitation, such as in rehabilitation hospitals.

The fourth year is comprised of full-time (40 hours per week) clinical instruction and learning experiences to include:

- Primary Care Clinical,
- Advanced Optometric Care,
- Specialty Optometric Care, and
- Community Optometric Care

#### **Implementation**

Clinical faculty will implement the curriculum in a manner that balances the learning needs of the students and the educational resources available at the site. Clinical faculty and sites are encouraged to use a variety of teaching techniques including observation, monitored participation, video and audio recordings, computers, readings, individual discussions, and presentations by students, faculty and others to enhance learning.

#### **Procedural Skills**

Part of the College's expectation is that students will gain a knowledge and understanding of various procedural skills. In addition to proficiency in the psychomotor aspects of procedural skills, the College expects that the student will understand the indications, contraindications, risks, benefits, and alternatives for various procedures. Student performance of any procedure on a patient must be under the direct supervision of the assigned clinical faculty or their professional designee.

Year 1

Year 1, Fall Semester, OD 2017			
Course	Title	Credit Hours	
IPE 5000	Patient Centered Cases I	1.00	
OPTM 5001	Introduction to the Study of Medicine	0.50	
OPTM 5002	Ethics and Mindfulness in Practice	1.50	
OPTM 5003	Gross Anatomy	2.50	
OPTM 5004	Head and Neck Anatomy	2.00	
OPTM 5005	The Molecular and Cellular Basis of Medicine	10.50	
OPTM 5021	Principles and Practice of Optometry I: Vision Screenings	2.50	
OPTM 5022	Principles and Practice of Optometry II: Clerkship & Rehabilitation	3.50	
OPTM 5031	Ocular Anatomy	2.50	
OPTM 5032	Ocular Physiology	2.00	
OPTM 5051	Optical Science I: Geometric Optics	2.00	
OPTM 7001	Patient Care Services I	2.00	
	Semester Total:	32.50	
Year 1, Spring	Semester, OD 2017		
Course	Title	Credit Hours	
IPE 5100	Patient Centered Cases II	1.00	
OPTM 5101	Introduction to Disease, Immunity, and Therapeutics	5.00	
OPTM 5102	Neuroscience	3.00	
OPTM 5103	Behavioral Medicine and Psychiatry	2.00	
OPTM 5121	Principles and Practice of Optometry III: Refraction	6.50	
OPTM 5141	Vision Science I: Neural Basis of Vision	2.50	
OPTM 5151	Optical Science II: Mechanical and Introductory Ophthalmic Optics	1.00	
OPTM 5161	Practice Management I	1.00	
OPTM 7002	Patient Care Services II	4.00	
	Semester Total:	26.00	

# Year 2

Year 2, Fall Ser	mester, OD 2016	
Course	Title	Credit Hours
IPE 6000	Team Training in Healthcare I	1.00
OPTM 6021	Principles & Pract Optometry IV: Tissue Eval. Anterior Segment	6.00
OPTM 6031	Ocular Pharmacology: General Principles	1.00
OPTM 6041	Vision Science II: Monocular Sensory Aspects of Vision	5.00
OPTM 6042	Vision Science III: Development of Vision	2.00
OPTM 6043	Vision Science IV: Environmental Vision	1.00
OPTM 6051	Optical Science III: Geometric Optics (Part 2)	2.50
OPTM 6052	Optical Science IV: Ophthalmic Optics	2.00
OPTM 6053	Optical Science V: Physical Optics	3.50
OPTM 6071	Ocular Disease I: Diagnosis & Treatment of the Anterior Segment	3.50
OPTM 6091	Service Learning I	1.00
OPTM 7003	Patient Care Services III	4.00
	Semester Total:	32.50
Year 2, Spring	Semester, OD 2016	
Course	Title	Credit Hours
IPE 6100	Team Training in Healthcare II	1.00
OPTM 6111	Contact Lenses I: Theory and Practice	5.50
OPTM 6121	Principles and Practice V: Tissue Evaluation of the Posterior	5.00
OPTM 6141	Vision Science V: Binocular Visions and Ocular Motility	4.00
OPTM 6151	Optical Science VI: Physiological Optics	3.50
OPTM 6152	Optical Science VII: Principles of Optical Dispensing & Mgmt.	1.00
OPTM 6171	Ocular Disease II: Diagnosis and Treatment of Glaucoma	3.50
OPTM 6172	Special Considerations in Pediatrics	1.50
OPTM 6173	Systemic Pharmacology: Top 40 Medications	1.50
OPTM 6182	Behavioral Optometry: Diagnosis and Treatment	7.00
OPTM 6191	Service Learning II	0.50
OPTM 6192	CPR	0.50
OPTM 7004	Patient Care Services IV	4.50
	Semester Total:	39.00
Year 2, Summe	er Semester, OD 2016	
Course	Title	Credit Hours
OPTM 6241	Evidence Based Eye Care	2.00
OPTM 6261	Practice Management II	2.50
OPTM 6281	Ocular Disease III: Neurological Disease Diagnosis and Treatment	2.50
OPTM 7005	Patient Care Services V	4.50
	Semester Total:	11.50

# Year 3

Year 3, Fall Semester, OD 2015			
Course	Title	Credit Hours	
OPTM 7006	Patient Care Services VI	14.50	
OPTM 8011	Contact Lenses II: Theory and Practice	4.50	
OPTM 8013	Special Considerations in Geriatrics	1.50	
OPTM 8021	Principles and Practice of Optometry VI: Special Procedures	2.50	
OPTM 8072	Ocular Disease IV: Diagnosis & Treatment of the Posterior Segment	3.50	
OPTM 8081	Neuro-Optometric Rehabilitation I: Strabismus and Amblyopia	3.50	
OPTM 8082	Neuro-Optometric Rehab II: The Neurologically Challenged Patient	4.00	
	Semester Total:		
Year 3, Spring	Semester, OD 2015		
Course	Title	<b>Credit Hours</b>	
OPTM 7007	Patient Care Services VII	13.50	
OPTM 8101	Ocular Disease V: The Eye in Systemic Disease	2.00	
OPTM 8111	Low Vision Rehabilitation	5.00	
OPTM 8121	Patient Presentations in Primary Eye Care	2.50	
OPTM 8161	Optometry Review Course	5.50	
OPTM 8162	Elective I	1.00	
OPTM 8163	Elective II	1.00	
OPTM 8191	Services Learning III	1.00	
	Semester Total:	31.50	

# Year 4

Year 4, Fall Semester, OD 2014			
Course	Title	<b>Credit Hours</b>	
OPTM 7008	Patient Care Services VIII	30.00	
OPTM 7009	Patient Care Services IX	30.00	
	Semester Total:	60.00	
Year 4, Spring Semester, OD 2014			
Course	Title	<b>Credit Hours</b>	
OPTM 7010	Patient Care Services X	30.00	
OPTM 7011	Patient Care Services XI	30.00	
OPTM 8261	Practice Management III: How to Make a Living as an Optometrist	2.00	
	Semester Total:	62.00	

# **Course Descriptions**

Courses listed in this Catalog are subject to change through normal academic procedures. New courses and changes in existing course work are initiated by the faculty, reviewed and approved by the Curriculum Committee, the faculty, the Associate Dean of Academic Affairs, and the Dean of the College of Optometry.

All courses are awarded letter grades, except when indicated otherwise.

#### IPE 5000 Patient Centered Cases - An Interprofessional Approach I (1.0 credit hour, CR/NCR)

This course is offered as part of the college curriculum for all first year, entry level health professional students, and is a university requirement for graduation for all participating college programs. The course is designed to prepare the health care student to practice patient-centered collaborative care through a team approach. Working in small interprofessional teams, students will explore cases representing conditions across the lifespan.

# IPE 5100 Patient Centered Cases – An Interprofessional Approach II (1.0 credit hour, CR/NCR) Continuation of IPE 5000.

#### IPE 6000 Team Training in Healthcare I (1.0 credit hour, CR/NCR)

IPE 6000 will continue to build upon the knowledge from the IPE 5000 series, but will expand upon that knowledge and require the student to learn and apply advanced tools and strategies that are crucial to develop a collaborative healthcare team. The majority of the course is independent study with students engaging in a large scale tabletop activity where they apply team tools necessary to solve a healthcare dilemma.

## IPE 6100 Team Training in Healthcare II (1.0 credit hour, CR/NCR)

Continuation of IPE 6100.

# OPTM 5001 Introduction to the Study of Medicine (0.5 credit hours, CR/NCR)

This course provides a systematic strategy for the entering student to study medicine. Learning styles and critical thinking skills are evaluated and training on accessing electronic medical resources is given. Students from the optometry program will participate in sessions covering the following topics: professionalism, evaluating the medical literature, self-awareness, learning styles, California Critical Thinking Test, and overview of medical literature resources.

#### OPTM 5002 Ethics and Mindfulness in Practice (1.5 credit hours, CR/NCR)

This course provides an exploration of the role of health care providers in the larger society. The course explores philosophical and ethical issues of health care through its literature and history. The impact of health care on society and of society on health care is explored.

## **OPTM 5003 Gross Anatomy (2.5 credit hours)**

This course presents an understanding of the structure and arrangement of the gross anatomical features of the human body. Through lectures and laboratory examination of cadavers, students are introduced to the language of anatomy and to clinically important relationships. Models, radiographs and special demonstrations are employed to emphasize areas useful to the doctor of optometry.

#### OPTM 5004 Head & Neck Anatomy (2.0 credit hours)

Through lecture and laboratory, students are introduced to the anatomy of the head and neck. Particular attention is paid to the cranial nerves, both their normal function and the numerous clinical syndromes that affect them. The anatomy lectures will also be supplemented with various clinical presentations.

# **OPTM 5005 The Molecular and Cellular Basis of Medicine (10.5 credit hours)**

This course presents an integration of molecular biology, biochemistry, cellular physiology and metabolism, introductory genetics and developmental histology within the context of their clinical applications of basic biomedical sciences.

### OPTM 5021 Principles and Practice of Optometry I: Vision Screenings (2.5 credit hours)

This course introduces the components of community-based vision screenings. The material presented prepares students to participate in the delivery of patient care. In this course, students acquire knowledge, technical skills, and professional attitudes through lecture and laboratory activities.

# OPTM 5022 Principles and Practice of Optometry II: Clerkship and Rehabilitation (3.5 credit hours)

This course introduces additional components of the primary care eye examination including visual acuity measurement, entrance testing, along with patient history taking and a problem oriented approach to clinical reasoning. Entry into ocular health assessment will include an external health evaluation, pupil testing, and an introduction to the direct ophthalmoscope. Strategy of the examination, sequencing, patient communication, and medical record keeping will be included.

# **OPTM 5031 Ocular Anatomy (2.5 credit hours)**

This course presents in depth coverage of the anatomy of the eye, adnexa, and visual systems. Embryological development of these structures will also be covered. Topics include the anatomy of the eyelids, lacrimal apparatus, tear production, cornea and lens, ocular fluid dynamics, retina and optic nerve. Hands on laboratories will include eye dissection and viewing of histological specimens.

#### **OPTM 5032 Ocular Physiology (2.0 credit hours)**

This course presents in depth coverage of the physiology of the eye, adnexa, and visual systems. Topics include the physiology of the eyelids, lacrimal apparatus, tear production, cornea and lens, ocular fluid dynamics, retina and optic nerve.

#### **OPTM 5051 Optical Science I: Geometric Optics (2.0 credit hours)**

This course presents basic information on geometric optics, including the technique of basic ray tracing. The course emphasizes the basic study of reflection and refraction at plane and curved surfaces, single refracting surfaces, thin lenses, thick lenses, prisms, and sphero-cylindrical lenses.

#### OPTM 5101 Introduction to Disease, Immunity & Therapeutics (5.0 credit hours)

This is an integrated course introducing microbiology, immunology, pathology, and pharmacology to prepare students for more in-depth study during clinical science courses. Genetics, as related to these disciplines, is also included. Clinical applications of the basic sciences are emphasized.

#### **OPTM 5102 Neuroscience (3.0 credit hours)**

This course presents basic understandings of the brain, spinal cord and peripheral nervous system. Basic science topics include embryology, histology, neuroanatomy, biochemistry, physiology and pharmacology as applied to the nervous system. Clinical topics include infections of the nervous system, pathology, neurology, visual systems, otorhinolaryngology, and overviews of sleep disorders, cerebrovascular disorders, aging and dementia.

## **OPTM 5103 Behavioral Medicine and Psychiatry (2.0 credit hours)**

This course presents biological, psychological and social aspects of behavior in relation to the delivery of health care. The course addresses how a patient's behaviors contribute to their health and/or disease. Students from the optometry program will participate in sessions covering the following topics: cultural components of behavior, learning disorders, abuse, neglect, violence and trauma, disabilities.

# **OPTM 5121 Principles and Practice of Optometry III: Refraction (6.5 credit hours)**

This course builds upon the foundation established in Principles and Practice of Optometry I and II and introduces the fundamental aspects of a refractive sequence. The new techniques will be integrated within the context of the comprehensive eye examination sequence and will introduce students to the clinical thought processes required to diagnose and manage common refractive conditions. Ocular health assessment will continue with basic undilated direct ophthalmoscopy. Strategy of the examination, sequencing, patient communication, and medical record keeping will be included. Work for this course begins in the preceding fall semester, however, registration and receipt of the final grade occurs in the spring semester.

#### OPTM 5141 Vision Science I: Neural Basis of Vision (2.5 credit hours)

This course presents the underlying mechanisms of vision from a neurophysiological perspective, including the construction of representations of the world via neural information processing from retina to tectum and primary visual cortex and to visual areas beyond striate cortex.

#### OPTM 5151 Optical Science II: Mechanical and Introductory Ophthalmic Optics (1.0 credit hour)

This course presents the theory and application of ophthalmic optics. Lens power measurement, ophthalmic spectacle lens prescription writing, and elementary spectacle lens characteristics are covered. Spectacle frame selection, dispensing, and eyewear adjustment are included.

## OPTM 5161 Practice Management I (1.0 credit hour, CR/NCR)

This course starts in the fall semester with a brief series that introduces professionalism. Professional ethics specific to optometric practice will also be emphasized. It continues in the spring semester, focusing on various modes of optometric practice, including an overview of opportunities for employed positions, group practices, and self-employment. Work in the course begins in the preceding fall semester, however, registration and receipt of the final grade occurs in the spring semester.

# OPTM 6021 Principles and Practice of Optometry IV: Tissue Evaluation of the Anterior Segment (6.0 credit hours)

As the fourth course in the series, new material will be integrated within the context of the primary care optometric examination. Emphasis will be placed on health assessment of the anterior ocular segment including a variety of techniques of examination. Strategy of the examination, sequencing, patient communication, and medical record keeping will be included. This course covers the use of the slit lamp biomicroscope in depth.

#### **OPTM 6031 Ocular Pharmacology: General Principles (1.0 credit hour)**

This course focuses on the pharmacodynamics and pharmacokinetics of agents used for the diagnosis and treatment of ocular conditions. Topics include general principles of drug penetration into the eye and drug elimination from the eye and systemic absorption of medications administered topically to the eye. Principles of drug administration including the use of ophthalmic suspensions and ointments, oral medications, and injectables will be discussed.

#### OPTM 6041 Vision Science II: Monocular Sensory Aspects of Vision (5.0 credit hours)

This course sets the foundation for the theory and methods of vision testing and visual perception through one eye. It covers concepts including light stimuli, photometry, signal detection, physiological processing of information, and psychophysics. Topics include visual sensitivity, spatial phenomena, modulation transfer function, flicker detection, contrast sensitivity, and visual acuity. Visual perception and the constancy of visual processes such as size and distance perception, form perception, the perception of motion and achromatic color perception are discussed. Electrophysiology of the visual system will be introduced.

### **OPTM 6042 Vision Science III: Development of Vision (2.0 credit hours)**

This course covers the development of and visual function from conception through adolescence. Implications of abnormal development and resulting clinical pathologies are discussed. The physiological and psychological bases of strabismus and amblyopia are presented and reinforced through clinical examples.

## **OPTM 6043 Vision Science IV: Environmental Vision (1.0 credit hour)**

This course furthers the understanding of the interaction between vision and the environment. Topics include ultraviolet radiation, sunglasses and the eye, laser pointers and eye protection, electromagnetic radiation and absorptive lenses, lens coatings and transmission of radiation, illumination and lighting standards, and the effect on productivity and contact lenses in the work environment. Also covered are ANSI standards for ophthalmic lenses, ANSI Standards for safety glasses, ASTM Standards for sports eyewear, and implementation of visual and work area ergonomics to avoid computer vision syndrome.

## OPTM 6051 Optical Science III: Geometric Optics – Part 2 (2.5 credit hours)

This course completes the presentation of geometric optics. The course emphasizes the study of refraction at complex lens systems, optical instruments, optical aberrations, ray tracing including the presence of pupils, stops and ports.

#### OPTM 6052 Optical Science IV: Ophthalmic Optics (2.0 credit hours)

This course presents the theory and application of ophthalmic optics. Spectacle lens characteristics and the optics of multi-focal lenses are covered in depth. The optics of contact lenses and magnification systems are also introduced.

#### **OPTM 6053 Optical Science V: Physical Optics (3.5 credit hours)**

This course presents the physics of light, including the wave and particle behavior of light. In particular, the course will include the characteristics of electromagnetic radiation, wave motion, total and partial coherence of light, interference, diffraction (single slit, double slit, gratings, circular apertures), zone plates, polarization, birefringence, anti-reflecting lens coatings, lasers, emission and absorption spectra. Examples of applications in vision science and ocular diagnostic instruments will be provided.

#### OPTM 6071 Ocular Disease I: Diagnosis and Treatment of the Anterior Segment (3.5 credit hours)

This course builds upon the framework presented in the Principles and Practice of Optometry curricular track to present advanced concepts in ocular disease diagnosis and management. The anatomical, physiological, histological, and pathological processes of ocular disease of structures at the front of the eye will be emphasized. Laboratory experience in imaging of the lens and anterior segment will be presented.

## **OPTM 6091 Service Learning I (1.0 credit hour, CR/NCR)**

Service Learning I is the first part of a two semester long course providing students with medically-relevant fundamental knowledge related to public health, biostatistics, and epidemiology within the context of a community service project. During the fall semester, students will be prepared to assess specific public health needs within the community in preparation for the hands-on community service project to be performed during the spring semester. As such, the first semester will cover topics such as public health, program planning and design, basic epidemiology, biostatistics, and research methods. The first semester experience will primarily focus on achieving competence in the didactic material and performing independent research to prepare for the spring semester's community-based service project.

## **OPTM 6111 Contact Lenses I: Theory and Practice (5.5 credit hours)**

This course introduces the use of contact lenses in primary care optometry. The clinically based approach will include discussion of patient selection for lens wear, selection of appropriate materials, lens design, wearing schedules, and trouble-shooting. Laboratory experience in lens design, lens modifications, contact lens fittings and assessments will prepare students for patient care experiences.

# OPTM 6121 Principles and Practice of Optometry V: Tissue Evaluation of the Posterior Segment (5.0 credit hours)

As the fifth course in the series, new material will be integrated within the context of the primary care optometric examination. Emphasis will be placed on health assessment of the posterior ocular segment and the optic disc. This course completes the integration of clinical skills into the complete primary care eye examination. Ocular health assessment including tonometry, gonioscopy, binocular indirect ophthalmoscopy, and techniques for assessing the retina such as the use of the 78D lens, 90D lens, and three-mirror and four-mirror lenses will be emphasized. The diagnosis and management of common ocular health conditions affecting the vitreous and retina and the clinical thought processes for patient care will be incorporated. Strategy of the examination, sequencing, patient communication, and medical record keeping will be included. Work in this course begins in the preceding Fall Semester, however, registration and receipt of the final grade occurs in the Spring Semester.

#### OPTM 6141 Vision Science V: Binocular Vision and Ocular Motility (4.0 credit hours)

This course covers concepts related to accommodation, binocular vision, and ocular motility. Concepts including the horopter, stereopsis, vision, rivalry, and aniseikonia are covered. The anatomy and physiology of the extraocular muscles, innervations and actions associated with types of eye movements and their control mechanisms are reviewed. Concepts of clinical assessment, diagnosis, and management are introduced. Case examples are used to illustrate key concepts.

#### **OPTM 6151 Optical Science VI: Physiological Optics (3.5 credit hours)**

Physiological optics of the eye and an introduction to the correction of ametropias will be presented. The various axes, angles, and landmarks of the eye will be presented in optical terms with the eye as an optical system. Characteristics of the ocular media and the interaction of light with the eye will be discussed. Optical aspects of accommodation, presbyopia, aphakia, and pseudophakia will be included. The role of the pupil as it affects depth of field, aberrations and accommodation will be described.

## OPTM 6152 Optical Science VII: Principles of Optical Dispensing and Management (1.0 credit hour)

The course covers the theory and methods of managing an optical dispensary for patient satisfaction and profit. This course includes cases and examples of patients with eye glass concerns. Students will work in small groups to troubleshoot and remediate the needs of the patient through the application of ophthalmic optics formulas and principles.

# **OPTM 6171 Ocular Disease II: Diagnosis and Treatment of Glaucoma (3.5 credit hours)**

This course covers the pathophysiology, diagnosis, treatment and management of patients with all forms of glaucoma, with an emphasis on evidence-based therapeutic interventions. The course includes technique and interpretation of visual fields for glaucoma diagnosis and management. Topical and systemic medical therapies will be emphasized. The course will also discuss current surgical management of various forms of glaucoma. This course fulfills the didactic requirements under the California Regulations for glaucoma licensure.

#### **OPTM 6172 Special Considerations in Pediatrics (1.5 credit hours)**

This course emphasizes the optometric care of patients from birth through age eight. The identification of children at risk for developing ocular, visual, perceptual, or visually-related learning problems will be integrated with a discussion of strategies for diagnosis and management. Schema of normal growth and development with an emphasis on expected visual development from birth through childhood will be presented. Particular emphasis will be place on prevalent conditions, and conditions with a high level of clinical criticality. An overview of care for children with special needs will also be presented. Examination techniques unique to the pediatric patient, including the use of hand-held instrumentation, special testing, and the provision of eye care in the school system will be discussed.

#### **OPTM 6173 Systemic Pharmacology: Top 40 Medications (1.5 credit hours)**

This course will cover medications commonly prescribed for systemic conditions, their indications and mode of action, as well as their ocular and visual side effects and toxicities.

### **OPTM 6182 Behavioral Optometry: Diagnosis and Treatment (7.0 credit hours)**

This course introduces the common signs and symptoms associated with non-strabismic disorders of the binocular, accommodative, and perceptual systems. Diagnosis, treatment, management and problem solving for common conditions will be introduced. Techniques for vision therapy and vision therapy programming will be discussed. Students will have the opportunity to experience optometric vision therapy treatment first-hand.

## **OPTM 6191 Service Learning II (0.5 credit hours, CR/NCR)**

Continuation of OPTM 6091.

#### **OPTM 6192 CPR (0.5 credit hours, CR/NCR)**

This course covers basic cardiopulmonary resuscitation for adults and children.

### OPTM 6241 Evidence Based Eye Care (2.0 credit hours, CR/NCR)

This course will emphasize the application of published literature to clinical decision making. Students will learn how to select and critique appropriate and relevant information within the context of patient care scenarios. Strategies for informed clinical decision making and for life-long learning will be demonstrated.

#### OPTM 6261 Practice Management II (2.5 credit hours, CR/NCR)

This practical course will bring experts from the fields of marketing, management, finance, and law to help students develop personal strategies for their professional futures. Professional goal-setting, networking, selection of practice location, and leadership will be emphasized.

#### OPTM 6281 Ocular Disease III: Neurological Disease Diagnosis and Treatment (2.5 credit hours)

A problem-oriented approach is used to explore the diagnosis and treatment of diseases affecting the visual system, including the optic nerve, facial neuropathy, facial asymmetries including anisocoria, ptosis of neurological etiology, oculomotor, accommodative, sensory, and vergence problems. Practical aspects of neurological evaluation and assessment of the cranial nerves is included in the laboratory portion. Advanced assessment of incomitancy is presented. The rationale and methods for various treatment strategies will be presented.

## OPTM 7001 Patient Care Services I (2.0 credit hours, Honors/Pass/Remedial/No Pass)

Students will spend 4 hours per week for 7 weeks participating in community-based vision screenings. Techniques learned in Principles and Practice of Optometry I will be applied in the delivery of patient care via screenings. Students will be supervised by licensed optometrists who are faculty or auxiliary clinical faculty members. Earning a passing grade in PPO-I is a prerequisite for matriculating in PCS-I.

#### OPTM 7002 Patient Care Services II (4.0 credit hours, Honors/Pass/Remedial/No Pass)

Students will be assigned to 4 hours per week in the off-campus clinics or optometric practices and in the on-campus clinical facility performing entrance testing and assisting in the optical dispensary service. Students will be supervised by licensed optometrists who are faculty or auxiliary clinical faculty members. Earning a passing grade in PPO-II is a prerequisite for matriculating in PCS-II.

# OPTM 7003 Patient Care Services III (4.0 credit hours, Honors/Pass/Remedial/No Pass)

Students will be assigned to 4 hours per week of patient care service for two 8-week rotations in the on-campus clinical facility or in off-campus eye care facilities. Student will perform a variety of activities including community-based screenings, technician and paraoptometric testing, initial portions of the patient eye exam up to their training level. Students will be supervised by licensed optometrists who are faculty or auxiliary clinical faculty members. Earning a passing grade in PPO-I, II, & III is a prerequisite for matriculating in PCS-III.

#### OPTM 7004 Patient Care Services IV (4.5 credit hours, Honors/Pass/Remedial/No Pass)

Students will be assigned to 4 hours per week of patient care service for two 8-week rotations in the on-campus facility. Student will perform a variety of activities including community-based screenings, technician and paraoptometric testing, and all components of optometric testing leading up to completion of a comprehensive eye examination by the end of the spring semester. Students will be supervised by licensed optometrists who are faculty or auxiliary clinical faculty members. Earning a passing grade in PPO-I through IV is a prerequisite for matriculating in PCS-IV.

# OPTM 7005 Patient Care Services V (4.5 credit hours, Honors/Pass/Remedial/No Pass)

Students will be assigned to primary eye care services 32 hours per week for 2 weeks in the oncampus facility or in affiliated clinical sites. Students will be supervised by licensed optometrists who are faculty or auxiliary clinical faculty members. Earning a passing grade in PPO-I through V is a prerequisite for matriculating in PCS-V.

## OPTM 7006 Patient Care Services VI (14.5 credit hours, Honors/Pass/Remedial/No Pass)

Students will be assigned to 12 hours per week of patient care in primary eye care, contact lenses, and vision therapy. Students will assume an increasing role and increasing responsibility for the delivery of patient care. Assignments may be made at the on-campus clinical facility or in affiliated clinical sites. Students will be supervised by licensed optometrists who are faculty or auxiliary clinical faculty members. Earning a passing grade in PPO-I through V is a prerequisite for matriculating in PCS-VI.

## OPTM 7007 Patient Care Services VII (13.5 credit hours, Honors/Pass/Remedial/No Pass)

Students will be assigned to 12 hours per week of patient care in primary eye care, contact lenses, and vision therapy. Students will assume an increasing role and increasing responsibility for the delivery of patient care. Assignments may be made at the on-campus clinical facility or in affiliated clinical sites. Students will be supervised by licensed optometrists who are faculty or auxiliary clinical faculty members. Earning a passing grade in PPO-I through V is a prerequisite for matriculating in PCS-VII.

#### OPTM 7008 Patient Care Services VIII (30.0 credit hours, Honors/Pass/Remedial/No Pass)

Students will be assigned to full-time clinical rotations providing patient care in primary eye care, specialty eye care, and rehabilitation. The order of rotations will vary by student assignment and will change every 12 weeks. Assignments may be made at the on-campus clinical facility or in affiliated clinical sites. Students will be supervised by licensed optometrists who are faculty or auxiliary clinical faculty members. Earning a passing grade in PPO-I through VI is a prerequisite for matriculating in PCS-VIII.

## OPTM 7009 Patient Care Services IX (30.0 credit hours, Honors/Pass/Remedial/No Pass)

Students will be assigned to full-time clinical rotations providing patient care in primary eye care, specialty eye care, and rehabilitation. The order of rotations will vary by student assignment and will change every 12 weeks. Assignments may be made at the on-campus clinical facility or in affiliated clinical sites. Students will be supervised by licensed optometrists who are faculty or auxiliary clinical faculty members. Earning a passing grade in PPO-I through VI is a prerequisite for matriculating in PCS-IX.

#### OPTM 7010 Patient Care Services X (30.0 credit hours, Honors/Pass/Remedial/No Pass)

Students will be assigned to full-time clinical rotations providing patient care in primary eye care, specialty eye care, and rehabilitation. The order of rotations will vary by student assignment and will change every 12 weeks. Assignments may be made at the on-campus clinical facility or in affiliated clinical sites. Students will be supervised by licensed optometrists who are faculty or auxiliary clinical faculty members. Earning a passing grade in PPO-I through VI is a prerequisite for matriculating in PCS-X

#### OPTM 7011 Patient Care Services XI (30.0 credit hours, Honors/Pass/Remedial/No Pass)

Students will be assigned to full-time clinical rotations providing patient care in primary eye care, specialty eye care, and rehabilitation. The order of rotations will vary by student assignment and will change every 12 weeks. Assignments may be made at the on-campus clinical facility or in affiliated clinical sites. Students will be supervised by licensed optometrists who are faculty or auxiliary clinical faculty members. Earning a passing grade in PPO-I through VI is a prerequisite for matriculating in PCS-XI

# OPTM 7101 Essentials of Optometric Clinical Care (4.0 credit hours, Honors/Pass/Remedial/No Pass)

This course offers closely supervised patient encounters in addition to those obtained during the regular Patient Care Services experience in order to reinforce the psychomotor and cognitive skills required to provide entry-level patient care. This course is only open to students with prior approval of the Dean of the College of Optometry.

#### **OPTM 8011 Contact Lenses II: Theory and Practice (4.5 credit hours)**

This course builds upon the basic knowledge presented in Contact Lenses 1. Case examples will be used to encourage independent decision making for complicated problems in contact lens fitting. Strategies for specialized contact lenses including keratoconic lenses, therapeutic lenses, post-surgical patients and contact lenses for infants will be discussed.

# **OPTM 8013 Special Considerations in Geriatrics (1.5 credit hours)**

This course will discuss the changes expected in the visual system associated with the aging process. Diagnosis and treatment of selected refractive conditions, eye diseases, and visual anomalies common in aging adults will be presented. Psychosocial aspects and geriatric case management will be incorporated into case examples. Examination techniques unique to the geriatric patient, including the use of hand-held instrumentation, special testing, and the provision of eye care in long term care facilities will be discussed.

### OPTM 8021 Principles and Practice of Optometry VI: Special Procedures (2.5 credit hours)

This course will cover the theory and methods of clinical techniques that build upon basic examination skills acquired during the courses Principles and Practice of Optometry I through V. Clinical techniques including ocular cultures, scleral depression, A- and B-scan ultrasonography, punctual occlusion, punctual dilation and irrigation, removal of foreign bodies from the cornea and conjunctiva, and injection techniques will be presented in a hands-on format. The course will include techniques for imaging of the lens and anterior segment.

#### OPTM 8072 Ocular Disease IV: Diagnosis and Treatment of the Posterior Segment (3.5 credit hours)

This course builds upon the framework presented in the Principles and Practice of Optometry curricular track to present advanced concepts in ocular disease management. The anatomical, physiological, histological, and pathological processes of ocular disease will be emphasized. Topics include in-depth discussion of diseases and abnormalities of the vitreous and retina as well as vitreoretinal pathology associated with systemic diseases. Laboratory experience in retinal photography and advanced visual field assessment will be presented.

# OPTM 8081 Neuro-Optometric Rehabilitation I: Strabismus and Amblyopia (3.5 credit hours)

This course builds on the knowledge and skills developed in the course, Behavioral Optometry Diagnosis and Treatment, and extend the application of that knowledge and those skills to the strabismic disorders and amblyopia. Topics will include differential diagnosis of congenital and acquired strabismus and the etiology and differential diagnosis of amblyopia, as well as a comprehensive presentation of evidence-based treatment options for both strabismus and amblyopia.

# OPTM 8082 Neuro-Optometric Rehabilitation II: The Neurologically Challenged Patient (4.0 credit hours)

This course elaborates on the complexities of optometric care for patients who have suffered neurological impairment from a variety of etiologies. Ocular and visual consequences of neurological disease will be discussed. Perceptual problems associated with dyslexia, reading and learning disabilities, developmental abnormalities, stroke, Alzheimer's disease, and traumatic brain injury will be explored. Co-management and interprofessional communications will be discussed. Tests for cognitive function, memory, and perception will be discussed. Various methods and techniques for rehabilitation will also be presented in a hands-on format.

#### OPTM 8101 Ocular Disease V: The Eye in Systemic Disease (2.0 credit hours)

This course presents an overview of the most prevalent systemic conditions, and systemic conditions with significant ocular manifestations. Pathophysiology, clinical signs and symptoms, and an overview of diagnostic and management approaches will be presented. Emphasis will be placed on interprofessional communications for management of complex conditions.

#### **OPTM 8111 Low Vision Rehabilitation (5.0 credit hours)**

This course presents examination techniques and management strategies for people with visual impairments. Principles of optical and non-optical assistive devices and applications of rehabilitative services will be discussed. Psychosocial aspects and interdisciplinary care are included. Evaluation of visual disability and legal aspects of visual impairment will be discussed. The laboratory experience will provide hands-on opportunities to learn about rehabilitation techniques.

## **OPTM 8121 Patient Presentations in Primary Eye Care (2.5 credit hours)**

This course reviews information previously taught in the curriculum but reorganizes it on the basis of patient presentation. Topics include the patient who presents with blurry vision, loss of vision, diplopia, anisocoria, facial asymmetry, eye or head pain, asthenopia, and red eye. The emphasis of the course is on differential diagnostic thought processes and the problem-focused case history. Key questions to ask and formal algorithms for diagnosis will be presented for each presentation.

#### OPTM 8122: Cognitive Processes in Optometry (2.0 Honors/Pass/Remedial/No Pass)

This course offers concentrated review of information and problem solving in a specific curricular track for students who need reinforcement in a particular area. The area of concentration can be chosen from among the following tracks in the College of Optometry curriculum: Optical Science, Principles and Practice of Optometry, Vision Science, Optometric Rehabilitation, Ocular Disease. This course is only open to students with prior approval of the Dean of the College of Optometry.

#### OPTM 8161 Optometry Review Course (5.5 credit hours, CR/NCR)

This course will cover previously taught material that is relevant to the clinical practice of Optometry.

# **OPTM 8162 Elective I (1.0 credit hour, CR/NCR)**

Students may choose from a variety of course offerings to further their understanding of contemporary topics in optometry or in health care. Courses will be offered on topics relevant to students enrolled in all health professions programs and will encourage further interdisciplinary interactions. Topics may include, but are not limited to, nutrition, genetics, Spanish for health care providers, health care for vulnerable populations, international health, and so on.

# OPTM 8163 Elective II (1.0 credit hour, CR/NCR)

Students may choose from courses in health care topics or in advanced optometric topics such as comanagement of refractive surgery patients, advanced contact lens techniques, advanced nutrition, clinical grand rounds, etc.

## **OPTM 8191 Service Learning III (1.0 credit hour)**

Service Learning III will culminate in the final formalized experience in community involved learning. Students will reflect upon their experiences and the impact service learning has had on their own personal and professional development through the preparation of a final project and written summary.

### OPTM 8261 Practice Management III: How to Make a Living as an Optometrist (2.0 credit hours)

This course will provide information relevant to entry into the business of clinical optometric practice, including information on billing and coding, employee relations, how to navigate the process of becoming a panel member, considerations in partnership formation, leasing and managing the facilities, entrepreneurship, sales and marketing of spectacles, contact lenses, and vision therapy, and tips on how to grow a patient base.

# Honors, Scholarships, and Awards

The College hosts two annual events for presentation of awards and scholarships: Founder's Day and Honor's Day. Founder's Day, held in the early fall, is a unique event to recognize students, faculty and other pioneers in the field of optometry. The following student honors, awards, and scholarships are currently presented on Founder's Day:

A Tribute to Caring Scholarship
AOF/Pat Cummings Scholarship
Beta Sigma Kappa (BSK) recognition
Founding Dean Scholarship
Richmond Products Scholarship
The Great Western Council of Optometry Scholarship
VOLK Lens Award
Walmart Scholarship
WesternU Eye Care Center Core Values Award

Honor's Day is held each year in the spring, and is used to recognized students for their year-long accomplishments. The following student honors, awards, and Scholarships are currently presented on Honor's Day:

College of Optometry Core Values Award
College of Optometry Grand Slam Award
The Dean's List Award
The Dean's Scholarship
The Hayes-Haine Family Scholarship
The HOYA House Cup
The President's Society Scholarship
The Walmart Project ForeSight Scholarship
The WUCO Basketball Trophy
Who's Who Award

#### **Academic Calendar**

\*Students in clinical courses observe their preceptor's hours, which may include working on federal holidays.

Fall	204	~
-211	201	~

Monday, May 28, 2013
Fall Classes Begin (Year 4)

<u>Thursday, July 4, 2013</u> <u>Independence Day – No Classes\*</u>

August 5 – August 9, 2013 Orientation Week (Year 1)

<u>Saturday, August 10, 2013</u> Convocation/White Coat Ceremony

Monday, August 12, 2013
Fall Classes Begin (Years 1-3)

Monday, September 2, 2013 Labor Day – No Classes\*

Monday, October 14, 2013 Columbus Day – No Classes\*

Wednesday, November 6, 2013 End of Fall Semester Classes (Year 4)

Wednesday, November 27, 2013
Thanksgiving Recess Begins @ 5:00 p.m.\*

Monday, December 2, 2013
Classes Resume

Friday, December 20, 2013 End of Fall Semester Classes (Years 1-3)

Monday, December 23, 2013
Winter Recess Begins (Years 1-3)

# Spring 2014

Tuesday, November 12, 2013 Spring Classes Begin (Year 4)

Monday, January 6, 2014
Spring Classes Begin (Years 1-3)

Monday, January 20, 2014

Martin Luther King Day – No Classes\*

Monday, February 17, 2014

President's Day – No Classes\*

March 17-21, 2014

Board Examinations – No Classes (Year 4)

Monday, March 24, 2014
Spring Break Begins (Years 1-3)

Monday, March 31, 2014
Spring Classes Resume (Years 1-3)

Wednesday, May 14, 2014
End of Spring Semester Classes (Year 4)

Wednesday-Friday, May 14-16, 2014 Commencement

Friday, May 23, 2014 End of Spring Semester Classes (Years 1-3)

#### Summer 2014

<u>Tuesday, May 27, 2014</u> Summer Classes Begin (Year 2)

<u>Friday, July 4, 2014</u> <u>Independence Day – No Classes\*</u>

<u>Friday, July 25, 2014</u> *End of Summer Semester Classes (Year 2)* 

# The Optometric Oath

With full deliberation I freely and solemnly pledge that: I will practice the art and science of optometry faithfully and conscientiously, and to the fullest scope of my competence. I will uphold and honorably promote by example and action the highest standards, ethics and ideals of my chosen profession and the honor of the degree, Doctor of Optometry, which has been granted me.

I will provide professional care for those who seek my services, with concern, with compassion and with due regard for their human rights and dignity.

I will place the treatment of those who seek my care above personal gain and strive to see that none shall lack for proper care.

I will hold as privileged and inviolable all information entrusted to me in confidence by my patients.

I will advise my patients fully and honestly of all which may serve to restore, maintain or enhance their vision and general health.

I will strive continuously to broaden my knowledge and skills so that my patients may benefit from all new and efficacious means to enhance the care of human vision.

I will share information cordially and unselfishly with my fellow optometrists and other professionals for the benefit of patients and the advancement of human knowledge and welfare. I will do my utmost to serve my community, my country and humankind as a citizen as well as an optometrist.

I hereby commit myself to be steadfast in the performance of this my solemn oath and obligation.

Adopted by the American Optometric Association

# **College of Osteopathic Medicine of the Pacific**

Doctor of Osteopathic Medicine Program

#### Accreditation

The academic program of Western University of Health Sciences, College of Osteopathic Medicine of the Pacific (WesternU/COMP) is accredited by the Commission on Osteopathic College Accreditation (COCA) of the American Osteopathic Association, which is recognized by the United States Department of Education (USDE). Together, COMP (Pomona, CA) and COMP-Northwest (Lebanon, OR) comprise the total study body, faculty and staff of the College of Osteopathic Medicine of the Pacific. All references made to WesternU/COMP include COMP and COMP-Northwest, unless otherwise indicated.

COMP-Northwest is a non-profit corporation authorized by the State of Oregon to offer and confer the academic degree described in this section, following a determination that state academic standards will be satisfied under OAR 583-030. Inquiries concerning the standards or school compliance may be directed to the Office of Degree Authorization, 1500 Valley River Drive, Suite 100, Eugene, Oregon 97401.

# The Osteopathic Philosophy

Osteopathic medicine is a school of medical thought and practice, founded on the concept that the normal state of a person is health. The philosophy of osteopathic medicine began long before the life of its founder, Dr. Andrew Taylor Still. The philosophy of Dr. Still can be directly related to the concepts and teachings of the Greek physician-philosopher, Hippocrates. This "father of medicine" taught that disease is a natural process and that natural powers are the healers of disease. The physician must assist nature, said Hippocrates, but attention should be focused on the patient rather than on the disease. Dr. Still revived the concept of patient-centered care, making it the cornerstone of osteopathic medicine and giving it new meaning and implementation with a unique system of diagnosis and treatment.

Fundamental tenets of osteopathic medicine include the following:

- The body is a unit; the person is a unit of body, mind, and spirit
- The body is capable of self-regulation, self-healing, and health maintenance
- · Structure and function are reciprocally interrelated

Rational treatment is based upon an understanding of the basic principles of body unity, self-regulation, and the interrelationship of structure and function

While employing osteopathic manipulation, the osteopathic physician also utilizes other recognized modalities for diagnosis and treatment, taking into account other factors such as the patient's preferences, developmental stage, family history, and social environment, as appropriate.

# Mission

The mission of Western University of Health Sciences, College of Osteopathic Medicine of the Pacific (WesternU/COMP) is to prepare students to become technically competent, culturally sensitive, professional and compassionate physicians who are life-long learners and will serve society by providing comprehensive, patient-centered health care with the distinctive osteopathic philosophy. This is

accomplished through excellence in curriculum, translational research, service and osteopathic clinical practice.

# Core Competencies Supporting WesternU/COMP's Mission Statement

- Medical Knowledge
- Osteopathic Philosophy and Manipulative Medicine
- Patient-centered Care
- Professionalism
- Interpersonal and Communication Skills
- Practice-based Learning and Improvement
- Systems-based Practice
- Interprofessional Collaboration

# Strategic Plan in Support of the Mission and Core Competencies

WesternU/COMP's strategic plan addresses the vision and direction for the college from 2012-2017. To achieve the mission of the college, WesternU/COMP has identified several strategic themes and priorities whose areas of focus include: Education & Facilitation of Learning; Patient Care; Residency Program Development; Research Boutiques: COMP Employee Engagement; Family Medicine/Primary Care; and Develop a Culture of Academic Entrepreneurship.

#### **Curricular Goals**

The goal of WesternU/COMP's four year curriculum is to prepare each student with the knowledge, attitudes and skills to excel in his or her chosen postdoctoral training program. Specifically, the student will be able to:

- Identify the wide range of variation in normal human anatomy and physiology.
- Recognize, diagnose, and treat the most commonly encountered health conditions in a primary care practice.
- Recognize, diagnose, and treat the acute, life-threatening conditions encountered by the primary care physician.
- Differentiate common health problems from less common diseases.
- Recognize conditions or situations best handled by consultation and/or referral.
- Provide continuity of health care beginning with the initial patient contact.
- Assess and treat chronic health conditions in various stages of progression.

- Demonstrate an understanding, through team-based education, of healthcare delivery systems with a focus on: safety, effectiveness, efficiency, personalized, timely, and equitable models.
- Uphold the Osteopathic Oath in the conduct of societal and individual professional activities.
- Develop appropriate, professionally intimate relationships with patients.
- Understand a patient's individual concerns and incorporate those concerns into patient care.
- Routinely integrate osteopathic philosophy and practices into routine patient care.
- Access medical references to understand current medical knowledge and applications.
- Understand and apply the concepts of community-oriented primary care, epidemiology, health screening and prevention.
- Understand and work with the family unit to improve the health and welfare of the individual patient and his or her family.

# **Personal Competencies for Admission and Matriculation**

A candidate for admission to WesternU/COMP's Doctor of Osteopathic Medicine Program must possess, or be able to achieve through reasonable accommodation, certain sensory and motor functions, enabling him or her to carry out the activities described in the sections that follow. Graduation from the program signifies that the individual is prepared for entry into postgraduate medical education. It therefore follows that graduates must have the knowledge and skills needed to function in a broad variety of clinical situations and be able to render a wide spectrum of osteopathic patient care. The osteopathic medical student must be able to consistently, quickly, and accurately integrate all information received by whatever sense(s) employed. Also, he or she must have the intellectual ability to learn, analyze, synthesize, and apply various types of information in the context of patient care.

For candidates who require reasonable accommodation to meet these competencies, please visit the Harris Family Center for Disability and Health Policy Web site. The Doctor of Osteopathic Medicine program, along with all other programs at WesternU, shares a commitment to opening the DO curriculum to competitive, qualified individuals with disabilities. However, in doing so, the DO degree program must also maintain the integrity of its curriculum and preserve those elements deemed essential to educating candidates to become effective osteopathic physicians.

A candidate for the DO degree must exhibit abilities and skills in the six areas identified below. Under all circumstances, a candidate should be able to perform the following in a reasonably independent manner:

### Observation

Candidates and students must have sufficient vision to be able to observe demonstrations, experiments, and microscopic laboratory exercises. They must be able to observe a patient accurately at a distance and close at hand.

#### Communication

Candidates and students must be able to communicate with patients and colleagues. They must be able to hear and speak, and be fluent in the English language. Reasonable accommodations may be provided for the hearing and speaking impaired.

#### Motor

Candidates and students must have sufficient motor functions to enable them to execute movements that are reasonably required to provide general and emergency treatment of patients (i.e. palpation, auscultation, percussion, and other diagnostic and therapeutic modalities). Examples of procedures reasonably required of osteopathic students and physicians include, but are not limited to: physical examination in the acute and non-acute settings, cardiopulmonary resuscitation, insertion of a variety of catheters, administration of intravenous medication, application of pressure to stop bleeding, opening obstructed airways, suturing wounds and surgical incisions, performance of obstetrical maneuvers and performance of osteopathic diagnosis and manipulation. These actions require coordination of both gross and fine muscular movements, equilibrium, and functional use of the senses of touch and vision.

# Intellectual, Conceptual, Integrative, and Quantitative Abilities

Candidates and students must demonstrate problem-solving skills, which involve intellectual, conceptual, integrative and quantitative abilities. These abilities include memory, calculation, reasoning, analysis, and synthesis. In addition, candidates and students must be able to comprehend three-dimensional relationships and be able to understand and manipulate the spatial relationships of structures.

#### **Behavioral and Social Attributes**

Candidates and students must possess the emotional health required for full utilization of their intellectual abilities. They must show evidence that they can exercise good judgment and promptly complete all responsibilities involved in the education process and attendant to the assessment and care of patients. Candidates and students must also demonstrate that they can develop mature, sensitive, and effective relationships with faculty, staff, colleagues, and patients. Additionally they must be able to tolerate physically and mentally taxing workloads, adapt to changing environments, display flexibility, and function in the face of the uncertainties inherent in patient care. Compassion, integrity, concern for others, interpersonal skills, interest, and motivation are some of the personal qualities that will be assessed during the admissions and educational processes.

### **Physical Health**

To insure compliance with California State Health Department requirements and exhibit exemplary commitment to the rights and integrity of all parties in the education of health care professional students, the College of Osteopathic Medicine of the Pacific has established medical status credentialing requirements that must be completed prior to matriculation. In addition to the skills listed above, candidates for the Doctor of Osteopathic Medicine degree also must be sufficiently free of any serious communicable diseases. Medical status credentialing is designed to ensure that the safety of patients is not compromised while protecting the rights and safety of students as well. For more detailed information, contact stu-emphealth@westernu.edu.

### **Admissions Policies and Procedures**

WesternU/COMP accepts applications from all qualified candidates. However, many more applications are received from qualified candidates than can be admitted. While grades and Medical College Admission Test (MCAT) scores are important in selecting candidates for admission, the

Admissions Committee recognizes that these statistics, by themselves, do not guarantee later success as a physician. Therefore we employ a holistic approach; non-academic criteria are also important in making the selection. WesternU/COMP seeks a diverse and balanced student population and considers factors additional to academic performance, such as a well-rounded background, work experiences, letters of recommendation, interest in and knowledge of osteopathic medicine, and professional promise. To help ascertain these factors, applicants are required to take part in an on-campus traditional panel interview and a hybrid of the Multiple Mini Interview (MMI) with a standardized patient.

WesternU/COMP does not discriminate on the basis of age, gender, race, color, national origin, religion, creed, handicap (disability), or sexual orientation in any of its policies, procedures, or practices. This non-discrimination policy covers admission, access, and service in the University programs and activities, as well as application for and treatment in University employment.

# **Minimum Entrance Requirements**

Candidates for admission to WesternU/COMP must meet these requirements at the time of application:

- Completion of a minimum of ninety semester hours, or three-fourths of the credits required for a baccalaureate degree, from a regionally accredited college or university.
- Completion of one academic year (or its equivalent) in English, biology, physics, inorganic chemistry, organic chemistry, and behavioral sciences.
- One semester of biochemistry and of genetics is highly recommended.

Applicants must submit their Medical College Admission Test (MCAT) scores. Information concerning this test may be obtained from the pre-professional advisor at the applicant's college or directly from the MCAT Program Office. To be considered for admission, the MCAT examination must be taken prior to August of the year prior to entering.

Although grades and MCAT scores are just two factors used in the evaluation process, WesternU/COMP seeks students who have shown high quality academic performance. Typically candidates accepted for admission will have completed four or more years of pre-professional study and received at least a bachelor's degree prior to matriculation. Successful candidates for the most recent entering class averaged a science GPA of 3.5, an overall GPA of 3.6, and an average MCAT score of 9.3.

# **AACOMAS and Secondary Applications**

WesternU/COMP participates in a centralized application service through the <u>American Association of Colleges of Osteopathic Medicine Application Service (AACOMAS)</u>. Individuals interested in applying to WesternU/COMP can click on the "Applicants" area of this website for information and application materials. Applicants complete an online application and AACOMAS will submit it to WesternU/COMP and other osteopathic medical schools chosen. Applicants must also arrange to have official MCAT scores and transcripts from all prior undergraduate and graduate, and professional institutions attended released to AACOMAS.

Upon receipt of the initial application and transcript(s), AACOMAS will collate materials, verify grades, and transmit standardized information to the applicant and to his or her designated osteopathic

medical colleges. AACOMAS takes no part in the evaluation or selection of applicants and does not review applications to determine if completed correctly. WesternU/COMP conducts a review of the AACOMAS applications received, and selected applicants may be requested to supply the following additional information for consideration by the Admissions Committee. All required supplementary information must be returned within two weeks or there may be a delay in processing.

- A supplementary application provided by WesternU/COMP submitted with a non-refundable fee of \$65.
- An evaluation of the applicant's work and accomplishments submitted by the Pre-Health Professions Committee of the applicant's college. If the college has no such committee, the applicant may submit an evaluation from one classroom professor in the sciences.
- A letter of recommendation from a physician, with strong preference given to a letter from a DO.

Once the applicant's file is complete, the Admissions Committee will determine if the candidate will be invited to attend an Interview Day on campus. The interviewee must come to the campus at his or her own expense. Interview days are typically conducted on Thursday or Saturday. The interviewee should plan to spend a full day on campus and attend all activities, which typically include information on the curriculum, clinical rotations, financial aid and student services; a demonstration of osteopathic manipulative treatment; a tour of the campus; lunch with a WesternU/COMP student Admissions Ambassador; a panel interview conducted by members of the faculty, staff, and students, and two MMI stations with a standardized patient. Following this visit, the Admissions Committee will evaluate the candidate's application and recommendations written by the interviewers. A candidate will be notified regarding the status of his or her application approximately three weeks after his or her interview.

An acceptance offer may be rescinded or an enrolled student may be dismissed by WesternU/COMP for failure to meet admissions requirements or discovery of behavior in violation of the Standards of Academic and Professional Conduct.

# **Applicants with Foreign Coursework**

Applicants who wish to use coursework completed outside the United States must submit their transcripts for evaluation to a <u>Western University of Health Sciences Approved Service</u> at the candidate's expense. A course-by-course evaluation is required and all coursework must be designated as undergraduate, graduate or professional. WesternU only honors evaluations from one of the above services. The official evaluation must be included with the supplemental application packet.

## **International Students**

Applications from international students are eligible for consideration for admission to the Pomona campus only. International applicants are required to meet all standards for admission listed in the Admissions Policies and Procedures section of this catalog.

If an international applicant is currently enrolled in a foreign medical college or other health professions programs, no part of that medical curriculum can be used to fulfill any part of WesternU/COMP's academic requirements for granting a Doctor of Osteopathic Medicine degree. Foreign medical graduates are not eligible to apply for advance standing into our program.

International students and any other applicants who are not U.S. citizens and who are living in the U.S. should be prepared to provide proof of legal U.S. residency at the time of interview. Proof of legal U.S. residency is required prior to any offer of acceptance. For more detailed information, please visit our web page for International Students.

### **Transfers from Other Schools**

WesternU/COMP does not currently accept applicants for transfer.

#### **Deferred Admission**

Deferred admission is considered on a case by case basis and may be granted for one year only. Decisions are made by the Admissions Committee.

# **Tuition Deposit Policy**

Applicants accepted at WesternU/COMP must pay an initial, non-refundable "acceptance" deposit of \$1,000, and a second non-refundable "confirmation of acceptance" deposit of \$1,000. Due dates for these two deposits are provided in the offer of acceptance letter. Upon matriculation, the entire \$2,000 deposit is applied toward the total tuition. For applicants who are granted deferred admission to the DO program, an additional non-refundable deposit of \$500 is required to hold a seat in the next year's class. If an applicant fails to register, all tuition deposits are forfeited.

# Registration

All DO students are required to register by the registration deadlines specified by the University Registrar. Registration dates are posted at: <a href="http://www.westernu.edu/registrar-online-information">http://www.westernu.edu/registrar-online-information</a>. Failure to register by the deadline may be grounds for administrative withdrawal. All students registering after the posted deadline will be assessed a \$30.00 per business day late fee.

Full tuition and fees and all prior debts must be paid in full on or by posted deadlines each academic year. Matriculation is subject to the satisfactory completion of all academic requirements and payment of all outstanding debts to the University. The receipt of a final transcript(s) from all colleges/universities attended and a physical examination with documentation of required immunizations prior to registration are additional requirements for incoming students. Also, all students must show proof of current health insurance coverage by the deadlines provided by the University Registrar. This coverage must be maintained or in effect throughout the academic year. If there is no proof of current coverage, students will be automatically enrolled in the school sponsored insurance plan.

Attendance at all Welcome Week activities is mandatory for all incoming first-year students.

In compliance with the standardized nomenclature of the American Osteopathic Association (AOA), matriculants receive the designation Osteopathic Medical Student (OMS) followed by the current year in the program. A first-year student is designated OMS I, and so on.

### **Substance Abuse Policy**

WesternU/COMP shall actively encourage students with either self-identified or discovered substance abuse issues to seek appropriate treatment in order to achieve physical and mental health and to successfully complete the curriculum. WesternU/COMP encourages all impaired students to seek help voluntarily, favors the earliest possible intervention, and will require enrollment in a monitoring program that meets the following criteria;

Care and monitoring must be overseen by a board certified addictionologist

- 1-2 physician-led support group meetings per week
- 1-2 peer-led support group meetings per week
- Random or weekly body fluid testing
- Permission for providers to communicate directly with WesternU/COMP regarding care
- Automatic notification of WesternU/COMP if program criteria are not met at any time

If recommended by the addictionologist or required by the monitoring program, students may be required to enroll in a treatment program prior to beginning a monitoring program. The Office of Student Affairs can provide contact information for pre-approved monitoring programs.

WesternU/COMP respects the right to confidentiality of recovering students and will assist them to continue with their education; however, WesternU/COMP also respects the rights of patients and others and seeks to protect them from potential harm that may result from impairment of the student. Therefore, students who do not cooperate with appropriate treatment programs are subject to disciplinary actions up to and including dismissal.

# **Criminal Background Check/Drug Screening Policy**

Incoming students must also provide, at their own expense, the following items in order to register:

 Successful completion and passage of a criminal background check and drug screening (as directed by the Admissions Office).

Students entering the OMS III year must also pass a criminal background check, attend the scheduled Rotations Orientation in its entirety, and complete all pre-rotations activities by the stated deadlines. Depending on the rotation sites where the student may be going, there may be additional requirements imposed by the site(s) including, but not limited to, a repeat background check, finger-printing, drug screening, or antibody titers documenting immunity to certain diseases.

## **Full-time/Part-Time Status**

All students enrolled in at least one class/rotation are considered full-time students.

# **Time Limits**

The Doctor of Osteopathic Medicine program is designed to be completed in four (4) years of full-time study. The requirements for the degree must be fulfilled within 6 years from the date of matriculation to the program.

# **Tuition and Fees**

By action of the Board of Trustees, DO tuition and fees for the 2013-2014 academic year (subject to change) are as follows:

\$50,845.00	Annual Tuition
\$40.00	Student Body Fee (Years 1 and 2)
\$20.00	Student Body Fee (Years 3 and 4)

# **Other Fees and Expenses**

\$40.00	Drug Screening (approximate)
\$60.00	Criminal Background Investigation (approximate)
\$100.00	Audience Response System Device
\$600.00	Medical Equipment
\$800.00	Required and Recommended Texts - Fall
\$300.00	Required and Recommended Texts - Spring
\$45.00	Anatomy Supplies (Gloves, Scrubs, Dissection Kit) – Year 1 only
\$550.00	COMLEX Examination Level I and II CE*
\$1,210.00	COMLEX Examination Level II PE*
\$50.00	Discipline Specific Shelf Exam Remediation (each - after first failed attempt)
\$150.00	Discipline Specific OSCE Remediation (each - after first failed attempt)
\$45.00	Anatomy Supplies (Gloves, Scrubs, Dissection Kit) – Year 1 only
\$30.00	Registration Late Fee (per business day)
\$350.00	Graduation Fee
\$470.00	Annual Parking Permit (Auto)
\$25.00	Parking Permit Replacement Fee
\$40.00	Locker Key Replacement Charge
\$10.00	Official Transcript (Each)
\$21.00	Rush Transcript, First Class Mail (Each)
\$25.00	Rush Transcript, Federal Express (Each)
\$10.00	Student ID Replacement Fee
TBD	Breakage Fee (Replacement Cost)

\*Note regarding COMLEX Fees: WesternU/COMP requires students to take and pass all sections of the National Board of Osteopathic Medical Examiners (NBOME) COMLEX Level I and Level II as one of the requirements for graduation. These fees are subject to change by the NBOME and are updated regularly. Visit the <a href="MBOME Web site">MBOME Web site</a> for the most current COMLEX fees.

# **Clinical Rotations Expenses**

During the OMS III year, students are required to return to the Pomona, CA campus (Lebanon, OR for students enrolled at COMP-Northwest) every 13<sup>th</sup> week to attend the mandatory Didactic Week activities (four weeks total for the OMS III year). Any travel, food, housing, or other expenses incurred by these activities are the responsibility of the student. Additionally, OMS III and IV students may choose to do elective rotations at non-core sites, including international sites, which may create self-imposed additional expenses. Finally, some elective rotations done at or through other institutions (e.g. certain hospitals or other medical schools) may involve application fees and/or other charges. Since these rotations are elective, these fees are the student's responsibility.

# **Shelf Examination Repeat and OSCE Repeat Fees**

Students who fail one or more post-rotation discipline-specific shelf examination(s) will be permitted to take the exam for a second attempt with an assessed fee of \$50 for each exam taken. If the student fails the second attempt, they will be required to meet with the Student Performance Committee (SPC) and they will be placed on academic suspension until the examination is successfully repeated. Students authorized to make a third attempt will also be assessed a fee of \$50 for each shelf examination taken. If a student's shelf exam is not completed within 90 days he/she may be sent to the SPC. A student who fails the shelf examination on the third attempt will fail the rotation, must present before the SPC, and will be required to repeat a rotation in the same discipline in its entirety.

Students who fail one or more post-rotation discipline-specific Objective Structured Clinical Examination (OSCE) will be required to remediate each failed OSCE. The student will be assessed a fee of \$150 for each OSCE that must be remediated. A student who fails one or more OSCE's on the second attempt will be placed on academic suspension until the examination is successfully repeated. Students authorized to make a third attempt will also be assessed a fee of \$150 for each OSCE taken. If a student's OSCE exam is not completed within 90 days he/she may be sent to the SPC. A student who fails the OSCE examination on the third attempt will fail the rotation, must present before the SPC, and will be required to repeat a rotation in the same discipline in its entirety.

Requirements for the Pre-OSCE and OSCE include white coat, ID badge and on-time arrival. Students who do not meet these requirements fail the rotation and are subject to the same repeat requirements as previously outlined.

# **Student Support Services**

A wide variety of support services are available to students including tutoring, academic counseling, disability support, personal counseling and behavioral health advice. A summary of these services with contact information is provided on the <u>Office of Student Affairs (OSA) SharePoint site</u>.

#### **Academic Advisement**

COMP students will be assigned to a COMP House and a faculty advisor within that house upon matriculation. COMP-Northwest students will be assigned a faculty advisor upon matriculation. The academic advisor-student relationship can become one of the most valuable aspects of medical education. It provides an opportunity to develop sustained individual contacts between faculty and students on both academic and personal levels. If either the student or the advisor does not find the relationship helpful, either is free to seek a change. If a student wishes to change advisors, he/she should identify a preferred advisor and ask if they are willing and able to take them on as an advisee. If they agree, the student should email the Office of Student Affairs, cc their new advisor, and request that their advisor on record be officially changed. The Office of Student Affairs is also happy to make advisor recommendations if they are not sure who to select. If a faculty member wishes to change advisees, he/she should email the Office of Student Affairs to request that the student in question be assigned to another advisor.

# **Supportive Learning Environment**

Medical students have a right to have support and assistance from WesternU/COMP in maintaining a climate conducive to thinking and learning. University teaching reflects consideration for the dignity of students and their rights as persons. Medical student mistreatment in the course of the teacher-learner environment will not be tolerated. Examples of behaviors or situations that are unacceptable include, but are not limited to:

- discrimination based on race, color, religion, national origin, gender, age, sexual orientation, disability, and veteran status (see the Overview section of the University Catalog: Notice of Non-discrimination Policy)
- sexual harassment
- unwanted physical contact

- verbal abuse, profanity, or demeaning comments
- inappropriate or unprofessional criticism which belittles, embarrasses, or humiliates a student
- unreasonable requests for a student to perform personal services
- grading used to punish or reward a student for nonacademic activities rather than to evaluate performance
- a pattern of intentional neglect or intentional lack of communication
- requiring students to perform tasks beyond their level of competency without supervision

# **Academic Requirements**

#### **Attendance and Absences from Curricular Activities**

Students are expected to participate fully in all scheduled classroom, laboratory, small group, practicum and clinical education activities. In person attendance is required for all mandatory sessions and students are responsible for all course content regardless of whether they attend the session or not. Students are required to be present for all scheduled examinations and cannot begin an examination more than 15 minutes after the scheduled time or take the exam at an alternate time without permission from the Assistant Dean/Director for Student Affairs. An unexcused absence from an examination is grounds for summary failure (a score of zero) for that examination.

COMP recognizes that occasionally a student must miss a curricular activity due to a required or unavoidable circumstance. If you need to be excused for any length of time (from being 16 minutes late to your exam, to needing a 1-year leave of absence and everything in between), you must submit your request using the <a href="Request for Time-Off Form">Request for Time-Off Form</a> found on SharePoint. Carefully read the text which outlines the process and requirements, then click "add new item" on the right column to complete your request.

Please note that Interprofessional Education (IPE) is a University level course, therefore if a student is absent for IPE they must additionally submit the <u>IPE Absence Request Form</u> via blackboard. Unexcused absences will be viewed as violations of the Standards of Academic and Professional Conduct (See the Overview section of the University Catalog: Standards of Academic and Professional Conduct), and that frequent excused absences will receive close scrutiny and a student may lose their excused absence privileges if the Office of Student Affairs believes that they are taking advantage of the system.

If a student is requesting an extended Leave of Absence (30+ days), they are required to continue monitoring their WesternU email so that no information or deadlines are missed when the student returns to COMP. The student must also consult with the Office of Financial Aid regarding any outstanding loans since students are not eligible for financial aid when on an extended Leave of Absence (LOA). Students on LOA are not covered by WesternU's accident, liability, or malpractice insurance during the time of leave. A notation regarding the extended LOA will appear on the student's academic transcript. Other conditions apply when a student takes an extended LOA from COMP. These are listed in the University Catalog, Overview section, and a student must take these items into consideration when requesting an extended LOA.

OMS III and IV students may request a short LOA (<30 days) via the request for time off form. Additionally, a student may be required to take a short LOA in order to, for example, have additional time to study for rotation examinations, study for the COMLEX or attend residency interviews. A short LOA does not have financial aid implications and will not appear on the academic transcript.

#### **Documentation**

The OSA can only grant time-off for the reasons outlined below. In addition we cannot consider time-off requests unless you attach the required documentation covering all dates for which you were or plan to be absent. You may scan or take a high quality photo of the necessary documentation, or provide a link to an online source in the comments section of the form. The nature of the documentation will be determined by the reason for the absence and will be defined by the Office of Student Affairs. Typical examples include:

- A doctor's note, entrance/discharge papers or hospital bill for self or family member (not required for 1-day absences on non-blackout days – repeated requests are subject to OSA discretion)
- A program for an immediate family member's wedding, funeral, religious ceremony or graduation
- A conference agenda when attending a health professional or leadership conference
- A copy of the invitation to a residency interview
- A screenshot showing the date you're taking the COMLEX
- A receipt for car problems like the purchase of a car battery or confirmation of a tow (documentation for car problems is only required if you are missing more than a ½ day or a blackout day)

### **Timeframe for Submitting Requests**

Planned absences (known in advance of the curricular activity): Examples include scheduled religious observances, conferences (see additional requirements below), immediate family weddings, funerals, graduations, surgeries and other medical procedures that cannot be done during academic breaks. The request for time off form and all necessary documentation must be submitted at the beginning of the semester or no less than 30 days in prior.

**Unplanned absences** (known just prior to the curricular activity): Examples of this category include acute personal illness, acute illness or death of a family member and traffic accidents. If you submit the **Request for Time-Off Form** for an unplanned absence without the required documentation, you have through the day you return to class/rotation to go back into SharePoint and attach the appropriate documentation to your request then click "update". Requests may not be approved if documentation is received after your return. If you are sick enough not to be able to participate in curricular activities for a single day, you do not have to submit a doctor's note for that illness with one caveat: if you are sick on a black-out or exam day, you must still submit documentation in order to be eligible for make-up work.

#### **Conference Travel**

If approved, student travelers are eligible for make-up work if the activity occurred during their time away from campus. Depending on conference length and exam timing, students may also request to be excused from taking an exam that occurs immediately after their return from the conference. As with the actual conference dates, students must also submit, no less than 30 days prior to departure, a second Request for Time-Off Form for the exam day (unless it immediately follows their return to campus in which case they can submit a single request covering travel, conference and the exam). Blackout dates apply – see SharePoint for dates. If approved, the student is only excused for the exam itself and must attend all other curricular activities for the day. In order to be considered for conference travel, students must additionally meet the following criteria:

- Have received no more than two grades ≤ 75% in the current and previous semester combined
- Submitted the request for time off form(s) no less than 30 days prior to departure
- Conference related absences will not be approved during the "blackout" dates indicated on SharePoint

If you are financially supported by any university entity, you must also submit the **Student Travel Notification Form**.

### Make-Up Work

If upon review of the documentation it is determined that the absence is excused, the appropriate departments will be notified that the student is authorized for make-up. A make-up is offered for all major examinations and is typically scheduled within 48-72 business hours of the original examination. Students unable to make-up the work at the scheduled sessions must take an incomplete in the course and fulfill course requirements at the end of the academic year. Some courses/systems have built-in leeway for missing class or a quiz (e.g., the lowest quiz or grade is dropped) and no make-up is offered, even if the absence is excused. The nature of the make-up work is at the discretion of the Course Director. A student with an excused absence will receive full credit for their performance on the make-up activity. Students must contact the Family Medicine and NMM/OMM departments to work out the details of OPP and ECM make-ups. For all other courses (except IPE), the Preclinical Department will automatically contact students regarding the make-up date and time.

If a student with an excused absence is unable to make up the examination within 72 hours, the student will be given an incomplete (I) for the course and will be required to make up the missing work at the end of the academic year. If there is more than one examination in the course or system, the student may take the subsequent examination(s) even if he or she was not able to make up the missed examination. If the student does not feel ready to take subsequent examinations due to the incident that caused the initial absence, the student should discuss his or her concerns with the Course or System Director and the Assistant Dean/Director for Student Affairs. If approved, the student will be allowed to complete the remaining course or system requirements at the end of the academic year.

If documentation is not provided within the established timeframe (see above); the student will not be allowed to complete the make-up activity. However, if later the absence is excused, the student will

be able to take an incomplete in the course or system and make-up the incomplete work at the end of the academic year.

If a student fails to take either a make-up or a remediation examination at the designated time (without a second approved Request for Time-Off Form), the student will receive a summary failure (a score of zero) for that examination and will be referred to the Student Performance Committee.

Additional detail regarding clinical curricular absences can be found in the Clinical Education manual.

#### Leave of Absence

A student may request a leave of absence for academic, personal, financial or medical reasons. Leaves of absence must be requested through the Request for Time-Off Form on the <u>Office of Student Affairs (OSA) SharePoint page</u> according to the requirements outlined in the Request for Time-Off section of this catalog.

#### **Examination Policies**

For most examinations, a student will sit in an assigned seat, unless prior arrangements have been made with the Office of Academic Affairs (OAA). Exams may be administered in the form of a computer or paper-based exam, practical exam, and/or oral exam. During an examination, a student may not leave the room until he or she has completed the examination, except in an emergency or as excused by the proctor. If a student is excused to leave the room temporarily, the proctor will accompany the student. The student's examination will be held until his or her return.

Once a student finishes the examination and leaves the examination room, he or she will not be permitted to re-enter the room until the exam is declared over. All student belongings, such as notebooks, calculators, headwear, and headsets, will be kept in the front of the room. No food or drink (except bottled water) will be allowed during examinations.

No student questions related to the examination's content will be answered during the examination period. If a student notices a mistake or typographical error in the examination booklet, it can be pointed out to the proctor when the student turns in his or her examination booklet. If a student perceives that an examination question is incorrect or unclear, the student must answer the question to the best of his or her ability.

Generally, a student should expect to receive 60 minutes of examination time for every 50 questions on the examination. Often examinations will contain two to three questions per hour of instruction given, but this can vary considerably depending on the subject matter presented. Most examinations will not exceed 200 questions.

# **Violations of Examination Policies**

Cheating, or actions that give the appearance of cheating, will not be tolerated. It is the responsibility of the student to rigorously avoid any situation that could unfairly increase their personal examination score or change (increase or decrease) any other student's examination score.

Students are not to discuss examination questions with other students during any examination, whether it is administered all at once, in segments, or over extended time periods. Additionally, students are not allowed to discuss the examination with those who have not yet taken the examination.

If an <u>examination proctor</u> (including a faculty member, fellow, or teaching assistant administering a practical examination) observes a student behaving in a way that causes concern for cheating, immediately following the exam, the proctor will refer the situation to the Student Performance Committee (SPC) for further investigation. The observation and report of the proctor will carry considerable weight even in the absence of any other documentation of an examination irregularity (such as video recording).

If a <u>student</u> observes a suspected violation during an examination, he or she should report this to the proctor rather than personally attempt an intervention. The student must also submit the Honor Code Reporting Form on the <u>Office of Student Affairs SharePoint page</u> within three days of when the incident occurred. The matter will be brought to the Student Honor Code Committee (SHCC) for review (See Student Honor Code Committee section of this catalog).

If it is concluded that a violation has occurred, student sanctions may include;

- Suspension from the program for a designated period of time
- Academic probation for a designated period of time
- Repeating the associated course or system in its entirety during the next academic year
- Dismissal from WesternU/COMP

During the period of time that an alleged violation is being investigated, the status of the student(s) involved in the case will remain unchanged pending the outcome. The Dean or their designee will consider the recommendation of the SPC and the SPC recording secretary will communicate the results of the investigation to the student within 10 working days.

### **COMLEX (National Boards) Requirements**

Successful completion of the COMLEX-USA Level 1, COMLEX-USA Level 2 Cognitive Evaluation (CE), and COMLEX-USA Level 2- Performance Evaluation (PE) are a critical milestone toward obtainment of the DO degree. Requirements for a candidate to take the COMLEX-USA Level 3 include passing all other COMLEX exams as mentioned thus far and graduation from an osteopathic medical school accredited by COCA. Traditionally, WesternU/COMP performs well on all levels of the COMLEX examinations. The COMLEX-USA Level 3 pass rate is noted as: 2012-95.24% (national average-95.00%), 2011-91.70% (national average-91.45%), 2010-92.31% (national average-91.89%) , and 2009-91.79% (national average-91.10%).The Commission on Osteopathic Colleges Accreditation Standards, Section 6.8.1 mandates that all students must take and pass the National Board of Osteopathic Medical Education (NBOME) COMLEX Level I and COMLEX Level II (CE & PE) prior to graduation (www.osteopathic.org). WesternU/COMP's policy regarding COMLEX is as follows:

# **COMLEX Level I**

Students must take COMLEX Level I prior to the start of the rotations cycle for the class. Any
exception to this must have prior approval from the Associate Dean for Academic Affairs.
Examples of exceptions include students who are required to remediate a course or system in
order to complete requirements for the OMS II year or an LCME transfer student who may not
have completed the core Osteopathic requirements at the time of transfer.

- The examination may be taken at any NBOME-approved testing center.
- The COMP Administration will review the record of any student failing to take the COMLEX Level
  I prior to the start of the rotations cycle for the class. This may result in the student being
  removed from rotations and placed on Academic Suspension until the COMLEX Level I
  examination is taken and passed.
- A student who fails the first attempt of COMLEX Level I is required to immediately contact his or her Academic Advisor, the Associate Dean for Academic Affairs, and the LEAD office. The Student Performance Committee (SPC) will be notified and the student may be required to present before the SPC. Depending upon the actual performance on the examination, the student's past academic performance, and the student's upcoming rotations, he or she may be required to take a leave of absence (LOA) from rotations to prepare to take the exam a second time. The decision to require a student to take an LOA from rotations to study will be at the discretion of Associate Dean for Academic Affairs or their designee, in consultation with the SPC.
- A student who fails COMLEX Level I for the second time will be removed from rotations and
  placed on Academic Suspension. The student will be required to meet with the SPC to present
  evidence as to why he or she should be granted permission to take the exam for the third time.
  If permission to take COMLEX Level I a third time is granted, the student will remain on
  Academic Suspension until a passing score is received.
- A student who fails COMLEX Level I three times is subject to dismissal from COMP.

### **COMLEX Level II CE**

- A student is required to take COMLEX II CE provided he or she has successfully passed all Didactic Week discipline-specific shelf examinations.
- Students who are "on track" with their rotations must take COMLEX Level II CE by September 1
  of the OMS IV year. A student who is "off track" must obtain approval from the Associate Dean
  for Academic Affairs or their designee to take COMLEX Level II CE within 60 days after the
  completion of the OMS III curriculum.
- The COMP Administration will review the record of any student failing to meet this deadline. This may result in the student being removed from rotations and placed on Academic Suspension until the COMLEX Level II CE examination is taken and passed.
- The examination may be taken at any NBOME-approved testing center. Students are given a 24-hour excused absence from rotations to take COMLEX Level II CE if an advance request is made to the Rotations Department.
- A student who fails his or her first attempt of COMLEX Level II CE is required to immediately contact his or her Academic Advisor, the Associate Dean for Academic Affairs, and the LEAD office. The Student Performance Committee (SPC) will be notified and the student may be required to present before the SPC. Depending upon the actual performance on the examination, the student's past academic performance, and the student's upcoming rotations, he or she may be required to take a leave of absence (LOA) from rotations to prepare to take

the exam a second time. The decision to require a student to take an LOA from rotations to study will be at the discretion of the Associate Dean for Academic Affairs.

- A student who fails COMLEX Level II CE for the second time will be removed from rotations and placed on Academic Suspension. A second COMLEX Level II CE failure places a student at risk for delayed graduation and on time start of residency (if applicable). The student will be required to meet with the SPC to present evidence as to why he or she should be granted permission to take the exam for the third time. If permission to take COMLEX Level II CE a third time is granted, the student will remain on Academic Suspension until a passing score is received.
- A student who fails COMLEX Level II CE three times is subject to dismissal from COMP.

#### **COMLEX Level II PE**

- A student is required to take COMLEX II PE provided he or she has successfully passed all Didactic Week OSCEs.
- Students who are "on track" with their rotations must take COMLEX Level II PE by November 1 of the OMS IV year. A student who is "off track" must obtain approval from the Associate Dean for Academic Affairs or their designee to take COMLEX Level II PE within 120 days after the completion of the OMS III curriculum.
- The COMP Administration will review the record of any student failing take the COMLEX Level II
  PE prior to the timeline indicated above. This may result in the student being removed from
  rotations and placed on Academic Suspension until the COMLEX Level II PE examination is taken
  and passed.
- Currently the COMLEX II PE is only offered at the NBOME testing site in Conshohoken, Pennsylvania. Students are given a 72-hour excused absence from rotations to take COMLEX Level II CE if an advance request is made via the <u>Request for Time-Off Form</u>.
- A student who fails his or her first attempt of COMLEX Level II PE is required to immediately contact his or her Academic Advisor, the Associate Dean for Academic Affairs, and the LEAD office. The Student Performance Committee (SPC) will be notified and the student may be required to present before the SPC. The student will be required to participate in an individualized remediation plan that will include practice sessions under the direction of the Standardized Patient Program and assigned rotations designed to increase the student's clinical skills.
- A student who fails COMLEX Level II PE for the second time will be removed from rotations and placed on Academic Suspension. The student must inform his or her residency site (if applicable). The student will be required to meet with the SPC to present evidence as to why he or she should be granted permission to take the exam for the third time. If permission to take COMLEX Level II PE a third time is granted, the student will be required to participate in an another individualized remediation plan that will include practice sessions under the direction of the Standardized Patient Program and assigned rotations designed to increase the student's clinical skills.
- A student who fails COMLEX Level II PE three times is subject to dismissal from COMP.

# **Repeated COMLEX Exams (Timelines)**

All students retaking COMLEX Level I, COMLEX Level II CE, and/or COMPLEX Level II PE must complete the each exam attempt within 90 days of notification of a failed exam attempt. This policy applies for both the second and third attempts. Any exemptions to this policy must be approved by the Associate Dean of Academic Affairs.

# **NBOME Testing Accommodations**

If a student applies for and is granted ADA accommodations through the NBOME, he or she is required to inform the Associate Dean for Academic Affairs so that he or she can be excused from taking the exam by the deadline. The student is not required to provide the reason that accommodations are being requested. The student is required to provide updates on the status of the request as information becomes available.

#### Withdrawal

A student may choose to voluntarily withdraw at any time, or the university may administratively withdraw a student if they are absent for 30 or more days without communication (See Overview Section of University Catalog: Withdrawal from University/Program).

# Transfer to another College of Osteopathic Medicine

If it becomes necessary that a student in good academic standing wishes to transfer to another osteopathic medical college, the student will need to request the transfer by sending a letter to the Dean of COMP along with a letter of good standing (requested by the student from the Office of the Registrar). If a hardship has arisen that will be alleviated by transfer to another osteopathic medical college, this hardship should be clearly documented in the petition to the Dean.

#### Professional Accountability, Academic Performance and Promotion

Promotion is defined as academic and professional progression from one academic year to the next. A student will be promoted provided that all academic, legal, and financial requirements of the University, as stated in the Overview Section of the University Catalog, have been satisfied.

### **Academic Requirements**

The Student Performance Committee (SPC) will recommend students for promotion to the Dean or their designee. The SPC will not recommend a student for progression from one academic year to the next if the student has an outstanding grade of "I,", "NP, or "NCR" in a required course, final numeric score of less than 70%, or a yearly cumulative numeric score of less than 70%.

### **Professional Requirements**

An essential element of the academic program is professionalism. Professionalism will be emphasized throughout the curriculum and is a stand-alone element in determining academic advancement and achievement. When considering a student for promotion, professional, ethical, and personal conduct will also be taken into consideration (See Overview Section of the University Catalog: Academic Policies). For example, if a student fails or receives an Incomplete (I) in a course or rotation, fails to uphold the code of ethics, and/or demonstrates lapses in professionalism, they will be presented to the Student Performance Committee. Students with a delayed course or rotation completion may also be presented.

# **Academic Integrity/Professionalism**

The medical profession has long subscribed to a body of ethical statements developed primarily for the benefit of the patient. As a member of this profession, a physician must recognize responsibility not only to patients, but also to society, to other health professionals, and to self. As future physicians, students should adhere to the Student Honor Code and Student Code of Ethics.

#### **Student Honor Code**

"As future healthcare providers, students of WesternU/COMP will conduct themselves with honesty, integrity, professionalism, and pride. Students may not deceive, steal, or tolerate anyone who does".

#### **Student Code of Ethics**

The following code of ethics will be adopted by every WesternU/COMP student: I understand that it is a great privilege to study osteopathic medicine. Over the course of my training, I will assume extraordinary responsibility for the health and well-being of others. This undertaking requires that I uphold the highest standards of ethical and compassionate behavior. Accordingly, I have adopted the following statement of principles to guide me throughout my academic, clinical, and research work. I will strive to uphold both the spirit and the letter of this code in my years at WesternU/COMP and throughout my osteopathic medical career.

# Honesty

- I will maintain the highest standards of academic honesty.
- I will truthfully represent myself as an osteopathic medical student at all times to patients and healthcare providers.
- I will neither give nor receive aid in examinations or assignments unless such cooperation is expressly permitted by the instructor.
- I will be truthful with patients and will report accurately all historical and physical findings, test results, and other information pertinent to the care of the patient.
- I will conduct research in an unbiased manner, report results truthfully, and appropriately credit ideas developed and work done by others.

# **Confidentiality**

- I will regard confidentiality as a central obligation of patient care.
- I will limit discussions of patients to members of the health care team in settings removed from the public ear (e.g. not in elevators, hallways, cafeterias, etc.).

# **Respect for Others**

- I will uphold a classroom atmosphere conducive to learning.
- I will interact with instructors and peers in a considerate and cooperative manner.

- I will treat patients and their families with respect and dignity both in their presence and in discussions with other members of the health care team.
- I will interact with patients in a way that ensures their privacy and respects their modesty.
- I will interact with all members of the health care team in a considerate and cooperative manner.
- I will not tolerate discrimination on the basis of race, gender, religion, sexual orientation, age, disability, or socioeconomic status.
- I will judge my colleagues fairly and attempt to resolve conflicts in a manner that respects the dignity of every person involved.

# Responsibility

- I will conduct myself professionally--in my demeanor, use of language, and appearance--in the presence of patients, in the classroom, and in health care settings.
- I will set patient care as the highest priority in the clinical setting.
- I will recognize my own limitations and will seek help when my level of experience is inadequate to handle a situation on my own.
- I will not use alcohol or drugs in any way that could interfere with my clinical responsibilities.
- I will not use my professional position to engage in romantic or sexual relationships with patients or members of their families.
- I will participate fully in the enforcement of this statement of principles. I realize that failure to take appropriate action is itself a violation of the principles.

### Expectations of Faculty, Residents and Fellows

- I have the right to expect clear guidelines regarding assignments and examinations, as well as to have testing environments that are conducive to academic honesty.
- I cannot be compelled to perform procedures or examinations which I feel are unethical or beyond the level of my training.
- I have the right to not be harassed and to not be subjected to romantic or sexual overtures from those who are supervising my work.
- I have the right to be challenged to learn, but not abused or humiliated.

### **Student Honor Code Committee**

The above code serves as the foundation for the Student Honor Code Committee (SHCC), which hears cases and serves as a peer review system for honor code violations reported by fellow students. There is a COMP and a COMP-Northwest Student Honor Code Committee (SHCC). Each SHCC is comprised of

five students including the Vice-President of the OMS II class. The committee is chaired by the Vice Chair of the Student Performance Committee (SPC) and one of the 5 members is designated as the recording secretary. The recording secretary will send the minutes and decisions to the Office of Student Affairs for archival within one week of each meeting.

Reports of misconduct by students shall be submitted to the SHCC within three days via the Honor Code Reporting Form found on the Office of Student Affairs (OSA) SharePoint page. All reports made to the SHCC will remain completely confidential, and the reporter will not receive any further information regarding the case after submission. The reporter, however, may be asked to provide additional information or to be a witness, and they will have the opportunity to accept or decline the invitation.

The recording secretary will notify the student that they have been called to the SHCC and the accused student and their advisor will be offered an opportunity to meet with the committee prior to deliberation. The committee may recommend sanctions for student cases such as writing a professionalism essay, fulfilling service hours, writing an apology letter etc. If they feel that the case requires further review or more substantial consequences (e.g. suspension, dismissal), they can recommend that the case be sent to the SPC for consideration. The Chair of the SHHC will make a decision regarding the final course of action.

#### **Student Performance Committee**

There is a COMP and a COMP-Northwest Student Performance Committee (SPC). Each SPC is comprised of five voting faculty members, the chair, a recording secretary, and the following *ex officio* members: the Assistant Dean/Director for Student Affairs, Associate Dean for Academic Affairs, the Director of Outcomes and Measurements, and a representative from the Office of Learning Enhancement and Academic Development (LEAD)/Learning Skills and Accommodations (LSA).

Students whose academic performance or professional development negatively effects or impairs their ability to successfully progress through osteopathic medical school will be required to appear before the SPC. The recording secretary will notify the student that they have been called to the SPC, and the student and their advisor (if available) will meet with the committee prior to deliberation. The committee will submit its recommendations to the Dean, and the Dean will make a final decision regarding the course of action which could include; remediation, probation, suspension or dismissal. The Dean's decision may be appealed to the Provost following the University's appeal process (See Overview Section of the University Catalog: Student Appeal Process).

The Chair of the committee shall be appointed annually by the Dean of Osteopathic Medicine. The committee will meet at the invitation of the chair. Faculty members are appointed by the Dean for three years with staggered terms. For purposes of creating a voting quorum, the committee chair may be counted. A quorum will consist of one more than half of the five voting members of the committee (three voting members).

The SPC also has the responsibility of recommending to the Faculty as a whole the awarding of the degree of Doctor of Osteopathic Medicine for all students who satisfactorily complete all requirements for graduation as stated in the University Catalog.

#### Graduation

A student will be recommended for the Doctor of Osteopathic Medicine Degree provided he/she:

- u. Has complete at least four years in an accredited osteopathic college or equivalent.
- v. Has been enrolled in WesternU/COMP during his/her final two years.
- w. Is not on probation or suspension and has completed all prescribed academic and clinical requirements with a cumulative numeric score of at least 70% and has no outstanding grade of "I,", "NP", or "NCR,"
- x. Has successfully taken and passed the COMLEX Level I, COMLEX Level II CE, COMLEX Level II PE examinations.
- y. Has demonstrated no serious deficiencies in ethical, professional, or personal conduct, as defined in University Catalog, "General Academic Policies and Procedures" section, which would make it inappropriate to award the degree of Doctor of Osteopathic Medicine.
- z. Has complied with all the legal and financial requirements of the University as stated in the University Catalog.
- aa. Has attended in person and participated in the Commencement ceremony at which time the Doctor of Osteopathic Medicine degree is conferred. Unless special permission has been granted by the Dean, each student must participate in their respective commencement ceremony. If the Dean grants special permission for excusal from commencement, the graduate may be required to present themselves to the Dean or their designee at another specified date to take their profession's oath before their diploma will be released. Requests for excusal will only be granted for extenuating circumstances, such as a prior military commitment.

Students may participate in commencement activities provided they will complete all requirements of the program by December 31<sup>st</sup> of that calendar year. No student will receive his or her degree until the student has completed all requirements for graduation. Degrees will be dated as appropriate to completion date.

#### **Post Graduate Medical Education**

Graduation from WesternU/COMP with a DO degree does not guarantee placement in a residency or eventual licensure. Successful obtainment of a Post Graduate Medical Education (PGME) position, commonly known as internship or residency, is dependent upon many factors. PGME programs evaluate candidates on areas such as curricular performance, board scores, interpersonal skills, demonstration of leadership, etc. Candidates participate in a competitive process known as the Match to secure a PGME position. This occurs through either the National Matching Services (NMS) for positions offered by the American Osteopathic Association (AOA) or through the National Resident Match Program (NRMP) for positions offered by the Accreditation Council for Graduate Medical Education (ACGME). To participate in the NRMP match, students must be meet the following requirements by January 15<sup>th</sup> of their graduation year:

- 1. Student must be on track to complete all coursework/rotation requirements by July 1<sup>st</sup> of their graduation year
- 2. Student must have passed COMLEX I, COMLEX II CE, and COMLEX II PE

Students who do not meet the requirements listed above will be withdrawn from the NRMP match. Students expected to graduate after July 1<sup>st</sup> and who are participating in the NMS (AOA) match are **strongly encouraged** to disclose their anticipated graduation date to the programs they have applied to, as most residency positions are scheduled to begin on July 1<sup>st</sup>. Students are required to comply with all policies and requirements of their selected Match Program(s). Students are required to be familiar with all requirements and ignorance of those requirements is not a valid excuse for a Match violation. Any Match violation is grounds for dismissal from COMP.

Traditionally, WesternU/COMP students are very successful in the match. Table 1 indicates the match results for graduates from WesternU/COMP for the classes of 2009, 2010, 2011, and 2012.

Table 1

	2009	2010	2011	2012
# of Graduates	196	203	213	203
# Participating in Match	196	203	213	203
AOA	63	75	86	68
ACGME	127	109	123	129
Military	6	13	4	6
Unmatched	8	6	0	0
	204	203	213	203

# **Standards of Academic Progress**

Students must maintain a cumulative numeric score of at least 70% on a yearly basis to be considered making satisfactory academic and professional progress. A final grade of "Fail" or a numeric score below 70% in any course, system, or rotation must be remediated prior to promotion to the next level of training or graduation. Requirements must be completed as specified and aligned with the maximum time frame permitted to complete the program. Students will be subject to dismissal if they demonstrate a consistent pattern of substandard academic or professional performance.

# **Academic Probation**

A student may be placed on academic probation (See the Overview section of the University Catalog: Probation) for reasons including;

- A consistent pattern of substandard academic progress or professional development as determined by the Student Performance Committee (SPC). This includes, but is not limited to, receiving a failing grade in any course, system or rotation, or a grade of NCR in a required CR/NCR course.
- A cumulative percentage score less than 70%
- When directed to repeat a year for academic or professionalism reasons

Students on academic probation must meet with (in person/by phone) their faculty advisor at least once a month and must meet at least once with a representative from the Learning Enhancement and

Academic Development (Pomona) or Learning Skills & Accommodations Office (Lebanon) and any other resources suggested by the committee. It is the student's responsibility to arrange these meetings.

Students on academic probation must resign from all leadership roles in extra-curricular or cocurricular activities associated with the University, College, and/or with professional associations.

# Financial Aid Warning Policy (Title IV and Title VII)

If a student is not making Satisfactory Academic Progress (SAP) they may be placed on "Financial Aid Warning" status for the next payment period and continue to receive financial aid for that period. Financial Aid is any financial assistance offered to the student for paying for their education, such as loans, scholarships, Federal Work-Study, grants and stipends (judged on the criteria of the stipend). Students who fail to make SAP by the end of the payment period lose Financial Aid eligibility.

It is the policy of the <u>Financial Aid Office</u> (FAO) that once a student has been placed on academic probation for not meeting SAP standards as defined by the college, the FAO will automatically place the student in a Financial Aid Warning status. During the next academic term, if the student does not meet SAP standards and the college places the student on academic suspension, the student will no longer be eligible for financial aid. If the student appeals the academic suspension and the appeal is approved, financial aid will be reinstated. If the student is directed to audit courses, those courses will not be covered by financial aid.

### **Tutorial Assistance Program**

A Tutorial Assistance Program (TAP) has been established to assist students experiencing academic difficulty. Students will be recommended for this program by a faculty advisor or professor. Students may self-identify to TAP to receive assistance. The tutors will be chosen on the recommendation of the faculty in each discipline. Group tutoring is the methodology most used by the TAP department. For assistance, contact the Learning Enhancement and Academic Development Office (LEAD).

#### **Course Repeats and Remediations**

The educational objectives that underlie remedial teaching and evaluation will be the same as the educational objectives that underlie regular courses in the curriculum.

A student receiving a "NP" or a final numeric score below 70% in a course, system, or rotation and/or a cumulative numeric score below 70%, will be reviewed by the SPC and a recommendation will be made to the Dean or their Designee. The Committee will base its recommendation on the student's academic record and other considerations with input from the student, the student's faculty advisor, and the course, system, or rotation faculty members as appropriate. The SPC's recommendation to the Dean or their designee may include; requiring that the student remediate the course, system, or remediate; repeat the course, system, or rotation; repeat a semester; repeat the entire academic year; or be dismissed.

If the student is allowed to repeat or remediate, the course, system, or rotation, the Course Director will determine the way(s) in which the student will demonstrate acceptable academic performance and complete the requirement. This may include: passage of a comprehensive examination, completion of a special project or study in the deficient area(s) or other requirements as directed.

A student who successfully remediates a course or system will receive a grade of "RP" or 70% (if percentage scores are being used). A student who successfully remediates a rotation will receive a grade of "RP."

The academic record of a student who does not pass a remediated or repeated course, system, or rotation will be reviewed by the SPC and any of the following may occur: repeating a semester, repeating the academic year in its entirety, or dismissal.

A student who is required to repeat a course will be notified by the Department of Pre-Clinical Education at least 15 working days prior to the repeat date. If a student is directed to repeat a course(s), the grade(s) for repeated course(s) will be recorded on the official transcript. Only the most recent grade(s) received for a repeated course(s) will be included in the student's GPA calculation. Students will be charged full tuition for repeated coursework.

# **Remediation: Financial Aid Policy**

If the student, at the end of the academic year, is still considered to be making unsatisfactory progress and must remediate, he or she will not be eligible to receive Title IV or Title VII funding as per federal regulations, and will be removed from the list of eligible financial aid recipients.

# Suspension

A student may be placed on Academic, Conduct or Summary Suspension for the reasons outlined in the University Catalog (See Overview Section of the University Catalog: Suspension). Specific reasons why a student may be placed on academic suspension include;

- Failure to pass a second attempt of COMLEX Level I
- Failure to pass a second attempt of COMLEX Level II CE or PE
- Failure to perform in a professional manner or demonstration of serious deficiencies in ethical or personal conduct.

Students will meet with the SPC and a determination will be made if the student will require disciplinary action, be allowed to continue in COMP's academic program or if the student will be dismissed. If the student is allowed to resume his or her studies, the student will remain on academic probation until he or she has demonstrated that the deficiency has been resolved.

A student on academic suspension is not registered as an active student and is not eligible for financial aid during this time (See Overview Section of the University Catalog: Tuition Refund Policy). He or she is required to use the time to remediate the deficiency for which the academic suspension was levied. Students on academic suspension must resign from all leadership roles in extra-curricular or co-curricular activities associated with the University, College, and/or with professional associations.

#### Dismissal

A student may be dismissed if they display a consistent pattern of substandard academic performance and/or professional development, and/or if they jeopardize COMP's standards of scholarship, conduct and orderly operation. Examples of why a student could be dismissed include;

Receiving a cumulative numeric score of less than 70% at the end of the first or second year.

- Receiving a final percentage score below 70% in two or more courses or systems totaling more than 25% of the total credit hours for the first or second year\*.
- Receiving numeric scores of below 70% in two or more clinical rotations in one academic year.
- Receiving a "NP" or final percentage score of below 70% in a remediated course, system, or clinical rotation.
- Failing to pass the COMLEX Level I or COMLEX Level II CE or PE on the third attempt.
- Demonstrating a consistent pattern of substandard academic performance and/or professional development

\*The Committee may recommend dismissal for an OMS I or II student receiving a final percentage score below 70% in <a href="three-or-more">three or more</a> courses or systems, even if the total unsatisfactory credit hours do not exceed 25% of the total credit hours for the first or second years.

# **Evaluation and Grading**

# Pre-Clinical Curriculum Grading (OMS I & II)

Final pre-clinical course and system grades are reported on the transcript as Honors (HNR), Pass (P), or Fail (NP). These grades are assigned based on the final percentage score a student achieves in a course or system according to the following rubric:

<u>Grade</u>	<u>Equivalent</u>	<b>GPA Points</b>
HNR	Honors (90% and above)	N/A
P	Pass (70-89%)	N/A
NP	Fail (Less than 70%)	N/A
RP	Remediated Pass (70%)	N/A
CR	Credit	N/A
NCR	No Credit	N/A

# **ADMINISTRATIVE GRADES**

<u>Grade</u>	<u>Equivalent</u>	<b>GPA Points</b>
AU	Audit	N/A
1	Incomplete	N/A
W	Withdrawal	N/A
M	Missing	N/A

### Clinical Curriculum Grading (OMS III & IV):

Grades for rotations and courses are reported on the transcript as honors (HNR), High Pass (HP), Pass (P), Low Pass (LP), or Fail (NP). A failed course or rotation that is successfully remediated is designated as a "Remediated Pass" (RP) on the transcript. The following percentages will be used to convert performance indicators (e.g. Honors) into percentages (e.g. 100%) that will be used to calculate GPA and class rank:

<u>Grade</u>	<u>Equivalent</u>	<b>GPA Points</b>	
HNR	Honors (100%)	N/A	
HP	High Pass (90%)	N/A	
Р	Pass (80%)	N/A	
LP	Low Pass (70%)	N/A	
NP	Fail (69%)	N/A	
RP	Remediated Pass (70%)	N/A	
CR	Credit	N/A	
NCR	No Credit	N/A	
ADMINISTRATIVE GRADES			
<u>Grade</u>	<u>Equivalent</u>	<b>GPA Points</b>	
AU	Audit	N/A	
I	Incomplete	N/A	
W	Withdrawal	N/A	
M	Missing	N/A	

#### **Cumulative Numeric Scores and Class Rank**

The cumulative numeric score will be calculated at the end of each semester of the OMS I and II with the average of all course numeric scores weighted by the number of course credit hours attempted. Since rotation grades are received on a rolling basis, cumulative calculations will occur at the end of the OMS III year so that a student's quartile ranking can be reported on the Medical Student Performance Evaluation (MSPE). A final cumulative score will be calculated when all OMS IV grades are received.

If a course, system, or clinical rotation is repeated or remediated, only the last grade earned enters into the computation of the cumulative numeric score/grade point average, but the original numeric score remains on the student's transcript.

After completion of the OMS II year, a student with a cumulative numeric score of <75% may have some or all third-year clinical rotations assigned by the Associate Dean for Academic Affairs or their designee.

Cumulative class rank will not be calculated for transfer students. Osteopathic Undergraduate Teaching Fellows will not be ranked until the end of the final year.

### **Incomplete Grade (I) Courses or Systems**

An Incomplete (I) indicates that a student has not been able to finish all work required for issuance of a grade within the normally scheduled time of the course or system. The "I" is not counted in the grade point calculations and must be replaced before the student can register for the next academic term, unless other arrangements have been made with the Associate Dean for Academic Affairs or their designee. When the incomplete work is complete, the "I" grade remains on the transcript and the final grade that the student has earned for the course is listed following the "I" (e.g. I/Pass). If the required work is not completed within the specified time, the "I" will be converted to the score the student achieved in the course/system prior to the "I" being assigned.

### **Incomplete Rotations**

If a student is unable to finish a rotation due to an extraordinary personal or family situation, he or she must notify the /Department of Clinical Education prior to leaving the rotation. In cases of lifethreatening emergency, students are required to inform the Department of Clinical Education as soon as possible after the emergency is handled. Once the issue is resolved, a determination will be made on a case-by-case basis as to whether the student will be allowed to resume the rotation, get partial credit for the rotation, or repeat the rotation in its entirety.

If a student cancels a rotation on his or her own, leaves a rotation before it is finished without prior authorization of the Department of Clinical Education, or is asked to leave the rotation by the preceptor or other authorized rotation site personnel, the student will be placed on academic suspension and the rotation will be listed as "Fail" with a numeric score of 0 (zero) assigned. The Department of Clinical Education will notify the Office of Student Affairs who will place the student on academic suspension, and the student will be required to present before the Student Performance Committee (SPC). The SPC will forward a recommended course of action to the Dean or their designee. The recommendation may include; repeat of one or more rotations, repeat of the entire academic year or dismissal. The Dean or their designee will make the final decision, which can be appealed following the University's Appeal policy (see Overview Section of the University Catalog: Student Appeal Process).

### **Grade Reports**

Official grades are turned in to the Registrar by the Pre-Clinical Department or the Department of Clinical Education at which time the online student records system, BanWeb, is updated. Official grade reports and unofficial transcripts will be available on the BanWeb student records system throughout the academic year.

# **Grade Changes Pre-Clinical (OMS I & II)**

No grade or numeric score will be changed unless the Course or System Director or Pre-Clinical Curriculum Manager certifies in writing to the Associate Dean for Academic Affairs that either an error in computing or recording the score occurred or that a student has successfully remediated a course, system or rotation. This information will subsequently be transmitted to the Registrar.

For on-campus courses, students have a maximum of two weeks from the time examination results are released to them to bring any errors or irregularities in grading to the attention of COMP's Office of Academic Affairs (OAA). Remediated scores are recorded along with the original numeric score, but only the remediated score is calculated into the cumulative numeric score.

# **Grade Changes Clinical (OMS III & IV)**

In order to avoid problems and misunderstandings, students should make every effort to discuss the preceptor's evaluation of their performance prior to the completion of the clinical rotation. Once a grade has been sent to COMP, the student may not discuss the grade with the preceptor or clinical site. Failure to follow this policy will result in the student being assigned a final grade of "Fail" for the rotation, regardless of the original grade submitted by the preceptor or site.

If a student wishes to dispute a rotation grade, they must submit a ticket through the clinical education student portal in which they explain the situation, and provide documentation (including the mid-rotation evaluation) substantiating the reason for requesting review. All disputes must be submitted within 90 days of the date they are notified of the grade. The final evaluation will be made by the Assistant Dean/Director for Clinical Education, and the student will be informed of the final disposition of the rotation grade. The decision of the Assistant Dean/Director will be final.

Grade changes for rotations and courses will be considered only under the following conditions:

- When a student successfully remediates a rotation or course.
- When the preceptor or clinical site submits verbal or written information that a clerical error
  has been made regarding the rotation evaluation. In case of a verbal statement, the
  Assistant Dean for Clinical Education, Director of Clinical Education, or Clinical Education
  Manager must transcribe the statement and verify by his or her signature.
- When the preceptor submits a verbal or written request to have the score changed for reasons other than a clerical error. This request must include justification for making the change.

All grade changes must have the approval of the Rotation/Course Director and Assistant Dean/Director for Clinical Education.

#### **Credit hour Calculation**

Courses are rated at one credit hour for each 12 hours of lecture or 24 hours of laboratory practicum, directed independent study, or small group sessions. Credit hours of 2.5 will be assigned for each week of clinical rotations.

# **Issues/Dispute Resolution Procedure**

When an issue or dispute arises between students, the issue/dispute resolution process starts with communication among the involved students. If a satisfactory resolution is not arrived at that level, the matter should then be addressed with the course director or the faculty advisor. If the problem is not resolved at the faculty advisor/course director level, the matter should be brought to the Assistant Dean for Academic Affairs, followed by the Dean and then the Provost/COO. If the matter has not been resolved at those levels, the final arbiter is the President.

When an incident arises involving a faculty member, the first step in the issue/dispute resolution process is discussion with the faculty member. If the matter is not satisfactorily resolved at that level, then the matter should be referred to the Department Chair, Dean, and Provost/COO, in that order. The final arbiter is the Board of Trustees.

When an incident arises involving a staff member, the dispute resolution process begins with the Department Chair, followed by the Dean. The Office of Human Relations is the final arbiter.

Failure to follow this sequence of steps will only serve to delay the appropriate resolution of the issue or dispute as the matter will only be referred back to the correct level in this chain of responsibility.

### **Complaints regarding Accreditation Standards**

WesternU/COMP is committed to meeting and exceeding the standards for accreditation of colleges of osteopathic medicine as described by the American Osteopathic Association's Commission on Osteopathic College Accreditation (<a href="www.osteopathic.org">www.osteopathic.org</a>). A student who believes that WesternU/COMP may not be in compliance with a standard of accreditation has the right to file a complaint through the following procedure:

 A written, dated and signed complaint must be filed with the Office of Student Affairs, WesternU/COMP.

- A student affairs professional will consult with the Dean and form an *ad hoc* committee of faculty and students to investigate the complaint.
- The results of the investigation shall include findings of fact, a determination of compliance or non-compliance, and recommended corrective actions if non-compliance is determined.
   The results will be communicated in writing to the Dean of COMP, the Office of Student Affairs, and to the student complainant.
- If corrective action is indicated, the Dean will respond to the *ad hoc* committee with a plan for such action within 30 days of receipt of the committee's findings and recommendations.
- Records of all proceedings regarding complaints will be maintained by COMP's Office of Academic Affairs.

In the event that the student is not satisfied with the *ad hoc* committee's determination and/or the resulting corrective action plan, the student may communicate his or her complaint to:

Chairperson, Commission on Osteopathic College Accreditation
American Osteopathic Association
142 East Ontario Street
Chicago, Illinois 60611-2864

# **Curriculum Organization**

The curriculum at COMP is a four-year, full-time academic and clinical program leading to granting the degree of Doctor of Osteopathic Medicine (DO). COMP's curriculum stresses the interdependence of the biological, clinical, behavioral, and social sciences with emphasis on educating physicians for primary care medicine, employing the distinctive osteopathic principles, the maintenance of health, and the treatment of disease.

WesternU/COMP's educational program centers on the basic concepts of osteopathic medicine, and identifies and assists the student to develop the knowledge, cognitive and psychomotor skills, and the personal and professional behaviors required of an osteopathic primary care physician in order to provide competent and comprehensive health care to all members of a family on a continuing basis. This academic program is intended to meet the following goals:

- To accord primacy to the role of the musculoskeletal system in the total body economy.
- To recognize and emphasize the inherent capacity within the total person to overcome disease and maintain health.
- To equip students to cooperate with this therapeutic capacity in their methods of treatment.
- To provide sufficient academic training to make students aware of health needs that must be referred to a specialist.

A physician must be knowledgeable and skilled in problem solving. In order to achieve this goal, COMP's curriculum emphasizes the integration and application of basic and clinical sciences so that problem-solving becomes a fundamental part of the learning experience.

# Medical Gross Anatomy-Intensive Summer Anatomy Course (ISAC)

This course is sponsored by the Medical Anatomical Sciences Department for entering OMS I students. Preference is given to those who have had previous academic coursework and experience in anatomy. See OM 5002 for a course description.

# Pre-Clinical Curriculum (OMS I and II)

The first and second years of osteopathic medical school introduce the student fundamental scientific concepts as they apply to the study of medicine as well as the role of the physician in society. Exposure to clinical medicine with an emphasis on osteopathic principles and practice is woven throughout the curriculum.

Year 1, Fall Semester, DO/DONW 2017		
Course	Title	Credit Hours
IPE 5000	Patient Centered Cases I	1.00
OM 5015	Introduction to the Study of Medicine	1.00
OM 5025	The Molecular and Cellular Basis of Medicine	10.00
OM 5002	Medical Gross Anatomy (ISAC) OR	
OM 5030	Medical Gross Anatomy	12.00
OM 5045	The Physician and Society I	2.00
OM 5080	Essentials of Clinical Medicine I	3.50
OM 5090	Osteopathic Principles and Practice I	2.50
OM 5099	Service Learning I	1.00
Semester Total:		33.00
Year 1, Sprin	g Semester, DO/DONW 2017	
Course	Title	<b>Credit Hours</b>
IPE 5100	Patient Center Cases II	1.00
OM 5125	Neuroscience System	11.50
OM 5130	Musculoskeletal System	5.00
OM 5145	Introduction to Disease, Immunity, and Therapeutics	7.00
OM 5155	Behavioral Medicine and Psychiatry	5.50
OM 5175	Blood and Lymphatics System	4.00
OM 5180	Essentials of Clinical Medicine II	3.50
OM 5190	Osteopathic Principles and Practice II	2.50
OM 5199	Service Learning II	2.00
	Semester Total:	42.00
	Year 1 Total:	75.00

Year 2, Fall	Year 2, Fall Semester, DO/DONW 2016		
Course	Title	Credit Hours	
IPE 6000	Team Training in Healthcare I	1.00	
OM 6015	The Physician and Society II	3.00	
OM 6020	Cardiovascular System	8.50	
OM 6035	Renal System	4.50	
OM 6040	Respiratory System	8.50	
OM 6045	Endocrine System	5.50	
OM 6080	Essentials of Clinical Medicine III	3.50	
OM 6090	Osteopathic Principles and Practice III	2.50	
	Semester Total:	37.00	
Year 2, Spri	ng Semester, DO/DONW 2016		
Course	Title	<b>Credit Hours</b>	
IPE 6100	Team Training in Healthcare II	1.00	
OM 6115	Dermal System	3.00	
OM 6130	Reproductive System	6.00	
OM 6140	Gastrointestinal System and Nutrition	6.50	
OM 6172	Emergency Medicine	1.00	
OM 6173	Geriatrics	1.50	
OM 6176	Pediatrics	2.50	
OM 6180	Essentials of Clinical Medicine IV	3.50	
OM 6190	Osteopathic Principles and Practice IV	4.50	
	Semester Total:	29.50	
	Year 2 Total:	66.50	

# Clinical Curriculum (OMS III and IV)

COMP's clinical curriculum consists of the following clerkship rotations (each rotation is 4 weeks long, unless otherwise noted):

Year 3, DO/DONW 2015		
Course	Title	Credit Hours
OM 7010	Family Medicine	10.00
OM 7020	Internal Medicine I	10.00
OM 7021	Internal Medicine II	10.00
OM 7022	Internal Medicine III	10.00
OM 7030	Surgery (General)	10.00
OM 7050	Elective	10.00
OM 7051	Elective	10.00
OM 7060	Osteopathic Manipulative Medicine	10.00
OM 7070	Pediatrics	10.00
OM 7080	Psychiatry	10.00
OM 7090	Obstetrics/Gynecology	10.00
OM 8055	Essentials of Clinical Medicine V	3.50
	Year 3 Total:	113.50

Year 4, DO/DONW 2014		
Course	Title	Credit Hours
OM 7515	Medicine Sub-Internship	10.00
OM 7530	Surgery Sub-Internship	10.00
OM 7540	Emergency Medicine	10.00
OM 7550	Electives	70.00
OM 8555	Essentials of Clinical Medicine VI	3.50
	Year 4 Required Total:	103.50

# **Course Descriptions**

Courses listed in this catalog are subject to change through normal academic channels. New courses and changes in existing course work are initiated by the appropriate faculty members, departments, or programs, and must be approved by the Curriculum Committee, the faculty, and the Dean of COMP.

# IPE 5000 Patient Centered Cases - An Interprofessional Approach I (1 credit hour, CR/NCR)

IPE 5000 is offered as part of the college curriculum for all first year, entry level health professional students and is a university requirement for all participating colleges. The course is designed to prepare the healthcare student to practice patient-centered collaborative care through a team approach. Working in small interprofessional teams, students will explore cases representing conditions across the human lifespan.

# IPE 5100 Patient Centered Cases - An Interprofessional Approach II (1 credit hour, CR/NCR)

Continuation of IPE 5000.

# IPE 6000 Team Training in Healthcare I (1 credit hour, CR/NCR)

IPE 6000 will continue to build upon the knowledge from the IPE 5000 series, but will expand upon that knowledge and require the student to learn and apply advanced tools and strategies that are crucial to develop a collaborative healthcare team. The majority of the course is independent study with students engaging in a large scale tabletop activity where they apply team tools necessary to solve a healthcare dilemma.

# IPE 6100 Team Training in Healthcare II (1 credit hour, CR/NCR)

Continuation of IPE 6000.

# OM 5001 Summer Medical Sciences Preparatory Program (0 credit hours, CR/NCR)

The Summer Preparatory Program prepares incoming students for an introduction to the curriculum of Osteopathic medical school. This program includes course work in various topics, which may include gross anatomy, OMM, physiology, biochemistry and microbiology. Presentations focus on enhancing student study and test-taking skills. Acceptance into this program is at the discretion of the instructor/coordinator. The course is elective and does not meet any requirements of the Doctor of Osteopathic Medicine curriculum. A separate tuition of \$750 is charged. Students from other programs of the University may enroll in this course. For additional information, contact the Learning Enhancement and Academic Development (LEAD) Office.

#### OM 5002 Medical Gross Anatomy - Intensive Summer Anatomy Course (ISAC) (12 credit hours)

This course presents an understanding of the superficial and deep anatomical structures and their arrangement to one another while emphasizing normal function and clinical features of the human body. Through laboratory dissections of cadavers, radiology, and didactic lectures, students will learn the language of anatomy and clinically-important relationships. Particular attention will be paid to the neurovascular bundles throughout the entire body. In addition to dissections; models, radiographs, clinical presentations, and special demonstrations are employed to emphasize current clinically-relevant structures and presentations.

The sum total of this fast-paced course is that students will be able to identify all of the bones, organs, muscles, arteries, veins, nerves and lymphatic structures needed to be successful in subsequent DO curriculum and will be able to identify the anatomical defects, injuries, and malformations implicit in the clinical conditions interspersed within the dissection, labs, lectures, and exams. Students are selected for this course based on GPA and MCAT scores, as well as previous course work in anatomy. No separate fee is charged as the student registers for medical school upon matriculation into this course. Upon completion of ISAC, students will resume the anatomy curriculum by participating in the Head and Neck section, which occurs in the latter portion of the Medical Gross Anatomy Course. Students who complete ISAC with a minimum grade of 80% are potentially eligible to assist the faculty during the Gross Anatomy portion of the regular Medical Gross Anatomy course. To apply, contact the Course Director by e-mail or phone.

# OM 5003 ISAC Facilitation (4 credit hours, CR/NCR)

Prerequisites: Completion of OM 5002 with a final percentage score of 80% or higher and permission of the Course Director. Students enrolled in this elective course will assist the other first-year medical students in the dissection of cadavers and otherwise aid students in the regular Medical Gross Anatomy course. Other types of teaching assistance, including prosecting difficult-to-identify structures, may also be required.

### OM 5015 Introduction to the Study of Medicine (1 credit hour)

This course provides an introduction to COMP's curriculum, an overview of the college's academic processes and expectations, and presents other topics such as conflict resolution and professional communication. During the course, students appraise their motivations for Osteopathic medicine as a first step in the development of an identity as an Osteopathic physician. Learning styles and critical thinking skills are evaluated, and students are given study strategies based on their learning style types. Presentations regarding the effective use of electronic medical resources and the development of a professional portfolio are given.

### OM 5025 The Molecular and Cellular Basis of Medicine (10 credit hours)

This course presents an integration of molecular biology, biochemistry, cellular physiology and excitable cells, introductory genetics and histology and embryological development within the context of their clinical applications of basic biomedical sciences. Additionally, the course includes an introduction to pathology with a focus on neoplasia.

#### OM 5030 Medical Gross Anatomy (12 credit hours)

This course presents an understanding of the superficial and deep anatomical structures and their arrangement to one another while emphasizing normal function and clinical features of the human body. Through laboratory dissections of cadavers, radiology, and didactic lectures, students will learn the language of anatomy and clinically-important relationships. Particular attention will be paid to the neurovascular bundles throughout the entire body. In addition to dissections; models, radiographs, clinical presentations, and special demonstrations are employed to emphasize current clinically-relevant structures and presentations.

The sum total of this fast-paced course is that students will be able to identify all of the bones, organs, muscles, arteries, veins, nerves and lymphatic structures needed to be successful in subsequent DO curriculum and will be able to identify the anatomical defects, injuries, and malformations implicit in the clinical conditions interspersed within the dissection, labs, lectures, and exams.

#### OM 5035 Head and Neck Anatomy (3.5 credit hours)

This course is a continuation of the Gross Anatomy course (OM 5030). Through lecture and laboratory, students are introduced to the anatomy of the head and neck. Particular attention is paid to the cranial nerves, both their normal function and the numerous clinical syndromes that affect them. The anatomy lectures will also be supplemented with various clinical presentations. Only open to DO students matriculating prior to the 2012-2013 academic year or MSMS 2014 students by approval of the Dean.

# OM 5045 The Physician and Society I (2 credit hours)

This course explores the role of the physician in society through lecture, experiential and case-based learning. The topics include: an introduction to the healthcare fields, exploration of medical history and use of the scientific method, introduction to diversity as it relates to medical practice, medical ethics, professionalism, professional leadership, exploration of medical issues, and the challenges of medical practice on the physician.

# OM 5080 Essentials of Clinical Medicine I (3.5 credit hours)

Essentials of Clinical Medicine I introduces students to the world of clinical medicine through a multifaceted approach, including early patient contact with both model and simulated patients, facilitated small group sessions, didactic sessions, self-directed and online exercises, and group projects. Emphasis is on development of history-taking and physical examination skills, critical thinking skills, differential diagnosis formation, construction of treatment plans, and doctor-patient communication skills. Other components of the course include professionalism, medical informatics, service learning, and the role of the physician in society and health promotion and disease prevention.

# OM 5090 Osteopathic Principles and Practice I (2.5 credit hours)

This course presents osteopathic philosophy, principles and practice with a focus on osteopathic palpatory diagnosis and osteopathic manipulative treatment methods and procedures. Didactic and laboratory sessions emphasize an anatomical and physiological approach to palpatory skill development in the context of patient-centered problem-solving and patient health care management. Students are exposed to traditional and contemporary osteopathic manipulative techniques and modalities, which include but are not limited to soft tissue, articulatory (joint mobilization), muscle energy, high velocity/low amplitude (HVLA), strain/counterstrain, and lymphatic techniques. These procedures, when performed using the distinctive osteopathic philosophy and principles, enable the student to become proficient at assessing and treating somatic dysfunction as it relates to disturbances in posture and motion, respiration, circulation, metabolic processes, neurological, and behavioral functions. The material of the course is presented through a variety of learning situations including: one-to-one training sessions, hands-on laboratories, small group case and problem-based learning, didactic lectures, and collaborative and synergistic modules with the Family Medicine curriculum.

The NMM/OMM Department offers the COMP<sup>2</sup> program for students who are interested in additional exposure to patient care with the use of OMM as a treatment modality. The program includes supervised shadowing of the OMM faculty and Fellows Clinic, participation in assisting in training other students, and a few other specified venues. Although no course credit is given for participation in this program, it is recognized and considered by the COMP faculty as a recommended resource for the course.

# OM 5099 Service Learning I (1 credit hour)

This course provides students the opportunity to perform community service in a variety of community settings. Through community interaction and service, students learn the role and responsibility of the physician in society. Course lecture topics include: health literacy, public health, disease prevention, health promotion, program planning, behavior change, healthy communities, epidemiology, research methods, and biostatistics.

# OM 5125 Neuroscience System (11.5 credit hours)

This course presents basic understandings of the brain, spinal cord and peripheral nervous system. Basic science topics include embryology, histology, neuroanatomy, biochemistry, physiology and pharmacology. Clinical topics include infections of the nervous system, pathology, neurology, ophthalmology, otorhinolaryngology, and overviews of sleep disorders, cerebrovascular disorders, aging and dementia.

# OM 5130 Musculoskeletal System (5 credit hours)

This course reviews the embryology, histology, functional anatomy, physiology, microbiology, pharmacology, and pathology pertinent to the musculoskeletal system. Course instructors include both basic science faculty and clinical faculty from multiple specialties. Students are expected to integrate the clinical and basic science concepts and apply the appropriate evidence-based approaches to diagnosis and management of musculoskeletal diseases.

#### OM 5145 Introduction to Disease, Immunity and Therapeutics (7 credit hours)

This is an integrated course introducing microbiology, immunology, pathology, and pharmacology to prepare students for more in-depth study during the systems. Genetics, as related to these disciplines, is also included. Clinical applications of the basic sciences are emphasized.

# OM 5155 Behavioral Medicine and Psychiatry (5.5 credit hours)

Presented in conjunction with neuroscience, this course presents biological, psychological and social aspects of behavior in relation to medical practice. Major topics include the etiology and treatment of substance abuse, the physician-patient relationship, emotion and personality, etiology of gender identify and sexual orientation, human sexuality, evolutionary origins of behavior, and the genetic and environmental aspects of behavioral disorders. The course addresses how a patient's behaviors contribute to their health and/or disease. The physician's role in the education for behavioral change is also discussed. The psychiatry portion of the course builds upon the bio-psycho-social foundation presented during behavioral science. Major DSM-IV diagnoses will be explored. Implications for medical practice will be emphasized. The course develops the physician's ability to recognize and deal with, or to refer, the most common and prevalent psychopathologies encountered in the general population.

#### OM 5175 Blood and Lymphatics System (4 credit hours)

Students work as teams in small groups to address a variety of clinical cases that involve the hematopoietic and lymphoreticular organs, including anemia, clotting disorders, blood-borne infections, myeloproliferative and myelodysplastic disorders. Each case allows for integration of basic and clinical science concepts. Large-group interactive sessions provide guidance and expert facilitation regarding the clinical application of histology, physiology, pharmacology, biochemistry, microbiology, and pathology as well as epidemiology and evidence-based approaches to diagnosis and management.

# OM 5180 Essentials of Clinical Medicine II (3.5 credit hours)

Prerequisite: OM 5080. This course is a continuation of OM 5080.

# OM 5190 Osteopathic Principles and Practice II (2.5 credit hours)

Continuation of OM 5090.

# OM 5199 Service Learning II (2 credit hours)

Prerequisite: OM 5099. Continuation of OM 5099.

# OM 6015 The Physician and Society II (3 credit hours)

Prerequisite: OM 5045. This course is a continuation of OM 5045 and explores ethical and professional issues in medicine and the physician's role as a community leader and role model, through lectures, experiential and case based learning. Topics include: contemporary health policy, healthcare reform, the physician's role in promoting healthy lifestyle by practicing lifestyle medicine, medical jurisprudence, and the physician's role in disaster preparedness and global health.

# OM 6020 Cardiovascular System (8.5 credit hours)

Students work as teams in small groups to address a variety of clinical cases that involve valvular disease, congenital abnormalities, arrhythmias, heart failure, hypertension and ischemic heart diseases. Each case allows for integration of basic and clinical science concepts. Large-group interactive sessions provide guidance and expert facilitation regarding the clinical application of embryology, physiology, pharmacology, biochemistry, microbiology, and pathology as well as epidemiology and evidence-based approaches to diagnosis and management of cardiovascular disorders.

# OM 6035 Renal System (4.5 credit hours)

Students work as teams in small groups to address a variety of clinical cases that involve fluid and electrolyte disorders, acid-base disturbances, urinary tract infections, and acute as well as chronic kidney diseases. Each case allows for integration of basic and clinical science concepts. Large-group interactive sessions provide guidance and expert facilitation regarding the clinical application of embryology, histology, physiology, pharmacology, biochemistry, microbiology, and pathology as well as epidemiology and evidence-based approaches to diagnosis and management of renal disorders.

## OM 6040 Respiratory System (8.5 credit hours)

Students work as teams in small groups to address a variety of clinical cases involving important pulmonary diseases that may be characterized by a variety of symptoms and chest radiographic patterns. Each case allows for integration of basic and clinical science concepts. Large-group interactive sessions provide guidance and expert facilitation regarding the clinical application of embryology, histology, physiology, pharmacology, biochemistry, microbiology, and pathology as well as epidemiology and evidence-based approaches to diagnosis and management of disorders of the respiratory system. Critical care medicine concepts will be integrated with concepts already learned in the preceding endocrine, cardiovascular, and renal systems.

#### OM 6045 Endocrine System (5.5 credit hours)

Students work as teams in small groups to address a variety of clinical cases involving disorders of the hypothalamus and pituitary glands, the adrenal glands, diabetes, lipids, the thyroid gland, and calcium/bone metabolism. Each case allows for integration of basic and clinical science concepts. Large-group interactive sessions provide guidance and expert facilitation regarding the clinical application of embryology, histology, physiology, pharmacology, biochemistry, microbiology, and pathology as well as epidemiology and evidence-based approaches to diagnosis and management of endocrine disorders.

# OM 6080 Essentials of Clinical Medicine III (3.5 credit hours)

Prerequisite: OM 5180. This course builds upon the knowledge and skills that the student has learned in the first two courses in the series and provides advanced training in history-taking and physical examination skills, doctor-patient communication, differential diagnosis and treatment planning in preparation for clinical rotations. Issues including professionalism, medical errors and patient safety, medical informatics and evidence-based medicine are reviewed. Students will have opportunities to add to their professional portfolios.

# OM 6090 Osteopathic Principles and Practice III (2.5 credit hours)

Continuation of OM 5190. Students will continue to develop the osteopathic philosophy, principles and practice with a focus on osteopathic palpatory diagnosis and osteopathic manipulative treatment methods and procedures as applied to the upper and lower extremities and patient clinical scenarios. These procedures, when performed using the distinctive osteopathic philosophy and principles, enable the student to become proficient at assessing and treating somatic dysfunction as it relates to disturbances in posture and motion, respiration, circulation, metabolic processes, neurological, and behavioral functions. The material of the course is presented through a variety of instructional methods including didactic lectures, hands-on laboratories, small group case and problem-based learning, and collaborative modules with the Family Medicine curriculum.

The NMM/OMM Department offers the COMP<sup>2</sup> program for students who are interested in additional exposure to patient care with the use of OMM as a treatment modality. The program includes supervised shadowing of the OMM faculty and Fellows Clinic, participation in assisting in training other students, and a few other specified venues. Although no course credit is given for participation in this program, it is recognized and considered by the COMP faculty as a recommended resource for the course.

# OM 6115 Dermal System (3 credit hours)

Students work as teams in small groups to address a variety of clinical cases involving the largest organ in the body. Cases will involve either primary or secondary, as well as benign or malignant, skin lesions that may or may not be manifestations of internal disease, immunologic disease, drug reactions, or photosensitivity. Large-group interactive sessions provide guidance and expert facilitation with emphasis on distinguishing normal from abnormal findings, as well as the epidemiology and evidence-based approaches to diagnosis and management of multiple dermatologic conditions.

# OM 6130 Reproductive System (6 credit hours)

This course presents the anatomy, embryology, and histology of both the female and male reproductive systems. The physiology, biochemistry, pathology, pharmacology, and microbiology of both reproductive systems are also discussed. In addition, the basic science disciplines present principles regarding the relationships between mother and fetus during pregnancy. Clinical lectures on obstetrics, gynecology, and women's health are an important part of the system.

# OM 6140 Gastrointestinal System and Nutrition (6.5 credit hours)

Students work as teams in small groups to address a variety of clinical cases involving important diseases of the gut, hepatobiliary, and pancreatic systems that manifest as alterations in nutrient assimilation and waste evacuation. Each case allows for integration of basic and clinical science concepts. Large-group interactive sessions provide guidance and expert facilitation regarding the clinical application of embryology, histology, physiology, pharmacology, biochemistry, microbiology, and pathology as well as epidemiology and evidence-based approaches to diagnosis and management of gastrointestinal disorders.

# OM 6172 Emergency Medicine (1 credit hour)

This course serves to integrate the didactic clinical training that students received during the OMS I and II years, using case-based presentation pedagogy to foster clinical problem solving. Topics covered include chest pain, difficulty breathing, neurologic emergencies, cardiovascular complaints, infections, shock and trauma, abdominal pain, etc.

# OM 6173 Geriatrics (1.5 credit hours)

This course is devoted to the special problems that can occur in the elderly. Diseases and conditions learned during the systems are now explored in light of this population. Challenges of an aging population are explored.

# OM 6176 Pediatrics (2.5 credit hours)

This course is devoted to the special problems that can occur in the period between infancy to adolescence. Diseases and conditions learned during the systems are now explored in light of this population. Additionally, conditions and disorders specific to pediatrics are explored. This course is based on the medical student curriculum established by COMSEP in 2005.

# OM 6180 Essentials of Clinical Medicine IV (3.5 credit hours)

Prerequisite: OM 6080. This course is a continuation of OM 6080. As part of this course, students will take the Clinical Performance Evaluation (CPE) in preparation for the Clinical Performance section of the COMLEX examination. Students are required to pass the CPE in order to be promoted to the Clinical Training (Rotations) phase of the curriculum.

#### OM 6190 Osteopathic Principles and Practice IV (4.5 credit hours)

Continuation of OM 6090. Students will apply traditional and contemporary osteopathic manual techniques to ambulatory and hospitalized patient clinical scenarios, including those learned in previous courses, plus balanced ligamentous tension and A.T. Still techniques, as well as an intensive course segment on osteopathic approaches to diagnosis and treatment of somatic dysfunction in the head region.

The NMM/OMM Department offers the COMP<sup>2</sup> program for students who are interested in additional exposure to patient care with the use of OMM as a treatment modality. The program includes supervised shadowing of the OMM faculty and Fellows Clinic, participation in assisting in training other students, and a few other specified venues. Although no course credit is given for participation in this program, it is recognized and considered by the COMP faculty as a recommended resource for the course.

# OM 7010 Family Medicine (10 credit hours)

This course provides supervised clinical education in family medicine, including clinical management, technical and procedural skills, interpretation of diagnostic data, patient education, development of diagnostic and management plans, and inter-professional communication. In subsequent courses in this series, students are exposed to progressive involvement and independence in patient management.

# OM 7020 Internal Medicine I (10 credit hours)

This course provides supervised clinical education in general internal medicine including clinical management, technical and procedural skills, interpretation of diagnostic data, patient education, development of diagnostic and management plans, and inter-professional communication. In subsequent courses in this series, students are exposed to progressive involvement and independence in patient management.

# OM 7021 Internal Medicine II (10 credit hours)

Prerequisite: OM 7020. Continuation of OM 7020.

## OM 7022 Internal Medicine III (10 credit hours)

This course provides supervised clinical education in general internal medicine and/or in an internal medicine subspecialty such as gastroenterology, pulmonology, or cardiology. Expected competencies include clinical management, technical and procedural skills, interpretation of diagnostic data, patient education, development of diagnostic and management plans, and inter-professional communication. In subsequent courses in this series, students are exposed to progressive involvement and independence in patient management. Prerequisite: OM 7020.

# OM 7030 Surgery I (General) (10 credit hours)

This course provides supervised clinical education in general surgery including clinical management, technical and procedural skills, interpretation of diagnostic data, patient education, development of diagnostic and management plans, and inter-professional communication. In subsequent courses in this series, students are exposed to progressive involvement and independence in patient management.

# OM 7050 Elective (10 credit hours)

This course provides supervised clinical education in one of the clinical disciplines including clinical management, technical and procedural skills, interpretation of diagnostic data, patient education, development of diagnostic and management plans, and inter-professional communication. The discipline and clinical training site must be approved in advance by the Office of Clinical Education.

# OM 7051 Elective (10 credit hours)

This course provides supervised clinical education in one of the clinical disciplines including clinical management, technical and procedural skills, interpretation of diagnostic data, patient education, development of diagnostic and management plans, and Interprofessional communication. The discipline and clinical training site must be approved in advance by the Office of Clinical Education. An additional component of this rotation is completion of on-line radiology course.

# OM 7060 Osteopathic Manipulative Medicine (10 credit hours)

This course provides supervised clinical education in osteopathic manipulative medicine including clinical management, technical and procedural skills, interpretation of diagnostic data, patient education, development of diagnostic and management plans, and inter-professional communication.

#### OM 7070 Pediatrics (10 credit hours)

This course provides supervised clinical education in pediatrics including clinical management, technical and procedural skills, interpretation of diagnostic data, patient education, development of diagnostic and management plans, and inter-professional communication.

# OM 7080 Psychiatry (10 credit hours)

This course provides supervised clinical education in psychiatry including clinical management, technical and procedural skills, interpretation of diagnostic data, patient education, development of diagnostic and management plans, and inter-professional communication.

#### OM 7090 Obstetrics/Gynecology (10 credit hours)

This course provides supervised clinical education in obstetrics/gynecology including clinical management, technical and procedural skills, interpretation of diagnostic data, patient education, development of diagnostic and management plans, and inter-professional communication.

# OM 7515 Medicine Sub-Internship (10-15 credit hours)

This course requires students to function, under supervision, at the level of an intern. Expected competencies include clinical management, technical and procedural skills, interpretation of diagnostic data, patient education, development of diagnostic and management plans, and inter-professional communication. Minimum length: 4 weeks.

#### OM 7530 Surgery Sub-Internship (10-15 credit hours)

This course requires students to function, under supervision, at the level of an intern. Students may choose a sub-I experience in general surgery or one of the surgical subspecialties such as ophthalmology, orthopedics, urology, or cardiovascular/thoracic, or procedural subspecialties such as invasive radiology. Expected competencies include clinical management, technical and procedural skills, interpretation of diagnostic data, patient education, development of diagnostic and management plans, and inter-professional communication. Prerequisite: OM 7030. Minimum length: 4 weeks.

# **OM 7540 Emergency Medicine (10-15 credit hours)**

This course provides supervised clinical education in emergency medicine including clinical management, technical and procedural skills, interpretation of diagnostic data, patient education, development of diagnostic and management plans, and inter-professional communication.

# OM 7550 Elective (5-15 credit hours; repeatable to a maximum of 70 credit hours)

This course provides supervised clinical education in one of the clinical disciplines including clinical management, technical and procedural skills, interpretation of diagnostic data, patient education, development of diagnostic and management plans, and inter-professional communication. The discipline and clinical training site must be approved in advance by the Office of Clinical Education.

# OM 8055 Essentials of Clinical Medicine V (ECM-V) (3.5 credit hours)

The Essentials of Clinical Medicine V course is taken during the OMS III year and serves as a review of, and assessment tool for, basic clinical knowledge. This program reviews and amplifies clinical material presented during the OMS I and OMS II years. It also provides the opportunity for the student to obtain information and skills essential to rotations, residency, and medical practice. Topics include clinical, legal and ethical issues that are presented from a primary care perspective. Additionally, the course addresses special topics such medical professionalism, cultural sensitivity, and alternative healthcare. Throughout the course, the tools essential to becoming a competent practicing physician and lifelong learner are emphasized. Guided learning is accomplished through on-campus and on-line projects that enable students to demonstrate competence in completing clinically-oriented problems and case scenarios. Participation in the on-line projects and attendance at on-campus session(s) is mandatory. ECM-V must be successfully completed in order for the student to be advanced to OMS IV status.

# OM 8555 Essentials of Clinical Medicine VI (ECM-VI) (3.5 credit hours)

Essentials of Clinical Medicine-VI builds upon the essential knowledge and skills learned during the student's first three years of Osteopathic medical school, with the goal of helping the student to be able to successfully transition into his or her post-graduate training program and future medical practice. This is accomplished by enabling the student to apply general knowledge to specific clinical applications. In addition, ECM VI emphasizes medical professionalism and helps the student to sharpen skills vital to lifelong learning. Information is presented through one or more modalities including online and/or oncampus sessions.

#### **Honors and Awards**

The following awards are considered for presentation to DO students annually at Honor's Day:

Aaron Jaffe, MD/CareMore Scholarship Endowment Award

American Association of Colleges of Osteopathic Medicine's Student Council Presidents, Student

DO of the Year Award

Audry Tillmann Scholarship

Class of 1989 Award

Clem Parsons Memorial Scholarship

College of Osteopathic Medicine of the Pacific Dean's Award

Community Clinic Service Award

Dr. Lawrence F. Gosenfeld Scholarship

Dr. Robert E. Corey Memorial Scholarship

Glen Scheresky Memorial Scholarship

Linda Fox Memorial Endowment Award

Mr. and Mrs. Albert Victor Kalt Scholarship

National Dean's List Nominations

Osteopathic Physicians and Surgeons of California Award

Osteopathic Physicians and Surgeons of Oregon Award

Pomona Rotary Club Community Service Award

President's Society Award

Stahl Memorial Scholarship

Who's Who Among Students in American Universities and Colleges Nominations

William G. Stahl, DO, FACOS Memorial Scholarship

William G. Woodman, MD, Humanitarian Memorial Award

The following awards are considered for presentation to DO students annually at the East West Scholarship Dinner:

Beulah Chan Wong Memorial Scholarship

College of Osteopathic Medicine of the Pacific Alumni Scholarship

Dr. Tai-Hing Wu Scholarship

Dr. T.G. Wing Chow Scholarship

East West Scholarship

Francois T. Hoang Memorial Scholarship

Hoang Family Scholarship

Mae Ginn Memorial Scholarship

Wong Family Scholarship

The following awards are considered for presentation to DO students annually at the Graduate Awards Ceremony:

American Osteopathic Foundation: The Donna Jones Moritsugu Memorial Award American College of Osteopathic Family Physicians Award Alumni Memorial Award (if applicable)

- Clinical Chair Awards
- Family Medicine
- Internal Medicine
- Obstetrics and Gynecology
- Osteopathic Manipulative Medicine
- Pediatrics
- Spencer Gilbert Pathology
- Surgery

College of Osteopathic Medicine of the Pacific Dean of Student Affairs Award College of Osteopathic Medicine of the Pacific Dean's Award

Dr. and Mrs. Warren A. Peterson Scholarship

Dr. Alex M. Rene Memorial Award

East-West International Travel Scholarship

Edward B. Parris and Jacqueline A. Parris Award

Glasgow-Rubin Achievement Citation of the American Medical Women's Association

Joseph G. Adatto, DO, Memorial Award

Joseph Weiss Memorial Scholarship

Northwest Track Award

Pauline Weiss Pumerantz Memorial Award

President's Society Award

Professional Achievement Award

Reverend & Mrs. Al and Verna Braswell Award

Rafi Younoszai OMS IV Elective Rotation in International/Cross-Cultural Health Scholarship San Diego Foundation's San Miguel Association Medical Scholarship Fund

- Family Medicine
- Internal Medicine
- Pediatrics

Society of Academic Emergency Medicine Excellence in Emergency Medicine Award Who's Who Among Students in American Universities and Colleges

# **Academic Calendar**

\*Students in clinical rotations observe their preceptor's hours, which may include working on federal holidays.

#### Fall 2013

Monday, June 24, 2013

Fall Semester Rotations Begin (OMS III and IV)

Monday, December 23, 2013
Winter Recess Begins (OMS I and II)

Thursday, July 4, 2013

Independence Day – No Classes\*

July 30-August 1, 2013

Welcome Week, Lebanon (OMS I)

Saturday, August 2, 2013

Convocation/White Coat Ceremony, Lebanon

August 6 - August 9, 2013

Welcome Week, Pomona (OMS I)

Saturday, August 10, 2013

Convocation/White Coat Ceremony, Pomona

Monday, August 12, 2013

Fall Semester Classes Begin (OMS I and II)

Monday, September 2, 2013

Labor Day - No Classes\*

Monday, October 14, 2013

Columbus Day – No Classes\*

Wednesday, November 27, 2013

Thanksgiving Recess Begins @ 5:00 p.m.\*

Monday, December 2, 2013

Classes Resume (OMS I and II)

Friday, December 6, 2013

End of Fall Semester Rotations (OMS IV)

Friday, December 20, 2013

End of Fall Semester Classes (OMS I and II)

End of Fall Semester Rotations (OMS III)

# Spring 2014

# Monday, December 9, 2013

Spring Semester Rotations Begin (OMS IV)

# Monday, December 23, 2013

Spring Semester Rotations Begin (OMS III)

## Monday, January 6, 2014

Spring Semester Classes Begin (OMS I and II)

#### Monday, January 20, 2014

Martin Luther King Day – No Classes\*

# Monday, February 17, 2014

President's Day – No Classes\*

# Monday, March 24, 2014

Spring Break Begins (OMS I and II)

# Monday, March 31, 2014

Spring Classes Resume (OMS I and II)

# Friday, May 9, 2014

End of Spring Semester Classes (OMS II)

# Wednesday-Friday, May 14-16, 2014

Commencement

# Friday, May 16, 2014

End of Spring Semester Classes (OMS IV)

# Monday, May 26, 2014

Memorial Day - No Classes\*

# Monday, June 16, 2014

End of Spring Semester Classes (OMS I)

# Friday, June 20, 2014

End of Spring Semester Classes (OMS III)

# The Osteopathic Oath

I do hereby affirm my loyalty to the profession I am about to enter.

I will be mindful always of my great responsibility to preserve the health and life of my patients, to retain their confidence and respect both as a physician and a friend who will guard their secrets with scrupulous honor and fidelity, to perform fruitfully my professional duties, to employ only those recognized methods of treatment consistent with good judgment and with my skill and ability, keeping in mind always nature's laws and the body's inherent capacity for recovery.

I will be ever vigilant in aiding the general welfare of the community, sustaining its laws and institutions, not engaging in those practices which will in any way bring shame or discredit upon myself or my profession.

I will give no drugs for deadly purposes to any person, though it be asked of me.

I will endeavor to work in accord with my colleagues in a spirit of progressive cooperation and never by word or by act cast imputations upon them or their rightful practices.

I will look with respect and esteem upon all those who have taught me my art.

To my college I will be loyal and strive always for its best interests and for the interests of the students who will come after me.

I will be ever alert to further the application of basic biologic truths to the healing arts and to develop the principles of osteopathic medicine as taught by my profession.

In the presence of this gathering I bind myself to my oath.

# **College of Pharmacy**

# **Master of Science in Pharmaceutical Sciences**

#### Accreditation

Western University of Health Sciences is accredited by the Accrediting Commission for Senior Colleges and Universities of the Western Association of Schools and Colleges (WASC, 895 Atlantic Avenue, Suite 100, Alameda, California, 94501, phone number: 510-748-9001), a regional accrediting body recognized by the Council on Higher Education Accreditation and the U.S. Department of Education.

# **Program Objectives**

The major focus of the Master of Science in Pharmaceutical Sciences (MSPS) program is to provide students with a strong research focus, training and skills in order to prepare them for careers in academia, the pharmaceutical industry, or public/private research institutions.

# **Program Overview**

A minimum of 40 semester credit hours is required for completion of the MSPS program. This includes 20 hours of didactic study and 20 hours of research credits, leading to a thesis. The program emphasizes research in pharmaceutical sciences.

# **Program Faculty**

Program faculty are part of the Department of Pharmaceutical Sciences in the College of Pharmacy. Their areas of research emphasis include pharmacology, pharmaceutics, pharmacokinetics, drug metabolism, pharmacogenomics, toxicology, and molecular immunology.

# **Application and Admissions Requirements**

Graduates with a Bachelor of Science or Arts degree in pharmacy, chemistry, biology or a related scientific area are eligible for application.

Minimum criteria to receive consideration for admission are as follows. Meeting these criteria, however, does not guarantee admission into the program.

- A completed Western University of Health Sciences Graduate Application form (including all supplemental information for international applicants).
- Official transcripts of all undergraduate and graduate coursework with an overall GPA of 2.50 or greater on a 4-point scale.
- Official test scores for the general aptitude portion (verbal, quantitative, and analytical) of the Graduate Record Examination (GRE) taken within the last five (5) years, with a combined verbal and quantitative score of greater than or equal to 300 is recommended.
- Three letters of reference from individuals who are familiar with the applicant's scholarship and research potential.

 All applicants submitting course work from foreign schools are required to pass English language requirements before they are eligible for financial assistance. A minimum score of 89 on the Internal Based TOEFL (iBT) is recommended (minimum 23 Speaking, 22 Reading, 22 Writing and 22 Listening). Only iBT scores less than 2 years old from the application deadline will be considered.

# **Application Deadline**

Applications must be received (including all supporting application materials) no later than September 1 for the spring semester (January) and March 1 for the fall semester (August). A completed application that arrives before the deadline may be considered on a rolling basis.

# **Applicants with Foreign Coursework**

Applicants who wish to use coursework completed outside the United States must submit their transcripts for evaluation to a <u>Western University of Health Sciences Approved Service</u> at the candidate's expense. A course-by-course evaluation is required and all coursework must be designated as undergraduate, graduate or professional. WesternU only honors evaluations from one of the above services. The official evaluation must be included with the supplemental application packet.

#### **International Students**

International students and any other applicants who are not U.S. citizens and who are living in the U.S. should be prepared to provide proof of legal U.S. residency at the time of interview. Proof of legal U.S. residency is required prior to any offer of acceptance. For more detailed information, please visit our web page for <u>International Students</u>.

#### **Transfer Credit**

A maximum of 8 graduate level credits in which the student has earned an "A" from an equivalent program from another accredited U.S. university will be honored towards the Master of Science in Pharmaceutical Sciences for students transferring into WesternU. The Department of Pharmaceutical Sciences must approve all transfer credit, and the decision of the Department is final.

# Registration

All MSPS students are required to register by the registration deadlines specified by the University Registrar. Registration dates are posted at: <a href="http://www.westernu.edu/registrar-online-information">http://www.westernu.edu/registrar-online-information</a>. Failure to register by the deadline may be grounds for administrative withdrawal. All students registering after the posted deadline will be assessed a \$30.00 per business day late fee.

Full tuition and fees and all prior debts must be paid in full on or by posted deadlines each academic year. Matriculation is subject to the satisfactory completion of all academic requirements and payment of all outstanding debts to the University. The receipt of a final transcript(s) from all colleges/universities attended is required for incoming students. Also, all students must show proof of current health insurance coverage by the deadlines provided by the University Registrar. This coverage must be maintained or in effect throughout the academic year. If there is no proof of current coverage, students will be automatically enrolled in the school sponsored insurance plan.

# Withdrawing from Courses

Courses may be dropped without academic penalty on or before end of the third week of the semester. A course may be dropped after the third week of the semester only under unusual

conditions. When the MSPS Director of Graduate Education (MSPS Director), approves dropping the course under such circumstances, a "W" will be assigned for the course.

#### Full-time/Part-Time Status

All students enrolled in 8 units of coursework are considered full-time students in the MSPS program.

# Time Limits

The Master of Science in Pharmaceutical Sciences program is designed to be completed in two (2) years of full-time study. The requirements for the degree must be fulfilled within three (3) years from the date of matriculation to the program. Exceptions must be approved by the program.

#### **Tuition and Fees**

In estimating costs for one academic year of study at Western University of Health Sciences' MSPS program, you should include tuition and fees, books and supplies, room and board, and other miscellaneous expenses. By action of the Board of Trustees, MSPS tuition and fees for the 2013-2014 academic year (subject to change) are as follows:

\$701.00	Per Credit Hour
Other Fees and Expenses	
\$30.00	Registration Late Fee (per business day)
\$350.00	Graduation Fee
\$470.00	Annual Parking Permit (Auto)
\$25.00	Parking Permit Replacement Fee
\$40.00	Locker Key Replacement Charge
\$10.00	Official Transcript (Each)
\$21.00	Rush Transcript, First Class Mail (Each)
\$25.00	Rush Transcript, Federal Express (Each)
\$10.00	Student ID Replacement Fee
TBD	Breakage Fee (Replacement Cost)

# **Financial Support**

Financial support, which includes a stipend and full payment of tuition, is available to qualified applicants on a limited, competitive basis in the form of teaching and research assistantships. Support is for 12 months (including summers) and is limited to a total of two consecutive years for any student. Students may also receive a travel stipend, which allows for travel to a national meeting.

#### **Academic Requirements**

# **Attendance and Absences**

Attendance is required at all scheduled instructional periods. Absence from instructional periods for any reason does not relieve the student from responsibility for the material covered during the periods missed.

#### **Vacation and Emergencies**

Students receive two weeks' vacation each year over the Christmas break. Students may not expect to take more time than this, may not leave early or return late from the break. Vacations are not

provided during academic semesters. Summers are the optimal time for focused research effort and as such no vacation time is allowed for this period. Under special circumstances, a student may arrange a brief 1 -3 days off at the discretion of the MSPS Director and their faculty supervisor in advance. It is the MSPS Director's and faculty supervisor's prerogative whether to grant the time off and is not guaranteed. Students should not enter the program with the expectation of taking time off for other pursuits (i.e., interviews for other programs, leaving the country, hobbies, etc.)

Emergencies, including medical problems or serious personal/family issues, which result in less than 15 academic days (3 calendar weeks) away from campus, may be granted upon approval by a student's faculty mentor, in conjunction with the MSPS Director. Any missed course material is the responsibility of the student, and students may be required to complete alternative assignments, at the discretion of course faculty.

Students with emergencies resulting in more than 15 academic days (3 calendar weeks) away from campus must apply in writing for a Leave of Absence to the appropriate College Dean or his/her designee. Please see the University Catalog's "General Academic Policies and Procedures" for more specific information on a Leave of Absence.

#### **Thesis**

The thesis will be based on a research project that the student will undertake in the MSPS program. The faculty advisor will help the student select a topic and mentor the student in his/her progress.

MSPS candidates are required to present a written report of the thesis and present it to the thesis advisory committee for approval. In addition, students will be required to defend their theses via an oral presentation of the thesis content at the end of the program. The oral defense may also include questions based on the required course work completed by the student. The defense committee will consist of the thesis committee and an external member from within the Western University of Health Sciences faculty, whose role will be to ensure that the defense is conducted fairly.

All candidates must pass a comprehensive examination covering the coursework, as well as the research and thesis. This usually is a two-hour oral examination. Members of the university faculty not on the thesis advisory committee may attend any oral examination as visitors. The faculty advisor will schedule the oral examination no later than the date of the deadline set by the Director of Graduate Education. Successful completion requires the unanimous support of all members of the thesis advisory committee. If a student fails the oral examination, a re-examination may be accorded the student based upon the recommendation of the thesis advisory committee and approval of the Director of Graduate Education. Further re-examination may be allowed only under exceptional circumstances and only with the approval of the MSPS Director, Department Chair and the Dean of the College of Pharmacy.

Upon satisfactorily passing all examinations, students are to provide 7-8 professional printed copies of their thesis for their committee members (3-4 copies), the department (1 copy), the dean's office (1 copy), and the university library (2 copies).

A fee will be charged to the student for microfilming his/her thesis.

# **Faculty Advisor and Thesis Advisory Committee**

The faculty advisor serves as the chair of the student's thesis advisory committee and helps the student in his/her choice of electives and research projects/thesis topic. Further, the advisor may also assist the student in obtaining a research assistantship if funds are available. The chair is responsible for the satisfactory academic progress of the student, and must hold committee meetings with the student on a regular basis.

Each student will be assigned a faculty advisor prior to admission to the program, and must remain with that advisor for the duration of the degree program. The thesis advisory committee consists of at least three faculty members (the faculty advisor plus two other faculty members). The chair and at least two of the committee members must be full-time faculty in the Department of Pharmaceutical Sciences at the Western University of Health Sciences College of Pharmacy. Upon approval by the Director of Graduate Education, a fourth member from outside of the department may be eligible for appointment to the committee.

#### Graduation

A student will be recommended for the Master of Science in Pharmaceutical Sciences degree provided he/she:

- a) Is not on probation or suspension and has completed all prescribed academic requirements with a cumulative grade point average of above 3.00 and has no outstanding grade of "I," "NCR," or "U". A 2.00 (C) grade earned in any class may be applied toward graduation only if the overall grade point average at the time of application for graduation continues at a minimum 3.00 (B) cumulative grade point average.
- b) Has satisfactorily completed and orally defended a written thesis.
- c) Has demonstrated no serious deficiencies in ethical, professional, or personal conduct, as defined in University Catalog, "General Academic Policies and Procedures" section, which would make it inappropriate to award the degree of Master of Science in Pharmaceutical Sciences.
- d) Has complied with all the legal and financial requirements of the University as stated in the University Catalog.
- e) Has attended in person and participated in the Commencement ceremony at which time the Master of Science in Pharmaceutical Sciences degree is conferred. Unless special permission has been granted by the Dean, each student must participate in their respective commencement ceremony. Requests for excusal will only be granted for extenuating circumstances, such as a prior military commitment.

Students may participate in commencement activities provided they will complete <u>all</u> requirements of the program by December 31<sup>st</sup> of that calendar year. No student will receive his or her degree until the student has completed all requirements for graduation. Degrees will be dated as appropriate to completion date.

# **Standards of Academic Progress**

Only grades in Western University of Health Sciences courses approved for graduate credit will be used in determining the overall grade point average for continuation in the MSPS program. If, at the end of any semester, the cumulative grade point average falls below 3.00, the student will be placed on academic probation, and financial support will be discontinued. A 2.00 ("C") grade earned in any class may be applied toward graduation only if the overall grade point average at the time of application for graduation continues at a minimum 3.00 ("B") cumulative grade point average. Any grade below a 2.00 ("C") may not be applied toward graduation.

#### **Graduate Student Performance Committee**

The purpose of the Graduate Student Performance Committee (GSPC) is to: (1) recommend policies and standards for students' academic performance; (2) review student performance and professional conduct and advise students' faculty mentors in cases where counseling may be appropriate; and (3) review all cases involving grade appeals and allegations of academic or professional misconduct. All policy recommendations from the GSPC are forwarded to the Department Committee; all recommendations concerning academic or disciplinary action are forwarded to the Dean of the College of Pharmacy.

## **Probation or Academic Suspension**

Students may be placed on Probation or Academic Suspension for the following reasons (these are in addition to the reasons listed in the WesternU General Academic Requirements section on Probation in the Overview Section of this Catalog):

- 6. Inadequate academic progress as determined by the Graduate Student Performance (GSPC) Committee. This includes, but is not limited to, receiving a "U" grade in any course or system.
- 7. A semester or cumulative grade point average below 3.00.
- 8. Failure to perform in a professional manner.
- 9. Serious deficiencies in ethical or personal conduct.

Students on Academic Suspension are not registered as an active matriculant and should use this time to remediate for the deficiency for which the Academic Suspension was levied. On campus students on probation must meet with their faculty advisor at least once a month. It is the student's responsibility to contact the faculty advisor to arrange these meetings.

A student on probation for receiving a grade of "U" or for a GPA less than 3.00 in a semester will be removed from probation after one semester provided he/she has regained a cumulative GPA of at least 3.00 and/or has remediated the failed course. Students on probation are to remove themselves from all leadership roles in co-curricular activities associated with the University and/or with professional associations.

# Financial Aid Warning Policy (Title IV and Title VII)

If a student is not making Satisfactory Academic Progress (SAP) they may be placed on "Financial Aid Warning" status for the next payment period and continue to receive financial aid for that period. Financial Aid is any financial assistance offered to the student for paying for their education, such as

loans, scholarships, Federal Work-Study, grants and stipends (judged on the criteria of the stipend). Students who fail to make SAP by the end of the payment period lose Financial Aid eligibility.

It is the policy of the Financial Aid Office (FAO) that once a student has been placed on academic probation for not meeting SAP standards as defined by the college, the FAO will automatically place the student in a Financial Aid Warning status. During the next academic term, if the student does not meet SAP standards and the college places the student on academic suspension, the student will no longer be eligible for financial aid. If the student appeals the academic suspension and the appeal is approved, financial aid will be reinstated. If the student is directed to audit courses, those courses will not be covered by financial aid.

# **Tutorial Assistance Program**

A Tutorial Assistance Program (TAP) has been established to assist students experiencing academic difficulty. Students will be recommended for this program by a faculty advisor or professor. Students may self-identify to TAP to receive assistance. The tutors will be chosen on the recommendation of the faculty in each discipline. Group tutoring is the methodology most used by the TAP department. For assistance, contact the Learning Enhancement and Academic Development Office (LEAD).

# Dismissal

If the cumulative grade point average remains below a 3.00 after the student completes a total of 6 (six) graded credit units subsequent to being placed on academic probation, the student will be dismissed from the program. Students who receive a no-credit grade for PHSC 6999 (Research and Thesis) will be dismissed regardless of GPA or academic standing in the program.

# **Evaluation and Grading**

# **Program Outcomes**

#### **Critical Thinking**

The MSPS graduate will be able to identify and understand critical issues in pharmaceutical sciences. They should possess the ability to challenge and evaluate information using evidence-based research principles, as well as synthesize and integrate knowledge in the discipline, leading to new ideas, approaches and research.

# Breadth and Depth of Knowledge

The MSPS graduate will understand the current and historical theories, concepts, and models of pharmaceutical sciences. They should possess the ability to access and evaluate the literature of the discipline and understand the major issues in the current state of knowledge. They should also possess an ability to transcend traditional disciplinary boundaries and effectively conduct original, discovery-based or applied research in pharmaceutical sciences under the direct guidance of a faculty member.

#### Interpersonal Skills

The MSPS graduate will possess the ability to write and speak about the current issues of pharmaceutical sciences to peers, practitioners and the public. They should be able to articulate and demonstrate knowledge of the discipline and write and present scholarship to professionals.

#### **Collaboration Skills**

The MSPS graduate will be able to collaborate with other members of the research team, with colleagues (both within the discipline and across related disciplines), and if appropriate, with other communities of interest in the conduct of a research program.

# **Ethical and Moral Decision Making (Humanistic Skills)**

The MSPS graduate will understand and exhibit the professional standards for responsible and ethical conduct of research in pharmaceutical sciences.

## **Life-Long Learning**

The MSPS student should be able to engage in life-long, self-directed learning to maintain and expand competence in the discipline, including staying abreast of current issues, methods and approaches in pharmaceutical sciences.

#### Evidence-Based Research

The MSPS student will have a solid ground in the literature pertaining to a particular question and be able to understand and appropriately use methods and techniques of advancing knowledge in their field of study. They should be capable of designing, working within, and coordinating multi-disciplinary research programs.

#### **Grading Scale**

Final course grades are given based upon the traditional 4-point letter system, as follows:

<u>Grade</u>	<u>Equivalent</u>	<b>GPA Points</b>
Α	Excellent	4.00
В	Good	3.00
С	Satisfactory	2.00
U	Unsatisfactory	0.00
CR	Credit	N/A
NCR	No Credit	N/A

# **ADMINISTRATIVE GRADES**

<u>Grade</u>	<u>Equivalent</u>	<b>GPA Points</b>
AU	Audit	N/A
1	Incomplete	N/A
W	Withdrawal	N/A
M	Missing	N/A

#### **Incomplete**

An Incomplete grade ("I") will only be assigned to students whose professional commitments and/or personal responsibilities prevent him or her from completing the requirements of the course. A student may remove an incomplete by completing course requirements within the following six calendar months or the final grade will be permanently recorded as a "U". This rule applies regardless of the student's enrollment status. A student not enrolled during the following six months must still successfully remove the "I" grade. The instructor must certify any grade changes. The "I" grade will remain on the student's transcript, along with the final grade assigned by the instructor.

#### **Grade Reports**

Official grades are turned in to the Registrar from the Departmental Office, at which time the online student records system, BanWeb, is updated. Official grade reports and unofficial transcripts will be available on the BanWeb student records system throughout the academic year.

#### **Credit Hour Calculation**

Courses are rated at one semester hour (1 credit hour) for each contact hour per week for didactic hours and 1 credit hour for 3 hours per week of laboratory hours.

# **Grade Appeals Process**

# **Appealing a Course Grade**

If a student believes there is just cause to dispute a grade for a course, the procedure is as follows: Within five (5) days of receipt of the course grade, the student must make an appointment with the course instructor(s) who issued the grade. Upon written request from the student, the course instructor(s) shall review the case with the student, and a decision shall be made by the course instructor to affirm or modify the grade. Within ten (10) working days of the student's written request, the course instructor shall notify the student in writing of the decision. A copy of the Grade Change Form shall be sent to the student and the Master of Science in Pharmaceutical Sciences Director.

Within five (5) working days following written notification to the student regarding the instructor's decision, the student may appeal the decision in writing to the MSPS Director. The appeal request must be accompanied by a narrative explaining the basis for the appeal. The narrative should fully explain the student's situation and substantiate the reason(s) for advocating a review of the prior decision of the instructor. The MSPS Director may grant an appeal only if a claim of (1) bias, (2) the appearance of new material and documentable evidence that was not available at the time of the instructor's decision, or (3) procedural error that unfairly affected the decision-making process is substantiated by the Chair. Upon written request from the student with a valid appeal rationale, the MSPS Director shall review the case and within seven (7) working days shall issue a decision in writing to the student, which may affirm, modify, or reverse the previous action of the instructor.

The MSPS Director's decision is final in all course grade appeals except when the MSPS Director is the official instructor of the course in question. In such a case, the student will direct his or her appeal to the Dean of the College of Pharmacy, following the same guidelines for an appeal to the MSPS Director. The decision of the Dean in this instance is final.

The student may remain in class pending the outcome of appeals, except in cases of summary suspension or when the Provost, Vice Provost or the Dean of the College Pharmacy has suspended the student or has otherwise determined that it is inappropriate for the student to remain in class.

# **Issues/Dispute Resolution Procedure**

When an issue or dispute arises between students, the issue/dispute resolution process starts with communication among the involved students. If a satisfactory resolution is not arrived at that level, the matter should then be addressed with the course instructor or the faculty advisor. If the problem is not resolved at the faculty advisor/course instructor level, the matter should be brought to the MSPS Director, followed by the Dean and then the Provost/COO. If the matter has not been resolved at those levels, the final arbiter is the President.

When an incident arises involving a faculty member, the first step in the issue/dispute resolution process is discussion with the faculty member. If the matter is not satisfactorily resolved at that level, then the matter should be referred to the MSPS Director, Dean, and Provost/COO, in that order. The final arbiter is the Board of Trustees.

When an incident arises involving a staff member, the dispute resolution process begins with the MSPS Director, followed by the Dean. The Office of Human Resources is the final arbiter.

Failure to follow this sequence of steps will only serve to delay the appropriate resolution of the issue or dispute as the matter will only be referred back to the correct level in this chain of responsibility.

# **Curriculum Organization**

To graduate, students must complete a minimum of 40 credit hours, including 8 credit hours of the two core courses (Advanced Pharmaceutical Sciences I and II), 8 credit hours of Graduate Seminar, 4 credit hours of Electives, and 20 credit hours of Research and Thesis.

# **Required Courses**

Subject/Course #	Course Title	Credit Hours
PHSC 5101	Advanced Pharmaceutical Sciences I	4.00
PHSC 5102	Advanced Pharmaceutical Sciences II	4.00
PHSC 6000	Graduate Seminar	2.00/Semester
PHSC 6999	Research and Thesis	5.00/Semester
Total Required Credit Hours:		36.00

# **Elective Courses**

Subject/Course #	Course Title	<b>Credit Hours</b>
PHSC 5990	Directed Readings	1.00-4.00
PHSC 6101	Novel Dosage Forms	4.00
PHSC 6102	Advanced Physical Pharmacy	4.00
PHSC 6103	Product Development	4.00
PHSC 6201	Advanced Pharmacokinetics	4.00
PHSC 6301	Neuropharmacology	4.00
PHSC 6302	Advanced Pharmacology	4.00
PHSC 6401	Advanced Immunology	4.00
PHSC 6402	Advanced Immunology and Immunotherapies	4.00
PHSC 6701	Advanced Toxicology	4.00
PHSC 6901	Research Techniques: Theory and Practice	4.00
	Total Required Credit Hours:	4.00

# **Course Descriptions**

All courses are awarded letter grades, except when indicated otherwise.

## PHSC 5101 Advanced Pharmaceutical Sciences I (4 credit hours)

This course covers a wide range of topics such as immunology, pharmacology, biostatistics and toxicology. Some laboratory safety and research techniques will also be discussed in the course.

#### PHSC 5102 Advanced Pharmaceutical Sciences II (4 credit hours)

This course covers a wide range of topics in advanced pharmaceutical sciences such as pharmaceutics, biopharmaceuticals, biotechnology, pharmacokinetics, drug metabolism and transport, and pharmacogenomics.

# PHSC 5990 Directed Readings (1-4 credit hours)

Selected study of topics in the pharmaceutical sciences.

# PHSC 6000 Graduate Seminar (2 credit hours, CR/NCR)

This course follows a discussion and seminar format where students are required to discuss current literature in the pharmaceutical sciences and present recent advances in the pharmaceutical sciences. The goals of this course are to provide the student with a well-rounded understanding of the current field of pharmaceutical sciences, presentation skills, and the ability to critically examine scientific literature. This course is required of all MSPS students in each semester of the program. Repeatable to a maximum of 8 credit hours.

# PHSC 6101 Novel Dosage Forms (4 credit hours)

This course covers the theoretical basis and design of controlled release and site specific drug delivery systems such as transdermals, microspheres, liposomes and monoclonal antibodies.

#### PHSC 6102 Advanced Physical Pharmacy (4 credit hours)

This course discusses applications of physiochemical principles in the evaluation of pharmaceutical systems, preformulation, and drug transport.

#### PHSC 6103 Product Development (4 credit hours)

This course covers the formulation, evaluation and actual manufacture of pharmaceutical products.

#### PHSC 6201 Advanced Pharmacokinetics (4 credit hours)

This course covers pharmacokinetic and pharmacodynamic principles and methods used to study absorption, distribution, metabolism and excretion of drugs.

# PHSC 6301 Neuropharmacology (4 credit hours)

Neuropharmacology principles will be introduced and integrated with experimental applications. Course topics include chemical and electrical transmission, neurotransmitter chemistry, neuroreceptor pharmacology and signal transduction mechanisms, structure and function of ion channels and ligand binding sites, synaptic plasticity, and an introduction to electrophysiology. Relevant and recent primary literature articles will be introduced for reading and subsequent group discussion.

# PHSC 6302 Advanced Pharmacology (4 credit hours)

This advanced elective will address concepts and principles of neuronal identity and function that are germane to pharmaceutical sciences. Principles will be introduced followed by experimental applications. The course will integrate molecular, cellular, and behavioral concepts when applicable. Course topics include chemical and electrical transmission, neurotransmitter chemistry, neuroreceptor pharmacology and signal transduction mechanisms, structure and function of ion channels and ligand binding sites, synaptic plasticity with an introduction to electrophysiology. Relevant and recent primary literature articles will be introduced for reading and subsequent group discussion.

# PHSC 6401 Advanced Immunology (4 credit hours)

This advanced elective will address concepts and principles of molecular biology and immunology with an emphasis in molecular neuroimmunology. Topics will include cells, organs and effector systems involved in both cell-mediated and humoral-mediated immune activity. Time will be spent looking at regulatory interactions among different components of the immune system and the deleterious effects of aberrant immune processes. Principles will be introduced, followed by experimental applications. Relevant and recent primary literature articles will be introduced for reading and subsequent group discussion.

# PHSC 6402 Advanced Immunology and Immunotherapies (4 credit hours)

This course is designed to enable the students to understand basic principles of immunology and apply this knowledge to better immunotherapy development and the importance of immunology in pharmaceutical sciences.

# PHSC 6701 Advanced Toxicology (4 credit hours)

This course will focus on the principles of toxicology and mechanisms of toxicity. Toxicology is the study of poisons. Examples of major toxic spills and human exposures will be discussed to illustrate the major adverse health effects associated with environmental toxins.

#### PHSC 6901 Research Techniques: Theory and Practice (4 credit hours)

This elective course will provide in-depth lectures addressing a wide variety of biochemical, pharmacological, physiological, behavioral, immunological and histochemical research methods as well as their application in basic science research and research that focuses on drug discovery. Cutting-edge or breakthroughs in research technologies will also be covered. The ultimate goal is to provide graduate students with the theoretical framework for understanding the most widely used research methods.

# PHSC 6999 Research and Thesis (5 credit hours, CR/NCR)

Supervised research experiences for preparation of the thesis. Repeatable to a maximum of 20 credit hours.

# **Honors and Awards**

The following award is considered for presentation to MSPS students annually:

Dean' List

# Academic Calendar Fall 2013

# Monday, August 12, 2013

Monday, August 12, 2013

MSPS Orientation, Fall Classes Begin

Monday, September 2, 2013 Labor Day – No Classes\*

Monday, October 14, 2013 Columbus Day – No Classes\*

Wednesday, November 27, 2013
Thanksgiving Recess Begins @ 5:00 p.m.\*

Monday, December 2, 2013 Classes Resume

Friday, December 20, 2013 End of Fall Semester Classes

Monday, December 23, 2013 Winter Recess Begins

# Spring 2014

Monday, January 6, 2014

MSPS Orientation, Spring Classes Begin

Monday, January 20, 2014

Martin Luther King Day – No Classes\*

Monday, February 17, 2014 President's Day – No Classes\*

Monday, March 24, 2014 Spring Break Begins

Monday, March 31, 2014 Spring Classes Resume

Wednesday – Friday, May 14-16, 2014 Commencement

Friday, May 23, 2014 End of Spring Semester

# **College of Pharmacy**

**Doctor of Pharmacy Program** 

#### Accreditation

The College of Pharmacy is accredited by the Accreditation Council for Pharmacy Education (ACPE) located at 135 S. LaSalle Street, Suite 4100, Chicago, Illinois 60603-4810. Phone: (312) 664-3575; Fax: (312) 664-4652 web: <a href="https://www.acpe-accredit.org">www.acpe-accredit.org</a>

# Vision

Educating innovative pharmacy leaders for tomorrow.

# Mission

Educating future pharmacy professionals to serve the health care needs of society and improve the quality of patient care through science, caring and humanism.

# The Degree

The Doctor of Pharmacy (PharmD) degree is awarded in recognition of the highest level of professional education in pharmacy in the United States. To earn the PharmD degree, student pharmacists complete four years of professional study following a minimum of two years of preprofessional education at an accredited college or university.

Student pharmacists who complete this program are eligible to take state and national pharmacy licensing examinations provided they have satisfied other licensure requirements such as 1500 hours of internship experience. After passing this examination, graduates are licensed to perform all the duties and responsibilities of a practicing pharmacist.

# The Doctor of Pharmacy Curriculum

To obtain the PharmD degree you will complete a curriculum made up of four components: (1) the didactic curriculum, (2) experiential education curriculum, (3) the interprofessional curriculum, and (4) the professionalism curriculum.

#### **The Didactic Curriculum Component**

In the core didactic component of the program, you will learn about biological systems and about drugs and their effect on the body. You will take courses in areas such as therapeutics, health care administration, pharmacology, immunology, pharmaceutics, pharmacogenomics and pharmacokinetics and learn how to apply this knowledge to pharmacy practice. Your studies will include communication skills, patient counseling, pharmacy practice laws and regulations, health care systems, physical assessment and evaluation of the medical literature.

# **The Experiential Education Curriculum Component**

The pharmacy practice experiential education curriculum begins with the Introductory Pharmacy Practice Experiential (IPPE-1) courses (PHRM 5998 and 5999), which run throughout the first year of study. Each of the first year clerkship courses, one in the Fall Term (IPPE-1A) and one in the Spring Term (IPPE-1B), run for 4 weeks (4 days/week, 160 experiential hours, 2 credit hours each) that expose the student to community pharmacy practice in two different settings. Every student will complete both courses by the end of their first year.

The second year IPPE course (PHRM 6999; IPPE-2) is scheduled during the summer between the second and third years. It consists of a 4-week (5 days/week, 40 hrs./week) clerkship (160 experiential hours, 4 credit hours) that exposes student pharmacists to institutional pharmacy practice.

In several different patient-centered training sessions, particularly during the third and fourth years, you will be given an opportunity to put into practice what you have learned in the classroom. Under the supervision of a clinical pharmacist faculty member, you will assess and counsel patients and monitor their drug therapies. You will spend a total of 36 weeks in these training sessions, called advanced pharmacy practice experiences (APPE). Such pharmacy practice experiences will take place in hospitals as well as in clinics, community pharmacies and other settings where pharmacists practice.

After the APPE is completed, student pharmacists undergo the 16-week Advanced Elective (AE). This is a 4-month rotation/research experience that allows student pharmacists to develop more skills and insight in a specific practice area. By November of the student's last year, individuals should identify an area of professional interest in which they wish to practice. The 16-week AE program is designed to provide a capstone experience in the student pharmacist's chosen area of interest (e.g., administration, various clinical settings, pediatrics, infectious disease, internal medicine, cardiology, renal, oncology, ICU, ambulatory care, community practice, compounding, pharmacoeconomics, managed care, psychiatry, teaching, pharmaceutical industry, pharmacy informatics, etc.).

The clinical training component comprises 76 credit hours, which is 42% of the total curricular requirements.

# The Interprofessional Curriculum Component

Student pharmacists in their first and second professional years are required to participate in a series of Interprofessional Education (IPE) courses. These courses prepare health professions students to practice health care services through a team approach. The IPE courses instill non-technical competencies including communication, collaborative practice, and scope of practice. Working in small interprofessional teams, student pharmacists apply these competencies as they jointly explore cases or activities presenting common clinical scenarios or conditions with other health professions students. These cases and activities integrate elements common to all professions, including ethical, behavior, social and psychological issues.

#### The Professionalism Curriculum Component

The College of Pharmacy values professionalism and expects all graduates to acquire and maintain the highest level of professional attitudes and behaviors. To promulgate this belief, student must participate in at least five professional activities during an academic year. These activities may be selected from five categories: (1) professional education, (2) patient care service, (3) legislative advocacy, (4) professional service and leadership, and (5) healthcare related community service and philanthropy.

# **Personal Competencies for Admission and Matriculation**

Candidates for the Doctor of Pharmacy program must have the intellectual, emotional and physical abilities, with or without accommodations, to acquire the knowledge, technical and clinical skills needed to successfully complete the curriculum in order to pursue a career in pharmacy practice. Reasonable accommodations for persons with disabilities will be considered on an individual basis, but a candidate must be able to perform in an independent manner.

The College of Pharmacy has determined that those who are chronically impaired by alcohol or have a history of substance abuse do not meet the personal competencies required for admission and matriculation.

The practice of pharmacy requires the performance of specific functions that fall into five broad skills categories:

#### **Observation Skills**

Candidates must be able to observe lectures, demonstrations and experiments in all types of settings. A candidate must be able to observe a patient's condition and elicit information using appropriate physical assessment techniques in order to evaluate, recommend, and initiate therapy. Pharmacy practice requires the ability to visually interpret prescription and medication orders and accurately distinguish one produce from another.

#### **Communication Skills**

Candidates must be able to communicate effectively in both academic and health care settings. This requires the ability to understand, write and speak fluent English. The candidate must also be able to recognize nonverbal communication cues.

#### **Motor Skills**

Candidates must possess both fine and gross motor skills necessary to fulfill all types of medication orders, to utilize diagnostic equipment for patient assessment, and to deliver or administer patient therapies. Patient therapies include, but are not limited to, immunizations and cardiopulmonary resuscitation. Candidates must be able to use pharmacy equipment, technologies and computer-based information systems. Candidates must have sufficient physical stamina to complete the rigorous didactic, laboratory, and clinical experiences, which consist of long periods of sitting, standing or moving.

#### Interpretative, Conceptual and Quantitative Skills

Candidates must be able to utilize learning techniques that will allow mastery of the pharmacy curriculum when delivered through a variety of modalities including didactic instruction, group-based learning, independent learning, projects, reports, experiential training, and computer assisted learning. Candidates must demonstrate a fundamental and continuing ability to use analytical reasoning independently and in collaboration with others to assimilate knowledge, solve problems and explain health care situations. The candidate must be able to use information to develop appropriate drug therapy and monitoring plans in a reasonable amount of time.

# **Behavioral and Social Skills**

Candidates must possess the emotional health required for full utilization of their intellectual abilities, the exercise of good judgment, and the prompt completion of all academic and patient care responsibilities. The candidate must demonstrate professional and ethical demeanor appropriate to his/her educational level and the ability to work in an interprofessional environment. Candidates must also be able to adapt to changes, function in the face of uncertainty, display flexibility and be able to ensure prompt and safe completion of all responsibilities. Compassion, integrity, interpersonal skills, motivation and concern for others are humanistic qualities that will be assessed during the admissions process.

The Doctor of Pharmacy program, along with all other programs at Western University of Health Sciences, shares a commitment to develop creative ways of opening the PharmD curriculum to competitive, qualified individuals with disabilities. In doing so, however, the PharmD degree program must maintain the integrity of its curriculum and preserve those elements deemed essential to educating candidates to become effective pharmacists.

# **Ability-Based Outcomes**

The faculty of the College has defined a set of minimal, concise, program-level ability-based outcomes (ABOs) for the Doctor of Pharmacy Program at Western University of Health Sciences. Graduates from our Doctor of Pharmacy Program are expected to be able to provide pharmaceutical care at the level of an entry-level pharmacist. As such, these ABOs are developed for generalist, entry-level pharmacists who are able to deliver high quality pharmaceutical care.

The ABOs were developed with consideration of the mission of the College of Pharmacy: "Educating future pharmacy professionals to serve the health care needs of society and improve the quality of patient care through science, caring and humanism."

ABOs define the knowledge, skills and attitudes that student pharmacists must develop in order to practice competent pharmaceutical care. They provide the minimal set of abilities that a student should master during his/her education and training within our Program. These ABOs are consistent with current accreditation standards and other professional standards, guidelines and codes. They provide the basis upon which the Doctor of Pharmacy curriculum and student competency will be assessed.

The ABOs are categorized into 5 domains as follows:

- <u>Domain I:</u> Establish a Professional Identity and Ethical Behavior
- Domain II: Provide Patient-Specific and Population-Based Pharmaceutical Care
- <u>Domain III:</u> Apply Scientific Foundations to Pharmacy Practice
- Domain IV: Communicate and Educate Effectively
- <u>Domain V:</u> Manage Information Systems and Pharmacy Practice

Each domain has been further developed to provide specific ABOs in each area.

Graduates of our Program should be able to perform the following specific ABOs upon earning a Doctor of Pharmacy degree from Western University of Health Sciences:

#### Domain I: Establish Professional Identity and Ethical Behavior

- 1. Act with honesty and integrity and at all times abide by the profession's code of ethics.
- 2. Practice in a humanistic manner, demonstrating compassion, understanding and empathy.
- 3. Demonstrate critical thinking, self-reflection, and problem-solving abilities.
- 4. Demonstrate professional, interpersonal and leadership skills.
- 5. Apply ethical principles when dealing with dilemmas that arise in the pharmacy practice setting.

- 6. Apply legal requirements in the practice of pharmacy.
- 7. Advocate on behalf of the patient's best interest.
- 8. Actively participate in the pharmacy community through involvement in professional organizations and societies.
- 9. Demonstrate a personal commitment to social responsibility and service.
- 10. Demonstrate commitment to professional competence through maintenance of a professional portfolio, continuous professional development and life-long learning.

# Domain II: Provide Patient-Specific and Population-Based Pharmaceutical Care

- 1. Develop a professional, caring and covenantal relationship with the patient.
- 2. Gather, assess and interpret patient information from the patient, the patient's care-givers, and the medical record.
- 3. Identify, prevent and resolve actual and potential patient-specific drug therapy problems.
- 4. Design, implement, monitor, evaluate, and modify patient-specific, outcomes-based pharmaceutical care plans in cooperation with patients and other health care providers and in accordance with established, evidence-based standards of practice.
- 5. Provide consultation to patients on self-care, including the use of monitoring and diagnostic devices and non-prescription products.
- 6. Plan and perform ongoing patient evaluations, including patient assessment procedures and diagnostic tests in accordance with scope of practice, to identify and implement changes in the pharmaceutical care plan.
- 7. Administer medications, including biologicals, in keeping with the current scope of practice
- 8. Refer patients to other health care providers when appropriate.
- 9. Identify, manage and report any unexpected adverse drug reactions to the prescriber and comply with any adverse drug reaction reporting programs.
- 10. Ensure that pharmaceutical care is provided in the context of patient-specific cultural, economic and quality of life factors, while balancing individual, health care system and societal needs.
- 11. Identify health needs of populations and develop strategies to improve the access to medications and health services.
- 12. Work collaboratively with other health professions to promote health improvement, wellness, and disease prevention for, patients, communities, and at-risk populations.

# Domain III: Apply Scientific Foundations to Pharmacy Practice

- 1. Utilize current and emerging knowledge in molecular, biomedical and pharmaceutical sciences to improve drug therapy outcomes.
- 2. Based on pharmacological and biological principles, predict positive and negative medication actions for the purpose of identifying drug therapy problems and developing monitoring plans.
- 3. Compound safe and effective prescriptions (sterile and non-sterile) in conformity with all applicable federal and state laws and regulations based on knowledge of chemical and biopharmaceutical principles.
- 4. Apply pharmacokinetic and pharmacogenomic principles in drug selection and drug dosing for patient-specific and population-based drug therapy.
- 5. Accurately perform pharmaceutical calculations appropriate to the practice setting.
- 6. Relate knowledge of drug discovery, development and approval processes to the introduction of new drugs into clinical practice.

#### **Domain IV: Communicate and Educate Effectively**

- 1. Demonstrate compassion and cultural competency when interacting with others.
- 2. Demonstrate effective patient interviewing and counseling techniques.
- Select and demonstrate effective and appropriate written, verbal and nonverbal communication skills in diverse settings and situations when collaborating with patients, care-givers and other members of an inter-professional health care team.
- 4. Develop and communicate an education plan for patients, including safe and appropriate use of medications, devices and adherence aids in order to promote adherence to pharmaceutical care plans and to improve outcomes
- 5. Document significant observations of patient-pharmacist interactions in the patient care record, including: patient assessment, recommendations, education, care plans, and other planned or implemented actions.
- 6. Use communication and information technology effectively and appropriately.

# Domain V: Manage Information Systems and Pharmacy Practice

- Identify, retrieve, critically evaluate, interpret, synthesize, and manage professional, lay, and scientific literature from current, reliable sources of information, in a systematic, evidencebased manner.
- 2. Organize and provide drug information in a manner suitable for the recipient.

- 3. Develop a drug monograph suitable for presentation to a Pharmacy and Therapeutics Committee.
- 4. Design and conduct a medication use evaluation.
- 5. Select appropriate medication products based on pharmacoeconomic principles and policies, drug utilization data, and reimbursement issues within a health care system.
- 6. Collaborate with other health professionals in developing treatment guidelines and algorithms.
- 7. Develop, implement and assess disease prevention, health promotion and educational programs.
- 8. Establish a collaborative practice agreement with a physician.
- 9. Provide medication therapy management (or disease state management) services for patients with chronic health problems, such as: diabetes, hypertension, lipid disorders, asthma/COPD, heart failure, thrombosis, osteoporosis, smoking cessation, obesity, nutrition, pain.
- 10. Evaluate the medication safety provisions in any pharmacy practice setting to minimize medication discrepancies and errors, and establish a medication safety quality improvement program in accordance with the requirements of state and federal laws, regulations and accreditation standards.
- 11. Accurately and safely prepare, dispense and administer medications according to state and federal laws and regulations.
- 12. Recognize, prevent and address patterns of inappropriate drug use, including drug diversion.
- 13. Interpret policies of individual pharmacy benefit plans to resolve routine third-party prescription billing issues.
- 14. Demonstrate project management skills including project design, implementation and control.
- 15. Manage systems for acquisition, storage, preparation, and dispensing of medications and supervise technical personnel (technicians, assistants and clerks) who may be involved in such processes, according to accepted standards and regulations.
- 16. Apply management principles related to financial, inventory and resource management.

# **Admissions Policies and Procedures**

Admission to the College of Pharmacy is on a highly competitive basis. Each year we receive many more applications than we can accommodate in our program. At WesternU, we retain smaller class sizes, offering you a closer relationship with your faculty and fellow student pharmacists. The College of Pharmacy is looking for individuals who add to the diversity of our student body, have excellent communication skills, demonstrate compassion, are dependable, exhibit dedication and determination, and display good judgment.

#### **Application Requirements**

The College of Pharmacy Admissions Committee will consider applicants with a minimum of two years of college (60 academic semester hours or 90 quarter hours) of pre-pharmacy study at an accredited college or university. The minimum cumulative pre-pharmacy and science grade point average requirement is 2.75. Grades of "C-" in any of the prerequisite courses are not accepted. Prerequisite courses are subject to review each year.

Candidates who have received a baccalaureate degree or higher will be considered more favorably than applicants who have fulfilled only minimum requirements. For the latest information, you should consult our web site at <a href="http://prospective.westernu.edu/pharmacy-pharmd/welcome-13/">http://prospective.westernu.edu/pharmacy-pharmd/welcome-13/</a>.

# **Applicants with Foreign Coursework**

Applicants who wish to use coursework completed outside the United States must submit their transcripts for evaluation to a <u>Western University of Health Sciences Approved Service</u> at the candidate's expense. A course-by-course evaluation is required and all coursework must be designated as undergraduate, graduate or professional. Western University only honors evaluations from one of the above services. The official evaluation must be included with the supplemental application packet.

#### International Students

International students and any other applicants who are not U.S. citizens and who are living in the U.S. should be prepared to provide proof of legal U.S. residency at the time of interview. Proof of legal U.S. residency is required prior to any offer of acceptance. For more detailed information, please visit our web page for <u>International Students</u>.

#### **Prerequisite Courses**

Prerequisites	Duration		
College English	1 Semester		
English Composition	1 Semester		
Speech Communication	1 Semester		
General Chemistry (w/ Lab)	2 Semesters		
Organic Chemistry (w/ Lab)	2 Semesters		
Human Anatomy	1 Semester		
Human Physiology	1 Semester	* One semester each of Biochemistry and	
Microbiology (Medical	1 Semester	Molecular Biology may be substituted for Biochemistry prerequisite; lab is optional	
Microbiology is preferred)	1 Semester		
Biochemistry *	2 Semesters		
Calculus	1 Semester		
Electives **	2 Semesters	** Electives must be met from two of the three following areas: public speaking/debate, social sciences, or economics. No two electives can be taken from the same department.	

- All advanced placement (AP) credit test scores that were previously accepted by the applicant's undergraduate institution are acceptable.
- All prerequisite courses taken and AP credit test scores must be complete no more than ten years prior to the planned date of matriculation.
- Introductory level courses in the sciences are not accepted.
- If anatomy and physiology are combined, a minimum of five (5) semester units is acceptable.
   Anatomy and physiology must be taken from the anatomy, physiology, A&P, biology or zoology departments.
- We do not accept substitutions or waive any of the prerequisite courses.
- English as a Second Language (ESL) courses are not accepted for the English requirement. English courses must be taken from the English department.
- All prerequisite course work in progress must be completed no later than the spring semester or quarter immediately preceding matriculation.
- Summer session courses taken <u>immediately prior</u> to matriculation at WesternU are not accepted.
- Transfer of Credit, CLEP or Credit for Experiential learning is not recognized by the program.

#### **Standardized Examinations**

- Pharmacy College Admissions Test (PCAT) is not required.
- Test of English as a Foreign Language (TOEFL)

TOEFL is required for all applicants submitting course work from foreign schools. A minimum score of 213 for the Computer Based test or 79 for the Internet Based TOEFL (IBT) test must be submitted by March 1 prior to matriculation. TOEFL scores are valid for two years. For more information regarding the TOEFL test, please visit their website at <a href="http://www.ets.org/toefl">http://www.ets.org/toefl</a>.

**Exception**: The TOEFL exam will be waived for permanent and temporary residents of the United States who have completed the English and Speech prerequisites of the College from an accredited institution in the United States.

English courses taken from foreign countries whose native language is English will be accepted (e.g., Canada, Australia, Great Britain, New Zealand and the British West Indies).

#### Recommendations

Three letters of recommendation are required as part of the admissions application. Recommendation forms are available via PharmCAS (see below). The recommendations should state the nature and extent to which the recommender knows you and should elaborate on the applicant's attributes and abilities including communication skills, ethics, interpersonal skills, and motivation toward the profession.

# **Application Procedures and Deadlines**

The Pharmacy College Application Services (PharmCAS) is the centralized application service for WesternU's College of Pharmacy. PharmCAS offers a web-based application service that allows applicants to use a single application and one set of materials to apply to multiple PharmD programs.

WesternU's application deadline to apply to PharmCAS is **November 1**. Application materials must be complete and submitted to PharmCAS by the deadline. It can take approximately 4-5 weeks for PharmCAS to process application materials and forward them to Western University. To apply to PharmCAS, or to request an application, visit their website at: http://www.pharmcas.org.

In addition to the PharmCAS application, WesternU requires applicants to submit a supplemental application with three recommendation evaluation forms (provided by WesternU) and an application fee of \$65.00. All application materials can be located on our website at <a href="http://prospective.westernu.edu/pharmacy-pharmd/apply-13/">http://prospective.westernu.edu/pharmacy-pharmd/apply-13/</a>. The supplemental application packet is due **November 1**. Applicants who do not submit all application materials by the deadline may not be eligible to continue in the admissions process. The minimum required GPA for consideration is 2.75 (overall) and 2.75 (sciences). A final evaluation will be completed upon receipt of your PharmCAS and supplemental application. WesternU is not responsible for delays in mail delivery. We strongly encourage you to apply early.

Faculty in the College of Pharmacy will screen each applicant's admissions file to determine whether or not an applicant will be granted an on-campus interview. Candidates selected for an on-campus interview will be required to participate in an assessment of written and verbal communication skills. Interview sessions are conducted during the weekends (Saturdays) and, only under special circumstances, during the weekday. Decisions of the Admissions Committee regarding the admission of applicants to the Doctor of Pharmacy program are final.

Students admitted to the College of Pharmacy are required to pay a \$500.00 enrollment deposit. Upon enrollment, this deposit is applied toward the tuition for the academic year. Persons who fail to enroll forfeit the entire deposit.

## **Transfers from Other Schools**

Due to the unique nature of the curriculum, it is the general policy of the College of Pharmacy not to allow student transfers from other pharmacy programs.

# International Post-Baccalaureate PharmD (IPBP) Track

# **Description of the IPBP Program**

The WesternU College of Pharmacy offers a unique opportunity for American and/or foreign trained pharmacists with a bachelor's degree (B.S. or equivalent) who wish to progress to the Doctor of Pharmacy (PharmD) degree. Applicants are admitted with advanced standing into the second year of our traditional PharmD curriculum, thereby by-passing the first year. The Doctor of Pharmacy degree awarded to the student in the international program is the same as those awarded to our students in the traditional PharmD program. Please refer to the PharmD section of the catalog for additional information on academic and student conduct policies and procedures.

#### **Application Procedure**

- 1. Original Admission Application Form (completed and signed).
- 2. Application Deadline: All application materials must be received or postmarked by October 1, for admission in the following academic year.
- 3. Application Processing Fee: Non-refundable application fee for \$65 payable to Western University of Health Sciences.
- 4. Resume/Curriculum Vitae: Please provide a current resume or curriculum vitae, if available.
- 5. Bachelor of Science (or equivalent) in Pharmacy: Please provide a copy of your degree certificate and enclose it with your application.
- 6. Official Transcripts: Submit official transcripts from all schools attended in the United States and/or a valuation of your credentials from each college or university attended in a foreign country. Please see the list of foreign credentials evaluation services. Transcript evaluation must come directly from the evaluation service. Photocopies are not acceptable. The minimum GPA requirement for admission into the program is 2.5 on a 4.0 scale.
- 7. Personal Questionnaire: Please complete the questionnaire and enclose with your application. The questionnaire can be downloaded from the IPBP website.
- 8. TOEFL (Test of English as a Foreign Language): TOEFL, including essay, is required for all applicants submitting course work from foreign schools, and for all permanent or temporary residents of the United States. Exception: The TOEFL exam will be waived for students who have graduated with a confirmed baccalaureate or higher degree from a United States institution. A minimum score of 213 for the Computer Based test, 550 for the Paper Based test or 79 for the new Internet Based TOEFL test must be submitted by June of the year of matriculation. TOEFL scores are valid for two (2) years. TOEFL scores will not be waived for pending baccalaureate and/or higher degrees or pending naturalization appointments. Official scores must be sent directly from the Education Testing Services (ETS). Photocopies are not acceptable. For more information regarding the TOEFL test, please visit their website at <a href="http://www.toefl.org">http://www.toefl.org</a>.
- 9. FPGEE (Foreign Pharmacy Graduate Equivalency Examination): FPGEE scores are not required for entry into the IPBP program.
- 10. Internal Assessment (IA): The Internal Assessment (IA) exam is mandatory for consideration of admission into the program. The exam scores are valid for one (1) year. Fee Information for IA Testing: The following fee structure will apply to all applicants (a) US \$250 for online access to the IPBP study guide; (b) US \$250 for IPBP exam. All checks must be payable to Western University of Health Sciences. Single payments of \$500 are not accepted (see FAQ section on the University website for more information).
- 11. References: Three satisfactory recommendations (forms provided) from qualified individuals (not related to you) capable of evaluating your overall personality, professional enthusiasm and

integrity. Each recommendation must be submitted in a sealed envelope that is signed over the seal by the recommender.

12. Verification of Employment (Optional): Letter(s) from current employer(s) verifying employment status. If self-employed, provide supporting documentation.

#### **IA/Interview Guidelines**

Upon successful completion of the above requirements, candidates may be invited for an interview session on or off-campus, based on satisfactory preliminary file evaluation. The IA examination will be conducted on the same day as the interview.

#### **IA Examination**

This exam serves as an entrance exam for admissions into the IPBP program. Scores from the test play a significant role in the overall admissions process (for more information visit our website at http://www.westernu.edu/xp/edu/howtoapply/ipbp general.xml).

#### **Oral Communication Skills**

These skills will be evaluated during a personal interview session conducted by members of the admissions committee. Each interview session will be approximately 30 minutes in duration. The purpose of this exercise will be to determine your command of the English language as well as interpersonal skills.

#### Written Communication Skills

All candidates will be required to take a written essay test wherein a topic of general interest will be presented. Time allowed for this activity is approximately 45 minutes. The purpose of this exercise will be to assess your overall ability and effectiveness in reading, writing and comprehension of the English language.

#### **Course Waiver Policy**

Students accepted to the International Post-Baccalaureate PharmD program (IPBP) may be granted course waivers for all first year coursework in the PharmD program. The maximum number of credit hours that will be waived is 40 credit hours. Only credit hours relevant to the bachelor's degree in pharmacy granted by the applicant's institution may be used to waive first year PharmD course requirements.

#### Registration

All PharmD/IPBP students are required to register by the registration deadlines specified by the University Registrar. Registration dates are posted at: <a href="http://www.westernu.edu/registrar-online-information">http://www.westernu.edu/registrar-online-information</a>. Failure to register by the deadline may be grounds for administrative withdrawal. All students registering after the posted deadline will be assessed a \$30.00 per business day late fee.

Full tuition and fees and all prior debts must be paid in full on or by posted deadlines each academic year. Matriculation is subject to the satisfactory completion of all academic requirements and payment of all outstanding debts to the University. The receipt of a final transcript(s) from all colleges/universities attended and a physical examination with documentation of required immunizations prior to registration are additional requirements for incoming students. Also, all students must show proof of current health insurance coverage by the deadlines provided by the University Registrar. This coverage

must be maintained or in effect throughout the academic year. If there is no proof of current coverage, students will be automatically enrolled in the school sponsored insurance plan.

Attendance at Orientation is mandatory for all incoming first-year students.

# **Full-time/Part-Time Status**

All students enrolled in at least one class/rotation are considered full-time students.

#### **Time Limits**

The Doctor of Pharmacy program is designed to be completed in four (4) years of full-time study. The requirements for the degree must be fulfilled within 6 years from the date of matriculation to the program.

## **Computer Technology**

The College of Pharmacy requires that each enrolled student pharmacist have a notebook or laptop computer during class, after class hours and while on rotations. Laptop specifications can be found at: <a href="http://www.westernu.edu/bin/computing/laptop-requirements-COMP-CPM-CDM-Pharm-AH-GCBS-MSNE.pdf">http://www.westernu.edu/bin/computing/laptop-requirements-COMP-CPM-CDM-Pharm-AH-GCBS-MSNE.pdf</a>.

The College of Pharmacy also requires that first, second and third year student pharmacists have a classroom responder, approved by the College, which is to be purchased from the University Bookstore. Individual responders must be registered to only one (1) student. Classroom responders are electronic devices that will be used to enhance interactive learning in classrooms. The device will enable faculty to gauge student understanding of concepts, introduce more innovative teaching and assessment methods, improve student involvement in learning, and facilitate classroom learning to become more dynamic. The responders will also be used to administer and score assessments. Therefore, student pharmacists are also required to bring responders to each class.

### **Tuition and Fees**

In estimating costs for one academic year of study at WesternU's College of Pharmacy, you should include tuition and fees, laptop computer and printer, books and supplies, room and board, and other miscellaneous expenses. By action of the Board of Trustees, Doctor of Pharmacy tuition and fees for the 2013-2014 academic year (subject to change) are as follows:

\$45,810.00 \$40.00	Annual Tuition Student Body Fee
Other Fees and Expenses	
\$250.00	Remediation Examination Fee
\$30.00	Registration Late Fee (per business day)
\$350.00	Graduation Fee
\$470.00	Annual Parking Permit (Auto)
\$25.00	Parking Permit Replacement Fee
\$40.00	Locker Key Replacement Charge
\$10.00	Official Transcript (Each)
\$21.00	Rush Transcript, First Class Mail (Each)
\$25.00	Rush Transcript, Federal Express (Each)
\$10.00	Student ID Replacement Fee
\$150.00	Dosimetry Badge Replacement Fee

#### **Financial Assistance**

All PharmD/IPBP students are eligible to apply for need-based financial aid provided they meet established criteria. For information, please write to the Financial Aid Office, Western University of Health Sciences, 309 E. Second Street, Pomona, California 91766-1854

# **Academic Requirements**

Continued enrollment, program participation, and graduation are subject to satisfactory completion of all academic requirements and payment of all outstanding debts to the university. Attendance at orientations, White Coat activities, and commencement activities is mandatory for all students.

#### **Academic Advisement**

Students are assigned a faculty advisor which provides students the opportunity to develop sustained, individual advisement on academic and professional levels. Students may request a change of advisor, if needed, through the office of the Assistant Dean for Student Affairs (or his/her designee).

## **Course Participation and Attendance**

Students are expected to be in class Monday-Friday from 8 am to 3 pm, unless the block schedule notes otherwise.

Students are required to participate in all assessed activities (assignments, exams, etc.). When a student must be absent, he/she must contact the Course Facilitator prior to the missed class. If unable to reach the Facilitator, the student must leave a voice-mail message, an e-mail message, or a message with a staff support person or the Assistant Dean of Student Affairs that includes a contact telephone number.

WesternU publishes an annual list of federal holidays observed by the University. A student who requests time off for days other than those observed by WesternU must do so by completing the "Excused Absence" form and submitting it to the Course Facilitator a minimum of 5 school days before the start of the course in which the holiday falls. If the request is approved by the Course Facilitator, the student is responsible for any work missed on the date(s) absent. All assignments must be completed by the scheduled time. However, if the student fails to notify the Course Facilitator in the time frame noted above, the absence will be considered an unexcused absence, and no remediation will be permitted. The WesternU holiday schedule does not apply to students on Introductory Pharmacy Practice Experience — 2, Advanced Pharmacy Practice Experiences and on off-campus Advanced Electives. Students will follow the rotation site schedule on Introductory Pharmacy Practice Experience — 2, Advanced Pharmacy Practice Experiences and on Advanced Electives.

When a student misses an assessed course activity, or when a student must be absent from class for up to 3 days, accommodations for excused absences may be made. At the discretion of the course facilitator, an absence may be excused for students participating in approved professional development activities, in situations involving illness, or in other emergencies. Documentation of the reason(s) for the absence must be provided to the course facilitator upon return to class. A copy of this documentation will be forwarded to the Assistant Dean of Student Affairs for inclusion in the student's file. The course facilitator/faculty will determine how the missed materials will be completed. If emergencies arise that require a student to miss more than one assessed course activity or more than 3 days of the class, the student may be required to retake the course.

The course facilitator is responsible for determining whether accommodations can be made. The course facilitator's decision is final.

Examples of situations when accommodating absences may not be possible include (but are not limited to) the following:

- Missed team assignments: An individual student may not be able to individually demonstrate mastery of course material without completing the assignment within the context of a team.
- Missed assessments of clinical skills: An individual student may not be able to individually demonstrate mastery of clinical skills without the specific circumstances arranged within the course.

This policy also applies to students on IPPE/APPE/AE. These students are also governed by policies contained in the individual IPPE course syllabi or the *Syllabus of Advanced Pharmacy Practice Experiences* and by rotation-specific requirements.

#### **Independent Study**

Because of the unique and intensive nature of the College of Pharmacy's curriculum, the collaborative teaching and learning processes among team members, and the sequencing of key courses, the Faculty does not believe that independent learning of core coursework meets the goals of the Doctor of Pharmacy program. In special cases, e.g. involving illness, reasonable accommodations will be made to permit the student to continue in his/her course of study if possible. Additionally, the collaborative learning process among team members is a critical element of the curriculum. Students accepted into the program must understand that their grades require successful collaboration with team members. Independent study of courses in the core curriculum in the College of Pharmacy is not permitted either in summer or during the academic year.

#### **Research Activities**

Students in the College of Pharmacy are encouraged to participate in research under the direction of faculty advisor(s). Students with appropriate interests and academic preparation may participate in research as part of the elective program.

#### **Pharmacy Intern License Requirement**

All students are required to be licensed interns with the California State Board of Pharmacy during all phases of the experiential program (IPPE, APPE and AE). First year students are required to file a copy of their intern license application with the Assistant Dean of Student Affairs by the first Monday in October of their first year in the PharmD program. Students unable to obtain a valid pharmacy intern license by the deadline will not be permitted to begin any clinical practice experience. **Students found not eligible for an intern license by the State Board of Pharmacy will be dismissed from the PharmD program**. The California State Board of Pharmacy is a body independent of the College of Pharmacy. The College of Pharmacy assumes no liability for decisions made by the Board regarding the status of a student's intern license. The Board of Pharmacy requires the College to inform them when a student is placed on academic suspension. The student should contact the CA State Board of Pharmacy directly for further information.

#### **Student Performance Committee**

The College of Pharmacy Student Performance Committee is charged with the following responsibilities: (a) to periodically review the academic achievement and comprehensive evidence of progress of all students who are pursuing the PharmD degree (particular attention will be given to students in academic difficulty as their grades are made available to the Committee by the Registrar and/or the Associate Dean for Academic and Student Affairs); and (b) to receive reports from the College Dean regarding any student whose professional or personal conduct is deemed unsatisfactory. Appropriate professional and personal conduct is defined by the University's and College's codes of professional conduct (refer to Standards for Professional Conduct below).

#### **Academic Progression in the Didactic Curriculum**

The Student Performance Committee will review each student's progress at the end of each academic term. Students must complete all courses in a subordinate year of the program before they can progress to the next year in the program. In addition, students must complete all didactic courses successfully before they will be allowed to start the Advanced Pharmacy Practice Experience portion of the curriculum.

#### **Eligibility to Participate in Advanced Pharmacy Practice Experiences (APPEs)**

Students may not start an APPE until the Student Performance Committee has been notified that all courses have been successfully completed. The Student Performance Committee will ensure that students are academically eligible to begin APPEs. Students with less than a 2.75 cumulative GPA following the third year didactic term cannot begin the APPE portion of the curriculum and will automatically be placed on academic suspension (see "Academic Suspension," below).

## **Progression to the Fourth Professional Year**

Students must have completed at least two rotations successfully in their P3 year to progress to the fourth year of the program. As a general rule, no "off rotations" will be given during the first two APPEs. Exceptions to this policy will be considered on a case-by-case basis.

#### Graduation

A student will be recommended for the Doctor of Pharmacy degree if the student meets the following:

- bb. Is not on probation or suspension and has completed all prescribed academic and clinical requirements with a cumulative grade point average of or above 2.75 and has no outstanding grade of "I," "NCR," or "U".
- cc. Has demonstrated no serious deficiencies in ethical, professional, or personal conduct, as defined in University Catalog, "General Academic Policies and Procedures" section, which would make it inappropriate to award the degree of Doctor of Pharmacy.
- dd. Has complied with all the legal and financial requirements of the University as stated in the University Catalog.
- ee. Has attended in person and participated in the Commencement ceremony at which time the Doctor of Pharmacy degree is conferred. Unless special permission has been granted by the Dean, each student must participate in their respective commencement ceremony. If the Dean grants special permission for excusal from commencement, the graduate may be

required to present themselves to the Dean or their designee at another specified date to take their profession's oath before their diploma will be released. Requests for excusal will only be granted for extenuating circumstances, such as a prior military commitment.

Students may participate in commencement activities provided they will complete all requirements of the program by December 31<sup>st</sup> of that calendar year. No student will receive his or her degree until the student has completed all requirements for graduation. Degrees will be dated as appropriate to completion date.

# **Standards of Academic Progress**

Students are required to maintain a cumulative 2.75 grade point average (GPA) during the didactic portion of the curriculum. The academic year is divided into two academic terms with the first (fall) term consisting of courses offered between August and December and the second (spring) term consisting of courses offered between January and May.

The student's cumulative GPA will be calculated at the end of each academic term. For the first and second years, an academic term is equal to a semester. For the third year, the academic "didactic term" includes courses PHRM 6301-6306, while the "APPE" term includes courses R1-R2.

# Failure to Meet Standards - IPPE Rotation Actions

When a student receives a failing or incomplete (I) grade, the Associate Dean of Experiential Education and Professional Affairs or his/her designee will notify the Associate Dean for Academic and Student Affairs in a timely manner upon which the student will be placed on Academic Probation.

Students must repeat any rotation in which a failing grade is issued. The rotation must be repeated with a WesternU-paid, full-time faculty member. If the failing grade is earned in a rotation for which no WesternU-paid, full-time faculty member is available to serve as preceptor, the student will retake the rotation with a preceptor selected by the Associate Dean of Experiential Education and Professional Affairs. In the event that an "I" grade is converted into a failing grade, the terms and conditions governing the receipt of a first failing grade in an IPPE rotation will be followed.

#### Failure to Meet Standards - First APPE Rotation Actions

When a student receives a NCR or incomplete (I) grade, the Associate Dean of Experiential Education and Professional Affairs or his/her designee will notify the Associate Dean for Academic and Student Affairs in a timely manner. The student will be allowed to continue with their scheduled rotations, but will be placed on Academic Probation by the Associate Dean for Academic and Student Affairs.

Students must repeat any rotation in which an NCR grade is issued. The rotation must be repeated with a WesternU-paid, full-time faculty member. If the NCR grade is earned in a rotation for which no WesternU-paid, full-time faculty member is available to serve as preceptor, the student will retake the rotation with a preceptor selected by the Associate Dean of Experiential Education and Professional Affairs.

In the event that an I grade is converted into a NCR grade, the terms and conditions governing the receipt of a first NCR grade in an APPE rotation will be followed. Rotations that need to be repeated should, where possible, be made up during the student's designated "off rotation." Should a student need to make up a rotation after a designated "off rotation" has been completed, the rotation must be made up after the scheduled Advanced Elective Rotation. No "split" rotations will be allowed. To

monitor the quality of a student's performance on APPEs, all students must complete at least one APPE with a voting, full-time faculty member of the College. If a student fails this required APPE assignment, he/she must complete another APPE successfully with another voting, full-time faculty member.

#### Failure to Meet Standards – Second APPE Rotation Actions

In the event that a student receives a NCR grade for a second APPE rotation, the student will be placed on academic suspension and required to repeat the entire APPE rotations sequence (6 rotations).

Students will be able to re-start the APPE rotation sequence only once. Thus, students repeating the APPE rotations sequence cannot fail any rotation. Receipt of an NCR grade for any rotation after restarting the APPE sequence will result in permanent dismissal from the PharmD program.

#### Failure to Meet Standards – Advanced Elective Rotation

When a student receives a NCR or an Incomplete grade (I) in the 16-week Advanced Elective (AE) program, the Associate Dean of Experiential Education and Professional Affairs or his/her designee will notify the Student Performance Committee in a timely manner. If a student receives a grade of NCR for an Advanced Elective, he/she will be placed on academic probation by the Associate Dean for Academic and Student Affairs. The student must repeat the AE in which the NCR grade was issued with a WesternU paid, full-time faculty member at a time that is mutually agreed upon by the Associate Dean of Experiential Education and Professional Affairs and the preceptor. If this NCR grade is earned in an AE for which there is no WesternU full-time, paid faculty member to serve as preceptor, the student will complete the AE with a preceptor selected by the Associate Dean of Experiential Education and Professional Affairs at a time that is mutually agreed upon by the Associate Dean of Experiential Education and Professional Affairs and the designated preceptor. Students who receive a NCR grade for an AE will not be eligible to graduate until the AE is repeated successfully and a grade of CR is recorded.

#### **Academic Probation**

The Associate Dean for Academic and Student affairs will automatically place students on academic probation under the following circumstances (see University Catalog section on General Academic Policies and Procedures in the Overview section):

- 1. A student earns a failing ("U") grade in any didactic course.
- 2. A student's cumulative GPA is below 2.75 at the end of any academic term. Students will be given one academic term to raise their cumulative GPA to the required standard of 2.75 or above.
- 3. A student does not achieve the required 2.75 cumulative GPA for two consecutive academic terms. Students placed on academic probation for having less than 2.75 for two consecutive terms will be required to repeat all coursework in which they received a C or U grade for the same two consecutive terms for which the student's cumulative GPA was below 2.75.
- 4. A student's cumulative GPA is below 2.75 at the end of the third year didactic term. Students achieving a less than 2.75 GPA at the end of the third year didactic term (completion of PHRM 6306) will be required to repeat all coursework in the third year didactic term in which they received a C or U grade, until their cumulative GPA is raised to 2.75 or above. Students will be placed on academic suspension until such time as the repeat coursework is offered

(see University guidelines). Additionally a student cannot begin the APPE portion of the curriculum until they have raised their GPA to 2.75 or greater.

- 5. The first time a student receives a failing grade for IPPE1 and/or 2, or any APPE rotation (see section above regarding Failure to Meet Standards First APPE Rotation Actions).
- 6. A student receives a failing ("NCR") grade during the Advanced Elective rotation (see section above regarding Failure to Meet Standards Advanced Elective Rotation Action).

Students in Year 2 (P2) of the professional program must complete the IPPE2 (PHRM 6999) summer rotation requirement even if they have failed the didactic component that would require them to repeat the year.

Students successfully completing IPPE-2, IPE 5000, IPE 5100, IPE 6000 and/or IPE 6100 (i.e., received a CR grade) will not have to retake those requirements when repeating courses or returning from a leave of absence.

The Associate Dean will notify the student in writing of the action. When a student has been placed on probation, the following apply:

- 1. The student may not hold office in any University or College organization.
- 2. Within 2 weeks of the date that the student receives notification of his/her academic probation, the student must meet with:
- 3. The Learning Enhancement and Academic Development (LEAD) office staff to develop an academic action plan. The student must obtain a signature from the LEAD office documenting agreement on the action plan.
- 4. The student's faculty advisor to review the student's proposed improvement plan. The student must obtain a signature from the faculty advisor documenting agreement on the action plan.
- 5. The Associate Dean of Academic and Student Affairs to provide the required signed documentation that the prior two meetings occurred.
- 6. The Assistant Dean of Student Affairs, if it is determined that non-academic issues (e.g., illness, family emergency, death or acute or chronic illness of an immediate family member, divorce or other personal family concerns) are impacting academic performance.

In addition, students are encouraged to seek regular assistance from any University or College resource deemed necessary to improve his or her academic performance over the duration of probation.

# Financial Aid Warning Policy (Title IV and Title VII)

If a student is not making Satisfactory Academic Progress (SAP) they may be placed on "Financial Aid Warning" status for the next payment period and continue to receive financial aid for that period. Financial Aid is any financial assistance offered to the student for paying for their education, such as

loans, scholarships, Federal Work-Study, grants and stipends (judged on the criteria of the stipend). Students who fail to make SAP by the end of the payment period lose Financial Aid eligibility.

It is the policy of the Financial Aid Office (FAO) that once a student has been placed on academic probation for not meeting SAP standards as defined by the college, the FAO will automatically place the student in a Financial Aid Warning status. During the next academic term, if the student does not meet SAP standards and the college places the student on academic suspension, the student will no longer be eligible for financial aid. If the student appeals the academic suspension and the appeal is approved, financial aid will be reinstated. If the student is directed to audit courses, those courses will **not** be covered by financial aid.

#### **Veterans**

Veterans who fail to maintain satisfactory progress for more than two terms or rotations will not be certified to receive any Veterans' benefits until they have corrected the situation and are making satisfactory progress.

#### **Tutorial Assistance Program**

A Tutorial Assistance Program (TAP) has been established to assist students experiencing academic difficulty. Students will be recommended for this program by a faculty advisor or professor. Students may self-identify to TAP to receive assistance. The tutors will be chosen on the recommendation of the faculty in each discipline. Group tutoring is the methodology most used by the TAP department. For assistance, contact the Learning Enhancement and Academic Development Office (LEAD).

#### Remediation for Courses in the Didactic Curriculum

A student who receives a U grade may be eligible to remediate. Remediation is not a substitute for full course participation. To be eligible for remediation, students must have taken all exams, completed all course assignments and participated in all graded activities, unless excused (refer to Course Participation and Attendance section). Students who have not completed all course assessed activities are not eligible for course remediation.

Remediation should include a joint (faculty and student) diagnostic evaluation of the student's weaknesses, a self-directed plan for strengthening the student's weaknesses with periodic reviews in consultation with the facilitator, followed by a comprehensive assessment, as recommended by the course facilitator, over the entire course material.

The Student Performance Committee, in consultation with the course facilitators, will set the remediation schedule. First and second year students will have their remediation exams scheduled during the month of June. Third year students will remediate failed courses prior to beginning the Advanced Pharmacy Practice Experiences (APPE) and will be required to take R-1 as an "off" rotation. Students will be informed of the remediation dates in writing with at least 72 hours advance notice. Students who require remediation but are unable to make themselves available on the designated examination date will not be allowed to progress in the curriculum and will be placed on academic suspension. They will be required to repeat the course at the next regular offering.

Students who require remediation are encouraged to share their June/February plans with the appropriate course facilitators prior to the remediation dates being determined. Once the remediation dates are confirmed, there will be no changes made to accommodate student requests. There will be no make-up remediation examinations.

Students must pass the remediation examination and all other required assignments in order to successfully pass the course. The \$250 remediation examination fee must be paid to the Bursar's Office prior to the remediation examination date.

After completing a remediation examination, the highest grade that a student will be able to achieve for the course will be a "C".

# **Academic Suspension**

As per University guidelines (see section 12 of the General Academic Policies and Procedures, Overview), students who are deemed unable to continue in the curriculum due to inadequate performance and are required to repeat a given academic year or portion thereof, will be placed on academic suspension through such time as they can resume their studies by starting the courses the student is required to repeat. Throughout the time the student is on academic suspension, he or she is also on academic probation, and remains on academic probation until all coursework has been satisfactorily remediated.

#### **Permanent Dismissal for Academic Reasons**

A student will be permanently dismissed from the program if he/she fails to accomplish course learning objectives and/or fails to achieve academic expectations even after granted the opportunity to repeat coursework. A student will be permanently dismissed when:

- 1. A student earns a failing grade ("U") in any course that the student is repeating.
- 2. A student fails to earn a semester GPA of 2.75 by the end of the first term of repeated coursework.
- 3. A student fails to earn a cumulative GPA of 2.75 at the end of two consecutive academic terms for which the student was placed on probation previously.
- 4. A student currently repeating coursework due to sub-standard academic performance is found in violation of the College's Standards for Professional Conduct at a level that merits course failure or repeating the course.
- A student fails (receives an "NCR" grade) any APPE rotation after the student has been required to re-start the APPE rotation sequence due to failure to meet performance standards for the APPE rotations (see section above regarding Failure to Meet Standards – Second APPE Rotation Actions).
- 6. A student fails any IPPE (1 and/or 2) rotation after the student has been required to re-start the IPPE rotation sequence due to failure to meet performance standards for the IPPE rotations.

# **Standards for Academic and Professional Conduct**

#### **Academic Honesty**

Academic honesty includes, but is not limited to, maintaining original assessment answers after the graded examination has been returned, maintaining honesty during assessments, bringing only authorized resources to exams or other assessed exercises, signing only your name on attendance records or team examinations/assignments, and giving proper credit when citing another person's work.

Violations of Academic Honesty include all forms of cheating and plagiarism.

#### Cheating

Cheating is the unauthorized use of information or study guides in any academic exercise. The methods of cheating are varied and well-known. Cheating includes, but is not limited to:

- Copying from others during an assessment
- Sharing answers for a take-home assessment
- Using illegal notes during an examination
- Taking an assessment for another student.
- Asking or allowing another student to take an assessment for you.
- Tampering with an assessment after it has been corrected, then returning it for more credit than deserved.

#### **Plagiarism**

Plagiarism is academic theft. It refers to the use of another's ideas or words without proper attribution or credit. An author's work is his/her property and should be respected by appropriate documentation. Credit must be given:

- For every direct quotation.
- When a work is paraphrased or summarized in whole or in part in your own words.
- For information that is not common knowledge. Information is common knowledge when it appears in several sources about the subject.

There is no distinction between those who violate rules of academic honesty and those who allow it to occur.

#### **Professional Conduct**

Professional conduct includes, but is not limited to, all items as appropriate under the "Professional Standards" section. All students are expected to maintain the highest standards of professionalism at all times.

## **Professional Standards**

#### **Professional Dress and Behavior**

Students are expected to dress and act appropriately. Students are expected to follow all rules established by faculty and preceptors in the classroom, during clinical skills labs, at practice sites, and during College-sponsored events. When requested, students should use professional dress, such as wearing their white coats.

#### Respect

Students should show respect to their fellow classmates, staff, faculty, colleagues and their patients. As future professionals, each student must assume personal responsibility for honesty and integrity.

#### **Professionalism**

A more comprehensive description of professionalism expectations for student pharmacists includes:

#### 1. Altruism

- a. I will place my patients' best interest above all others.
- b. I will demonstrate unselfish concern for the welfare of others.
- c. Accountability
- d. I will acknowledge my limitations and seek help from an appropriate source when my knowledge, skills, abilities, or judgment is inadequate for the academic or professional circumstance.
- e. I will assume responsibility for my actions.

#### 2. Excellence

- a. I will exhibit my best effort in all academic and professional activities and endeavors.
- b. I will commit to continual self-assessment, development and lifelong learning.

## 3. Duty

- a. I will maintain a professional appearance when represented as a student pharmacist.
- b. I will come prepared and adhere to established times for classes, assessments, laboratories, rotations and meetings.
- c. I will utilize time efficiently and will adhere to established deadlines for projects and assignments.
- d. I will acknowledge academic priorities over professional and personal activities.
- e. I will consult with faculty when professional or personal activities conflict with academic responsibilities and give due consideration to their recommendations.
- f. I will be present and will actively contribute in all team activities.
- g. I will formulate constructive evaluation of others' performance and will communicate it in a professional manner.
- h. I will demonstrate respect for patient privacy and maintain strict patient confidentiality.

#### 4. Honor and Integrity

- a. I will honor my commitments to others.
- b. I will act with honesty and integrity at all times.
- c. I will adhere to Western University of Health Sciences' standards of academic honesty (see University catalog).
- d. I will adhere to the profession's code of ethics for pharmacists.
- e. I will perform all projects and assignments in an objective manner and will give credit to others who were actively involved in the development of ideas and outcomes.

# 5. Respect for Others

- a. I will use professional language at all times when communicating as a student pharmacist.
- b. I will maintain a professional attitude/demeanor at all times when communicating as a student pharmacist.
- c. I will display active listening and show regard in the presence of classmates, faculty, staff, patients, and healthcare professionals.
- d. I will display sensitivity towards other cultures, races, religions, genders and sexual orientations.
- e. I will contribute to an environment conducive to learning.
- f. I will display a positive attitude when receiving constructive feedback.
- g. I will strive to resolve conflict in a respectful manner.
- h. I will exhibit empathy, concern, and respect for my patients and their representatives.
- i. I will interact with peers, healthcare professionals and patients with integrity and respect.

# **Reporting Violations**

# Responsibility of the Student

Because there is no distinction between those who violate rules of academic and professional honesty and those who allow it to occur, students have a professional obligation to report violations. Violation of the Standards of Academic and Professional Conduct should first be reported to those closest to the source of the violation; this may include course faculty, course facilitators, faculty advisors or the Office of the Dean. When appropriate, students may report a witnessed violation to the Assistant Dean of Student Affairs, who will maintain the student's anonymity.

#### Responsibility of the Assistant Dean of Student Affairs

Upon receiving a report of academic or professional misconduct from a student, the Director of Student Services will report this violation to the appropriate person involved, course facilitator or Office of the Dean, while maintaining student anonymity.

#### **Academic Misconduct**

# Responsibility of the Faculty

When faculty observe or are made aware of a violation, they have the authority to handle an incident directly. The following list is meant to be illustrative rather than exhaustive as all faculty reserve the right to impose sanctions based upon their good judgment of the given situation:

- Verbal reprimand and/or moving a student during an assessment
- No credit given for the question or assessment
- Assignment of additional work
- Re-examination
- Lowering the course grade.
- Assignment of a "U" grade for the course.

If the faculty member imposes any or all of these remedies, he or she will notify the student and submit an "Academic and Professional Misconduct Report Form" to the Office of the Dean. If a student receives a "U" grade as a result of academic misconduct, the student is not eligible for course remediation and must repeat the course during the next academic year.

#### **Professional Misconduct**

# Responsibility of the Faculty and Staff

When faculty or staff observe or are made aware of a violation, they are to complete and Academic and Professional Misconduct Report Form. The completed Form is submitted to the Dean.

The following list of sanctions that can be implemented in established cases of Professional Misconduct is meant to be illustrative rather than exhaustive:

- Write a formal letter of apology.
- May not hold office in any College or University organization for one academic year.
- Complete additional professional activities.
- Write a 10-page report on professionalism and professional conduct in the pharmacy/health care environment.
- Be subject to a conduct suspension.

#### Responsibility of the Dean

The Dean has the sole authority to adjudicate and impose any sanctions on all academic and professional conduct issues. Once the Dean receives an "Academic and Professional Misconduct Report Form" he/she determines if the issue should be dealt with unilaterally by the Dean or referred to the Student Performance Committee. If the issue is referred to the Student Performance Committee, the Dean will adjudicate and impose any sanctions on the case upon receiving the Committee's final recommendation. The student may appeal the action of the Dean following policies listed in the General Academic Policies and Procedures section in the Overview Section of this Catalog.

## Responsibility of the Student Performance Committee

Upon preliminary investigation, the Student Performance Committee may request that the issue(s) be referred back to the Dean with a rationale as to why this would be a more appropriate venue to address the issue(s). When the Student Performance Committee believes that a case warrants formal investigation, the Committee will appoint a Student Conduct Subcommittee, which shall consist of at least one member of the Student Performance Committee, who shall serve as Chair, two voting faculty members not on the Committee, and one student representative. All members of the Student Conduct Subcommittee have full voting privileges.

As future professionals, each student must assume personal responsibility for honesty and integrity.

When dealing with allegations of student violations of professional conduct, the Student Performance Committee follows the following procedure.

- 1. The Committee Chair will notify the student in writing of the specific charges and the time and date of the hearing where the charges will be considered by the Committee/Subcommittee.
- 2. The notice shall state whether expulsion from the University may be considered if the charges are found to be true.
- 3. If a member of the Student Performance Committee/Subcommittee has a conflict of interest regarding the allegations, the chairperson of the Committee/Subcommittee shall recuse the member and will appoint another faculty member to serve as a member of the Committee/Subcommittee for the purposes of hearing and deliberating on the allegations.
- 4. Except as noted below, the meeting to consider the charges will be closed to all individuals not directly involved.
- 5. The Committee/Subcommittee may exclude witnesses except during the time they are testifying.
- 6. If the notice of the hearing states that expulsion from the University will be considered if the charges are found to be true, or if the circumstances warrant, the student may request permission for a mentor to appear at the meeting to assist the student.
  - a) The mentor is normally limited to advising the student and is not permitted to examine witnesses or otherwise participate directly in the proceedings. However, the Committee/Subcommittee may permit the mentor to participate directly where special circumstances are shown that warrant such participation.

- b) The student shall make any request for a mentor to appear or participate in writing, and the request must identify the mentor the student desires and provide any additional information the student deems relevant to the request.
- c) If the allegation involves activities that may result in criminal charges being filed, the student's request for a mentor must be granted.
- d) In other circumstances the Chair of the Committee/Subcommittee will normally inform the student within three business days of receipt of the request whether the mentor will be permitted to attend the hearing.
- 7. If the student requests, the specific charges will be read to the student by the Chair of the Committee/Subcommittee. If the charges are not read, the charges will be deemed to be those specified in the notice of the hearing.
- 8. The student will be permitted the opportunity to testify and present evidence and witnesses on his/her behalf.
- 9. In addition, the student, as well as any witnesses, is subject to questioning by members of the Committee/Subcommittee.
- 10. The student will also be provided the opportunity to question witnesses called by the Committee/Subcommittee. If the Subcommittee agrees to consider affidavits, declarations and other written statements and documents as part of its deliberations, the student will be provided copies of any such documents at least two days prior to the hearing.
- 11. If the student desires to present any written documents, these documents must be provided to the hearing panel at least two days prior to the hearing. The student is responsible for presenting all evidence he/she deems relevant at the scheduled hearing unless such evidence cannot be presented at that time due to circumstances beyond the student's control. Should such be the case, the Chair of the Committee/Subcommittee, at his/her discretion, may grant a continuation of the hearing if warranted.
- 12. Similarly, if a party or witness called by the Committee/ Subcommittee is unavailable, but whose testimony is considered important to the hearing or due to other circumstances, a continuation of the hearing may also be granted.
- 13. The Committee/Subcommittee shall determine whether, based on the evidence presented, it is more likely than not that the charges made are true.
- 14. If a Subcommittee reviewed the case, the Student Conduct Subcommittee will forward their findings and recommendations to the Student Performance Committee for vote.
- 15. The Student Performance Committee will review the recommendation and then forward the original recommendation, along with a statement of concurrence or of an alternate recommendation, to the Dean.

16. The Dean will affirm, deny or send back to the Committee for further deliberation.

#### **Maintenance of Records**

Student Professional Conduct records will be maintained by the Office of the Dean of the College of Pharmacy for seven years or until the student for whom they pertain graduates, unless the Dean determines there is good reason to retain the records longer.

#### **Conduct Suspension**

Conduct suspension may be imposed as a result of conduct/behaviors that are deemed by the Student Performance Committee to be adversely affecting the student's pharmacy school performance and ability to engage the subject material, but the behavior-conduct does not, in the opinion of the Committee, warrant a recommendation for dismissal. The student would be recommended for conduct suspension for a period of time deemed appropriate by the Student Performance Committee and/or Dean, but generally would not exceed one academic year or until the conditions that provoked the conduct suspension in the first place are satisfactorily remedied in the opinion of the Student Performance Committee/Dean. In cases where the Student Performance Committee needs external assessments to make a final decision, they may recommend to the Dean that the student obtain psychological, medical and/or educational assessments (See Section 14 of the General Academic Policies and Procedures).

## **Appeal Process**

Students may appeal decisions regarding suspension, student conduct, academic progression/promotion and graduation according to the regulations listed in the General Academic Policies and Procedures section in the Overview section of the Catalog.

# **Issues/Dispute Resolution Procedure**

When an issue or dispute arises between students, the issue/dispute resolution process starts with communication among the involved students. If a satisfactory resolution is not arrived at that level, the matter should then be addressed with the course facilitator or the faculty advisor. If the problem is not resolved at the faculty advisor/course facilitator level, the matter should be brought to the Assistant Dean for Student Affairs, followed by the Dean and then the Provost/COO. If the matter has not been resolved at those levels, the final arbiter is the President.

When an incident arises involving a faculty member, the first step in the issue/dispute resolution process is discussion with the faculty member. If the matter is not satisfactorily resolved at that level, then the matter should be referred to the Department Chair, Dean, and Provost/COO, in that order. The final arbiter is the Board of Trustees.

When an incident arises involving a staff member, the dispute resolution process begins with the Department Chair, followed by the Dean. The Office of Human Relations is the final arbiter.

Failure to follow this sequence of steps will only serve to delay the appropriate resolution of the issue or dispute as the matter will only be referred back to the correct level in this chain of responsibility.

If students wish to file a complaint with the College of Pharmacy regarding a faculty or staff member or another student, they may also do so by completing the "Student Complaint Form" that is located on Blackboard in the Pharmacy Student Services course in the course documents.

## Accreditation Council for Pharmacy Education (ACPE) Policy on Complaints

Students have a right to file a complaint with the Accreditation Council for Pharmacy Education (ACPE) if they feel the College of Pharmacy and/or any College of Pharmacy personnel is in violation of the accreditation standards or policies established by ACPE.

For further information, please see the following link:

http://www.acpe-accredit.org/students/complaints.asp.

# **Evaluation and Grading**

Students are required to meet a specified set of outcome objectives in each course as described in each course syllabus/block plan. The course facilitator will provide students with the learning objectives, instructional methods, assessment strategies, schedules, and the grading criteria, in writing, prior to the beginning of each course. Achievement of course learning objectives will be based on performance on individual quizzes, examinations, and on any other graded assignments or criteria, including team or independent Pass/No Pass assessments established by the course facilitator.

# **Grading Scales**

Course grades, including those for Introductory Pharmacy Practice Experience 1 and 2[IPPE-1A (PHRM 5998), IPPE-1B (PHRM 5999) and IPPE-2 (PHRM 6999)] will be assigned as follows:

<u>Grade</u>	<u>Equivalent</u>	<b>GPA Points</b>
Α	90-100%	4.00
В	80-89%	3.00
С	70-79%	2.00
U	Less than 70%	0.00

Grading criteria for the Introductory Pharmacy Practice Experiences (IPPE-1A, IPPE-1B, and IPPE-2) are described in their individual course syllabi. Grading for the Advanced Pharmacy Practice Experiences (APPEs) is described in detail in *The Syllabus for Advanced Pharmacy Practice Experiences*.

Grades for Advanced Pharmacy Practice Experiences (APPEs) /Advanced Electives (AE) grades will be assigned as follows:

<u>Grade</u>	<u>Equivalent</u>	<b>GPA Points</b>
CR	Credit	N/A
NCR	No Credit	N/A

Grading for the Interprofessional Education (IPE) courses (IPE 5000, IPE 5100, IPE 6000, IPE 6100) is described in their individual course syllabi. Grades in these courses will be assigned as follows:

<u>Grade</u>	<u>Equivalent</u>	<b>GPA Points</b>
CR	Credit	N/A
NCR	No Credit	N/A

#### **Administrative Grades**

<u>Grade</u>	<u>Equivalent</u>	<b>GPA Points</b>
AU	Audit	N/A
1	Incomplete	N/A
W	Withdrawal	N/A
M	Missing	N/A

#### Incomplete grade (I)

A course facilitator has the option of assigning an Incomplete Grade under the following circumstances:

- 1. A student has a verifiable "Excused Absence" for missing an assessed activity due to a verifiable "Excused Absence" (see Course Participation and Attendance).
- 2. Course facilitators are responsible for identifying the most appropriate methods(s) for assessing students' mastery of specific skills and/or topics. For some assessed activities, course facilitators may specify within a course block plan that sub-standard performance on specific assessed activities can result in "Incomplete" grades. Typically, this will apply to skills for which students must demonstrate mastery before proceeding to more advanced topics or skills.

The following describes the process necessary for resolving an incomplete grade.

The student is responsible for meeting with the course facilitator to receive direction regarding what is necessary to resolve the incomplete grade. In a meeting between the student and the course facilitator issuing the "I" grade, an Incomplete Contract Form must be completed. The form is available from the College of Pharmacy Academic and Student Affairs Office or from the Registrar's intranet site. The Contract Form stipulates the requirements of the student that are needed to remove the incomplete grade. The original form will be kept by the course facilitator. Copies of the form must be sent to the student, to the College of Pharmacy Assistant Dean of Student Affairs (for inclusion in the student's file), and to the Registrar's Office.

The grade of "I" is not to be awarded in place of a failing grade or when the student is required to repeat the course. In such a case, a grade other the "I" must be assigned. The incomplete (I) grade remains on the transcript. In the event that an "I" grade is carried into a new academic year the Dean may conditionally promote the student to the next academic year in the program pending the satisfactory clearance of the incomplete grade.

If a student fails to comply with the conditions outlined in the notification, or fails to satisfactorily convert the incomplete grade to a passing grade, the incomplete grade will be converted to a U grade (if the "I" grade was issued in a didactic course) or to an "NCR" grade (if the "I" grade was issued in a rotations course). The student will be placed on academic suspension and will be required to repeat the course at the next regular offering.

In the event that the I grade is converted to a "U" grade; the student's GPA will be recalculated. If there are any consequences for academic progression, the consequences will be effective the same day the incomplete grade is changed (see Failure to Meet Standards).

#### **Grade Reports**

Official grades are turned in to the Registrar by the faculty of the College of Pharmacy, at which time the online student records system, BanWeb, is updated. Official grade reports and unofficial transcripts will be available on the BanWeb student records system throughout the academic year.

#### **Credit Hour Calculation**

The College of Pharmacy calculates credit hours as follows:

- 16 hours of lecture = 1 credit hour
- 32 hours of workshops/discussions/laboratory = 1 credit hour
- For IPPE courses (PHRM 5998, 5999 and 6999), 40 contact hours = 1 credit hour
- For APPE (PHRM 7000-level courses) and AE (PHRM 8400), 30 contact hours = 1 credit hour

# **Course Grade Appeals**

Faculty has the expertise and authority to render judgment regarding the quality of a student's academic work. The course facilitator has final responsibility in assigning grades to activities assessed within a course. A grade appeal is to be used as a last resort after every effort has been made between student and faculty to resolve grading questions or disputes.

Course Grade Appeals will only be considered when they meet the following required criteria:

- 1. Only the final course grade may be appealed. The course facilitator has final decision regarding:
  - a. Any questions or concerns related to grades assigned to specific course assessments.
  - b. Any questions or concerns relating to specific test/exam questions.
  - c. Any questions or concerns related to the interpretation of grading criteria for assessing mastery of course material.
- 2. The course grade is inaccurate or biased and the student has evidence supporting one of the following circumstances:
  - a. There was prejudice or discrimination resulting in the unequal application of grading standards.
  - b. The grade assigned does not correspond with or conflicts with the course syllabus or published College policy.
  - c. There was a computation error resulting in an incorrect final grade.
- 3. In order for a Grade Appeal to be considered, the student must:
  - a. Submit the grade appeal in writing within 30 days of the last day of the course to the Assistant Dean of Student Affairs.

- b. Specify in the written appeal how the Required Criteria (above) apply to the situation.
- c. Provide specific documentation/evidence in support of the applicable Required Criteria.

The appeal shall be submitted to the Assistant Dean of Student Affairs who, upon receipt, will forward a copy of the appeal to the Chair of the Student Performance Committee. If the Student Performance Committee, upon review of the appeal, believes that the case warrants formal investigation, the Committee may decide to investigate the matter or decide that a Grade Appeals Sub-Committee will be appointed.

If a Grade Appeals Sub-Committee is appointed, it shall consist of at least one member of the Student Performance Committee, who shall serve as Chair, two voting faculty members not on the Committee, and one student representative. All members of the Grade Appeals Sub-Committee have full voting privileges.

The Grade Appeals Sub-Committee will conduct its own investigation in conjunction with such an appeal following established procedural guidelines for handling student appeals of an academic nature. The student making the appeal will be invited to meet with the Grade Appeal Sub-Committee to substantiate his/her appeal. The Grade Appeals Sub-Committee will forward their recommendation to the Student Performance Committee. The Student Performance Committee will review the recommendation and then forward the original recommendation, along with a statement of concurrence or of an alternate recommendation, to the Dean. Should the Student Performance Committee elect to investigate the matter, it will follow the same procedures as the Grade Appeal Sub-Committee, and forward the Committee's recommendation to the Dean. The Dean's decision on the grade earned by the student is final.

# **Curriculum Organization**

Year 1

The 5000 series is assigned to didactic blocks in the Basic Science Foundations and Professional Practice Foundation blocks for the first-year pharmacy students (P1).

Year 1, Fall Semester, PharmD 2017		
Course	Title	<b>Credit Hours</b>
IPE 5000	Patient Centered Cases I	1.00
PHRM 5110	Introduction to Pharmacy and Healthcare Systems	2.00
PHRM 5111	Foundations of Pharmacy Practice & Self Care Therapeutics I	4.00
PHRM 5221	Pharmacological Basis of Therapeutics I	3.50
PHRM 5222	Pharmacological Basis of Therapeutics II	3.00
PHRM 5301	Pharmaceutics/Biopharmaceutics I	3.00
PHRM 5401	Immunology	3.50
PHRM 5998	Introductory Pharmacy Practice Experience 1A	2.00
	Semester Total:	22.00
Year 1, Spring Se	mester, PharmD 2017	
Course	Title	<b>Credit Hours</b>
IPE 5100	Patient Centered Cases II	1.00
PHRM 5112	Foundations of Pharmacy Practice & Self Care Therapeutics II	4.00
PHRM 5113	Research Methods and Biostatistics	1.00
PHRM 5223	Pharmacological Basis of Therapeutics III	3.00
PHRM 5224	Pharmacological Basis of Therapeutics IV	3.50
PHRM 5302	Pharmacogenomics and Pharmaceutics	3.00
PHRM 5501	Pharmacokinetics	3.50
PHRM 5999	Introductory Pharmacy Practice Experience IB	2.00
	24.00	
	Semester Total:	21.00

#### Year 2, Year 3 – Fall Semester

The 6200 series describes the didactic curriculum for second-year student pharmacists (P2). The 6300 series denotes the didactic curriculum for the first half of the third year (P3). The series of Pharmacy Practice blocks (6201 – 6306) presents topics and accompanying skills that lay the foundation for the practice of pharmacy. The focus of the pharmacy practice blocks is to teach students how to integrate knowledge, skills, and attitudes necessary for patient-centered practice in a variety of areas in pharmacy practice. An introduction to the epidemiology, evidence-based medicine, genomics, literature evaluation, pathophysiology, clinical pharmacokinetics, and therapeutics relevant to various disease states and syndromes are covered in these blocks. In addition, a variety of skills and screening tools used to assess and monitor therapeutics effectiveness are expected to be mastered. Emphasis is placed on the principles addressing pharmaceutical care; pharmacoeconomics; pharmacy management; ethical, legal, and professional responsibilities; assessment, evaluation, and dissemination of drug information; written and verbal communication; and drug distribution. The overall goal of each block is to enable students to integrate their knowledge of the disease state topic(s) presented in the context of formulating an individualized pharmacotherapeutics plan for a given patient. Emphasis is placed on communication skills that assess a student's ability to educate health professionals and patients

regarding lifestyle changes and drug therapy for specific diseases in a clear, concise, and organized manner. Collaboration with peers (teams) occurs in each block in order to teach students how to work with others.

Pharmacy Practice blocks 6205, 6210 and 6306 are designed to allow the student an opportunity to strengthen and expand their knowledge in the content areas previously covered while exploring some aspects of disease states in greater depth or breadth. Students engage in team discussions that incorporate and integrate aspects of those disease states previously covered. Skills (e.g., counseling, patient education, calculation applications, drug information, and drug monitoring activities) relevant to the practice of pharmacy will be practiced during these blocks. The blocks will end with a series of examinations covering content areas and skills learned and practiced during the previous blocks.

Year 2, Fall Semester, PharmD 2016		
Course	Title	Credit Hours
IPE 6000	Team Training in Healthcare I	1.00
PHRM 6201	Pharmacy Practice I: Evidence-Based Medicine	4.00
PHRM 6202	Pharmacy Practice II: Intro to Pharmacotherapy/Renal Diseases	4.00
PHRM 6203	Pharmacy Practice III: Metabolic Syndromes	4.00
PHRM 6204	Pharmacy Practice IV: Cardiovascular Diseases	4.00
PHRM 6205	Pharmacy Practice V: Integration Block	4.00
	Semester Total:	21.00
Year 2, Spring	Semester, PharmD 2016	
Course	Title	<b>Credit Hours</b>
IPE 6100	Team Training in Healthcare II	1.00
PHRM 6206	Pharmacy Practice VI: GI and Liver Diseases	4.00
PHRM 6207	Pharmacy Practice VII: Respiratory Diseases, Inflammatory	
	Diseases, Endocrine Diseases, and Women's Health	4.00
PHRM 6208	Pharmacy Practice VIII: Men's Health and Psychiatric Diseases	4.00
PHRM 6209	Pharmacy Practice IX: Neurological Diseases	4.00
PHRM 6210	Pharmacy Practice X: Integration Block	4.00
PHRM 6999	Introductory Pharmacy Practice Experience II	4.00
	Semester Total:	25.00
	Year 2 Total:	46.00
Year 3, Fall Se	mester, PharmD 2015	
Course	Title	Credit Hours
PHRM 6301	Pharmacy Practice XI: Infectious Diseases (Bacterial)	4.00
PHRM 6302	Pharmacy Practice XII: Infectious Diseases (Viral and Fungal),	
	Travel Medicine, and Organ Transplant	4.00
PHRM 6303	Pharmacy Practice XIII: Oncology	4.00
PHRM 6304	Pharmacy Practice XIV: Pharmacy Administration	4.00
PHRM 6305	Pharmacy Practice XV: Pharmacoeconomics and	
	Pharmacoepidemiology	4.00
	Semester Total:	20.00

#### Year 3 – Spring Semester, Year 4

The Advanced Pharmacy Practice Experiences (APPEs) rotations provide one year of supervised clinical education. Students advance their knowledge in areas such as taking drug histories, providing patient education, interpreting diagnostic data and dispensing and compounding medications. The 7000 series are designated for the APPE rotations. All PharmD and IPBP students are required to complete PHRM 7110, 7120, 7210, 7220, 7330, 7340, and 7350. The 8000 series is designed for elective coursework. The elective program is a capstone experience designed to prepare the student for his/her role as an entry level practitioner. Electives are offered in areas such as research, teaching, and advanced clinical practice. A project is required of each student. Students must complete 20 units of elective coursework in the 8000 series.

Year 3, Spring	Year 3, Spring Semester, PharmD 2015		
Course	Title	Credit Hours	
PHRM 6306	Pharmacy Practice XVI: Integration Block	4.00	
Rotation 1	PHRM 7110, 7120, 7210, 7220, 7330, 7340	8.00	
Rotation 2	PHRM 7110, 7120, 7210, 7220, 7330, 7340	8.00	
	Semester Total:	20.00	
	Year 3 Total:	40.00	
Year 4, Fall Se	mester, PharmD 2014		
Course	Title	<b>Credit Hours</b>	
Rotation 3	PHRM 7110, 7120, 7210, 7220, 7330, 7340, or 7350	8.00	
Rotation 4	PHRM 7110, 7120, 7210, 7220, 7330, 7340, or 7350	8.00	
Rotation 5	PHRM 7110, 7120, 7210, 7220, 7330, 7340, or 7350	8.00	
Rotation 6	PHRM 7110, 7120, 7210, 7220, 7330, 7340, or 7350	8.00	
Rotation 7	PHRM 7110, 7120, 7210, 7220, 7330, 7340, or 7350	8.00	
	Semester Total:	40.00	
Year 4, Spring	Year 4, Spring Semester, PharmD 2014		
Course	Title	<b>Credit Hours</b>	
PHRM 8400	Advanced Electives	20.00	
	Semester Total:	20.00	
	Year 4 Total:	60.00	

# **Curriculum Organization (International Post-Baccalaureate PharmD Track)**

# Year 1

Year 1, Fall Semester, IPBP 2016		
Course	Title	<b>Credit Hours</b>
IPE 6000	Team Training in Healthcare I	1.00
PHRM 5606	Overview of Clinical Practice	4.00
PHRM 6201	Pharmacy Practice I: Evidence-Based Medicine	4.00
PHRM 6202	Pharmacy Practice II: Intro to Pharmacotherapy/Renal Diseases	4.00
PHRM 6203	Pharmacy Practice III: Metabolic Syndromes	4.00
PHRM 6204	Pharmacy Practice IV: Cardiovascular Diseases	4.00
PHRM 6205	Pharmacy Practice V: Integration Block	4.00
	Semester Total:	25.00
Year 1, Spring	Semester, IPBP 2016	
Course	Title	<b>Credit Hours</b>
IPE 6100	Team Training in Healthcare II	1.00
PHRM 6206	Pharmacy Practice VI: GI and Liver Diseases	4.00
PHRM 6207	Pharmacy Practice VII: Respiratory Diseases, Inflammatory	
	Diseases, Endocrine Diseases, and Women's Health	4.00
PHRM 6208	Pharmacy Practice VIII: Men's Health and Psychiatric Diseases	4.00
PHRM 6209	Pharmacy Practice IX: Neurological Diseases	4.00
PHRM 6210	Pharmacy Practice X: Integration Block	4.00
PHRM 6999	Introductory Pharmacy Practice Experience II	4.00
Semester Total:		25.00
	Year 1 Total:	50.00

# Year 2

Year 2, Fall Semester, IPBP 2015		
Course	Title	Credit Hours
PHRM 6301	Pharmacy Practice XI: Infectious Diseases (Bacterial)	4.00
PHRM 6302	Pharmacy Practice XII: Infectious Diseases (Viral and Fungal),	
	Travel Medicine, and Organ Transplant	4.00
PHRM 6303	Pharmacy Practice XIII: Oncology	4.00
PHRM 6304	Pharmacy Practice XIV: Pharmacy Administration	4.00
PHRM 6305	Pharmacy Practice XV: Pharmacoeconomics and	
	Pharmacoepidemiology	4.00
	Semester Total:	20.00
Year 2, Spring	Semester, IPBP 2015	
Course	Title	<b>Credit Hours</b>
PHRM 6306	Pharmacy Practice XVI: Integration Block	4.00
Rotation 1	PHRM 7110, 7120, 7210, 7220, 7330, 7340	8.00
Rotation 2	PHRM 7110, 7120, 7210, 7220, 7330, 7340	8.00
	Semester Total:	20.00
	Year 2 Total:	40.00

# Year 3

Year 3, Fall Semester, IPBP 2014			
Course	Title	<b>Credit Hours</b>	
Rotation 3	PHRM 7110, 7120, 7210, 7220, 7330, 7340, or 7350	8.00	
Rotation 4	PHRM 7110, 7120, 7210, 7220, 7330, 7340, or 7350	8.00	
Rotation 5	PHRM 7110, 7120, 7210, 7220, 7330, 7340, or 7350	8.00	
Rotation 6	PHRM 7110, 7120, 7210, 7220, 7330, 7340, or 7350	8.00	
Rotation 7	PHRM 7110, 7120, 7210, 7220, 7330, 7340, or 7350	8.00	
	Semester Total:	40.00	
Year 3, Spring	Year 3, Spring Semester, IPBP 2014		
Course	Title	<b>Credit Hours</b>	
PHRM 8400	Advanced Electives	20.00	
	Semester Total:	20.00	
	Year 3 Total:	60.00	

# **Course Descriptions (Descriptions of Blocks)**

Blocks listed in this catalog are subject to change through established academic channels. New blocks and changes in existing blocks are approved by the College of Pharmacy Curriculum Committee and the Faculty.

All courses are awarded letter grades, except when indicated otherwise.

#### IPE 5000 Patient Centered Cases I - An Interprofessional Approach (1 credit, CR/NCR)

IPE 5000 is offered as part of the college curriculum for all first year health professional students. It is a University requirement for graduation for all participating colleges. The course is designed to prepare the healthcare student to practice patient-centered collaborative care through a team approach. Working in small interprofessional teams, students will explore cases representing conditions across the lifespan. Course competencies for IPE 5000 include communication, collaboration and understanding scope of practice. In order to receive course credit, the minimum acceptable grade is 80%.

#### IPE 5100 Patient Centered Cases II – An Interprofessional Approach (1 credit, CR/NCR)

Continuation of IPE 5000.

#### IPE 6000 Team Training in Healthcare I (1 credit hour, CR/NCR)

IPE 6000 will continue to build upon the knowledge from the IPE 5000 series, but will expand upon that knowledge and require the student to learn and apply advanced tools and strategies that are crucial to develop a collaborative healthcare team. The majority of the course is independent study with students engaging in a large scale tabletop activity where they apply team tools necessary to solve a healthcare dilemma.

#### IPE 6100 Team Training in Healthcare II (1 credit hour, CR/NCR)

Continuation of IPE 6000.

## PHRM 5110 Introduction to Pharmacy and Healthcare Systems (2 credits)

Introduction to Pharmacy and Healthcare Systems (PHRM 5110) will introduce the student pharmacist to the knowledge, skills and attitudes necessary for: 1) successful completion of the PharmD curriculum and 2) active participation in elevating pharmacy practice for the public benefit. The course will provide a foundational primer on healthcare systems and the pharmacists' critical role in these systems. Topics include challenges in contemporary pharmacy practice, the role of the pharmacist as a health care provider, ethical considerations pharmacists must face, pharmaceutical care, the role of pharmacist as provider of evidence-based medical information, the US health care system (history, overview, stakeholders, providers, public health policies, and the Food and Drug Administration), health care financing (Medicare, Medicaid, private insurance, and managed care), and an introduction to pharmacy practice (community pharmacy and hospital pharmacy) clerkships (IPPE). Student pharmacists will also be required to participate in Medicare Part D Outreach programs.

## PHRM 5111 Foundations of Pharmacy Practice and Self-Care Therapeutics I (4 credits)

The Foundations of Clinical Pharmacy Practice (PHRM 5111) is designed to introduce the student to the knowledge, skills and attitudes necessary for successful completion of the PharmD curriculum, and to begin to develop foundation skills for patient-centered practice. General topics include contemporary pharmacy practice issues and the role of the pharmacist as a health care provider, written and verbal communication skills, ethics, law, professionalism, pharmaceutical care, patient counseling skills, selected skills development, self-care topics and the role of the pharmacist in self-care therapeutics, the proper selection and use of nonprescription medications and dietary supplements, patient assessment skills utilizing QuEST/SCHOLAR-MAC method, nonprescription and dietary supplement product counseling.

# PHRM 5112 Foundations of Pharmacy Practice and Self-Care Therapeutics II (4 credits)

This course reinforces the knowledge, skills, and attitudes introduced in PHRM 5111. Written and verbal communication skills and team collaboration skills are further developed through the use of SOAP notes, simulated patient encounters, and EMB-based team activities. General topics include the factors that lead patients to self-diagnose and self-treat their medical conditions, the role of the pharmacist in self-care therapeutics, the proper selection and use of nonprescription medications and dietary supplements, patient assessment skills utilizing QuEST/SCHOLAR-MAC method, nonprescription and dietary supplement product counseling, and contemporary pharmacy practice issues, laws, and regulations.

#### PHRM 5113 Research Methods and Biostatistics (1 credit)

This block focuses on an introduction to research methodology and biostatistics. Students will use these tools in this block to begin to review and evaluate peer-reviewed clinical studies. They will continue to use these tools in subsequent blocks to evaluate clinical studies pertaining to specific therapeutic topics.

# PHRM 5221 Pharmacological Basis of Therapeutics I (3.5 credits)

PHRM 5221 begins a series of four courses (PHRM 5221-5224) that integrate pharmacology, pathophysiology, medicinal chemistry and toxicology. Taken in their entirety they are referred to as the Pharmacological Basis of Therapeutics (PBT) block. These courses build on the principles acquired in biochemistry, anatomy, microbiology and physiology. The objective of these courses is to present the principles of drug-receptor selectivity, mechanisms of action of drugs, and the rationale for their therapeutic use. The series of courses focus on pharmacodynamics (how the drug affects the body's functions) and pharmacokinetics (how the body handles the drug) and provides an integrated, scientific basis for understanding desired effects (therapeutic uses) and undesired side effects (adverse effects or drug-induced toxicity). The series focuses on the human system and provides the organizational knowledge and background relevant to the pharmacy practice sequence of courses presented in the second and third years. Principles addressing cellular, tissue, and organ physiology provide a conceptual framework to introduce pharmacology by emphasizing commonalties of drug mechanism with drug classification. Prototype drugs in each pharmacological class are provided for comparing and contrasting with other agents in the same class and/or for other drugs used therapeutically but with different mechanisms of action. Fundamental principles are emphasized with the intent of providing their relevance for prevention and treatment of disease using therapeutic agents, most of which can be considered as modification of intrinsic, biological compounds.

PHRM 5221 begins with an introduction to pharmacology, including pharmacokinetics, pharmacodynamics, and toxicology, as well as introducing agents that affect the autonomic nervous

system (parasympathetic and sympathetic agents). Drugs used in the treatment of asthma are also covered.

# PHRM 5222 Pharmacological Basis of Therapeutics II (3 credits)

PHRM 5222 is part of the series of courses (PHRM 5221, 5222, 5223 and 5224) that integrates pharmacology, pathophysiology, and medicinal chemistry building on the principles acquired in biochemistry, anatomy, and physiology. As described under Block Description of PHRM 5221, the objective of these courses is to present the principles of drug-receptor selectivity, mechanisms of action of drugs, and the rationale for their therapeutic use. The series of courses focus on Pharmacodynamics (how the drug affects the body's functions) and Pharmacokinetics (how the body handles the drug) and provides an integrated, scientific basis for understanding desired effects (therapeutic uses) and undesired side effects (adverse effects or drug-induced toxicity). The series focuses on the human system and provides the organizational knowledge and background relevant to the pharmacy practice sequence of courses presented in the second and third years. Principles addressing cellular, tissue, and organ physiology provide a conceptual framework to introduce pharmacology by emphasizing commonalties of drug mechanism with drug classification. Prototype drugs in each pharmacological class are provided for comparing and contrasting with other agents in the same class and/or for other drugs used therapeutically but with different mechanisms of action. Fundamental principles are emphasized with the intent of providing their relevance for prevention and treatment of disease using therapeutic agents, most of which can be considered as modifications of intrinsic, biological compounds.

PHRM 5222 introduces agents used to treat disorders of the cardiovascular (CV) system as well as diabetes. Specific CV topics include: angina, arrhythmias, blood coagulation, heart failure, hyperlipidemia, and hypertension. Taken together, the combination of obesity, diabetes, hyperlipidemias and hypertension, is termed "metabolic syndrome" and it is currently a major health concern with an increasing prevalence in the United States. An overview of the pathophysiology of each system will be presented followed by the pharmacology and medicinal chemistry of the agents used to treat these diseases/disorders. Prototype drugs in each class will be covered to further your understanding of the subject.

# PHRM 5223 Pharmacological Basis of Therapeutics III (3 credits)

PHRM 5223 focuses mainly on the central nervous system. Principles addressing basic anatomy, cellular and tissue physiology provide a conceptual framework to introduce pharmacology by emphasizing commonalties of drug mechanism with drug classification. Fundamental principles are emphasized, and principles are the focus in discussing the prevention and treatment of diseases using therapeutic agents. Clinically relevant conditions will include a series of neurological and psychiatric disorders and their relevant pharmacotherapies. Pain and pain management is introduced. This class also introduces endocrine hormones and their signaling mechanisms and how defects in these pathways are treated with pharmacotherapy. The concept of hormone replacement therapy will be introduced. Fundamental information will be introduced in lectures, reinforced during team assignment and assessed during guizzes and exams.

#### PHRM 5224 Pharmacological Basis of Therapeutics IV (3.5 credits)

PHRM 5224 introduces agents used to treat viral, bacterial, fungal, and parasitic diseases as well as cancer. This subject is then extended into the pharmacology and medicinal chemistry of these agents, including the designation of prototype drugs that are used to treat different pathological conditions. The course begins with a section on cancer and cancer treatment, followed by and introduction to nutritional biochemistry. Nutritional guidelines, the relationship between diet and disease, and commonly encountered nutritional diseases are introduced, as are vitamins, minerals and nutritional supplements. Students will be required to develop a food journal and use this as a basis for comparing their diet and exercise patterns with the guidelines proposed by the American Heart Association. Infectious diseases and the drugs to treat them (i.e., antiviral, antibacterial, antifungal, and antiparasitic agents) are also covered. This course also includes an introduction of agents used in the treatment of diseases of the gastrointestinal (GI) system. A review of the pertinent anatomy and physiology of this system is presented, which is then extended into the pharmacology of prototype drugs that are used to treat pathological conditions affecting the GI system. The course concludes with an introduction of toxicology with an emphasis on commonly encountered toxicants and their antidotes.

#### PHRM 5301 Pharmaceutics/Biopharmaceutics (3 credits)

This block introduces the student to physicochemical principles and their applications in order to develop an understanding of the formulation, manufacturing, compounding, and proper use of solid dosage forms (tablets and capsules), liquid dosage forms (homogeneous and disperse systems), topicals, suppositories, aerosols, parenterals, radiopharmaceuticals, novel drug delivery systems, and veterinary products. The course includes a laboratory component in which students are required to compound various dosage forms and perform analytical studies related to them.

## PHRM 5302 Pharmacogenomics and Pharmaceutics (3 credits)

The goal of this block is to prepare future pharmacists to incorporate new technological and scientific developments in genetics/genomics into clinical practice. The course covers basic concepts of pharmacogenomics and molecular biology and how these relate to the development and implementation of pharmacogenomics tests. It explains how genetic variants may influence the pharmacokinetics and pharmacodynamics of medications. In addition, the course discusses important issues in pharmaceutical technology, including the design, formulation, manufacture and delivery of peptide, protein, monoclonal antibodies and oligonucleotide drugs. The course includes a laboratory component in which students are required to compound various dosage forms and perform analytical studies related to them. Pharmaceutical calculations are an independent element of the block; students must accurately determine the quantities of active and inactive ingredients required to prepare a dosage form. The Pharmaceutical Calculations component is required to be satisfactorily passed independent of other course content.

# PHRM 5401 Immunology (3.5 credits)

This course introduces students to the basic concepts of immunology. Topics include regulatory interactions between different components of the immune system and the deleterious effects of aberrant immune processes. Team assignments are an important component in this course and allow students to integrate the knowledge gained during didactic lectures to a pharmacy-related application. The objective of the course is to provide a clear understanding of disease state immunopathology, immunopharmacology and immunotherapeutics.

#### PHRM 5501 Pharmacokinetics (3.5 credits)

PHRM 5501 introduces students to the principles and basic concepts of pharmacokinetics, including compartmental modeling, distribution of drugs, volume of distribution, half-life and clearance concepts. Wherever appropriate, clinically relevant examples are used to emphasize these principles. Information will also include the relevance of pharmacokinetics in drug action and toxicity. Students will be challenged to apply pharmacokinetic principles in clinical situations. The course will demonstrate the use of pharmacokinetic principles and essential equations in predicting plasma drug concentrations as well as changes in plasma drug concentrations that accrue over time. Pharmacokinetic changes will be examined in special populations such as hepatic disease, renal disease, cardiovascular disease, obesity, pediatrics, and geriatrics. Drug interactions and therapeutic drug monitoring is also introduced.

#### PHRM 5601 Overview of Clinical Practice (4 credits)

PHRM 5601 is intended for International Post-Baccalaureate Doctor of Pharmacy students (IPBP students admitted with advanced standing in the PharmD program) whose educational pharmacy experience has been outside of the US. The introductory course provides important information on topics such as the drug distribution system in the US, drug information, literature evaluation, biostatistics, the structure of the US health care system, and health care issues in the USA. The purpose of building the knowledge base of the IPBP students is to allow them to be at par with their peers in the entry-level program. Additionally, introduction to patient counseling skills, the use of the objective, structured clinical examination (OSCE) in evaluating a student's clinical knowledge and skills, immunization certification, and self-study on medical terminology are also offered. The intent is to further strengthen IPBP students' foundation such that their knowledge, skills and attitudes are in concert with the entry-level PharmD program in terms of the overall provision of pharmaceutical care. Prerequisite: Admission to the IPBP program. Required of all IPBP students.

#### PHRM 5998 Introductory Pharmacy Practice Experience 1A (IPPE-1A) (2 credits)

The Fall Term Introductory Pharmacy Practice Experience I (IPPE-1A) introduces students to pharmacy practice in a community setting. Through the IPPE-1a, student pharmacists are expected to master foundational competencies in three domains: Communication, Professionalism and the Practice of Pharmacy. These competencies address the basic skills that prepare the student pharmacist for the Advanced Pharmacy Practice Experiences (APPEs) offered through the pharmacy curriculum. Students will familiarize themselves with the practice of pharmacy in the following areas: laws and regulations pertaining to the licensing and operation of a pharmacy, the licensing and functions of a pharmacist, a pharmacy intern, a pharmacy technician and a pharmacy clerk; Federal and State legend laws; Federal and State narcotic laws; receiving and interpreting prescriptions; processing third party prescriptions; preparing a prescription order; dispensing a prescription order. In addition, students will be practicing patient counseling on non-prescription medications; practicing communication skills with patients and other health care providers, observing management principles and financial reimbursement processes and maintaining a portfolio that reports, comments and reflects on these essential competencies. Requisites: Concurrent or prior enrollment in PHRM 5111.

# PHRM 5999 Introductory Pharmacy Practice Experience 1B (IPPE-1B) (2 credits)

Continuation of PHRM 5998 in the Spring Term. In addition, students are required to satisfactorily complete and submit their Professional Development Activities portfolio and satisfactorily pass the Top 200 Drug Quiz. Prerequisites are prior enrollment in PHRM 5998 and PHRM 5111. Requisites: Concurrent or prior enrollment in PHRM 5112.

#### PHRM 6201 Pharmacy Practice I (4 credits)

PHRM 6201 emphasizes the fundamental skills of evidence-based clinical practice through teaching how to ask answerable clinical questions, how to conduct effective searches for the best evidence, how to critically appraise the evidence for its validity and importance, and how to integrate patient values and circumstances to formulate an evidence-based decision.

# PHRM 6202 Pharmacy Practice II (4 credits)

PHRM 6202 is designed to introduce the students to the management (evaluation, treatment, monitoring, and follow-up) of patients with common kidney and fluids/electrolytes disorders, and common gastrointestinal aliments, i.e., nausea, vomiting, diarrhea and constipation, and anemias. In addition, the block introduces clinical approaches necessary to manage special populations, i.e., pediatrics and geriatrics. Students integrate knowledge, attitudes, and skills in a variety of ways to accomplish the block outcomes. This block contains anatomy, biochemistry, physiology, pharmacology, pharmacokinetics, pharmacotherapy, and clinical evidence as they relate to nephrology and fluid/electrolytes. Accordingly, the overall goal of this block is to enable students to integrate their knowledge of these disciplines in the context of formulating an individualized pharmacotherapeutic plan for a given patient.

#### PHRM 6203 Pharmacy Practice III (4 credits)

The goal of PHRM 6203 is to equip students with essential knowledge, skills, and attitudes required for providing pharmaceutical care to patients with diabetes, hypertension, or dyslipidemia as an entry-level practitioner. This block will build on the foundations, such as anatomy, biochemistry, physiology, pharmacology, and pharmacokinetics, as well as the pharmacotherapeutics of renal disease to introduce the management of diabetes, hypertension and dyslipidemia. Throughout the block, there will be emphasis on utilizing up to date evidence-based clinical data to make patient specific therapeutic decisions for patients. The management of diabetes, hypertension, and dyslipidemia is continuously evolving, and the students will also obtain skills to stay current with the rapidly changing information.

#### PHRM 6204 Pharmacy Practice IV (4 credits)

The emphasis of PHRM 6204 is to enable students to provide pharmaceutical care to patients with cardiovascular disorders as an entry-level practitioner. This block builds on the foundations, such as anatomy, biochemistry, physiology, pharmacology, pharmacokinetics, and pharmacogenomics as well as the pharmacotherapeutics of the basic metabolic syndrome (e.g., hypertension, diabetes, hyperlipidemia) to introduce the management of advanced cardiovascular disorders. Throughout the block there will be emphasis on utilizing up to date evidence-based clinical data to make patient specific therapeutic decisions for patients with cardiovascular disorders. The management of cardiovascular disorders is continuously evolving. As such, the students will also obtain skills to stay current with the rapidly changing cardiovascular therapeutics.

#### PHRM 6205 Pharmacy Practice V (4 credits)

Learning to integrate and apply knowledge, skills, and attitudes to complex patients with multiple disease states and drug-related problems are essential to successful practice as a pharmacist. This course integrates the information from PHRM 6201-6204. The students are required to apply their knowledge and skills to complex, multi-disease patient cases, using interactive methods.

#### PHRM 6206 Practice Pharmacy VI (4 credits)

PHRM 6206 focuses on providing the student with an understanding of the gastrointestinal and hepatobiliary systems. Specific emphasis will be placed on the pharmacologic treatment of various gastrointestinal disorders (i.e., peptic ulcer disease, gastroesophageal reflux disease, inflammatory bowel disease, irritable bowel syndrome, alcoholic liver disease, and acute and chronic liver failure). The course concludes with a unit on nutritional assessment and enteral and parenteral nutrition.

# PHRM 6207 Pharmacy Practice VII (4 credits)

At the end of this course, students should feel confident about counseling patients on the proper use of inhalers and devices, birth control pills and pain medications used to treat a variety of joint disorders. This block is designed for the second year pharmacy student to learn how to solve patient-based pharmacotherapeutic problems in airway diseases, arthritic disorders, and women's health issues. Asthma, COPD, and contraceptive technology, pathophysiology, and treatment are introduced in this course, including national guidelines for diagnosis and treatment. Major concepts of prior block material are reinforced throughout the block.

#### PHRM 6208 Pharmacy Practice VIII (4 credits)

The purpose of this block is to enable students to integrate the pathophysiology, medicinal chemistry, pharmacology and therapeutic knowledge in the management of specific psychiatric disease states (DSM IV-TR). Students will be prepared to give careful attention to accuracy of diagnosis, drug regimen selection, drug pharmacokinetics, appropriate dosing, and monitoring of efficacy and safety associated with pharmacotherapy. The content of the block includes psychiatric diseases and substance abuse. In addition, the block discusses urinary incontinence, benign prostate hypertrophy, and erectile dysfunction. Students are provided the opportunity to practice clinical problem assessment and therapeutic drug monitoring in preparation for providing pharmaceutical care.

## PHRM 6209 Pharmacy Practice IX (4 credits)

PHRM 6209 focuses on the epidemiology, pathophysiology, pharmacology and pharmacotherapy relevant to diseases affecting the central nervous system, including epilepsy, headache, pain and pain management, Parkinson's disease, dementia and stroke. Smoking cessation training and pharmaceutical law are also components of the block. The main goals are to provide students with the fundamental knowledge, skills and attitudes required to provide optimal pharmaceutical care to patients with various neurological disorders.

#### PHRM 6210 Pharmacy Practice X (4 credits)

Learning to integrate and apply knowledge, skills, and attitudes to complex patient cases with multiple disease states and drug-related problems are essential to successful practice as a pharmacist. This course integrates the information from PHRM 6201-6209. Students are required to apply their knowledge and skills to complex, multi-disease patient cases, using interactive methods.

## PHRM 6301 Practice Pharmacy XI (4 credits)

PHRM 6301 provides an integrated approach to microbiology, antimicrobial pharmacology, and infectious disease syndromes. The initial part of the block consists of identification, laboratory diagnosis, epidemiology, and modes of spread of the medically important pathogens. Pharmacology of the major classes of antimicrobial agents will be discussed. The latter part of the block will focus on the microbiology, epidemiology, pathogenesis, pathophysiology, clinical features, preventive and infection control measures associated with major infectious disease syndromes due to common bacteria.

## PHRM 6302 Pharmacy Practice XII (4 credits)

PHRM 6302 is an extension of PHRM 6301 with a focus on special patient populations and opportunistic infections, including fungal and viral infections. Treatment and counseling of patients with HIV/AIDS are presented. The pharmacology of antiviral and antifungal agents and the application in treating infections are discussed. A portion of the block focuses on the basic pharmacology of immunotherapeutic agents in organ transplantation, travel medicine, and pharmacokinetic applications of vancomycin and aminoglycosides.

## PHRM 6303 Pharmacy Practice XIII (4 credits)

Pharm 6303 is designed to introduce students to several common malignancies and complications of both cancer and cancer therapy, which will form a foundation that students can utilize to understand current and evolving strategies in cancer therapy. Throughout the block, students will practice critical thinking and clinical decision-making skills using an interactive case study approach. The contemporary pharmacist's role in hematology and oncology, however, is not limited to the treatment of patients with cancer. As such, students will have the opportunity to explore a number of diverse issues during the block, such as death and dying, cancer prevention, the treatment of non-malignant hematologic disorders and the pharmacist's role in medication error prevention. At the conclusion of the block, students will gain a better understanding not only of cancer therapeutics, but also the potential scope of the pharmacist's practice.

## PHRM 6304 Pharmacy Practice XIV (4 credits)

PHRM 6304 provides students an overview of pharmacy practice management in the community and hospital pharmacy settings. Students are familiarized with the conceptual underpinnings and applications of operations of pharmacy practice management, such as marketing, financial analysis, human resource management, and operations management (purchasing and inventory control). Disease state management is emphasized as an important component of community pharmacy practice management. In the hospital setting, the importance of formulary decisions, medication safety, drug information, utilization review and clinical therapy guidelines and protocols are stressed. Material from this block and the next block are enmeshed for continuity and integration. The course includes a team project and poster presentation on developing a disease state management clinic in a community pharmacy setting.

## PHRM 6305 Pharmacy Practice XV (4 credits)

PHRM 6305 emphasizes the field of Health Outcomes and its applications to pharmacy practice. The ECHO model is used as a framework of measuring program, procedure or product effectiveness. The block covers an introduction to pharmacoeconomics and its techniques (CMA, CBA, CEA, CUA), basic review of the methodology employed in pharmacoeconomic research, a basic review of modeling techniques such as decision models, and application of pharmacoeconomics in formulary and guideline development in the current environment within private (managed care) and public health care policy. Further, various patient-reported outcomes (PROs) such as quality of life, patient satisfaction and adherence are introduced that provide a measure of patient preference in treatment plans and program effectiveness. Evidence based medicine (EBM), biostatistical analyses and research methods are also reviewed as necessary tools to evaluate the clinical and pharmacoeconomic literature as well as to apply these skills in developing monographs for recently approved drugs, which is a course assignment.

#### PHRM 6306 Pharmacy Practice XVI (4 credits)

This block is designed to prepare the student to optimally perform and to successfully complete the APPE rotations. The third installment of pharmacy law is provided so that student pharmacists can practice legally and within societal expectations for a professional pharmacist. Students develop and practice thought processes associated with clinical case discussions by interacting with clinical practice faculty in a similar environment to APPE practice sites. Other activities include an OSCE exercise and journal clubs. Students integrate knowledge, attitudes and skills in a variety of ways to accomplish the block outcomes. The overall goal of this block is to enable students to integrate their knowledge of these disciplines in the context of formulating an individualized pharmacotherapeutic plan for a given patient. This block also includes a high-stakes clinical examination that covers all topics of the curriculum, including therapeutic topics that are weighted similar to what is seen in general practice, and topics likely to be seen when taking the licensure examination. Student must pass the Final Comprehensive Examination administered in this block before they will be allowed to proceed to the APPE.

## PHRM 6999 Introductory Practice Experience 2 (IPPE-2) (4 credits)

Introductory Pharmacy Practice Experience 2 (IPPE-2) introduces students to pharmacy practice in an institutional setting. Student pharmacists are expected to master foundational competencies in three domains: Communication, Professionalism and the Practice of Pharmacy. These competencies address the basic skills that prepare the student pharmacist for the Advanced Pharmacy Practice Experiences (APPEs). As such, they represent an intermediate point in the professional development of a pharmacist. The student pharmacist will be able to behave in a professional and ethical manner, articulate the pharmacist's role as a member of the health care team; communicate accurate and appropriate medical and drug information to a pharmacist, preceptor or other health care professional in a clear and concise manner; and demonstrate adherence to all State and Federal laws and regulations (including those of The Joint Commission and the United States Pharmacopeia) as a student pharmacist in the practice setting. At the completion of IPPE-2, through observation, practice and self-learning, student pharmacists will be able to demonstrate an understanding of different methods of drug distribution and dispensing within an institutional setting, calculations commonly encountered in institutional settings, and the pharmacist's role in medication management (formulary management, cost containment, preventing adverse drug reactions and medication errors, managing drug therapies by protocol).

## PHRM 7110 Advanced Community Practice (CP) (8 credits, CR/NCR)

Supervised advanced patient care experience in a community pharmacy setting under the supervision of a pharmacist preceptor.

### PHRM 7120 Health-Systems Practice (HS) (8 credits, CR/NCR)

Supervised advanced patient care experience in an inpatient pharmacy setting under the supervision of a pharmacist preceptor.

## PHRM 7210 Ambulatory Care (AC) (8 credits, CR/NCR)

Supervised clinical pharmacy experience emphasizing the development of pharmaceutical care skills in an out-patient setting.

## PHRM 7220 General Medicine (GM) (8 credits, CR/NCR)

Supervised clinical pharmacy experience emphasizing the development of pharmaceutical care skills in a hospital or other acute-care institutional setting such as a long term care facility.

## PHRM 7330 Elective clerkship I (8 credits, CR/NCR)

Supervised education in clinical, administrative or research settings that provide additional experience in specialty areas such as pediatrics, geriatrics, infectious disease, drug information, oncology, pharmaceutical research, pharmacy administration, etc.

## PHRM 7340 Elective clerkship II (8 credits, CR/NCR)

Supervised education in clinical, administrative or research settings that provide additional experience in specialty areas such as pediatrics, geriatrics, infectious disease, drug information, oncology, pharmaceutical research, pharmacy administration, etc. Prerequisite: PHRM 7330.

## PHRM 7350 Elective clerkship III (8 credits, CR/NCR)

Supervised education in clinical, administrative or research settings that provide additional experience in specialty areas such as pediatrics, geriatrics, infectious disease, drug information, oncology, pharmaceutical research, pharmacy administration, etc. Prerequisite: PHRM 7340.

## PHRM 8200 Elective Coursework (4 credits, CR/NCR)

Advanced level coursework in an area of special interest beyond that presented as part of the previous didactic coursework of the Doctor of Pharmacy Curriculum. Repeatable to a maximum of 16 credits.

## PHRM 8400 Advanced Electives (20 credits, CR/NCR)

Advanced clinical educational experiences in an area of special interest beyond that provided as part of the previous clinical coursework of the Doctor of Pharmacy curriculum. Student pharmacists chose from one of three tracks to help them focus on their area(s) of interest.

The Health-Systems (clinical/research) Practitioner Track is intended for student pharmacists interested in furthering their clinical training in settings such as hospital, ambulatory care, home infusion, skilled nursing facilities and other non-community practice sites. This includes a dedicated project and poster presentation of their work which may include research, medication use evaluations, staff education guidelines, cost-effectiveness analyses, implementation of pre-printed order sets, etc. Student Pharmacists should expect to be on campus for progress reports and the PIC Week.

The Community Pharmacy Track is intended for student pharmacists who plan to be clinical staff pharmacists at chains or independent pharmacies. The experience will focus on the provision of direct patient care services (i.e. drug therapy management, immunization, MTM collaborative practice) that they will be qualified to provide as a practicing clinical pharmacist. This option includes a formal poster presentation on a project assigned/accepted by their preceptor. This experience may also include off-site conferences and/or case studies as well as completion of the Community Pharmacy and Practice Self-Assessment from the California State Board of Pharmacy.

The Community Pharmacy Entrepreneur Independent Ownership Track is intended for student pharmacists who intend to be independent community pharmacists with the goal of owning their own pharmacy. The course includes the development of a business plan and a formal presentation on the development of the business plan. This experience includes weekly on-campus meetings/lectures, and

may also include off-site conferences and/or case studies as well as completion of the Community Pharmacy and Practice Self-Assessment from the California State Board of Pharmacy.

# PHRM 8800 Other Electives (20 credits, CR/NCR)

Individualized, supervised educational experiences in an area of special interest related to pharmacy practice and/or pharmaceutical sciences beyond that provided by previous coursework in the Doctor of Pharmacy curriculum and not eligible for credit within PHRM 8200 or 8400.

## **Honors and Awards**

The following awards for PharmD students are presented annually on Honors Day in April.

Albertsons/Sav-on Scholarship

Arthur Madorsky, MD Memorial Scholarship Award

Dean's Letter for Service Recognition

Dean's List

Debbie Robinson Memorial Scholarship

East-West Scholarship

Good Neighbor Pharmacy/Institute for Community Pharmacy Scholarship

Hendricks Pharmacy Scholarship

Linda Fox Memorial Endowment Fund Award

President's Society Award

South Bay Pharmacists Association Scholarship

The J.M. Long Foundation Scholarship

The Joseph and Dorothy Gendron Journalism Award

**Tribute to Caring Scholarship** 

Walgreens Scholarship

Wal-Mart Scholarship

Who's Who Among Students in American Universities and Colleges Nominations

The following awards are presented annually to graduates at the Commencement Dinner Dance:

APhA-ASP Outstanding Graduate Award

Dean's Award

# **Academic Calendar**

COP academic calendar is subject to change. \*Students in clinical rotations observe their preceptor's hours, which may include working on federal holidays.

#### Fall 2013

Monday, May 20, 2013
Fall Semester Rotations Begin
(PharmD Year 4, IPBP Year 3)

Thursday, July 4, 2013
Independence Day – No Classes\*

<u>Tuesday, July 8, 2013</u> Fall Semester Begins (IPBP Year 1)

<u>August 5 – August 9, 2013</u> Orientation Week (PharmD Year 1)

Saturday, August 10, 2013
Convocation/White Coat Ceremony

Monday, August 12, 2013
Fall Classes Begin
(PharmD Years 1-3, IPBP Year 2)

Monday, September 2, 2013 Labor Day – No Classes\*

Monday, October 14, 2013

Columbus Day – No Classes\*

Wednesday, November 27, 2013
Thanksgiving Recess Begins @ 5:00 p.m.\*

Monday, December 2, 2013 Classes Resume

Friday, December 20, 2013

End of Fall Semester Classes/Rotations
(PharmD Years 1-4, IPBP Years 1-3)

Monday, December 23, 2013
Winter Recess Begins
(PharmD Years 1-4, IPBP Years 1-3)

## Spring 2014

Monday, January 6, 2014
Spring Classes Begin
(PharmD Years 1-3, IPBP Years 1-2)

Monday, January 20, 2014

Martin Luther King Day – No Classes\*

Spring Rotations Begin

(PharmD Year 4, IPBP Year 3)

Monday, February 17, 2014

President's Day – No Classes\*

Thursday, April 3, 2014 Honors Day

Wednesday, May 14, 2014
End of Spring Semester Classes (Year 4)

Wednesday-Friday, May 14-16, 2014 Commencement

Friday, May 16, 2014

End of Spring Semester Classes
(PharmD Year 3, IPBP Year 2)

Friday, May 23, 2014
End of Spring Semester Classes
(PharmD Year 1)

Monday, May 26, 2014 Memorial Day – No Classes \*

Thursday, July 3, 2014
End of Spring Semester Classes
(IPBP Year 1)

Friday, August 8, 2014
End of Spring Semester Classes
(PharmD Year 2)

# **College of Podiatric Medicine**

Doctor of Podiatric Medicine Program

## **Accreditation**

Western University College of Podiatric Medicine was accredited by the Council on Podiatric Medical Education (CPME) in October 2012 in accordance with attainment of the educational standards and requirements set out by that agency. This status was achieved once the program of podiatric medicine was fully activated with students enrolled in all four years of the educational curriculum. Accreditation by the CPME is considered the best statement of good educational practice in the field of podiatric medicine.

# The Podiatric Medicine Philosophy

Podiatric medicine is both a profession as well as a medical specialty. Students are prepared to attain the necessary competencies for entry level residency training through successful completion of a solid, thoughtfully orchestrated curriculum. Integration of the basic and clinical sciences allows students to form a foundation for future clinical practice. Patient care management protocols follow evidence-based medical principles that have been taught in the pre-clinical years. The development of critical thinking skills is emphasized at each level of the educational process, with research methodology woven throughout.

As the healthcare system in the United States continues to evolve, graduates of colleges of podiatric medicine must be able to assume a vital role as part of the medical health care team. To do so successfully, the scope of education at the professional level must be broad, comprehensive in content and include all of the resources found in any medical college program – both didactically and clinically.

We believe in promoting a culture of excellence in the advancement of research and biomedical sciences and in the promotion of the health and welfare of the community at large by utilizing a comprehensive approach to the management of the disease processes that adversely affect the lower extremities.

Finally, we believe that we must serve as advocates for patients around the world who deserve better podiatric education and care. We believe that services that are rendered to patients served by the college, its students and graduates, must be patient-focused, culturally and linguistically and must include the interdisciplinary care offered by other specialists in the health science community. It is our belief that these actions are vital to the success of the College of Podiatric Medicine.

# Mission

The Mission of the College of Podiatric Medicine is academic excellence achieved through an innovative curriculum, interprofessional education and research that trains podiatric physicians and surgeons to integrate into the healthcare system as compassionate specialists for patients with lower extremity conditions. The Mission also supports integration with the university health science community and provides for and creates a culture of lifelong learning for students and other community health professionals through an active continuing education program.

## Core Competencies in Support of The College's Mission

- Academic excellence
- Innovative training practices
- Interprofessional education
- Compassion as healthcare providers
- Healthcare team integration

Additionally the College aspires to excellence in producing students in:

- Medical knowledge
- Podiatric medical knowledge
- Patient-focused quality care
- Research
- Inter-Professional communication
- Evidence-Based Learning
- Systems based practice
- Lifelong learning

## Strategic Plan in Support of the Mission and Core Competencies

As part of the University Strategic Plan, in January of 2005, the President and the University's senior management team engaged the University's Board of Trustees, faculty, and many members of the campus community in the creation of a long term strategic plan. The new plan was to set the stage for the direction the University would take to meet the current and future healthcare needs of the community at large. The outcome of the comprehensive strategic planning process resulted in approval by the Board of Trustees to investigate the possibility of the addition of four new colleges: Podiatric Medicine, Dental Medicine, Optometry and Biomedical Studies. Beginning in November 2011, the University convened a strategic plan task force and began the process of developing a new five-year strategic plan. The plan outlines seven goals addressing the areas of Education, Health Care, Research, Interprofessional Education, Financial, Internal Fitness, and Community Engagement.

The College of Podiatric Medicine developed a comprehensive, five-year strategic plan in 2008, which has been re-evaluated and revised annually since its publication in 2009. The most recent update was done in early 2012 with the next update pending a finalized WesternU plan to ensure CPM is aligned with the goals and objectives of Western University. The strategic plan clearly emphasizes the core functions of the College. The first is obtaining full accreditation, which was achieved in 2012. A main focus is continued innovation of the educational programs (pre-clinical and clinical curriculum), but in order to achieve excellence in curriculum, two additional functions are necessary. CPM partners with Western University of Health Sciences College of Osteopathic Medicine of the Pacific (COMP) to provide an integrated comprehensive pre-clinical curriculum. The goal is to facilitate quality educational enrichment for students of the College of Podiatric Medicine producing physicians and surgeons that will practice the art and science of the medical specialty of podiatric medicine and surgery. CPM also continues developing Articulation Agreements with the State of California University Systems and other colleges and universities in Southern California on partnerships designed to offer an educational tract for promising talented students that desire an opportunity to attain early admission to the CPM. This program will be designed to fast-track these individuals through a coordinated effort between partnering institutions, helping address aggressive enrollment management, another area of the strategic plan. Other educational programs CPM strives to create and maintain with a high level of achievement are podiatric medical and surgical residencies and continuing medical education for practicing podiatric physicians.

The CPM strategic plan also focuses efforts on the promotion and investment in biomedical research through active research projects and the development of research faculty and future podiatric medical educators for the 21<sup>st</sup> century. In addition, considerable effort has been invested in the initiation and implementation of a practice plan for the clinical faculty providing patient care at the Western University of Health Sciences Patient Care Center (PCC) and our other clinical facilities. CPM has developed strong affiliation agreements with partnering academic health science centers, Veterans Administration Medical Centers, and Community Hospitals and Medical Centers that serve as the foundation for the clinical training for CPM students. The PCC facility at Western University of Health Sciences is a comprehensive academic and clinical complex of nearly 250,000 square feet with integrated care amongst the seven centers housed at the PCC. The Health Education Center (HEC) provides over fifty breakout rooms for small group discussion and study with an entire floor of the HEC building dedicated to additional research laboratories.

# **Personal Competencies for Admission and Matriculation**

A candidate for admission to the Doctor of Podiatric Medicine Program must have the use of certain sensory and motor functions, or reasonable accommodations, to permit him/her to carry out the activities described in the sections that follow. Graduation from the program signifies that the individual is prepared for entry-level podiatric medicine and surgery postgraduate training programs. It follows that graduates must have the knowledge and skills needed to function in a broad variety of clinical situations (medical and surgical) and to render comprehensive general medical and surgical as well as podiatric medical and surgical patient care. The podiatric medical student must be able to consistently and accurately integrate all information received by all available means necessary. Also, he/she must have the intellectual ability to learn, integrate, analyze, and synthesize data. A candidate for the DPM degree must exhibit abilities and skills in the five areas identified below. When appropriate technological assistance is provided in the program, it may be permitted only as a reasonable accommodation. Under all circumstances, a candidate should be able to perform the following in a reasonably independent manner:

#### Observation

Candidates and students must have sufficient vision to be able to observe demonstrations, experiments, and microscopic laboratory exercises. They must be able to observe a patient accurately at a distance and close at hand.

## Communication

Candidates and students must be able to communicate with patients and colleagues. They should be able to hear with or without reasonable accommodations. Candidates and students must be able to read English.

## Motor

Candidates and students should have sufficient motor functions to enable one to learn to execute movements (with or without reasonable accommodations) which are reasonably required to provide general care and emergency treatment of patients (i.e., palpation, auscultation, percussion, and other diagnostic and therapeutic modalities). Examples of emergency treatment reasonably required of podiatric physicians include: cardiopulmonary resuscitation, administration of intravenous medication, the application of pressure to stop bleeding, the opening of obstructed airways, the suturing of simple

wounds, close manipulation of lower extremity fractures, and intra-operative (open reduction with internal or external fixation-ORIF/OREF) of fractures. These actions require coordination of both gross and fine muscular movements, equilibrium, and functional use of the senses of touch and vision.

#### Intellectual, Conceptual, Integrative, and Quantitative Abilities

Students must demonstrate problem solving skills, which involve intellectual, conceptual, integrative and quantitative abilities. These abilities include measurement, calculation, reasoning, analysis, and synthesis. Problem solving, the critical intellectual skill demanded of a podiatric physician, requires all of these intellectual abilities. In addition, candidates and students should be able to comprehend three-dimensional relationships and understand the spatial relationships of structures.

#### **Behavioral and Social Attributes**

Candidates and students must possess the emotional health required for full utilization of the intellectual abilities, the exercise of good judgment, the prompt completion of all responsibilities attendant to the assessment and care of patients, and the development of mature, sensitive, and effective relationships with patients. Candidates and students must be able to tolerate physically taxing workloads, adapt to changing environments, display flexibility, and learn to function in the face of uncertainties inherent in the clinical problems of many patients. Compassion, integrity, concern for others, interpersonal skills, interest, and motivation are all personal qualities to be assessed during the admissions and educational processes.

The College of Podiatric Medicine and Doctor of Podiatric Medicine Degree (DPM) program, along with all other programs at Western University of Health Sciences, shares a commitment to develop creative ways of opening the DPM curriculum to competitive, qualified individuals with disabilities. In doing so, however, the DPM degree program must maintain the integrity of its curriculum and preserve those elements deemed essential to educating candidates to become effective podiatric physicians.

## **Admissions Policies and Procedures**

Western University/CPM accepts applications from all qualified candidates. While grades and Medical College Admission Test (MCAT) scores are important in selecting candidates for admission and may suggest future academic success, the Admissions Committee recognizes that these statistics, by themselves, do not guarantee later success as a physician. The CPM will take into consideration the non-academic criterion that is also important in making the selection for candidates to the CPM. Western University/CPM seeks to admit a well-diversified and balanced student population and consider factors such as a well-rounded background, prior work experiences, college and health care professional's letters of recommendation, interest in and knowledge of podiatric medicine, and each candidate's demonstrated professional promise. To ascertain these factors, an on-campus or pre-arranged regional interview is required prior to any action being taken in regards to a candidate's application. The College may exercise its discretion to rely upon additional considerations as needed on an individualized basis.

### **Entrance Requirements**

Candidates for admission to Western University/CPM must meet these requirements at the time of application:

1. Completion of ninety semester hours, or three-fourths of the credits required for a baccalaureate degree, from a regionally accredited college or university.

- 2. Completion of one academic year (or its equivalent) in English, biology, physics, inorganic chemistry and organic chemistry. All prerequisite courses must be completed with a grade of 'C' or better prior to enrollment.
- 3. Other course recommendations for prospective candidates include one semester of human anatomy, microbiology, histology, zoology, behavioral science, biochemistry and/or genetics is highly recommended.
- 4. Applicants must submit their Medical College Admission Test (MCAT) scores.

Information concerning this test may be obtained from the pre-professional advisor at one's college or directly from the MCAT Program Office. Applicants are encouraged to take the examination in the spring of their junior year. To be considered for admission, the MCAT examination must be taken no later than June of the entering year; however, an earlier test date is recommended.

#### **AACPMAS**

WesternU CPM, as well as all other colleges of podiatric medicine, participates in the profession's centralized application service through the American Association of Colleges of Podiatric Medicine Application Service. AACPM is located at 15850 Crabbs Branch Way, Suite 320, Rockville, Maryland, 20855. Individuals interested in applying to Western University/CPM should write directly to AACPMAS for information and application materials or obtain application request cards from the Western University/CPM Admissions Office. At this time, applicants should also make arrangements to have official transcripts of all prior undergraduate and graduate course work forwarded to AACPMAS.

Upon receipt of the initial application and transcript(s), AACPMAS will collate materials, and transmit standardized information to the applicant and to those podiatric medical colleges that the applicant designates. AACPMAS takes no part in the evaluation or selection of applicants. After Western U CPM conducts a review of the AACPMAS application, and if a minimum of 90 semester hours has been completed and the applicant has otherwise been deemed eligible, the Admissions Committee may request additional information from the applicant for further consideration.

Additional information will include the following:

- An evaluation of the applicant's work and accomplishments submitted by the Pre-Health Professions Committee of the applicant's college. If the college has no such committee, the student may submit evaluations from two science professors.
- A letter of recommendation from a podiatric physician.

Any request for supplementary information must be returned within 30 days to the Director of Admissions at:

Western University of Health Sciences College of Podiatric Medicine 309 E. Second Street Pomona, California 91766-1854 Once the candidate's/applicant's file is complete, the Admissions Committee reviews it to determine whether the candidate/applicant will be granted an interview. Each candidate will be contacted by the Chair of the Admissions Committee. If a candidate is deemed promising, he or she is invited to the campus at the candidate's expense. The candidate should plan to spend a full day on campus for orientation and the interview. Orientation consists of information on the curriculum, financial aid, student services, and clinical rotations; lunch with a Western University/CPM student and possibly students from other disciplines of the university. A personal interview will take place with members of the Admissions Committee and/or faculty members from both basic and clinical sciences; and a tour of the facilities. The Admissions Committee evaluates the candidate's application and interview for acceptance to CPM. The candidate is then notified within 3 weeks of the interview regarding the status of his or her application.

Candidates accepted to WesternU CPM must have a complete set of official transcripts mailed to the Admissions Office no later than July 1<sup>st</sup>. AACPMAS retains the original set of transcripts it receives from applicants.

Candidates accepted at Western University of Health Sciences must pay a non-refundable acceptance deposit of \$1,000. The due date for this deposit is provided in the offer of acceptance letter. Upon matriculation the entire \$1,000 is applied toward the total tuition owed. For applicants who are granted deferred admission to the DPM program an additional non-refundable \$1,000 deposit is required the following spring to hold a seat in the next year's class. If an applicant fails to register, the \$1,000 deposit is forfeited.

### **Applicants with Foreign Coursework**

Applicants who wish to use coursework completed outside the United States must submit their transcripts for evaluation to a <u>Western University of Health Sciences Approved Service</u> at the candidate's expense. A course-by-course evaluation is required and all coursework must be designated as undergraduate, graduate or professional. Western University only honors evaluations from one of the above services. The official evaluation must be submitted to AACPMAS.

## **International Students**

International students and any other applicants who are not U.S. citizens and who are living in the U.S. should be prepared to provide proof of legal U.S. residency at the time of interview. Proof of legal U.S. residency is required prior to any offer of acceptance. For more detailed information, please visit our web page for <u>International Students</u>.

### **Transfers from Other Schools**

WesternU CPM does not at this time accept transfer candidates to advance standing.

## Registration

All DPM students are required to register by the registration deadlines specified by the University Registrar. Registration dates are posted at: <a href="http://www.westernu.edu/registrar-online-information">http://www.westernu.edu/registrar-online-information</a>. Failure to register by the deadline may be grounds for administrative withdrawal. All students registering after the posted deadline will be assessed a \$30.00 per business day late fee.

Full tuition and fees and all prior debts must be paid in full on or by posted deadlines each academic year. Matriculation is subject to the satisfactory completion of all academic requirements and payment of all outstanding debts to the University. The receipt of a final transcript(s) from all colleges/universities

attended and a physical examination with documentation of required immunizations prior to registration are additional requirements for incoming students. Also, all students must show proof of current health insurance coverage by the deadlines provided by the University Registrar. This coverage must be maintained or in effect throughout the academic year. If there is no proof of current coverage, students will be automatically enrolled in the school sponsored insurance plan.

Attendance at Orientation is mandatory for all incoming first-year students.

## **Full-time/Part-Time Status**

All students enrolled in at least one class/rotation are considered full-time students.

## **Time Limits**

The Doctor of Podiatric Medicine program is designed to be completed in four (4) years of full-time study. The requirements for the degree must be fulfilled within 6 years from the date of matriculation to the program.

## **Additional DPM Program Education Requirements**

All students are required to have a laptop computer with internet access; specifications are available on <a href="http://www.westernu.edu/computing-students">http://www.westernu.edu/computing-students</a>.

### **Tuition and Fees**

By action of the Board of Trustees, DPM tuition and fees for the 2013-2014 academic year (subject to change) are as follows:

\$31,605.00	Annual Tuition (DPM Class of 2014)
\$33,055.00	Annual Tuition (DPM Classes of 2015, 2016, 2017)
\$40.00	Student Body Fee (DPM Classes of 2016, 2017)
\$20.00	Student Body Fee (DPM Classes of 2014, 2015)

## **Other Fees and Expenses**

\$600.00	Medical Equipment
\$800.00	Required and Recommended Texts (Fall)
\$300.00	Required and Recommended Texts (Spring)
\$100.00	Audience Response System Device
\$50.00	APMSA Member Fee
\$45.00	Anatomy Supplies (Gloves, Scrub, Dissection Kit)
\$60.00	Criminal Background Investigation Fee (Approximate)
\$40.00	Drug Screening Fee (Approximate)
\$350.00	Graduation Fee
\$470.00	Annual Parking Permit (Auto)
\$25.00	Parking Permit Replacement Fee
\$30.00	Late Registration Fee (Per Business Day)
\$10.00	Official Transcript (Each)
\$21.00	Rush Transcript, First Class Mail (Each)
\$25.00	Rush Transcript, Federal Express (Each)
\$10.00	Student ID Replacement Fee
TBD	Breakage Fee (Replacement Cost)
\$40.00	Locker Key Replacement Charge

#### **National Board Fees**

The College requires students to take and pass both sections of the American Podiatric Medical Licensing Examination (APMLE), formerly known as the National Board of Podiatric Medical Examiners (APLME), Part 1 and Part 2 as one of the requirements for graduation. These fees are subject to change by APMLE and are updated regularly. These fees can be found online at <a href="http://apmle.org">http://apmle.org</a>.

#### **Clinical Rotations Expenses**

During the third and fourth years, some students may elect to do some clinical rotations away from the Pomona area, which is a self-imposed expense. In addition, students are required to return to campus several times during the clinical years for various educational experiences, conferences, etc. Any travel, food, housing or other expenses incurred by these activities or plans are the student's responsibility. Some rotations done at or through other institutions (e.g., certain hospitals or other medical schools) may involve application fees and/or other charges. Such rotations are elective; consequently these fees are the student's responsibility.

#### **Academic Policies**

#### **Academic Advisement**

Students will be assigned a faculty advisor upon matriculation. The academic advisor-student relationship can become one of the most valuable aspects of medical education. It provides an opportunity to develop sustained individual contacts between faculty and students on both academic and personal levels. If either the student or the instructor does not find the relationship helpful, either is free to seek a change. Such changes are arranged through the Assistant Dean of Student Affairs, in consultation with the Executive Associate Dean for Academic Affairs.

## **Exemption from Individual Preclinical Curriculum Course**

Students with advanced work or degrees in a particular subject may formally petition the professor and the Dean of the College Podiatric of Medicine for credit for an individual preclinical curriculum course. The petition must include the reasons for the request and all necessary documentation and must be submitted by the end of the first week of class. The student must comply with the attendance policy until notification that exemption has been granted. The professor(s), before recommending exemption, will require acceptable performance on an examination. The professor(s), in consultation with the Dean of the College of Podiatric Medicine, may suggest other alternative or additional criteria for determining exemption.

## **Attendance and Absences**

Attendance is required at all scheduled instructional periods. Absence from instructional periods for any reason does not relieve the student from responsibility for the material covered during the instructional period. Frequent absences will be viewed as violations of the Standards of Academic and Professional Conduct. Students are expected to participate fully in all classroom and laboratory activities and in clinical education. Monitoring of the attendance policy for on-campus courses will be the responsibility of the Assistant Dean of Student Affairs.

Students are required to be present for all scheduled examinations and cannot begin an examination more than 15 minutes after the scheduled time without permission from the Office of Executive Associate Dean for Academic Affairs. For a student to be considered to take any examination at other than the scheduled time, the student must have prior approval by the Office of Executive Associate Dean for Academic Affairs. A student, who cannot attend an exam due to unforeseen circumstances,

including illness, should phone or e-mail the Assistant Dean of Student Affairs and Course Instructor/System Coordinator as soon as possible prior to administration of the exam. A written explanation of the absence (including documentation on physician letterhead, in the case of illness, beginning with the date of absence) must be provided to the Office of Executive Associate Dean for Academic Affairs and the Course Instructor/System Coordinator the next day the student is on campus.

If a student misses an examination, the Office of Executive Associate Dean for Academic Affairs, in consultation with the Course Instructor/System Coordinator, will determine whether the absence is excused or unexcused. If the absence is excused, the student will be permitted to take a make-up examination, the nature and time of which will be at the discretion of the Course Instructor/System Coordinator; the student will receive full credit for the makeup examination. If the absence is unexcused (e.g., failure to show up for a written or practical examination without a valid excuse as determined by the Office of Executive Associate Dean for Academic Affairs and the Course Instructor/System Coordinator), this is grounds for summary failure (a score of zero) for that examination. In the case of an unexcused absence, the student who fails the examination will be referred to the Student Conduct and Performance Committee for recommendations regarding remediation or dismissal. In this case, if the Student Conduct and Performance Committee recommend that the student take a remediation examination, the maximum score that the student can achieve on the examination will be 70%. If the student fails to take either a make-up or a remediation examination at the time designated by the Course Instructor/System Coordinator, without a valid excuse as delineated above, this will be grounds for summary failure (a score of zero) of that examination and referral to the Student Conduct and Performance Committee, as described below. In such a case, a written report will be sent by the Course Instructor/System Coordinator to the Office of Executive Associate Dean for Academic Affairs, with a copy sent to the Chair of the Student Conduct and Performance Committee and the Dean of the College of Podiatric Medicine for appropriate disposition. Policies for attendance and absences during the third and fourth years are published in the CPM Clinical Rotations Manual.

## **Leave of Absence**

A student may request a Leave of Absence with the occurrence of a medical problem, serious personal problems, or health related issues. Students must be in good academic standing to be eligible to apply for a Leave of Absence.

Students requesting a Leave of Absence must apply in writing to the Dean of CPM or his/her designee. In the event of a medical problem, the request must be accompanied by a letter from a physician describing the nature of the disability for which the leave is requested and the estimated length of time needed for recovery.

After consultation with the student, the Dean of CPM will decide whether or not the leave is to be granted and the conditions under which the student may return to school. A student requesting a leave of absence during or at the end of the academic term must go through the procedure outlined in the Western University Catalogue.

Provided the leave of absence is approved, the official date of the leave of absence will be the original date of receipt of the student's request and any tuition charged will be in accordance with the institution's refund policy.

Leaves of absence requested for a full academic year will be for one year only with expected reinstatement at registration for the following year. Leaves of absence requested after registration

for any given academic year will be granted for a period not to exceed the number of months remaining until the registration date for the next academic year. During the leave of absence, students are entitled to library privileges with the exception of checking out books, use of student lounges and participation in student clubs. It is required that the student maintains a health insurance plan throughout the period of the leave.

A student, who is granted a leave of absence for one year or more, must submit a letter of intent to re-enroll to the Dean of CPM at least three months prior to the requested date of return. The letter must also be accompanied by a \$500 tuition deposit. It is the student's responsibility to keep the Registrar informed of any change of address while on a leave of absence.

If the student has not paid 100% of the tuition during the year in which the leave is granted, the balance of the tuition plus any increase of tuition or fees will be payable in the next year of attendance. All appropriate tuition and mandatory fees are due prior to graduation. Leaves of absence will be limited to a maximum of 2 years.

The term and conditions of any leave will be determined by the Dean of CPM. In addition, changes in the curriculum or in other university or academic program policies may occur which could have an impact on academic requirements affecting a student's matriculation upon return from a Leave of Absence. Every reasonable attempt will be made to minimize the impact of such changes, and if known at the time that a leave is granted, the student will be informed of these revised requirements as part of the terms and conditions contained in the letter granting a leave of absence. Should these changes occur after a leave has been granted, the student on leave will be informed of these changes and how they may affect the student's future matriculation in writing from the office of the Dean of CPM.

#### **National Boards (Licensing Examinations)**

All students must take and pass APMLE Part I and II prior to graduation. The College of Podiatric Medicine has established the following policies and procedures:

- All students must take Part 1 of the APMLE at the first available sitting following the conclusion
  of final examination of the spring semester of the 2<sup>nd</sup> year. Failure to meet this deadline will
  result in the student being referred to the Student Conduct and Performance Committee and
  may result in probation. Part 1 may be taken at an APMLE approved testing center of the
  student's choice.
- Students may proceed to the third-year core clerkships as soon as they have taken APMLE Part 1 examination.
- Failure to pass APMLE Part 1 will result in the student being referred to the Student Conduct and Performance Committee and will result in the student being placed on academic probation for the remainder of the semester. The Student Conduct and Performance Committee may recommend that a student be removed from rotations and placed on academic suspension until they successfully pass APMLE Part 1. CPM will permit two attempts on Part 1, and a third attempt may be allowed in special circumstances, with approval by the Student Conduct and Performance Committee and the Dean of Podiatric Medicine.

- Students who fail the APMLE exam a second time will be removed from rotations and placed on
  academic probation and academic suspension. The student will not be allowed to continue with
  any third year clinical clerkships and may not re-enter the third year until notification of a
  passing score has been received by the Executive Associate Dean for Academic Affairs or Dean
  of Podiatric Medicine, following the third attempt to complete this requirement.
- Students who fail Part 1 APMLE on all three attempts will be subject to dismissal from the College of Podiatric Medicine.
- The APMLE Part 2 may be taken at an APMLE-approved testing center of the student's choice.
- The Office of Clinical Education will allow one business day away from the start of fourth year clerkships for a student to take the APLME Part 2.
- The Office of Clinical Education will notify each student's clerkship site of his/her "approved" absence to take the APMLE Part 2 examination after the student notifies the Office of Clinical Education of the date of his or her examination.
- Students may not notify the clerkship directly. Additional time away to take the AMPLE Part 2 will not be routinely authorized.
- All fourth year students are required to pass the APMLE Part 2 Exam.
- Failure to pass the APMLE Part 2 examination will result in the student being referred to the Student Conduct and Performance Committee.
- The Student Conduct and Performance Committee may recommend that a student be removed from rotations and placed on academic probation and suspension until they successfully pass AMPLE Part 2.
- Those who do not pass APMLE part 2 on the first attempt must successfully repeat the examination at the next possible iteration allowable by the APMLE.
- CPM permits two attempts on APMLE Part 2, and a third attempt may be allowed in special circumstances, with approval by the Student Conduct and Performance Committee and the Executive Associate Dean for Academic Affairs or Dean of Podiatric Medicine.
- Students failing APMLE Part 2 for a second time must notify their residency program of their failure.
- Students studying for a third attempt will be removed from rotations and placed on academic probation and suspension. They may not re-enter the fourth year until notification of a passing score has been received by the Executive Associate Dean of the College of Podiatric Medicine.
- Students who fail APMLE Part 2 on all three attempts will be subject to dismissal from the College of Podiatric Medicine.

#### **Examination Policies**

For most examinations, students may be given assigned seats and are expected to place themselves accordingly, unless prior arrangements have been made with the appropriate coordinator or instructor. Students will rigorously avoid any situation that lends either the opportunity to give, or the appearance of giving, information that can benefit another student's examination score. Students are not to discuss examination questions with other students during any examination that is administered in segments or over extended time periods. During scheduled examination hours, students will not be allowed to leave the exam room except in an emergency and as excused by the proctor. If a student is excused to leave the room temporarily the proctor will hold the student's examinations until his/her return. Once a student finishes an exam and leaves the examination room he or she will not be permitted to reenter the room until the exam is declared over. All students' belongings, such as notebooks, calculators, headwear, and headsets, will be kept in front of the room. No food or drink will be allowed during examinations. No student questions related to the exam or its content will be answered during the examination period. Cellular telephones and their accompanying technology must be turned completely off for the duration of all exams and not used for any reason. Students are permitted to point out typographical errors in the examination notebook.

#### **Violations of Examination Policies**

Cheating, or actions that give the appearance of cheating, will not be tolerated. It is the responsibility of the student to rigorously avoid any situation that could unfairly increase their personal examination score or change (increase or decrease) any other student's examination score.

Students are not to discuss examination questions with other students during any examination, whether it is administered all at once, in segments, or over extended time periods. Additionally, students are not allowed to discuss the examination with those who have not yet taken the examination.

If an examination proctor observes a student behaving in a way that causes concern for cheating, the proctor will immediately refer the situation to the SPC following the exam for the SPC's further investigation. If a student observes a suspected violation during an examination, he or she should report this to the proctor and course coordinator rather than personally attempt an intervention. The proctor will determine what action should be taken. The student observer must submit a written account of the incident witnessed to the Dean of CPM before the end of the day on which the incident occurred.

If the Student Performance and Conduct Committee (SPC) determines that an irregularity has occurred, the Committee's recommendation to the Dean of CPM may include, but is not limited to (1) dismissal from WesternU CPM, (2) suspension from the program for a designated period of time, (3) academic probation for a designated period of time, and/or (4) repeating the associated course or system in its entirety during the next academic year. If there is insufficient evidence of cheating, the SPC will recommend to the Dean that no further action be taken.

The Dean may make an executive decision on the matter or convene the SPC to investigate the allegation. The accused student may also request that the SPC to investigate the matter.

The College employs the use of "clicker" for daily quizzes that are given in many of the pre-clinical courses. Each student is bound by the Honor Code when using these devices to record answers on all quizzes. Any sharing of responses among neighboring classmates will be considered intellectual

dishonesty (cheating), which will be referred to the Student Performance and Conduct Committee for resolution and recommendation to the College administration and Dean of the College of Podiatric Medicine.

#### **Student Conduct and Performance Committee**

The Student Conduct and Performance Committee is comprised of three faculty members with the following ex officio members: the Assistant Dean of Student Affairs, the Assistant Dean for Preclinical Education, the Assistant Dean of Clinical Affairs. The Student Conduct and Performance Committee shall review the performance and comprehensive evidences of progress of students who are pursuing the DPM degree. Particular attention will be given to students in academic difficulty as their grades are made available to the Committee by the Registrar or Dean of Western University/CPM. For purposes of clarification, "performance" is defined as those activities of a behavioral-conduct or academic nature that negatively affect or impair the continued ability of a Western University/CPM student to successfully matriculate within the College of Podiatric Medicine. The office of the Dean and Executive Associate Dean for Academic Affairs may provide additional input to this process.

After reviewing a student's performance records, the Student Conduct and Performance Committee may recommend to the Dean any of the following courses of action: promotion, probation, remediation, dismissal from the College, academic or conduct suspension, educational assessment and other appropriate recommendations. It may also recommend that no action be taken. The Student Conduct and Performance Committee also has the responsibility of recommending to the Faculty, as a whole, the awarding of the degree of Doctor of Podiatric Medicine to all students who satisfactorily complete all requirements for graduation as stated in the University Catalog.

All recommendations of the Student Performance Committee shall be in writing to the Dean, who will make the information available to the affected student. The Committee Chair will notify the students in cases of remediation or probation. The Executive Associate Dean for Academic Affairs will initiate leaves of absences. The Dean will notify the students in cases of suspension, dismissal or repeating of the academic year.

### **Violations of the Standards of Professional Conduct**

Western University and the College of Podiatric Medicine expect all students to adhere to the standards of professional conduct as published in the University Catalogue. Any allegation that a student has violated these standards may be referred to the Student Performance and Conduct Committee for investigation. Specific details about the hearing process are provided in the General Academic Policies and Procedures subsection of the Western University Catalogue.

#### **Promotion**

Promotion is defined as academic and professional progression from one academic year or program phase to the next. The Student Conduct and Performance Committee will recommend students to the Dean of Podiatric Medicine for promotion. The Student Conduct and Performance Committee may not recommend a student for progression from one academic year to the next with an outstanding grade of "I," "U", "M", or "NCR" in a required course, final numeric score of less than 70%, or a yearly cumulative numeric score of less than 70%. An essential element of the academic program is professionalism. Professionalism will be emphasized throughout the curriculum and is a stand-alone element in determining academic advancement and achievement. When considering a student for promotion,

ethical, professional, and personal conduct will also be taken into consideration (see **Probation** in University Academic Policies section).

A student will be promoted provided that all academic, legal and financial requirements of the University, as stated in the University Catalog, have been satisfied. All academic requirements must be met within a maximum of six academic years as a condition for recommendation for graduation.

#### Graduation

A student will be recommended for the degree Doctor of Podiatric Medicine provided the:

- a. Is not on probation or suspension and has completed all prescribed academic and clinical requirements with a cumulative grade point average of above 70% and has no outstanding grade(s) of "I," "NCR,", "FAIL", or 69% or less.
- b. Has successfully taken and passed the APLME Part 1 and Part 2.
- c. Has demonstrated no serious deficiencies in ethical, professional, or personal conduct, as defined in University Catalog, "General Academic Policies and Procedures" section, which would make it inappropriate to award the degree of Doctor of Podiatric Medicine.
- d. Has complied with all the legal and financial requirements of the University as stated in the University Catalog.
- e. Has attended in person and participated in the Commencement ceremony at which time the Doctor of Podiatric Medicine degree is conferred. Unless special permission has been granted by the Dean, each student must participate in their respective commencement ceremony. If the Dean grants special permission for excusal from commencement, the graduate may be required to present themselves to the Dean or their designee at another specified date to take their profession's oath before their diploma will be released. Requests for excusal will only be granted for extenuating circumstances, such as a prior military commitment.

Students may participate in commencement activities provided they will complete all requirements of the program by December 31<sup>st</sup> of that calendar year. No student will receive his or her degree until the student has completed all requirements for graduation. Degrees will be dated as appropriate to completion date.

# **Standards of Satisfactory Progress**

Students must maintain a cumulative numeric score of at least 70% on a yearly basis and be on pace for completion of the program to be considered making satisfactory academic and professional progress. A final numeric score below 70% during the first two years, or any single numeric score below 70% in the last two years must be remediated for promotion or graduation. Students must complete all classes, rotations, and coursework within six years to be considered to be making satisfactory academic progress.

#### **Veterans**

Veterans who fail to maintain satisfactory progress for more than one semester will not be certified to receive any Veteran's benefits until they have corrected the situation and are making satisfactory progress.

#### **Probation or Academic Suspension**

Students may be placed on Probation or Academic Suspension for the following reasons (these are in addition to the reasons listed in the General Academic Requirements section on Probation):

- Inadequate academic progress as determined by the Student Conduct and Performance Committee. These include, but are not limited to, receiving a numeric score less than 70% in any course or system, a failing grade during clinical rotations, or a grade of NCR in a required CR/NCR course.
- A cumulative percentage score of less than 70%.
- Failing to pass APMLE Part 1 upon the second attempt at this examination.
- Failing to pass APMLE Part 2 on the second attempt at the examination.
- When directed to repeat a year for academic reasons.
- Failure to perform in a professional manner.
- Serious deficiencies in ethical or personal conduct.

When a student is placed on probation, he/she will be notified in writing by the Academic Dean of CPM and the reasons will be stated. Notification will be sent by Certified Mail or hand-delivered and acknowledged by signatures of the student and the Dean or his/her designee. Copies of the letter will be placed in the student's permanent file and distributed to the Chair of the Student Performance Committee and the student's faculty advisor. The Student Performance Committee will consider when the terms of the academic probation have been satisfied and recommend to the Dean of CPM that probation can be rescinded.

Students on Academic Suspension are not registered as matriculants and should be using this time to remediate for the deficiency for which the Academic Suspension was levied. It is important to remember that the matriculants are limited to six academic years to complete the course of study.

On campus students on probation must meet with their faculty advisor at least once a month. Off campus students on probation must contact their faculty advisor once a month. It is the student's responsibility to contact the faculty advisor to arrange these meetings. If a student fails any course or system, regardless of the number of credit hours, this failing grade will require a mandatory probationary action. The probation will take place immediately and will end when the student satisfactorily remediates the failed course or system. Should the student fail a second course or system while on probation, this act will render the student subject to immediate dismissal from the DPM program.

A first or second year student on probation for a score less than 70% in the first semester will be removed from probation provided he/she has regained a cumulative score of at least a 70% and has remediated the course.

A first or second year student will be removed from probation when all scores below a 70% have been remediated satisfactorily according to the following **Remediation** section.

A third or fourth year student on probation because of a score below 70% or, "Fail" grade must remediate the course or rotation. The student will then be reviewed by the Student Conduct and Performance Committee at the end of the academic year and may be recommended for continuation of or removal from, probation. Students who fail any portion of APMLE examination twice will be recommended for a remedial course of action under the direction of the Executive Associate Dean for Academic Affairs.

Students on probation are to remove themselves from all leadership roles in co-curricular activities associated with the University and/or with professional associations.

## Financial Aid Warning Policy (Title IV and Title VII)

If a student is not making Satisfactory Academic Progress (SAP) they may be placed on "Financial Aid Warning" status for the next payment period and continue to receive financial aid for that period. Financial Aid is any financial assistance offered to the student for paying for their education, such as loans, scholarships, Federal Work-Study, grants and stipends (judged on the criteria of the stipend). Students who fail to make SAP by the end of the payment period lose Financial Aid eligibility.

It is the policy of the Financial Aid Office (FAO) that once a student has been placed on academic probation for not meeting SAP standards as defined by the college, the FAO will automatically place the student in a Financial Aid Warning status. During the next academic term, if the student does not meet SAP standards and the college places the student on academic suspension, the student will no longer be eligible for financial aid. If the student appeals the academic suspension and the appeal is approved, financial aid will be reinstated. If the student is directed to audit courses, those courses will **not** be covered by financial aid.

## **Tutorial Assistance Program**

A Tutorial Assistance Program (TAP) has been established to assist students experiencing academic difficulty. Students will be recommended for this program by a faculty advisor or professor. Students may self-identify to TAP to receive assistance. The tutors will be chosen on the recommendation of the faculty in each discipline. Group tutoring is the methodology most used by the TAP department. For assistance, contact the Learning Enhancement and Academic Development Office (LEAD).

#### Remediation

Students, who receive a final numeric score below 70% in a course or system, or a cumulative numeric score below 70%, will be reviewed by the Student Conduct and Performance Committee. Where deemed appropriate, the Student Conduct and Performance Committee, after consultation with the course instructor, system coordinator, and/or Executive Associate Dean for Academic Affairs, may recommend any one of the following options:

- Take a comprehensive examination.
- Complete special projects or studies in the deficient area(s).
- Repeat the course, system, or rotation.

- Repeat the academic year.
- Withdraw from the University (see **Dismissal** section for criteria for this option).

The score/grade achieved by remediation will be the score/grade recorded except that the highest score/grade a student may earn by options 1 or 2 (above) is a score of 70% in the first two years and a "RPASS" in the last two years. The score/grade achieved by remediation will be re-recorded on the transcript along with the original score/grade. Numerical scores or grades earned during an attempted remediation of a course, system, or clinical rotation will be reviewed critically by the Student Conduct and Performance Committee and the Executive Associate Dean for Academic Affairs of CPM.

If a student is directed to repeat a course, the grade for repeated course will be recorded on the official transcript. Only the most recent grade received for a repeated course will be included in the student's GPA calculation. Students will be charged full tuition for repeated coursework.

Decisions regarding remediation will be made on an individual basis after considering all pertinent circumstances. The decision will be made by the Dean of the College of Podiatric Medicine, based upon the recommendation of the Student Performance Committee. The Committee will base its recommendation on the student's academic record and other considerations after consultation with the student's faculty advisor, course instructor, system coordinator, Executive Associate Dean for Academic Affairs, clinical preceptor, and the student involved, as is appropriate. A student who is required to remediate a course must be notified in writing by the Executive Associate Dean for Academic Affairs of CPM (or his/her designee) at least 15 business days prior to the remediation date, or within 15 business days after the close of the academic year in which the student is presently enrolled, whichever comes first. Notification must either be sent by Certified Mail or hand-delivered to the student and must be acknowledged with the signatures of the Dean or his/her designee and the student.

## **Remediation: Financial Aid Policy**

If the student, at the end of the academic year, is still considered to be making unsatisfactory progress and must remediate, he/she is removed from the list of eligible Title IV and Title VII financial aid recipients. Remediation of courses during the summer is not covered by any financial aid and cannot be considered an expense item for the following year. Students will attend at their own expense. Appropriate tuition and fees will be determined by the Treasurer/Chief Financial Officer in consultation with the Provost/COO and the Dean of Podiatric Medicine.

## Dismissal

The University may require withdrawal at any time it deems necessary to safeguard its standards of scholarship, conduct, and orderly operation. Examples of reasons the Student Conduct and Performance Committee will recommend dismissal of a student include, but are not limited to the following:

- Receiving a cumulative numeric score of less than 70% at the end of the first or second year.
- Receiving final percentage scores below 70% in two or more courses or systems totaling more than 25% of the total credit hours for the first or second year\*.

- Receiving numeric scores of below 70% in two or more clinical rotations in one academic year.
- Receiving a final percentage score of below 70% in a remediated course, system, or clinical rotation.
- Failing to pass the APMLE Part 1 or Part 2 examination after three attempts.
- Failing any additional course or system while on academic probation because of a prior failure of a course or system.

\*The Committee may recommend dismissal for a student receiving a final percentage score below 70% in three or more courses or systems, even if the total unsatisfactory credit hours do not exceed 25% of the total credit hours for the first or second years.

## **Summary Suspension**

Actions that threaten or endanger, in any way, the personal safety and/or well-being of self or others, or that disrupt or interfere with the orderly operation of the College or University are cause for immediate disciplinary action. Either the University President, Provost/COO, or Dean of CPM has the authority to summarily suspend a student when the student admits to guilt or when, in the opinion of these entities, such action is appropriate to protect the health or safety of any individual, or to preserve the orderly operation of the University. Further details regarding notification and appeal may be found in the University Catalog.

## **Student Appeal Process**

The Dean of CPM has the authority to make decisions regarding a student's status in matters of academic suspension, student conduct, academic progression/promotion and graduation. However, students may appeal the Dean's decision to the University Provost/COO as indicated in the Western University Catalogue (Section 18, General Academic Policies and Procedures).

## **Evaluation and Grading**

#### **Curricular Outcomes/Goals**

The goal of CPM's curriculum is to prepare each and every CPM student with the knowledge, attitudes and skills to excel in post graduate podiatric medicine and surgery residency training programs of their choice. Specifically, the student will develop the expected competencies to enable them to demonstrate:

- Knowledge of pre-clinical science (application of didactic knowledge to clinical setting)
- Prevention, recognition, diagnosis and management of systemic diseases and local disorders that adversely affect the foot, ankle and lower extremity, foot and ankle as seen in a podiatric medical practice
- Development of professional ability to work with others, reflecting cultural competence, ethical behavior, humanistic behavior, compassion and concern for others
- Demonstration of the ability to function as a member of an inter-professional team

- Demonstration of the ability to understand research methodology and other scholarly activities
- Demonstration of the ability to understand podiatric medical practice and delivery of care in the
  various health-delivery settings (private practice, hospital-based practice, and health care
  educational systems such as college and academic health science centers, free standing colleges
  of podiatric medicine, health maintenance organizations group practices and inter-disciplinary
  practice settings)
- Demonstrate practice habits and management techniques for quality patient care in a variety of communities, healthcare settings and living arrangements.
- Pre-clinical science knowledge.
- Prevention, diagnosis and management of diseases and disorders of the LE In a cost-effect manner.
- Assessment of medical (systemic) conditions affecting the LE and making appropriate referrals.
- Practicing with professionalism, compassion and concern and in an ethical fashion regardless of a patient's social class, gender, racial or ethnic background.
- Demonstration of the ability to communicate and work collaboratively with others to function in a professional manner in an interprofessional setting.
- Practice and management of patient care in a variety of communities, healthcare settings and living arrangements.
- Demonstration and understanding of podiatric practice in a multitude of health-delivery settings.
- Demonstration of the ability to understand research methodology and other scholarly activities.

#### **Grade Reports**

Official grades are turned in to the Registrar from the Executive Associate Dean for Academic Affairs of CPM, at which time the online student records system, BanWeb, is updated. Official grade reports and unofficial transcripts will be available on the BanWeb student records system throughout the academic year. For more information on how to access the BanWeb student records system, visit the Registrar's website. Additionally, non-official grade information is available through the Academic Progress Portal.

### **Pre-Clinical Grading Scale**

<u>Grade</u>	<u>Equivalent</u>	<b>GPA Points</b>
90-100%	Excellent	90-100
80-89%	Good	80-89
70-79%	Satisfactory	70-79
Below 70%	Unsatisfactory	0-69
CR	Credit	N/A
NCR	No Credit	N/A

#### **Incomplete Grade (I):**

An Incomplete (I) indicates that a student has not been able to finish all required work for issuance of a letter grade. An "I" is not counted in the grade point calculations until a letter grade is issued to replace the "I." An "I" must be replaced before the student registers for the next academic term, unless other arrangements are made with the instructor and the Executive Associate Dean for Academic Affairs. Replacement of an "I" will be under the direction of the instructor with the approval of the Dean or his/her designee. It is to the student's advantage to arrange to make up any incomplete work as soon as possible. If the incomplete grade (I) is not replaced by the conclusion of the next semester or within the otherwise specified time frame, the incomplete (I) will become a Failure. The incomplete (I) remains on the transcript and is followed by the grade/numeric score earned (i.e., I/90).

# **Credit Courses (CR/NCR)**

Courses graded for Credit/No Credit are those designated by the faculty as courses required for promotion but not assigned numeric scores. The student must satisfy the requirements of these courses to receive credit.

#### **Evaluation of Students on Clinical Rotations**

The "clinical faculty member of record" is the physician to whom the student is assigned for a given rotation according to the Rotations Office records. That physician is responsible for the rotation evaluation, which does not include assigning a rotation grade. Grades are determined by Clinical Rotation Committee based on the rotation evaluation and the OSCE results.

## **Recording of Clinical Grades**

For any reason other than a clerical error, no grade may be changed more than 20 business days after the Clinical Rotations Office reports it to the Registrar. Within those 20 days, a grade may be changed only if the Rotations Office receives a signed statement from the preceptor specifying that such a clerical error had occurred.

#### **Clinical Grading Scale**

All clerkships/clinical rotations, both required core and elective, are evaluated utilizing an Honors, Pass, Fail system. Honors, Pass, and Fail will be the only grades that will appear on the transcript. Internally, for purposes of calculating class rank and GPA, the following system will be used:

<u>Grade</u>	<u>Equivalent</u>	<b>GPA Points</b>
HON	Honors (91-100%)	100
PASS	Pass (70-90%)	80
RPASS	Remediated Pass (70%)	70
FAIL	Fail (69% or less)	69

#### **ADMINISTRATIVE GRADES**

<u>Grade</u>	<u>Equivalent</u>	<b>GPA Points</b>
AU	Audit	N/A
1	Incomplete	N/A
W	Withdrawal	N/A
M	Missing	N/A

#### Remediation (Clinical)

A failed rotation must be remediated by completing a comparable rotation. The percentage score assigned for obtaining a Pass on a remediated/repeated rotation following a failing grade will be set at 70% for class rank and GPA computation. Both the original course grade as well as the remediated grade will appear on the transcript, but only the remediated passing score of 70% will be used in GPA and class rank computations.

#### **Incomplete Rotations**

If a student leaves a rotation before it is finished without the permission of the Assistant Dean for Clinical Affairs or is asked to leave a rotation by the faculty member or the Director of Medical Education of a hospital, a score of 'FAIL' on that rotation may be assigned by the Executive Associate Dean for Academic Affairs in consultation with the Dean of the College of Podiatric Medicine.

## **Cumulative Numeric Scores (GPA)**

The cumulative numeric score will be calculated at the end of each semester of the curriculum with the average of all course numeric scores weighted by the number of course credit hours attempted. If a course or clinical rotation is repeated or remediated, only the last score earned enters into the computation of the cumulative numeric score/grade point average, but the original numeric score remains on the student's transcript. After completion of the second year program, a student with a cumulative numeric score of 75% or less may have all third year clinical rotations assigned by the Assistant Dean for Clinical Affairs or his/her designee, in consultation with the Executive Associate Dean for Academic Affairs.

#### **Credit Hour Calculation**

Courses are rated at one credit hour for each 12 hours of lecture or 24 hours of laboratory and/or practice sessions. Credit hours of 2.5 will be assigned for each week of clinical rotations. A cumulative numeric score will be calculated and posted on the transcript. Class ranking is also available upon request in the Registrar's Office.

# **Grade Appeals/Changes**

No numeric score will be changed unless the instructor certifies in writing to the Executive Associate Dean for Academic Affairs and the Registrar that an error in computing or recording the score occurred. Changes are also recorded when the student has remediated a numeric score of below 70% or an Unsatisfactory grade after being directed to do so by the Executive Associate Dean of the College of Podiatric Medicine, as recommended by the Student Conduct and Performance Committee.

For on-campus courses, students have a maximum of two weeks from the time examination results are returned to them to bring any errors or irregularities in grading to the attention of the instructor. All recorded scores remain on the official transcript unless a clerical error has occurred. Remediated scores are re-recorded along with the original numeric score in the first two years. Only the remediated score is calculated into the cumulative numeric score. For third- and fourth-year students, no score will be changed after one month from the time the grade is recorded in the Office of the Registrar. Within the above-designated time, grade changes for clinical rotations will be considered only under the following three conditions:

- When the Office of Clinical Rotations receives a signed written statement from the preceptor specifying that a clerical error has been made regarding a score, and that the purpose of the change is to correct that clerical error.
- When the preceptor to whom the student was assigned submits a signed written request to have the score changed. The request must include justification for making the change.
- When a remediation process that has been directed by the Student Performance Committee and authorized by the Dean is completed and a written evaluation is received in the Office of Clinical Rotations.
- All score changes must have the approval of the Executive Associate Dean for Academic Affairs of the College of Podiatric Medicine or his/her designee. The student should make every effort to discuss his/her evaluation(s) with the assigned preceptor(s) prior to leaving the clinical rotation.

# **Issues/Dispute Resolution Procedure**

When an issue or dispute arises between students, the issue/dispute resolution process starts with communication among the involved students. If a satisfactory resolution is not arrived at that level, the matter should then be addressed with the course director or the faculty advisor. If the problem is not resolved at the faculty advisor/course director level, the matter should be brought to the Assistant Dean for Academic Affairs, followed by the Dean and then the Provost/COO. If the matter has not been resolved at those levels, the final arbiter is the President.

When an incident arises involving a faculty member, the first step in the issue/dispute resolution process is discussion with the faculty member. If the matter is not satisfactorily resolved at that level, then the matter should be referred to the Department Chair, Dean, and Provost/COO, in that order. The final arbiter is the Board of Trustees.

When an incident arises involving a staff member, the dispute resolution process begins with the Department Chair, followed by the Dean. The Office of Human Relations is the final arbiter. Failure to follow this sequence of steps will only serve to delay the appropriate resolution of the issue or dispute as the matter will only be referred back to the correct level in this chain of responsibility.

#### **Complaints Regarding Accreditation Standards**

The College of Podiatric Medicine (CPM) is committed to meeting and exceeding the standards for accreditation of colleges of podiatric medicine as described by the American Podiatric Medical Association, Council on Podiatric Medical Education (CPME). A copy of the standards is available upon request from the Office of Executive Associate Dean for Academic Affairs. A student who believes that CPM may not be in compliance with a standard of accreditation has the right to file a complaint through the following procedure:

- A written, dated and signed complaint must be filed with the Office of Executive Associate Dean for Academic Affairs, CPM.
- The Executive Associate Dean for Academic Affairs will consult with the Dean for CPM and form an ad hoc committee of faculty and students to investigate the complaint.

- The results of the investigation shall include findings of fact, a determination of standard compliance or non-compliance, and recommended corrective actions. The results will be communicated in writing to the Dean, Executive Associate Dean for Academic Affairs, and to the student complainant.
- If corrective action is indicated, the Dean will respond with a description/plan for such action within 30 days of receipt of the ad hoc committee's results.
- Records of all proceedings regarding complaints will be maintained by the Office of Executive Associate Dean for Academic Affairs of CPM.
- In the event that the student is not satisfied with the ad hoc committee's determination and/or corrective action, the student may communicate his/her complaint to:

Director
Council on Podiatric Medical Education
9312 Old Georgetown Road
Bethesda, Maryland, 20814-1621

### Curriculum

The curriculum at CPM is a four-year, full-time academic and clinical program leading to granting the degree of Doctor of Podiatric Medicine (DPM). This curriculum stresses the interdependence of the biological, clinical, behavioral, and social sciences. The emphasis is on educating physicians for general and podiatric medicine and surgery. CPM's educational program is centered on the basic concepts of general and podiatric medicine.

The College of Podiatric Medicine identifies and develops the knowledge, the cognitive and psychomotor skills and the personal and professional behaviors required of a podiatric physician and surgeon in order to provide competent and comprehensive health care to all members of a family on a continuing basis.

#### **Implementation**

Clinical faculty and hospitals will implement the curriculum in a manner that balances the learning needs of the students and the educational resources available at the site including clinical situations, lectures, grand rounds, academic teaching conferences, workshops, skills labs and other activities encountered during clinical rotations. Clinical faculty and sites are encouraged to use a variety of teaching techniques including observation, monitored participation, video and audio recordings, computers, readings, individual discussions, and presentations by students, faculty and others to enhance learning.

# **Non-Clinical Experiences**

Non-clinical experiences like conferences, tumor boards, quality assurance meetings, hospital committees, etc., are important for students to observe in order to help them understand and appreciate the full spectrum of activities expected of physicians. Supervising physicians are encouraged to invite students to participate in as many non-clinical experiences as are practical.

#### **Procedural Skills**

Part of the College's expectation is that students will gain a knowledge and understanding of various procedural skills. In addition to proficiency in the manual aspects of procedural skills, the College expects that the student will understand the indications, contraindications, risks, benefits, and alternatives for various procedures. Student performance of any procedure on a patient must be under the direct supervision of the assigned clinical faculty or their professional designee.

#### **Clinical Rotations**

The third and fourth year clinical clerkships are mandatory, 12 block rotations for each academic year. Each year's curriculum may be completed in any order. The minimum length of a rotation is four weeks. Rotations may not be split. In the third and fourth years, core sites for each student will be determined by the Clinical Rotations Committee. The student may express a preference for core rotation sites. The student may elect to rotate at offsite programs during the elective Podiatric Medicine, Surgery and Biomechanics/Orthopedics externship block with approval by the Clinical Rotations Committee. This rotation occurs in both the third and fourth academic years.

#### **Rotation Office**

The Executive Associate Dean for Academic Affairs and the External Rotation Coordinator are dedicated to providing students with the best possible clinical educational experience and providing an exceptional service to everyone with whom they interact. The Office will assist CPM and its students with planning for and completion of their clinical training in the third and fourth years of the educational experience.

## **Summer Medical Science Preparatory Program (SMSPP)**

Western University of Health Sciences College of Podiatric Medicine will offer a 5-week program on campus that will provide the attendees with an introduction to biochemistry, genetics, microbiology/immunology, and gross anatomy/head and neck anatomy. This optional five-week introductory preparatory program will be offered to a select number of incoming DPM students. Students will purchase a workbook and remit a tuition fee of \$750. (See course description for PM 5001 below for additional information.)

## **Intensive Summer Anatomy Course (ISAC)**

This course is sponsored by the Anatomy Department for entering first year students. Preference is given to those who have had previous academic coursework/experience in anatomy. See PM 5002 for a course description. There is no additional fee for this program.

# **Curriculum Organization**

Year 1, Fall S	Year 1, Fall Semester, DPM 2017	
Course	Title	<b>Credit Hours</b>
PM 5020	Introduction to the Podiatric Physician I	1.50
PM 5025	The Molecular and Cellular Basis of Medicine	10.00
PM 5030	Medical Gross Anatomy	12.00
PM 5080	Essentials of Clinical Medicine I	3.50
PM 5090	Podiatric Medicine Principles and Practices I	4.50
IPE 5000	Patient Centered Cases I	1.00
	Semester Total:	32.50
Year 1, Sprin	g Semester, DPM 2017	
Course	Title	<b>Credit Hours</b>
PM 5120	Introduction to the Podiatric Physician II	1.50
PM 5125	Neuroscience System	11.50
PM 5130	Musculoskeletal System	5.00
PM 5145	Introduction to Disease, Immunity, and Therapeutics	7.00
PM 5155	Behavioral Medicine and Psychiatry	5.50
PM 5175	Blood and Lymphatic System	4.00
PM 5180	Essentials of Clinical Medicine II	3.50
PM 5190	Podiatric Medicine Principles and Practices II	3.50
IPE 5100	Patient Centered Cases II	1.00
	Semester Total:	42.50
	Year 1 Total:	75.00

Year 2, Fall Semester, DPM 2016		
Course	Title	<b>Credit Hours</b>
PM 6020	Cardiovascular System	8.50
PM 6035	Renal System	4.50
PM 6040	Respiratory System	8.50
PM 6045	Endocrine System	5.50
PM 6080	Essentials of Clinical Medicine III	3.50
PM 6090	Podiatric Medicine Principles and Practices III	3.50
IPE 6000	Team Training in Healthcare I	1.00
Semester Total:		35.00
Year 2, Sprin	g Semester, DPM 2016	
Course	Title	<b>Credit Hours</b>
PM 6115	Dermal System	3.00
PM 6130	Reproductive System	6.00
PM 6140	Gastrointestinal System and Nutrition	6.50
PM 6172	Emergency Medicine	1.00
PM 6173	Geriatrics	1.50
PM 6176	Pediatrics	2.50
PM 6180	Essentials of Clinical Medicine IV	3.50
PM 6190	Podiatric Medicine Principles and Practices IV	4.50
IPE 6100	Team Training in Healthcare II	1.00
	Semester Total:	29.50
	Year 2 Total:	64.50

Year 3, Fall/S	Year 3, Fall/Spring Semester, DPM 2015		
Course	Title	<b>Credit Hours</b>	
PM 7010	General Medicine (Inpatient Medicine)	10.00	
PM 7020	Internal Outpatient Medicine (Medicine Sub-Specialty) I	10.00	
PM 7021	Internal Medicine II (Medicine Sub-Specialty)	10.00	
PM 7030	Surgery I	10.00	
PM 7050	Surgical Elective I (Sub-Specialty Surgery)	10.00	
PM 7060	Podiatric Medicine, Surgery and Biomechanics/Orthopedics I	15.00	
PM 7070	Podiatric Medicine, Surgery and Biomechanics/Orthopedics II	15.00	
PM 7080	Elective I – Pod Medicine, Surgery and Biomechanics/Orthopedics	10.00	
PM 7090	Elective II – Pod Medicine, Surgery and Biomechanics/Orthopedics	10.00	
PM 7095	Clinical Medicine Elective	10.00	
PM 8055	Essentials of Clinical Medicine	3.50	
	Year 3 Total:	113.50	
Year 4, Fall/S	pring Semester, DPM 2014		
Course	Title	<b>Credit Hours</b>	
PM 7510	General Internal Medicine	10.00	
PM 7521	Surgical Elective II (Sub-Specialty Surgery)	10.00	
PM 7530	Surgery II (Sub-Specialty)	10.00	
PM 7540	Emergency Medicine	10.00	
PM 7545	Podiatric Medicine, Surgery and Biomechanics/Orthopedics III	10.00	
PM 7550	Elective Pediatrics/Medicine Subspecialty	10.00	
PM 7560	Elective Pod Medicine, Surgery, and Biomechanics/Orthopedics III	10.00	
PM 7570	Elective Pod Medicine, Surgery, and Biomechanics/Orthopedics IV	10.00	
PM 7580	Elective Pod Medicine, Surgery, and Biomechanics/Orthopedics V	10.00	
PM 7590	Elective Pod Medicine, Surgery, and Biomechanics/Orthopedics VI	10.00	
PM 8555	Essentials of Clinical Medicine	3.50	
	Year 4 Total:	103.50	

# **Course Descriptions**

Courses listed in this catalog are subject to change through normal academic channels. New courses and changes in existing course work are initiated by the appropriate disciplines, departments, or programs, approved by the Curriculum Committee, the faculty, the Dean of the College of Podiatric Medicine, and the Provost/COO. CPM uses a combination of numeric scores and letter grades. A numeric score—listed as a percentage—is used in the PMS I and II years and a 4-value letter grade is used in the last two years.

## IPE 5000 Patient Centered Cases – An Interprofessional Approach I (1 credit hour, CR/NCR)

IPE 5000 is offered as part of the college curriculum for all first year, entry level health professional students and is a university requirement for all participating colleges. The course is designed to prepare the healthcare student to practice patient-centered collaborative care through a team approach. Working in small interprofessional teams, students will explore cases representing conditions across the human lifespan.

# IPE 5100 Patient Centered Cases – An Interprofessional Approach II (1 credit hour, CR/NCR)

Continuation of IPE 5000.

## IPE 6000 Team Training in Healthcare I (1 credit hour, CR/NCR)

IPE 6000 will continue to build upon the knowledge from the IPE 5000 series, but will expand upon that knowledge and require the student to learn and apply advanced tools and strategies that are crucial to develop a collaborative healthcare team. The majority of the course is independent study with students engaging in a large scale tabletop activity where they apply team tools necessary to solve a healthcare dilemma.

## IPE 6100 Team Training in Healthcare II (1 credit hour, CR/NCR)

Continuation of IPE 6000.

## PM 5001 Summer Preparatory Program (0 credit hours, CR/NCR)

The Summer Preparatory Program prepares incoming students for the Gross Anatomy course and provides an introduction to Biochemistry. The anatomy component focuses on the skeletal, muscular, cardiovascular and nervous systems, and a brief overview of other body systems is provided. Presentations also focus on enhancing student study and test-taking skills. The course is offered for students without prior course work in anatomy. Acceptance into this program is at the discretion of the instructor/coordinator. The course is an elective and does not meet any requirements of the Doctor of Podiatric Medicine curriculum. A separate tuition of \$550 is charged. Students from other programs of the University may enroll in this course.

# PM 5002 Medical Gross Anatomy - Intensive Summer Anatomy Course (ISAC) (12 credit hours)

Faculty in this course teach an understanding of the superficial and deep anatomical structures and their arrangement to one another while emphasizing normal function and clinical features of the human body. Through laboratory dissections of cadavers, radiology, and didactic lectures, students will learn the language of anatomy and clinically-important relationships. Particular attention will be paid to the neurovascular bundles throughout the entire body. In addition to dissections, models, radiographs, clinical presentations, and special demonstrations are employed to emphasize current clinically-relevant structures and presentations. The sum total of this fast-paced course is that students will be able to identify all of the bones, organs, muscles, arteries, veins, nerves, and lymphatic structures needed to be successful in subsequent DPM curriculum and will be able to identify the anatomical defects, injuries, and malformations implicit in the clinical conditions interspersed within the dissection labs, lectures, and exams. Students are selected for this course based on GPA and MCAT scores, as well as previous coursework in anatomy. No separate fee is charged, as the student registers for medical school upon matriculation into the course. Students who complete this course with a minimum grade of 80% are potentially eligible to assist the faculty during the Gross Anatomy portion of the regular Medical Gross Anatomy course. They will then resume their own coursework during the Head and Neck portion in the latter part of the Medical Gross Anatomy course. To apply, contact the course director by email or phone.

## PM 5003 ISAC Facilitation (4 credit hours, CR/NCR)

Prerequisites: Completion of PM 5002 with a final percentage score of 80% or higher and permission of course director. Students enrolled in this elective course will assist the other first-year medical students in the dissection of cadavers and otherwise aid students in the regular Medical Gross Anatomy course. Other types of teaching assistance, including prosecting difficult-to-identify structures, may also be required.

## PM 5020 Introduction to the Podiatric Physician I (1.5 credit hours, Numeric Score)

This course provides an introduction to the curriculum and explores individual learning styles and critical thinking skills. During this course, the student will begin to develop their identity as a podiatric physician while building a core foundation in professionalism. A problem based approach is used to present evidence-based medicine, research methodology, biostatistics, and critical analysis of the literature.

## PM 5025 The Molecular and Cellular Basis of Medicine (10 credit hours, Numeric Score)

This course presents an integration of molecular biology, biochemistry, cellular physiology and excitable cells, introductory genetics and histology and embryological development within the context of their clinical applications of basic biomedical sciences. Additionally, the course includes an introduction to pathology with a focus on neoplasia.

#### PM 5030 Medical Gross Anatomy (12 credit hours, Numeric Score)

Faculty in this course teach an understanding of the superficial and deep anatomical structures and their arrangement to one another while emphasizing normal function and clinical features of the human body. Through laboratory dissections of cadavers, radiology, and didactic lectures, students will learn the language of anatomy and clinically-important relationships. Particular attention will be paid to the neurovascular bundle throughout the entire body. In addition to dissections, models, radiographs, clinical presentations, and special demonstrations are employed to emphasize current clinically-relevant structures and presentations. The sum total of this fast-paced course is that students will be able to identify all of the bones, organs, muscles, arteries, veins, nerves, and lymphatic structures needed to be successful in subsequent DPM curriculum and will be able to identify the anatomical defects, injuries, and malformations implicit in the clinical conditions interspersed within the dissection labs, lectures, and exams.

# PM 5035 Head and Neck Anatomy (3.5 credit hours, Numeric Score)

This course is a continuation of the Gross Anatomy course (PM 5030). Through lecture and laboratory, students are introduced to the anatomy of the head and neck. Particular attention is paid to the cranial nerves, both their normal function and the numerous clinical syndromes that affect them. The anatomy lectures will also be supplemented with various clinical presentations. Only open to DPM students matriculating prior to the 2012-2013 academic year or MSMS 2014 students by approval of the Dean.

#### PM 5080 Essentials of Clinical Medicine I (3.5 credit hours, Numeric Score)

The Essentials of Clinical Medicine I introduces students to the world of clinical medicine through a multifaceted approach, including early patient contact with both model and simulated patients, facilitated small group sessions, didactic sessions, self-directed and online exercises, and small group projects. Emphasis is on development of history-taking skills and physical examination skills, critical thinking skills, differential diagnosis formation, construction of treatment plans, and doctor-patient communication skills. Other components of the course include professionalism, medical informatics, cultural awareness and health promotion and disease prevention.

# PM 5090 Podiatric Medicine, Surgery and Biomechanics I (4.5 credit hours, Numeric Score)

This course presents the podiatric history, philosophy, principles, problem solving and patient management, incorporating direct and indirect, traditional and contemporary podiatric medicine, surgery and biomechanics, from an evidence based medicine perspective. Students will learn how to critique relevant information within the context of patient care processes. Students will further understand and develop strategies for clinical decision-making which will help them develop a pattern to lifelong learning.

# PM 5120 Introduction to the Podiatric Physician II (1.5 credit hours, Numeric Score)

This course develops the role and responsibility of the podiatric physician through interactive community health experiences and an understanding of the current landscape of the healthcare system. This course also explores the ethical and professional responsibilities of the podiatric physician with exposure to medical jurisprudence.

# PM 5125 Neuroscience System (11.5 credit hours, Numeric Score)

This course presents the basic understanding of the brain, spinal cord and peripheral nervous system. Basic science topics include embryology, histology, neuroanatomy, biochemistry, physiology and pharmacology. Clinical topics include infections of the nervous system, pathology, neurology, ophthalmology, otorhinolaryngology, and overviews of sleep disorders, cerebrovascular disorders, aging and dementia.

#### PM 5130 Musculoskeletal System (5 credit hours, Numeric Score)

This course presents the embryology, histology, functional anatomy, physiology, microbiology, pharmacology and pathology pertinent to the musculoskeletal system.

Course instructors include both basic science faculty and clinical faculty from multiple specialties. Students are expected to integrate the clinical and basic science concepts and apply the appropriate evidence-based approaches to diagnosis and management of musculoskeletal diseases.

#### PM 5145 Introduction to Disease, Immunity and Therapeutics (7 credit hours, Numeric Score)

This is an integrated course introducing microbiology, immunology, pathology, and pharmacology to prepare students for more in-depth study during the systems.

Genetics, as related to these disciplines, is also included. Clinical applications of the basic sciences are emphasized.

### PM 5155 Behavioral Medicine and Psychiatry (5.5 credit hours, Numeric Score)

Presented in conjunction with neuroscience, this course presents biological, psychological and social aspects of behavior in relation to medical practice. Major topics include the etiology and treatment of substance abuse, the physician-patient relationship, emotion and personality, etiology of gender identify and sexual orientation, human sexuality, evolutionary origins of behavior, and the genetic and environmental aspects of behavioral disorders. The course addresses how a patient's behaviors contribute to their health and/or disease. The physician's role in the education for behavioral change is also discussed. The psychiatry portion of the course builds upon the bio-psycho-social foundation presented during behavioral science. Major DSM-IV diagnoses will be explored. Implications for medical practice will be emphasized. The course develops the physician's ability to recognize and deal with, or to refer, the most common and prevalent psychopathologies encountered in the general population.

# PM 5175 Blood and Lymphatic System (4 credit hours, Numeric Score)

Students work as teams in small groups to address a variety of clinical cases that involve the hematopoietic and lymphoreticular organs, including anemia, clotting disorders, blood-borne infections, myeloproliferative and myelodysplastic disorders. Each case allows for integration of basic and clinical science concepts. Large-group interactive sessions provide guidance and expert facilitation regarding the clinical application of the histology, physiology, pharmacology, biochemistry, microbiology, and pathology as well as the epidemiology and evidence-based approaches to diagnosis and management.

# PM 5180 Essentials of Clinical Medicine II (3.5 credit hours, Numeric Score)

Prerequisite: PM5080. This course is a continuation of PM 5080.

# PM 5190 Podiatric Medicine, Surgery and Biomechanics II (3.5 credit hours, Numeric Score)

Prerequisite PM 5090: Continuation of PM 5090

#### PM 6020 Cardiovascular System (8.5 credit hours, Numeric Score)

Students work as teams in small groups to address a variety of clinical cases that involve valvular disease, congenital abnormalities, arrhythmias, heart failure, hypertension and ischemic heart diseases. Each case allows for integration of basic and clinical science concepts. Large-group interactive sessions provide guidance and expert facilitation regarding the clinical application of embryology, physiology, pharmacology, biochemistry, microbiology, and pathology as well as epidemiology and evidence-based approaches to diagnosis and management of cardiovascular disorders.

# PM 6035 Renal System (4.5 credit hours, Numeric Score)

Students work as teams in small groups to address a variety of clinical cases that involve fluid and electrolyte disorders, acid-base disturbances, urinary tract infections, and acute as well as chronic kidney diseases. Each case allows for integration of basic and clinical science concepts. Large-group interactive sessions provide guidance and expert facilitation regarding the clinical application of embryology, histology, physiology, pharmacology, biochemistry, microbiology, and pathology as well as epidemiology and evidence-based approaches to diagnosis and management of renal disorders.

### PM 6040 Respiratory System (8.5 credit hours, Numeric Score)

Students work as teams in small groups to address a variety of clinical cases involving important pulmonary diseases that may be characterized by a variety of symptoms and chest radiographic patterns. Each case allows for integration of basic and clinical science concepts. Large-group interactive sessions provide guidance and expert facilitation regarding the clinical application of embryology, histology, physiology, pharmacology, biochemistry, microbiology, and pathology as well as epidemiology and evidence-based approaches to diagnosis and management of disorders of the respiratory system. Critical care medicine concepts will be integrated with concepts already learned in the preceding endocrine, cardiovascular, and renal systems.

# PM 6045 Endocrine System (5.5 credit hours, Numeric Score)

Students work as teams in small groups to address a variety of clinical cases involving disorders of the hypothalamus and pituitary glands, the adrenal glands, diabetes, lipids, the thyroid gland, and calcium/bone metabolism. Each case allows for integration of basic and clinical science concepts. Large-group interactive sessions provide guidance and expert facilitation regarding the clinical application of embryology, histology, physiology, pharmacology, biochemistry, microbiology, and pathology as well as epidemiology and evidence-based approaches to diagnosis and management of endocrine disorders.

#### PM 6080 Essentials of Clinical Medicine III (3.5 credit hours, Numeric Score)

Prerequisite: PM 5180. This course builds upon the knowledge and skills that the student has learned in the first two courses in the series and provides advanced training in history-taking and physical examination skills, doctor-patient communication, differential diagnosis and treatment planning in preparation for clinical rotations. Issues including professionalism, medical errors and patient safety, medical informatics and evidence-based medicine are reviewed. Students will have opportunities to add to their professional portfolios.

#### PM 6090 Podiatric Medicine, Surgery and Biomechanics III (3.5 credit hours, Numeric Score)

This course presents a continuation of the Podiatric Medical Principles and Practice II (podiatric medicine, surgery and biomechanics/orthopedics). This course provides the student basic fundamentals of podiatric medicine, biomechanics and surgery and management principles for problem solving and quality patient care and management. The student is provided principles of a clinical approach to the management of a variety of conditions affecting the foot, ankle and lower extremity from an evidence based medicine perspective. Students will learn how to critique relevant information within the context of patient care processes. Students will further understand and develop strategies for clinical decision-making which will help them develop a pattern to lifelong learning.

# PM 6115 Dermal System (3 credit hours, Numeric Score)

This course builds upon the knowledge and skills that the student has learned in the first two courses in the series and provides advanced training in history-taking and physical examination skills, doctor-patient communication, differential diagnosis and treatment planning in preparation for clinical rotations. Issues including professionalism, medical errors and patient safety, medical informatics and evidence-based medicine are reviewed. Students will have opportunities to add to their professional portfolios.

### PM 6130 Reproductive System (6 credit hours, Numeric Score)

This course presents the anatomy, embryology, and histology of both the female and male reproductive systems. The physiology, biochemistry, pathology, pharmacology, and microbiology of both reproductive systems are also discussed. In addition, the basic science disciplines present principles regarding the relationships between mother and fetus during pregnancy. Clinical lectures on obstetrics, gynecology, and women's health are an important part of the system.

#### PM 6140 Gastrointestinal System and Nutrition (6.5 credit hours, Numeric Score)

Students work as teams in small groups to address a variety of clinical cases involving important diseases of the gut, hepatobiliary, and pancreatic systems that manifest as alterations in nutrient assimilation and waste evacuation. Each case allows for integration of basic and clinical science concepts. Large-group interactive sessions provide guidance and expert facilitation regarding the clinical application of embryology, histology, physiology, pharmacology, biochemistry, microbiology, and pathology as well as epidemiology and evidence-based approaches to diagnosis and management of gastrointestinal disorders.

#### PM 6172 Emergency Medicine (1 credit hour, Numeric Score)

This course serves to integrate the didactic clinical training that students received during the OMS I and II years, using case-based presentation pedagogy to foster clinical problem solving. Topics covered include chest pain, difficulty breathing, neurologic emergencies, cardiovascular complaints, infections, shock and trauma, abdominal pain, etc.

# PM 6173 Geriatrics (1.5 credits, Numeric Score)

This course is devoted to the special problems that can occur in the elderly. Diseases and conditions learned during the systems are now explored in light of this population. Challenges of an aging population are explored.

#### PM 6176 Pediatrics (2.5 credit hours, Numeric Score)

This course is devoted to the special problems that can occur in the period between infancy to adolescence. Additionally, diseases and conditions learned during the systems are explored in the context of this population. Additionally, aspects specific to pediatrics are explored.

#### PM 6180 Essentials of Clinical Medicine IV (3.5 credit hours, Numeric Score)

Prerequisite: PM 6080. This course is a continuation of PM 6080. As part of this course, students will take the Clinical Performance Evaluation (CPE) in preparation for the Clinical Performance section of the APLME that will be given prior to the completion of the Fourth Year. Students are required to pass the CPE in order to be promoted to the Clinical Training (Rotation) phase of the Curriculum.

# PM 6190 Podiatric Medicine, Surgery and Biomechanics IV (4.5 credit hours, Numeric Score)

Continuation of PM 6090. This course includes a section on advanced concepts in podiatric medicine, surgery, and biomechanics.

# PM 7010 General Medicine (Inpatient Medicine) (10 credit hours, HON/PASS/FAIL)

This course provides supervised clinical education in family medicine, including clinical management, technical and procedural skills, interpretation of diagnostic data, patient education, development of diagnostic and management plans, and inter-professional communication. In subsequent courses in this series, students are exposed to progressive involvement and independence in patient management.

#### PM 7020 Internal/Outpatient Medicine I (10 credit hours, HON/PASS/FAIL)

This course provides supervised clinical education in general internal medicine and/or in an internal medicine sub-specialty such as gastroenterology, pulmonology, or cardiology. Expected competencies include clinical management, technical and procedural skills, interpretation of diagnostic data, patient education, development of diagnostic and management plans, and inter-professional communication. In subsequent courses in this series, students are exposed to progressive involvement and independence in patient management.

#### PM 7021 Internal Medicine II (Medicine Subspecialty) (10 credit hours, HON/PASS/FAIL)

This course provides supervised clinical education in general internal medicine or in an internal medicine subspecialty such as gastroenterology, pulmonology, or cardiology. Expected competencies include clinical management, technical and procedural skills, interpretation of diagnostic data, patient education, development of diagnostic and management plans, and inter-professional communication. In subsequent courses in this series, students are exposed to progressive involvement and independence in patient management.

#### PM 7030 Surgery I (10 credit hours, HON/PASS/FAIL)

This course provides supervised clinical education in general/vascular surgery including clinical management, technical and procedural skills, interpretation of diagnostic data, patient education, development of diagnostic and management plans, and inter-professional communication. In subsequent courses in this series, students are exposed to progressive involvement and independence in patient management.

### PM 7050 Surgical Elective (Sub-Specialty Surgery) (10 credit hours, HON/PASS/FAIL)

This course provides supervised clinical education in one of the surgical clinical subspecialties including clinical management, technical and procedural skills, interpretation of diagnostic data, patient education, development of diagnostic and management plans, and inter-professional communication.

# PM 7060 Podiatric Medicine, Surgery and Biomechanics/Orthopedics I (15 credit hours, HON/PASS/FAIL)

This course provides supervised clinical education in podiatric medicine, surgery and biomechanics/orthopedics. The student will be afforded progressive experiences in development of technical procedural skills in all phases of podiatric medicine surgery and biomechanics. Emphasis will be placed on development of clinical management, technical/procedural skills, patient education, and interpretation of diagnostic data, management plans and inter-professional communication. Throughout the course, the tools essential to becoming a competent podiatric physician and life-long learner are emphasized.

# PM 7070 Podiatric Medicine, Surgery and Biomechanics/Orthopedics II (15 credit hours, HON/PASS/FAIL)

Prerequisite: PM 7060. Continuation of PM 7060.

# PM 7080 Elective Podiatric Medicine, Surgery and Biomechanics/Orthopedics (Externship I) (10 credit hours, HON/PASS/FAIL)

Continuation of PM 7060, which can be completed at an affiliated rotation offsite.

# PM 7090 Elective Podiatric Medicine, Surgery and Biomechanics/Orthopedics (Externship II) (10 credit hours, HON/PASS/FAIL)

Continuation of PM 7080, which can be completed at an affiliated rotation offsite.

# PM 7095 Clinical Medicine Elective (10 credit hours, HON/PASS/FAIL)

This course provides supervised clinical education in general/family medicine in the inpatient setting, including clinical management, technical and procedural skills, interpretation of diagnostic data, patient education, development of diagnostic and management plans, and inter-professional communication.

# PM 7510 General/Internal Medicine (10 credit hours, HON/PASS/FAIL)

This course provides supervised clinical education in general/family medicine in an inpatient setting, including clinical management, technical and procedural skills, interpretation of diagnostic data, patient education, development of diagnostic and management plans, and inter-professional communication. In subsequent courses in this series, students are exposed to progressive involvement and independence in patient management. This rotation will serve as a sub-internship for students.

#### PM 7521 Surgical Elective II (Subspecialty Surgery) (10-15 credit hours, HON/PASS/FAIL)

This course provides supervised clinical education in general surgery or one of the surgical subspecialties such as ophthalmology, orthopedic surgery, urology, cardiovascular surgery, vascular surgery, interventional radiology, plastic/hand surgery, or neurosurgery. Expected competencies include clinical management, technical and procedural skills, interpretation of diagnostic data, patient education, development of diagnostic and management plans, and interprofessional communication. In subsequent courses in this series, students are exposed to progressive involvement and independence in patient management. This rotation will serve as a sub-internship for students.

#### PM 7530 Surgery II (Sub-internship) (10 credit hours, HON/PASS/FAIL)

This course provides supervised clinical education in general/vascular surgery. Expected competencies include clinical management, technical and procedural skills, interpretation of diagnostic data, patient education, development of diagnostic and management plans, and inter-professional communication. In subsequent courses in this series, students are exposed to progressive involvement and independence in patient management. This rotation will serve as a sub-internship for students.

# PM 7540 Emergency Medicine (10 credit hours, HON/PASS/FAIL)

This course provides supervised clinical education in emergency medicine including clinical management, technical and procedural skills, interpretation of diagnostic data, patient education, development of diagnostic and management plans and inter-professional communication.

# PM 7545 Podiatric Medicine, Surgery and Biomechanics/Orthopedics III (10 credit hours, HON/PASS/FAIL)

This course provides supervised clinical education at WesternU's clinical sites in podiatric medicine, surgery and biomechanics/orthopedics. The student will be afforded advanced, progressive experiences in development of technical procedural skills in all phases of podiatric medicine, surgery and biomechanics. Emphasis will be placed on development of clinical management, technical/procedural skills, patient education, and interpretation of diagnostic data, management plans and interprofessional communication. Throughout the course, the tools essential to becoming a competent podiatric physician and life-long learner are emphasized. The goal is to help the student to successfully transition into post graduate resident training and podiatric practice.

# PM 7550 Elective - Pediatrics/Medicine Subspecialty (10 credit hours, HON/PASS/FAIL)

This course provides supervised clinical education in general internal medicine or in one of the internal medicine subspecialties such as gastroenterology, pulmonology, neurology, endocrinology, cardiology, infectious diseases or geriatrics or pediatrics, including clinical management, technical and procedural skills, interpretation of diagnostic data, patient education, development of diagnostic and management plans, and inter-professional communication.

# PM 7560 Elective - Podiatric Medicine, Surgery and Biomechanics/Orthopedics (Externship III) (10 credit hours, HON/PASS/FAIL)

This course provides supervised clinical education in podiatric medicine, surgery and biomechanics/orthopedics. The student will be afforded advanced progressive experiences in development of technical procedural skills in all phases of podiatric medicine surgery and biomechanics. Emphasis will be placed on development of clinical management, technical/procedural skills, patient education, and interpretation of diagnostic data, management plans and inter-professional communication. Throughout the course, the tools essential to becoming a competent podiatric physician and life-long learner are emphasized. The goal is to help the student to successfully transition into a post-graduate resident and eventual podiatric practice.

# PM 7570 Elective Podiatric Medicine, Surgery and Biomechanics/Orthopedics (Externship IV) (10 credit hours, HON/PASS/FAIL)

Continuation of PM 7560.

# PM 7580 Elective Podiatric Medicine, Surgery and Biomechanics/Orthopedics (Externship V) (10 credit hours, HON/PASS/FAIL)

Continuation of PM 7570.

# PM 7590 Elective Podiatric Medicine, Surgery and Biomechanics/Orthopedics (Externship VI) (10 credit hours, HON/PASS/FAIL)

Continuation of PM 7580.

# PM 8055 Essentials of Clinical Medicine V (3.5 credit hours, HON/PASS/FAIL)

The Essentials of Clinical Medicine V course is taken during the PMS III year and serves as a review of, and assessment tool for basic knowledge. This program reviews and amplifies clinical material presented during years I and II. It also provides the opportunity for the student to obtain information and skills essential to rotations, residency, medical and podiatric medical practice. Topics include clinical, legal and ethical issues that are presented from a medical and podiatric medical perspective. Additionally, the course addresses special topics such as professionalism, cultural sensitivity, and alternative care. Throughout the course, the tools essential to becoming a competent podiatric physician and lifelong learner are emphasized. This course must be completed prior to becoming a PMS-IV student.

# PM 8555 Essentials of Clinical Medicine VI (3.5 credit hours HON/PASS/FAIL)

The Essentials of Clinical Medicine V course builds upon the knowledge and skill learned during the three previous years at CPM. The goal is to help the student to successfully transition into post graduate resident training and podiatric practice. This is accomplished by enabling the student to apply general knowledge to specific clinical applications. In addition, ECM-VI emphasizes medical professionalism and helps the students sharpen skills that are vital to life-long learning. Information is presented through one or more modalities including online and/or on-campus sessions. Successful completion of ECM-VI is a requirement for graduation for students entering PMS4 year of training.

# **Honors and Awards**

The following awards are considered for presentation to DPM students annually:

Blaine Labs Award
CPM Faculty Award
Dean's Leadership and Service Award
Dean's Scholarship Award
Dean's Scholarship Award
Dean's Vision Award
East West Scholarship
Gary P. Jolly Lifelong Learner Award
Lawrence B. Harkless Scholarship
Louis T. Bogy Award
Michael L. Stone, DPM Award
Oliver Foster Scholarship
Podiatric Insurance Company of America Recipients Award
President's Society Award
Who's Who Among Students in American Colleges and Universities

#### **Academic Calendar**

\*Students in clinical rotations observe their preceptor's hours, which may include working on federal holidays.

- !!	
Fall 2013	<b>Spring 2014</b>

Monday, June 3, 2013

Fall Rotations Begin (Years 3-4)

Thursday, July 4, 2013

Independence Day - No Classes\*

<u>August 5 – August 9, 2013</u>

Orientation Week (Year 1)

Saturday, August 10, 2013

Convocation/White Coat Ceremony

Monday, August 12, 2013

Fall Classes Begin (Years 1-2)

Monday, September 2, 2013

Labor Day – No Classes\*

Monday, October 14, 2013

Columbus Day – No Classes\*

Friday, November 22, 2013

End of Fall Rotations (Years 3-4)

Wednesday, November 27, 2013

Thanksgiving Recess Begins @ 5:00 p.m.\*

Monday, December 2, 2013

Classes Resume

Friday, December 20, 2013

End of Fall Semester Classes (Years 1-2)

Monday, December 23, 2013

Winter Recess Begins (Years 1-2)

Monday, November 25, 2013
Spring Rotations Begin (Years 3-4)

Monday, January 6, 2014

Spring Classes Begin (Years 1-2)

Monday, January 20, 2014

Martin Luther King Day - No Classes\*

Monday, February 17, 2014

President's Day - No Classes\*

Monday, March 24, 2014

Spring Break Begins (Years 1-2)

Monday, March 31, 2014

Spring Classes Resume (Years 1-2)

Friday, May 9, 2014

End of Spring Semester Classes (Year 2)

Wednesday, May 14-16, 2014

Commencement

Friday, May 16, 2014

End of Spring Rotations (Year 4)

Friday, May 23, 2014

End of Spring Rotations (Year 3)

Monday, May 26, 2014

Memorial Day – No Classes

Friday, June 16, 2014

End of Spring Semester Classes (Year 1)

# **College of Veterinary Medicine Doctor of Veterinary Medicine Program**

# **Accreditation**

Western University of Health Sciences College of Veterinary Medicine (WesternU-CVM) is accredited by the Council on Education of the American Veterinary Medical Association (AVMA-COE), 1931 N. Meacham Road, Suite 100, Schaumburg, Illinois 60173; Telephone: (800) 248-2862. The College of Veterinary Medicine at Western University of Health Sciences has been granted full accreditation by the AVMA-COE until May 2020.

#### **Mission Statement**

The College of Veterinary Medicine is committed to serving society and animals through the preparation of students for the practice of veterinary medicine, veterinary public health and/or veterinary research in an educational program of self-directed learning, reverence for life, and clinical education through strategic partnerships. Instruction and clinical opportunities are provided in a wide variety of domestic species, including food animal, equine and companion animals. The college sustains a vibrant and diverse faculty by encouraging advancement through personal and professional development and research. This creates an environment of competent, caring, ethical professionals, where cooperative learning, public service, and scholarship can flourish in an arena of excellence.

# The Degree

The Doctor of Veterinary Medicine (DVM) degree is earned through the completion of four years of professional study subsequent to completion of their undergraduate, pre-professional prerequisites at an accredited college or university. Graduates of this program are eligible to take national and state veterinary licensing examinations. Information on the North American Veterinary Licensing Examination is available at <a href="http://www.nbvme.org">http://www.nbvme.org</a>. Information on obtaining a state license to practice veterinary medicine is available from each state's veterinary medical board. The California Veterinary Medical Board is an agency within the California Department of Consumer Affairs, and is located at 2005 Evergreen Street, Suite 2250, Sacramento, CA 95815-3831, (916) 263-2610, <a href="http://www.vmb.ca.gov">http://www.vmb.ca.gov</a>. Graduates who pass state licensing examinations may perform all of the duties and responsibilities of a practicing veterinarian as defined by the respective state's Veterinary Medicine Practice Act.

#### **DVM Program Outcomes**

All graduates of the program are competent in entry level skills required by the profession, including but not limited to private/public practice, biomedical research, industry and regulatory medicine. These outcomes are consistent with the AVMA-COE core competencies for veterinary graduates (listed below):

- 1. Comprehensive patient diagnosis (problem solving skills), appropriate use of clinical laboratory testing, and record management;
- 2. Comprehensive treatment planning including patient referral when indicated;
- 3. Anesthesia and pain management, patient welfare;
- 4. Basic surgery skills, experience, and case management;
- 5. Basic medicine skills, experience and case management;

- 6. Emergency and intensive care case management;
- 7. Health promotion, disease prevention/biosecurity, zoonosis, and food safety;
- 8. Client communications and ethical conduct; and
- 9. Critical analysis of new information and research findings relevant to veterinary medicine

#### **Admissions Policies and Procedures**

WesternU-CVM accepts applications from all qualified domestic and international candidates. Academic records, personal and professional potential and collaborative ability are considered in accepting students into each class. WesternU-CVM seeks to admit a diverse student population with demonstrated academic competency and commitment to serve the public and animal health care interests of the veterinary profession.

WesternU-CVM participates in the centralized application service of the American Association of Veterinary Medical Colleges (AAVMC). This service, called the Veterinary Medical College Application Service (VMCAS), can be accessed as follows: by mail at AAVMC, 1101 Vermont Avenue, NW Suite 301, Washington, DC 20005-3521; by phone (202) 682-0750; by VMCAS Student Line: (877) VMCAS-40 (877-862-2740); by fax: (202) 682-1122; by e-mail: <a href="wmcas@aavmc.org">wmcas@aavmc.org</a>; or via the internet: <a href="http://www.aavmc.org/vmcas/vmcas.htm">http://www.aavmc.org/vmcas/vmcas.htm</a>.

#### **Application Requirements**

The WesternU-CVM Admissions Committee will consider applicants who have earned a grade of "C" or above on all prerequisite courses. Applicants also must attain a minimum cumulative grade point average of 2.75 in all pre-professional course work taken prior to application and matriculation. Application procedures, materials, and prerequisite courses are subject to revision each year, and the information below provides only general guidelines. Prospective students should consult the university web site at <a href="http://prospective.westernu.edu/veterinary/welcome">http://prospective.westernu.edu/veterinary/welcome</a>. In order to confirm current application requirements, applicants are directed to consult both the VMCAS and WesternU websites after June 1st of each application year.

# Applicants with Foreign Coursework

Applicants who wish to use coursework completed outside the United States, and Canada, must submit their transcripts for evaluation to a <u>Western University of Health Sciences Approved Service</u> at the candidate's expense. A course-by-course evaluation is required and all coursework must be designated as undergraduate, graduate or professional. WesternU only honors evaluations from one of the above services. The official evaluation must be included with the supplemental application packet.

#### **International Students**

International students and any other applicants who are not U.S. citizens and who are living in the U.S. should be prepared to provide proof of legal U.S. residency at the time of interview. Proof of legal U.S. residency is required prior to any offer of acceptance. For more detailed information, please visit our web page for <u>International Students</u>.

#### Test of English as a Foreign Language (TOEFL)

TOEFL (including essay) is required for all applicants who are not U.S. citizens and for whom English is a second language. Applicants must attain a minimum score of 550 (paper-based exam) or 213 (computer-based exam). Official TOEFL scores are valid for 3 years, and valid scores must be submitted at the time of application. EXCEPTION: The TOEFL exam will be waived for students who are graduating with a confirmed baccalaureate or higher degree from an accredited United States institution of higher education at the time of application.

#### **Prerequisite Courses**

Prerequisites	Semester	Quarter	All prerequisites must be completed at a
	Credit	Credit	regionally accredited US institution
	Hours	Hours	(exceptions will be made on a case-by case
Organic Chemistry with lab*	3	4	basis).
Biochemistry or Physiological	3	4	All prerequisites must be completed with a
Chemistry			grade of "C" or better (a grade of "C-" or
Upper Division Biological &	9	12	lower is not acceptable)
Life Sciences with lab*			All prerequisites must be completed by the
Microbiology	3	4	end of the spring term of the planned year
Physiology	3	4	of starting the veterinary professional
Genetics or Molecular Biology	3	4	program, if accepted.
General Physics with lab*	6	8	Prerequisites may be taken on an
Statistics	3	4	advanced-placement or CLEP credit basis.
English Composition	6	8	These credits must be listed by the
Public Speaking or Small	3	4	university from which the credit was
Group Communication			received on the official university
Humanities/Social	9	12	transcript. Alternatively, a letter from the
Sciences/Psychology/Sociology			registrar detailing courses for which CLEP
			credit was awarded must be submitted.
			All coursework taken from non-US
			institutions must be submitted to an
			approved service for evaluation.
			Required science courses must be
			satisfactorily completed no more than eight
			calendar years prior to the time the student
			would begin matriculation.
			*Only courses with a laboratory component
			are acceptable

#### Standardized Examinations

Each applicant is required to take the Medical College Admissions Test (MCAT) or Graduate Records Examination (GRE) within five years of matriculation and must submit their scores to WesternU-CVM for consideration in the admissions process.

# **Transcripts**

For the class entering fall of 2014, transcripts will not be required until an applicant has been accepted. VMCAS will be collecting and verifying transcripts beginning with the class entering fall of 2014 application cycle.

#### **Animal Related Experience**

WesternU-CVM requires that each applicant has worked no less than 500 hours in an animal related environment, including but not limited to veterinary clinical practice, farm animal production, public health animal control, animal training and animal research. The nature of the work must go beyond volunteer effort and generate demands whereby a supervisor may speak to the applicant's work habits, interest in animal well-being and personal integrity.

#### Recommendations

Three letters of recommendation are required from among the following: previous employers or supervisors of extended volunteer activities or academic personnel responsible for courses taken by the individual.

#### **Optional Application Materials**

Within federal guidelines, the applicant may submit and/or WesternU-CVM may request additional information documenting a basis for reasonable consideration under the diversity goals of the college. Scientific publications, or significant academic papers prepared as part of a course work requirement with evaluations included, may be submitted by the applicant and reviewed by the Admissions Committee in assessing the abilities and experiences of the applicant.

#### **Student Selection Process**

The WesternU Admissions office assists the college in application processing, including the preparation, distribution and handling of all admissions-related materials. Applications are reviewed by WesternU-CVM faculty using uniform criteria and acceptable applicants are recommended for interview. Following the interview, the Admissions Committee forwards all acceptable applicants to the Dean. The Dean of the college seeks to establish a diverse student body and has the final authority on admission decisions. Invitations to successful applicants shall originate in the Dean's office and are signed by the Dean.

#### **Transfers from Other Schools**

WesternU-CVM does not currently accept transfer students from other institutions.

# Registration

All DVM students are required to register by the registration deadlines specified by the University Registrar. Registration dates are posted at: <a href="http://www.westernu.edu/registrar-online-information">http://www.westernu.edu/registrar-online-information</a>. Failure to register by the deadline may be grounds for administrative withdrawal. All students registering after the posted deadline will be assessed a \$30.00 per business day late fee.

Full tuition and fees and all prior debts must be paid in full on or by posted deadlines each academic year. Matriculation is subject to the satisfactory completion of all academic requirements and payment of all outstanding debts to the University. The receipt of a final transcript(s) from all colleges/universities attended and a physical examination with documentation of required immunizations prior to registration are additional requirements for incoming students. Also, all students must show proof of current health insurance coverage by the deadlines provided by the University Registrar. This coverage must be maintained or in effect throughout the academic year. If there is no proof of current coverage, students will be automatically enrolled in the school sponsored insurance plan.

Attendance at Orientation is mandatory for all incoming first-year students.

#### **Full-time/Part-Time Status**

All students enrolled in at least one class/rotation are considered full-time students.

#### **Time Limits**

The Doctor of Veterinary Medicine program is designed to be completed in four (4) years of full-time study. The requirements for the degree must be fulfilled within 6 years from the date of matriculation to the program.

#### **Computer Technology**

Each WesternU-CVM student is required to have a laptop computer that meets the specifications on the WesternU web site at: http://www.westernu.edu/bin/computing/laptop-requirements-CVM.pdf

A webcam is required. These specifications are subject to change. The college reserves the right to impose uniform requirements for computer technology, including the possible requirement of a specific model of laptop computer.

The laptops will be used for e-mail communication with classmates and faculty, for accessing computer- and server-based course information, instructional software, online bibliographic databases, electronic bibliographies, and for participating in course exercises/activities/exams. In addition, each student must have access to a printer. Computers will be needed by students on campus as well as at their local residences and when rotating in off-campus courses/rotations; therefore, laptop computers are required instead of desktop models.

#### **Tuition and Fees**

By action of the Board of Trustees, DVM tuition and fees for the 2013-2014 academic year (subject to change) are as follows:

\$48,510.00	Annual Tuition (DVM Classes of 2016-2017)
\$47,380.00	Annual Tuition (DVM Classes of 2014-2015)
\$40.00	Student Body Fee (Years 1-2)
\$20.00	Student Body Fee (Years 3-4)

#### **Other Fees and Expenses**

\$35.00	SCAVMA Annual Membership
\$30.00	Registration Late Fee (per business day)
\$350.00	Graduation Fee
\$470.00	Annual Parking Permit (Auto)
\$25.00	Parking Permit Replacement Fee
\$40.00	Locker Key Replacement Charge
\$10.00	Official Transcript (Each)
\$21.00	Rush Transcript, First Class Mail (Each)
\$25.00	Rush Transcript, Federal Express (Each)
\$10.00	Student ID Replacement Fee
\$150.00	Dosimetry Badge Replacement Fee
TBD	Breakage Fee (Replacement Cost)

#### **Estimated Fees and Expenses**

\$1,500.00	Estimated Costs for Text Books, per year
\$100.00	Software Licenses, per year
\$650.00	Required Equipment (1 <sup>st</sup> year)
\$250.00	Required Equipment (2 <sup>nd</sup> – 4 <sup>th</sup> year)
\$15.00	Dissection Kit (1 <sup>st</sup> year)
\$1,500.00 - \$2,800.00	Required Laptop Computer (including Webcam)
\$500.00	Computer Peripherals (Printer, etc.)
\$150.00	Estimated 1 <sup>st</sup> and 2 <sup>nd</sup> year Clinical Activity Travel
\$750.00 - \$1,000.00	Estimated 3 <sup>rd</sup> year Clinical Activity Travel
\$1,000.00 - \$5,000.00	Estimated 4 <sup>th</sup> year Clinical Activity Travel and Lodging

<sup>\*</sup>Under special circumstances, requests for additional financial aid support may be directed to the Financial Aid office

# **Clinical Training Expenses**

Students will rotate through off-campus clinical training experiences during all four years of the curriculum. For first and second year students, all clinical training activities will occur within a 60-mile radius of the university campus, and students are responsible for travel expenses to and from these locations. Most third year clinical training activities will occur within a 60-mile radius of the university campus. Students are responsible for travel expenses to and from these locations. Lodging will be provided for certain third year courses that require student travel beyond the 60-mile radius. Lodging and travel will be provided for out of state third year course sites. Fourth year student-selected clinical training activities may occur worldwide. Any travel, food, housing or other expenses incurred by participating in fourth year Core or Selective Clinical Rotation course activities are the responsibility of the student. In addition, third and fourth year students are required to return to campus for various required activities. Travel costs to attend required on-campus activities are the responsibility of the student.

#### **Licensing Examination Fees**

Licensing examinations may be taken during the fourth year of the curriculum. Fees and application requirements are determined by national and state examination services and are the responsibility of the student. Application procedures and fees are described on the National Board of Veterinary Medical Examiners website at <a href="http://www.nbvme.org">http://www.nbvme.org</a>. The web site for the California Veterinary Medical Board is <a href="http://www.vmb.ca.gov">http://www.vmb.ca.gov</a>.

#### **Academic Requirements**

Continued enrollment, program participation, and graduation are subject to satisfactory completion of all academic requirements and payment of all outstanding debts to the university. Attendance at orientations, White Coat activities, and commencement activities is mandatory for all students.

#### **Academic Advisement**

Students are assigned a faculty advisor which provides students the opportunity to develop sustained, individual advisement on academic and professional levels. Students may request a change of advisor, if needed, through the office of the Associate Dean for Academic Affairs (or his/her designee).

#### **Attendance and Absences**

Attendance requirements are provided in each course syllabus.

For planned absences, students must complete and submit a Student Absence Request Form. In the case of an unplanned absence, appropriate documentation must be provided to the Associate Dean for Academic Affairs (or designee) as soon as reasonably possible, and no later than the day the student returns to class or campus. Absence from any curricular activities due to any unforeseen circumstances, including illness, should be reported to the Course Leader, Year Director, and/or the Associate Dean for Academic Affairs by telephone or e-mail within 24 hours of an absence, except in those cases of severe hardship. Absence from curricular activities for any reason does not relieve the student from responsibility for the material covered during these periods. Students should consult individual course syllabi for details. Unexcused absences may result in disciplinary action and may include failure of a course or dismissal from the program.

Planned absences longer than 30 consecutive days constitute a Leave of Absence, which requires completion of a Student Initiated Change Form and required documentation. Leave of Absence requests are reviewed and approved by the Dean (or designee). The Dean has authorized the Associate Dean for Academic Affairs to handle such requests and inform the office of the Dean of all decisions.

#### **Examinations**

Students are required to be present for all scheduled examinations. Students cannot begin an examination after the scheduled starting time without permission from the Course Leader. For a student to be allowed to take any examination other than at the scheduled time, approval must be received from the appropriate Course Leader. If a student misses an examination, appropriate documentation (e.g., health care provider note) justifying the absence must be provided to the Course Leader, who will determine whether the absence is acceptable. If the absence is excused the student will be permitted to take a make-up examination, the nature and time of which will be determined by the Course Leader and approved by the appropriate Year Director. If the absence is not excused by the Course Leader, the student may appeal (in writing) the Course Leader's decision within five business days to the appropriate Year Director.

# **Academic and Professional Misconduct Policies**

All students are expected to assume personal responsibility for honesty and integrity in the professional and academic environment. Academic misconduct includes, but is not limited to, cheating, plagiarism, using unauthorized resources during examination(s), and signing another person's name to an attendance or examination document. Professional misconduct includes, but is not limited to, inappropriate communication, unacceptable behavior, inappropriate attire, and intentional disregard for the university, college, and/or clinical site policies and procedures.

The college enforces and expects student compliance with the Standards of Academic and Professional Conduct, as contained in the Overview section of the WesternU Catalog. Students should also be familiar with the General Academic Policies and Procedures section in the WesternU Catalog. The Associate Dean for Academic Affairs will investigate any allegation and make a recommendation on the matter or, if deemed appropriate, refer the allegation to the Honor Court for further investigation. Sanctions for a violation of the Honor Code may include one or more of the following:

- Dismissal from the academic program;
- Suspension from the program for a designated period of time;
- Academic probation; and
- Other appropriate actions.

While an alleged violation is being investigated by the college, the status of the students involved in the case will remain unchanged. After consideration of the recommendation from the Associate Dean for Academic Affairs, the Dean will inform the student(s) in writing of any resultant sanctions.

#### **Promotion**

Promotion is defined as academic progression to the subsequent academic year or to Commencement. Students must maintain a cumulative grade point average of at least 2.0 in College of Veterinary Medicine courses in order to be promoted.

Students who have earned a grade of ""U" or "NCR" in any course or have a cumulative GPA below 2.0 will be referred to the Scholastic Standing Committee (SSC)/Student Performance Committee (SPC) for review and recommendation to the Associate Dean for Academic Affairs. The Associate Dean for Academic Affairs will provide a recommendation to the Dean, who will then provide the final decision. Students may not be promoted with an "I" grade. Additional fees may apply for remediation or repeated courses

In addition to the successful completion of Year 1 and 2 courses, the College of Veterinary Medicine also has progression requirements that need to be met in order for students to progress to Year 3. The College requires that students demonstrate proficiency in anatomy, behavior, epidemiology, genetics, immunology, microbiology, nutrition, parasitology, pathology, pharmacology, physiology, and toxicology. Proficiency levels are determined in certain courses of the CVM curriculum and students should review course syllabi which specify the minimum proficiency levels required for successful progress. If a student's performance does not meet the minimum proficiency levels required for successful progress at the end of Spring Semester in Year 2, students will need to meet with the designated CVM content expert (or in the absence of the content expert, the Course Leader) and successfully complete assignments designed to ensure that they meet the minimum requirement for that discipline.

For students deficient in four or more of the above listed disciplines, the College believes that if a student will not be able to successfully demonstrate proficiency in these disciplines by July 15<sup>th</sup>, these students will be referred to the Scholastic Standing Committee (SSC)/Student Performance Committee (SPC). A student that is unable to successfully meet the minimum requirements for their identified deficient discipline(s) by July 15<sup>th</sup> following completion of Year 2 will be referred to the Scholastic Standing Committee (SSC)/Student Performance Committee (SPC) for review and recommendation to the Associate Dean for Academic Affairs. The Associate Dean for Academic Affairs will provide a recommendation to the Dean, who will then provide the final decision, which may include repeat the year or dismissal.

Promotion will be revoked if the student fails to meet all academic legal, ethical/professional conduct, health/immunization, and financial requirements of the college and/or university (see University Academic Policies section). The maximum time allowed for the completion of all requirements for the DVM degree is six (6) academic years.

# Graduation

A student will be recommended for the Doctor of Veterinary Medicine degree that the student meets the following:

- ff. Is not on probation or suspension and has completed all prescribed academic and clinical requirements with a cumulative grade point average of above 2.00 and has no outstanding grade of "I," "NCR," or "U".
- gg. Has demonstrated no serious deficiencies in ethical, professional, or personal conduct, as defined in University Catalog, "General Academic Policies and Procedures" section, which would make it inappropriate to award the degree of Doctor of Veterinary Medicine.
- hh. Has complied with all the legal and financial requirements of the University as stated in the University Catalog.
- ii. Has attended in person and participated in the Commencement ceremony at which time the Doctor of Veterinary Medicine degree is conferred. Unless special permission has been granted by the Dean, each student must participate in their respective commencement ceremony. If the Dean grants special permission for excusal from commencement, the graduate may be required to present themselves to the Dean or their designee at another specified date to take their profession's oath before their diploma will be released. Requests for excusal will only be granted for extenuating circumstances, such as a prior military commitment.

Students may participate in commencement activities provided they will complete all requirements of the program by December 31<sup>st</sup> of that calendar year. No student will receive his or her degree until the student has completed all requirements for graduation. Degrees will be dated as appropriate to completion date.

# **Standards of Academic Progress**

WesternU-CVM students must maintain a cumulative grade point average (GPA) of at least 2.00 on a yearly basis to be considered making satisfactory academic and professional progress.

# **Probation or Academic Suspension**

Students may be placed on academic probation or academic suspension by the Dean for any of the following reasons:

- Inadequate academic progress, as defined above in the section on Satisfactory Progress and Promotion;
- A pattern of unexcused absences from scheduled curricular activities;
- Ethical, professional or personal misconduct as defined in the WesternU-CVM Honor Code or WesternU Catalog;
- A semester GPA of less than 2.00; and/or
- Receipt of a "U" or "NCR" grade in any course.

Students on probation must meet with their faculty advisor once a month and complete required documentation. At the discretion of the faculty advisor, these meetings can be via electronic communication, over the phone, or in person. It is the student's responsibility to contact the faculty

advisor to arrange these meetings or contacts. Students on academic probation must bring their cumulative GPA to a 2.00 or greater and/or satisfactorily remediate deficient coursework within two semesters of the imposition of academic probation.

Students will remain on academic probation for at least one semester following placement on academic probation, but no longer than two successive semesters. Upon meeting the requirements to be taken off of academic probation, it is the students' responsibility to provide all documents and a request in writing to be taken off of academic probation. These documents are to be provided to the office of the Associate Dean for Academic Affairs. Students who do not meet the specified requirements to be removed from academic probation will be dismissed from the program.

A student may not graduate (receive a diploma) unless all requirements for removal from academic probation have been fulfilled. Students on academic probation are not permitted to hold leadership positions in extracurricular activities associated with the university and/or college. If it is found that the student has not resigned from all leadership positions in extracurricular activities associated with the university or college, they will be violating the conditions of academic probation and thus will be subject to administrative action as discussed above in the section on Academic and Professional Misconduct Policies.

# Financial Aid Warning Policy (Title IV and Title VII)

If a student is not making Satisfactory Academic Progress (SAP), they may be placed on "Financial Aid Warning" status for the next payment period and continue to receive financial aid for that period. Financial Aid is any financial assistance offered to the student for paying for their education, such as loans, scholarships, Federal Work-Study, grants and stipends (judged on the criteria of the stipend). Students who fail to make SAP by the end of the payment period lose Financial Aid eligibility.

It is the policy of the Financial Aid Office (FAO) that once a student has been placed on academic probation for not meeting SAP standards as defined by the college, the FAO will automatically place the student in a Financial Aid Warning status. During the next academic term, if the student does not meet SAP standards and the college places the student on academic suspension, the student will no longer be eligible for financial aid. If the student appeals the academic suspension and the appeal is approved, financial aid will be reinstated. If the student is directed to audit courses, those courses will not be covered by financial aid.

#### **Tutorial Assistance Program**

A Tutorial Assistance Program (TAP) has been established to assist students experiencing academic difficulty. Students will be recommended for this program by a faculty advisor or professor. Students may self-identify to TAP to receive assistance. The tutors will be chosen on the recommendation of the faculty in each discipline. Group tutoring is the methodology most used by the TAP department. For assistance, contact the Learning Enhancement and Academic Development Office (LEAD).

#### Remediation

In accordance with the WesternU Catalog, remediation for lack of satisfactory progress in the program as defined in the previous section (Satisfactory Progress and Promotion) is approved by the Dean after consultation with appropriate academic personnel which may include Course Leaders, content experts, the SSC, the appropriate Year Director, and/or the Associate Dean for Academic Affairs. Options for remediation may include, but are not limited to, the following;

- Completing an academic exercise designed by the Course Leader and/or content expert(s) to address particular deficiencies demonstrated by the student. These remediation exercises may be of various lengths of time (depending on the demonstrated severity of deficiencies), but generally will not exceed one semester in duration;
- 2. Repeating the course or clinical rotation; or
- 3. Repeating the academic year.

A student who is required to remediate a course grade of "U" or "NCR" must be notified in writing by the Dean. Notification is usually sent by certified mail, to the students' official address on university record; or hand-delivered to the student and must be acknowledged with the signature of the student.

Upon successful remediation by completing an academic exercise, the transcript is notated with the grade earned alongside the original grade. For example, a student who originally received a "U" grade and, who, by remediation, earned a "C" grade will have a grade of "U/C" entered on their transcript. The amount of tuition charged for this type of remediation is determined on a case-by-case basis and at the discretion of WesternU-CVM. After completing this type of remediation, the highest grade a student will be able to achieve for the course will be a 'C' or 'PA'.

If a student is directed to remediate by repeating a course or a clinical rotation in its entirety, the grade for the repeated course will be recorded on the official transcript separately and within the semester the repeated course was completed. The original course grade will remain recorded in the semester it was originally taken. Students will be charged full tuition for repeated coursework.

If a student is required to remediate by repeating the academic year, the original grades will remain listed on the transcript in the original semester(s) and the repeated course grades will be recorded in the semester they were completed. Students will be charged full tuition for repeating the academic year.

Only the remediated grade(s) for the course(s) will be included in the student's GPA calculation.

# Dismissal

The Dean of the College of Veterinary Medicine may require dismissal of a student from the program for one or more of the following reasons:

- 1. Earning a cumulative GPA of less than 2.00;
- 2. Failing one course, including clinical rotations, and having a semester GPA below 2.00;
- 3. Failing to successfully remediate any required course;
- 4. Receiving a "U" or "NCR" while on academic probation, regardless of the student's GPA;
- 5. A pattern of unexcused absences from scheduled curricular activities;
- 6. Failing to meet requirements of academic probation; and/or

7. Ethical, professional or personal misconduct as defined in the College Honor Code or WesternU Catalog.

#### Readmission

Students dismissed from the program must reapply to be considered for readmission. All students readmitted after being dismissed will be subject to all curricular requirements in effect at the date of rematriculation. Failure to achieve these requirements will result in permanent dismissal from the program. All readmitted students will be placed on academic probation for the remainder of the program and may be dismissed at any time due to unsatisfactory performance. Exceptions to these requirements may be granted by the Dean after consultation with the Associate Dean for Academic Affairs.

# **Evaluation and Grading**

WesternU-CVM uses the following letter grades as defined in the specific course syllabus:

#### **Grading Scale, Years 1-3**

<u>Grade</u>	<u>Equivalent</u>	<b>GPA Points</b>
Α	Excellent	4.00
В	Good	3.00
С	Adequate	2.00
U	Unsatisfactory/Fail	0.00
CR	Credit	N/A
NCR	No Credit	N/A

#### **Grading Scale, Year 4**

<u>Grade</u>	<u>Equivalent</u>	<b>GPA Points</b>
Н	Honors	4.00
PA	Pass	3.00
U	Unsatisfactory/Fail	0.00
CR	Credit	N/A
NCR	No Credit	N/A

#### **Administrative Grades**

<u>Grade</u>	<b>Equivalent</b>	<b>GPA Points</b>
AU	Audit	N/A
1	Incomplete	N/A
W	Withdrawal	N/A
М	Missing	N/A

#### **Incomplete**

An "I" (Incomplete) is assigned to a student who does not complete all course requirements as a result of unexpected or unavoidable circumstances (i.e. death of a family member, personal illness, personal injury, etc.). If a student does not successfully complete the course requirements for which the "I" was assigned prior to the end of the following academic semester and/or the scheduled promotion

to the next year, a "U" grade for that course will be issued. If the course is successfully completed, the "I" grade is notated with the grade earned. For example, a student with an "I" grade who completes the course with an "A" grade, will have the grade notated on the transcript as "I/A".

#### Audit

An "AU" (Audit) is assigned to a student who pays tuition for the course and attends class activities but does not complete examinations and does not receive course credit.

#### Withdrawal

A "W" (Withdrawal) is assigned to a student who initiates voluntary withdrawal prior to the administration of the final exam or the final day of a clinical course or rotation. Students may also be assigned a "W" by the Office of Academic Affairs.

### **Grade Reports**

Course grades are electronically entered by the Course Leader into BanWeb. Grades may be viewed and unofficial transcripts are available on the BanWeb student record system. For more information on how to access the BanWeb student record system, visit the Registrar's website at <a href="http://www.westernu.edu/registrar-about">http://www.westernu.edu/registrar-about</a>. The student must satisfy course requirements as defined by the course syllabus and clinical handbook to receive academic credit. Course syllabi and clinical handbooks inform students of the levels of academic accomplishment required for each grade.

A semester grade point average and a cumulative grade point average are calculated and posted on each student's transcript. Class ranking is also available upon request from the Registrar's Office.

#### **Grade Changes**

Grade changes will be initiated by the Course Leader, using the appropriate form, and approved by the Year Director and Associate Dean for Academic Affairs. All recorded grades remain on the official transcript unless a clerical error is discovered.

#### **Appeal of Recorded Grades**

Grade appeals must first be submitted to the Course Leader. If there is evidence of bias, discrimination, or failure to follow grading procedures a student can then appeal to the appropriate Year Director, followed by the Associate Dean for Academic Affairs.

Students have a maximum of five (5) business days – after they are notified by the Course Leader that course grades have been posted by the Registrar – to notify, in writing, the Course Leader and respective Year Director of their intention to appeal any errors or irregularities in grading. All appeals must be completed within ten business days after the appeal notification.

#### **Credit Hour Calculations**

WesternU-CVM follows the WesternU Credit Hour Policy which defines one credit hour as 15 contact hours plus an average of 30 hours out of class. Given that the pace of learning and studying is not identical for everyone, it is understood that actual time on task will vary from student to student.

This formula will be applied to instructional terms of any duration. An equivalent amount of time on task (i.e., contact time + out of class student work) per credit hour is required for non-classroom based academic activities such as laboratory or small group practice, clinical rotations, asynchronous online or distance instruction, and other non-classroom modalities and delivery methods.

Calculation of credit hours will be rounded to the nearest 0.5 credit hours per course.

# **Issues/Dispute Resolution Procedure**

When an issue or dispute arises between students, the issue/dispute resolution process starts with communication among the involved students. If a satisfactory resolution is not arrived at that level, the matter should then be addressed with the Year Director or the faculty advisor. If the problem is not resolved at the faculty advisor/course director level, the matter should be brought to the Associate Dean for Academic Affairs, followed by the Dean and then the Provost/COO. If the matter has not been resolved at those levels, the final arbiter is the President.

When an incident arises involving a faculty member, the first step in the issue/dispute resolution process is discussion with the faculty member. If the matter is not satisfactorily resolved at that level, then the matter should be referred to the Department Chair, Dean, and Provost/COO, in that order. The final arbiter is the Board of Trustees.

When an incident arises involving a staff member, the dispute resolution process begins with the Department Chair, followed by the Dean. The office of Human Resources is the final arbiter.

Failure to follow this sequence of steps will only serve to delay the appropriate resolution of the issue or dispute as the matter will only be referred back to the correct level in this chain of responsibility.

# **Curriculum Organization**

#### Year 1

Year 1, Fall Semester, DVM 2017		
Course	Title	Credit Hours
CVM 5000	Veterinary Basic and Medical Sciences – PBL Module I	8.00
CVM 5020	Veterinary Basic and Medical Sciences – PBL Module II	8.00
CVM 5030	Molecular and Cellular Biology I	1.00
CVM 5040	Veterinary Issues I	2.00
CVM 5060	Veterinary Clinical Sciences and Skills I	2.00
IPE 5000	Patient Centered Cases I	1.00
Semester Total:		22.00
Year 1, Sprin	g Semester, DVM 2017	
Course	Title	Credit Hours
CVM 5100	Veterinary Basic and Medical Sciences – PBL Module III	8.00
CVM 5120	Veterinary Basic and Medical Sciences – PBL Module IV	8.00
CVM 5130	Molecular and Cellular Biology II	1.00
CVM 5140	Veterinary Issues II	2.00
CVM 5160	Veterinary Clinical Sciences and Skills II	2.00
IPE 5100	Patient Center Cases II	1.00
Semester Total:		22.00
	Year 1 Total:	44.00

# Year 2

Year 2, Fall S	Year 2, Fall Semester, DVM 2016		
Course	Title	Credit Hours	
CVM 6000	Veterinary Basic and Medical Sciences – PBL Module V	8.00	
CVM 6020	Veterinary Basic and Medical Sciences – PBL Module VI	8.00	
CVM 6030	Molecular and Cellular Biology III	1.00	
CVM 6040	Veterinary Issues III	2.00	
CVM 6060	Veterinary Clinical Sciences and Skills III	2.00	
IPE 6000	Team Training in Healthcare I	1.00	
	Semester Total:	22.00	
Year 2, Sprin	g Semester, DVM 2016		
Course	Title	<b>Credit Hours</b>	
CVM 6100	Veterinary Basic and Medical Sciences – PBL Module VII	8.00	
CVM 6120	Veterinary Basic and Medical Sciences – PBL Module VIII	8.00	
CVM 6130	Molecular and Cellular Biology IV	1.00	
CVM 6140	Veterinary Issues IV	2.00	
CVM 6160	Veterinary Clinical Sciences and Skills IV	2.00	
IPE 6100	Team Training in Healthcare II	1.00	
Semester Total:		22.00	
	Year 2 Total:	44.00	

# Year 3

Year 3, Fall/Spring Semester, DVM 2015		
Course	Title	Credit Hours
CVM 7000	Financial and Practice Management	1.00
CVM 7010	Small Animal Practice I	2.00
CVM 7011	Small Animal Practice II	2.00
CVM 7012	Small Animal Practice III	2.00
CVM 7013	Small Animal Practice IV	2.00
CVM 7020	Livestock Practice I – Dairy	2.00
CVM 7021	Livestock Practice II – Meat and Fiber	2.00
CVM 7025	Population Health and Production	2.00
CVM 7030	Equine Practice I	2.00
CVM 7031	Equine Practice II	2.00
CVM 7035	Surgery/Anesthesia	2.00
CVM 7040	Diagnostic Laboratory & Pathology	2.00
CVM 7045	Laboratory Animal & Research	2.00
CVM 7050	Zoo Animal & Wildlife	2.00
CVM 7055	Veterinary Public Health	2.00
CVM 7060	Food & Feed Safety	2.00
CVM 7065	Global Animal Health	2.00
CVM 7090	Third Year Student Presentations	1.00
	Year 3 Total:	34.00

# Year 4

Year 4, Fall/Spring Semester, DVM 2014			
Course	Title		Credit Hours
CVM 7510	Core Veterinary Internal Medicine Rotation <b>OR</b>		
CVM 7515	Core Food Animal Medicine Rotation		4.00
CVM 7520	Core Surgery		4.00
CVM 7530 -	Selective Clinical Rotations (6)		24.00
CVM 7599			
		Year 4 Total:	32.00

# **Course Descriptions**

Courses listed in this Catalog are subject to change. New courses and changes in existing course work are initiated by the faculty, reviewed and approved by the WesternU-CVM Curriculum Committee, the Associate Dean for Academic Affairs, the Dean, and the Provost/COO.

All courses are awarded letter grades, except when indicated otherwise.

#### CVM 5000 Veterinary Basic and Medical Sciences - PBL Module I (8 credits)

The Veterinary Basic and Medical Sciences courses promote student-centered, self-directed learning of the fundamental concepts in the primary basic medical sciences (anatomy, biochemistry, behavior, epidemiology, genetics, immunology, microbiology, nutrition, parasitology, pathology, pharmacology, physiology and toxicology). A Problem-Based Learning (PBL) environment is generated using cases that describe real patients with specific diseases providing the context for learning. Students are assigned to groups of 6 to 8 students with a faculty facilitator. Facilitators guide the students through the PBL process. Students problem- solve by defining patient problems, evaluating facts/data, exploring ideas/hypotheses, and considering action plans/action items that will further define or resolve patient problems. PBL sessions are dynamic, interactive meetings that also enhance students' communication and collaboration skills. There are eight modules based on a body-systems approach to the integration of the basic medical sciences. Correlative laboratories and learning activities are provided to enhance the learning experience.

# CVM 5020 Veterinary Basic and Medical Sciences – PBL Module II (8 credits)

Taken concurrently with CVM 5000, focusing on other veterinary problems.

#### CVM 5030 Molecular and Cellular Biology I (1 credit)

This course provides correlative activities to the Veterinary Basic and Medical Sciences cases, focusing on the central biological principles and mechanisms that underlie animal health and disease at the molecular and cellular levels.

# CVM 5040 Veterinary Issues I (2 credits)

This course introduces the student to significant issues facing the veterinary profession, which may include public policy, biomedical ethics, and legislation affecting animals or the veterinary profession, animal welfare, public health, and veterinary career opportunities. The format includes invited presentations, small group discussions and assigned readings and projects. This and subsequent courses include material on the California Veterinary Medical Practice Act.

#### CVM 5060 Veterinary Clinical Sciences and Skills I (2 credits)

This course provides learning activities that lead to functional competence in basic veterinary clinical skills and common clinical procedures used in veterinary medicine. Various instructional arenas in small and large animals will be employed.

#### CVM 5100 Veterinary Basic and Medical Sciences - PBL Module III (8 credits)

Continuation of CVM 5000 and 5020. Prerequisite: successful completion of all prior required courses.

#### CVM 5120 Veterinary Basic and Medical Sciences - PBL Module IV (8 credits)

Taken concurrently with CVM 5100, focusing on other veterinary problems. Prerequisite: successful completion of all prior required courses.

# CVM 5130 Molecular and Cellular Biology II (1 credit)

Continuation of CVM 5030. Prerequisite: successful completion of all prior required courses.

#### CVM 5140 Veterinary Issues II (2 credits)

Continuation of CVM 5040. Prerequisite: successful completion of all prior required courses.

# CVM 5160 Veterinary Clinical Sciences and Skills II (2 credits)

Continuation of CVM 5060. Prerequisite: successful completion of all prior required courses.

#### CVM 6000 Veterinary Basic and Medical Sciences - PBL Module V (8 credits)

Continuation of CVM 5100 and 5120. Prerequisite: successful completion of all prior required courses.

# CVM 6020 Veterinary Basic and Medical Sciences - PBL Module VI (8 credits)

Taken concurrently with CVM 6000, focusing on other veterinary problems. Prerequisite: successful completion of all prior required courses.

#### CVM 6030 Molecular and Cellular Biology III (1 credit)

Continuation of CVM 5130. Prerequisite: successful completion of all prior required courses.

# CVM 6040 Veterinary Issues III (2 credits)

Continuation of CVM 5140. Prerequisite: successful completion of all prior required courses.

# CVM 6060 Veterinary Clinical Sciences and Skills III (2 credits)

Continuation of CVM 5160. Prerequisite: successful completion of all prior required courses.

#### CVM 6100 Veterinary Basic and Medical Sciences - PBL Module VII (8 credits)

Continuation of CVM 6000 and 6020. Prerequisite: successful completion of all prior required courses.

#### CVM 6120 Veterinary Basic and Medical Sciences - PBL Module VIII (8 credits)

Taken concurrently with CVM 6100, focusing on other veterinary problems. Prerequisite: successful completion of all prior required courses.

# CVM 6130 Molecular and Cellular Biology IV (1 credit)

Continuation of CVM 6030. Prerequisite: successful completion of all prior required courses.

#### CVM 6140 Veterinary Issues IV (2 credits)

Continuation of CVM 6040. Prerequisite: successful completion of all prior required courses.

# CVM 6160 Veterinary Clinical Sciences and Skills IV (2 credits)

Continuation of DVM 6060. Prerequisite: successful completion of all prior required courses.

#### CVM 7000 Financial and Practice Management (1 credit)

This course is an on-campus orientation to practice management, practice economics, and career and personal development. The course focuses on aspects of modern veterinary practice and life skills management, including but not limited to: preparation of contemporary medical records (emphasis placed on Problem- Oriented Veterinary Medical Records - POVMR), how to run a veterinary practice as a business, time management, team communications skills, contract law, compensation and benefits in employment contracts, personal budgets and tax issues, negotiation skills, and establishing fee schedules.

# CVM 7010 Small Animal Practice I (2 credits)

Supervised clinical education in the academic and practical aspects of small animal (canine, feline, pet birds, reptiles) medicine and surgery carried out in carefully selected high quality and high volume private practices. Students see a wide variety of cases and directly manage medical and surgical examinations, diagnosis and management. Students are active participants in the diagnostic and therapeutic management of patients, and, as such, perform physical diagnosis and actively manage or participate in diagnostic problem-oriented decision-making. Students have the opportunity to observe clinicians as role models and become familiar with how clinicians apportion their time spent with clients, staff and other hospital matters. Students also consult with hospital managers to learn issues including records, inventories, and client billing.

# CVM 7011 Small Animal Practice II (2 credits)

This course consists of supervised clinical education in the diagnosis, treatment planning and administration of therapeutics in companion animals admitted to the Banfield, The Pet Hospital on the campus of Western University of Health Sciences. Students have primary responsibility for the preprocedural evaluation of and client education for adopted and client-owned animals. Students receive, examine, diagnose and treat adoptable patients from local rescue groups and other sources. Animals requiring additional medical management are treated accordingly.

#### CVM 7012 Small Animal Practice III (2 credits)

Supervised clinical education in the academic and practical aspects of small animal (canine, feline, pet birds, reptiles) medicine and surgery carried out in carefully selected high quality and high volume private practices. Students will see a wide variety of cases and directly manage medical and surgical examinations, diagnosis and management. Students are active participants in the diagnostic and therapeutic management of patients, and, as such, perform physical diagnosis and actively manage or participate in diagnostic problem-oriented decision-making. Students have the opportunity to observe clinicians as role models and become familiar with how clinicians apportion their time spent with clients, staff and other hospital matters. Students also consult with hospital managers to learn issues including records, inventories, and client billing.

#### CVM 7013 Small Animal Practice IV (2 credits)

Supervised clinical education in the academic and practical aspects of small animal (canine, feline, pet birds, reptiles) medicine and surgery carried out in carefully selected high quality and high volume private practices. Students will see a wide variety of cases and directly manage medical and surgical examinations, diagnosis and management. Students are active participants in the diagnostic and therapeutic management of patients, and, as such, perform physical diagnosis and actively manage or participate in diagnostic problem- oriented decision-making. Students have the opportunity to observe clinicians as role models and become familiar with how clinicians apportion their time spent with clients, staff and other hospital matters. Students also consult with hospital managers to learn issues including records, inventories, and client billing.

# CVM 7020 Livestock Practice I - Dairy (2 credits)

The goal of this course is to expose students to the practice of food animal medicine with specific focus on dairy production systems. Students may also be afforded the opportunity to be active participants in the diagnostic and therapeutic management of individual animal patients, including physical diagnosis, patient care and therapeutic problem-oriented decision-making. Emphases will be on herd health preventive programs, population medicine, record analysis, facility evaluation and animal welfare issues. While in this clinical setting, students are expected to continue building knowledge in the basic sciences through self-directed study, while developing an understanding of the clinical sciences through their experiences.

#### CVM 7021 Livestock Practice II - Meat & Fiber (2 credits)

The goal of this course is to educate students about production systems involved in the rearing of beef cattle, sheep and swine, and the practice of food animal medicine and surgery. Major emphases will be on herd health preventive programs, population medicine, record analysis, facility evaluation and animal welfare issues. The curriculum will also focus on active participation in individual animal medicine in the diagnostic and therapeutic management of patients including physical diagnosis, patient care and therapeutic problem- oriented decision-making opportunities. Core curricular competencies related to reproductive management and evaluation, surgical and obstetric techniques may be addressed. Students are expected to continue building basic science knowledge in a clinical setting and develop an understanding of clinical sciences through clinical experiences and self-directed study.

#### CVM 7025 Population Health & Production (2 credits)

This course will be administered by on-campus WesternU faculty and will include student derived off-campus field trips. On-campus activities will involve in depth discussions of population health and production topics including, but not limited to: biosecurity, preventive medicine programs, disease monitoring and surveillance, disease eradication and/or control in a population, evaluation and application of diagnostic tests in a herd, production record analysis as a diagnostic tool, management related health issues in populations, disease dynamics in a population, disease outbreak investigation, cost/benefit analysis of disease interventions, and timely topics or current events impacting population health and production. Each student will prepare a defensible proposal for a preventive medicine or herd health program in an animal population of their choice. These populations could include a livestock herd or flock, a stable, a kennel, a cattery, an animal shelter, a pet store, a zoo, an aquarium, etc. Students will present their proposals in written format to faculty for critical evaluation.

#### CVM 7030 Equine Practice I (2 credits)

This third year course provides supervised clinical education in hospital-based equine care. The students will have an opportunity to work along-side high quality, community-based equine clinicians. The students will be active participants in the diagnostic and therapeutic management of equine patients and continue to develop problem-oriented decision processes. The students will develop skills in the management of primary care patients, medical, surgical, and emergency issues as well as gaining exposure to the economics of the equine practice.

# CVM 7031 Equine Practice II (2 credits)

This third year course provides supervised clinical education in ambulatory-based equine practice. The students will have the opportunity to work along-side high quality, community-based equine clinicians. The students are active participants in the diagnostic and therapeutic management of the patient, and will continue to develop problem-oriented decision-making skills directed toward the care of the patient. These students will assume progressive responsibility in the management of primary care patients, preventive care programs, and emergencies that occur in practice as well as gaining exposure to the economics of equine practice.

# CVM 7035 Surgery/Anesthesia (2 credits)

This is a clinical experience supervised by WesternU faculty in the Banfield Veterinary Clinical Center on the campus of Western University of Health Sciences, the Upland Shelter or other facilities as needed. Students are responsible for anesthesia, surgical procedures (such as sterilization), perioperative care and client education for adopted and client-owned animals. Surgical and anesthetic experience will be gained through participation in ovariohysterectomies and/or castrations during the course. Additional surgical procedures will be performed if indicated.

#### CVM 7040 Diagnostic Laboratory & Pathology (2 credits)

This course emphasizes the efficient and effective use of laboratory services in veterinary medicine. This course includes aspects of diagnostic clinical pathology, anatomical pathology, parasitology, and microbiology (bacteriology and virology). Specimens from a variety of species are used as they are routinely processed in a veterinary diagnostic laboratory. Particular emphasis is placed on the practical applications of gross pathology and histopathology as an aid to assist general veterinary practitioners and animal owners in the identification of disease processes. Emphasis is placed on the proper collection and submission of clinical specimens from sick and deceased animals. The interpretation of laboratory test results are reviewed and discussed. In this course, students will acquire practice experience/skills in techniques used for an effective necropsy, proper examination of specific organs, and identification of lesions and postmortem changes. Students will become familiar with basic principles of tissue preservation and processing for histopathology and the recognition and interpretation of microscopic findings.

#### CVM 7045 Laboratory Animal & Research (2 credits)

This course provides an introduction to laboratory animal veterinary medical practice. Primary laboratory animal species are identified as rodents, ferrets, rabbits, and non-human primates. Students are expected to understand individual and population based medical aspects for these species. This includes basic husbandry, biomethodology (handling, restraint, injection sites and diagnostic sample collection), assessment of animal well-being and major diseases (etiology, pathogenesis, diagnosis, treatment, health surveillance methods, prevention and zoonotic risks). Animal facility management relating to animal care, biosecurity, occupational health and safety will be addressed. Students will become familiar with local, state, and Federal regulations governing research animal care and use to understand the critical role the veterinarian plays in ensuring regulatory compliance.

# CVM 7050 Zoo Animal & Wildlife (2 credits)

This course provides an introduction to veterinary practice in the field of zoological and wildlife medicine and surgery through participation in the daily activities of the veterinary staff. Students will acquire basic knowledge in a variety of clinical, surgical, and managerial skills. Emphasis will be placed on management (husbandry), transport, handling, restraint, capture, anesthesia, internal medicine, emergency and critical care, necropsy techniques and appropriate specimen collection in a variety of zoo animals. Students are expected to dedicate a portion of their time to student-centered learning activities determined by the group of students attending the course. In addition to seeing clinical cases, sessions with the course director and/or a clinical veterinarian are set aside to discuss anatomy/physiology/husbandry of non-domestic animals, journal discussion, Zoo ethics, and if time is available, the students will have an introduction to the management of zoos and the conservation efforts of zoos. Students are expected and highly encouraged to actively participate in the diagnostic and therapeutic problem-oriented decision-making of each particular case. Issues pertaining to the conservation of wildlife may be discussed depending upon the students' interest and staff availability. Students are expected to work in groups and actively apply problem-based learning (PBL) techniques to every case they encounter.

#### CVM 7055 Veterinary Public Health (2 credits)

This course will introduce the student to how veterinarians function as public health professionals. The course will build on concepts introduced in Veterinary Basic Sciences but it will challenge students to delve more deeply into the arena of Veterinary Public Health. Students will develop and understanding of the public health system in the US. They will be introduced to major zoonoses that impact human health and common methods used to diagnose, prevent and control these diseases. Other topics will include occupational health risks to people working with animals, the role of veterinarians in disaster and bioterrorism preparedness, and the concepts of emerging and re-emerging diseases. Visits to Veterinary Public Health facilities are included. On- campus activities will consist of a mix of student-centered learning activities, group discussions, presentations, written assignments and presentation by content experts.

#### CVM 7060 Food & Feed Safety (2 credits)

The primary aim of this course is to provide students with the basic knowledge regarding the role of veterinary medicine in the production of safe foods of animal origin (meat, dairy products, and eggs) and safe feeds for companion animals, poultry, livestock, and other species. The continuum from pre-harvest through post-harvest food and feed safety will be covered with emphasis on the physical, chemical and biological aspects of food safety. Principles of cleaning, disinfection, sterilization and radiation as it applies to food production will also be discussed. Students should understand the concepts of developing a Hazard Analysis Critical Control Points (HACCP) program at both the pre-harvest and post-harvest stages.

# CVM 7065 Global Animal Health (2 credits)

The goal of this course is to educate veterinary students on foreign animal diseases and global health issues so that they understand their roles and responsibilities as veterinarians in the USA, understand the global impact of foreign animal and zoonotic diseases and contribute to their control and prevention. This course will include three components: Foreign Animals Diseases, International Veterinary Medicine and USDA Accreditation. Students will gain knowledge of foreign animal diseases that are reportable in the US, including Office International des Epizooties (OIE) reportable diseases as well as the Centers for Disease Control and Prevention's Category A, B, C Bioterrorism Agents/Diseases and other important high consequence livestock pathogens and toxins. The role of USDA in international activities and other national and international animal and public health organizations, including United Nations (UN) organizations such as Food and Agriculture Organization (FAO) and the World Health Organization (WHO), as well as the OIE, will be discussed. Students will meet with representatives from both the area office of USDA-APHIS and the California Department of Food and Agriculture Animal Health and Food Safety Service to review their professional, legal and ethical responsibilities after becoming an accredited veterinarian.

# CVM 7090 Third Year Student Presentations (1 credit)

The goal of this course is to give the student the responsibility and opportunity to select, study, and present a topic of interest or original research. The topics must be explored extensively in regards to both the clinical and pre-clinical sciences and include pathophysiologic, pharmacologic, cellular and genetic basis, etc. Students are expected to conduct an extensive and exhaustive literature review, critically appraise relevant publications and utilize the dictums of evidence-based medicine in preparing the presentation. Presentations will be evaluated by the faculty using formal criteria.

#### CVM 7510 Core Veterinary Internal Medicine Rotation (4 credits, Graded H/PA/U)

Supervised clinical instruction occurs in selected, high-quality specialty internal medicine practices. Students participate in the practice of veterinary internal medicine, including diagnosis, management and treatment of diseases. Students submit SOAPs and participate in weekly rounds-type activities with faculty and classmates also participating in the Core Internal Medicine rotation. Not open for credit to students completing CVM 7515.

#### CVM 7515 Core Food Animal Medicine Rotation (4 credits, Graded H/PA/U)

This clinical rotation will provide the fourth year veterinary student interested in Food Supply Veterinary Medicine (FSVM) an opportunity to investigate, analyze and solve herd level production problems. Supervised by ACVIM, ACVPM or ACT certified veterinarians, or DVM/MBA qualified practitioners, students will participate in the practice of FSVM, including the diagnosis and management of food animal cases and weekly herd reports. Daily SOAPs are required and include the thought processes utilized in making recommendations and a proposed plan for change that would correct and/or alleviate the problems. Although all food and fiber species are covered in this course, the emphasis will be on dairy production medicine. Not open for credit to students completing CVM 7510.

# CVM 7520 Core Surgery Rotation (4 credits, Graded H/PA/U)

Supervised clinical instruction occurs in selected, high-quality specialty surgery practices. Students participate in the practice of veterinary surgery, including diagnosis, management and treatment of diseases. Students submit medical records and surgery reports as well as participate in weekly roundstype activities with faculty and classmates also participating in the Core Surgery rotation.

# CVM 7530 Selective Alternative Medicine Rotation (4 credits, Graded H/PA/U)

This rotation is designed to provide a clinical experience in the application of alternative medicine practices, including alternative, complementary and homeopathic medicine, in managing animal health. Students will gain experience in both the clinical application and scientific basis for alternative approaches to medical and surgical management of veterinary patients. Under direct supervision of an alternative medicine practitioner, students will be given responsibility for the management of individual cases and encouraged to participate in the decision-making process and clinical reasoning. Repeatable to a maximum of 8 credits.

#### CVM 7531 Selective Anatomic Pathology Rotation (4 credits, Graded H/PA/U)

This rotation provides students with hands-on experience in diagnostic pathology of multiple species, with an opportunity to perform necropsies, review pathology submission forms, review and write pathology reports (description and diagnosis) and request ancillary tests. Students will also have an opportunity to follow up on the histopathology of assigned cases, and to look into histopathology of submitted surgical materials (biopsies) if available. Depending on a student's interest and availability, the rotation may also include some clinical pathology experience. These activities will be performed under the supervision of pathologists and pathology residents. Repeatable to a maximum of 8 credits.

#### CVM 7532 Selective Ancillary Diag. in Medicine & Pathology Rotation (4 credits, Graded H/PA/U)

This rotation provides students with hands-on experience in ancillary diagnostic methods available to clinicians and pathologists. This rotation may include some or all of the following: clinical pathology (hematology, cytology, clinical chemistry and urinalysis), microbiology (bacteriology, virology with immunology, and mycology), toxicology and parasitology. It will provide an opportunity to review the appropriate submission forms and gain experience in available tests and methods for isolation/identification of agents (also, antibodies and histopathological changes) including specimen handling and processing, data collection and evaluation with assessment of their role in final diagnosis. Students will also have an opportunity to discuss and follow up on their diagnostic findings. These activities will be performed under the supervision of pathologists, expert diagnosticians and/or residents. Repeatable to a maximum of 8 credits.

#### CVM 7533 Selective Anesthesia Rotation (4 credits, Graded H/PA/U)

This rotation is designed to provide clinical experience in the use of anesthetics in small companion animals, horses, and/or food animals. The student will develop an understanding of the selection, dosage, and administration of anesthetic drugs and other life supportive therapy. Under direct supervision of the anesthesia team, students will ideally be given responsibility for the management of individual cases and encouraged to participate in the decision-making process and clinical reasoning. Repeatable to a maximum of 8 credits.

# CVM 7534 Selective Aquatic Medicine Rotation (4 credits, Graded H/PA/U)

This rotation is designed to provide a clinical experience focused on the health and management of freshwater and/or marine species, including diagnosis and treatment of common diseases and the pathology associated with them. Under direct supervision of an aquatic animal medicine veterinarian, students will be given responsibility for the management of individual and population cases and encouraged to participate in the decision-making process and clinical reasoning. Repeatable to a maximum of 8 credits.

# CVM 7535 Selective Avian Practice Rotation (4 credits, Graded H/PA/U)

This rotation is designed to provide a clinical experience focused on the practice of veterinary medicine on avian species, including pet birds and non-agricultural poultry. Students will develop an understanding of the diagnosis and treatment of common and zoonotic diseases and the nutritional management of pet birds and poultry. Under direct supervision of an avian medicine veterinarian, students will ideally be given responsibility for the management of individual and population cases and encouraged to participate in the decision-making process and clinical reasoning. Repeatable to a maximum of 8 credits.

#### CVM 7536 Selective Beef Cattle Practice Rotation (4 credits, Graded H/PA/U)

This rotation provides students the opportunities to gain experience in cow/calf, feedlot and/or stocker health management. Students will become familiar with common diseases of beef cattle and the epidemiology, diagnosis, treatment, prevention and control of those diseases in individual animals and cattle populations. Along with gaining an understanding of cattle management practices related to housing, feeding, marketing and culling, students will become familiar with the structure and organization of the beef industry. Under direct supervision of a beef cattle practitioner, students will be given responsibility for the management of individual and population cases and encouraged to participate in the decision-making process and clinical reasoning. Repeatable to a maximum of 8 credits.

# CVM 7537 Selective Behavior Rotation (4 credits, Graded H/PA/U)

This rotation provides an opportunity to study basic principles of animal behavior (ethology, psychology, and neuroscience) and their application in clinical, shelter and/or house call veterinary practices. Under the direct supervision of a veterinary behaviorist, students will have an opportunity to learn how to take behavioral histories, identify, assess and treat common behavioral problems in companion animals in clinical settings. The degree to which students will actively participate in the interviewing, assessment, and interactions with the patient and client and decision making processes regarding treatment will vary with the student, practice, and type of problem. Rotations associated with shelters or rescue agencies will have opportunities to become familiar with behavioral evaluations and treatment of animals in such facilities. Repeatable to a maximum of 8 credits.

#### CVM 7538 Selective Camelid Practice Rotation (4 credits, Graded H/PA/U)

This rotation provides opportunities to learn diagnosis, treatment, prevention and control common diseases in camelids. The student will develop competence in health management and fiber production topics at both the individual animal and herd level. Under direct supervision of a camelid practitioner, students will ideally be given responsibility for the management of individual and population cases and encouraged to participate in the decision-making process and clinical reasoning. Repeatable to a maximum of 8 credits.

# CVM 7539 Selective Canine & Feline Practice Rotation (4 credits, Graded H/PA/U)

This rotation provides students with the opportunity to participate in the diagnosis and treatment of common diseases and conditions seen in contemporary canine and feline veterinary medicine. Under the direct supervision of board certified canine and feline practitioner, students will be responsible for the management of individual cases and participate in decision making and clinical reasoning regarding their patients. Procedures students may experience include radiology, ultrasonography, endoscopy, clinical pathology, fluid therapy, electrocardiology, dentistry, and surgery. Students will be given responsibility for the management of individual cases and are encouraged to participate in the decision-making process and clinical reasoning. Repeatable to a maximum of 8 credits.

### CVM 7540 Selective Cardiology Rotation (4 credits, Graded H/PA/U)

This rotation provides students with the opportunity to learn the presenting signs, historical findings, breed predilections, methods of diagnosis, and medical and surgical interventions for the most commonly seen cardio respiratory conditions. Exposure to diagnostics, including cardiovascular physical examination, electrocardiography, radiography, and echocardiography is expected. Under direct supervision of a veterinary cardiologist, students will ideally be given responsibility for the management of individual cases and encouraged to participate in the decision-making process and clinical reasoning. Repeatable to a maximum of 8 credits.

# CVM 7541 Selective Dairy Practice Rotation (4 credits, Graded H/PA/U)

This rotation provides students the opportunities to gain experience in dairy health management. Students will become familiar with the common problems of dairy cattle encountered in dairy practice including infectious disease, metabolic disorders and management-related syndromes. The student will gain an understanding of, and will experience the techniques involved with, the epidemiology, diagnosis, treatment, prevention and control of these diseases/disorders in individual animals and cattle populations. Students will be exposed to, and become familiar with, the structure and organization of the dairy industry, common dairy management practices, the predominant housing systems, accepted feed delivery systems, marketing channels and culling practices. Under direct supervision of a dairy practitioner, students will be given responsibility for management of individual animal cases and are encouraged to participate in the management and consultation practices of herd health. Repeatable to a maximum of 8 credits.

#### CVM 7542 Selective Dentistry Rotation (4 credits, Graded H/PA/U)

This rotation provides students the opportunity to develop clinical expertise in diagnosis, management, medical treatment, and surgical techniques commonly utilized in veterinary dentistry. Under the direct supervision of a veterinary dental specialist, students will be engaged in exchange of theoretical knowledge with the specialist via consultations and conversations, diagnosing congenital oral problems, taking and interpreting dental radiographs, working up oral cases, and collaborating with the dentist in client education regarding oral preventive medicine of common oral and dental diseases of domestic animals. Students will be given responsibility for the management of individual cases and encouraged to participate in the decision-making process and clinical reasoning. Repeatable to a maximum of 8 credits.

### CVM 7543 Selective Dermatology Rotation (4 credits, Graded H/PA/U)

This rotation enables the student to develop, expand and apply knowledge of dermatology, and provides clinical experience in veterinary dermatology. Students will develop competency in the diagnosis, treatment, and prevention of a range of dermatologic diseases from a variety of pathogenic and etiologic categories. Under direct supervision of a dermatology specialist, students will be given responsibility for the management of individual cases and encouraged to participate in the decision-making process and clinical reasoning. Repeatable to a maximum of 8 credits.

#### CVM 7544 Selective Emergency Medicine & Critical Care Rotation (4 credits, Graded H/PA/U)

This rotation exposes the student to the high standards of practice in veterinary emergency and critical care. The student will have the opportunity to develop knowledge and skills relating to the diagnosis, management, therapy, prevention and control of animal diseases requiring emergency or critical care management. This rotation provides the opportunity to develop skills required in the emergency and critical care setting. Under the direct supervision of an emergency and critical care veterinarian, students will be given responsibility for case management, development of decision-making processes and clinical reasoning for individual cases. Repeatable to a maximum of 8 credits.

#### CVM 7545 Selective Epidemiology Rotation (4 credits, Graded H/PA/U)

This rotation provides students with practice in the application of epidemiologic principles in the practice of veterinary medicine and/or public health. Students may be involved in planning strategies for disease prevention, disease monitoring and surveillance, analysis of population data, outbreak investigation, observational research or other aspects of clinical epidemiology. Students are encouraged to participate in any decision-making processes and contribute positively in hands-on projects and activities. Repeatable to a maximum of 8 credits.

#### CVM 7546 Selective Equine Practice Rotation (4 credits, Graded H/PA/U)

This rotation provides students with an opportunity to participate in the diagnosis, management and treatment of common diseases and conditions seen in contemporary equine medicine. Equine practice settings may include preventive and general medicine/surgery procedures including radiology, ultrasonography, endoscopy, lameness evaluation, dentistry, and reproductive services. Students may experience the practice of equine medicine and surgery in both ambulatory and in-house settings. Under the direct supervision of an equine practitioner, students will be given guided responsibility for the management of individual cases and encouraged to participate in the decision-making process and clinical reasoning. Repeatable to a maximum of 8 credits.

### CVM 7547 Selective Exotics Practice Rotation (4 credits, Graded H/PA/U)

This rotation provides practical experience in the diagnosis, treatment and prevention of disease in exotic pets (avian, amphibians, reptiles, rodents, lagomorphs, other small mammals and pet fish). Under direct supervision of an exotics practitioner, students will ideally be given responsibility for the management of individual cases and encouraged to participate in the decision-making process and clinical reasoning. Repeatable to a maximum of 8 credits.

#### CVM 7548 Selective Feline Practice Rotation (4 credits, Graded H/PA/U)

This rotation, under the supervision of a board certified feline practitioner, helps the student gain familiarity with the most common feline medical and surgical cases, and the commonly associated clinical procedures. The student will be exposed to the ethical, legal, and financial aspects of a feline practice. Students will gain exposure to a variety of diagnostic techniques and modalities including radiology, ultrasonography, endoscopy, clinical pathology, electrocardiology, fluid therapy, dentistry, and surgery. Students will be given responsibility for the management of individual cases and are encouraged to participate in the decision-making process and clinical reasoning. Repeatable to a maximum of 8 credits.

### CVM 7549 Selective Food Animal Practice Rotation (4 credits, Graded H/PA/U)

This rotation provides students with an opportunity to participate in the practice of contemporary food animal production medicine. Students will participate in the delivery of health management programs, investigation of health problems, diagnosis and medical or surgical treatment of ill or injured animals and the review and/or implementation of approaches to enhance productivity in farm animals such as dairy cattle, sheep, goats, and swine. Under supervision of a food animal practitioner, students will be given responsibility for management of individual animal cases and are encouraged to participate in the management and consultation practices of herd health. Repeatable to a maximum of 8 credits.

### CVM 7550 Selective General Practice Rotation (4 credits, Graded H/PA/U)

This rotation will provide students with the opportunity to experience the practice of general veterinary medicine. Practices whose veterinary staff practice high quality medicine, but may not hold additional credentials or discipline experience to qualify as specialists, provide valuable educational experiences in the diagnosis, treatment and prevention of disease in a single or multi-species setting. Under direct supervision of a general practitioner, students will be given responsibility for the management of individual cases and are encouraged to participate in the decision-making process and clinical reasoning. Repeatable to a maximum of 8 credits.

### CVM 7551 Selective Internal Medicine Rotation (4 credits, Graded H/PA/U)

In this rotation students participate in the practice of clinical veterinary internal medicine. Students develop a detailed knowledge of the principles and techniques used in internal medicine with emphasis on patient evaluation, diagnosis and treatment of common diseases. Under direct supervision of an internal medicine specialist, students will be given responsibility for the management of individual cases and are encouraged to participate in the decision-making process and clinical reasoning. Repeatable to a maximum of 8 credits.

### CVM 7552 Selective Global Health Rotation (4 credits, Graded H/PA/U)

Through this rotation, students will be exposed to new cultures and socio-cultural habits and learn the different roles of animals in the given society, and will become familiar with health issues of global concern. They will be introduced to the trans-boundary diseases that are prevalent in the country they are visiting. Disease control programs in developed and developing countries will be compared as well as the role of internal health organizations in disease, control and prevention at the local and global levels. Disease transmission in poor rural settings and the challenges that poverty, lack of education and socio-cultural and religious beliefs pose to disease control will also be explored. This rotation will take students out of their comfort zones, test their level of tolerance, their level of responsibility in the world, their levels of sensitivity, and give them the opportunity to work with people from different social and cultural backgrounds. Repeatable to a maximum of 8 credits.

### CVM 7553 Selective Laboratory Animal Medicine Rotation (4 credits, Graded H/PA/U)

This rotation will acquaint the student with the careers available in laboratory animal medicine. The student will learn how to restrain, perform physical examinations, administer medications, collect samples, and anesthetize common laboratory animals. The student will become familiar with diseases of laboratory animals and the correlation of clinical findings with gross and microscopic changes along with normal anatomy. The student will learn about regulations affecting the welfare of laboratory animals and the roles and responsibilities of the laboratory animal veterinarian in this area. This will include understanding the role of the Institutional Animal Care and Use Committee (IACUC) in monitoring the program of animal care in the research facility and in evaluating research protocols. The student may participate in daily rounds, necropsies, surgical and therapeutic procedures. The student may be asked to present a seminar(s) on a selected topic. Repeatable to a maximum of 8 credits.

### CVM 7554 Selective Neurology Rotation (4 credits, Graded H/PA/U)

This rotation will help the student develop expertise in the examination, diagnosis and management of disorders of the nervous system. Under direct supervision of veterinary neurologist, students will be given guided responsibility for the management of individual cases and are encouraged to participate in the decision- making process and clinical reasoning. Repeatable to a maximum of 8 credits.

### CVM 7555 Selective Nutrition Rotation (4 credits, Graded H/PA/U)

This rotation provides students with opportunities to increase their knowledge in the application of nutrition to maintain and improve animal health. Students will develop an understanding of nutritional requirements of domestic animals and methods used to evaluate the rations/diets delivered to these animals. The student will be able to determine if deficiencies or excesses exist and will gain experience in adjusting the nutritional plan to correct for those imbalances. The student will gain the knowledge necessary to make pertinent and valid recommendations concerning the nutritional plan to be developed for and utilized in the face of disease or for normal animals as they progress through the differing stages of their life, production and reproduction cycles. The student will gain knowledge of the characteristics of common feedstuffs used in the formulation of animal diets. Diagnosis, treatment, and prevention of common nutritional-based diseases in major veterinary species will also be addressed. Additionally, students may gain experience in HACCP and other regulatory procedures used to ensure safe production of animal feedstuffs. Repeatable to a maximum of 8 credits.

### CVM 7556 Selective Oncology Rotation (4 credits, Graded H/PA/U)

This rotation provides experience in the diagnosis and treatment of cancer in domestic animals. Specific topics generally include cancer management strategies such as diagnostic techniques, treatment options, ethical considerations and client communication skills. Under direct supervision of a veterinary oncologist, students will be given responsibility for the management of individual cases and are encouraged to participate in the decision-making process and clinical reasoning. Repeatable to a maximum of 8 credits.

### CVM 7557 Selective Ophthalmology Rotation (4 credits, Graded H/PA/U)

This rotation provides the student exposure to diagnostic ophthalmology. Students learn how to perform a complete ocular examination, apply ophthalmic diagnostic tests, use specialized equipment and apply basic technical skills necessary for ophthalmic treatments. The student will be exposed to various ophthalmic surgeries, including both intra-ocular and extra-ocular procedures. Under direct supervision of a veterinary ophthalmologist, students will be given responsibility for the medical management of individual cases and are encouraged to participate in the decision-making process and clinical reasoning. Repeatable to a maximum of 8 credits.

### CVM 7558 Selective Poultry Medicine Rotation (4 credits, Graded H/PA/U)

This rotation provides students the opportunity to develop their clinical knowledge and skills relative to the health care and management of poultry species, including the diagnosis and treatment of common diseases. Under direct supervision of a poultry veterinarian, students should gain an understanding of poultry production medicine and the management of individual and population cases. Students will be involved in the clinical reasoning and decision-making processes for these cases and should be able to incorporate preventive medicine knowledge with economic strategies as it impacts animal welfare, farm productivity, environmental health, disease control and biosecurity, and food safety. Repeatable to a maximum of 8 credits.

### CVM 7559 Selective Public Health Rotation (4 credits, Graded H/PA/U)

This rotation offers students an in depth exposure to those aspects of veterinary science that have a direct impact on the physical, social and mental well-being of humans. Students will work with Public Health Veterinarians in venues which will allow them to apply their knowledge of the core domains of veterinary public health. These venues include private sector, governmental agencies or academic institutions which have a strong veterinary public health component, regardless of whether that institution's primary focus is human or animal health. Repeatable to a maximum of 8 credits.

### CVM 7560 Selective Public Policy Rotation (4 credits, Graded H/PA/U)

This course is a supervised and evaluated public policy rotation available at faculty-approved governmental affairs programs, industry trade associations, professional groups or associations, non-profit organizations, governmental bodies or agencies, or businesses/corporations. Supervised by a public policy professional, students will be introduced to, and participate in, the public policy process as it impacts the veterinary profession and/or the role and welfare of animals in society. This will include the identification of public policy problems, the setting of policy agendas, analysis of the public policy process and cycle and to the issues related to the delivery, implementation and evaluation of public policies. Repeatable to a maximum of 8 credits.

### CVM 7561 Selective Radiation Oncology Rotation (4 credits, Graded H/PA/U)

This is designed to provide a clinical experience for the students in treatment of spontaneous tumors in dogs and cats by the use of external beam radiation therapy, in vivo radioisotope therapy and isotope seed implants. The students will be under the supervision of radiation oncologists. The students will gain experience in management, treatment, medical decision-making and clinical reasoning. Repeatable to a maximum of 8 credits.

# CVM 7562 Selective Radiology Rotation (4 credits, Graded H/PA/U)

This rotation is intended to develop the student's interpretation skills in diagnostic imaging. Students will develop skills in systematic film evaluation of the appendicular skeleton, abdomen, thorax, spine, and skull and provide differential considerations of the radiographic findings. Depending on caseload, students will use radiographic, CT, ultrasonographic, echocardiographic, and nuclear medicine imaging techniques to evaluate animal patients. Repeatable to a maximum of 8 credits.

### CVM 7563 Selective Regulatory Medicine Rotation (4 credits, Graded H/PA/U)

This rotation will provide students with opportunities to experience the role of veterinarians in regulatory practice. Regulatory practice includes implementation, assessment, and analysis of the results of mandatory animal health protocols. Protocols may include state, federal, or international disease surveillance, monitoring, and control measures. Students may also experience activities related to compliance with import and export regulations, enforcement of quarantine orders, and investigation of reportable disease incidence or outbreaks. Students will be supervised by veterinarians employed as a State or Federal Veterinary Medical Officer or similar positions. Repeatable to a maximum of 8 credits.

### CVM 7564 Selective Research Rotation (4 credits, Graded H/PA/U)

This rotation provides students with a research experience. The student will learn principles of experimental design and good laboratory practices. Early in the rotation, the student will develop a specific hypothesis and design a protocol to test the hypothesis. The student will maintain a laboratory notebook, documenting the procedures and assays that are performed on a daily basis, as well as, define and explain the scientific questions that each assay is addressing and the underlying mechanisms by which the assays operate. Depending upon the rotation site, the student may participate in laboratory meetings, seminars, and/or journal clubs. At the end of the rotation, the student will prepare a one page summary of their research project, which will be written in abstract form that contains both a title and an author(s) section, with the body of the abstract addressing the background, objectives, methods, results, and conclusions of the project. Additionally, a four to five -page technical summary of the research project will be prepared. This document should be written in manuscript format, including an abstract (same as above), introduction, methods, results, and conclusions/discussion sections. Repeatable to a maximum of 8 credits.

### CVM 7565 Selective Rural Practice Rotation (4 credits, Graded H/PA/U)

This rotation provides an opportunity for students to experience the practice of veterinary medicine in the unique culture of rural America. Students will experience high quality veterinary medicine, often times in a mixed animal practice setting, where the veterinarians serve a vital role in sustaining animal health and economic viability of the local community. Under direct supervision of a rural veterinarian, students will ideally be given responsibility for the management of both individual animal and population health cases and encouraged to participate in the decision-making process and clinical reasoning. Students are expected to participate in after hours and emergency calls with their preceptor. Repeatable to a maximum of 8 credits.

#### CVM 7566 Selective Shelter Medicine Rotation (4 credits, Graded H/PA/U)

In this rotation students participate in medical assessment of, and providing veterinary medical care to, shelter housed animals. Topics such as infectious disease surveillance, prevention and control of infectious diseases, temperament testing and participation in discussions, evaluations, and demonstrations of behavioral assessments of shelter animals are included. Under the direction of a shelter veterinarian(s), students will examine, develop diagnostic and treatment plans for shelter animals utilizing triage and consider financial limitations associated with the facility. Students will evaluate small animals pre-operatively, and will participate in surgical sterilization, and monitor post-operative recovery. Repeatable to a maximum of 8 credits.

### CVM 7567 Selective Sports Performance Medicine Rotation (4 credits, Graded H/PA/U)

This rotation provides educational experiences for the student to develop clinical competencies in the field of sports medicine. Sports medicine is an interdisciplinary program incorporating specialists in lameness, orthopedics, cardiopulmonary disease, neurology, integrative therapies and endocrine diseases with an advance array of imaging equipment. During the rotation the student will be exposed to the basic knowledge content of sports medicine as it relates to primary care medicine, understanding the role of exercise physiology, injury prevention, injury management, and rehabilitation of common exercise and sports related acute and chronic injuries. Repeatable to a maximum of 8 credits.

### CVM 7568 Selective Small Ruminant Practice Rotation (4 credits, Graded H/PA/U)

This rotation provides opportunities to participate in the diagnosis, treatment, prevention and control of common diseases in small ruminants. The student will develop competence in health management and meat and fiber production topics at both the individual animal and herd level. Students will develop an understanding of the economics of modern small ruminant production medicine and their influence on marketing strategies and health management decisions. Under direct supervision of a small ruminant practitioner, students will ideally be given responsibility for the management of individual and population cases and encouraged to participate in the decision-making process and clinical reasoning. Repeatable to a maximum of 8 credits.

### CVM 7569 Selective Surgery Rotation (4 credits, Graded H/PA/U)

This rotation provides students with an opportunity to participate in the diagnosis and treatment of common surgical diseases. In this rotation students will be provided an opportunity to apply surgical theory, continue to develop surgical skills, techniques and principles mastered in the third year surgery course. Students are expected to participate in and (under supervision) perform routine general practice surgery as well as assisting with the complex surgical cases. Under direct supervision the students will be responsible for the management and decision-making process of individual cases. Repeatable to a maximum of 8 credits.

### CVM 7570 Selective Swine Practice Rotation (4 credits, Graded H/PA/U)

This rotation provides students with an opportunity to participate in the diagnosis and treatment of common diseases and conditions seen in contemporary swine production medicine. Preventive medicine strategies will be emphasized through the production record analysis and routine herd health visits. Students will also become familiar with the Pork Quality Assurance (PQA) program and the veterinarians role in ensuring food quality and safety and promoting swine health and welfare. Under direct supervision of a swine practitioner, students will be provided with opportunities to develop & demonstrate entry-level competencies in clinical swine medicine & health management techniques. Repeatable to a maximum of 8 credits.

### CVM 7571 Selective Theriogenology Rotation (4 credits, Graded H/PA/U)

In this rotation students learn the physiology and pathology of male and female reproductive systems. Students will explore the clinical practice of veterinary obstetrics, gynecology, and semenology and reproductive diagnostic techniques used in domestic animals. Breeding soundness evaluation of male and female patients, semen collection, evaluation, preservation and artificial insemination will be discussed or performed under supervision of a theriogenologist. Embryo collection, evaluation, micromanipulation, preservation and transfer may also be available. Trans-abdominal, vaginal, and rectal examination of the reproductive tract will be performed using manual and ultrasound techniques. Students will also learn expectations for fertility on a herd and individual basis, measuring fertility, monitoring fertility and fertility control schemes. Repeatable to a maximum of 8 credits.

### CVM 7572 Selective Toxicology Rotation (4 credits, Graded H/PA/U)

This rotation provides students with an opportunity to participate in the diagnosis and clinical management of poisoned patients. In this rotation students will appreciate the clinical approach to patients, who have been exposed to toxins, acutely and chronically, from a variety of sources including iatrogenic, environmental, and nutritional. In small animal cases, students will learn to approach the diagnosis and treatment of poisoned patients in a systematic and holistic manner. In large animal cases, students will learn to consider not only the health of the patient, but the implication of secondary exposures to other species, including humans, when poisoned animals and their food products enter either animal or human food products. Additionally, students may have the opportunities to learn about regulatory toxicology issues as they relate to environmental health, biosecurity, bioterrorism, and food and drug safety. Repeatable to a maximum of 8 credits.

### CVM 7573 Selective Wildlife Medicine Rotation (4 credits, Graded H/PA/U)

This rotation is designed to provide a clinical experience focused on the health, management, and conservation of wildlife species, including diagnosis and treatment of common diseases and the pathology associated with them. Under direct supervision of a wildlife veterinarian, students will be given responsibility for the management of individual and/or population cases and are encouraged to participate in the decision- making process and clinical reasoning. Repeatable to a maximum of 8 credits.

### CVM 7574 Selective Zoological Medicine Rotation (4 credits, Graded H/PA/U)

This rotation will acquaint the student with the careers in Zoo Animal Medicine. The student will be exposed to clinical techniques, including restrain, physical examinations, administering medications, collecting samples, anesthesia, and diagnostic imaging of a variety of zoo animals. The student will become familiar with preventive medicine, quarantine procedures, nutrition and husbandry of zoo animals. The student will learn about regulations affecting the welfare of zoo animals as well as the roles and responsibilities of the zoo veterinarian in this area. Under direct supervision of the zoo veterinarian, the student may participate in daily rounds, necropsies, surgical and therapeutic procedures. The student may be asked to present a seminar on a selected topic. Repeatable to a maximum of 8 credits.

### CVM 8090 Independent Study (1-8 credits, CR/NCR)

Supervised student-centered learning experience in a clinical, administrative or research setting. Repeatable to a maximum of 8 credits. Year 4 students are limited to a total of 8 combined credits for concurrent enrollment in CVM 8090 and CVM 8095. Prior permission of the Dean's Office is required in order to repeat this course. Credit awarded for this course does not count toward the total number of credit hours required for the DVM degree.

#### CVM 8095 Research Thesis (2-8 credits, CR/NCR)

The goal of this course is to improve the scholarly writing and scientific presentation skills of students. These skills are especially relevant to students considering further clinical (internship or residency) or research (MS or PhD) training after graduation. This course is applicable to students who have previously completed a research rotation (CVM 7564), independent study (8090) or been engaged in scholarly activities during their clinical rotations or during summer programs. The course is designed to allow final preparation of the scholarly writing (article submitted for publication or thesis), preparation of an abstract, and public defense. Students may elect to enroll in this course during Years 2, 3 or 4, and must complete the course prior to graduation. Repeatable to a maximum of 8 credits. Year 4 students are limited to a total of 8 combined credits for concurrent enrollment in CVM 8090 and/or CVM 8095. Prior permission of the Dean's Office is required to repeat this course. Credit awarded for this course does not count toward the total number of credit hours required for the DVM degree.

### IPE 5000 Patient Centered Cases I - An Interprofessional Approach (1 credit, CR/NCR)

This course is a required university seminar for all first year health professional students. This course prepares students to practice health care services through a team approach. Working in small interprofessional teams, students will explore cases representing conditions across the life span. The cases will integrate elements common to all professionals such as ethical, behavioral, social and psychological issues. This course is a graduate requirement for all health professional programs.

### IPE 5100 Patient Centered Cases II - An Interprofessional Approach (1 credit, CR/NCR)

This course is a required university seminar for all first year health professional students. This course prepares students to practice health care services through a team approach. Working in small Interprofessional teams, students will explore cases representing conditions across the life span. The cases will integrate elements common to all professionals such as ethical, behavioral, social and psychological issues. This course is a graduate requirement for all health professional programs.

# IPE 6000 Team Training in Healthcare I (1 credit, CR/NCR))

IPE 6000 will continue to build upon the knowledge from the IPE 5000 series, but will expand upon that knowledge and require the student to learn and apply advanced tools and strategies that are crucial to develop a collaborative healthcare team. The majority of the course is independent study with students engaging in a large-scale tabletop activity where they apply team tools necessary to solve a healthcare dilemma.

#### IPE 6100 Team Training in Healthcare (1 credit, CR/NCR)

Continuation of IPE 6000.

# **Honors and Awards**

Awards are presented annually at WesternU-CVM's Honors Day ceremony, which generally takes place in March or April, and Fourth Year Awards ceremony in May.

# **Academic Calendar**

\*Year 3 and 4 students observe their preceptor's hours, which may include working on federal holidays.

#### Fall 2013

Monday, June 3, 2013

Fall Semester Classes Begin (Year 4)

Thursday, July 4, 2013

Independence Day - No Classes\*

<u>August 5 – August 9, 2013</u>

Orientation Week (Year 1, Mandatory) Fall Semester Classes Begin (Year 3)

Thursday, August 8, 2013

Orientation (Year 2, Mandatory)

Saturday, August 10, 2013

Convocation/White Coat Ceremony

(Year 1 Mandatory)

Monday, August 12, 2013

Fall Semester Classes Begin (Years 1 and 2)

Monday, September 2, 2013

Labor Day - No Classes\*

Monday, October 14, 2013

Columbus Day – No Classes\*

Wednesday, November 27, 2013

Thanksgiving Recess Begins @ 5:00 p.m.\*

Monday, December 2, 2013

Classes Resume

Friday, December 20, 2013

End of Fall Semester Classes (Years 1-4)

Monday, December 23, 2013

Winter Recess Begins (Years 1-4)

### Spring 2014

Monday, January 6, 2014

Spring Semester Classes Begin (Years 1-4)

Monday, January 20, 2014

Martin Luther King Day - No Classes\*

Monday, February 17, 2014

President's Day - No Classes\*

Monday, March 10, 2014

Spring Break Begins (Year 3)

Monday, March 17, 2014

Spring Break Begins (Years 1-2)

Spring Semester Classes Resume (Year 3)

Monday, March 24, 2014

Spring Semester Classes Resume (Years 1-2)

Wednesday, May 14, 2014

End of Spring Semester Classes (Year 4)

Wednesday-Friday, May 14-16, 2014

Commencement

Friday, May 16, 2014

End of Spring Semester Classes (Year 3)

Friday, May 23, 2014

End of Spring Semester Classes (Years 1-2)

### Veterinarian's Oath

Being admitted to the profession of veterinary medicine, I solemnly swear to use my scientific knowledge and skills for the benefit of society through the protection of animal health and welfare, the prevention and relief of animal suffering, the conservation of animal resources, the promotion of public health, and the advancement of medical knowledge.

I will practice my profession conscientiously, with dignity, and in keeping with the principles of veterinary medical ethics.

I accept as a lifelong obligation the continual improvement of my professional knowledge and competence.

Approved by the House of Delegates, 1954; Revision approved by the House of Delegates, 1969; Revision approved by the Executive Board of the American Veterinary Medical Association in 1999, 2010.

# **Graduate College of Biomedical Sciences**

Master of Science in Medical Sciences

### Accreditation

Western University of Health Sciences is accredited by the Accrediting Commission for Senior Colleges and Universities of the Western Association of Schools and Colleges (WASC) -985 Atlantic Venue, Suite 100. Alameda, CA 94570. (510) 748-9001. Approval of the MS in Medical Sciences by the Western Association of Schools and Colleges occurred on June 18, 2010.

# **Program Goals**

The Master of Science in Medical Sciences in the Graduate College of Biomedical Sciences (GCBS) will equip graduates with the critical evaluation skills necessary to implement evidence-based clinical practice and prepare qualified pre-health professional students, who have obtained a baccalaureate degree, for successful application to professional programs, both external and internal, in a unique, rigorous, and inter-professional environment.

# **Program Overview**

A minimum of 46.50 semester credit hours is required for completion of the Master of Science in Medical Sciences program. This includes 28 hours of didactic study and 12 hours of clinical shadowing, research, small group case-based learning, and laboratory work leading to a thesis. The program emphasizes integration of biomedical sciences and research-based knowledge in clinical decision making. Courses, laboratory experiences, and research will serve to provide students with the skills required to integrate scientific knowledge, literature evaluation and clinical decision making, and will culminate in a capstone course, assessed by examination and final project.

# **Program Faculty**

Program faculty has appointments in the Colleges of Biomedical Sciences, Osteopathic Medicine of the Pacific, Veterinary Medicine, Pharmacy, Dental Medicine, and College of Allied Health Professions, as well as accredited outside institutions of postsecondary education. Their areas of research emphasis include molecular biology, microbiology, biochemistry, immunology, neuroscience, anatomy, physiology and education.

### **Application and Admissions Requirements**

Applicants must possess a Bachelor of Science degree with strong science component. The minimum criteria to receive consideration for admission are listed below. Meeting these criteria, however, does not guarantee admission into the program.

- A completed Western University of Health Sciences Graduate Application form (including all supplemental information and secondary application material).
- Official transcripts of all coursework taken.
- Official test scores taken within the last five (5) years for one or more of the following:
  - The general aptitude portion (verbal, quantitative, and analytical) of the Graduate Record Examination (GRE)

- Medical College Admissions Test (MCAT) for pre-medical and pre-podiatry students
- Dental Admission Test (DAT) for pre-dental students
- Optometry Admissions Test (OAT) for pre-optometry students
- Three letters of reference from individuals familiar with the applicant's scholarship, appropriateness for a health care profession, and research potential. One letter needs to be from a science faculty member.

### **Admission Prerequisites**

- A bachelor's degree with a strong science component
- At least a 2.5 overall grade point average

At least a 2.75 GPA overall in all prerequisite science courses

- Completion of the following undergraduate courses with a grade of C- or better:
- General Chemistry with laboratory (8 semester units)
- Organic Chemistry with laboratory (8 semester units)
- Introductory Biology with laboratory (8 semester units)
- General Physics with laboratory (8 semester units)
- English (6 semester units)
- Behavioral Sciences (6 semester units)

Besides a strong academic record, we are looking to accept students who demonstrate the ability to integrate and disseminate information, who have outstanding communication and interpersonal skills, and who demonstrate caring and empathy towards other people and experimental animals.

### **Application Process**

Applications and detailed information on how to apply can be found at: <a href="http://prospective.westernu.edu/medical-sciences/apply-4/">http://prospective.westernu.edu/medical-sciences/apply-4/</a>.

All applicants must submit the following directly to WesternU Admissions Office:

- WesternU- Master of Science in Medical Sciences online application
- Non-refundable \$50.00 application fee
- GRE/MCAT/DAT/OAT
- TOEFL scores (for graduates of foreign universities)

- A personal statement
- A current résumé
- 3 letters of reference
- All college transcripts

# **Application Deadline**

Applications must be received (including all supporting application materials) no later than February 1<sup>st</sup> of the year in which the applicant wishes to matriculate. Completed applications that arrive before the deadline will be considered on a rolling basis.

### **Applicants with Foreign Coursework**

Applicants who wish to use coursework completed outside the United States must submit their transcripts for evaluation to a <u>Western University of Health Sciences Approved Service</u> at the candidate's expense. A course-by-course evaluation is required and all coursework must be designated as undergraduate, graduate or professional. Western University only honors evaluations from one of the above services. The official evaluation must be included with the supplemental application packet.

#### **International Students**

International students and any other applicants who are not U.S. citizens and who are living in the U.S. should be prepared to provide proof of legal U.S. residency at the time of interview. Proof of legal U.S. residency is required prior to any offer of acceptance. For more detailed information, please visit our web page for <u>International Students</u>.

#### **Transfer Credit**

Ordinarily, transfer credit will not be accepted. Under extraordinary circumstances, the faculty of the Master of Science in Medical Sciences program may allow up to 9 credit hours to transfer if the coursework has been completed within an accredited graduate or professional program and there is compelling reason provided for the transfer. In order to have a course transferred the student must provide the catalog description and course syllabus in order that the appropriate faculty can approve the course's subject equivalency. Once these materials have been submitted to the Director, they will be reviewed ordinarily within 10 working days, by appropriate faculty, and a decision about equivalency and transferability will be made. The Program Director will notify the student of the decision by email. Under no circumstances will credit be granted for coursework taken while enrolled as an undergraduate student. Transferred course credit will not reduce the MSMS tuition or fees.

### Registration

All MSMS students are required to register by the registration deadlines specified by the University Registrar. Registration dates are posted at: <a href="http://www.westernu.edu/registrar-online-information">http://www.westernu.edu/registrar-online-information</a>. Failure to register by the deadline may be grounds for administrative withdrawal. All students registering after the posted deadline will be assessed a \$30.00 per business day late fee.

Full tuition and fees and all prior debts must be paid in full on or by posted deadlines each academic year. Matriculation is subject to the satisfactory completion of all academic requirements and payment of all outstanding debts to the University. The receipt of a final transcript(s) from all colleges/universities attended is required for incoming students. Also, all students must show proof of current health

insurance coverage by the deadlines provided by the University Registrar. This coverage must be maintained or in effect throughout the academic year. If there is no proof of current coverage, students will be automatically enrolled in the school sponsored insurance plan.

#### Withdrawing from Courses

Students may not drop individual courses within the curriculum. If a student wishes to drop from the program, he/she must complete the appropriate Withdrawal or Leave of Absence forms. In such circumstances, a "W" will be assigned for the course unless the student has already completed 90% of the term. Please note that all 'W' grades received from previous attempts will remain on the student's transcript. Please see Western University Tuition Refund Policy for additional information.

#### **Full-time/Part-Time Status**

A graduate student at Western University of Health Sciences in the Master of Science in Medical Sciences program must enroll in at least 8 semester hours per term to be considered full-time. To be considered full-time when enrolled in fewer than six hours, the student must be registered in all remaining courses necessary for completion of the graduation requirements for the degree.

#### **Time Limits**

The Master of Science in Medical Sciences program is designed to be completed in one (1) year of full-time study. The requirements for the degree must be fulfilled within two (2) years from the date of matriculation to the program.

#### **Tuition and Fees**

By action of the Board of Trustees, MSMS tuition and fees for the 2013-2014 academic year (subject to change) are as follows:

\$23,145.00	Annual Tuition
Other Fees and Expenses	
\$30.00	Registration Late Fee (per business day)
\$450.00	Remediation Fee
\$350.00	Graduation Fee
\$470.00	Annual Parking Permit (Auto)
\$25.00	Parking Permit Replacement Fee
\$40.00	Locker Key Replacement Charge
\$10.00	Official Transcript (Each)
\$21.00	Rush Transcript, First Class Mail (Each)
\$25.00	Rush Transcript, Federal Express (Each)
\$10.00	Student ID Replacement Fee
TBD	Breakage Fee (Replacement Cost)

### **Financial Aid and Program Scholarships**

A graduate education is more important than ever today, yet paying for one can be a challenge. The key to obtaining financial aid is to start the process early. Applicants should first look into grants, scholarships and other student aids, which do not require repayment. Military and veteran benefits are other avenues to finance your education. Educational loans, whether from federal or private sources, can also help you achieve your goals. Please visit our <a href="Prospective Student website">Prospective Student website</a> at for further information. The application process for the Dean of the Graduate of Biomedical Sciences Scholarship

Program opens in October of each academic year. Those students who fill out applications and show both financial need and academic merit may be eligible for a partial tuition scholarship.

### **Graduate College of Biomedical Sciences Dean's Scholarship**

### **Eligibility**

Applicants must meet all of the following criteria:

- Must be a Permanent Resident of the United States
- Must be a enrolled in the MSMS program
- Must have at least a cumulative undergraduate college grade point average of 2.50 on a 4point unweighted scale
- Must have taken the MCAT, DAT, or OAT Exam

### **Description of Funds**

The recipient will receive a scholarship of \$2,000 to \$15,000 to be applied to tuition expenses. Funds are provided by Western University of the Health Sciences and the Graduate College of Biomedical Sciences. Payments are credited to the student's account, a third of the scholarship for each semester of the program ending in spring of the year the student is scheduled to graduate.

### Responsibilities of Recipients

The Recipient must be actively enrolled full-time as in the MSMS program and for the entire academic year without interruption, barring illness, emergency, or military service.

### **Selection Process**

Students must complete a scholarship application which is made available either from the student's initial supplemental application materials or from the Program Director after matriculation. The Committee will consider the following characteristics to determine the scholarship eligibility and amount:

- Disadvantaged status
- Financial need
- Academic achievement and records
- School and community activities and leadership
- All decisions of the selection committee are final and are not subject to appeal

Application for the Dean's scholarship must be received no later than **September 1**<sup>st</sup>. A student's level of need is determined by a careful evaluation of detailed financial information provided by the applicant and the applicant's parents. If applicant's parents are separated or divorced, the financial information is required from both parents (including income and assets of any possible new spouses, if they have remarried.) All financial data is documented with official copies of U.S. individual income tax returns of the applicant and the applicant's parents. **The Dean's scholarship is nonrenewable**.

# **Academic Requirements**

# **Attendance and Participation**

Students will come prepared and adhere to established times for classes, assessments, laboratories, rotations and meetings. Students are required at all scheduled instructional periods. Absence from instructional periods for any reason does not relieve them from responsibility for the material covered during the periods missed. In order to receive an excused absence for exams and assignment, it must be due to medical and emergency grounds. Students will provide to the Director of the Master of Science in Medical Sciences program no later than the day of the assignment or exam, a physician's note or other document that may be required. Frequent absences or tardies will be viewed as violations of the Standards of Academic and Professional Conduct, and are grounds for placing students on academic probation or academic suspension.

# **Vacation and Emergencies**

Students receive two weeks' vacation each year over the Christmas break. Students may not expect to take more time than this, may not leave early or return late from the break. Vacations are not provided during academic semesters.

Under special circumstances (i.e. interviews), a student may arrange a brief 1-3 days off at the discretion of the Director and Dean. It is the Dean's and program director prerogative whether to grant the time off and it is not guaranteed. Students should not enter the program with the expectation of taking time off for other pursuits (i.e. leaving the country, hobbies, etc.) Emergencies, including medical problems or serious personal/family issues, which result in less than 15 academic days (3 calendar weeks) away from campus, may be granted upon approval by the program director, in conjunction with the Graduate College of Biomedical Sciences Dean. Any missed course material is the responsibility of the student, and students may be required to complete alternative assignments, at the discretion of course faculty.

Students with emergencies resulting in more than 30 academic days (4 calendar weeks) away from campus must apply in writing for a Leave of Absence to the Dean or his/her designee. Please see the Western University Catalog's "General Academic Policies and Procedures" for more specific information on a Leave of Absence.

### **Program Director and Faculty Mentor Assignment & Duties**

Enrolled students will be assigned an Academic Advisor during the fall. The Master of Science in Medical Sciences Program Director will act as academic progress and pre-professional advisor to all enrolled students, and as such advises enrolled Master of Science in Medical Sciences students on graduate program and professional school applications and provides students with feedback on essays, choice of schools, timing of application and taking of MCAT, DAT and other standardized exams and pre-professional activities, including interviewing skills and shadowing. The Program Director also will conduct workshops and programs for Master of Science in Medical Sciences students on topics such as Interviewing, Writing a Personal Statement, Application Time Lines, Securing Letters of Evaluation, and Standardized Test Preparation. The Program Director coordinates the information gathering and authoring of committee letters of recommendation, for students whose pre-professional applications require them.

### **Capstone Project Requirements**

The capstone will be a combined oral and written project, utilizing appropriate presentation modalities.

Master of Science in Medical Sciences candidates choose a topic for their capstone project based upon their own research, meta-analysis of existing literature data, policy analysis, or other appropriate topic chosen in consultation with the capstone course director no later than the 2nd week of spring semester.

The Master of Science in Medical Sciences candidates will prepare and present orally their findings assisted by either a poster or a PowerPoint presentation at a special Master of Science in Medical Sciences colloquium to members of the Graduate College and the University.

#### Graduation

A student will be recommended for the Master of Science in Medical Sciences degree provided he/she:

- a. Is not on probation or suspension and has completed all prescribed academic requirements with a cumulative grade point average of above 2.50 and has no outstanding grade of "I," "NCR," or "U". No more than two MSMS courses with an earned grade of 'C' may be counted towards MSMS graduation requirements.
- b. Has demonstrated no serious deficiencies in ethical, professional, or personal conduct, as defined in University Catalog, "General Academic Policies and Procedures" section, which would make it inappropriate to award the degree of Master of Science in Medical Sciences
- c. Has complied with all the legal and financial requirements of the University as stated in the University Catalog.
- d. Has attended in person and participated in the Commencement ceremony at which time the Master of Science in Medical Sciences degree is conferred. Unless special permission has been granted by the Dean, each student must participate in their respective commencement ceremony. Requests for excusal will only be granted for extenuating circumstances, such as a prior military commitment.

Students may participate in commencement activities provided they will complete <u>all</u> requirements of the program by December 31<sup>st</sup> of that calendar year. No student will receive his or her degree until the student has completed all requirements for graduation. Degrees will be dated as appropriate to completion date.

### **Academic Integrity**

Complete confidence in the honor and integrity of the researcher and pre-health professions student is essential. Such confidence depends entirely on the exemplary behavior of the individual in his/her relations with colleagues, faculty, staff, and patients. Strict honesty as a personal way of life should be nurtured during the period of education for professional service. The student shall conduct all

aspects of his/her life with honor and integrity. This includes accountability to oneself and to relationships with fellow students, future colleagues, faculty, and patients who come under the student's care or contribute to his/her training and growth, and members of the general public. This applies to personal conduct that reflects on the student's honesty and integrity in both academic and non-academic settings, whether or not involving a University sponsored activity. Upon accepting admission to the University and program, each student subscribes to and pledges complete observance to the Standards of Academic and Professional Conduct as outlined in the University Catalog for each academic program. A violation of these standards is an abuse of the trust placed in every student and could lead to suspension or dismissal.

### Standards of Academic and Professional Conduct: GCBS Honor Code

Honesty and integrity are among the most valued traits of academic researchers and health care professionals. Each student is expected to assume personal responsibility for those traits. Academic dishonesty includes cheating, plagiarism, using unauthorized resources during examination(s), sabotaging other students and mentors research as well as and signing another person's name to an attendance or examination document. Matters of academic dishonesty and professional misconduct will be handled consistently with the University's guidelines for Hearings involving alleged violations of the standards of professional conduct as described in the University's General Academic Policies and Procedures. Any individual who witnesses or becomes aware of a possible violation of the Honor Code is bound to report the incident. Staff or students must report the incident to a faculty member and faculty members must report the incident to the Dean, GCBS.

Upon receipt of an allegation of misconduct, the Dean, GCBS will either address the matter directly or will appoint an ad hoc committee of the Faculty and student(s) of the program to investigate the allegation and forward a recommendation on a course of appropriate action to the Dean, GCBS. Potential sanctions could include placing the student on probation; require the student to undertake specific remedial activities, suspension for a defined period of time, or dismissal from the program. Decisions of the Dean in matters of conduct may be appealed following the procedure outlined in the Overview section of this Catalog.

#### **MSMS Professional Dress and Behavior**

Students are expected to dress and act appropriately. Students are expected to follow all rules established by faculty and preceptors in the classroom, during clinical skills labs, at rotation sites, and during College-sponsored events. When requested, students should use professional dress, such as wearing their white coats. Students will maintain a professional attitude/demeanor at all times when communicating as a graduate student. Students will display a positive attitude when receiving constructive feedback.

#### Respect

Students will show respect to their fellow classmates, the staff, the faculty, and other colleagues. Students will formulate constructive evaluation of others' performance and will communicate it in a professional manner. Students will use professional language at all times when communicating as a graduate student. Students will display sensitivity towards other cultures, races, religions, genders and sexual orientations. Students will display a positive attitude when receiving constructive feedback. Students will strive to resolve conflict in a respectful manner.

#### Accountability

Students will acknowledge their limitations and seek help from an appropriate source when their knowledge, skills, abilities, or judgment are inadequate for the academic or professional circumstance. Students will assume responsibility for their actions. Students will acknowledge academic priorities over professional and personal activities. Students will honor their commitments to others.

#### Excellence

Students will exhibit their best effort in all academic and professional activities and endeavors. Students will commit to continual self-assessment, development and lifelong learning. Students will consult with faculty when professional or personal activities conflict with academic responsibilities and give due consideration to their recommendations. Students will contribute to an environment conducive to learning.

# **Standards of Academic Progress**

To be considered making satisfactory academic progress and to be considered in good academic standing all Master of Science in Medical Sciences Students:

- Should have an overall GPA of 2.50 or above.
- Will complete the coursework for degree in two semesters unless a leave of absence is granted
  or remediation of a course is required. If remediation is required, a student may have up to one
  additional semester to complete their degree and be considered to be making satisfactory
  academic progress.
- At the time of semester evaluation of each student by the Graduate College of Biomedical Sciences Student Progress Committee, if a student is found not to be meeting satisfactory academic progress either for GPA reasons, or time to degree limit is exceeded, the student will be placed on probation.

# **Student Performance Committee**

The Graduate College of Biomedical Sciences Student Performance Committee is charged with the following responsibilities: (a) to review at the end of each term the academic achievement and comprehensive evidence of progress of all students who are pursuing the Master of Science in Medical Sciences (particular attention will be given to students in academic difficulty as their grades are made available to the Committee by the Registrar and/or course faculty); and (b) to receive reports from the College Dean regarding any student whose professional or personal conduct is deemed unsatisfactory. Appropriate professional and personal conduct is defined by the University's and College's codes of professional conduct (refer to Standards of Academic and Professional Conduct above).

#### **Academic Probation**

The Chair of the Student Performance Committee will automatically place students on academic probation under the following circumstances:

 A student earns a failing ("U") grade in any course. The student will remain on academic probation until the course is satisfactorily remediated.

- A student's cumulative GPA is below 2.50 for Master of Science in Medical Sciences program at the end of any academic term.
- Failure to perform in a professional manner.
- Serious deficiencies in ethical or personal conduct.

The Dean of the college will notify the student in writing of the action. When a student has been placed on probation, the following outcomes will result:

- The student may not hold office in any University or College organization. Within 2 weeks of the
  date that the student receives notification of his/her academic probation, the student must
  meet with the following offices and fill out an Action Plan Form available from the Program
  Director:
  - The Learning Enhancement and Academic Development (LEAD) office staff to develop an academic action plan. The student must obtain a signature from the LEAD office documenting agreement on the action plan.
  - The student's faculty advisor/program director to review the student's proposed improvement plan. The student must obtain a signature from the faculty advisor/program director documenting the agreement on the action plan. The faculty advisor/program director will take a copy of the plan for the student's file.
- In addition, students are encouraged to seek regular assistance from any University or College resource deemed necessary to improve his or her academic performance over the duration of probation.
- Students on academic probation will be given up to two academic terms to raise their cumulative GPA to the required standard of 2.5 for the Master of Science in Medical Sciences or above. Meeting the appropriate GPA requirements will result in the lifting of Academic Probation Status.

### **Financial Aid Warning Policy**

If a student is not achieving satisfactory academic progress (SAP) they may be placed on "Financial Aid Warning" status for the next payment period and continue to receive Title IV aid for that period. Students who fail to make SAP by the end of that payment period lose Title IV aid eligibility.

It is the policy of the Financial Aid Office (FAO) that once a student has been placed on academic probation for not meeting SAP standards as defined by the college, the FAO will automatically place the student in a Financial Aid Warning status. During the next academic term if the student does not meet SAP standards and the college places the student on academic suspension the student will no longer be

eligible for financial aid. If the student appeals the academic suspension and the appeal is approved, financial aid will be reinstated. If the student is directed to audit courses those courses may not be covered by financial aid.

### **Tutorial Assistance Program**

A Tutorial Assistance Program (TAP) has been established to assist students experiencing academic difficulty. Students will be recommended for this program by a faculty advisor or professor. Students may self-identify to TAP to receive assistance. The tutors will be chosen on the recommendation of the faculty in each discipline. Group tutoring is the methodology most used by the TAP department. For assistance, contact the Learning Enhancement and Academic Development Office (LEAD).

#### Remediation

The educational objectives that underlie remedial teaching and evaluation should be the same as the educational objectives that underlie regular courses in the curriculum. GCBS MSMS students, who receive a "U" in a course or a cumulative GPA below a 2.5, will be reviewed by the Student Performance Committee. Where deemed appropriate, the Student Performance Committee, after consultation with the course instructor, system coordinator, and/or the Dean (or his/her designee) may recommend any one of the following options for remediation:

- Take a comprehensive examination.
- Take a series of exams.
- Repeat the course

The score/grade achieved by remediation will be the score/grade recorded. The grade achieved by remediation will be re-recorded on the transcript next to the original grade.

If a student is directed to repeat a course, the grade for repeated course will be recorded on the official transcript. Only the most recent grade received for a repeated course will be included in the student's GPA calculation. Students will be charged full tuition for repeated coursework.

Recommendations regarding remediation will be made on an individual basis after considering all pertinent circumstances. The final decision will be made by the Dean of the Graduate College of Biomedical Sciences, based upon the recommendation of the Student Performance Committee. Course remediation by exam(s) will take place during the summer following the year in which the student failed the course. Remediation by repeating the course, system or rotation will take place at the time that it is offered during the following academic year. All summer remediation exams will take place no sooner than June 15<sup>th</sup> and no later than August 1<sup>st</sup> of the following summer after the student has failed a course. Students who require remediation but are unavailable on the designated examination date will not be allowed to progress in the curriculum and will be placed on academic suspension. The grade earned upon remediation of the course, either by exam(s) or repeating the course, will replace the original course grade.

A student who is required to remediate a course must be notified in writing by the Dean at least 15 working days prior to the remediation date, or within 15 working days after the close of the academic year in which the student is presently enrolled, whichever comes first. Notification must either be sent by Certified Mail or hand-delivered to the student and must be acknowledged with the signatures of the Dean (or his/her designee) and the student.

Only students who have failed a course, or otherwise earned a "U" will be allowed to remediate a course at no time will a student with a passing grade (C or better) be allowed to remediate a course.

### **Repeating a Course**

Students will not generally be allowed to repeat any courses they have completed and passed (earned a grade of C or better). If, for some extenuating circumstance, the student feels it is necessary to do so, he/she must petition by memo or letter the Student Performance Committee, and include a memo/letter of support from the faculty member who teaches/coordinates the course they propose to retake. If the SPC recommends approval of the petition and the Dean of the College approves the petition, the student will be able to repeat a course. The student will be responsible for paying tuition for the repeated course on a per unit basis calculated from the MSMS annual tuition for the year the student is repeating the course. The grade for the repeated course will be recorded on the transcript and does not replace the original grade received for the course. Only the most recent grade received for a repeated course will be included in the student's GPA calculation.

### **Academic Suspension**

The Dean for Graduate College of Biomedical Sciences will automatically place students on academic suspension when a student does not achieve the required cumulative GPA for their program for two consecutive academic terms. If a student fails to meet the academic action plan agreed upon by the student, the LEAD office, and their faculty advisor/program director they will be put on Academic Suspension. The SPC committee, after consultation with all pertinent college parties (faculty advisor/program director and a LEAD office designee) must find that the student has not followed their action plan to be placed on Academic Suspension.

Students may also be placed on Academic Suspension if there is a period of non-enrollment caused by the need to repeat a failed course.

No student is eligible for Title IV, HEA programs if they are placed on Academic Suspension. Students on Academic Suspension are not registered as an active matriculant and should use this time to remediate for the deficiency for which the Academic Suspension was levied.

#### Dismissal

The University may require withdrawal at any time it deems necessary to safeguard its standards of scholarship, conduct, and orderly operation. A student will be permanently dismissed from the program if the student fails to accomplish course learning objectives and/or fails to achieve academic expectations even after granted the opportunity to repeat coursework. Any student permanently Dismissed from the program is not eligible for Title IV, HEA programs. A student will be permanently dismissed when:

- A student earns a failing grade ("U") in any course that the student has repeated
- A student earns more than two failing grades ("U") even after successfully remediating those two courses.

- A student fails to earn the program's required cumulative GPA by the end of the first term
  of repeated coursework or no more than 2 semesters of enrollment following initial date
  academic probation takes place.
- A student currently repeating coursework due to sub-standard academic performance is found in violation of the College's Standards for Professional Conduct at a level that merits course failure or repeating the course.
- Failure to perform in a professional manner.
- Serious deficiencies in ethical or personal conduct.

#### **Student Appeal Process**

At the conclusion of each academic term, the Student Performance Committee will review whether students have met the established criteria for progression in the curriculum. Recommendations by the Student Performance Committee for repeat of the academic year or dismissal from the program are advisory to the Dean of the Graduate College of Biomedical Sciences, who will make the decision.

In the event that the Student Performance Committee has made a preliminary determination to recommend an adverse action, such as dismissal or the repeat of an academic year, the student is offered an opportunity to meet in person with the Student Performance Committee, prior to the Committee forwarding its final recommendation to the Dean of the GCBS. At such time, the student may present any information relative to the preliminary recommendation. The student may also be accompanied by a representative for support; however, the representative may not be an attorney. The Student Performance Committee will have an opportunity to review the additional information, if presented, and will then make a final recommendation to the Dean.

In accordance with Western University policy, the Dean's decision may be appealed by the student to the Provost of Western University of Health Sciences. The Provost may convene an advisory panel, and the decision of the Provost is final. (See Student Appeal Process in University Academic Policies section).

# **Evaluation and Grading**

#### **Institutional Outcomes**

### Critical Thinking and Clinical Reasoning

WesternU students will identify and solve problems that require the integration of multiple contexts when applying patient care.

### Diagnosis, Management & Prevention/Clinical Competence

WesternU students will demonstrate diagnostic and therapeutic skills and apply relevant information to patient care and practice, and to educate patients regarding prevention of common health problems.

#### **Interpersonal and Effective Communication Skills**

WesternU students will demonstrate effectively interpersonal skills that enable them to establish and maintain therapeutic relationships with patients and other members of the health care team.

#### **Collaboration Skills**

WesternU students will demonstrate collaboration with clients and with other health professionals to develop a plan of care to achieve patients' positive health outcomes.

### **Ethical & Moral Decision Making Skills**

WesternU students will demonstrate the highest quality of care, governed by ethical principles, integrity, honesty and compassion.

### Humanistic, Caring and Compassionate Care

WesternU students will practice compassionate care.

### Life Long Learning

WesternU students will engage in life-long, self-directed learning to validate continued competence in practice.

# Using Evidence-Based Practice

WesternU students will utilize research and evidence-based practice and apply relevant findings to the care of patients.

### **Program Outcomes**

### **Professionalism**

MSMS students will exhibit appropriate behavior regarding comportment, dress, language, punctuality, responsibility and attitude during all activities.

### **Critical Thinking**

MSMS students will develop an approach to learning and health care that incorporates judicious integration of systematic assessments of relevant clinical and scientific evidence.

### Narrative Competence

MSMS students will construct accurate written and oral summaries of scientific information and patient histories with facility.

### **Ethics and Humanism**

MSMS students will demonstrate knowledge and implementation of ethical principles in scientific conduct and patient care. Exhibit qualities of humanism

# Subject Competence

MSMS students will demonstrate knowledge of scientific principles and practice and implement self - evaluation and life-long learning.

#### **Grading Scale**

Final course grades are given based upon the traditional 4-point letter system, as follows:

<u>Grade</u>	<u>Equivalent</u>	<b>GPA Points</b>
Α	Outstanding	4.00
A-	Excellent	3.70
B+	Very Good	3.30
В	Good	3.00
B-	Above Average	2.70
C+	Satisfactory	2.30
С	Marginally Passing	2.00
U	Unsatisfactory	0.00
CR	Credit	N/A
NCR	No Credit	N/A

#### **ADMINISTRATIVE GRADES**

<u>Grade</u>	<u>Equivalent</u>	<b>GPA Points</b>
AU	Audit	N/A
1	Incomplete	N/A
W	Withdrawal	N/A
M	Missing	N/A

### Incomplete

An Incomplete grade "I" will only be assigned to students whose health and/or personal responsibilities prevent him or her from completing the requirements of the course. A student may remove an incomplete by completing course requirements within 6 weeks after the end of the semester when the course took place, or the final grade will be permanently recorded as a "U". The instructor must certify any grade changes. The "I" grade will remain on the student's transcript, along with the final grade assigned by the instructor.

### **Grade Reports**

Official grades are turned in to the Registrar by the Graduate College of Biomedical Sciences, at which time the online student records system, BanWeb, is updated. Official grade reports and unofficial transcripts will be available on the BanWeb student records system throughout the academic year. No course grade will be changed unless the instructor certifies in writing that an error in computing or recording the grade has occurred or that the student has completed course requirements for an incomplete grade or remediated grade.

### **Credit Hour Calculation**

The Graduate College of Biomedical Sciences courses are rated at one credit hour for every 12 contact hours.

### **Grade Appeals Process**

### **Appealing a Course Grade**

If a student believes there is just cause to dispute a grade for a course, the procedure is as follows: Within five (5) days of receipt of the course grade, the student must make an appointment with the

course instructor(s) who issued the grade. Upon written request from the student, the course instructor(s) shall review the case with the student, and a decision shall be made by the course instructor to affirm or modify the grade. Within ten (10) working days of the student's written request, the course instructor shall notify the student in writing of the decision. If warranteda copy of the Grade Change Form shall be sent to the student and the Master of Science in Medical Sciences Program Director.

Within five (5) working days following written notification to the student regarding the instructor's decision, the student may appeal the decision in writing to the MSMS Program Director. The appeal request must be accompanied by a narrative explaining the basis for the appeal. The narrative should fully explain the student's situation and substantiate the reason(s) for advocating a review of the prior decision of the instructor. The MSMS Program Director may grant an appeal only if a claim of (1) bias, (2) the appearance of new material and documentable evidence that was not available at the time of the instructor's decision, or (3) procedural error that unfairly affected the decision-making process is substantiated by the Director. Upon written request from the student with a valid appeal rationale, the MSMS Program Director shall review the case and within seven (10) working days shall issue a decision in writing to the student, which may affirm, modify, or reverse the previous action of the instructor.

The Program Director's decision is final in all course grade appeals except when the Program Director is the official instructor of the course in question. In such a case, the student will direct his or her appeal to the Dean of the Graduate College of Biomedical Sciences, following the same guidelines for an appeal to the Program Director. The decision of the Dean in this instance is final.

The student may remain in class pending the outcome of appeals, except in cases of summary suspension or when the Provost, Vice Provost or the Dean of the Graduate College of Biomedical Sciences has suspended the student or has otherwise determined that it is inappropriate for the student to remain in class.

### **Issues/Dispute Resolution Procedure**

When an issue or dispute arises between students, the issue/dispute resolution process starts with communication among the involved students. If a satisfactory resolution is not arrived at that level, the matter should then be addressed with the course instructor or the faculty advisor. If the problem is not resolved at the faculty advisor/course instructor level, the matter should be brought to the Program Director, followed by the Dean and then the Provost/COO. If the matter has not been resolved at those levels, the final arbiter is the President.

When an incident arises involving a faculty member, the first step in the issue/dispute resolution process is discussion with the faculty member. If the matter is not satisfactorily resolved at that level, then the matter should be referred to the Program Director, Dean, and Provost/COO, in that order. The final arbiter is the Board of Trustees.

When an incident arises involving a staff member, the dispute resolution process begins with the Program Director, followed by the Dean. The Office of Human Resources is the final arbiter.

Failure to follow this sequence of steps will only serve to delay the appropriate resolution of the issue or dispute as the matter will only be referred back to the correct level in this chain of responsibility.

# **Curriculum Organization**

To graduate, students must complete a minimum of 46.50 credit hours.

Fall Semester		
Subject/Course #	Course Title	Credit
		Hours
GCBS 5020	Critical Learning & Communication Skills in the Health Prof. I	2.00
GCBS 5021	Critical Learning & Communication Skills in the Health Prof. II	2.00
GCBS 5022	Neurological Integration of Psychophysical Processes I	1.00
GCBS 5030	MSMS Intensive Summer Anatomy Course	8.50
GCBS 5041	Molecular and Cellular Basis of Life	5.00
GCBS 5042	Physical and Biochemical Systems	5.00
GCBS 5061	Intro to Clinical Research & Evidence-Based Decision Making	3.00
GCBS 5035	Head and Neck Anatomy <b>OR</b>	
GCBS 5070	Service Learning	4.00
Total Required Credit Hours: 3		30.50
Spring Semester		
Subject/Course #	Course Title	Credit
		Hours
GCBS 5023	Neurological Integration of Psychophysical Processes II	1.00
GCBS 5062	Clinical Research & Evidence-Based Decision Making Capstone	3.00
GCBS 5079	Microbiology: Biological Systems in Human Disease	4.00
GCBS 5082	Clinician and Society	3.00
GCBS 5083	Clinical Environments in Health Care	3.00
GCBS 5090	Biomedical Statistics and Research Design	2.00
	Total Required Credit Hours:	16.00

# **Course Descriptions**

All courses are awarded letter grades, except when indicated otherwise.

### GCBS 5000 Introduction to Interprofessional Education I (1 credit hour)

This course prepares students to gain an understanding of the different health care professions and how they collaborate to promote patient and community centered care. GCBS 5000 is designed to instill an awareness level in the student regarding non-technical competencies such as communication, collaborative practice, and scope of practice issues. Student will initially receive foundational information on the above competencies. Students will then observe a small interprofessional group, case-based discussion designed to further promote an awareness of the importance of the collaborative care model. Utilizing this case as a learning vehicle, the student will observe the importance of additional elements common to all professions, such as ethical, behavioral, social and psychological issues that will impact the health and well-being of the patient or community. The student will then be expected to integrate this knowledge into a short research paper that describes a critical need for interprofessional education or practice. This course will not be offered during the academic year 2013/2014.

### GCBS 5020 Critical Learning and Communication Skills in the Health Professions I (2 credit hours)

The first part of a two trimester sequence intended to expose students to myriad techniques and approaches for being a successful graduate student and for becoming a life-long learner. Students will have the opportunity to study and apply practical techniques to maximize comprehension and retention of material, supporting theory for these techniques, and current scholarship in which these theories and techniques are discussed. In addition, students will explore myriad aspects of group performance. Beyond study skills, the course will emphasize numerous aspects of graduate-level education including the management of time and stress; increasing focus, concentration, motivation and memory; strategies for reading, note-taking, and studying; assessment of learning style; approaches to test-taking; effective and written and oral communication.

### GCBS 5021 Critical Learning and Communication Skills in the Health Professions II (2 credit hours)

The second semester of a two trimester sequence intended to expose students to myriad techniques and approaches for being a successful graduate student and for becoming a life-long learner. Students will have the opportunity to study and apply practical techniques to maximize comprehension and retention of material, supporting theory for these techniques, and current scholarship in which these theories and techniques are discussed. In addition, students will explore myriad aspects of group performance. Beyond study skills, the course will emphasize numerous aspects of graduate-level education including the management of time and stress; increasing focus, concentration, motivation and memory; strategies for reading, note-taking, and studying; assessment of learning style; approaches to test-taking; effective and written and oral communication. For some students a potential part of this course might include taking a MCAT/DAT/PCAT/OAT or GRE test preparation course through a commercial company.

### GCBS 5022 Neurological Integration of Psychophysical Processes Intensive I (1 credit hour)

This course familiarizes the pre-healthcare student with evidence-based mind-body modalities as they pertain to intra-personal skills, cultivating positive coping, emotional intelligence and attention skills to further academic and overall wellness.

### GCBS 5023 Neurological Integration of Psychophysical Processes Intensive II (1 credit hour)

This advanced course provides the pre-healthcare student with the opportunity to master stress reduction, emotional intelligence skills and cultivates interpersonal skills important for the future health care practitioner. NIPPI is a prerequisite.

### GCBS 5030 Intensive Summer Anatomy Course (MS-ISAC) (8.5 credit hours)

The Master of Science in Medical Sciences Intensive Summer Anatomy Course (ISAC) is an accelerated equivalent of the post-cranial portion of DO5030, given in 6.5 weeks. Material covered in this regional approach includes the shoulder and upper limb, thorax and its viscera, abdomen and its viscera, the pelvis, its viscera, the male and female perineum and lower limb. The objectives include the mastery of nomenclature and spatial relationships of human anatomical systems. It is expected that students will understand the anatomical portion of selected clinical correlations. Course consists of didactic and practical components, and includes dissection of human cadavers. Assessment is by means of written and laboratory practical examinations, as well as regular quizzes.

### GCBS 5035: Head and Neck Anatomy with Facilitation Training (4 credit hours)

This course is an elective continuation of the intensive summer anatomy course open to students by permission of instructor only. Through lecture and laboratory, students are introduced to the anatomy of the head and neck. Particular attention is paid to the cranial nerves, both their normal function and the numerous clinical syndromes that affect them. At the end of this course, and with satisfactory completion of all dissections and assignments the instructor will select students who will be able to serve as facilitators for Head and Neck Anatomy (DO 5035). Facilitators participate in peer-led team learning (PLTL) and laboratory based experiential learning.

### GCBS 5041 Molecular and Cellular Basis of Life (5 credit hours)

This course presents an integration of molecular biology, cellular physiology and metabolism in prokaryotes and eukaryotes as well as an introduction to host defense responses within the context of their clinical applications of basic biomedical sciences. Students will develop an understanding of the principles of molecular biology, including DNA replication and expression of genetic information. They will learn the basic concepts of cellular physiology and metabolism in both prokaryotes and eukaryotes and understand the major types of tissues/cells of the human body as well as the basic function of each tissue/cell type

### GCBS 5042 Physical and Biochemical Systems (5 credit hours)

The overall goal of this course is to introduce students to the most important concepts and principles of biological chemistry. Topics previously covered in earlier chemistry and biology courses will be expanded and placed in the context of the living organism. The key objective is to understand and be able to apply concepts rather than merely memorize information. Subject areas covered include: macromolecular structure, reactivity and function, thermodynamics, carbohydrate, lipid, amino acid metabolism and nucleotide metabolism, and metabolic interrelationships between organs and pathways. Students attending this course will develop an understanding of the principles of biological chemistry, including thermodynamics, kinetics and macromolecular structure, function and reactivity. They will learn the basic concepts of metabolism in human systems, in both health and disease and demonstrate skills in the interpretation of contemporary biochemical data on each of the major classes of biological macromolecules, as well as in the interpretation of clinical data relating to the understanding of the roles of biomolecules and the integration of metabolism.

#### GCBS 5061 Introduction to Clinical Research & Evidence-Based Decision Making (3 credit hours)

This course aims to introduce students to the conduct of basic, translational, and clinical biomedical scientific research. In addition participants will gain a broader understanding of research in the community and how to develop a research agenda from existing community based programs. This is an introduction to several key concepts, and students are not expected to have a deep mastery of statistics, research methodology, or online bibliographic databases prior to taking the course. Students attending this course will develop an approach to health care incorporating judicious integration of systematic assessments of clinically relevant scientific evidence in the context of patient treatment needs and preferences. Students will understand and evaluate epidemiological methodology in the published literature and assess results of clinical trials in light of statistical, ethical, and methodological considerations, by critically appraising the evidence for its validity and importance regarding diagnosis and screening, prognosis, therapy and etiology/harm. Students will be linked with mentors appropriate to their research interests and will develop a precise question in the research context.

# GCBS 5062 Clinical Research & Evidence-Based Decision Making CAPSTONE COURSE (3 credit hours)

Building on GCBS 5061 emphasis will be placed on training students to appropriately utilize and evaluate the biomedical literature across health professions. As a result, this course will prepare students to engage in evidence-based decision making, providing the skills needed to locate relevant online scientific/medical information as well as to evaluate the quality of the research methodologies and statistical analyses reported in the clinical research literature. The primary focus is from a clinical practitioner/researcher standpoint rather than that of a basic sciences researcher. Prerequisite for GCBS 5062 is GCBS 5061.

### **GCBS 5070 Service Learning (4 credit hours)**

Service learning in the biomedical science research enhances student confidence and understanding of the research underpinning that informs their future clinical practice. Additionally, it increases student capacity and confidence to utilize that understanding in the conduct of creative, problem-solving. Students will be placed with a faculty researcher to participate in the process of original inquiry, either clinical or bench research. Learning through faculty-mentored investigation allows students to put in practice the scientific concepts they are learning in their didactic courses deepening their understanding of the basic medical sciences necessary for the practice of health care. Students are expected to devote 8-10 hours of their week in this process and should be expected to proficiently document their research via a small paper, annotated bibliography of papers set forth by the students mentor researcher, and to be able discuss proficiently the reasoning behind the inquiry and methodologies utilized in the research.

# GCBS 5079 Microbiology: Biological Systems in Human Disease (4 credit hours)

This course is offered to the first year students in the Master of Science in Medical Sciences Program. This course presents an integration study on the basics of microbiology, including microbial structure, function, metabolism, genetics, and the relationship of microbes with the host and host-defense mechanisms. In addition, the major pathogenic microbes (bacteria, viruses, fungi, and protozoa) and the diseases they cause will be discussed. The students will be expected to learn basic and clinical lab techniques as well as their application in the identification of various microbes.

#### GCBS 5082 Clinician and Society (3 credit hours)

The Clinician and Society (CAS) course will provide the pre-healthcare professional student with the opportunity to experience and begin to understand the multi-faceted and complex nature of the healthcare professions as they relate to society at large. The student will gain insight into the many social components that both influence and shape healthcare practice and the societal perspectives that influence how the healthcare practitioner is perceived by society. At the end of this course students will be able to describe the historical development of modern healthcare practice and the contributions of healthcare practitioners from antiquity to the present who made key contributions to the evolution of medicine and medical practice. Students will discuss the history of osteopathic medicine in the United States and the unique philosophical and practical contributions that Andrew Taylor Still made to medicine. The history of osteopathic medicine in California, as well as the history of podiatry, optometry, dentistry and veterinary medicine will be covered. Major elements of medical professionalism why it is critical in the practice of the health sciences will be emphasized through the course.

### GCBS 5083 Clinical Environments in Health Care (3 credits hours)

This course provides a critical experiential learning opportunity for the Master of Science in Medical Sciences specifically placing the clinical provision of care in its broader context, integrating both theory and practice with reflection. It is a learning process through which the learner constructs knowledge, attitudes, skills, competencies and understanding through direct reflective experience. In short the course provides an opportunity for students to learn while doing. Students will meet with faculty and staff to arrange a clinical placement for the final semester of the program. Students are expected to shadow or intern in their placement for a minimum of 5 hours per week throughout the semester and to keep a reflective journal of their experiences. Students who participate in these opportunities tend to be more excited, enthusiastic and engaged in their studies, perform better in the classroom, and develop knowledge, skills and abilities that give them a strong competitive edge in obtaining graduate admission. Students in these activities develop both competence in the theory and practice of their discipline and confidence in their ability to function as future professionals.

### GCBS 5090 Biomedical Statistics and Research (2 credit hours)

This course will cover various topics in descriptive and inferential statistics intended to introduce the student to the theoretical and practical aspects of statistics in research. Various topics will include central tendency, variability, hypothesis testing, multi-factorial analysis of variance, trend analysis, regression analysis and correlation.

# GCBS 5100 Introduction to Interprofessional Education II (1 credit hour)

This course is designed to instill in the student the importance of collaboration and teamwork in health care settings, both at the individual patient and the community levels. The concept of teamwork will be implements as the student will be expected to apply baseline knowledge from GCBS 5000 toward completion of a group project. The project will focus on development of a coordinated care case, development of a health care system model, or other community based project approved by the Course Director. The project must not only demonstrate an understanding of collaborative care in the community and the dynamic and integrated relationship of individual community systems as they affect individual and community health and wellness, but the student must also demonstrate successful team dynamics within his/her group. Prerequisite: Successful completion of GCBS 5000. This course will not be offered during the academic year 2013/2014.

# **Honors and Awards**

The following awards are considered for presentation to MSMS students annually:

Community Service Award
Dean' List
Dean's Scholarship
Poster Presentation Honors
Provost's Scholarship
Who's Who Among Students in American Colleges and Universities

# **Academic Calendar**

### Fall 2013

Monday, June 3, 2013

Orientation/Fall Classes Begin

Thursday, July 4, 2013

Independence Day - No Classes\*

Saturday, August 10, 2013

Convocation/White Coat Ceremony

Monday, September 2, 2013

Labor Day - No Classes\*

Monday, October 14, 2013

Columbus Day – No Classes\*

Wednesday, November 27, 2013

Thanksgiving Recess Begins @ 5:00 p.m.\*

Monday, December 2, 2013

Classes Resume

Friday, December 20, 2013

End of Fall Semester Classes

Monday, December 23, 2013

Winter Recess Begins

### Spring 2014

Monday, January 6, 2014

Spring Classes Begin

Monday, January 20, 2014

Martin Luther King Day - No Classes\*

Monday, February 17, 2014

President's Day - No Classes\*

Monday, March 24, 2014

Spring Break Begins

Monday, March 31, 2014

Spring Classes Resume

Wednesday – Friday, May 14-16, 2014

Commencement

Friday, May 16, 2014

End of Spring Semester Classes

# **Graduate College of Biomedical Sciences**

Master of Science in Biomedical Sciences

### Accreditation

Western University of Health Sciences (WesternU) is accredited by the Accrediting Commission for Senior Colleges and Universities of the Western Association of Schools and Colleges (WASC, 895 Atlantic Avenue, Suite 100, Alameda, California, 94501, phone number: 510-748-9001), a regional accrediting body recognized by the Council on Higher Education Accreditation and the U.S. Department of Education.

# **Program Goals**

To train post-graduate students in the principles and experimental methodologies of biomedical sciences as they relate to human and animal health and disease. Graduates will develop the requisite critical thinking skills and knowledge to satisfy a goal of becoming leaders in biomedical research, in academia, or biomedical companies.

# **Program Overview**

A minimum of 40 semester credit hours is required for completion of the MSBS program. This includes 14 credit hours of core courses. The program emphasizes research in the biomedical sciences in core courses, electives and thesis.

# **Program Faculty**

Program faculty is from the Colleges of Biomedical Sciences, Osteopathic Medicine, Veterinary Sciences, Pharmacy, Dental Medicine, Optometry and Podiatry. Their areas of research emphasis include pharmacology, molecular biology, microbiology, biochemistry, structural biology, immunology, neuroscience, anatomy and physiology.

### **Application and Admissions Requirements**

Applicants must possess a Bachelor of Science degree with a strong science component. The minimum criteria to receive consideration for admission are listed below. Meeting these criteria, however, does not guarantee admission into the program.

- A completed Western University of Health Sciences Graduate Application form (including all supplemental information for international applicants).
- Official transcripts of all undergraduate and graduate coursework with an overall Grade Point Average (GPA) of 2.5 or greater on a 4-point scale.
- Official test scores for the general aptitude portion (verbal, quantitative, and analytical) of the Graduate Record Examination (GRE) taken within the last five (5) years, with a score of greater than or equal to 300 on the combined verbal and quantitative.
- Three letters of reference from individuals familiar with the applicant's scholarship and research potential.

### **Application Deadline**

Applications must be received (including all supporting application materials) no later than April 1<sup>st</sup> for the fall semester (August). Completed applications that arrive before the deadline may be considered on a rolling basis.

### **Applicants with Foreign Coursework**

Applicants who wish to use coursework completed outside the United States must submit their transcripts for evaluation to a Western University of Health Sciences Approved Service at the candidate's expense. A course-by-course evaluation is required and all coursework must be designated as undergraduate, graduate or professional. Western University of Health Sciences only honors evaluations from a WesternU approved service. The official evaluation must be included with the supplemental application packet.

#### **International Students**

International students and any other applicants who are not U.S. citizens and who are living in the U.S. should be prepared to provide proof of legal U.S. residency at the time of interview. Proof of legal U.S. residency is required prior to any offer of acceptance. For more detailed information, please visit our web page for <a href="International Students">International Students</a>.

#### **Transfer Credit**

A maximum of 10 graduate level credits in which the student has earned an "A" from an equivalent program from another university will be honored towards the Master of Science in Biomedical Sciences for students transferring into WesternU. The Dean of GCBS must approve all transfer credit, and the decision of the Dean is final.

### Registration

All MSBS students are required to register by the registration deadlines specified by the University Registrar. Registration dates are posted at: <a href="http://www.westernu.edu/registrar-online-information">http://www.westernu.edu/registrar-online-information</a>. Failure to register by the deadline may be grounds for administrative withdrawal. All students registering after the posted deadline will be assessed a \$30.00 late fee per business day.

Full tuition and fees and all prior debts must be paid in full on or by posted deadlines each academic year. Matriculation is subject to the satisfactory completion of all academic requirements and payment of all outstanding debts to the University. The receipt of a final transcript(s) from all colleges/universities attended is required for incoming students. Also, all students must show proof of current health insurance coverage by the deadlines provided by the University Registrar. This coverage must be maintained or in effect throughout the academic year. If there is no proof of current coverage, students will be automatically enrolled in the school sponsored insurance plan.

### Withdrawing from Courses

Courses may be dropped without academic penalty on or before end of the third week of the semester. A course may be dropped after the third week of the semester only under unusual conditions. When the Dean, Graduate College of Biomedical Sciences, or his/her designee, approves dropping the course under such circumstances, a "W" will be assigned for the course.

#### **Full-time Status**

All students enrolled in at least in at least 10 units of coursework are considered full-time students in the MSBS program.

#### **Time Limits**

The Master of Science in Biomedical Sciences program is designed to be completed in two (2) years of full-time study. The requirements for the degree must be fulfilled within three (3) years from the date of matriculation to the program.

#### **Tuition and Fees**

By action of the Board of Trustees, MSBS tuition and fees for the 2013-2014 academic year (subject to change) are as follows:

\$711.00	Per Credit Hour
Other Fees and Expenses	
\$30.00	Registration Late Fee (per business day)
\$350.00	Graduation Fee
\$470.00	Annual Parking Permit (Auto)
\$25.00	Parking Permit Replacement Fee
\$40.00	Locker Key Replacement Charge
\$10.00	Official Transcript (Each)
\$21.00	Rush Transcript, First Class Mail (Each)
\$25.00	Rush Transcript, Federal Express (Each)
\$10.00	Student ID Replacement Fee
TBD	Breakage Fee (Replacement Cost)

### **Financial Support**

Financial support, which full payment of tuition and aid through a Federal Work Study program, is available to qualified applicants on a limited, competitive basis. Support is for 12 months (including summers) and is limited to a total of two consecutive years for any student. Students may also receive a travel stipend, which allows for travel to a national meeting. Students must meet Standards of Academic Progress to be eligible for the Federal Work Study program.

# **Academic Requirements**

### **Attendance and Absences**

Attendance is required at all scheduled instructional periods. Absence from instructional periods for any reason does not relieve the student from responsibility for the material covered during the periods missed.

### **Vacation and Emergencies**

Students receive two weeks' vacation each year over the Christmas break. Students may not expect to take more time than this, and may not leave early or return late from the break. Vacations are not provided during academic semesters. Summers are the optimal time for focused research effort and as such no vacation time is allowed for this period. Under special circumstances, a student may arrange a brief 1 -3 days off at the discretion of the program chair director and the faculty supervisor, and must be discussed in advance. It is the Dean's and faculty supervisor's prerogative whether to grant the time off and it is not guaranteed. Students should not enter the program with the expectation of taking time off for other pursuits (i.e., interviews for other programs, leaving the country, hobbies, etc.)

Emergencies, including medical problems or serious personal/family issues, which result in less than 15 academic days (3 calendar weeks) away from campus, may be granted upon approval by a student's faculty mentor, in conjunction with the Dean, GCBS, or his/her designee. Any missed course material is the responsibility of the student, and students may be required to complete alternative assignments, at the discretion of course faculty.

Students with emergencies resulting in more than 15 academic days (3 calendar weeks) away from campus must apply in writing for a Leave of Absence to the appropriate College Dean, GCBS, or his/her designee. Please see the University Catalog's "General Academic Policies and Procedures" for more specific information on a Leave of Absence.

#### **Thesis**

The thesis will be based on a research project that the student will undertake during the MSBS program. The faculty advisor will help the student select a topic and mentor the student in his/her progress.

MSBS candidates are required to present a written report of the thesis and present it to the Thesis Advisory Committee for approval. In addition, students will be required to defend their thesis during an oral presentation at the end of their program to the Defense Committee. The oral defense may also include questions based on the required course work completed by the student. The Defense Committee will consist of the Thesis Advisory Committee and an external member from within the Western University of Health Sciences faculty whose role will be to ensure that the defense is conducted fairly.

All candidates must pass a comprehensive examination covering the major and minor field, as well as the research and thesis. This usually is a two-hour oral examination. Members of the university faculty not on the Thesis Advisory Committee may attend any oral examination as visitors. The faculty advisor will schedule the oral examination not later than the date of the deadline set by the Dean, GCBS, or his/her designee. Successful completion requires the unanimous support of all members of the Thesis Advisory Committee.

If a student fails the oral examination, one re-examination may be accorded to the student based on a recommendation by the Thesis Advisory Committee and approval by the Dean, GCBS, or his/her designee. Further re-examinations may be allowed only under exceptional circumstances and only with the approval of the Dean, GCBS, or his/her designee.

Upon satisfactorily passing all exams, students are to provide 7-8 professionally printed copies of their thesis for: their Thesis Advisory Committee members (3-4), the College (1 copy), the Dean's Office (1 copy) and the university library (2 copies).

A fee will be charged to the student for microfilming their thesis.

#### **Faculty Advisor and Thesis Advisory Committee**

The faculty advisor serves as the Chair of the student's Thesis Advisory Committee and helps the student in his/her choice of electives and research projects/thesis topic. Further, the faculty advisor may also assist the student in obtaining a research assistantship if funds are available. The Chair is responsible for the satisfactory academic progress of the student, and must hold committee meetings with the student on a regular basis.

The Thesis Advisory Committee consists of at least three faculty members (the faculty advisor plus two other faculty members). The Chair and at least two of the committee members must be full time faculty at the Western University of Health Sciences. Upon approval by the Dean, GCBS, or his/her designee, a fourth member from within Western University of Health Sciences may be eligible for appointment to the committee.

#### Standards of Academic and Professional Conduct: GCBS Honor Code

Honesty and integrity are among the most valued traits of academic researchers and health-related scientists. Each student is expected to assume personal responsibility for those traits. Academic dishonesty includes cheating, plagiarism, using unauthorized resources during examination(s), sabotaging other students and mentors research as well as and signing another person's name to an attendance or examination document. Matters of academic dishonesty and professional misconduct will be handled consistently with the University's guidelines for hearings involving alleged violations of the standards of professional conduct as described in the University Catalog, General Academic Policies and Procedures section. Any individual who witnesses or becomes aware of a possible violation of the GCBS Honor Code is bound to report the incident. Staff or students must report the incident to a faculty member and faculty members must report the incident to the Dean, GCBS, or his/her designee.

Upon receipt of an allegation of misconduct, the Dean, GCBS, or his/her designee, will either address the matter directly, refer it to the Student Performance Committee for investigation, or appoint an ad hoc committee of the faculty and student(s) of the program to investigate the allegation and forward a recommendation on a course of appropriate action to the Dean, GCBS, or his/her designee. Potential sanctions could include placing the student on probation; require the student to undertake specific remedial activities, suspension for a defined period of time, or dismissal from the program. Decisions of the Dean in matters of conduct may be appealed following the procedure outlined in the University Catalog, General Academic Policies and Procedures, Student Appeal Process section.

#### Graduation

A student will be recommended for the Master of Science in Biomedical Sciences degree provided that he/she:

- a. Is not on probation or suspension and has completed all prescribed academic requirements with a cumulative grade point average of 3.00 or higher and has no outstanding grade of "I," "NCR," or "U". A 2.00 (C) grade earned in any class may be applied toward graduation only if the cumulative grade point average at the time of application for graduation continues at a minimum of 3.00 (B).
- b. Has satisfactorily completed and orally defended a written thesis.
- c. Has demonstrated no serious deficiencies in ethical, professional, or personal conduct, as defined in the University Catalog, General Academic Policies and Procedures section, which would make it inappropriate to award the degree of Master of Science in Biomedical Sciences.
- d. Has complied with all the legal and financial requirements of the University, as stated in the University Catalog.

e. Has attended in person and participated in the Commencement ceremony at which time the Master of Science in Biomedical Sciences degree is conferred. Unless special permission has been granted by the Dean, each student must participate in their respective commencement ceremony. If the Dean grants special permission for excusal from commencement, the graduate may be required to present him/herself to the Dean, GCBS, or his/her designee at another specified date to take their profession's oath before their diploma will be released. Requests for excusal will only be granted for extenuating circumstances, such as a prior military commitment, or death in the family.

Students may participate in commencement activities provided they will complete <u>all</u> requirements of the program by December 31<sup>st</sup> of that calendar year. No student will receive his or her degree until he/she has completed all requirements for graduation. Degrees will be dated as appropriate to completion date.

# **Standards of Academic Progress**

MSBS students must maintain a cumulative GPA of at least 3.00 or higher on a semester basis to be considered making satisfactory academic and professional progress (SAP).

#### **Student Performance Committee**

The Graduate College of Biomedical Sciences Student Performance Committee is charged with the following responsibilities: (a) to review at the end of each term the academic achievement and comprehensive evidence of progress of all students who are pursuing the Master of Science in Biomedical Sciences and give recommendations to the Dean, GCBS, or his/her designee, regarding academic progress matters. Particular attention will be given to students in academic difficulty as their grades are made available to the Student Performance Committee by the Registrar and/or course faculty; and (b) to consider violations of the Standards of Academic and Professional Conduct, if asked by the Dean, GCBS. Appropriate professional and personal conduct is defined by the University's and College's codes of professional conduct (refer to Standards of Academic and Professional Conduct above).

# **Probation or Academic Suspension**

Students may be placed on Probation or Academic Suspension for the following reasons (these are in addition to the reasons listed in the University Catalog, General Academic Policies and Procedures, Probation section):

- 1. Inadequate academic progress as determined by the Student Performance Committee. This includes, but is not limited to, receiving a "U" grade in any course or system.
- 2. A semester or cumulative grade point average below 3.00.
- 3. When directed to repeat a year for academic reasons.
- 4. Failure to perform in a professional manner.
- 5. Serious deficiencies in ethical or personal conduct.

Students may also be placed on Academic Suspension if there is a period of non-enrollment caused by the need to repeat a failed course.

Students on Academic Suspension are not registered as an active matriculant and should use this time to remediate for the deficiency for which the Academic Suspension was levied. On campus students on probation must meet with their faculty advisor at least once a month. It is the student's responsibility to contact his/her faculty advisor to arrange these meetings.

A student placed on probation for receiving a grade of "U" or for a semester or cumulative GPA of less than 3.00 in a given semester will be removed from probation after one semester provided he/she has regained a cumulative GPA of at least 3.00 and/or has remediated the failed course. Students on probation are to remove themselves from all leadership roles in co-curricular activities associated with the University and/or with professional associations.

#### **Financial Aid Warning Policy**

If a student is not achieving satisfactory academic progress (SAP) they may be placed on "Financial Aid Warning" status for the next payment period and continue to receive Title IV aid for that period. Students who fail to make SAP by the end of that payment period lose Title IV aid eligibility.

It is the policy of the Financial Aid Office (FAO) that once a student has been placed on academic probation for not meeting SAP standards as defined by the college, the FAO will automatically place the student in a Financial Aid Warning status. During the next academic term if the student does not meet SAP standards and the college places the student on academic suspension the student will no longer be eligible for financial aid. If the student appeals the academic suspension and the appeal is approved, financial aid will be reinstated. If the student is directed to audit courses those courses may not be covered by financial aid.

#### **Tutorial Assistance Program**

A Tutorial Assistance Program (TAP) has been established to assist students experiencing academic difficulty. Students will be recommended for this program by a faculty advisor or professor. Students may self-identify to TAP to receive assistance. The tutors will be chosen on the recommendation of the faculty in each discipline. Group tutoring is the methodology most used by the TAP department. For assistance, contact the Learning Enhancement and Academic Development (LEAD) Office.

#### Remediation

Where deemed appropriate, the Student Performance Committee, after consultation with the course instructor and/or the Dean (or his/her designee) may recommend any one of the following options:

- 1. Take a comprehensive examination.
- 2. Complete special projects or studies in the deficient area(s).
- 3. Repeat the course, system, or rotation.
- 4. Repeat the academic year.
- 5. Dismissal from the University

The score/grade achieved by remediation will be the score/grade recorded except that the highest score/grade a student may earn by options 1 or 2 (above) is a score of "C". The grade achieved by remediation will be re-recorded on the transcript next to the original grade.

If a student is directed to repeat a course (option 3), the grade for the repeated course will be recorded on the official transcript. Only the most recent grade received for a repeated course will be included in the student's GPA calculation. Students will be charged full tuition for repeated coursework.

Decisions regarding remediation will be made on an individual basis after considering all pertinent circumstances. The decision will be made by the Dean of the Graduate College of Biomedical Sciences, based upon the recommendation of the Student Performance Committee. The Committee will base its recommendation on the student's academic record and other considerations after consultation with the student's faculty advisor, course instructor, Dean (or his/her designee), and the student involved, as is appropriate.

A student who is required to remediate a course must be notified in writing by the Dean at least 15 working days prior to the remediation date, or within 15 working days after the close of the academic year in which the student is presently enrolled, whichever comes first. Notification must either be sent by Certified Mail or hand-delivered to the student and must be acknowledged with the signatures of the Dean (or his/her designee) and the student.

#### **Dismissal**

If the cumulative grade point average remains below a 3.00 after the student completes a total of nine (9) graded credit units subsequent to being placed on academic probation, the student will be dismissed from the program. The student may be readmitted only after completion of a remediation plan recommended by the Thesis Advisory Committee. No course work taken as part of the remediation plan will be counted toward the MSBS degree or incorporated into the student's cumulative grade point average. Graduate level courses for which grades below "C" were earned may not be repeated during that remediation period.

Students who receive a "U" grade for GCBS 6999 (Research and Thesis) will be dismissed regardless of GPA or academic standing in the program.

#### **Student Appeal Process**

At the conclusion of each academic term, the Student Performance Committee will review whether students have met the established Standards of Academic Progress in the curriculum. Recommendations by the Student Performance Committee for repeat of an academic year or dismissal from the MSBS program are advisory to the Dean of the Graduate College of Biomedical Sciences, who will make the final decision.

In the event that the Student Performance Committee has made a preliminary determination to recommend an adverse action, such as dismissal or the repeat of an academic year, the student is offered an opportunity to meet in person with the Student Performance Committee, prior to the Committee forwarding its final recommendation to the Dean of the Graduate College of Biomedical Sciences. At such time, the student may present any information relative to the preliminary recommendation. The student may also be accompanied by a representative for support; however, the representative may not be an attorney. The Student Performance Committee will have an opportunity

to review the additional information, if presented, and will then make a final recommendation to the Dean.

In accordance with WesternU policy, the Dean's decision may be appealed by the student to the Provost of Western University of Health Sciences. The Provost may convene an advisory panel, and the decision of the Provost is final (see University Catalog, General Academic Policies and Procedures, Student Appeal Process section).

# **Academic Integrity**

Complete confidence in the honor and integrity of the biomedical sciences student and research scientist is essential. Such confidence depends entirely on the exemplary behavior of the individual student in his/her relations with peers, faculty and colleagues. Strict honesty as a personal way of life should be nurtured during the period of study. The student shall conduct all aspects of his/her life with honor and integrity. This includes accountability to oneself and to relationships with fellow students, future colleagues, faculty, and staff, who contribute to his/her training and growth, and members of the general public. This applies to personal conduct that reflects on the student's honesty and integrity in both academic and non-academic settings, whether or not involving a University sponsored activity. Upon accepting admission to the University, each student subscribes to and pledges complete observance to the Standards of Academic and Professional Conduct as outlined in the University Catalog. A violation of these standards is an abuse of the trust placed in every student and could lead to suspension or dismissal.

# **Evaluation and Grading**

# **Program Outcomes**

# **Critical Thinking**

The MSBS graduate will be able to identify and understand critical issues in biomedical sciences. They should possess the ability to challenge and evaluate information using evidence-based research principles, as well as synthesize and integrate knowledge in the discipline, leading to new ideas, approaches and research.

# Breadth and Depth of Knowledge

The MSBS graduate will understand the current and historical theories, concepts, and models of biomedical sciences. They should possess the ability to access and evaluate the literature of the discipline and understand the major issues in the current state of knowledge. They should also possess an ability to transcend traditional disciplinary boundaries and effectively conduct original, discovery-based or applied research in biomedical sciences under the direct guidance of a faculty member.

#### **Interpersonal Skills**

The MSBS graduate will possess the ability to write and speak about the current issues of biomedical sciences to peers, practitioners and the public. They should be able to articulate and demonstrate knowledge of the discipline and write and present scholarship information to professionals.

#### **Collaboration Skills**

The MSBS graduate will be able to collaborate with other members of the research team, with colleagues (both within the discipline and across related disciplines), and if appropriate, with other communities of interest in the conduct of a research program.

#### **Ethical and Moral Decision Making (Humanistic Skills)**

The MSBS graduate will understand and exhibit the professional standards for responsible and ethical conduct of research in biomedical sciences.

# Life-Long Learning

The MSBS student should be able to engage in life-long, self-directed learning to maintain and expand competence in the discipline, including staying abreast of current issues, methods and approaches in biomedical sciences.

#### Evidence-Based Research

The MSBS student will have a solid grounding in the literature pertaining to a particular question and be able to understand and appropriately use the methods and techniques used for advancing knowledge in their field of study. They should be capable of designing, working within, and coordinating multidisciplinary research programs.

# **Grading Scale**

Final course grades are given based upon the traditional 4-point letter system, as follows:

<u>Grade</u>	<u>Equivalent</u>	<b>GPA Points</b>
Α	Excellent	4.00
В	Good	3.00
С	Satisfactory	2.00
U	Unsatisfactory	0.00
CR	Credit	N/A
NCR	No Credit	N/A

#### **ADMINISTRATIVE GRADES**

<u>Grade</u>	<u>Equivalent</u>	<b>GPA Points</b>
AU	Audit	N/A
I	Incomplete	N/A
W	Withdrawal	N/A
M	Missing	N/A

#### **Incomplete**

An Incomplete grade ("I") will only be assigned to students whose professional commitments and/or personal responsibilities prevent him or her from completing the requirements of the course. A student may remove an incomplete by completing course requirements within the following six calendar months or the final grade will be permanently recorded as a "U". This rule applies regardless of the student's enrollment status. A student not enrolled during the following six months must still successfully remove the "I" grade. The instructor must certify any grade changes. The "I" grade will remain on the student's transcript, along with the final grade assigned by the instructor.

# **Grade Reports**

Official grades are turned in to the Registrar by the Graduate College of Biomedical Sciences, at which time the online student records system, BanWeb, is updated. Official grade reports and unofficial transcripts will be available on the BanWeb student records system throughout the academic year.

#### **Credit Hour Calculation**

The Graduate College of Biomedical Sciences defines one credit hour for every 12 contact hours.

# **Grade Appeals Process**

# **Appealing a Course Grade**

If a student believes there is just cause to dispute a grade for a course, the procedure is as follows: Within five (5) days of receipt of the course grade, the student must make an appointment with the course instructor(s) who issued the grade. Upon written request from the student, the course instructor(s) shall review the case with the student, and a decision shall be made by the course instructor to affirm or modify the grade. Within ten (10) working days of the student's written request, the course instructor shall notify the student in writing of the decision. A copy of the Grade Change Form shall be sent to the student and to the GCBS Associate Dean for Academic Affairs.

Within five (5) working days following written notification to the student regarding the instructor's decision, the student may appeal the decision in writing to the GCBS Associate Dean for Academic Affairs. The appeal request must be accompanied by a narrative explaining the basis for the appeal. The narrative should fully explain the student's situation and substantiate the reason(s) for advocating a review of the prior decision of the instructor. The Associate Dean for Academic Affairs may grant an appeal only if a claim of (1) bias, (2) the appearance of new material and documentable evidence that was not available at the time of the instructor's decision, or (3) procedural error that unfairly affected the decision-making process is substantiated by the Associate Dean for Academic Affairs. Upon written request from the student with a valid appeal rationale, the Associate Dean for Academic Affairs shall review the case and within seven (7) working days shall issue a decision in writing to the student, which may affirm, modify, or reverse the previous action of the instructor.

The Associate Dean for Academic Affairs' decision is final in all course grade appeals except when the Associate Dean for Academic Affairs is the official instructor of the course in question. In such a case, the student will direct his or her appeal to the Dean of the Graduate College of Biomedical Sciences, following the same guidelines for an appeal to the Associate Dean for Academic Affairs. The decision of the Dean in this instance is final.

The student may remain in class pending the outcome of appeals, except in cases of summary suspension or when the Provost, Vice Provost or the Dean of the Graduate College of Biomedical Sciences has suspended the student or has otherwise determined that it is inappropriate for the student to remain in class.

#### **Issues/Dispute Resolution Procedure**

When an issue or dispute arises between students, the issue/dispute resolution process starts with communication among the involved students. If a satisfactory resolution is not arrived at that level, the matter should then be addressed with the course instructor or the faculty advisor. If the problem is not resolved at the faculty advisor/course instructor level, the matter should be brought to the Associate Dean for Academic Affairs, followed by the Dean and then the Provost/COO. If the matter has not been resolved at those levels, the final arbiter is the President.

When an incident arises involving a faculty member, the first step in the issue/dispute resolution process is discussion with the faculty member. If the matter is not satisfactorily resolved at that level,

then the matter should be referred to the Associate Dean for Academic Affairs, Dean, and Provost/COO, in that order. The final arbiter is the Board of Trustees.

When an incident arises involving a staff member, the dispute resolution process begins with the Associate Dean for Academic Affairs, followed by the Dean. The Office of Human Resources is the final arbiter.

Failure to follow this sequence of steps will only serve to delay the appropriate resolution of the issue or dispute as the matter will only be referred back to the correct level in this chain of responsibility.

# **Curriculum Organization**

To graduate, students must complete a minimum of 40 credit hours, including 14 credit hours of the six core courses, 20 credit hours of Electives, and 6 credit hours of Research and Thesis.

# **Core Required Courses**

Subject/Course #	Course Title	Credit Hours
GCBS 5040	Molecular and Cellular Basis of Life	2.00
GCBS 5060	Introduction to Biotechnology	2.00
GCBS 5080	Biological Systems in Human Disease I	2.00
GCBS 5081	Biological Systems in Human Disease II	2.00
GBCS 5085	Research Laboratory Rotations	4.00
GBCS 5090	Biomedical Statistics and Research Design	2.00
Total Required Credit Hours:		14.00

# **Non-Core Required Courses**

Subject/Course #	Course Title	Credit Hours
GCBS 6999	Research and Thesis	2.00 - 6.00
	Total Required Credit Hours:	6.00

### **Elective Courses**

Subject/Course #	Course Title	Credit Hours
GCBS 6000	Graduate Seminar	2.00
GCBS 6101	Advanced Topics in Immunology	2.00
GCBS 6201	Advanced Topics in Pharmacology	2.00
GCBS 6301	Advanced Topics in Virology	2.00
GCBS 6302	Advanced Topics in Genetics	2.00
GCBS 6401	Advanced Topics in Structural Biology	2.00
GCBS 6501	Advanced Topics in Neurobiology	2.00
GCBS 6601	Specialty Research Experience	2.00 - 4.00
GCBS 6701	Directed Reading	1.00 - 5.00
	Total Required Credit Hours:	20.00

# **Course Descriptions**

All courses are awarded letter grades, except when indicated otherwise.

#### GCBS 5040 Molecular and Cellular Basis of Life (2 credit hours)

This course covers a wide range of topics in molecular and cellular basis of life. The goal of this course is to provide an integrative view of the general principles in molecular biology, genomics, biochemistry, cellular physiology, metabolism and basic histology.

#### GCBS 5060 Introduction to Biotechnology (2 credit hours)

This course will provide theoretical knowledge, hands-on laboratory experience and practical computer skills necessary and sufficient to start practical work in biotechnology projects.

#### GCBS 5080 Biological Systems in Human Disease I (2 credit hours)

The purpose of this course is to provide the first year biomedical graduate student with a foundation in human biological systems and their diseases. This one semester course will meet for two hours per week over 17 weeks (12 weeks of instruction, and 5 weeks of assessment and holidays). The primary goal of this course is to provide an integrative view of the general principles in human systems biology and related diseases, in the context of homeostasis and related phenomena. A secondary goal of this course is to foster student-centered learning skills and the confidence to pursue self-directed study using a variety of academic and scientific resources including textbooks, primary literature, review papers, scholarly online databases, and peer group discussions.

The course is structured in three learning blocks covering Body Structure and Movement, Recognition and Response to Environmental Signals, and Nutrient Intake and Waste Transport. The last 4 weeks of the course will consist of an assessment of critical thinking, evidence-based knowledge, and application skills. During each instruction week, students will be expected to use a variety of resources to master the course material and will earn a partial grade for completing a weekly assignment. To foster self-directed learning, some resources will be provided or recommended by the course instructors and additional resources must be identified by the student. This provides an opportunity for students to delve deeper into areas that particularly interest them, while simultaneously providing a learning environment that allows students with different academic backgrounds to develop evidence-based knowledge and a core set of research and communication skills.

#### GCBS 5081 Biological Systems in Human Disease II (2 credit hours)

The course is designed to provide the first year biomedical graduate student with a comprehensive foundation in biological systems, microbial pathogens and the immune response. The primary goal of this course is to provide an integrative view of the general principles of systems biology, microbiology and immunology.

#### GCBS 5085 Research Laboratory Rotations (4 credit hours)

This rotation provides students with a research experience. The student will learn principles of experimental design and good laboratory practices. Early in the rotation, the student will develop a specific hypothesis and design a protocol to test the hypothesis. The student will maintain a laboratory notebook, documenting the procedures and assays that are performed on a daily basis, as well as define and explain the scientific questions that each assay is addressing and the underlying mechanisms by which the assay operates. Depending upon the rotation, the student may participate in laboratory meetings, seminars, and/or journal clubs. At the end of the rotation, the student will prepare a one-page summary of their research experience, which will be written in abstract form that contains both a title and an author(s) section, with the body of the abstract addressing the background, objectives, methods, results, and conclusions of the experience. Additionally, a four-to-five page technical summary of the research experience will be prepared. This document is to be written in manuscript format, including an abstract (same as above), introduction, methods, results, and conclusions/discussion sections.

# GCBS 5090 Biomedical Statistics and Research (2 credit hours)

This course will cover various topics in descriptive and inferential statistics intended to introduce the student to the theoretical and practical aspects of statistics in research. Various topics will include central tendency, variability, hypothesis testing, multi-factorial analysis of variance, trend analysis, regression analysis and correlation.

#### GCBS 6000-6501 (Advanced Topics)

This series of courses consists of a number of advanced topics courses offered in several biomedical disciplines. These courses may be seminar-style or lecture-based and/or may consist of problem-solving activities. The courses are designed to enhance the student's knowledge and understanding of specific disciplines at a more advanced level than is accomplished in the basic survey courses. No more than 6 units may be counted toward satisfaction of unit requirements for the MSBS degree.

#### GCBS 6000 Graduate Seminar (2 credit hours)

Students will select a research paper and present it to faculty members and students enrolled in the MSBS program.

#### GCBS 6101 Advanced Topics in Immunology (2 credit hours)

This advanced course will address concepts and principles of immunology as they relate to disease and/or disease prevention. Topics will include cells, organs, and effector systems involved in cell-mediated, humoral-mediated and innate immunity. Examination of the regulatory interactions among different components of the immune system and the deleterious effects of aberrant immune processes will occur.

#### GCBS 6201 Advanced Topics in Pharmacology (2 credit hours)

This advanced elective will address concepts and principles of neuronal identity and function that are germane to pharmaceutical sciences. Principles will be introduced followed by experimental applications. The course will integrate molecular, cellular, and behavioral concepts when applicable. Course topics include chemical and electrical transmission, neurotransmitter chemistry, neuroreceptor pharmacology and signal transduction mechanisms, structure and function of ion channels and ligand binding sites, synaptic plasticity with an introduction to electrophysiology. Relevant and recent primary literature articles will be introduced for reading and subsequent group discussion.

#### GCBS 6301 Advanced Topics in Virology (2 credit hours)

Advanced discussions on topics in virology. Classes are organized around recent papers in the virological literature. Topics include HIV, Hantavirus infection, prions, and the hepatitis viruses.

# GCBS 6302 Advanced Topics in Genetics (2 credit hours)

This course is designed to focus on how genetic and molecular mechanisms influence multiple aspects of biological life. The course will cover physical and chemical properties of genes, transmission mechanisms, and processes by which genes are manifested as physical characteristics in a whole organism. The control of gene expression is an important concept covered in this course.

# GCBS 6401 Advanced Topics in Structural Biology (4 credit hours)

This advanced elective will address concepts and principles of structural biology with an emphasis on structure-based drug discovery. Time will be spent studying principles of macromolecular crystallization (protein, RNA, DNA), X-ray diffraction theory, data collection and processing, and macromolecular structure determination and refinement. The course will additionally review major principles of macromolecular structure and supramolecular assemblies, and other methods of macromolecular structure determination (Nuclear Magnetic Resonance, Electron Microscopy, Atomic Force Microscopy), as well as topics in structural genomics and modeling. Relevant and recent papers from the primary literature including industrial examples of structure based drug discovery will be introduced for reading and subsequent discussion.

#### GCBS 6501 Advanced Topics in Neurobiology (2 credit hours)

This advanced elective course will address concepts in neurobiology.

# GCBS 6601 Specialty Research Experience (2-4 credit hours)

Assigned laboratory experiences introducing students to the research techniques and protocols under the guidance of faculty members at the Western University of Health Sciences.

#### GCBS 6701 Directed Reading (1-5 credit hours)

This course is an independent study course consisting of individualized readings in various topics in the biomedical sciences. Directed readings allow detailed study of topics pertinent to research encountered in laboratory rotations or subjects that are not otherwise addressed in the MSBS curriculum. The student will be expected to work with an instructor to develop a reading list and to define course objectives. No more than 10 units may be counted toward satisfaction of unit requirements for the MSBS degree.

#### GCBS 6702 Advanced Biotechnology (2 credit hours)

This course covers advanced topics in biotechnology and their application in biomedical sciences. This is a techniques-focused course, emphasizing hands-on laboratory and computational training.

# GCBS 6999 Research and Thesis (1-5 credit hours, CR/NCR)

Completion of a thesis is mandatory for the Master of Science in Biomedical Sciences degree program. The thesis will be based on a research project that the student will work on during their enrollment in the MSBS program. The faculty advisor (thesis advisor) will help the student select a topic and mentor the student in his/her progress. Students are expected to prepare a thesis proposal, attend regular meetings with course instructors and his/her thesis/faculty advisor. Submission and oral defense of the written thesis is required to complete the program. The last part of the thesis defense includes a comprehensive examination. Repeatable to a maximum of 6 credit hours.

# **Honors and Awards**

The following awards are considered for presentation to MSBS students annually:

Dean' List

Who's Who Among Students in American Colleges and Universities

# **Academic Calendar**

# Fall 2013

<u>Thursday, July 4, 2013</u> *Independence Day – No Classes\** 

<u>Saturday, August 10, 2013</u> *Convocation/White Coat Ceremony* 

Monday, August 12, 2013 Fall Classes Begin

Monday, September 2, 2013 Labor Day – No Classes\*

Monday, October 14, 2013
Columbus Day – No Classes\*

Wednesday, November 27, 2013
Thanksgiving Recess Begins @ 5:00 p.m.\*

Monday, December 2, 2013 Classes Resume

Friday, December 20, 2013 End of Fall Semester Classes

Monday, December 23, 2013 Winter Recess Begins

# **Western University of Health Sciences**

# **Board of Trustees, Administration, and Faculty**

# **Board of Trustees**

Richard A. Bond, DO, DrPH, FAAFP, Chairman Linda L. Crans, BS, Vice Chair John A. Forbing, LHD (Hon.), Secretary Ethan R. Allen, DO, DSc (Hon.), Treasurer Philip Pumerantz, PhD, LHD (Hon.), President (ex officio)

Gene Barduson, MMath
Tony L. Chan, PharmD
The Honorable Maureen Duffy-Lewis, JD
Warren Lawless, LHD (Hon.), Chairman Emeritus
John T. McGwire, DDS
Vincent J. Naimoli, MBA, LHD (Hon.)
Mick Quick
David Sadava, PhD
Derek A. Samuel, MPT
Lawrence L. Leyba, DO, DEd (Hon.), Trustee Emeritus
Edward Tessier, LHD (Hon.), Trustee Emeritus
Frank York Lee, MD, Trustee Emeritus\*
Richard E. Eby, DO, Trustee Emeritus\*

<sup>\*</sup>Deceased

# **University Administration**

President: Philip Pumerantz, PhD, LHD (Hon.)

Provost and Chief Operating Officer: Gary M. Gugelchuk, PhD

Treasurer/Chief Financial Officer: Kevin D. Shaw

General Counsel: Keith A. Johnson, JD Senior Vice President: Thomas G. Fox, PhD Vice Provost: Sheree J. Aston, OD, MA, PhD

Vice President of Enrollment Management and Student Affairs: Beverly A. Guidry, EdD

Vice President for Research and Biotechnology: Steven J. Henriksen, PhD

Assistant Vice President, Sponsored Research and Contract Management: Matthew Katz, MHA Assistant Vice President, Enrollment Management & University Registrar - Kimberley de Kruif, MBA

Executive Director, Facilities and Physical Plant: Todd Clark, AIA Executive Director, Information Technology: Denise Wilcox, MS Executive Director, Public Affairs and Marketing: Jeff Keating Executive Director, University Library: Patricia Vader, MLIS Senior Director, Business Services and Purchasing: Michael Butler

Director, Bookstore: Liz Guerra

Director, Environmental Health and Safety: Brett Boston

Director, Financial Aid and Special Assistant to the President: Otto Reyer, MA

Director, Harris Family Center for Disability & Health Policy & Assistant Vice President for

Government: Brenda Premo, MBA

Director, Institutional Research: Juan Ramirez, PhD

#### College of Allied Health Professions

Dean, College of Allied Health Professions: Stephanie D. Bowlin, EdD, PA

Associate Dean of Research: Donna Redman-Bentley, PhD, PT

Chairperson, Department of Health Sciences: Tina Meyer, DHSc, PA-C

Chairperson, Department of Physician Assistant Education: Roy Guizado, MS, PA-C Chairperson, Department of Physical Therapy Education: Denise Schilling, PT, PhD

# College of Dental Medicine

Dean, College of Dental Medicine: Steven W. Friedrichsen, DDS

Associate Dean, Community Partnerships and Access to Care: Timothy Martinez, DMD

Associate Dean, Simulation, Immersion, and Digital Learning Environments: Robert Hasel, DDS

Assistant Dean, Academic Affairs: Elizabeth Andrews, DDS, MS

Assistant Dean, Patient Care and Clinical Education: David Lazarchik, DMD Assistant Dean, Research and Biomedical Sciences: Bradley Henson, DDS, PhD

# **College of Graduate Nursing**

Founding Dean, College of Graduate Nursing: Karen Hanford, EdD, MSN, FNP

Associate Dean, Director of FNP Program: Diana Lithgow, PhD, FNP-C, RN

Assistant Dean, Administration and Research, Director RN to MSN/MSN-E Program: Mary Lopez, PhD, RN, OCN

Assistant Dean, Student Affairs: Mitzi McKay, MFA

Director of DNP Program, Health Systems Leadership: Jan Boller, PhD, RN

# College of Optometry

Founding Dean, College of Optometry: Elizabeth Hoppe, OD, MPH, DrPH

Associate Dean of Academic Affairs: Daniel Kurtz, PhD, OD, FAAO

Assistant Dean of Student Affairs: Ann Ellis, MEd

### College of Osteopathic Medicine of the Pacific

Vice-President, Oregon Campus Operations, Interim Dean, COMP: Paula M. Crone, DO

Vice-Dean, College of Osteopathic Medicine of the Pacific: David A. Connett, DO

Associate Dean, Academic Affairs, Susan Mackintosh, DO, MPH

Associate Dean, Academic Affairs COMP-Northwest: Edward Junkins, MD

Associate Dean, Basic Sciences and Research: Nissar Darmani, PhD

Associate Dean, Graduate Medical Education: Michael Finley, DO

Assistant Dean, Academic Informatics, Chief Technology Officer: Scott Helf, DO, MSIT

Assistant Dean, Clinical Education: Stephanie White, DO

Assistant Dean, Interdisciplinary Professional Education: Gail Singer-Chang, PsyD

Assistant Dean, Medical Education COMP-Northwest: Louise Muscato, PhD

Assistant Dean, Pre-Clinical Education: Gerald Thrush, PhD

Assistant Dean, Student Affairs: Michelle Emmert, EdD

Chairperson, Department of Anatomy: James May, PhD

Chairperson, Department of Basic Medical Sciences: Nissar Darmani, PhD

Chairperson, Department of Family Medicine: Alan D. Cundari, DO, MS

Interim Chairperson, Department of Internal Medicine: Michael Finley, DO

Chairperson, Department of Obstetrics/Gynecology: Lony C. Castro, MD

Chairperson, Department of Osteopathic Manipulative Medicine: Michael Seffinger, DO

Chairperson, Department of Pediatrics: Lisa Warren, DO

Chairperson, Department of Surgery: J. Vivian Davis III, DO

Chairperson, Department of Psychiatry: Christopher Heh, MD

Chairperson, Department of Pathology: Cyrus Parsa, DO

Director, Institute for Medical Educators: Gail Singer-Chang, PsyD

Director, Willed Body Program: Niña McCoy Director of Operations: Jason Campbell, MS

# **College of Pharmacy**

Dean, College of Pharmacy: Daniel Robinson, PharmD, FASHP

Vice Dean, Academic Diversity and Development: Jesse F. Martinez, PharmD, FASCP

Associate Dean, Academic and Student Affairs: Sunil Prabhu, PhD

Associate Dean, College Advancement: Sam K. Shimomura, PharmD

Associate Dean, Experiential and Professional Affairs: James Scott, PharmD

Assistant Dean of Curricular Affairs: Eunice Chung, PharmD

Assistant Dean of Student Affairs: Mark lannuzzo

Department Chair, Pharmaceutical Sciences: Stephen O'Barr, PhD

Department Chair, Pharmacy Practice and Administration: Anandi Law, PhD

Director of Enrollment Management: Megan Nguyen, PharmD

Director of Graduate Education: Dr. Jeffrey Wang, PhD

Director of Residency and Fellowship Training: Cynthia Jackevicius, PharmD

Director, Center for the Advancement of Drug Research and Evaluation: Moses S. Chow PharmD

Director, Operations: Mark Goggin

#### College of Podiatric Medicine

Founding Dean, College of Podiatric Medicine: Lawrence B. Harkless, DPM

Executive Associate Dean, Academic Affairs: Lester J. Jones, Jr., DPM, MS Ed

Assistant Dean, Pre-Clinical Curriculum and Outcomes Assessment: Kathy Satterfield, DPM, FACFAOM, MAPWCA

Assistant Dean, Student Affairs: Amber Del Pozo, MA

Director of Operations: Jason Campbell, MS

# College of Veterinary Medicine

Dean, College of Veterinary Medicine: Phillip D. Nelson, DVM, PhD

Interim Associate Dean, Academic Affairs: Wendell J. Cole, DVM, Dipl. ACT Associate Dean, Research: Dominique Griffon, DMV, MS, PhD, DECVS, DACVS

Director, Year 1: Josep Rutllant-Labeaga, DVM, PhD (Interim)

Director, Year 2: Josep Rutllant-Labeaga, DVM, PhD

Director, Year 3: Wendell J. Cole, DVM, Dipl. ACT

Director, Year 4: Ron Terra, DVM, MS, MBA

Director, Clinical Relations: Paul Gordon-Ross, DVM, MS

Director, College Outcomes Assessment: Peggy L. Schmidt, DVM, MS, Dipl. ACVPM

Program Director, Willed deceased Animals for Veterinary Education (W.A.V.E.): Tamara Miller

# **Graduate College of Biomedical Sciences**

Dean, Graduate College of Biomedical Sciences: Michel Baudry, PhD

Associate Dean for Academic Affairs: Guru V. Betageri, PhD

Program Director, MSMS: Jodi Olson, MA

# **College Advisory Council Members**

# **College of Allied Health Professions**

David T. Hayes Tony Hilton, FNP, MSN, MPH Miles Holland

Pamela Poliakoff Brenda Premo. MBA Winkie Sonnefield, MA, PT

# College of Dental Medicine

Tony Daher, DDS Penny L. Gage Ernest Garcia, DDS John McGwire, DDS Brian Scott, DDS Russell Webb, DDS

# **College of Graduate Nursing**

Liz Aragon, PN, MHA Karen Blessings, RN, BSN Jan Boller, PhD, RN Pat Chambers, RN, BSN, MBA Suellen Crano, PhD Sarah G. Daum, EdD Peggy Diller, RN, MS Linda Fahey, RN, MN, ANP-C Miriam Fulton, RN, MSN, ANP, CS, CCRN

Judy Husted, RN, MSN

Scott Helf, DO

# **College of Optometry**

Currently being restructured

College of Osteopathic Medicine of the Pacific

Karol Attaway Gene Barduson, MMath Linda Crans, BS Steven E. Davis, DO James Dearing, DO Joseph C. Gambone, DO, MPH Craig Garner, JD

Jeff Heathering William Henning, DO Michael Krasnow, DO John Landsberger, DO Shirley Johnson, RN, MS, MBA Heather McDonald, MSN, FNP Rick Martin, RN, MSN Lolla Mitchell, RN, MSN Brenda Napper, MSN Rita Ostravich, RN, MSN Barbara Patton, BSN, MSN Toni J. Sullivan, PhD Ivy C. Tuason, RN, MSN, FNP

Ernest C. Levister, MD Susan Melvin, DO Mitch Morris, MD Patrick Petre

Ancel J. Rogers, MD, FACS

Lisa Rubino

Michael J. Scott III, DO, MPH

Michael Schmidt **David Sherman** Rick Shinto, MD, MBA Norman Vinn, DO, MBA

# College of Pharmacy

Bill Burrows
John Cronin, PharmD, JD
Rebecca Cupp, RPh
Richard de Leon, PharmD
Glenn Etow, PharmD
Steven W. Gray, PharmD, JD
Amy Gutierrez, PharmD
John D. Jones, RPh, JD, FAMCP

# College of Podiatric Medicine

Stephen Albert, DPM
Jodie Currie
Gary Strauss
Bryan Bullard, DPM
Leonard Lawrence, MD
Leonard Levy, DPM, MPH
Michael O'Shea, DPM
C. Stanley Churchwell

# College of Veterinary Medicine

Currently being restructured

Roger Klotz, RPh, FASCP, BCNSP Victor Law, RPh Jesse F. Martinez, PharmD, FASCP Thomas Russillo Sam Shimomura, PharmD Brad Trom, RPh Joel N. Weber, PharmD, FCSHP, FASHP Ray M. Yutani, DO, PharmD

Beth A. Kase, Esq. Edward Livingston, MD Geoff Mackay Hienvu C. Nguyen, DPM Peter Sheehan, MD Scott Tafuri, DPM, JD Craig Turtzo

#### **Faculty**

Clinton Adams, Professor of Family Medicine, 2005. BS, Baldwin-Wallace College; DO, Chicago College of Osteopathic Medicine; MPA, University of Oklahoma.

M. Monica Adams, Assistant Professor of Physician Assistant Education, 2004. AS, Rio Hondo College; BS, California State University, Dominguez Hills; PA-C, Western University of Health Sciences.

Bertha O. Alarcon-Vargas, Assistant Professor of Dental Medicine, 2010. BS, California State University, Long Beach; DDS, Case Western Reserve University.

Ana Alcaraz, Associate Professor of Veterinary Medicine, 2007. DVM, Universidad Nacional Autonoma de Mexico; PhD, Cornell University.

Nancy Alexander, Instructor of Family Medicine, 2007. PA, Western University of Health Sciences.

Mohammed S. Al-Tikriti, Associate Professor of Anatomy and Optometry, 2008. BVMS, University of Baghdad; MSc, Iowa State University; MSc, Louisiana State University; PhD, University of Tennessee.

Randall Anderson, Instructor of Veterinary Medicine, 2007. AS, Antelope Valley College; BS, DVM, MPVM, University of California, Davis.

Bradley Tram Andresen, Assistant Professor of Pharmaceutical Sciences, 2011. BS, Hope College; PhD, University of Pittsburgh.

Elizabeth Ann Andrews, Assistant Professor of Dental Medicine, 2008. BA, California State University, Northridge; DDS, University of the Pacific; MS, University of North Carolina.

Dayle Chakerian Armstrong, Associate Professor of Physical Therapy Education, 2000. AS, BS, Mount St. Mary's College; MS, University of Southern California; DPT, Western University of Health Sciences.

Sheree J. Aston, Professor of Optometry, 2007. OD, Pennsylvania College of Optometry; MA, PhD, University of Pennsylvania.

Bruno Correa de Azevedo, Assistant Professor of Dental Medicine, 2009. DDS, Universidade Gama Fiho; MD, University of Texas, San Antonio.

Gerald Bales, Associate Professor of Anatomy, 1996. BA, MA, Chico State University; PhD, University of Southern California.

Edward V. Barnes, Assistant Professor of Internal Medicine, 2010. BA, Whittier College; MD, University of Kansas.

Stephanie D. Baron, Instructor of Physician Assistant Education, 2011. BA, Colby College; MS, Western University of Health Sciences.

Margaret C. Barr, DVM, PhD, Professor of Veterinary Medicine, 2004. BS, University of the South; DVM, Auburn University; PhD, Cornell University.

Gini Barrett, Associate Professor of Veterinary Medicine, 2002. BS, California State University, Northridge.

Michel Baudry, Professor of Biomedical Sciences, 2012. MS, PhD, University of Paris VII.

Gerald A. Bertetta, Instructor of Anatomy, 2007. BA, MA, San Francisco State University.

Joseph J. Bertone, Professor of Veterinary Medicine, 2003. BS, DVM, Cornell University; MS, Colorado State University.

Brion Benninger, Professor of Anatomy/Adjunct Professor of Dental Medicine, 2011. MBChB, Leicester University; MS, Nottingham University.

Gurupadappa V. Betageri, Professor of Pharmaceutical Sciences, 1998. BS, Karnatak University; MS, Bangalore University; PhD, University of Alberta.

Xiaoning Bi, Professor of Basic Medical Sciences/Sarkaria Professor of Neuroscience, 2005. MD, Binzhou Medical University; MS, Third Medical University of the People's Liberation Army; PhD, University of Southern California.

Janice U. Blumer, Assistant Professor of Neuromusculoskeletal Medicine/Osteopathic Manipulative Medicine, 2010. BS, University of Arizona; DO, Western University of Health Sciences.

Tobias K. Boehm, Assistant Professor of Dental Medicine, 2009. BS, Chaminade University; DDS, PhD, State University of New York at Buffalo.

Jan Boller, Associate Professor of Graduate Nursing/The Fletcher Jones Foundation Endowed Chair for Nursing Quality and Safety, 2008. BS, Nebraska Wesleyan University; MSN, California State University, Long Beach; PhD, University of California, San Francisco.

James L. Borke, Professor of Dental Medicine, 2011. BS, MS, Northern Illinois University; PhD, Illinois Institute of Technology.

Frank Bossong, Assistant Professor of Veterinary Medicine, 2009. BS, University of Virginia; DVM, University of Georgia.

Suzette G. Bosveld, Associate Professor of Graduate Nursing, 2013. ASN, DeKalb College; BSN, Bresnau University; MSN, Azusa Pacific University.

Stephanie D. Bowlin, Associate Professor of Physician Assistant Education, 1990. BS, California State University, Dominguez Hills; MS, College of Osteopathic Medicine of the Pacific; PA-C, Charles R. Drew University of Medicine and Science; EdD, University of La Verne.

Tina M. Boykin, Instructor of Physician Assistant Education, 2009. BS, University of California, Riverside; MPH, Loma Linda University; MS, Western University of Health Sciences.

Elizabeth P. Boynton, Professor of Veterinary Medicine, 2003. BA, Iowa State University; DVM, University of Minnesota.

Rajivinder S. Brar, Assistant Professor of Family Medicine/Biochemistry, 2006. BSc, Oakland University; PhD, Wayne State University; DO, Arizona College of Osteopathic Medicine.

Joachim ("Joe") M. Brown, Assistant Professor of Family Medicine, 2013. BS, University of California, Davis; DO, MS, Western University of Health Sciences

Philip H. Brownell, Professor of Physiology, 2011. BA, University of California, Berkeley; PhD, University of California, Riverside.

Grant A. Burdick, Assistant Professor of Dental Medicine (part-time), 2011. AA, Pasadena City College; BA, University of California, Los Angeles; DDS, University of Southern California.

Jennifer L. Buur, Associate Professor of Veterinary Medicine, 2007. DVM, Washington State University; PhD, North Carolina State University.

Patricia Callard, Assistant Professor of Graduate Nursing, 2004. BS, MS, Kent State University, DNP, Western University of Health Sciences.

D. Joshua Cameron, Assistant Professor of Optometry, 2010. BS, Brigham Young University; PhD, University of Utah.

Arezoo Campbell, Associate Professor of Pharmaceutical Sciences, 2006. BA, BS, PhD, University of California, Irvine.

Dannelle Caprio, Assistant Professor of Dental Medicine, 2012. BS, California State University, Fullerton; DDS, University of Southern California.

Efrain Castellanos Bahena, Assistant Professor of Optometry, 2011. OD, Universidad Xochicalco; MS, Universidad Autonoma de Aguascalientes.

Lony C. Castro, Professor of Obstetrics and Gynecology, 2001. BA, University of California, San Diego; MD, University of California, San Francisco.

Hubert K. Chan, Assistant Professor of Dental Medicine, 2011. BS, DDS, University of Southern California.

Patrick G. Chan, Assistant Professor of Pharmacy Practice and Administration, 2009. BA, University of California, Berkeley; PharmD, PhD, University of the Pacific.

Casey Chaney, Associate Professor of Physical Therapy Education, 1993. BS, MS, Russell Sage College; PhD University of Utah, College of Health.

Chandrashekhar Charavaryamath, Instructor of Veterinary Medicine, 2012. BVSc, MVSc, University of Agricultural Sciences, Bengaluru; PhD, University of Sasketchewan.

Elizabeth Charles, Instructor of Veterinary Medicine, 2009. BS, DVM, Washington State University; MA, Biola University.

George Charney, Professor of Surgery/Anesthesiology (Emeritus), 1997. BA, Brooklyn College; DO, Philadelphia College of Osteopathic Medicine.

Christopher H. Chase, Professor of Optometry and Biomedical Sciences, 2009. BA, St. John's College; PhD, University of California, San Diego.

Amy E. Chew, Assistant Professor of Anatomy, 2007. BSc, MSc, University of Toronto; PhD, The Johns Hopkins University.

Joori Kim Cho, Assistant Professor of Dental Medicine (part-time), 2012. BS, University of California, Irvine; DMD, University of Pennsylvania.

Sam S. Cho, Assistant Professor of Dental Medicine (part-time), 2012. BS, California State Polytechnic University, Pomona; DDS, University of Southern California.

Moses S. S. Chow, Professor of Pharmacy Practice and Administration, 2007. AA, City College of San Francisco; PharmD, University of California, San Francisco.

Sheryl L. Chow, Associate Professor of Pharmacy Practice and Administration, 2004. BS, University of Connecticut; PharmD, State University of New York at Buffalo.

Robert A. Christman, Professor of Podiatric Medicine and Surgery, 2008. BS, Pennsylvania State University, DPM, Pennsylvania College of Podiatric Medicine; MEd, Temple University.

Brian S. Chui, Assistant Professor of Dental Medicine, 2012. BS, California State Polytechnic University, Pomona; DDS, University of Southern California.

Sam Chui, Assistant Professor of Dental Medicine, 2011. BA, University of California, Los Angeles; DDS, University of Southern California.

Eunice P. Chung, Associate Professor of Pharmacy Practice and Administration, 1999. BS, University of California, Berkeley; PharmD, University of California, San Francisco.

David E. Clark, Associate Professor of Graduate Nursing, 2008. BS, DVM, Texas A&M University.

Jennifer Cohen, Assistant Professor of Graduate Nursing, 2006 (Part-time). ASN, Saddleback College; BA, University of California, San Diego; MSN, California State University, Dominguez Hills.

Wendell J. Cole, Professor of Veterinary Medicine, 2004. BS, University of New Hampshire; DVM, The Ohio State University.

Ellen W. Collisson, Professor of Veterinary Medicine, 2007. BS, University of Illinois; MS, PhD, University of Alabama, Birmingham.

David A. Connett, Associate Professor of Family Medicine, 2007. BA, California State University, Fullerton; DO, Western University of Health Sciences.

Mihai Covasa, Associate Professor of Physiology, 2010. BS, University of Iasi; MSc, PhD, University of Leeds.

Alissa P. Craft, Associate Professor of Pediatrics, 2012. BS, Arizona State University; DO, Kirksville College of Osteopathic Medicine; MBA, University of Phoenix.

Paula M. Crone, Associate Professor of Family Medicine, 2010. BS, University of Portland; DO, Western University of Health Sciences.

Alan D. Cundari, Professor of Family Medicine, 1987. AS, University of Albuquerque; MS, College of Osteopathic Medicine of the Pacific; DO, College of Osteopathic Medicine of the Pacific.

Nissar A. Darmani, Professor of Pharmacology, 2005. BS, Leeds University; MS, PhD, University of Wales.

Pinakin Davey, Associate Professor of Optometry, 2011. BS, Elite School of Optometry; PhD, Anglia Polytechnic University; OD, Southern College of Optometry.

J. Vivian Davis III, Associate Professor of Surgery, 2000. BA, MA, University of Texas, Austin; DO, Texas College of Osteopathic Medicine; MA, William Woods University.

Maisie Dawes, Assistant Professor of Veterinary Medicine, 2007. AS, College of Agriculture, Portland, Jamaica; BS, DVM, Tuskegee University; PhD, University of Missouri, Columbia.

Pedro P. Diniz, Assistant Professor of Veterinary Medicine, 2009. DVM, PhD, Sao Paulo State University.

Paul M. Dobies, Assistant Professor of Optometry, 2009. BS, Loyola Marymount University; BS, OD, Southern California College of Optometry.

Yvonne Drechsler, Associate Professor of Veterinary Medicine, 2007. Dip. Biology, PhD, University of Tübingen.

Robyn Dreibelbis, Assistant Professor of Family Medicine, 2011. BS, University of California, Santa Barbara; DO, Western University of Health Sciences.

Robin J. Drescher, Assistant Professor of Optometry, 2010. BS, United States Military Academy; OD, Southern California College of Optometry; MS, Pacific University.

Christine Eddow, Assistant Professor of Physical Therapy Education (part-time), 2010. BS, California State Polytechnic University, Pomona; MPT, University of Southern California; DPT, Loma Linda University.

Quannetta T. Edwards, Professor of Graduate Nursing, 2010. RN, Providence Hospital School of Nursing; AA, McMurray University; BS, University of Texas, San Antonio; MS, Wright State University; MS, Mississippi University for Women; PhD, The Catholic University of America.

Donald J. Egan, Associate Professor of Optometry, 2009. BS, St. John's University; OD, Pennsylvania College of Optometry.

Jeffrey A. Elo, Associate Professor of Dental Medicine, 2012. BA, DDS, MS, MBA, Indiana University.

Donna M. Emanuele, Assistant Professor of Graduate Nursing, 2010. ASN, Middlesex Community College; BSN, California State University, Los Angeles; DPN, Touro University Nevada.

Helen Engelke, Assistant Professor of Veterinary Medicine, 2006. BVSc, University of Liverpool; MPVM, University of California, Davis.

Tina J. Escobedo, Assistant Professor of Graduate Nursing (part-time), 2010. BSN, University of Phoenix; MSN, California State University, Fullerton.

Douglas W. Ethell, Associate Professor of Biomedical Sciences, 2010. BS, PhD, University of British Columbia.

Maria Fahie, Professor of Veterinary Medicine, 2002. BS, Dalhousie University; DVM, University of Prince Edward Island; MS, Virginia-Maryland Regional College of Veterinary Medicine.

Mariam Fahim, Assistant Professor of Pediatrics, 2009. BS, Vanguard University; DO, Midwestern University, Arizona.

Nataly Fahim, Assistant Professor of Optometry (part-time), 2011. BA, California State University, Long Beach; OD, Nova Southeastern University.

Sandra Farah-Franco, Assistant Professor of Dental Medicine, 2009. BS, University of California, Los Angeles; DDS, University of Southern California.

Babak Faramarzi, Assistant Professor of Veterinary Medicine, 2009. DVM, Azad University; MSc, PhD, University of Guelph.

Andrea L. Feather, Assistant Professor of Dental Medicine (part-time), 2011. BS, California State University, Los Angeles; DDS, MS, University of California, Los Angeles.

Jeffrey Felton, Professor of Microbiology, 1993. BS, Massachusetts Institute of Technology; PhD, Tufts University.

J. Michael Finley, Associate Professor of Internal Medicine, 2000. BS, Michigan State University; DO, Chicago College of Osteopathic Medicine.

Linda S. Flores, Assistant Professor of Graduate Nursing, 2009. BSN, University of Virginia; MSN, California State University, Dominguez Hills.

Duane H. Foley, Professor of Physiology, 1984. BS, University of California, Davis; PhD, University of California, Davis.

Diana Kogan Folmsbee, Assistant Professor of Dental Medicine, 2012. BA, University of Southern California; DMD, University of Pittsburgh.

David E. M. Forster, Assistant Professor of Veterinary Medicine, 2012. BVM, University of London; MA, Fuller Theological Seminary.

Marcel P. Fraix, Assistant Professor of Osteopathic Manipulative Medicine, 2008. BS, University of California, Los Angeles; DO, Western University of Health Sciences.

Josephine M. Franc, Instructor of Dental Medicine, 2011. AS, Pasadena City College.

Steven W. Friedrichsen, Professor of Dental Medicine, 2010. BS, Seattle University; DDS, Northwestern University.

Brent Fung, Assistant Professor of Dental Medicine, 2012. BS, California State University, Long Beach; DDS, University of Southern California.

Sandra J. Garner, Instructor of Social Medicine and Administrative Sciences, 2007. BA, California State University, Fullerton; Med, Claremont Graduate University.

Edward K. Goering, Assistant Professor of Neuromusculoskeletal Medicine/OMM, 2013. BA, McPherson College; BS, DVM, Washington State University; DO, MS, Western University of Health Sciences.

Hyma P. Gogineni, Assistant Professor of Pharmacy Practice and Administration, 2012. BS, MS, Gulbarga University; PharmD, Ferris State University.

Lisa M. Goldstein, Assistant Professor of Graduate Nursing, 2006. BSN, Loma Linda University; MSN, California State University, San Bernardino.

Christina Goode, Professor of Biomedical Sciences (part-time), 2012. BS, University of London; PhD, University of Guelph.

Robert L. Gordon, Professor of Optometry, 2011. BS, OD, Southern California College of Optometry.

Paul Gordon-Ross, Assistant Professor of Veterinary Medicine, 2007. BS, University of California, Riverside; MS, DVM, University of California, Davis.

Patricia Greene, Assistant Professor of Dental Medicine, 2012. BS, University of California, Berkeley; DMD, Tufts University.

Dominique Griffon, Professor of Veterinary Medicine, 2011. DVM, Ecole Nationale Veterinaire d'Alfort; MS, University of Minnesota; PhD, University of Helsinki.

Lee R. Grunden, Professor of Pharmacology (Emeritus), 1980. BS Oregon State University; PhD, University of California, San Francisco Medical Center.

Vidalita Genove Grunden, Professor of Pathology (Emerita), 1980. AA, Sillman University; MD, University of Santa Tomas.

Gary M. Gugelchuk, Associate Professor of Health Professions Education, 1986. BA, MA, PhD, The Ohio State University.

Beverly Guidry, Instructor of Health Professions Education, 1997. BA, MS, EdD, University of LaVerne.

Rebecca E. Guisti, Assistant Professor of Osteopathic Manipulative Medicine (Part-time), 2007. DO, Western University of Health Sciences.

Roy A. Guizado, Associate Professor of Physician Assistant Education, 1994. PA-C, College of Osteopathic Medicine of the Pacific; MS, Western University of Health Sciences.

Jin Guo, Assistant Professor of Pathology (part-time), 2012. MD, MM, Tianjin Medical University.

Eric Knuth Gupta, Associate Professor of Pharmacy Practice and Administration, 2004. PharmD, University of the Pacific.

Spring K. Halland, Assistant Professor of Veterinary Medicine, 2009. BA, Luther College; DVM, University of Minnesota.

Karen J. Hanford, Professor of Graduate Nursing, 1997. BSN, San Francisco State University; MSN, California State University, Chico; FNP, PA, University of North Dakota; EdD, University of La Verne.

Jijun Hao, Assistant Professor of Veterinary Medicine, 2012. BSc, East China University of Science and Technology; PhD, University of Leeds.

Dana L. Hardy, Clinical Assistant Professor of Dental Medicine, 2010. BMS, DDS, University of Alberta.

Lawrence Harkless, Professor of Podiatric Medicine and Surgery, 2007. BS, DPM, California College of Podiatric Medicine.

Effuah A. Harris, Assistant Professor of Dental Medicine, 2011. Dr. Med. Dent., University of Munich; DDS, University of Southern California.

Tiffenie A. Harris, Associate Professor of Optometry, 2008. BA, OD, Indiana University.

Robert W. Hasel, Associate Professor of Dental Medicine, 2012. BS, DDS, University of Minnesota.

Micah Hata, Assistant Professor of Pharmacy Practice and Administration, 2008. BA, University of California, Riverside; PharmD, Western University of Health Sciences.

Martina Haupt, Instructor of Veterinary Medicine (Part-time), 2008. Dr Med Vet, Justus-Liebig University.

C. W. Christopher Heh, Assistant Professor of Psychiatry, 2009. BS, University of Texas, Austin; MD, University of Texas, Houston.

Scott Helf, Assistant Professor of Social Medicine and Healthcare Leadership, 2007. BS, University of California, San Diego; DO, Western University of Health Sciences; MS, California State University, Fullerton.

Steven Henriksen, Professor of Pharmacology, 2005. BA, University of California, Santa Barbara; PhD, Stanford University.

Bradley S. Henson, Assistant Professor of Dental Medicine/Basic Medical Sciences, 2008. BS, Northern Michigan University; DDS, PhD, University of Michigan.

Karl Hess, Associate Professor of Pharmacy Practice and Administration, 2006. PharmD, Massachusetts College of Pharmacy and Health Sciences.

Rodney W. Hicks, Professor of Graduate Nursing, 2011. ASN, Oklahoma State University Technical Institute; BSN, FNP Certificate, Texas Tech University; MSN, MPA, The University of Texas at Arlington; PhD, Capella University.

Janice Hoffman, Associate Professor of Pharmacy Practice and Administration, 2008. PharmD, University of Southern California.

Gillian Hollands, Adjunct Assistant Professor of Optometry, 2013. OD, University of Waterloo; MS, Bloomsburg University.

Simon K. Hong, Assistant Professor of Dental Medicine (part-time), 2011. BS, University of California, Irvine; MPH, Loma Linda University; DMD, Tufts University.

Yiling Hong, Associate Professor of Veterinary Medicine, 2012. BS, MS, Xiamen University; PhD, University of Kentucky.

Elizabeth Hoppe, Professor of Optometry, 2007. AS, Jackson Community College; BS, OD, Ferris State University; MPH, Yale University, DrPH, University of Michigan.

Michelle Hovorka, Instructor of Anatomy, 2011. BS, University of Washington; MS, AT Still University.

Raymond J. Hruby, Professor of Family Medicine/Osteopathic Manipulative Medicine (part-time), 2009. BA, St. Vincent College; DO, College of Osteopathic Medicine and Surgery, MS, West Coast University.

Donald Hsu, Professor of Pharmacy Practice and Administration, 2005. BS, University of California, Los Angeles; PharmD, Western University of Health Sciences.

J-S Hu, Associate Professor of Biochemistry, 2007. BSc, Xiamen University; MSc, Shanghai Institute of Organic Chemistry; PhD, Brandeis University.

Ying Huang, Associate Professor of Pharmaceutical Sciences, 2006. MM, Chinese Academy of Preventive Medicine; MD, Beijing Medical University; PhD, The Ohio State University.

Mary Hudson-McKinney, Assistant Professor of Physical Therapy Education, 2005. AS, Citrus Community College; BS, California State University, Northridge; MS, DPT, University of Southern California.

Carol Huie, Assistant Professor of Graduate Nursing, 2012. BS, MS, Arizona State University.

Kristopher Irizarry, Associate Professor of Veterinary Medicine, 2006. BS, Renselaer Polytechnic Institute; PhD, University of California, Los Angeles.

Manish Issar, Assistant Professor of Pharmacology, 2010. BS, MS, PhD, Banaras Hindu University.

Cynthia Jackevicius, Professor of Pharmacy Practice and Administration, 2005. BSc, MSc, University of Toronto; PharmD, Shenandoah University.

Susan Jacob, Assistant Professor of Pharmacy Practice and Administration, 2007. PharmD, University of the Sciences in Philadelphia.

Michael P. Jaczko, Assistant Professor of Family Medicine, 2012. BS, Rider University; DO, Philadelphia College of Osteopathic Medicine.

Richard Jaffe, Assistant Professor of Veterinary Medicine, 2006. BA, Lafayette College; VMD, University of Pennsylvania.

Kristi A. Jensen, Assistant Professor of Optometry, 2011. BS, California State University, Hayward; BS, OD, Pennsylvania College of Optometry.

Gary R. Johnston, Professor of Veterinary Medicine (Emeritus), 1999. BA, University of Washington; DVM, Washington State University; MS, University of Minnesota.

Lester J. Jones, Professor of Podiatric Medicine and Surgery, 2007. BS, DPM, MS, California College of Podiatric Medicine.

Janis Joslin, Professor of Veterinary Medicine, 2007. BA, Northwestern University; DVM, The Ohio State University.

Jeany Kim Jun, Assistant Professor of Pharmacy Practice and Administration, 2002. BA, University of California, Los Angeles; MPH, Loma Linda University; PharmD, University of California, San Francisco.

Young J. Jun, Assistant Professor of Dental Medicine, 2011. BS, University of California, San Diego; MD, DDS, Loma Linda University.

Edward P. Junkins, Professor of Pediatrics, 2013. BA, Notre Dame University; MD, Johns Hopkins University, MPH, University of Utah.

Malika Kachani, Professor of Veterinary Medicine, 2004. DVM, Institut Agronomique et Veterinaire Hassan II; PhD, Brunel University.

Raj P. Kandpal, Associate Professor of Biochemistry, 2007. BSc, Kumaon University; MSc, G. B. Pant University; PhD, Indian Institute of Science.

Shirley Y. Kang, Clinical Assistant Professor of Dental Medicine, 2010 (part-time). BS, University of California, San Diego; DDS, University of Southern California.

Gagandeep Kaur, Assistant Professor of Veterinary Medicine, 2012. BVSc, Punjab Agricultural University; PhD, Kent State University.

Jerry Kellogg, Adjunct Assistant Professor of Graduate Nursing, 1998. BA, University of California, Riverside; MA, California State University, Los Angeles.

David Kersey, Assistant Professor of Veterinary Medicine, 2009. BS, Washington State University; PhD, George Mason University.

Firhana Z. Khairullah, Assistant Professor of Family Medicine, 2008. BS, State University of New York, New Paltz; DO, New York College of Osteopathic Medicine.

Wael A. Khamas, Professor of Veterinary Medicine, 2005. BVM, BVS, University of Baghdad; MS, PhD, Iowa State University.

Fadi T. Khasawneh, Associate Professor of Pharmaceutical Sciences, 2008. BS, MS, Jordan University of Science and Technology; PhD, University of Illinois at Chicago.

Choolin Khoo, Assistant Professor of Dental Medicine, 2012. BS, University of California, Riverside; DDS, Loma Linda University.

Linda B. Kidd, Associate Professor of Veterinary Medicine, 2007. BS, DVM, University of Wisconsin, Madison; PhD, North Carolina State University.

Clara Kim, Assistant Professor of Dental Medicine, 2012. BA, University of California, Berkeley; DDM, Harvard University; MS, University of Southern California.

Glen E. Kisby, Associate Professor of Pharmacology, 2011. BA, Bridgewater State College; BS, Northeastern University; PhD, University of Texas, Austin.

Thomas J. Kleyn, Assistant Professor of Pharmacy Practice and Administration, 2012. PharmD, Purdue University.

Roger Klotz, Associate Professor of Pharmacy Practice and Administration, 2007. BS, University of Illinois.

Janet L. Konecne, Assistant Professor of Physical Therapy Education (Part-time), 2009. BS, Northern Arizona University; MS, DPT, University of Southern California.

Diane M. Koshimune, Assistant Professor of Podiatric Medicine, Surgery and Biomechanics, 2011. BA, BS, University of California, Riverside; MHA, DPM, Rosalind Franklin University of Medicine and Science.

Ramesh Kothari, Assistant Professor of Dental Medicine (part-time), 2011. BDS, Government Dental College and Hospital, Ahmedabad.

J. Susie Kovacs, Assistant Professor of Veterinary Medicine, 2004. BSc, University of Western Ontario; MSc, DVM, University of Guelph.

Brian P. Kraatz, Assistant Professor of Anatomy, 2009. BA, Gustavus Adolphus College; MS, University of Wyoming; PhD, University of California, Berkeley.

Craig S. Kuehn, Professor of Anatomy, 1985. BS, California State Polytechnic University, Pomona; PhD, University of Southern California.

Anne Kugler, Assistant Professor of Pharmacy Practice and Administration, 2012. BS, Randolph- Macon College; PharmD, Long Island University.

Daniel Kurtz, Professor of Optometry, 2007. BS, Oberlin College; PhD, University of Michigan; OD, The New England College of Optometry.

Jonathan M. Labovitz, Assistant Professor of Podiatric Medicine, Surgery and Biomechanics, 2009. BA, Cornell University; DPM, Pennsylvania College of Podiatric Medicine.

Steven C. Lam, Assistant Professor of Family Medicine, 2011. BA, University of California, Los Angeles; DO, MS, Western University of Health Sciences.

Joel M. Laudenbach, Assistant Professor of Dental Medicine, 2011. BA, Lehigh University; DMD, University of Pennsylvania.

Anandi V. Law, Professor of Pharmacy Practice and Administration, 1999. BPharm, University of Bombay; MS, PhD, The Ohio State University.

Laurie M. Layton, Assistant Professor of Physical Therapy Education, 2011. BS, Radford University; MPT, DPT, Western University of Health Sciences.

David A. Lazarchik, Associate Professor of Dental Medicine, 2009. BA, DMD, University of Florida.

Quang A. Le, Assistant Professor of Pharmacy Practice and Administration, 2011. BS, University of California, Los Angeles; PharmD, Loma Linda University.

Troy Learning, Assistant Professor of Podiatric Medicine, Surgery and Biomechanics, 2010. BS, University of California, Los Angeles; DPM, California College of Podiatric Medicine.

Alexander L. Lee, Clinical Assistant Professor of Dental Medicine, 2010. BS, University of California, Davis; DMD, University of Pittsburgh.

Lyon Lee, Associate Professor of Veterinary Medicine, 2007. DVM, Seoul National University; PhD, University of London.

Robert J. Lee, Associate Professor of Optometry, 2009. BA, California State University, Northridge; OD, Southern California College of Optometry.

Kon L. Leung, Clinical Assistant Professor of Dental Medicine (part-time), 2010. DDS, University of Minnesota.

Ohad Levi, Associate Professor of Veterinary Medicine, 2010. DVM, The Veterinary Medical School of Torino.

Jill B. Lewis, Professor of Dental Medicine, 2012. AA, Springfield College; BA, Illinois Wesleyan University; PhD, Medical College of Georgia.

Diana Lithgow, Professor of Graduate Nursing, 1997. BS, University of California, Irvine; BSN, MSN, California State University, Long Beach; PhD, University of California, Los Angeles.

Alice P. Liou, Assistant Professor of Veterinary Medicine, 2012. BS, DVM, PhD, University of California, Davis.

Chunming Liu, Assistant Professor of Optometry, 2010. BMed, MS, Huazhong University of Science and Technology; PhD, Washington State University; OD, New England College of Optometry.

Jeffrey D. Lloyd, Assistant Professor of Dental Medicine (part-time), 2011. DDS, University of Southern California.

Brian J. Loveless, DO, Assistant Professor of Neuromuscular Medicine/Osteopathic Manipulative Medicine and Family Medicine, 2011. BS, University of California, San Diego; DO, Western University of Health Sciences.

Mary M. Lopez, Assistant Professor of Graduate Nursing, 2009. AS, Pasadena City College; BSN, California State University, Fullerton; MSN, California State University, Los Angeles; PhD, Azusa Pacific University.

Yun (Lyna) Luo, Assistant Professor of Pharmaceutical Sciences, 2013. BS, MS, Zhejiang; PhD, Universitie Pierre et Marie Curie.

Kabirullah Lutfy, Professor of Pharmaceutical Sciences, 2003. BS, Kabul University; MS, St. John's University; PhD, University of California, Irvine.

Marcia Luxenburg-Horowitz, Assistant Professor of Graduate Nursing, 2005. ASN, Pasadena City College; BSN, MSN, California State University, Fullerton; DNP, Western University of Health Sciences.

Susan E. Mackintosh, Assistant Professor of Family Medicine, 2006. BS, California State Polytechnic University, Pomona; DO, Western University of Health Sciences.

Raymond R. Maeda, Associate Professor of Optometry, 2008. BS, University of California, Irvine; OD, Illinois College of Optometry.

Christine Magladry, Assistant Professor of Graduate Nursing (Part-time), 2007. BA, University of Virginia; BSN, Seton Hall University; MSN, University of Texas, El Paso.

Mary Ann Magoun, Assistant Professor of NMM/OMM/Pediatrics, 2011.

Cristina Elena Marchis-Crisan, Assistant Professor of Podiatric Medicine, Surgery and Biomechanics/Family Medicine, 2012. MD, University of Medicine and Pharmacy "Iuliu Hatieganu,: AAS, Tulsa Community College; DPM, Temple University.

Armen Mardurossian, Assistant Professor of Dental Medicine (part-time), 2011. BDS, University of London; MS, Spec. Cert. Peridontics, University of Southern California.

James T. Martin, Professor of Physiology and Behavioral Science, 1986. BA, West Virginia University; MS, University of Connecticut; Dr. re. Nat., University of Munich and Max Planck Institute, Seewiesen, Germany.

Timothy S. Martinez, Clinical Assistant Professor of Dentistry, 2009. BS, University of Southern California; DMD, Harvard University.

John E. Mata, Associate Professor of Pharmacology, 2011. BS, University of Nebraska; PhD, Nebraska University Medical Center.

Elizabeth M. Maugh, Instructor of Physician Assistant Education, 2012. PA Certif., University of Southern California; BS, University of Phoenix; MS, Western University of Health Sciences.

James F. May, Professor of Anatomy, 1981. BS, California State College, Los Angeles; MS, Occidental College; PhD, University of Southern California.

Bennett McAllister, Assistant Professor of Optometry, 2010. BA, California State University, San Bernardino; BS, OD, University of California, Berkeley.

Kate McCaffrey, Assistant Professor of Neuromusculoskeletal Medicine/OMM and Family Medicine, 2012. BA, Hampshire College; DO, Western University of Health Sciences.

Diane E. McClure, Associate Professor of Veterinary Medicine, 2009. BS, University of California, Santa Barbara; PhD, DVM, University of California, Davis.

Patti McCluskey-Andre, Assistant Professor of Graduate Nursing, 2013. AA, Cypress College; BS, Chapman University; MSN, California State University, Dominguez Hills.

Tracey S. McNamara, Professor of Veterinary Medicine, 2007. BS, St. Lawrence University; DVM, Cornell University; DACVP.

Lance McNaughton, Assistant Professor of Optometry, 2009. BSc, PhD, University of Alberta; OD, New England College of Optometry.

Miguel A. Medina, Instructor of Physician Assistant Education, 1992. AA, East Los Angeles Junior College; PA-C, University of Southern California.

Tina Melendrez-Myer, Assistant Professor of Physician Assistant Education, 2004. AS, Cerritos College; PA-C, MS, Western University of Health Sciences; DHSc, Nova Southeastern University.

William D. Merbs, Instructor of Anatomy, 2011. BS, Grand Valley State University.

Katherine M. Mitsouras, Assistant Professor of Biochemistry, 2007. BS, Brown University; PhD, University of California, Los Angeles.

David I Min, Associate Professor of Pharmacy Practice and Administration, 2005. PharmD, MS, University of Minnesota.

Jerry Minsky, Assistant Professor of Dental Medicine (part-time), 2011. BS, California State University, Fullerton; DDS, Georgetown University.

Rudolf Mireles, Clinical Associate Professor of Pharmacy Practice, 2010. PharmD, University of Southern California.

Krishna Mittal, Assistant Professor of Dental Medicine, 2012. BDS, MDS, Amritsar Dental School of India.

Rebecca A. Moellmer, Assistant Professor of Podiatric Medicine, Surgery and Biomechanics, 2012. BS, University of Washington; DPM, New York College of Podiatric Medicine.

Sally Morgan, Associate Professor of Graduate Nursing, 2009 (part-time). AAN, Colorado State University, Pueblo; BSN, Mount Saint Mary's College; MSN, California State University, Dominguez Hills.

Teresa Y. Morishita, Professor of Veterinary Medicine, 2006. BS, MS, University of Hawaii-Manoa; DVM, MPVM, PhD, University of California, Davis.

Tony Mosconi, Associate Professor of Physical Therapy Education, 1997. BS, Allegheny College; MS, PhD, Albany Medical College.

Wallace J. Murray, Professor of Pharmaceutical Sciences (Emeritus), 1999. BS, San Diego State University; PhD, University of California, San Francisco.

Eric B. Naasz, Assistant Professor of Podiatric Medicine, Surgery and Biomechanics, 2012. BS, University of California, Irvine; DPM, Midwestern University.

Kierstyn A. Napier-Dovorany, Assistant Professor of Optometry, 2009. BS, Indiana University; OD, New England College of Optometry.

Arbi Nazarian, Associate Professor of Pharmaceutical Sciences, 2007. BA, MA, California State University, San Bernardino; PhD, City College of New York.

Maryke N. Neiberg, Associate Professor of Optometry, 2010. OD, New England College of Optometry.

Phillip D. Nelson, Professor of Veterinary Medicine, 2005. BS, Jackson State University; DVM, Tuskegee Institute; PhD, North Carolina State University.

Huan (Mark) Nguyen, Assistant Professor of Pharmacy Practice and Administration, 20007. BA, California State University, Long Beach; PharmD, Long Island University.

Kim-Hong (Megan) Nguyen, Associate Professor of Pharmacy Practice and Administration, 2002. BS, University of California, Irvine; PharmD, Western University of Health Sciences.

Trang B. Nguyen, Assistant Professor of Dental Medicine (part-time), 2011. BS, Whittier College; DDS, University of California, Los Angeles.

Ken Noriega, Instructor of Veterinary Medicine, 2005. BA, Pitzer College; MS, California State University, San Bernardino.

Christopher Nosrat, Professor of Dental Medicine, 2012. DDS, PhD, Karolinska Institute.

Irina Nostrat, Assistant Professor of Dental Medicine, 2012. DDS, Karolinska Institute.

Aksone Nouvong, Assistant Professor of Podiatric Medicine & Surgery, 2009. BA, University of California, Santa Barbara; DPM, California College of Podiatric Medicine.

Stephen A. O'Barr, Associate Professor of Pharmaceutical Sciences, 1999. BS, University of California, San Diego; PhD, Arizona State University.

Peter Oelschlaeger, Assistant Professor of Pharmaceutical Science, 2010. MS, University of Hohenheim; Dr rer Nat, University of Stuttgart.

Alice Shoemaker Oglesby, Professor of Microbiology (Emerita), 1979. BS, University of Oklahoma; MA, University of Kansas; PhD, University of California, Berkeley.

Olufunmilayo Olanipekun, Instructor of Podiatric Medicine and Surgery, 2010. BS, University of Miami; DPM, Temple University.

Robert A. Orlando, Associate Professor of Pathology, 2007. AB, New York University; MD, New Jersey College of Medicine; PhD, University of Chicago.

Linda Pang, Assistant Professor of Optometry, 2012. BS, University of Missouri, Columbia; OD, Southern California College of Optometry.

Gary A. Pape, Assistant Professor of Dental Medicine, 2012. BS, Purdue University, MA, Roosevelt University; DDS, Northwestern University.

Cyrus Parsa, Professor of Pathology, 1992. BS, California State University, Northridge; DO, University of Health Sciences, Kansas City.

Nishita Patel, Assistant Professor of Internal Medicine, 2010. MBBS, Smt. NHL Municipal Medical College, Ahmedabad, India.

Michelle Laux Pavlisin, Clinical Assistant Professor of Dental Medicine (part-time), 2010. BS, University of Illinois, Champaign; DDS, University of Illinois, Chicago.

Robert N. Pechnik, Professor of Pharmacology, 2012. BA, University of California, San Diego; PhD, University of California, Los Angeles.

Keith E. Penera, Assistant Professor of Podiatric Medicine, Surgery and Biomechanics (part-time), 2012. BS, University of California, Los Angeles; DPM, Ohio College of Podiatric Medicine.

Yawen Peng, Assistant Professor of Dental Medicine, 2009. DDS, Taipei Medical University; DMD, Boston University.

Jose Peralta, Associate Professor of Veterinary Medicine, 2007. DVM, University of Zaragoza; MSc, PhD, Cornell University.

David Q. Pham, Associate Professor of Pharmacy Practice and Administration, 2007. PharmD, University of the Pacific.

John T. Pham, Assistant Professor of Family Medicine, 2011. BS, Oregon State University; DO, University of Des Moines.

Tom R. Phillips, Professor of Veterinary Medicine/Biomedical Sciences, 2003. DVM, University of Missouri; MS, PhD, University of Wisconsin.

Olivia J. Phung, Assistant Professor of Pharmacy Practice and Administration, 2010. PharmD, Northeastern University.

Maria Polikandritu-Lambros, Associate Professor of Pharmaceutical Science, 1999. BS, University of Athens; MS, University of Cincinnati; PhD, University of Minnesota.

Doreen Pon, Assistant Professor of Pharmacy Practice and Administration, 2008. BA, University of California, Berkeley; PharmD, University of California, San Francisco.

Lisa R. Ponsford, Assistant Professor of Graduate Nursing, 2012. AS, San Bernardino Valley College; BS, California State University, San Bernardino; BSN, MSN, Azusa Pacific University.

Sunil Prabhu, Professor of Pharmaceutical Sciences, 1996. PhD, School of Pharmacy, West Virginia University; BPharm, Birla Institute of Technology.

Brenda Premo, Associate Professor of Health Professions Education, 1999. BA, California State University, Long Beach; MBA, Pepperdine University.

Andrew S. Pumerantz, Associate Professor of Internal Medicine, 2007. AB, Occidental College; DO, Philadelphia College of Osteopathic Medicine.

Philip Pumerantz, Professor of Health Professions Education, 2000. BA, MA, PhD, University of Connecticut.

Bhavan Raja, Assistant Professor of Physical Therapy Education, 2013. BS, Guru Nanaki Dev University; PhD, University of Florida.

David Redding, Associate Professor of Family Medicine/Osteopathic Manipulative Medicine, 1996. BS, PT, California State University, Long Beach; DO, College of Osteopathic Medicine of the Pacific; MS, College of Osteopathic Medicine of the Pacific.

Donna Redman-Bentley, Professor of Physical Therapy Education, 1998. BS, Pennsylvania State University; MS, The Ohio State University; PhD, University of Southern California.

Elizabeth A. Rega, Associate Professor of Anatomy, 2000. BA, Valparaiso University; MA, PhD, University of Chicago.

Kristy M. Remick-Waltman, Assistant Professor of Optometry, 2008. AS, Long Beach City College; BS, OD, Southern California College of Optometry.

James P. Reynolds, Professor of Veterinary Medicine, 2010. BS, University of California, Riverside; DVM, MPVM, University of California, Davis.

Daniel C. Robinson, Professor of Pharmacy Practice and Administration, 2006. BA, California State University, Fullerton; PharmD, University of California, San Francisco.

Pedro Rodriguez-Collazo, Assistant Professor of Biochemistry, 2011. BS, MS, Mechnikov State University of Odessa; PhD, McGill University.

James J. Rogala, Associate Professor of Optometry, 2011. BS, Michigan State University; OD, The Ohio State University.

Alicia A. Roth, Instructor of Physician Assistant Education, 2013. BS, California State University, Fullerton; MS, Western University of Health Sciences.

Josep Rutllant Labeaga, Professor of Veterinary Medicine, 2003. DVM, PhD, Autonomous University of Barcelona.

Marian B. Safaoui, Assistant Professor of Anatomy and Surgery, 2009. BS, University of California, Los Angeles; MD, University of Southern California.

Miguel Daniel Saggese, Associate Professor of Veterinary Medicine, 2007. DVM, University of Buenos Aires; MS, University of Minnesota; PhD, Texas A & M University.

David Jesse Sanchez, Assistant Professor of Pharmaceutical Sciences, 2011. BS, University of Texas, Austin; PhD, University of California, San Francisco.

Jesus Sanchez, Jr., Assistant Professor of Osteopathic Manipulative Medicine/Family Medicine, 2008. AS, El Camino Community College; BS, University of California, Irvine; MA, Pepperdine University; MS, DO, Western University of Health Sciences.

Steven C. Sanders, Assistant Professor of Dental Medicine (part-time), 2011. DDS, University of Southern California.

Radha J. Sarma, Professor of Internal Medicine, 2011. MBBS, Andhra Medical College.

Airani Sathananthan, Assistant Professor of Internal Medicine, 2009. BS, Cornell University; MD, State University of New York at Buffalo.

V. Kathleen Satterfield, Associate Professor of Podiatric Medicine and Surgery, 2010. BA, University of Texas, El Paso; BS, DPM, University of Osteopathic Medicine and Surgery.

Beatrice J. Saviola, Associate Professor of Microbiology, 2002. BS, University of Delaware; PhD, The Johns Hopkins University.

Denise Schilling, Associate Professor of Physical Therapy Education, 2007. BS, Kent State University; MS, PhD, University of Washington.

Elizabeth F. Schilling, Assistant Professor of Veterinary Medicine, 2009. BA, Wesleyan University; DVM, University of California, Davis.

Peggy L. Schmidt, Associate Professor of Veterinary Medicine, 2004. BS, University of Wisconsin, River Falls; DVM, University of Minnesota; MS, Iowa State University.

Bruce W. Schutte, Assistant Professor of Dental Medicine (part-time), 2011. BA, San Diego State University, DDS, University of Southern California.

Emmanuelle Schwartzman, Assistant Professor of Pharmacy Practice and Administration, 2008. BS, Loyola Marymount University; PharmD, University of Southern California.

Joseph P. Sciarra, Assistant Professor of Dental Medicine (part-time), 2012. BS, St. Mary's College; DDS, Loyola University of Chicago.

James D. Scott, Associate Professor of Pharmacy Practice and Administration, 2000. BS, MEd, PharmD, University of Florida.

Michael A. Seffinger, Associate Professor of Family Medicine/Osteopathic Manipulative Medicine, 1999. BA, University of California, Santa Cruz; DO, Michigan State University.

David M. Selkowitz, Professor of Physical Therapy Education, 2000. BS, State University of New York, Buffalo; MS, Boston University; PhD, The Union Institute.

David L. Sellen, Associate Professor of Health Sciences Education, 2008 (part-time). BA, University of Washington; MDiv, Southern California School of Theology; MS, Western University of Health Sciences; PsyD, Newport University.

Patricia Shakhshir, Assistant Professor of Graduate Nursing, 2009. AS, Mt. San Antonio College; ASN, Loma Linda University; BSN, Azusa Pacific University; MSN, California State University, Dominguez Hills; PhD, Azusa Pacific University.

G.S. Shankar, Associate Professor of Pharmacy Practice and Administration, 2003. MS, University of Northern Colorado; PharmD, Creighton University.

Jarrod Shapiro, Assistant Professor of Podiatric Medicine and Surgery, 2010. BA, BS, Northern Arizona University; DPM, Samuel Merritt University.

Hossein Shayan, Assistant Professor of Cardiovascular Surgery (part-time), 2011. BSc, MSc, MD, University of British Columbia.

Jason (Jie) Shen, Assistant Professor of Optometry, 2010. MD, Wenzhou Medical College; PhD, Indiana University.

Sam Shimomura, Professor of Pharmacy Practice and Administration, 1997. PharmD, University of California, San Francisco.

David Shofler, Assistant Professor of Podiatric Medicine, 2010. BA, University of California, Berkeley; DPM, Ohio College of Podiatric Medicine.

Cheri Silverstein, Assistant Professor of Internal Medicine, 2013. AB, Princeton University; MD, University of Medicine and Dentistry of New Jersey.

Paul C. Simeteys, Assistant Professor of Dental Medicine (part-time), 2012. BS, University of San Francisco; DDS, University of the Pacific.

Gail Singer-Chang, Assistant Professor of Social Medicine & Healthcare Leadership (Part-time), 2008. BA, San Diego State University; MA, PsyD, California School of Professional Psychology.

Amit Singh, Assistant Professor of Biochemistry/Genetics, 2007. BSc, Himachal Pradesh University; MSc, PhD, Devi Ahilya University.

Hardev M. Singh, Clinical Assistant Professor of Dental Medicine, 2010. BS, California Polytechnic State University, Pomona; DMD, University of Pittsburgh.

Amber Singletary, Instructor of Physician Assistant Education, 2012. BA, University of Nevada, Las Vegas; MS, Western University of Health Sciences.

Hrvoje Smodlaka, Associate Professor of Veterinary Medicine, 2005. DVM, University of Zagreb; PhD, University of Tennessee.

Dean Smylie, Assistant Professor of Veterinary Medicine, 2006. BS, Yale University; DVM, Colorado State University.

Steven G. Snyder, Instructor of Physical Therapy Education, 2012. BS, California State Polytechnic University, Pomona; DPT, Western University of Health Sciences.

Trang Sparks, Instructor of Family Medicine, 2007. AA, Chaffey College; BS, California State University, Dominguez Hills; PA-C, Western University of Health Sciences.

Frank Spors, Assistant Professor of Optometry, 2009. AOM, College of Ophthalmic Optics, Jena; BSc, MSc, Salus University.

Steve Standley, Assistant Professor of Biomedical Sciences, 2012. BS, University of Oregon; PhD, University of Southern California.

Robert D. Stevenson, Assistant Professor of Dental Medicine (part-time), 2009. BS, Brigham Young University; DDS, University of Texas, San Antonio.

Dawn Stone, Associate Professor of Graduate Nursing, 2006. AS, Rio Hondo College; BS, California State University, Los Angeles; MN, University of California, Los Angeles.

Richard A. Sugerman, Professor of Anatomy (Emeritus), 1980. BA, California State University, San Diego; MS, PhD, University of New Mexico.

Montry S. Suprono, Assistant Professor of Dental Medicine (part-time), 2011. DDS, MS, Loma Linda University.

Manal A. Swairjo, Assistant Professor of Graduate Biomedical Sciences, 2010. BSc, Kuwait University; PhD, Boston University.

Wendi M. Swanson, Assistant Professor of Graduate Nursing, 2011. AA, Chaffey College; BSN, MSN, Azusa Pacific University.

Yadi F. Sweeny, Assistant Professor of Psychiatry, 2013. BS, California State University, Los Angeles; MS, University of California, Los Angeles; MA, PsyD, Pepperdine University.

Colleen Talbot (Bonney), Professor of Physiology, 2010. BS, MS, California State Polytechnic University; PhD, University of Chicago.

John H. Tegzes, Professor of Veterinary Medicine, 2003. BSN, Thomas Jefferson University; MA, University of Santa Monica; VMD, University of Pennsylvania.

Ronald L. Terra, Professor of Veterinary Medicine, 2006. BS, MS, DVM, University of California, Davis; MBA, University of Guelph.

Brian Tessier, Assistant Professor of Physician Assistant Education, 2007. AA, Mt. San Antonio College; PA, College of Osteopathic Medicine of the Pacific; BS, California State University, Dominguez Hills; MS, Western University of Health Sciences.

Gerald Russell Thrush, Professor of Immunology, 2006. BS, Saginaw Valley State University; PhD, Wayne State University.

Christine Tindal, Associate Professor of Veterinary Medicine, 2006. BVSc, University of Sydney.

Jenny Sun Tjahjono, Assistant Professor of Dental Medicine, 2009. BS, University of California, Irvine; DMD, Harvard University.

Suzana Tkalcic, Associate Professor of Veterinary Medicine, 2003. DVM, University of Zagreb; MS, PhD, University of Georgia.

David P. Todd, Assistant Professor of Optometry, 2011. BS, OD, Nova Southeastern University.

Marc C. Togneri, Instructor of Veterinary Medicine, 2009. BS, University of Massachusetts; DVM, Western University of Health Sciences.

Chonway D. Tram, Assistant Professor of Dental Medicine (part-time), 2012. BS, La Sierra University; DDS, Loma Linda University.

Dat Q. Trinh, Associate Professor of Family Medicine, 2006. BS, University of California, Irvine; DO, Western University of Health Sciences.

Ruth Trudgeon, Assistant Professor of Graduate Nursing (part-time), 2011. BN, Manchester University; MSN, California State University, San Bernardino.

Jacqueline B-T Truong, Assistant Professor of Podiatric Medicine and Surgery, 2009. BS, University of Minnesota; MPH, Columbia University; DPM, Dr. William M. Scholl College of Podiatric Medicine.

Fausan S. Tsai, Assistant Professor of Internal Medicine, 2010. BA, Columbia University; MD, University of Medicine and Dentistry of New Jersey.

Dorcas K.Tsang, Assistant Professor of Optometry, 2011. BS, University of California, Berkeley; OD, Southern California College of Optometry.

Ivy C. Tuason, Assistant Professor of Graduate Nursing (part-time), 2010. ASN, Rio Hondo College; BSN, MSN, California State University, Long Beach.

John W. Tyler, Associate Professor of Veterinary Medicine, 2005. DVM, University of Georgia. Ryan R. Vahdani, Clinical Assistant Professor of Dental Medicine, 2011. BS, California State University, Long Beach; DDS, University of California, Los Angeles.

Alejandro J. Urdaneta, Assistant Professor of Dental Medicine, 2011. Dent. Cert., University of Zuila; DDS, New York University.

Vishwanath Venketaraman, Associate Professor of Immunology/Microbiology, 2007. BS, MS, University of Madras; PhD, Tuberculosis Research Center, Madras.

Nithya Venugopal, Assistant Professor of Dental Medicine (part-time), 2011. BS, DMD, University of Kentucky.

Greta Vines-Douglas, Assistant Professor of Physician Assistant Education, 2006. BS, University of Southern California; PA-C, Western University of Health Sciences; MS, California State University, Dominguez Hills.

Georgeanne Vlad, Associate Professor of Physical Therapy Education, 1991. BS, California State Polytechnic University, Pomona; MA, University of California, Santa Barbara; PT, Children's Hospital, Los Angeles.

Victoria L. Voith, Professor of Veterinary Medicine, 2004. DVM, MSc, MA, The Ohio State University; PhD, University of California, Davis.

Edward J. Wagner, Associate Professor of Physiology, 2001. BS, University of California, Los Angeles; PhD, Michigan State University.

Stephen James Waldhalm, Professor of Veterinary Medicine (Emeritus), 2002. BS, University of Idaho; PhD, DVM, Washington State University.

Kimberly R. Walker, Assistant Professor of Optometry, 2011. BA, BS, Lehigh University; BS, OD, Pennsylvania College of Optometry.

Donald E. Walters, Associate Professor of Pharmacology, 2001. BS, St. Louis College of Pharmacy; PhD, University of Louisville.

J. Jeffrey Wang, Associate Professor of Pharmaceutical Sciences, 2003. BS, Shanghai Medical University; PhD, University of Southern California.

Lisa Warren, Assistant Professor of Pediatrics, 2011. BA, Pomona College; DO, Western University of Health Sciences.

Robert Warren, Assistant Professor of Family Medicine, 2011. BS, University of California, Irvine; DO, Western University of Health Sciences.

Jonathan H. Watanabe, Assistant Professor of Pharmacy Practice and Administration, 2012. BS, MS, PhD, University of Washington; PharmD, University of Southern California.

Marisa Kawata Watanabe, Assistant Professor of Dental Medicine (part-time), 2011. BA, University of California, Berkeley; MS, California State Polytechnic University; DDS, University of the Pacific.

Mathew J. Wedel, Assistant Professor of Anatomy and Podiatric Medicine, 2008. BS, MS, University of Oklahoma; PhD, University of California, Berkeley.

Vicki L. Wedel, Assistant Professor of Anatomy and Dental Medicine, 2008. BA, MA, University of Oklahoma; MCJA, Oklahoma City University; PhD, University of California, Santa Cruz.

Stephanie White, Assistant Professor of Family Medicine, 2010. BA, Oberlin College; DO, Philadelphia College of Osteopathic Medicine.

Stanley K. Wong, Professor of Pharmacology, 1981. BS, MS, PhD, University of Wisconsin.

Timothy J. Wood, Assistant Professor of Physician Assistant Education, 2007. BS, Georgetown University; MS, PA-C, Western University of Health Sciences.

Valerie Quan Wren, Associate Professor of Optometry, 2010. BS, University of Vermont; OD, State University of New York State College of Optometry.

Joanne Yasuda, Adjunct Professor of Nursing, 1999. BA, University of California, Los Angeles; PharmD, University of California, San Francisco.

Joline L. Yeager, Instructor of Physician Assistant Education, 2012. AA, Fullerton Community College, BS, State University of New York, Albany; MS, Western University of Health Sciences.

Bartley Yee, Assistant Professor of Family Medicine, 2013. BS, University of California, Los Angeles; DO, Michigan State University.

Anna Yeung, Assistant Professor of Family Medicine/Geriatrics, 2007. BA, BS, University of California, Riverside; DO, Western University of Health Sciences.

Rafi Younoszai, Professor of Anatomy (Emeritus), 1979. BS, University of California, Berkeley; PhD, University of Minnesota.

Jasmine W. Yumori, Assistant Professor of Optometry, 2009. BA, OD, University of California, Berkeley.

Ray M. Yutani, Associate Professor of Family Medicine, 2010. PharmD, MS, University of Southern California; DO, Western University of Health Sciences.

James Ywom, Clinical Assistant Professor of Dental Medicine, 2010. BS, Pacific Union College; DDS, Loma Linda University.

Li Zhong, Associate Professor of Physiology, 2010. BS, Hebei University; MS, PhD, Wayne State University.

**Clinical and Adjunct Faculty** 

Osama W. Abdelmelek, MD

Assistant Professor of Internal Medicine

Julie Abraham, PharmD

Assistant Professor of Pharmacy Practice

Shokoor Abrahim, PA-C

Instructor of Physician Assistant Education

Andrea Abramowitz, RPh

**Assistant Professor of Pharmacy Practice** 

Mohamed S. Abu-Qaoud, MD Instructor of Internal Medicine

Hugh R. Adair III, DO

Assistant Professor of Internal Medicine

Mary L. Adair, PA-C

Instructor of Physician Assistant Education

Elizabeth A. Adams, DVM, MS

Assistant Professor of Veterinary Medicine

John D. Adams, Jr., DO, MBA

Associate Professor of Internal Medicine

Lance M. Adams, DVM

Assistant Professor of Veterinary Medicine

Ross Mitchell Adams, DO

**Assistant Professor of Pediatrics** 

William W. Adams, MD, MBA Associate Professor of

Psychiatry

Alnasir H. Adatia, DO

Associate Professor of Family Medicine

Abby F. Adesanya, PharmD

Assistant Professor of Pharmacy Practice

Jessica M. Adkins, MD, MS Instructor of Internal Medicine

Suzanne M. Adlophson, MSW, MHA Adjunct Instructor of Dental Medicine

Cydreese Aebi, PhD

Instructor of Pharmacology

Chandrahas Agarwal, MD

Assistant Professor of Internal Medicine/ Cardiology

Pramila Agarwal, MD

**Assistant Professor of Pediatrics** 

Vandana Agarwal, MD

Assistant Professor of Internal Medicine

Jacqueline G. Agcaoili, MD

Assistant Professor of Physician Assistant

Education

Sue Agent, BS, RPh

Assistant Professor of Pharmacy Practice

Heidi W. Agnic, DVM

Assistant Professor of Veterinary Medicine

Michael S. Agron, MD

Assistant Professor of Physician Assistant

Education

Sarah Agsten, DO

Assistant Professor of Family Medicine

Michael J. Aguinaldo, MD

**Assistant Professor of Pediatrics** 

Adolfo Aguilera, MD

Assistant Professor of Family Medicine

David Ahdoot, MD

Instructor of Obstetrics/Gynecology

Nazanin Ahmadian, DO

**Assistant Professor of Pediatrics** 

Joseph Aiello, DO

Assistant Professor of Family Medicine/ Osteopathic

Manipulative Medicine

Sean Aiken, DVM, MS

Professor of Veterinary Medicine

Afshin Akhavan, DO

Assistant Professor of Family Medicine

Laye Akinloye, PA-C

Associate Professor of Physician Assistant

Education

Babak "Bob" Alavynejad, DPM

Assistant Professor of Podiatric Medicine & Surgery

Stephen F. Albert, DPM

Professor of Podiatric Medicine & Surgery

Megan A. Albertelli, DVM, PhD

**Professor of Veterinary Medicine** 

Dale A. Albright, DO

Assistant Professor of Emergency Medicine

Steven Alder, MD

**Assistant Professor of Pathology** 

John G. Alevizos, DO

Assistant Professor of Family Medicine

Gloria C. Alexander, MD

Assistant Professor of Internal Medicine

Amanda B. Alford, MD

Assistant Professor of Anesthesiology

Badi Alhfez, MD, MBA

Assistant Professor of Internal Medicine

Sajid Ali, MD

**Assistant Professor of Psychiatry** 

Mir I. Ali-Khan, MD

**Assistant Professor of Psychiatry** 

Wadie F. Alkhouri, MD

**Assistant Professor of Psychiatry** 

Brent R. Allan, MPH, DO

Assistant Professor of Family Medicine/ Osteopathic

Manipulative Medicine

Ethan R. Allen, DO

**Professor of Family Medicine** 

Joseph H. Allan, MD

**Assistant Professor of Surgery** 

Larkin Allen, DO

Assistant Professor of Ophthalmology

Richard G. Allen, BS, RPh

Assistant Professor of Pharmacy Practice

Ryan L. Allen, DO

Assistant Professor of Family Medicine

Carrie E. Allison, MD

**Assistant Professor of Surgery** 

Thomas L. Allumbaugh, MD

Assistant Professor of Family Medicine

Martadha Al-Marashi, MD

Associate Professor of Internal Medicine

Munther E. Algaisi, MD

Assistant Professor of Radiology

Robert F. Altamura, DO

**Associate Professor of Pediatrics** 

Christopher J. Altenhofen, MD Assistant Professor of Radiology

Louis R. Alvarez, MD, MPH Assistant Professor of Psychiatry

M. Mark Alwan, MD

Assistant Professor of Obstetrics/Gynecology

Robert A. Alworth, DPM, MS

Assistant Professor of Podiatric Medicine and

Surgery

Eric K. Amend, MD

Instructor of Obstetrics/Gynecology

Richard H. Ames, DO

**Assistant Professor of Pediatrics** 

Mukesh S. Amin, MD

Assistant Professor of Internal Medicine

Ramsey A Amin, DDS

Assistant Professor of Dental Medicine

Dennis E. Amundson, DO

Associate Professor of Internal Medicine

Deepak Anand, Ph.D.

**Professor of Pharmacy Practice** 

Charles E. Ananian, DPM

Assistant Professor of Podiatric Medicine & Surgery

Lalitha Ananth, MD

Assistant Professor of Internal Medicine

Corinthia M. Andal, DDS

Assistant Professor of Dental Medicine

Alan M. Anderson, DMD, MBA

Assistant Professor of Dental Medicine

Brian L. Anderson, MD

Assistant Professor of Emergency Medicine

Clarke P. Anderson, MD

**Assistant Professor of Pediatrics** 

Kenneth Anderson III, DO

Assistant Professor of Family Medicine

Marcella M. McRorie Anderson, MD Assistant Professor of Pediatrics

Pamela E. Anderson, MD

Assistant Professor of Internal Medicine

Ray E. Anderson, DO

Assistant Professor of Family Medicine

Ruth Anderson, MLIS

Adjunct Instructor of Social Medicine &

Healthcare Leadership

Scott M. Anderson, DVM

**Professor of Veterinary Medicine** 

Terrye A. Anderson, MSN

Instructor of Graduate Nursing

Wayne E. Anderson, DO

Assistant Professor of Internal Medicine/

Neurology

William G. Anderson, DO, FACOS

**Professor of Surgery** 

Steven Andescavage, DO, MPH

Assistant Professor of Emergency Medicine

Lawrence R Andreatta, MS

**Assistant Professor of Pharmacy Practice** 

Sharon E Angrimson, RN, MSN

Assistant Professor of Graduate Nursing

Eduardo Anorga, MD

Assistant Professor of Family Medicine

Alon Antebi, DO

Assistant Professor of Orthopedic Surgery

Jeffrey P. Anthony, DO

Assistant Professor of Family Medicine/ Sports

Medicine

Morningstar J. Anton, DO

Assistant Professor of Internal Medicine

Michael D. Antos, MD

**Assistant Professor of Pediatrics** 

Vahe V. Apelian, PharmD

**Assistant Professor of Pharmacy Practice** 

Sherry L. Appel, DVM, JD

Associate Professor of Veterinary Medicine

Rubina Aqueel, MD

Assistant Professor of Internal Medicine/

Endocrinology

Sarkis Arabian, DO

Assistant Professor of Internal Medicine

Jaime Arana, MD

Instructor of Surgery

Neal S. Archer, DO

Associate Professor of Family Medicine

Stephen B. Archer, MD

**Assistant Professor of Surgery** 

Edgar Ardila, MD

Assistant Professor of Internal Medicine

Dariush Arfaania, MD

Assistant Professor of Internal

Medicine/Nephrology

Israel Armijo, DMD, MPH

Assistant Professor of Dental Medicine

William G. Armington, MD

Associate Professor of Radiology

David G. Armstrong, DPM

Professor of Podiatric Medicine & Surgery

Michael J. Armstrong, MD

Assistant Professor of Emergency Medicine

Hector Arroyo, Jr, EdD

Adjunct Instructor of Biomedical Sciences

John J. Aryanpur, MD

**Assistant Professor of Surgery** 

Rosa E. Arzu, DDS

Assistant Professor of Dental Medicine

Kevin R. Ashbran, DVM

Instructor of Veterinary Medicine

Sanaz W. Askari, DO

Assistant Professor of Internal Medicine

Mohammad Aslam, MBBS

Assistant Professor of Internal Medicine/ Cardiology

Juliette R. Asuncion, DO

Assistant Professor of Family Medicine

David M. Atkin, MD

Assistant Professor of Physician Assistant

Education

Allison Atkinson, PA-C

Assistant Professor of Physician Assistant

Education

Brandon S. Atkinson, DO

Assistant Professor of Family Medicine

Roscoe D. Atkinson, MD

Associate Professor of Pathology

Danielle C. Aufiero, MD

Assistant Professor of Physical Medicine &

Rehabilitation

Gary K. Augter, MS, DO

Assistant Professor of Dermatology

Kazuto H. Agustus, DPM

Assistant Professor of Podiatric Medicine & Surgery

Elisa E. Aumont, MD

Assistant Professor of Emergency Medicine

Erik Austin, DO, MPH

**Assistant Professor of Dermatology** 

Mary M. Austin-Seymour, MD Assistant Professor of

Radiology

Gino Aveni, PA-C

Instructor of Physician Assistant Education

Marc R. Avent, DO

Assistant Professor of Family Medicine

Paul A. Aversano, DO

Associate Professor of Internal Medicine/ Neurology

Aziz F. Awad, DO

Assistant Professor of Family Medicine

Paul C. Axford, MD

Assistant Professor of Obstetrics/Gynecology

Mg San Aye, MD

Assistant Professor of Surgery/Ophthalmology

Etsegenet Ayele, MD

Assistant Professor of Internal Medicine

Elias Inhaya Ayoub, MD

**Assistant Professor of Surgery** 

Ziyad Ayyoub, MD

Assistant Professor of Physical Medicine &

Rehabilitation

Armaghan Azad, MD, MPH

Assistant Professor of Family Medicine

Muhammad A. Azam, MD

Assistant Professor of Physician Assistant

Education

Angela E. Azar, MD

**Assistant Professor of Surgery** 

Samir J. Azzam, MD

Assistant Professor of Physician Assistant

Education

Robert W. Babbel, MD

Assistant Professor of Radiology

Jonathan W. Babbitt, MD

Assistant Professor of Emergency Medicine

Thomas P. Babcock, DVM

Instructor of Veterinary Medicine

R. Scott Babe, MD

**Assistant Professor of Psychiatry** 

Howard A. Babus, MD

**Assistant Professor of Psychiatry** 

Richard M. Bachrach, DO

Assistant Professor of Family Medicine

Jeffrey K. Bacon, DO

Assistant Professor of Internal Medicine

Sam C. Badinat. PharmD

Associate Professor of Pharmacy Practice

Pejman Bady-Moghaddam, DO

Assistant Professor of Physician Assistant

Education

M. Tarek Baghdadi, MD

Assistant Professor of Obstetrics/Gynecology

Pejman Bahari-Nejad, DO

Assistant Professor of Family Medicine

Rana A. Bahl, MD

Associate Professor of Internal Medicine/ Cardiology

O.J. (Jerry) Bailes, DO

**Professor of Family Medicine** 

John V. Bailey, MD

Assistant Professor of Obstetrics/Gynecology

Valerie J. Bailie, MD

**Assistant Professor of Pediatrics** 

Olivia M. Bajor, DO

Assistant Professor of Family Medicine

William T. Baker, DO

Assistant Professor of Family Medicine

Henry Bakhit, PhD

Assistant Professor of Pharmacy Practice

Farhan Bakir, MD, MS

Professor of Internal Medicine

Sharon K. Bakshi, PharmD

Assistant Professor of Pharmacy Practice

Bradley A. Baldwin, DO Assistant Professor of Surgery

Harry Balian, MD

Assistant Professor of Internal Medicine

Peter P. Balingit, MD

Assistant Professor of Podiatric Medicine & Surgery

Debra A. Balise, MSN

Instructor of Graduate Nursing

Adam D. Balkany, DO

Assistant Professor of Anesthesiology

Steven G. Ballinger, MD

**Assistant Professor Orthopedic Surgery** 

Raj B. Baman, DO

Assistant Professor of Emergency Medicine

Vijaya Bansal, MD

Assistant Professor of Obstetrics/Gynecology

Steven H. Barag, DO, MS Professor of Family Medicine

Daniel Barajas, MD

Assistant Professor of Obstetrics/Gynecology

William G. Barish, MD

Instructor of Family Medicine

Sungdo Lily Bark, MSN

Assistant Professor of Graduate Nursing

George T. Barker, MS

Assistant Professor of Obstetrics/Gynecology

Rebecca Barnett, PA-C

Assistant Professor of Physician Assistant

Education

Phyllis H. Barr, DO

Assistant Professor of Family Medicine

Steven Barr, MD

Assistant Professor of Internal Medicine

Rodolfo Cantu Barrera, DO Assistant Professor of Pediatrics Joseph A. Barrett, MD

**Assistant Professor of Psychiatry** 

Anita D. Barringham, MD

**Assistant Professor of Pediatrics** 

Jeffrey A. Barris, PharmD

Assistant Professor of Pharmacy Practice

Robert S. Barry, MD

**Assistant Professor of Pediatrics** 

William H. Barstow, MD

Assistant Professor of Obstetrics/Gynecology

Connie P. Bartlett, DO

**Assistant Professor of Pediatrics** 

Mark G. Bartlett, MD

**Assistant Professor of Pediatrics** 

Roy W. Bartlett, DO

Assistant Professor of Surgery/Ophthalmology

Stephen B. Bartsch, MD

Assistant Professor of Internal Medicine

Conrado E. Barzaga, MD

Adjunct Assistant Professor of Dental Medicine

Richard D. Basilan, MD

Assistant Professor of Internal Medicine

Tavinder P. Basra, MD

Assistant Professor of Internal Medicine

Martin L. Bassett, MD

Assistant Professor of Internal Medicine

Sohanjeet S. Bassi, MD

Assistant Professor of Internal Medicine

Runa Basu, DO

Instructor of Internal Medicine/OMM

Matthew R. Bauer, DO

Assistant Professor of NMM/OMM

William P. Baugh, MD

**Assistant Professor of Dermatology** 

Geoffrey Baum, DO

**Assistant Professor of Surgery** 

Katherine A. Baumann, MD Assistant Professor of Pediatrics

T. John Baumeister, DO

Assistant Professor of Family Medicine

Fernando Bayo, III, MD Instructor of Radiology

Marc A. Beaghler, MD, MPH Assistant Professor of Surgery

Timothy L. Beard, MD

**Assistant Professor of Surgery** 

Brian J. Bearie, MD

Assistant Professor of Emergency Medicine

Daniel J. Beavers, DO

Associate Professor of Psychiatry

Richard L. Beck, DVM

Associate Professor of Veterinary Medicine

Steven J. Becker, DO

Assistant Professor of Internal Medicine

Annette Bedford, PharmD

Associate Professor of Pharmacy Practice

Jeremy S. Bedtelyon, MD

Assistant Professor of Internal Medicine

Emily Susan Beeler, DVM

Adjunct Associate Professor of Veterinary

Medicine

Melanie Begian, PharmD

Assistant Professor of Pharmacy Practice

Robert D. Belanger, DO Professor of Family Medicine

Ronald J. Belczyk, DPM

Assistant Professor of Podiatric Medicine &

Surgery

James W. Bell, EdD

Adjunct Professor of Social Medicine & Healthcare

Leadership

Joseph W. Bell Jr., DO

Assistant Professor of Obstetrics/Gynecology

Mark Bell, MD

Assistant Professor of Emergency Medicine

Robert B. Bell, DO

**Professor of Family Medicine** 

Mary L. Belozer, MD

Instructor of Family Medicine

Uri M. Ben-Zur, MD

Assistant Professor of Internal Medicine

Linda Beth Benaderet, DO

Professor of Internal Medicine/Oncology

Michael Benavidez, DO

Assistant Professor of Family Medicine

Paul L. Benchwick, DO

Professor of Internal Medicine

Bengt-Ola Bengtsson, MD Assistant Professor of Pediatrics

Paramjit S. Benipal, MD

Assistant Professor of Internal Medicine

Tina M. Benkendorfer, PharmD

Assistant Professor of Pharmacy Practice

Martin A. Bennett, MD

Assistant Professor of Emergency Medicine

Maggie Bennington-Davis, MD Assistant Professor of Psychiatry

Irvin S. Benowitz, DO

Associate Professor of Family Medicine

Jack N. Benson, DO

Assistant Professor of Surgery/Urology

Mindy L. Benton, DPM

Associate Professor of Podiatric Medicine & Surgery

Emmett A. Berg, DO

Assistant Professor of Family Medicine

Mark P. Berland, DO

Assistant Professor of Obstetrics/Gynecology

Marc A. Bernard, DPM

Associate Professor of Podiatric Medicine & Surgery

Benjamin Berry, MD

Assistant Professor of Obstetrics/Gynecology

Martin Berry, MD

Assistant Professor of Internal Medicine

Ravi K. Berry, MD Instructor of Pediatrics

Leonard R. Bertheau, DO

Assistant Professor of Family Medicine

Stacy C. Berube, MD

**Assistant Professor of Pediatrics** 

Steven M. Beutler, MD

Assistant Professor of Internal Medicine/Infectious

Diseases

Sophia Beyene, DO

Assistant Professor of Family Medicine

Jyotl B. Bhat, DDS

Assistant Professor of Dental Medicine

Bishal Bhatia, MD

Assistant Professor of Internal Medicine

A. Raja Bhupathy, DO

**Assistant Professor of Dermatology** 

Vellore R. Bhupathy, MD, FACOG

Associate Professor of Obstetrics/Gynecology

Ross Beiderman, DPM, MD

Adjunct Professor of Physical Therapy

Education

Rebecca S. Bierman, DO

Assistant Professor of Psychiatry

Henry B. Bikhazi, MD

**Assistant Professor of Surgery** 

Stephen A. Bilbrey, DVM, MS Professor of Veterinary Medicine Babak Bina, DO

Assistant Professor of Physical Medicine &

Rehabilitation

Mark H. Binus, PharmD, MS, MBA Assistant Professor of Pharmacy Practice

Lori B. Birndorf, DO

Assistant Professor of Surgery/Ophthalmology

Andrea S. Bishofberger, DVM Instructor of Veterinary Medicine

Adib H. Bitar, MD

**Assistant Professor of Psychiatry** 

Fahed G. Bitar, MD

Assistant Professor of Internal Medicine

Murray L. Black, DO

Assistant Professor of Family Medicine

Dennis C. Blackburn, DO Assistant Professor of Surgery

Robert Wayne Blackburn, PharmD, MBA Assistant Professor of Pharmacy Practice

Eliot S. Blackman, DO

Assistant Professor of Family Medicine

Elizabeth C. Blackstead, MS Instructor of Graduate Nursing

Arthur A. Blain, MD, MBA

Assistant Professor of Family Medicine

William J. Blair, PharmD, MBA

Assistant Professor of Pharmacy Practice

Darcy L. Blanchard, DO

Assistant Professor of Obstetrics/Gynecology

Andre V. Blaylock, MD

Assistant Professor of Family Medicine

Stephen W. Bledsoe, MD, PhD

Assistant Professor of Anesthesiology

William A. Blee, MD

Assistant Professor of Internal Medicine

Radu Blejeru, MD

Assistant Professor of Internal Medicine

Matthew J. Bliven, MD

Assistant Professor of Family Medicine

Stephen D. Blood, DO

Professor of Family Medicine/OMM

Jeffrey H. Bloom, DO

Assistant Professor of Family Medicine

Russell C. Bloom, DO

Assistant Professor of Family Medicine

Janice Upton Blumer, DO

**Assistant Professor of OMM** 

Timothy E. Blumer, DO

**Assistant Professor of Psychiatry** 

Bruce L. Bobek, DO

Assistant Professor of Internal Medicine

Richard H. Bochner, MD

Assistant Professor of Internal Medicine

Nathan K. Boddie, MD, MS

Assistant Professor of Internal Medicine

John N. Bode, DO

Assistant Professor of Radiology

Frederick P. Boehm, MD

**Assistant Professor of Pediatrics** 

Randy D. Bohart, PharmD

Assistant Professor of Pharmacy Practice

John Edward Bohlman, MD

Assistant Professor of Internal Medicine

Robert J. Bohr, MD

Assistant Professor of Surgery/Orthopedics

Jack L. Bois, DPM

Professor of Podiatric Medicine & Surgery

Shiva Bojak, BPharm, PhD

**Assistant Professor of Pharmacy Practice** 

Ruth Wauqua Bol, DDS, MPH

Assistant Professor of Dental Medicine

Robert K. Bolan, MD

**Professor of Pharmacy Practice** 

Denis Bolton, DO

Adjunct Instructor of Radiology

Julie Bolton, DO

Adjunct Instructor of Family Medicine

Veronica Bonales, MD

Assistant Professor of Emergency Medicine

Kou Bond, PharmD

**Assistant Professor of Pharmacy Practice** 

Richard A. Bond, DO

Associate Professor of Family Medicine

Gregory R. Bonomo, MD

Assistant Professor of Internal Medicine/ Neurology

Robert I. Boorstein, DO

**Assistant Professor of Surgery** 

Jennifer R. Boozer, DO

Assistant Professor of Family Medicine

Rodney W. Borger, MD

Associate Professor of Emergency Medicine

Carlos M. Borges, DVM

Instructor of Veterinary Medicine

Timothy R. Borman, DO

Assistant Professor of Orthopedic Surgery

Allen D. Bott, MD

Assistant Professor of Internal

Medicine/Neurology

Catherine A. Boulay, MD Assistant Professor of Surgery

James B. Boyd, MD

Assistant Professor of Emergency Medicine

Ronald Boyd, DVM

Instructor of Veterinary Medicine

Yasmina B. Boyd, DO

Instructor of Emergency Medicine

Ronald P. Boyer, MD

Adjunct Assistant Professor of Family Medicine

Terry J. Boykoff, DPM

Associate Professor of Podiatric Medicine & Surgery

Jodell J. Boyle, MD

Assistant Professor of Obstetrics/Gynecology

Nicole A. Boynosky, BVMS, MS

Assistant Professor of Veterinary Medicine

Dina Braasch-Neeman, MSN

Assistant Professor of Graduate Nursing

Holger E. Bracht, DO

Assistant Professor of Family Medicine

James J. Bradstreet, MD

Adjunct Assistant Professor of Social Medicine and

Health Care Leadership.

John D. Branch, DO

Assistant Professor of Family Medicine

Michael Brand, MD

Assistant Professor of Radiology

Richard W. Brandes, MD

Assistant Professor of Internal Medicine

Mark Brandt, DVM

**Professor of Veterinary Medicine** 

Rodney D. Brandt, MD

**Assistant Professor of Orthopedic Surgery** 

Diane B. Branks, DPM

Assistant Professor of Podiatric Medicine & Surgery

Cheryl A. Braswell, DVM

Assistant Professor of Veterinary Medicine

Thomas S. Brauer, DVM

Associate Professor of Veterinary Medicine

David A. Brauner, DO

**Associate Professor of Pediatrics** 

Marc D. Braunstein, DO

Assistant Professor of Family Medicine

Randy J. Brazie, MD

**Assistant Professor of Psychiatry** 

Randall V. Bream, MD

Instructor of Internal Medicine

Ivan L. Breed, MD

Assistant Professor of Family Medicine

Nancy L. Brennan, DO

Assistant Professor of Family Medicine

Adam M. Brenner, MD

Assistant Professor of Emergency Medicine

Mary Lou Breslin, MS

Adjunct Assistant Professor of Health

**Professions Education** 

Paul C. Bressman, MD

Assistant Professor of Surgery

Kathleen L. Broadman, MD Assistant Professor of Pediatrics

Lissa S. Brod, MD

**Assistant Professor of Neurology** 

Elena Brodetsky, PharmD

Assistant Professor of Pharmacy Practice

Sister Anne E. Brooks, DO

Associate Professor of Family Medicine

Oliver T. Brooks, MD

Associate Professor of Physician Assistant

Education

Shane O. P. Brooks, DO

Instructor of Emergency Medicine

Leslie M. Brott, MD

Assistant Professor of Family Medicine

Kevin R. Brown, PharmD

Assistant Professor of Pharmacy Practice

S. Gary Brown, DVM, DACVS

Professor of Veterinary Medicine

Karen E. Brungardt, DO

Assistant Professor of Family Medicine

David S. Bruyette, DVM

Professor of Veterinary Medicine

Karen M. Bryant, MS, RDA

Adjunct Assistant Professor of Graduate

Nursing

Stephanie Bryant, MSN, RN

**Assistant Professor of Graduate Nursing** 

Bernard Buchanan, MD

**Assistant Professor of Psychiatry** 

Kristine E. Buchanan, MD

**Assistant Professor of Surgery** 

Michael D. Buck, MD

Assistant Professor of Internal Medicine

Stefan Bughi, MD

Assistant Professor of Internal Medicine/

Endocrinology

Dennis A. Burke, DO

Assistant Professor of NMM/OMM

Timothy W. Burke, DO

Associate Professor of Internal Medicine/

Gastroenterology

Kelley A. Burnett, DO

**Assistant Professor of Pediatrics** 

Lee A. Burnett, DO

Assistant Professor of Family Medicine

Lorrie A. Burnham, MD

Instructor of Biomedical Sciences

Patrick J. Burns, DO

Assistant Professor of Internal Medicine/ Neurology

Sandra N. Burns, MSN, MEd

Assistant Professor of Graduate Nursing

Stephen M. Burns, MD

**Assistant Professor of Pediatrics** 

Michael R. Burton, MSN

**Assistant Professor of Graduate Nursing** 

Michael S. Burton, DO

Assistant Professor of Family Medicine

Robert D. Bush, MD

Assistant Professor of Family Medicine

Walter R. Bush, Jr., MD

Assistant Professor of Emergency Medicine

James D. Butler, DO

Assistant Professor of Emergency Medicine

Kathleen Butler, MSN

Assistant Professor of Graduate Nursing

Jay M. Butterman, DO

**Assistant Professor of Psychiatry** 

Edward B. Bynum, DO

**Assistant Professor of Surgery** 

James E. Byrkit, MD

Assistant Professor of Internal Medicine

Grethel A. Cabison, MD

Assistant Professor of Anesthesiology

Carol T. Cahill, DO

**Assistant Professor of Pediatrics** 

Stephanie Cai, PharmD

**Assistant Professor of Pharmacy Practice** 

Gregory H. Cain, MD

**Assistant Professor of Pediatrics** 

William J. Cairney, PhD

Adjunct Professor of Family Medicine

Paul H. Caldron, DO

Assistant Professor of Internal Medicine/

Rheumatology

Clea R. Caldwell, DO

Assistant Professor of Obstetrics/Gynecology

Marissa T. Caluya, MD

**Assistant Professor of Pediatrics** 

Jay W. Calvert, MD

Associate Professor of Physician Assistant

Education

Elber S. Camacho, MD

Assistant Professor of Internal Medicine/

Hematology/Oncology

Jose Camacho, DO

Associate Professor of OMM

Anthony J. Cambridge, DVMS Professor of Veterinary Medicine

David S. Campbell, DDS

Assistant Professor of Dental Medicine

John B. Campbell, MD

Assistant Professor of Pathology

Michael S. Campbell, PharmD

**Assistant Professor of Pharmacy Practice** 

Tyson M. Campbell, DO Instructor of Family Medicine

William L. Campbell, MD

**Assistant Professor of Psychiatry** 

Suvesh Candiok, MD

Associate Professor of Internal Medicine

Anthony Cannizzaro, DPM, MPH

Associate Professor of Podiatric Medicine & Surgery

David B. Canton, DO, MPH, JD

Associate Professor of Family Medicine

Gordon P. Canzler, DO

Assistant Professor of Family Medicine

Joseph M. Caporusso, DPM

Assistant Professor of Podiatric Medicine & Surgery

Roy J. Caputo, MD

Assistant Professor of Orthopedic Surgery

Michael L. Caravelli, MD Assistant Professor of Surgery

Lawrence G. Carbone, DVM, PhD Professor of Veterinary Medicine

Dennis M. Carden, DO

Associate Professor of Obstetrics/Gynecology

Ana A. Cardenas, MD Instructor of Dermatology

John P. Cardin, Jr., MD

Associate Professor of Obstetrics/Gynecology

Kim Carey, DVM, DACVS

Associate Professor of Veterinary Medicine

Samuel A. Carlis, DO

Assistant Professor of Family Medicine

Deborah E. Carlson, MD

Assistant Professor of Internal Medicine

Bruce E. Carlton, MD

Assistant Professor of Internal Medicine

Sherie L. Carnegie, DO

Assistant Professor of Family Medicine

Michael A. Carnevale, DO

Assistant Professor of Internal Medicine

Stephen A. Carp, DO

Assistant Professor of Internal Medicine

Thomas A. Carpenter, DVM Professor of Veterinary Medicine

Margaret A. Carr, MD, PhD

Assistant Professor of Family Medicine

Dale M. Carrison, DO

Assistant Professor of Emergency Medicine

Claudio M. Carvalho, DO, MS Assistant Professor of OMM

Kimberly L. M. Carvalho, DVM

Associate Professor of Veterinary Medicine

Rose Allaine de Ramos Casado, PharmD Assistant Professor of Pharmacy Practice

Jennifer Caserta, MD

**Assistant Professor of Pediatrics** 

John Joseph Cassani, DO

Assistant Professor of Family Medicine

David J. Cassat, MD

Assistant Professor of Family Medicine

Jennifer Cassidy, MLIS

Instructor of Social Medicine & Healthcare

Leadership

Nicandro G. Castaneda, MD

Assistant Professor of Internal Medicine

Norman W. Castillo, DO

Assistant Professor of Family Medicine

Robert W. Castillo, MD

**Assistant Professor of Pediatrics** 

Angela Castro, BA, PA-C

Instructor of Physician Assistant Education

Robert M. Castro, DO

Instructor of Internal Medicine

Giovanni Catalano, DO

Assistant Professor of Family Medicine

Joseph P. Catalano, BS, RPh

**Assistant Professor of Pharmacy Practice** 

Harold Kennedy Cathcart, DO

Assistant Professor of Internal Medicine

Francis X. Celis, DO, MS

Assistant Professor of Internal Medicine

John A. Cella, MD

Associate Professor of Physician Assistant

Education

Fernando Cendejas, MD

Assistant Professor of Internal Medicine

Mary Caizza Cerni, DO

Assistant Professor of Family Medicine

Ramon M. Cestero, MD

Professor of Obstetrics/Gynecology

Anita Y. Chan, MD

Assistant Professor of Obstetrics/Gynecology

Darrell R. Chan, PharmD

Associate Professor of Pharmacy Practice

Francis Y.-M. Chan, PharmD

Assistant Professor of Pharmacy Practice

Sandra Chan, PharmD

Assistant Professor of Pharmacy Practice

Satyanarayana Chandragiri, MD Assistant Professor of Psychiatry

Ravindra Chandrashekhar, MD, MSEE Assistant Professor of Internal Medicine

Elbert K. Chang, MD

Assistant Professor of Internal Medicine

Emery K. Chang, MD

**Assistant Professor of Surgery** 

Jason C. Chang, PharmD

Associate Professor of Pharmacy Practice

Jerry Y. Chang, PharmD, MS

**Assistant Professor Pharmacy Practice** 

Jonathan L. Chang, MD

**Assistant Professor of Orthopedics** 

Joseph C. Chang, PharmD

**Assistant Professor of Pharmacy Practice** 

Lung Hsiung Chang, MD Assistant Professor of Surgery

Laura Chang-Strauss, MD

**Associate Professor of Pediatrics** 

Jagmeet K. Chann, MD

Assistant Professor of Family Medicine

Pamela J. Chapin, MD

Assistant Professor of Family Medicine

Emilie F. Chaplow, VMD, DACVIM

Assistant Professor of Veterinary Medicine

Jay H. Chappell, MD

Assistant Professor of Internal Medicine

Beny B. Charchian, MD, MS

Assistant Professor of Physical Medicine &

Rehabilitation

Carise E. Charles, MSN

Adjunct Assistant Professor of Graduate

Nursing

Michael G. Cheek, MD

Assistant Professor of Obstetrics/Gynecology

Janet Cheetham, PharmD

Assistant Professor of Pharmacy Practice

Fleming F. Chen, MD

Assistant Professor of Obstetrics/Gynecology

Joy H. Chen, PharmD

Assistant Professor of Pharmacy Practice

Mindy M. Chen, DDS

Assistant Professor of Dental Medicine

Ming Y. Chen, DO

Assistant Professor of Family Medicine

Shanshan Chen, PharmD

**Assistant Professor of Pharmacy Practice** 

Stephen P. Chen, MD

Assistant Professor of Internal Medicine

Cher Yao Chen Chen, MD

**Assistant Professor of Psychiatry** 

Kenneth S. Cheng, DO

Assistant Professor of Physician Assistant

Education

Peter F.-P. Cheng, PharmD

Assistant Professor of Pharmacy Practice

Jane Y. Chern, DDS

Assistant Professor of Dental Medicine

Tiffani N. Cherry, DO

Assistant Professor of Emergency Medicine

Stuart B. Chesky, DO

Professor of Obstetrics/Gynecology

Steven D. Cheung, DPM

Assistant Professor of Podiatric Medicine & Surgery

Bob Chiang, MD

Assistant Professor of Family Medicine

Carolyn Chiffelle, DVM

Associate Professor of Veterinary Medicine

Vitaly V. Chikirizov, MD

Assistant Professor of Psychiatry

Gary Lee Child, DO

Assistant Professor of Family Medicine

Dan Chiles, MD

Associate Professor of Pediatrics

David Chim, DO

Associate Professor of Family Medicine

Sabrian Chimienti, RN, MSN Instructor of Graduate Nursing

William L. Chin, DO

Assistant Professor of Internal Medicine

Bradley E. Chipps, MD

Instructor of Pediatrics & Internal Medicine

Anca Chiritescu, MD

**Assistant Professor of Psychiatry** 

Morteza Chitsazan, DO

Assistant Professor of Internal Medicine

Eugene S. Cho, MD

**Assistant Professor of Surgery** 

Eun-Hwi Cho, DDS

Assistant Professor of Dental Medicine

Fred K. Cho, PharmD

Assistant Professor of Pharmacy Practice

Brandon E. Chock, MD

Assistant Professor of Internal Medicine

William T. Choctaw, MD

**Associate Professor of Surgery** 

Michael Choi, PharmD

Assistant Professor of Pharmacy Practice

Michael S. Choi, MD

Assistant Professor of Anesthesiology

John T. Chon, DO

Assistant Professor of Emergency Medicine

Serina Chong, PharmD

**Assistant Professor of Pharmacy Practice** 

Gurpreet S. Chopra, MD

Assistant Professor of Psychiatry

Darren M. Chotiner, MD

Assistant Professor of Family Medicine

Yushu Jack Chou, MD

Assistant Professor of Physician Assistant

Education

James Chow, PharmD

**Assistant Professor of Pharmacy Practice** 

Connie M. Choy, DPM

Instructor of Podiatric Medicine & Surgery

Don L. Christensen, MD, FACS

Professor of Surgery

Sarah M. Christensen, MD

Assistant Professor of Pediatrics

Mark D. Christenson, MD

Assistant Professor of Internal Medicine

Lance W. Christiansen, DO

Assistant Professor of Family Medicine

Leslie J. Christianson, DO

**Assistant Professor of Psychiatry** 

Francis Chu, MLIS, MS

Instructor of Social Medicine & Healthcare

Leadership

Weiming D. Chu, MD

**Assistant Professor of Psychiatry** 

Charles J. Chunn, MD

**Assistant Professor of Pediatrics** 

Christopher M. Cirino, DO, MPH

Assistant Professor of Internal Medicine

Maria T. Clabots, MD

**Assistant Professor of Pediatrics** 

Monica Carrie Clare, VDM

Associate Professor of Veterinary Medicine

Chad L. Clark, MD

Assistant Professor of Emergency Medicine

David A. Clark, DO

**Assistant Professor of Neurology** 

Robin D. Clark, MD

Professor of Pediatrics/Medical Genetics

Susan J. Clark, MD

Associate Professor of Pediatrics/Endocrinology

Therese Sage Clark, PharmD

Associate Professor of Pharmacy Practice

Trence Clark, MD

Assistant Professor of Emergency Medicine

Traci Clautice-Engle, MD

Assistant Professor of Radiology

Michael D. Clayton, MD

**Assistant Professor of Surgery** 

Gail L. Clifford, MD, MMM

Assistant Professor of Internal Medicine

Karen J. Clingerman, DVM, MS

Assistant Professor of Veterinary Medicine

John O. Clune, MD

Assistant Professor of Internal Medicine/

**Hematology & Oncology** 

Seven Cobb, MD

Assistant Professor of Radiology

Dagmar G. Cofer, MS

Instructor of Social Medicine & Healthcare

Leadership

Michael L. Cogan, MD

Assistant Professor of Obstetrics/Gynecology

Barry M. Cogen, DO

Assistant Professor of Family Medicine/OMM

Alan L. Cohen, DO

Assistant Professor of Family Medicine

Howard S. Cohen, MD

**Assistant Professor of Pediatrics** 

Jennifer Cohen, MSN

**Assistant Professor of Graduate Nursing** 

Louis T. Cohen, DO

Assistant Professor of Internal Medicine

Murray H. Cohen, DO

Professor of Internal Medicine

Robert S. Cohen, DO

Associate Professor of Internal Medicine/

Nephrology

Steven W. Cohen, DO

Assistant Professor of Family Medicine

William C. Cohen, DO

Assistant Professor of Surgery/ Otorhinolaryngology

Wilbur Cole III, DO

Assistant Professor of Family Medicine

Joseph A. Colella, MD

**Assistant Professor of Surgery** 

Stacey L. Coleman, DO

Assistant Professor of Family Medicine

Robert P. Colen, DO

**Associate Professor of Orthopedics** 

Maurice Collada Jr, MD

**Assistant Professor of Surgery** 

Carl E. Collier, DO

Assistant Professor of Surgery

Randy E. Collins, DO

Assistant Professor of Obstetrics/Gynecology

Richard J. Colman, DO

Associate Professor of Obstetrics/Gynecology

Carrie L. Colmenares-Roys, MD

Instructor of Pediatrics

Carlos Compean, DDS

Assistant Professor of Dental Medicine

Mark E. Comunale, MD

Professor of Anesthesiology

Roderick A. Comunale, MD

Assistant Professor of Internal Medicine

Thao M. Cong, PharmD

Assistant Professor of Pharmacy Practice

Ralph E. Conner, DO

Assistant Professor of Emergency Medicine

Eugene T. Conte, DO

Assistant Professor of Dermatology

Keith D. Cook, DPM

Assistant Professor of Podiatric Medicine & Surgery

Liz Cooke, MN, ANP

Assistant Professor of Graduate Nursing

Milissa A. Cooper, DO

Assistant Professor of Family Medicine

Joel B. Cooperman, DO

Associate Professor of Family Medicine

Marshall Cooperson, DO

Assistant Professor of Internal Medicine

Samuel E. Coor, DO

**Assistant Professor of Neurology** 

Colleen Copelan, MD, MS

**Assistant Professor of Psychiatry** 

Charles M. Copeland, DVM

Professor of Veterinary Medicine

M. Larry Copeland, DO

**Assistant Professor of Orthopedics** 

Michelle G. Coran, DVM

Associate Professor of Veterinary Medicine

Fredric H. Corbin, MD

Assistant Professor of Surgery/Plastic &

**Reconstructive Surgery** 

Merissa R. Corey, PharmD

Associate Professor of Pharmacy Practice

Joe Corless, MD Professor of Pediatrics

Marcus H. Cornwall, DO Assistant Professor of OMM

Michael Coronado, PharmD

**Assistant Professor of Pharmacy Practice** 

Anthony Cortese, DO

Adjunct Assistant Professor of

Obstetrics/Gynecology

Matthew T. Cote, MD

Assistant Professor of Emergency Medicine

Joshua M. Cott, MD

Assistant Professor of Emergency Medicine

Carissa S. Cousins, MD, MPH Assistant Professor of Pediatrics

Marcelo A. Couto, DVM, PhD

Professor of Veterinary Medicine

Stephen D. Covington, MD

Assistant Professor of Internal Medicine

Conrad A. Cox. MD

Assistant Professor of Internal Medicine

Judy H. Cox, DVM, MS

Professor of Veterinary Medicine

Alissa P. Craft, DO

**Assistant Professor of Pediatrics** 

Ciane R. Craig, DVM

Professor of Veterinary Medicine

Dennis E. Cramer, DO

Assistant Professor of Surgery

Richard Cranston, MS, RPh

**Assistant Professor of Pharmacy Practice** 

Richard A. Crass, MD, MBA Assistant Professor of Surgery

Gary W. Crawford, MD

Assistant Professor of Internal Medicine

Linda L. Crawford, DO

Assistant Professor of Family Medicine

Sergio M. Crespo, MD

Assistant Professor of Internal Medicine

Scott W. Crismon, DPM

Instructor of Podiatric Medicine & Surgery

Charles R. Crispen, DO

**Assistant Professor of Pediatrics** 

Gary M. Critser, DO

Assistant Professor of Family Medicine

James A. Crosby, DO

Assistant Professor of Neurology

Ronald H. Crouch, MD

**Assistant Professor of Surgery** 

David W. Crownover, MD

Assistant Professor of Obstetrics/Gynecology

Andrew N. Chuikshank, DVM

Assistant Professor of Veterinary Medicine

Kathryn Crump, BVSc

Associate Professor of Veterinary Medicine

Arnold E. Cuenca, DO

Assistant Professor of Family Medicine/OMM

Francis J. Cummins, Jr., DO

Assistant Professor of Family Medicine/OMM

Michael P. Curley, MD

Assistant Professor of Physician Assistant

Education

Andrew R. Curran, DO

**Assistant Professor of Surgery** 

Elizabeth E. Cypher, DVM

Instructor of Veterinary Medicine

Theresa Cyr, DO

Assistant Professor of Family Medicine

Glen D. D'Arpa, DO

Instructor of Family Medicine

Vincent G. D'Auria, MD

Instructor of Family Medicine

Walter F. D'Costa, DPM

Assistant Professor of Podiatric Medicine & Surgery

Jack Dabbert, MS, PT

Adjunct Assistant Professor of Physical

Therapy Education

Dionisio F. Dabu, MD

Assistant Professor of Physician Assistant

Education

Evelyn R. Dacker, MD

Assistant Professor of Family Medicine

Mazen Dahan, MD

**Assistant Professor of Pediatrics** 

Timothy J. Dahlgren, MD

Assistant Professor of Emergency Medicine

Himmet Dajee, MD

**Assistant Professor of Surgery** 

Jose R. Dalprat, DO

**Assistant Professor of Pharmacy Practice** 

Timothy J. Dalsaso, MD

Assistant Professor of Radiology

Maria F. Daly, DO

Assistant Professor of Family Medicine

Joseph Damiani, DO

Assistant Professor of Surgery/Plastic Surgery

Kathleen Damiani, MD

Assistant Professor of Surgery/ Otorhinolaryngology

Stephen Damiani, DO

Assistant Professor of Internal Medicine/

Endocrinology

James F. Dancho, DPM

Instructor of Podiatric Medicine & Surgery

Sid Danesh, MD

Assistant Professor of Dermatology

Chuc B. Dang, DPM, MBA

Assistant Professor of Podiatric Medicine & Surgery

Heip Dinh Dang, DO

Assistant Professor of Family Medicine

Khoa (Joey) Dang, BSN, RN

Instructor of Graduate Nursing

Nghiem Duc Dang, MD

**Assistant Professor of Surgery** 

Christopher J. Dannaker, DO Assistant Professor of Dermatology

Jay B. Danto, DO

Assistant Professor of OMM

Nguyen D. Dao, PharmD

Assistant Professor of Pharmacy Practice

Matthew P. Darbro, DDS

Assistant Professor of Dental Medicine

Allison C. Dark, MD

**Assistant Professor of Psychiatry** 

James W. Daskalos, DO

Assistant Professor of Family Medicine

Paul B. Daskalos, DO

Assistant Professor of Obstetrics/Gynecology

Jane Dateshidze, PharmD, MBA

Associate Professor of Pharmacy Practice

Sarah G. Daum, EdD

Adjunct Associate Professor of Health

**Professions Education** 

Kent W. Dauterman, MD

Assistant Professor of Internal Medicine

Scott P. Davarn, MD

Assistant Professor of Emergency Medicine

Aaron L. David, DO

Assistant Professor of Family Medicine

Alfred B. Davidas, MD

Assistant Professor of Internal Medicine

Bert J. (Hans) Davidson, MD, PhD Professor of Obstetrics/Gynecology

Stephen M. Davidson, DO

Assistant Professor of Family Medicine

James A. Davies, MD

**Assistant Professor of Surgery** 

Jeffery W. Davies, DO, MPH

Assistant Professor of Emergency Medicine

Richard C. Davies, DO

Assistant Professor of Family Medicine

Robert R. Davies, DO

Assistant Professor of Internal Medicine

Christina M. Davis, MD

**Assistant Professor of Pediatrics** 

Paul R. Davis, DO

Assistant Professor of Family Medicine

Steven E. Davis, DO, MS

Assistant Professor of Family Medicine

Thomas M. Dawes, Jr., MD

Assistant Professor of Family Medicine

David M. Dawson, DPM

Assistant Professor of Podiatric Medicine &

Surgery

Kevin A. Day, MD

**Assistant Professor of Surgery** 

Anil Daya, MD

Assistant Professor of Internal Medicine

Lori de Bold, MD

Associate Professor of Physician Assistant

Education

Lino J. de Guzman, MD

Assistant Professor of Internal Medicine/

Gastroenterology

Odette de Guzman, PharmD

Assistant Professor of Pharmacy Practice

David D. de Haas, MD

Assistant Professor of Emergency Medicine

Maud de la Garde, DVM

Instructor of Veterinary Medicine

David A. de Martini, BS, RPh

**Assistant Professor of Pharmacy Practice** 

Ricardo E. de Napoli, DO

Assistant Professor of Family Medicine

Angela de Rosa, DO

Instructor of Internal Medicine

Douglas Deans, PharmD

Assistant Professor of Pharmacy Practice

James J. Dearing, DO

Assistant Professor of Family Medicine

Jennifer L. DeBerry, DVM

Assistant Professor of Veterinary Medicine

Darcy E. Deering, MD

Assistant Professor of Internal Medicine

Robert J. Demaster, MD

Assistant Professor of Anesthesiology

Milan John Demeter, MD Associate Professor of Surgery

Ameet J. Deo, MD, MS

Assistant Professor of Internal Medicine

Hem A. Deodhar, MD

Assistant Professor of Internal Medicine

Aron J. Depew, MD Instructor of Surgery

Harry W. Depew, MD

Assistant Professor of Family Medicine

Christian Derefield, BS, PA-C

Instructor of Physician Assistant Education

Sunita Dergalust, PharmD

Assistant Professor of Pharmacy Practice

Alpesh D. Desai, DO

Instructor of Family Medicine

Bela Desai, PharmD

Assistant Professor of Pharmacy Practice

Christina A. Desai, MD

Assistant Professor of Internal Medicine

Nilesh Desai, MD

Assistant Professor of Internal Medicine

Steven M. Deterville, MD

Assistant Professor of Family Medicine

Rajiv K. Dhamija, MD

Associate Professor of Internal Medicine

Jose J. Diaz, MD

Assistant Professor of Emergency Medicine

Brian A. DiCarlo, MD

Assistant Professor of Internal Medicine

Lorane Dick, DO

Associate Professor of Osteopathic

Manipulative Medicine

Joel Dickerman, DO

Professor of Family Medicine

Paul L. di Modica, DO

Assistant Professor of Internal Medicine &

**Emergency Medicine** 

Julie F. di Mundo, DO

**Assistant Professor of Pediatrics** 

Dinh V. Dinh, DO

Assistant Professor of Family Medicine

Ngon H. Dinh, DO

**Assistant Professor of Surgery** 

Tien N. Dinh, MD

**Assistant Professor of Pediatrics** 

Albert F. DiNicola, MD

**Assistant Professor of Pediatrics** 

Lew B. Disney, MD, PhD

**Associate Professor of Surgery** 

Dale V. di Stephano, MD

Assistant Professor of Internal Medicine

Jonathan Do, DDS

Assistant Professor of Dental Medicine

Trung Doan, PharmD

Assistant Professor of Pharmacy Practice

Anne E. Doan Van, DDS

Assistant Professor of Dental Medicine

Jack E. Dobkin, DO

Assistant Professor of Internal Medicine

Stephen D. Docherty, DO

Assistant Professor of Emergency Medicine

Theresa R. Dodd, MSN, RN Instructor of Graduate Nursing

Neil E. Doherty III, MD

Professor of Internal Medicine

Sretenka Dokich, MD

Assistant Professor of Physician Assistant

Education

Joan E. Dolance, DVM

Assistant Professor of Veterinary Medicine

Eric J. Dolgin, DO

Assistant Professor of OMM

William C. Domb, DMD

Associate Professor of Family Medicine

Carl P. Dominguez, PharmD

**Assistant Professor of Pharmacy Practice** 

Norma Dominguez, DO

Assistant Professor of Anesthesiology

Victor G. Dominguez, MD

Assistant Professor of Family Medicine

John S. Domreis, MD

**Assistant Professor of Surgery** 

Thomas K. Donaldson, MD

**Associate Professor of Surgery** 

Tennison S. Dong, MD

**Assistant Professor of Surgery** 

Mark W. Donnelly, MD

Assistant Professor of Emergency Medicine

John S. Donovan, MD

**Assistant Professor of Surgery** 

Roger A. Donovick, MD

**Assistant Professor of Psychiatry** 

Michael J. Dorsi, MD

**Assistant Professor of Surgery** 

Cynthia B. Douglass, JD

Assistant Professor of Social Medicine and

Healthcare Leadership

Dennis J. Dowling, DO Professor of OMM

Bradley C. Downing, Jr, DO

Assistant Professor of Family Medicine

Brian J. Downs, DO, MBA

Assistant Professor of Family Medicine

Gregory J. Downs, MD

Assistant Professor of Anesthesiology

Bryan Drake, DO

Assistant Professor of Family Medicine

Summer L. Drake, DO

Assistant Professor of Family Medicine

Roger J. Dreiling, MD

Assistant Professor of Internal Medicine

Rolf R. Drinhaus, MD

**Assistant Professor of Orthopedics** 

Nikki Du, PharmD

Assistant Professor of Pharmacy Practice

Roger D. Duber, DO

Professor of Internal Medicine/Cardiology

Delia S. Duenas, PharmD

Assistant Professor of Pharmacy Practice

David W. Dufner, MD, MBA

**Assistant Professor of Surgery** 

Daniel T. Dugaw, DO

Assistant Professor of NMM/OMM & Family

Medicine

Patrick Duke, PA-C

Instructor of Physician Assistant Education

Ian R. Duncan, DO

Assistant Professor of Family Medicine

Sheila K. Dunlop, DO

Assistant Professor of Family Medicine

Meredith R. Dunn, MD

**Assistant Professor of Pediatrics** 

Roberta J. Dunn, MD

Associate Professor of Emergency Medicine

Virginia (Ginny) D. Dunn, MS, PT

Adjunct Assistant Professor of Physical Therapy

Education

Christina S. Dunn, PharmD

Assistant Professor of Pharmacy Practice

Maria J. Dunton, DO

**Assistant Professor of OMM** 

Tanya T. Duong, PharmD

Assistant Professor of Pharmacy Practice

Caroline E. DuPee, MSN

**Assistant Professor of Graduate Nursing** 

Michael P. Duran, MD

Assistant Professor of Psychiatry

Edouard J. Duret, MD

**Assistant Professor of Surgery** 

Jonathan C. Durning, MD Assistant Professor of Surgery

Roseline Duru, RN, BSN

**Assistant Professor of Graduate Nursing** 

Nguyen (Andy) D. Duy, MD

Assistant Professor of Surgery/Vascular

Surgery

Greg Dyer, PA-C

Assistant Professor of Physician Assistant

Education

Robert Dyson, MD, PhD

Assistant Professor of Obstetrics/Gynecology

Emily A. Ebert, MD

Associate Professor of Family Medicine

Steven H. Edelman, MD

Assistant Professor of Radiology

Joel B. Edelstein, DO

Assistant Professor of Internal Medicine

Edwin L. Edillion, MD

**Assistant Professor of Surgery** 

Irv E. Edwards, MD

Assistant Professor of Emergency Medicine

Roy Egari, MD

Assistant Professor of Surgery/Urology

Karen L. Ehnert, DVM, MPVM, MS

Adjunct Associate Professor of Veterinary

Medicine

Lawrence M. Ehrlich, DO

Assistant Professor of Family Medicine

Christopher S. Eich, DVM

Associate Professor of Veterinary Medicine

John E. Eiland, DO

Assistant Professor of Obstetrics/Gynecology

Nicole M. Ekblom, DVM

Assistant Professor of Veterinary Medicine

Norman T. Eki, MD

Assistant Professor of Internal Medicine & Pediatrics

Scott T. Ekin, MD

Assistant Professor of Emergency Medicine

Lisa M. Elazegui, PharmD

Assistant Professor of Pharmacy Practice

Hisham El-Bayer, MD

**Assistant Professor of Surgery** 

Ahmed S. El-Bersawi, MD

Associate Professor of Internal Medicine

Mohamad Eletreby, PharmD

Assistant Professor of Pharmacy Practice

Lydia T. Elias, DO

**Assistant Professor of Pediatrics** 

Douglas D. Eliason, DO

Assistant Professor of Family Medicine

Joshua D. Ellenhorn, MD

Associate Professor of Physician Assistant

Education

Dale A. Elleson, DO

Assistant Professor of Surgery/ Otorhinolaryngology

John G. Ellis, MD

Assistant Professor of Orthopedic Surgery

Scott J. Ellner, DO, MPH Assistant Professor of Surgery

Bernard T. Elpedes, DO

Assistant Professor of Family Medicine

Larry I. Emdur, DO, PhD

Assistant Professor of Internal Medicine/ Pulmonary

Medicine

Richard J. Emerson, DO

**Professor of Orthopedic Surgery** 

Daren F. Emery, DO

**Associate Professor of Pediatrics** 

Stephanie B. Emery, MD

Assistant Professor of Internal Medicine

Paul E. Emmans Jr., DO

Assistant Professor of Family Medicine

Michelle C. Emmert, EdD

Adjunct Assistant Professor of Social Medical &

HealthCare Leadership

Craig Y. Endo, MD

**Assistant Professor of Family Medicine** 

Patti K. Endo, MD

Instructor of Dermatology

Tiffany P.L. Endo, DO

Assistant Professor of Family Medicine

Diane Endo-Okada, PharmD

Assistant Professor of Pharmacy Practice

Curtis Eng, DVM

Associate Professor of Veterinary Medicine

Benjamin England, MD

Assistant Professor of Internal Medicine

Jack D. England, DO

Professor of Emergency Medicine

Scott Engwall, MD

**Assistant Professor of Surgery** 

Jacqueline M. Eriksen, MD

Assistant Professor of Family Medicine

Carl M. Erikson, DO

Assistant Professor of Family Medicine

Richard W. Ermel, DVM, PhD Professor of Veterinary Medicine

Steven B. Ernst, MD

Assistant Professor of Emergency Medicine

J. Yusuf Erskine, DO

Assistant Professor of Family Medicine

Asher E. Esagoff, PharmD

Assistant Professor of Pharmacy Practice

Matthew M. Eschelbach, DO, MS

Assistant Professor of Emergency Medicine

Pooneh Esfahani, DO

Assistant Professor of Internal Medicine

Romic M. Eskandarian, PharmD

Assistant Professor of Pharmacy Practice

Ali Esmaili, MD

Assistant Professor of Internal Medicine

Gregory John Esmer, DO Assistant Professor of OMM

Brenda Espe, DO

Assistant Professor of Family Medicine

Thomas R. Eubanks, DO

**Assistant Professor of Surgery** 

Alexander N. Evans, MD, MBA

**Assistant Professor of Surgery** 

Bradley H. Evans, MD

Assistant Professor of Internal Medicine

Gregory R.D. Evans, MD

Professor of Physician Assistant Education

James T. Evans, MD

Assistant Professor of Family Medicine

Jonathan W. Evans, DO

Assistant Professor of Orthopedic Surgery

Kevin D.J. Ewanchyna, MD

Assistant Professor of Family Medicine

Vickie S. Ewing, MD

Assistant Professor of Physician Assistant

Education

Thomas W. Eyler, DO

Assistant Professor of Family Medicine

David M. Faddis, MD

**Assistant Professor of Surgery** 

Wade Faerber, DO

Professor of Surgery/Orthopedics

Robert R. Fajardo, PA-C

Instructor of Physician Assistant Education

Michael R. Falcon, PharmD

Assistant Professor of Pharmacy Practice

Neil A. Falk, MD

**Assistant Professor of Psychiatry** 

Robert R. Fallows, PsyD Instructor of Psychiatry

Robert S.P. Fan, MD, MS

Assistant Professor of Orthopedic Surgery

Evangeline S. Fangonil, RN, MSN

Adjunct Assistant Professor of Graduate

Nursing

Ryad A. Fares, MD

Assistant Professor of Internal Medicine

Ramiz A. Fargo, MD

Assistant Professor of Internal Medicine

Mubashir A. Faroogi, MD

**Assistant Professor of Psychiatry** 

Susan Farrington, RN, MSN

Assistant Professor of Graduate Nursing

Bryan Featherstone, DO

Assistant Professor of Family Medicine

Elana Fedor, MD

Assistant Professor of Internal Medicine

Richard Feely, DO

Associate Professor of OMM

John R. Feeney, DO

Assistant Professor of Family Medicine

Gary M. Feinberg, MD

Assistant Professor of Surgery/ Otorhinolaryngology

Michael J. Feinstein, DO

Professor of Family Medicine

Rodney J. Felber, DO

Assistant Professor of Internal Medicine

David G. Feldman, DVM

Professor of Veterinary Medicine

Edward M. Feldman, DO

Assistant Professor of Obstetrics/Gynecology

Stephen A. Felt, DVM, MPH

Associate Professor of Veterinary Medicine

Timothy L. Feng, MD

Assistant Professor of Radiology

Dan F. Fennell, MD

Assistant Professor of Internal Medicine

George Ferenczi, MD

Assistant Professor of Internal Medicine/

Gastroenterology

Sanaz Fereshteh, DDS

Assistant Professor of Dental Medicine

Carl E. Ferguson, DO

Assistant Professor of Family Medicine

Timothy J. Ferguson, MD

Assistant Professor of Physician Assistant

Education

Edgar A. Fernandez, DO

Assistant Professor of Family Medicine

William M. Ferrin, MD

Assistant Professor of Internal Medicine

Ronald B. Ferris, MD

Associate Professor of Family Medicine

Henie A. Fialkoff, MD

**Assistant Professor of Pediatrics** 

Raymond A. Fidaleo, MD

**Assistant Professor of Psychiatry** 

George Fields, DO

Associate Professor of Family Medicine

Stefanie Fightlin, DO

Assistant Professor of Family Medicine

Jennifer L. File, DO

**Assistant Professor of Pediatrics** 

David S. Filippi, MD

**Assistant Professor of Neurology** 

Elizabeth Finebaum, PA-C

Instructor of Physician Assistant Education

Lowell C. Finkleman, MD, MSc

Assistant Professor of Family Medicine

Sina Firouzi, MD

Assistant Professor of Family Medicine

Sofia Firoz, MBBS

**Assistant Professor of Psychiatry** 

A.T. Fischer, Jr., DVM

**Professor of Veterinary Medicine** 

Mark R. Fischl, DO

Assistant Professor of Internal Medicine

Howard A. Fishbein, MD

Associate Professor of Physician Assistant

Education

David E. Fisher, MD

Assistant Professor of Physician Assistant

Education

Katherine L. Fisher, DO

Assistant Professor of Internal Medicine

John E. Fitzgerald, MD

Assistant Professor of Family Medicine

Steven M. Fitzmorris, MD

Assistant Professor of Internal Medicine/ Cardiology

Bruce D. Flagg, DO

Assistant Professor of Family Medicine

Paul M. Fleiss, MD, MPH Professor of Pediatrics

Mark D. Fleming, MD

**Assistant Professor of Surgery** 

Stanley L.K. Flemming, DO

Associate Professor of Family Medicine

Maria Fleseriu, MD

Assistant Professor of Internal Medicine

Radu A. Florea, MD

Assistant Professor of Internal Medicine

Robyn Song Flores, DMD

Assistant Professor of Dental Medicine

Andrea B. Flory, DVM

Assistant Professor of Veterinary Medicine

Ronald A. Floyd, PharmD, MS

Assistant Professor of Pharmacy Practice

Kenneth W. Fogelberg, MD

Assistant Professor of Obstetrics/Gynecology

Mark E. Foglesong, MD

**Assistant Professor of Surgery** 

Dirk J. Foley, MA

Instructor of Social Medicine & Healthcare

Leadership

Jon W. Fong, DO

Assistant Professor of Family Medicine

Maria Fonseca, RN, BSN

Adjunct Assistant Professor of Graduate

Nursing

Ron S. Foo, MD

Assistant Professor of Psychiatry

Elizabeth W. Ford, DVM, MPVM Professor of Veterinary Medicine

Sandra M. Ford, PA-C Instructor of Psychiatry Alice Y. Forest, PharmD

Assistant Professor of Pharmacy Practice

Mehrdad Forghani-Arani, DO

Assistant Professor of Obstetrics/Gynecology

Alden P. Forrester, MD

Assistant Professor of Family Medicine

Tina C.S. Foster, MD

Assistant Professor of Obstetrics/Gynecology

Ali Fouladi, MD

**Assistant Professor of Surgery** 

Amy E. Fousek, DVM

Instructor of Veterinary Medicine

John C. Fowler, MD

Assistant Professor of Internal Medicine

Terry K. Fowler, DO, PhD

Assistant Professor of Family Medicine

Thomas G. Fox, PhD

Professor of Social Medicine & Healthcare

Leadership

Wade C. Fox, DO

Assistant Professor of Emergency Medicine

Frederick H. Frank, MD

Assistant Professor of Obstetrics/Gynecology

Justin J. Franson, DPM

Assistant Professor of Podiatric Medicine &

Surgery

Paul A. Fredrick, MD

Associate Professor of Internal Medicine

Sarah Lohr Freeman, PharmD

Assistant Professor of Pharmacy Practice

Jamie K. Frege, DVM

Instructor of Veterinary Medicine

Gary J. Frei, MD

**Assistant Professor of Surgery** 

John B. Freitas, DO

Assistant Professor of Family Medicine

Richard Frelinger, DO

Assistant Professor of Family Medicine

Bruce E. Frey, MD

Assistant Professor of Radiology

Karla S. Frey-Gitlin, DO

Assistant Professor of NMM/OMM

Arthur H. Friedlander, DMD

Adjunct Professor of Podiatric Medicine & Surgery

Gerald Stanley Friedman, MD

Associate Professor of Internal Medicine

Theodore A. Friedman, MD

Associate Professor of Pathology

Leonard M. Fromer, MD

Assistant Professor of Family Medicine

Christopher Frothingham, DO

Assistant Professor of Family Medicine

Robert G. Frykberg, DPM, MPH

Professor of Podiatric Medicine & Surgery

Irene H. Fu, MD

Assistant Professor of Family Medicine

Carmen Fuentealba, DVM, PhD

Adjunct Professor of Veterinary Medicine

Byron Fujimoto, MD

Assistant Professor of Radiology

Ronald Y. Fujimoto, DO

Assistant Professor of Family Medicine

Michele Fujiokon, PharmD

Assistant Professor of Pharmacy Practice

Peter Kwok-Hin Fung, MD

Assistant Professor of Internal Medicine

Jill Furgurson, MD

Assistant Professor of Physician Assistant

Education

Geoffrey Furman, MD

Assistant Professor of Family Medicine

Gilbert I. Furman, MD

Assistant Professor of Pediatrics/Neonatology

Mark J. Gabriel, DO

Assistant Professor of Internal Medicine/

Gastroenterology

Mark R. Gadberry, DDS

Assistant Professor of Dental Medicine

Balu Gadhe, MD

Assistant Professor of Internal Medicine

Satyajeet Y. Gaekwad, MD Assistant Professor of Surgery

Barbara P. Gaffino, DDS

Assistant Professor of Dental Medicine

Karen L. Gaio, MD

Assistant Professor of Obstetrics/Gynecology

Steven F. Galarza, DO

**Assistant Professor of Psychiatry** 

Faith C. Galderisi, DO

**Assistant Professor of Pediatrics** 

John A. Gama, PharmD

Assistant Professor of Pharmacy Practice

Joseph Gambone, DO

Professor of Obstetrics/Gynecology

David J. Gamrath, DO

**Assistant Professor of Family Medicine** 

Anil K. Gandhi, MB/BS

Assistant Professor of Family Medicine

Celso A. Gangan, MD

Assistant Professor of Internal Medicine

David S. Gans, MD

Instructor of Internal Medicine

Lesley E. Garber, DO

Assistant Professor of Family Medicine

Vinod K. Garg, MD

**Associate Professor of Surgery** 

Carlo G. Garibaldi, DO

Assistant Professor of Obstetrics/Gynecology

James E. Garmon Jr., PA-C

Assistant Professor of Physician Assistant

Education

Brian T. Garner, PharmD

**Assistant Professor of Pharmacy Practice** 

Cynthia H. Garner, DO

Assistant Professor of Family Medicine

Mathew G. Garoufalis, DPM

Associate Professor of Podiatric Medicine & Surgery

Troy A. Garrett, MD

Assistant Professor of Family Medicine

Cort Reid Garrison, MD

Assistant Professor of Internal Medicine

Mark S. Garrison, DO

Assistant Professor of Obstetrics/Gynecology

Roger C. Garrison, DO

Associate Professor of Internal Medicine

Christine A. Garvey, DVM

Instructor of Veterinary Medicine

Adam D Gassel, DVM, DACVS

Associate Professor of Veterinary Medicine

Lawrence D. Gates, Jr,

Assistant Professor of Internal Medicine

Frew H. Gebreab, MD

Assistant Professor of Internal Medicine

Michael R. Geist, DVM, DACVIM

Assistant Professor of Veterinary Medicine

Kenneth A. Geller, MD, MSEd Assistant Professor of Surgery

Stephen M. Geller, DPM, MS

Assistant Professor of Podiatric Medicine & Surgery

Darrell E. Genstler, MD

**Assistant Professor of Surgery** 

Tami Sue Gerstner, MD

Assistant Professor of Emergency Medicine

Armand Ghaffari, MD

Assistant Professor of Internal Medicine

Kamran Ghalili, MD

Assistant Professor of Internal Medicine

Parvin Ghassemian, PharmD

Assistant Professor of Pharmacy Practice

Ronny G. Ghazal, MD

Associate Professor of Surgery/Orthopedics

Negar "Nicki" Ghazanfarpour, PharmD Assistant Professor of Pharmacy Practice

Mohammed S. Ghonim, PharmD

**Assistant Professor of Pharmacy Practice** 

Tera M. Ghormley, DVM

Instructor of Veterinary Medicine

Bharati Ghosh, MD

**Associate Professor of Pediatrics** 

Mark Gibson, PA-C

Instructor of Physician Assistant Education

Manuel Gigena, MD

**Assistant Professor of Surgery** 

J. Michael Gilbert, MD

**Assistant Professor of Pediatrics** 

Alexander M. Gilderman, PharmD

Assistant Professor of Pharmacy Practice

Ulric Gilkes, MD

Assistant Professor of Emergency Medicine

Jeffry M. Gill, MD, MBA

**Assistant Professor of Pediatrics** 

Kathryn E. Gill, MD

Assistant Professor of Family Medicine

Alexandra Gillen, DVM, MA Instructor of Veterinary Medicine

Robert S. Gitlin, DO

Assistant Professor of NMM/OMM

Andrew S. Givner, MD, MS

Assistant Professor of Emergency Medicine

Lawrence S. Glass, DO

Assistant Professor of Family Medicine

Jeffrey W. Glassheim, DO

**Assistant Professor of Pediatrics** 

Melvin M. Glick, DDS

Assistant Professor of Dental Medicine

Reid M. Gliddon, MS, RPh

**Assistant Professor of Pharmacy Practice** 

Doulas Glod, DPM

Assistant Professor of Podiatric Medicine & Surgery

Justin R. Glodowski, DO

Assistant Professor of Family Medicine

Appanagari (Dev) Gnanadev, MD

**Professor of Surgery** 

Sergio Y. Go, Jr, MD

Assistant Professor of Internal Medicine

Sandra L. Goines, DO

Assistant Professor of Family Medicine

Stanley A. Golanty, MD

Professor of Internal Medicine

Ellice K. Goldberg, DO

Assistant Professor of Family Medicine

David B. Goldberger, MD

Assistant Professor of Internal Medicine

Robert A. Golden, MD

Assistant Professor of Family Medicine

Thomas F. Golden, MD

**Assistant Professor of Surgery** 

Allan P. Goldman, DO

Associate Professor of Family Medicine

Jack Goldman, MD

Assistant Professor of Internal Medicine

Mary G. Goldman, DO

Assistant Professor of OMM

Mitchell R. Goldstein, MD Associate Professor of Pediatrics

Sara A. Goldstein, DVM Instructor of Veterinary Medicine

Narsis Golkarieh, MD Assistant Professor of Pediatrics

Denise Gomez, MD Assistant Professor of Physician Assistant Education

Myron J. Gomez, MD Assistant Professor of Surgery/Vascular Surgery

Eran Gonsor, PharmD
Assistant Professor of Pharmacy Practice

Carmen Gonzales-Nate, MD
Assistant Professor of Pharmacy Practice

Gregory J. Gonzalez, MD Assistant Professor of Pediatrics

Wilbert Gonzalez-Angulo, MD
Associate Professor of Obstetrics/Gynecology

Christina Ann Goode, PhD Professor of Biomedical Sciences

David A. Goodwin, MD, MS Associate Professor of Pediatrics

Richard H. Gordinier, MD Assistant Professor of Internal Medicine

Brian L. Gordon, MD Assistant Professor of Emergency Medicine

Christopher J. Gordon, MD Assistant Professor of Family Medicine

Keith L. Gordon, MD Associate Professor of Psychiatry

Margaret Ann Gordon, MD Assistant Professor of Pathology

Alan E. Gorenberg, MD
Assistant Professor of Internal Medicine/Allergy

Daniel Gorenberg, MD Assistant Professor of Internal Medicine/Allergy

Dale J. Gorski, DO Assistant Professor of Family Medicine

David C. Gorsulowsky, MD Assistant Professor of Dermatology

Lawrence F. Gosenfeld, DO Assistant Professor of Psychiatry

Kaoru R. Goshima, MD Assistant Professor of Podiatric Medicine & Surgery

H. David Gottlieb, DPM Assistant Professor of Podiatric Medicine & Surgery

Roy Gottlieb, DO Assistant Professor of Radiology

Galal S. Gough, MD Associate Professor of Obstetrics/Gynecology

David S. Goya, DO Assistant Professor of Internal Medicine/ Pulmonary Diseases

James B. Graber, DO Assistant Professor of Family Medicine

John F. Grady, DPM
Associate Professor of Podiatric Medicine & Surgery

William M. Graham, DO Associate Professor of Surgery

Howard Graitzer, DO Associate Professor of Internal Medicine

Barry S. Grames, MD Assistant Professor of Surgery

Gary A. Gramm, DO
Assistant Professor of Family Medicine

Bradley C. Grant, DO Associate Professor of Family Medicine

William A. Grant II, DVM Professor of Veterinary Medicine Kendall E. Graven, MD

Assistant Professor of Family Medicine

Jarid D. Gray, MD

Assistant Professor of Family Medicine

Jason F. Gray, MD, MBA

Assistant Professor of Anesthesiology

Timothy J. Gray, DO

Assistant Professor of Family Medicine

Joseph G. Green, DPM

Assistant Professor of Podiatric Medicine & Surgery

Michael M. Green, DO

Assistant Professor of Family Medicine

Michael P. Green, DO

Assistant Professor of Radiology

Catou Greenberg, MD

Assistant Professor of Physician Assistant

Education

David Greenberg, PA-C

Instructor of Physician Assistant Education

Sandra A. Greenberg, DO Instructor of Pediatrics

Tia Beth Greenberg, DVM

Associate Professor of Veterinary Medicine

Gerald R. Greene, MD

Professor of Pediatrics/Infectious Diseases

Roger Greenham, PharmD

Assistant Professor of Pharmacy Practice

Sylvia L. Greenman, DVM

Associate Professor of Veterinary Medicine

Leah L. Greer, DVM

Associate Professor of Veterinary Medicine

Fred O. Gregorian, PharmD

Assistant Professor of Pharmacy Practice

Russell M. Grief, DO

Assistant Professor of Internal Medicine

Catherine A. Grenier, MD
Assistant Professor of Pediatrics

Lindy S. Griffin, DO

Assistant Professor of Family Medicine

Peter D. Grimm, DO

Associate Professor of Internal Medicine/ Oncology

James W. Groff, DO

Assistant Professor of Dermatology

Debra L. Gromacki-Blyth, PA-C

Instructor of Physician Assistant Education

Eric Groshong, MD

**Assistant Professor of Pediatrics** 

Brian W. Gross, MD

Assistant Professor of Internal Medicine

Jay S. Grossman, DDS

Assistant Professor of Dental Medicine

Hal L. Grotke, MD

Assistant Professor of Family Medicine

Jeotsna Grover, MB/BS

Assistant Professor of Obstetrics & Gynecology

Joel S. Grubbs, DO

Assistant Professor of Family Medicine

Nicholas A. Grumbine, DPM

Associate Professor of Podiatric Medicine & Surgery

Steven Lee Grund, MD

Assistant Professor of Internal Medicine

David Gu, DO

Assistant Professor of Internal Medicine

Jesus Alfonso Guajardo, DVM

Assistant Professor of Veterinary Medicine

K. Dean Gubler, DO Professor of Surgery

Edward Guerrero, PharmD

**Assistant Professor of Pharmacy Practice** 

Richard P. Guess, MD

Assistant Professor of Family Medicine

Gary W. Gulizia, DO

Assistant Professor of Family Medicine

Sisira K.P. Gunawardane, MD

Assistant Professor of Physician Assistant

Education

Bal K. Gupta, MD

**Assistant Professor of Psychiatry** 

Mahesh C. Gupta, MD

Assistant Professor of Internal Medicine

Suresh Gurbani, MD, PhD

**Assistant Professor of Pediatrics** 

A. Nikos Gurfield, DVM

Associate Professor of Veterinary Medicine

Kamal Gurung, MD

**Assistant Professor of Pediatrics** 

Thomas C. Gustafson, DO

Assistant Professor of Family Medicine

Orestes Gutierrez, DO

Assistant Professor of Family Medicine

Marc S. Gutin, MD

Assistant Professor of Internal Medicine

Richard G. Gwinn, MD

Assistant Professor of Physician Assistant

Education

Viviane S. Haber, DDS

Adjunct Assistant Professor of Dental

Medicine

John J. Haburjak, DVM

Associate Professor of Veterinary Medicine

Elana N. Hadar, DVM

Assistant Professor of Veterinary Medicine

Lara G. Haddad, PharmD

**Assistant Professor of Pharmacy Practice** 

Mark Haddad, PharmD

**Assistant Professor of Pharmacy Practice** 

Paul J. Haddeland, MD

Assistant Professor of Family Medicine

Bassam G. Hadeed, MD Instructor of Pediatrics

Angeline Hadiwidjaja, MD Assistant Professor of Pediatrics

James R. Haeberlin, MD Assistant Professor of Surgery

Thomas A. Haffey, DO

Professor of Internal Medicine/Cardiology

Samir E. Hage, DO

Assistant Professor of Obstetrics & Gynecology

David J. Hagen, MD

Assistant Professor of Family Medicine

David B. Hagie, DO

Assistant Professor of Family Medicine/ Osteopathic

Manipulative Medicine

Stefan L.J. Hagopian, DO

Assistant Professor of Family Medicine/ Osteopathic

Manipulative Medicine

Robert M. Hakala, MD

Assistant Professor of Family Medicine

Payam Hakimi, DO

Assistant Professor of Famjily Medicine

Fatima Hakkak, DO

Assistant Professor of Internal Medicine

Galust G. Halajyan, MD

Assistant Professor of Anesthesiology

Phill V. Halamandaris, MD

Assistant Professor of Psychiatry

Kadeer M. Halimi, DO

Assistant Professor of Emergency Medicine

Brian E. Hall, MD

Assistant Professor of Anesthesiology

Clifford A. Hall, MD

Assistant Professor of Internal Medicine

MaryAnn Hall, PA-C

Assistant Professor of Physician Assistant

Education

Roger Hall, DO

Assistant Professor of Family Medicine

Thomas G. Hall, PharmD

Assistant Professor of Pharmacy Practice

Issa Y. Hallaq, DO

Associate Professor of Internal Medicine

Jeffrey M. Haller, DO

Assistant Professor of Internal Medicine

Joan E. Halley, DO

Assistant Professor of Family Medicine

Gabriel J. Halperin, DPM

Assistant Professor of Podiatric Medicine & Surgery

Norman Hamada, PharmD

**Assistant Professor of Pharmacy Practice** 

Wael M. Hamade, MD

Assistant Professor of Family Medicine

Khan J. Hameed, MD

**Assistant Professor of Surgery** 

Helen B. Hamilton, DVM, MS

Associate Professor of Veterinary Medicine

Jennifer Hamilton, MD

**Assistant Professor of Psychiatry** 

Keith A. Hamilton, DO

Assistant Professor of Family Medicine

Robert C. Hamilton, MD

Assistant Professor of Pediatrics

James F. Hammel, MD, MA, MS Assistant Professor of Psychiatry

Michael S. Han, MD

**Assistant Professor of Surgery** 

Simon S. Han, PharmD

**Assistant Professor of Pharmacy Practice** 

Curtis R. Handler, MD

**Assistant Professor of Radiology** 

Lofty R. Hanna, MD

Assistant Professor of Internal Medicine

John R. Hannig, MD

Assistant Professor of Obstetrics/Gynecology

Bret R. Hansen, MD

**Assistant Professor of Surgery** 

Eric R. Hansen, DO

Instructor of Family Medicine

Charles E. Hansing, MD

Assistant Professor of Internal Medicine/ Cardiology

Ben Hara, DPM

Professor of Family Medicine/Podiatry

Jimmy H. Hara, MD

Assistant Professor of Family Medicine

Kathleen M. Harder, MD

Assistant Professor of Internal Medicine

Robert J. Harder, MD

Assistant Professor of Obstetrics/Gynecology

W. Benson Harer, MD

Professor of Obstetrics/Gynecology

Pamela J. Harford, DO

Assistant Professor of Family Medicine

Tim M. Harju, PA-C

Instructor of Physician Assistant Education

Lee C. Harker, MD

**Assistant Professor of Pediatrics** 

Todd J. Harker, MD

Associate Professor of Physician Assistant

Education

Kenneth A. Harkewicz, DVM

Associate Professor of Veterinary Medicine

Keith W. Harless, MD

Associate Professor of Internal Medicine

Shaun D. Harper, MD

Assistant Professor of Internal Medicine

Jon Frederic Harrell, DO Assistant Professor of Surgery

Bryan Duane Harris, MD

Assistant Professor of Internal Medicine

Clyde O. Harris III, MD

Assistant Professor of Surgery/Orthopedics

Elliot A. Harris, MD Professor of Psychiatry

Kajsa T. Harris, MD

Assistant Professor of Family Medicine

Linda R. Harris, MD

Assistant Professor of Obstetrics/Gynecology

Mark V. Hart, MD, MS

Assistant Professor of Internal Medicine

Susan D. Haskell, DO, MS

**Assistant Professor of Psychiatry** 

Mary Ann Morelli Haskell, DO Assistant Professor of OMM

Imran Hasnain, MD

Assistant Professor of Internal Medicine

Farid Hassanpour, DO, MBA Assistant Professor of Pediatrics

John T. Hassapis, MD

Assistant Professor of Surgery

Charlotte M. Hatch, DVM

Instructor of Veterinary Medicine

Kristen T. Haughland, MD Assistant Professor of Pediatrics

Richard P. Hausman, DO

Assistant Professor of Emergency Medicine

Richard C. Havard, MD Assistant Professor of Surgery

John R. Hawes, Jr., DO

Associate Professor of Family Medicine

JoQuetta Hayes-Handy, MD

Assistant Professor of Social Medicine & Health Care

Leadership.

Lee Headley, PharmD

Assistant Professor of Pharmacy Practice

Allan A. Hedges, MD

Assistant Professor of Obstetrics/Gynecology

Brenda K. Hedges, MD

**Assistant Professor of Pediatrics** 

Todd Hee, MD

Associate Professor of Internal Medicine

Ole A. Heggeness, DO

Associate Professor of Family Medicine

Chen-Wen C. Heh, MD

**Assistant Professor of Psychiatry** 

Paul Heiderscheidt, MD Instructor of Family Medicine

Jennifer A. Heidmann, MD

Assistant Professor of Internal Medicine

Thomas D. Heiman, MD Assistant Professor of Surgery

Brent W. Heimuller, MD

**Assistant Professor of Pediatrics** 

Joseph J. Helak, DO Professor of Surgery

Kimberlynn M. Heller, DO

Assistant Professor of Obstetrics/Gynecology

Kathi L. Hemphill, MSN

**Assistant Professor of Graduate Nursing** 

Jennifer M. Hendershot, DMD, MS Assistant Professor of Dental Medicine

Bryn Henderson, DO, JD

Assistant Professor of Pharmacy Practice

Sidney E. Henderson III, DO

Assistant Professor of Internal Medicine

Tya Henderson, DVM

Instructor of Veterinary Medicine

Lorri L. Hendon, DO

Assistant Professor of Family Medicine

Wendy Hendricks, PharmD

Assistant Professor of Pharmacy Practice

William W. Henning, DO

Assistant Professor of Family Medicine

Joseph J. Herbert, MD

**Assistant Professor of Pediatrics** 

Edward P. Hernandez, OD Professor of Optometry

Guillermo Hernandez, DO

Assistant Professor of Family Medicine

Jesus N. Hernandez, MD

Assistant Professor of Obstetrics/Gynecology

Toni L. Hero, DO

Assistant Professor of Family Medicine

Stanley S. Herr, DO

Assistant Professor of Family Medicine

Jose Francisco Herrera, MD

Associate Professor of Family Medicine

Steven L. Hersch, MD

Assistant Professor of Internal Mediicne

Luke Hersher, DO

Assistant Professor of Family Medicine

Judith J. Hervey, MSN

**Assistant Professor of Graduate Nursing** 

Stephanie S. Hethumun, MD Assistant Professor of Pediatrics

Edward A. Heusch, DO

Associate Professor of Surgery

Michael L. Hicks, BA, PA-C

Assistant Professor of Physician Assistant

Education

Ronald S. Higginbotham, DO Assistant Professor of OMM

Munther A. Hijazin, MD

**Assistant Professor of Neurology** 

Miles J. Hildebrand, PharmD

**Assistant Professor of Pharmacy Practice** 

Cynthia A. Hill, DO

Assistant Professor of Family Medicine

Howard K. Hill, DVM

Associate Professor of Veterinary Medicine

Steven L. Hill, DVM, DACVIM Professor of Veterinary Medicine

Terrance A. Hill, MD

Assistant Professor of Internal Medicine

Timothy B. Hill, MD

Assistant Professor of Internal Medicine

Timothy E. Hindmarsh, MD

Assistant Professor of Family Medicine

Ronald H. Hino, MD

Assistant Professor of Physician Assistant

Education

Cliff A. Hiroshige, PharmD

Associate Professor of Pharmacy Practice

Jerry W. Hizon, MD

Assistant Professor of Physician Assistant

Education

Samvel Hmayakyan, MD

Associate Professor of Physician Assistant

Education

Phoebe F. Ho, MD

Assistant Professor of Obstetrics/Gynecology

Robert W.-H. Ho, DO

**Assistant Professor of Orthopedics** 

Tuan N. Hoang, MD

**Assistant Professor of Surgery** 

Tuan A. Hoang-Xuan, DO

Assistant Professor of Dermatology

Lisa Mason Hoban, DVM

Assistant Professor of Veterinary Medicine

George L. Hobeich, MD

**Associate Professor of Pediatrics** 

Katherine M. Hoda, MD

Assistant Professor of Internal Medicine

Nan E. Hodge, DPM

Assistant Professor of Podiatric Medicine & Surgery

Timothy P. Hodges, DO

Adjunct Assistant Professor of Family

Medicine

Lawrence Hodor, DPM

Assistant Professor of Podiatric Medicine & Surgery

Steven M. Hoefflin, MD Assistant Professor of Surgery

Jenny S. Hoelter, MD

**Assistant Professor of Pediatrics** 

Arlene F. Hoffman, DPM, PhD

Professor of Podiatric Medicine & Surgery

Joseph O. Hoffman, DO

Associate Professor of Family Medicine

Marc A. Hoffman, DO

Assistant Professor of Family Medicine

Mark D. Hoffman, MD

Assistant Professor of Emergency Medicine

David P. Hofheins, DO

Assistant Professor of Family Medicine

Douglas B. Holl, MD

**Assistant Professor of Psychiatry** 

E. Carlisle Holland, DO

Assistant Professor of Family Medicine/ Osteopathic

Manipulative Medicine

Robert L. Holland, MD, PhD

Assistant Professor of Obstetrics/Gynecology

William Hollander, MD

Assistant Professor of Obstetrics/Gynecology

Shane M. Hollawell, DPM

Assistant Professor of Podiatric Medicine & Surgery

Sandra K. Holloway, MD

Assistant Professor of Internal Medicine

Crystal M. Holmes, DPM

Instructor of Podiatric Medicine & Surgery

Lorin G. Holst, MD

Assistant Professor of Internal Medicine

Martin Holt, PA-C

Instructor of Physician Assistant Education

Russell R. Holtz, MD

Assistant Professor of Anesthesiology

Charles Holzner, MD

Professor of Internal Medicine

Jesse Y. Hong, PharmD, MBA

**Assistant Professor of Pharmacy Practice** 

Joann Hong, PharmD

Assistant Professor of Pharmacy Practice

Joseph S. Hong, DO

Assistant Professor of NMM/OMM

Karen Hong, DO

Assistant Professor of Obstetrics/Gynecology

Mai-Chi Hong, PharmD

Instructor of Pharmacy Practice

Theresa A. Hong, DO

Assistant Professor of OMM

William K. Hooks III, MD

Assistant Professor of Radiology

Amber S. Hopkins, DVM

Assistant Professor of Veterinary Medicine

Fran Hopkins, PharmD

**Assistant Professor of Pharmacy Practice** 

David D. Hopp, MD

Associate Professor of Physician Assistant

Education

Katherine R. Horad, BS, PA-C

Instructor of Physician Assistant Education

James Hornstein, MD

Assistant Professor of Family Medicine

Mark Horowitz, DO

**Assistant Professor of Dermatology** 

G. Dennis Horvath, DO

**Assistant Professor of Orthopedic Surgery** 

Sandra A. Horvath-Dori, MD

Assistant Professor of Internal Medicine

Silvio F. Hoshek, MD

**Associate Professor of Surgery** 

Joseph Hourany, MD

Assistant Professor of Internal Medicine/

Pulmonology

Allen Houshiar, DO

Assistant Professor of Family Medicine

Elizabeth A. Houston, MBA

Instructor of Dental Medicine

Margaret A. Hovey, MD

Assistant Professor of Obstetrics/Gynecology

Virginia E. Hoyle, PharmD

Assistant Professor of Pharmacy Practice

James J. Hoyne, II, DO

Assistant Professor of Family Medicine

Jennifer J. Hsieh, DO

Assistant Professor of Internal Medicine

Kevin C. Hszieh, DDS

Assistant Professor of Dental Medicine

David W. P. Huang, MD

Associate Professor of Surgery/Orthopedics

Enoch T. Huang, MD

Assistant Professor of Emergency Medicine

Kuo-Liang Huang, MD

Assistant Professor of Internal Medicine/Infectious

Diseases

Louise L. Huang, MD, MA

Assistant Professor of Family Medicine

W. Luke Huang, MD

**Assistant Professor of Pediatrics** 

Jerry L. Hubbard, MD

**Assistant Professor of Surgery** 

Michael L. Huber, DVM, MS, DACVS

Professor of Veterinary Medicine

Michael R. Hudson, MD

Assistant Professor of Family Medicine

Glenn S. Huerta-Enochia, MD

Assistant Professor of Obstetrics/Gynecology

John D. Hughes, MD

Associate Professor of Podiatric Medicine & Surgery

Ngocthuy T. Hughes, DO

**Assistant Professor of Surgery** 

Jason D. Hughson, MD

Assistant Professor of Internal Medicine

Marion C. Hull, MD

Assistant Professor of Family Medicine

Annette E. Hulse, DO, MS

Assistant Professor of NMM/OMM

Theodore R. Humphrey, MD

**Assistant Professor of Pediatrics** 

Chuan-Ti Hung, MD

Assistant Professor of Internal Medicine

Paul E. Hunn, MD

Assistant Professor of Internal Medicine

Catherine Ann Hunter, DO

Assistant Professor of Obstetrics/Gynecology

Lawrence Z. Huppin, DPM

Professor of Podiatric Medicine & Surgery

Erin C. Hurley, MD

Assistant Professor of Pediatrics

Keri K. Hurley, PharmD

Instructor of Pharmacy Practice

Alan W. Hurty, MD

Assistant Professor of Internal Medicine

Eric L. Hurwitz, DC, PhD

Adjunct Professor of Public Health, Epidemiology &

Biostatistics

Asghar Husain, MD

**Assistant Professor of Surgery** 

Jamal Hussain, MD

Assistant Professor of Internal Medicine

Christopher J. Hussar, DO, DDS

Assistant Professor of Family Medicine

Hanh Hong Huynh, PharmD

Assistant Professor of Pharmacy Practice

Phuc Huynh, DO

Assistant Professor of Family Medicine

Jiunn-Bor J. Hwang, MD, MPH

Assistant Professor of Obstetrics/Gynecology

Paul V.B. Hyde, MD

**Assistant Professor of Surgery** 

Christopher F. Hyer, DPM

Assistant Professor of Podiatric Medicine & Surgery

John Hyun, PharmD

Assistant Professor of Pharmacy Practice

Daniel M. Ihnat, MD

Assistant Professor of Podiatric Medicine & Surgery

Sultana Ikramullah, MD

**Assistant Professor of Psychiatry** 

Paul S. Imperia, MD

**Assistant Professor of Surgery** 

Stephen B. Inkeles, MD, MPH

Assistant Professor of Internal Medicine

Robert A. Innocenzi, DO

Assistant Professor of Surgery/Ophthalmology

Colin T. Iosso, MD

**Assistant Professor of Neurology** 

Pamela J. Irby, MD

Assistant Professor of Family Medicine

Manuel G. Iregui, MD

Assistant Professor of Internal Medicine

Christina H. Isihue, PharmD

**Assistant Professor of Pharmacy Practice** 

Dyanadewi J. Iskaq, DDS

Assistant Professor of Dental Medicine

Lukasz J. Iwanczyk, MD

Assistant Professor of Internal Medicine

Gosta W. Iwasiuk, MD

**Assistant Professor of Surgery** 

Lillian S. Iwatsuki, MD

**Assistant Professor of Pediatrics** 

Yuki Izumi, DPM

Assistant Professor of Podiatric Medicine & Surgery

Anthony S. Jackson, PharmD

Associate Professor of Pharamcy Practice

Christian Sterling Jackson, MD

Assistant Professor of Internal Medicine

Christopher F. Jackson, MD

Assistant Professor of Surgery

Gregory M. Jackson, DVM

Associate Professor of Veterinary Medicine

Harold W Jackson, DO

Assistant Professor of Family Medicine

J. Carvel Jackson, DO

Assistant Professor of Physical Medicine and

Rehabilitation

Jonathan B. Jackson, DDS

Assistant Professor of Dental Medicine

Marianne B. Jacobs, DO

Assistant Professor of Internal Medicine/ Neurology

Brent E. Jacobsen, DO

Assistant Professor of Emergency Medicine

Robert C. Jacoby, DO

**Assistant Professor of Surgery** 

Michael S. Jaffe, DO

Assistant Professor of Physical Medicine &

Rehabilitation

Arthur J. Jaffee, JD

Adjunct Professor of Medical Jurisprudence

David S. James, DO

Assistant Professor of Family Medicine

Jim A. James, MD

**Assistant Professor of Neurology** 

Kimberly L. James, MD

Assistant Professor of Obstetrics/Gynecology

Mohammad Jamshidi, DO Assistant Professor of Surgery

Wen-Feng Jan, MD

Assistant Professor of Pediatrics/Endocrinology

Carl Jansen, MD Professor of Radiology

Matthew U. Janssen, MD

Assistant Professor of Emergency Medicine

Kedy Ying Jao, DO

Assistant Professor of Family Medicine

Elizabeth L. Jappay, MD

Assistant Professor of Internal Medicine

Farid Javedanfar, MD

Instructor of Internal Medicine

Mahmood J. Jazayeri, MD

Assistant Professor of Surgery/Orthopedics

Richard R. Jeffries, DO

Associate Professor of Family Medicine

Kevin Jenkins, DO

Professor of Internal Medicine

Linda L. Jenkins-Muschetto, DVM Instructor of Veterinary Medicine

Kraig K. Jenson, MD

Assistant Professor of Dermatology

Patricia L. Jett, MD

**Assistant Professor of Pediatrics** 

Norman B. Jetton, MD

Assistant Professor of Physician Assistant

Education

Jack D. Ji, DO

Assistant Professor of Internal Medicine

Bruce C. Johnson, MD

**Assistant Professor of Surgery** 

Debra L. Johnson, RN, NP, PA-C

Assistant Professor of Physician Assistant

Education

Douglas R. Johnson, DO

Assistant Professor of Internal Medicine

Elizabeth G. Johnson, PharmD

**Assistant Professor of Pharmacy Practice** 

Eric G. Johnson, MPT

Adjunct Assistant Professor of Physical

Therapy Education

Gary R. Johnson, DO, DVM

Assistant Professor of Family Medicine

Jacqueline A. Johnson, MD

**Assistant Professor of Psychiatry** 

Jessica B. Johnson, DO

Assistant Professor of Family Medicine

Larry Johnson, PharmD

**Assistant Professor of Pharmacy Practice** 

Malia L. Johnson, DMD

**Assistant Professor of Dental Medicine** 

Martin C. Johnson II, MD

Assistant Professor of Internal Medicine

Paul W. Johnson, DO

Assistant Professor of Internal Medicine

Roger K. Johnson, DVM, DACVIM Professor of Veterinary Medicine

Virginia M. Johnson, DO Associate Professor of OMM

David W. Jolley, DPM

Assistant Professor of Podiatric Medicine & Surgery

Paula M. Jones, MSN

**Assistant Professor of Graduate Nursing** 

Richard F. Jones, DO

Associate Professor of Physician Assistant

Education

Richard O. Jones, DPM, MPH

Associate Professor of Podiatric Medicine & Surgery

Robert C. Jones, MD

Assistant Professor of Internal Medicine

Stephen R. Jones, MD

Professor of Internal Medicine

Walter Jones III, MD

Assistant Professor of Physician Assistant

Education

Christopher Jordan, MD

**Associate Professor of Orthopedics** 

Jason E. Jorge, MD

Assistant Professor of Internal Medicine

Layne S. Jorgensen, DO

Assistant Professor of Family Medicine

Alfredo Y. Jose, MD

**Assistant Professor of Surgery** 

Nathan M. Josephs, DO Assistant Professor of OMM

James S. Joy, PharmD

**Assistant Professor of Pharmacy Practice** 

Debra R. Judelson, MD

Assistant Professor of Internal Medicine/Cardiology

Randal Carl Juengel, MD

Assistant Professor of Pathology

Anthony A Juguilon, MD

Assistant Professor of Pathology

Faheem M. Jukaku, MD

Assistant Professor of Family Medicine

Andrew Jun, PharmD

Assistant Professor of Pharmacy Practice

Jeany K. Jun, PharmD, MPH

Associate Professor of Pharmacy Practice

Nami Jun, PharmD

Assistant Professor of Pharmacy Practice

Frank M. Jung, MD

Assistant Professor of Obstetrics/Gynecology

Mark C. Juretic, MD

Assistant Professor of Internal Medicine

Nancy R. Kahaner, DO

Assistant Professor of Obstetrics/Gynecology

Otto Kahn, MD

Associate Professor of Internal Medicine/

Cardiology

Patricia Kahn, DO, MPH

Assistant Professor of Emergency Medicine

June Isaacson Kailes, MSW

Adjunct Associate Professor of Health

**Professions Education** 

Stanley A. Kaller, DO

Assistant Professor of Family Medicine

Stuart Kalmanowitz, MD

Assistant Professor of Obstetrics/Gynecology

Megha R. Kalthia, PharmD

Assistant Professor of Pharmacy Practice

Charles L. Kaluza, DO

Assistant Professor of Surgery/ Otorhinolaryngology

Karl N. Kaluza, DO

Assistant Professor of Family Medicine

Jon Kamada, PharmD

Assistant Professor of Pharmacy Practice

Steven D. Kamajian, DO

Associate Professor of Family Medicine

Ihlo Kang, MD

Assistant Professor of Internal Medicine

Patricia C. Kao, MD

Assistant Professor of Internal Medicine

Theodore J. Kapanjie, DO

Assistant Professor of Family Medicine

Frank G. Karneges, DO

Assistant Professor of Internal Medicine

Thomas J. Karras, MD

Associate Professor of Internal Medicine/ Cardiology

Andre M. Kasko, DO

Assistant Professor of Obstetrics/Gynecology

Hooshang Kasravi, MD

**Assistant Professor of Surgery** 

Naim S. Kassar, MD

Assistant Professor of Obstetrics/Gynecology

Michael D. Kasseles, DO

Assistant Professor of Internal Medicine

Louis B. Kasunic, DO

Assistant Professor of Family Medicine

Lionel B. Katchem, DO

Associate Professor of Family Medicine

Emmanuel Peter Katsaros, DO

Assistant Professor of Internal Medicine

Lia Katz, MD

Assistant Professor of Family Medicine

Aaron B. Kaufman, DO

Associate Professor of Family Medicine/OMM

Avrum A. Kaufman, DO

**Assistant Professor of Surgery** 

Steven R. Kaufman, DO

**Associate Professor of Pediatrics** 

Tajinder B. Kaur, MD

Assistant Professor of Obstetrics/Gynecology

Brian I. Kawahara, PharmD

**Assistant Professor of Pharmacy Practice** 

Martin H. Kay, MD, PhD

Associate Professor of Dermatology

Christopher K. Kaypekian, MD

Assistant Professor of Anesthesiology

Nazanin Kazerooni, PharmD

**Assistant Professor of Pharmacy Practice** 

Christopher Keenan, MD

Assistant Professor of Family Medicine

Jason P. Kellogg, MD

Assistant Professor of Psychiatry

Albert M. Kelly, DO

Instructor of Anesthesiology

Michael J. Kelly, MD

Assistant Professor of Internal Medicine

Shital P. Kelshikar, PharmD

Associate Professor of Pharmacy Practice

Scott J. Kemeny, MD

Assistant Professor of Internal Medicine

Lori A. Kemper, DO

Associate Professor of Family Medicine

Sheila Z. Kennedy, DO

Assistant Professor of Family Medicine

L. Marie Keplinger, DPM

Assistant Professor of Podiatric Medicine & Surgery

Shiun "Tim" T. Ker, MD

Associate Professor of Surgery

Darlina M. Keseg-Manthei, DO

Assistant Professor of Family Medicine

Stephen E. Kessler, DO

**Assistant Professor of Dermatology** 

Brian O. Keyes, DO

Assistant Professor of Anesthesiology

Ayaz O. Khan, DO

**Assistant Professor of Surgery** 

Farah S. Khan, DMD, MBS

Assistant Professor of Dental Medicine

Mahbuba Khan, MD

Assistant Professor of Family Medicine

M-Shahid A. Khan, MD

Assistant Professor of Internal Medicine

Sagib B. Khan, MD

Assistant Professor of Anesthesiology

Sara A. Khan, MD

Instructor of Internal Medicine

Peyman Kharazi, PharmD

Associate Professor of Pharmacy Practice

Babak Khazaeni, MD

Assistant Professor of Emergency Medicine

Henry H. Khin, MD

Assistant Professor of Psychiatry

Moez Khorsandi, DO

**Assistant Professor of Surgery** 

Abdallah Khourdaji, MD

**Assistant Professor of Dermatology** 

George M. Khoury, MD

Assistant Professor of Internal Medicine

Karen S. Kiefer, DO

**Assistant Professor of Psychiatry** 

Monica A. Kieffer, DO Assistant Professor of OMM

Kevin L. Kiene, MD

Instructor of Dermatology

Ronald H. Kienitz, DO

Assistant Professor of Family Medicine

Peter V. Kilburn, DO Professor of Surgery

Bill H. Kim, MD

Assistant Professor of Internal Medicine

Brian S. Kim, PharmD

Assistant Professor of Pharmacy Practice

Chul Kim, DPM

Assistant Professor of Podiatric Medicine & Surgery

Daniel I. Kim, MD

Associate Professor of Internal Medicine

Janet C. Kim, PharmD

Assistant Professor of Pharmacy Practice

Jeong H. Kim, MD

Assistant Professor of Internal Medicine

Jiyoun E. Kim, MD

**Assistant Professor of Surgery** 

Joseph Kim, MD

**Assistant Professor of Surgery** 

Karine Kim, PharmD

**Assistant Professor of Pharmacy Practice** 

Kenneth T. Kim, MD

Assistant Professor of Internal Medicine

Mark C. Kim, PharmD

Assistant Professor of Pharmacy Practice

Seung Bin Kim, PharmD

Assistant Professor of Pharmacy Practice

Steven H. Kim, PharmD

Assistant Professor of Pharmacy Practice

Wayne W. Kim, DO

Assistant Professor of Family Practice

Emily A. King, PharmD

**Assistant Professor of Pharmacy Practice** 

Hollis King, DO

Assistant Professor of Family Medicine/OMM

Hwa-Kou King, MD

Professor of Anesthesiology

Edwin C. Kingsley, MD

Assistant Professor of Internal Medicine

Kyle J. Kinmon, DPM, MS

Assistant Professor of Podiatric Medicine & Surgery

Kenneth E. Kinoshita, PharmD

Associate Professor of Pharmacy Practice

Anita G. Kinser, EdD, RN

Adjunct Assistant Professor of Graduate

Nursing

Kelly A. Kinsley, MD, MS

**Assistant Professor of Dermatology** 

William T. Kirby, DO

**Assistant Professor of Dermatology** 

G. Craig Kiser, MD

**Assistant Professor of Surgery** 

Dan Kiss, MD

Assistant Professor of Emergency Medicine

Eric A. Klaphake, DVM

Associate Professor of Veterinary Medicine

Elvira Klause, MD

Associate Professor of Physician Assistant

Education

Warren E. Klausner, DO

Assistant Professor of Family Medicine

Neil E. Klein, MD

Assistant Professor of Surgery/Plastic &

Reconstructive

Phyllis H. Klein, MD

Assistant Professor of Internal Medicine

Andreas Klohnen, DVM

Associate Professor of Veterinary Medicine

Steven Klompus, AS, PA-C

Instructor of Physician Assistant Education

Steven M. Knapik, DO

Assistant Professor of Internal Medicine

Stephen L. Knapp, MD

Instructor of Family Medicine

Brian G. Knight, DO

Associate Professor of OMM

Jeffrey B. Knight, MD

Instructor of Orthopedic Surgery

Heather L. Knott, DO

**Assistant Professor of Psychiatry** 

Michael E. Knower, MD

Assistant Professor of Family Medicine

Hassan A. Kobaissi, DPM

Assistant Professor of Podiatric Medicine & Surgery

Rhonda L. Kobold, DO

Assistant Professor of Obstetrics/Gynecology

Johannes Koch, MD

Assistant Professor of Internal Medicine

Sandra Kochaon, BS, PA-C

Instructor of Physician Assistant Education

William J. Koenig II, DO

**Assistant Professor of Pediatics** 

Shahrokh Kohanim, DO

Assistant Professor of Emergency Medicine

Walter S. Kohnke, DDS

Assistant Professor of Dental Medicine

Janet D. Kohtz, OD

**Assistant Professor of Optometry** 

Karen S. Kolba, MD

Assistant Professor of Internal Medicine

Robert S. Kollen, MD

Assistant Professor of Emergency Medicine

Michael S. Kolodney, MD, PhD

Associate Professor of Dermatology

Cindy Konecne, DO

Assistant Professor of Family Medicine

Jiri Konecny, DO

**Assistant Professor of Surgery** 

Benjamin L. Konell, DO

Assistant Professor of Family Medicine

Debra A. Kontny, DO

**Assistant Professor of Surgery** 

Choon Won Koo, MD

Assistant Professor of Obstetrics/Gynecology

Herbert R. Kornfeld, MD

Associate Professor of Internal Medicine

Daniel D. Kort, MD, MPH

Assistant Professor of Obstetrics/Gynecology

Mark S. Kosins, MD Professor of Psychiatry

Dana Kosmala, DO

**Assistant Professor of Pediatrics** 

Zeljka H. Kostich, MD

Assistant Professor of Emergency Medicine

Alka R. Kothari, MD

**Assistant Professor of Pathology** 

Richard T. Kotomori, Jr., MD Assistant Professor of Psychiatry

John C. Koumas, DO

Associate Professor of Family Medicine

Thomas Koumas, MD

Associate Professor of Family Medicine

John J. Kowalczyk, DO

**Assistant Professor of Surgery** 

Heike Kramer, DDS, MSc

Assistant Professor of Dental Medicine

Paul H. Kratofil, DO

**Assistant Professor of Psychiatry** 

Alan P. Kratz, MD

Assistant Professor of Surgery/Ophthalmology

David E. Kreshek, MD

**Assistant Professor of Surgery** 

Priya Krishnamurthy, MD, MPH

Assistant Professor of Internal Medicine

Divakar R. Krishnareddy, MD Assistant Professor of Orthopedics

Michael J. Krnacik, MD, PhD Assistant Professor of Surgery

Clarisa R. Krueger, DVM

Instructor of Veterinary Medicine

Razmig Krumian, DO

Assistant Professor of Family Medicine

Jacqueline J. Krumrey, MD Assistant Professor of Surgery

Ellen B. Kruusmagi, MD

Assistant Professor of Family Medicine

Dennis D. Kudlik, DDS

Assistant Professor of Dental Medicine

la Y. Kue, DO

Assistant Professor of Family Medicine

Joseph H. Kuei, MD

Assistant Professor of Internal Medicine

Archana P. Kulkarni, MD

Assistant Professor of Physician Assistant

Education

Sandeep Kumar, MD, MS Assistant Professor of Surgery

Vanessa J. Kumpf, PharmD

**Assistant Professor of Pharmacy Practice** 

Anita Kundi, DO

Assistant Professor of Family Medicine

Debra J. Kuracina, MD

Instructor of Emergency Medicine

Donald J. Kurth, MD

Assistant Professor of Emergency Medicine

Michael Z. Kurtz, DO

Assistant Professor of Family Medicine

Veronika R. Kurucz, MD

Assistant Professor of Internal Medicine

Mary Jo Kutler, DO

**Assistant Professor of Pediatrics** 

Albert I. Kwan, PharmD

Assistant Professor of Pharmacy Practice

Sophie Kwok, MD

Assistant Professor of Internal Medicine

Eugene L. Kwong, MD

Assistant Professor of Emergency Medicine

Mark la Beau, DO

Assistant Professor of NMM/OMM

James K. Lace, MD

**Assistant Professor of Pediatrics** 

Jennifer G. Lachman, MD

**Assistant Professor of Pediatrics** 

Gregory A. Lackides, MD

Assistant Professor of Internal Medicine

Normal A. La Faunce, DVM, MS Professor of Veterinary Medicine

Javier La Fontaine, DPM, MS

Associate Professor of Podiatric Medicine

John J. La Marca, DO

Assistant Professor of Internal Medicine

Linda D. Lafferty, DO, MS

Associate Professor of Family Medicine

Gary T. Lai, MD

Assistant Professor of Internal Medicine

Magnus Lakovics, MD

**Assistant Professor of Psychiatry** 

Fariborz Lalezarzadeh, DO Associate Professor of Surgery

James M. Lally, DO, MS Professor of Family Medicine

John F. LaLonde, DO

Assistant Professor of Family Medicine

Joseph Lam, PharmD

**Assistant Professor of Pharmacy Practice** 

Trung C. Lam, PharmD

**Assistant Professor of Pharmacy Practice** 

Robert Lamb, DDS, MSD

Assistant Professor of Dental Medicine

Rajneet S. Lamba, MD

Assistant Professor of Internal Medicine

John C. Land, MD

**Assistant Professor of Surgery** 

Richard E. Land, DO

Associate Professor of Psychiatry

Brian W. Lane, MD

Assistant Professor of Emergency Medicine

Mieke D. Lane, DO

Assistant Professor of Obstetrics/Gynecology

Carol L. Lang, DO

Assistant Professor of Family Medicine

Sabah M. Langston, DO

Assistant Professor of Obstetrics/Gynecology

Petey Laohaburanakit, MD

Assistant Professor of Internal Medicine

Hortensia Lara, BA, PA-C

Instructor of Physician Assistant Education

James R. La Rose, DPM, MS

Associate Professor of Podiatric Medicine & Surgery

Clint P. Larsen, DPM

Instructor of Podiatric Medicine & Surgery

David A. Larsen, MD

**Assistant Professor of Surgery** 

Lawrence A. Larson, DO

Assistant Professor of Pediatrics

Laurence J. Lasky, MD

Assistant Professor of Family Medicine

Samuel SM Lau, MD

Assistant Professor of Internal Medicine

Spencer A. Lau, DO

Assistant Professor of OMM Jennifer A. Laughlin, DO

Assistant Professor of Internal Medicine

Gerald Laursen, MPAS, PA-C

Assistant Professor of Physician Assistant

Education

Daniel H. Laury, MD

Assistant Professor of Obstetrics/Gynecology

Frank W. Lavac, Jr., DVM, MS Professor of Veterinary Medicine

Alfred Lavi, DO

Assistant Professor of Family Medicine

Lawrence Lavine, DO, MPH

Associate Professor of OMM/Neurology

Jeffrey M. Lawler, DO

**Assistant Professor of Psychiatry** 

Larry C. Lawrence, MD

**Assistant Professor of Psychiatry** 

Gregory W. Lawson, DVM, PhD Professor of Veterinary Medicine

Phillip T. Lawson, DVM

Professor of Veterinary Medicine

Mary Anne Laxa, MD Instructor of Pediatrics

Mark P. Laxineta, DVM

Instructor of Veterinary Medicine

John Marcus Lay, DO

**Assistant Professor of OMM** 

Ronald E. Lazar, MD

Associate Professor of Anesthesiology

Arthur J. Lazik, MD, PhD

Assistant Professor of Internal Medicine/ Cardiology

Anne Van Le, PharmD

Assistant Professor of Pharmacy Practice

Ha M. Le, MD

**Assistant Professor of Radiology** 

Jacqueline K. Le, MD

Assistant Professor of Emergency Medicine

Brian J. le Berthon, MD, MS

Assistant Professor of Internal Medicine/Oncology

Erol J. le Blanc, DO

Assistant Professor of Family Medicine

John R. Lebow, DO

Assistant Professor of Family Medicine

Peter C. le Port, MD

**Assistant Professor of Surgery** 

Carolyn S. Leach, MD

Associate Professor of Pathology

Scott C. Lederhaus, MD Assistant Professor of Surgery

Gabriel B. Ledger, MD

Assistant Professor of Emergency Medicine

Agnes H. Lee, PharmD

Associate Professor of Pharmacy Practice

Carol Hyeun Lee, MD

Associate Professor of Emergency Medicine

Chang Nin Lee, MD

Assistant Professor of Obstetrics/Gynecology

Charles K. Lee, PharmD

**Assistant Professor of Pharmacy Practice** 

Daniel A. Lee, PharmD

**Assistant Professor of Pharmacy Practice** 

Davis Y. Lee, MD

**Assistant Professor of Pediatrics** 

Donald T. Lee, DO, MPH

Associate Professor of Family Medicine

Eric C-J Lee, MD

Assistant Professor of Internal Medicine

Grace J. Lee, PharmD

Assistant Professor of Pharmacy Practice

James T. Lee, DO

Associate Professor of Family Medicine

Jennifer M. Lee, PharmD

Assistant Professor of Pharmacy Practice

Jongmi Lee, PharmD

**Assistant Professor of Pharmacy Practice** 

Linda Y. Lee, PharmD

**Assistant Professor of Pharmacy Practice** 

Michelle Lee, PharmD

Assistant Professor of Pharmacy Practice

Norman Lee, MPA, RPh

Assistant Professor of Pharmacy Practice

Paul C. Lee, MD

**Assistant Professor of Surgery** 

Raymond Lee, PharmD

Assistant Professor of Pharmacy Practice

Robert K. Lee, DPM

Assistant Professor of Podiatric Medicine & Surgery

Steven M. Lee, DO

Assistant Professor of Internal Medicine

Steven S. Lee, DO

Assistant Professor of Internal Medicine

Thomas T. Lee, MD

Assistant Professor of Obstetrics/Gynecology

William Y.W. Lee, DO

Assistant Professor of Family Medicine

Won Tak Lee, MD

Assistant Professor of Psychiatry

Edward B. Leeds, DVM

Professor of Veterinary Medicine

David P. Leibel, DO

Assistant Professor of Surgery/Urology

Steven Leifheit, DO

**Assistant Professor of OMM** 

Timothy M. Lenehan, DVM, DACVS Professor of Veterinary Medicine

Blair Ian Lenhoff, PharmD

Assistant Professor of Pharmacy Practice

John F. Lennox, DO

Associate Professor of Obstetrics/Gynecology

Robert F. Leonard, DO

Assistant Professor of Family Medicine

Eric N. Leong, DO

**Assistant Professor of Psychiatry** 

Conrad R. le Prowse, MD Instructor of Pediatrics

Julia M. Lerch, DDS

Assistant Professor of Dental Medicine

Catherine J. Lesnick, MS, PT

Adjunct Assistant Professor of Physical

Therapy

Michael Brian Lesser, DVM

Professor of Veterinary Medicine

William R. Letendre, Sr., MS, MBA

Adjunct Professor of Pharmaceutical Sciences

Geoffrey W. Leung, MD

Assistant Professor of Family Medicine

Deborah J. LeVan, DO

Professor of Internal Medicine

David Z. Levine, DO

Assistant Professor of Family Medicine

Rebecca Levine, MD

Instructor of Family Medicine

M. Richard Levinson, DO

**Assistant Professor of Pediatrics** 

Gwen A. Levitt, DO

Assistant Professor of Psychiatry

Elaine Levy, BS

Assistant Professor of Pharmacy Practice

Avery M. Lew, PharmD

Assistant Professor of Pharmacy Practice

Brandon L. Lew, DO

Assistant Professor of Emergency Medicine

David O. Lewis, MD

Assistant Professor of Family Medicine

Judith L. Lewis, DO

Assistant Professor of Family Medicine

Sherman N. Lewis, DO

Assistant Professor of Surgery/Plastic &

Reconstructive

Todd J. Lewis, MD

**Assistant Professor of Surgery** 

Diane Leyba, MD

Instructor of Obstetrics/Gynecology

Lawrence Leyba, DO

**Professor of Family Medicine** 

Dan (Diane) Li, MD

Assistant Professor of Internal Medicine

David Y. Li, DO

Assistant Professor of Radiology

Stephanie Liang, PharmD Instructor of Pharmacy Practice

Jenng-Jong Liao, MD

Assistant Professor of Internal Medicine

Marcia A. Liberatore, MD

Assistant Professor of Emergency Medicine

Peter J. Licata, DO

Assistant Professor of Family Medicine

Danny L. Lickness, MD

Associate Professor of Physician Assistant

Education

Kenneth M. Likehart, MD

Assistant Professor of Internal Medicine

Sanaa I. Ligons, DO

Assistant Professor of Family Medicine

Robert Ligorsky, DO

Associate Professor of Internal Medicine/

Hematology and Oncology

Robert Likins, PharmD

Assistant Professor of Pharmacy Practice

Joseph L. Lillo, DO

Assistant Professor of Family Medicine/ Osteopathic

Manipulative Medicine

Alice Lim, PharmD

**Assistant Professor of Pharmacy Practice** 

Terri Yuen Lim, PharmD

Associate Professor of Pharmacy Practice

Raymond Limansky, MD

Associate Professor of Obstetrics/Gynecology

Howard B. Limmer, DO

Associate Professor of Family Medicine

Antony Te-Hui Lin, MD

Assistant Professor of Internal Medicine

Augustin Lin, DO

Assistant Professor of Family Medicine

Jason S. Lin, MD

**Assistant Professor of Surgery** 

Matthew Y.C. Lin, MD

**Assistant Professor of Orthopedic Surgery** 

Rick Jui Hau Lin, DO, MPH

**Assistant Professor of Dermatology** 

Christain C. Lin-Burns, DDS

Assistant Professor of Dental Medicine

John F. Lindberg, MD

Assistant Professor of Emergency Medicine

Matthew L. Lindberg, MD

Assistant Professor of Internal Medicine

Cathleen Lindsay, DO

Assistant Professor of Family Medicine/ Osteopathic

Manipulative Medicine

Lynnea E. Lindsey, PhD Instructor of Psychiatry

Linna Linna, MD

Assistant Professor of Internal Medicine

Kwan-Hwa W. Liou, PharmD Professor of Pharmacy Practice

Peter D. Lippincott, DVM

Professor of Veterinary Medicine

Ronald Liskanich, DO

Assistant Professor of Dermatology

Thomas L. Lissman, MD

**Assistant Professor of Psychiatry** 

Jasmin S. Liu, DPM

Assistant Professor of Podiatric Medicine & Surgery

Rex C. Liu, MD

Assistant Professor of Internal Medicine

Yen-Fu J. Liu, MD

**Assistant Professor of Pediatrics** 

Sol Lizerbram, DO

**Professor of Family Medicine** 

Geoffrey K. Lloyd, DO

Assistant Professor of Family Medicine

Jeffrey D. Lloyd, DDS

Assistant Professor of Dental Medicine

Susan L. Lloyd, PhD, MSN

Associate Professor of Graduate Nursing

Lily L. Lo, MD

**Assistant Professor of Pediatrics** 

Hedy C. Loa, MD

**Assistant Professor of Internal** 

Medicine/Geriatrics

Nigel M. Longland, DO

Assistant Professor of Family Medicine

William R. Loomis, DO

Associate Professor of OMM

Christopher Lopatosky, PA-C

Assistant Professor of Physician Assistant

Education

J. Antonio G. Lopez, MD

Assistant Professor of Internal Medicine/Cardiology

Jairo E. Lopez, MD

Assistant Professor of Family Medicine

Wenee L. Lopez, PharmD

Assistant Professor of Pharmacy Practice

Raj B. Lotwala, DDS

Assistant Professor of Dental Medicine

Louis Louk, Jr., DPM, MS

Adjunct Assistant Professor of Podiatric Medicine &

Surgery

Brian J. Loveless, DO Assistant Professor of OMM Felice L. Loverso, Ph.D.

**Assistant Professor of Health Professions** 

Education

Nelman C. Low, MD

Assistant Professor of Surgery/ Otorhinolaryngology

Andrew G. Lowe, PharmD
Professor of Pharmacy Practice

Charles I. Lu, MD

Assistant Professor of Internal Medicine

Ligyun Lu, PharmD

Instructor of Pharmacy Practice

Phong T. Lu, DMD

Assistant Professor of Dental Medicine

William M. Lucas, MD

Assistant Professor of Family Medicine

David L. Lukens, DO

Associate Professor of Family Medicine

Johnathan Lukoff, MD

Assistant Professor of Physician Assistant

Education

Bing Keung Lum, PharmD

**Assistant Professor of Pharmacy Practice** 

Bryant J. Lum, MD

Assistant Professor of Ophthalmology

Grant Lum, PharmD

Associate Professor of Pharmacy Practice

Randolph Lum, DDS

Assistant Professor of Dental Medicine

Lisa M. Lupo, MD

Assistant Professor of Obstetrics/Gynecology

Hector F. Luque, DO

Assistant Professor of Internal Medicine

Dan K. Luu, PharmD

Assistant Professor of Pharmacy Practice

Pamela Renee Archer Lux, DO

Assistant Professor of Emergency Medicine

Zaw Win Lwin, MD

Assistant Professor of Physician Assistant

Education

Kip D. Lyche, MD

Assistant Professor of Internal Medicine

Marc E. Lynch, DO

Assistant Professor of Anesthesiology

Billie Lynes, MSN, FP, RN

Adjunct Assistant Professor of Graduate

Nursing

Collin W. Lynn, MD

Assistant Professor of Family Medicine

Katie G. Lyons, PharmD, MS

Assistant Professor of Pharmacy Practice

Alfred C. Ma, MD, PhD, MBA Professor of Anesthesiology

Lee K. Maas, MD

Assistant Professor of Emergency Medicine

Richard H. Mabie, MD

**Assistant Professor of Pediatrics** 

Daryl K. MacCarter, MD

Assistant Professor of Internal Medicine/

Rheumatology

Lawrence P. MacCree, DO

Assistant Professor of Neurosurgery

Alan A. MacGill, DPM

Assistant Professor of Podiatric Medicine & Surgery

Monica N. Macias, PharmD

Assistant Professor of Pharmacy Practice

Sonja Mack, MSN, RN

Adjunct Assistant Professor of Graduate

Nursing

F. Roy MacKintosh, MD, PhD Professor of Internal Medicine

Sally E. MacPhedran, MD

Assistant Professor of Obstetrics/Gynecology

Gregory R. Maddex, DO

Assistant Professor of Family Medicine

Ramchander R. Madhavarapu, MD Assistant Professor of Pediatrics

Heather A. Madigan, DO

Assistant Professor of Internal Medicine

Julie Madorsky, MD

Professor of Physical Medicine and

Rehabilitation

Bruce W. Madsen, MD

Assistant Professor of Ophthalmology

Lon Madsen, DO

Assistant Professor of Family Medicine

Michael Sei Maehara, MD

Assistant Professor of Internal Medicine/

Rheumatology

Jennifer M. Magee, DVM

Instructor of Veterinary Medicine

Andre Maginot, MD

Assistant Professor of Physician Assistant

Education

Harold I. Magoun Jr., DO

Professor of Family Medicine/Osteopathic

Manipulative Medicine

Sonal Mahajan, PharmD

Instructor of Pharmacy Practice

Shakti Mahapatra, MD

Instructor of Obstetrics/Gynecology

Tamara Maher, DO

Assistant Professor of Family Medicine

Michael J. Mahon, DO

Associate Professor of Dermatology

Kelvin Mai, DO

Assistant Professor of Internal Medicine

Mark B. Maine, MSHSA

Instructor of Health Professions Education

Lisa L. Majer, DO

Assistant Professor of Family Medicine/Sports

Medicine

Samuel A. Malayan, MD, PhD

Assistant Professor of Internal Medicine

Elva D. Maldonado, DDS

Assistant Professor of Dental Medicine

Chander Malhotra, MD

**Assistant Professor of Neurology** 

Barry D. Malina, DO

Assistant Professor of Family Medicine/ Osteopathic

Manipulative Medicine

Lori K. Malinbaum, DDS

Assistant Professor of Dental Medicine

Leon H. Malkin, MD

**Assistant Professor of Orthopedic Surgery** 

Kevin F. Mallery, DVM

Associate Professor of Veterinary Medicine

Jeremiah J. Maloney, DO

Assistant Professor of Anesthesiology

Ronald S. Mandel, DO

Assistant Professor of Family Medicine

Steven D. Maness, MD

Assistant Professor of Internal Medicine

John F. Manfredonia, DO

Assistant Professor of Family Medicine

Madonna A. Mangune, PA-C

Instructor of Physician Assistant Education

Stephen A. Mann, DO

Assistant Professor of Family Medicine

Andrew J. Manos, DO

Associate Professor of Family Medicine

Rudy R. Manthei, DO

Assistant Professor of Ophthalmology

Scott E. Manthei, DO

Assistant Professor of Surgery/ Otorhinolaryngology

Charles M. Maples, DO

Assistant Professor of Family Medicine

Shoaib U. Maqvi, MD

Assistant Professor of Internal Medicine

Calvin Marantz, MD

Associate Professor of Pathology

Michael J. Marcus, DPM

Assistant Professor of Podiatric Medicine & Surgery

Lawrence Marczak, DPM

Assistant Professor of Podiatric Medicine & Surgery

Dante E. Marinelli, MD

Associate Professor of Surgery/Urology

Michael G. Marino, DO

**Assistant Professor of Pediatrics** 

Kevin F. Mark, PharmD

**Assistant Professor of Pharmacy Practice** 

Thomas Logan Marker, MD

Assistant Professor of Internal Mediciine

Steven Marks, DO

Assistant Professor of Internal Medicine

Michael J. Marlowe, MD

**Assistant Professor of Pediatrics** 

Naushaba Marri, MD

Assistant Professor of Internal Medicine

David E. Marshburn, DO

Assistant Professor of Ophthalmology

Cynthia S. Marske, DO

Associate Professor of Internal Medicine

Michael J. Martelli, DO

Associate Professor of Family Medicine

Billy R. Martin, DPM

Instructor of Podiatric Medicine & Surgery

Gilbert I. Martin, MD

**Assistant Professor of Pediatrics** 

Katherine A. Martin, DO

Assistant Professor of Family Medicine

Richard K. Martin, DVM, DACVIM Professor of Veterinary Medicine

Timothy B. Martin, DO

Assistant Professor of Family Medicine

Kathryn Martinazzi, PharmD

Assistant Professor of Pharmacy Practice

Louis A. Martincheck, Jr., MD Instructor of Pediatrics

Jesse Martinez, PharmD

Associate Professor of Pharmacy Practice

Judy L. Marvin, MD

Assistant Professor of Obstetrics/Gynecology

Michael J. Marvinny, DO

Assistant Professor of Internal Medicine

Kevin T. Marx, PharmD

Assistant Professor of Pharmacy Practice

Laura K. Maskell, MD

Assistant Professor of Emergency Medicine

Behnam D. Massavand, DPM

Assistant Professor of Podiatric Medicine & Surgery

Michael J. Mastrangelo, MD Assistant Professor of Surgery

Aleyamma Mathew, MD

**Assistant Professor of Psychiatry** 

Stanley K. Mathis, DO

Assistant Professor of Internal Medicine

A. David Matian, DO

Assistant Professor of Family Medicine

James D. Matiko, MD

Associate Professor of Orthopedic Surgery

James M. Matsuba, PharmD

Assistant Professor of Pharmacy Practice

H. Preston Matthews, DO

Assistant Professor of Family Medicine

Robert J. Maurer, DO

Assistant Professor of Family Medicine & Pediatrics

Laura K. Mavity, MD

Assistant Professor of Internal Medicine

Liana M. Maxa, MD

Assistant Professor of Internal Medicine

Kenneth Maxwell, II, DO

Adjunct Assistant Professor of Internal

Medicine

Michael A. May, MD

**Assistant Professor of Psychiatry** 

Takiko M. May, MD

Assistant Professor of Internal Medicine

Todd J. May, DO

Assistant Professor of Family Medicine

Richard A. Mayer, MD

Assistant Professor of Internal Medicine/Infectious

Diseases

C. L. McArthur III, MD, MBA

Associate Professor of Emergency Medicine

D. Timothy McCarley, MD

Assistant Professor of Psychiatry

Douglas H. McConnell, MD

Associate Professor of Physician Assistant

Education

Melissa McCourt, BS, RPh

Assistant Professor of Pharmacy Practice

Reginald V. McCoy, MD

**Assistant Professor of Orthopedics** 

Ruth McCoy, PharmD

**Assistant Professor of Pharmacy Practice** 

Edward P. McDermott, DO

**Assistant Professor of Orthopedics** 

Julie S. McDonald, MS, PA-C

Assistant Professor of Physician Assistant

Education

Sharon S. McGarrity, DO

Assistant Professor of Family Medicine

Maj. Thomas A. McGerty, DO Assistant Professor of Pediatrics

Gregory G. McGowan, MD Assistant Professor of Psychiatry

Paul McHugh, DO

Assistant Professor of Family Medicine

Melissa A. McKinsey, DO

Assistant Professor of Internal Medicine

Kelly L. McKerahan, DO

Assistant Professor of Family Medicine

Ronald L. McKibben, PharmD

**Assistant Professor of Pharmacy Practice** 

Stephen B. McKinnon, DO

Assistant Professor of Emergency Medicine

Karen L. McLemore, PharmD

**Assistant Professor of Pharmacy Practice** 

Cori A. McMahon, PA-C, MSEd

Assistant Professor of Physician Assistant

Education

Matthew J. McMahon, DO

Assistant Professor of Internal Medicine/ Cardiology

Jennifer J. McPeek, DO Assistant Professor of OMM

Katrina M. McPherson, MD, MPH Assistant Professor of Pediatrics

Lance McQuillan, MD

Assistant Professor of Family Medicine

Lon McQuillan, MD, MS

**Assistant Professor of Pediatrics** 

John M. Medeiros, PhD, PT

**Assistant Professor of Orthopedic Surgery** 

Jerry G. Medley, PharmD

Assistant Professor of Pharmacy Practice

Arvind Mehta, MD

**Assistant Professor of Internal** 

Medicine/Nephrology

Manish Mehta, MD

Assistant Professor of Internal Medicine

Kenneth J. Meigs, DO

Assistant Professor of Family Medicine

Steven W. Melhorn, DO

Assistant Professor of Family Medicine

Susan Y. Melvin, DO

Professor of Family Medicine

Pierre Menard, PharmD

**Assistant Professor of Pharmacy Practice** 

Colleen L. Mendelsohn, DVM, DACVD

Associate Professor of Veterinary Medicine

James J. Mendola, DO

Professor of Surgery/Otorhinolaryngology

Ann Marie Mendoza, BSN, RN

**Assistant Professor of Graduate Nursing** 

Max Mener, MD

Assistant Professor of Emergency Medicine

Rosalinda Menoni, MD

Associate Professor of Surgery/Neurosurgery

Joseph R. Mercardante, Jr., DDS, MPH

Assistant Professor of Dental Medicine

Norman S. Merchant, MD

Associate Professor of Obstetrics/Gynecology

Michele B. Meredith, PharmD

Associate Professor of Pharmacy Practice

Nathaniel Meridor, PharmD

**Assistant Professor of Pharmacy Practice** 

Clifford D. Merkel, MD

Associate Professor of Orthopedic Surgery

Donna Merrigan, PharmD

**Assistant Professor of Pharmacy Practice** 

Michael K. Mesisca, DO, MS

Instructor of Emergency Medicine

John C. Messenger, MD

Associate Professor of Internal Medicine

Bill J. Metaxas, DPM

Assistant Professor of Podiatric Medicine & Surgery

Frank J. Metzger, DO

Professor of Internal Medicine

Laura E. Metzger, MD

Assistant Professor of Internal Medicine

Barry S. Meyer, DO

Assistant Professor of Internal Medicine

Jonathan M. Meyer, MD

**Assistant Professor of Psychiatry** 

Atif M. Mian, MD

Assistant Professor of Internal Medicine

Wafa F. Michael, MD

Assistant Professor of Pathology

Andrew D. Michaels, MD, MAS

Assistant Professor of Internal Medicine

Lazar Michaels, RN, MSN

Assistant Professor of Graduate Nursing

David E. Michalik, DO

**Assistant Professor of Pediatrics** 

Constantine A. Michas, MD, MPH Assistant Professor of Surgery

Rosemay Michel, DPM

Associate Professor of Podiatric Medicine & Surgery

Lauren Michelsen, DO

Assistant Professor of Obstetrics/Gynecology

Kevin M. Middleton, PhD

Adjunct Assistant Professor of Biomedical

Science

Mardi Mihranian, MD

Assistant Professor of Physician Assistant

Education

Nalga Mikail, BS, RPh

**Assistant Professor of Pharmacy Practice** 

Lisa E. Miklush, MSN

Assistant Professor of Graduate Nursing

Alexander Miller, MD

Assistant Professor of Dermatology

Benjamin A. Miller, DO

**Assistant Professor of Surgery** 

Debbie L. Miller, MD

Assistant Professor of Internal Medicine

Eden M. Miller, DO

Assistant Professor of Family Medicine

Gregg M. Miller, MD

Assistant Professor of Surgery

James McC. Miller, MD

**Assistant Professor of Pediatrics** 

Kevin M. Miller, DPM

Assistant Professor of Podiatric Medicine & Surgery

Kevin T. Miller, DO

Assistant Professor of Family Medicine

Scott A. Miller, MD

Assistant Professor of Emergency Medicine

Vanessa Miller, DrPH, MSN

**Assistant Professor of Graduate Nursing** 

Phil Millman, PharmD

Assistant Professor of Pharmacy Practice

Joseph L. Mills, MD

Professor of Podiatric Medicine & Surgery

Howard G. Milstein, MD

Assistant Professor of Dermatology

Thomas Minahan, Jr., DO

Associate Professor of Emergency Medicine

Yafa Minazad, DO

**Assistant Professor of Neurology** 

Mark S. Minkes, MD Professor of Surgery

Joseph F. Minore, MD

Assistant Professor of Internal Medicine

Marc A. Mintz, DO

**Associate Professor of Surgery** 

Rudolf Mireles, PharmD

Associate Professor of Pharmacy Practice

Roya Mirmiran, DPM

Assistant Professor of Podiatric Medicine & Surgery

James S. Miser, MD

**Assistant Professor of Pediatrics** 

John S. Missanelli, DO

Professor of Obstetrics/Gynecology

Krishan K. Mittal, DDS

Assistant Professor of Dental Medicine

David M Mitzner, DO

Assistant Professor of Family Medicine

Daniel E. Miulli, DO

Associate Professor of Surgery/Neurosurgery

Pamela A. Mizell, MSN, RN

**Assistant Professor of Graduate Nursing** 

Mike M. Moghadam, MD

Assistant Professor of Internal Medicine

Mohammad M. Mohammadi, DDS, MPH Assistant Professor of Dental Medicine

Krishna J. Mohan, MD

Assistant Professor of Internal Medicine

Uthara R. Mohan, MD

**Assistant Professor of Pediatrics** 

Vishnu Mohan, MD

Assistant Professor of Internal Medicine

Soroush Mohandessi, MD

**Assistant Professor of Psychiatry** 

Saeed Mokhayeri, DDS

Assistant Professor of Dental Medicine

Kira Molas-Torreblanca, DO Assistant Professor of Pediatrics

Eric M. Moll, MD

Assistant Professor of Emergency Medicine

Utpal Mondal, MD

Assistant Professor of Internal Medicine

Gary S. Mono, DO

**Assistant Professor of Surgery** 

Todd W. Monroe, MD

Assistant Professor of Family Medicine

Luis Montes, DO

**Assistant Professor of Pediatrics** 

Steven C. Monti, PharmD

Assistant Professor of Pharmacy Practice

Louis H. Monty, MD

**Assistant Professor of Psychiatry** 

Robert L. Moody, DO

Assistant Professor of Family Medicine

Eleanor B Moore, DVM

Assistant Professor of Veterinary Medicine

Randy L. Moore, DO

**Assistant Professor of Radiology** 

Richard E. Moreland, DVM

Professor of Veterinary Medicine

Cheryl L. Morell, MD

**Assistant Professor of Pediatrics** 

Cynthia Moreno, DO

Instructor of Osteopathic Manipulative

Medicine

Jorge L. Moreno, DO

Assistant Professor of Osteopathic

Manipulative Medicine

Roberto Moreno, MD

Assistant Professor of Psychiatry

Bryan L. Morett, DVM

Assistant Professor of Veterinary Medicine

Jack Morgan, DPM

**Assistant Professor of Surgery** 

Oliver David E. Morgan, VMD

Assistant Professor of Veterinary Medicine

Megumi Morishita, MD

Instructor of Obstetrics/Gynecology

James R. Morris, MD

Assistant Professor of Family Medicine

Prudy D. Morris, PharmD

Assistant Professor of Pharmacy Practice

Ronald R. Morris, MD

Assistant Professor of Family Medicine

William D. Morris, MD

Assistant Professor of Emergency Medicine

James A. Morrow, DO

Assistant Professor of Family Medicine

Jeffrey W. Morse, MD

Assistant Professor of Emergency Medicine

Glynnis M. Morton, MD

Assistant Professor of Obstetrics/Gynecology

Rana Moshake, DDS, DMD

Assistant Professor of Dental Medicine

Charles Allen Moss, MD

Assistant Professor of Family Medicine

Jeffrey D. Moss, DVM

Assistant Professor of Veterinary Medicine

Robert R. Moss, MD

**Assistant Professor of Surgery** 

Jocelyn Mott, DVM, DACVIM

Associate Professor of Veterinary Medicine

Bassam Mouazzen, MD

Assistant Professor of Internal Medicine

Angela K. Moultrie-Lizana, DO

Assistant Professor of Family Medicine

Farzana Moulvi, MD

**Assistant Professor of Pediatrics** 

Michelle J. Mouri, DO

Instructor of Emergency Medicine

Mohamed Moussa, MBBCh, MSc, OD Assistant Professor of Optometry

Muhammad R. Mowjood, MD

Assistant Professor of Family Medicine

Mahmooh S. Mozaffari, DMD, PhD

Adjunct Assistant Professor of Dental Medicine

Everett J. Mozell, MD

**Assistant Professor of Surgery** 

John D. Mozena, DPM

Associate Professor of Podiatric Medicine & Surgery

M. Kenneth Mudge, MB, ChB Professor of Orthopedics

Sharon K. Muenchow, MD

Assistant Professor of Surgery/Pediatrics

Talal R. Muhtaseb, MD

Associate Professor of Obstetrics/Gynecology

Moses T. Mukai Jr., DO

Assistant Professor of Obstetrics/Gynecology

Gerit D. Mulder, DPM, MS

Professor of Podiatric Medicine & Surgery

Daniel D. Mulkey, MD

Assistant Professor of Internal Medicine

Jonah N. Mullens, DPM

Assistant Professor of Podiatric Medicine & Surgery

Pramod Multani, MD

Assistant Professor of Internal Medicine/ Cardiology

David R. Munoz, MD, MPH

Assistant Professor of Internal Medicine

Mauricio Munoz, PharmD

Assistant Professor of Pharmacy Practice

Wadsworth H. Murad, DO

Associate Professor of Psychiatry

Vellore G. Muraligopal, MD

**Associate Professor of Pediatrics** 

John Lamont Murdoch, MD Professor of Internal Medicine

Brooke V. Murphy, DVM

Instructor of Veterinary Medicine

J. Geoffrey Murray, DDS

Assistant Professor of Dental Medicine

Robert J. Murtaugh, DVM, MS Professor of Veterinary Medicine

Vincent J. Muscarella, DPM

Associate Professor of Podiatric Medicine & Surgery

Dennis Muscato, MS

Adjunct Instructor of Social Medicine & Healthcare Leadership

Louise A. Muscato, PhD

Adjunct Assistant Professor of Social Medicine & Healthcare Leadership

Lori A. Musto, DO

Instructor of Family Medicine

David G. M. Myers, DO Assistant Professor of OMM

Toshio Nagamoto, MD Assistant Professor of Surgery

Hari Nagaraj, MD

Assistant Professor of Internal Medicine

Ronald E. Nagata Jr, PharmD

Assistant Professor of Pharmacy Practice

Ohnn Nahm, MD

Assistant Professor of Internal Medicine

Mohan S. Nair, MD Professor of Psychiatry

Rajan V. Nair, MD

**Assistant Professor of Surgery** 

Michael T. Nakamura, PharmD

Associate Professor of Pharmacy Practice

Stephanie Nakata, MSN, RN

**Assistant Professor of Graduate Nursing** 

Tom Nakatsuchi, PharmD

**Assistant Professor of Pharmacy Practice** 

Arsen Nalbandyan, DO

**Assistant Professor of Osteopathic** 

Manipulative Medicine

G. Nalinajith Nanayakkara, MD

Assistant Professor of Obstetrics/Gynecology

Rajnikanth "Raj" Narayanan, MD Assistant Professor of Internal Medicine

Hani A. Nasr, DDS

Assistant Professor of Dental Medicine

Moses S. Nasser, DO

Assistant Professor of Family Medicine

Avantika Nath, DDS

Assistant Professor of Dental Medicine

Michael Nathanson, MD

Associate Professor of Surgery/Cardiovascular

Surgery

Fareha A. Nawaz, MD

Assistant Professor of Internal Medicine

Arlette Nazarians, PharmD

Assistant Professor of Pharmacy Practice

Gwynneth G. Neace, DO

**Assistant Professor of Pediatrics** 

Luana Nedita, MD

Assistant Professor of Internal Medicine

Christopher Nee, PharmD, MBA

Assistant Professor of Pharmacy Practice

Michael Neeki, DO, MS

Assistant Professor of Emergency Medicine

John B. Neeld, MD

Assistant Professor of Obstetrics/Gynecology

Katherine M. Neiderer, DPM, MPH

Assistant Professor of Podiatric Medicine & Surgery

J. Michael Nelson, DO

Assistant Professor of Emergency Medicine

Perry V. Nelson, MD

Assistant Professor of Internal Medicine

Robert G. Nelson, MD

Assistant Professor of Family Medicine

Janis F. Neuman, MD

Assistant Professor of Family Medicine

Natalie A. Nevins, DO, MS

Associate Professor of Family Medicine/OMM

Stephen R. Newman, MD Assistant Professor of Surgery

William E. Newsome, MD

Associate Professor of Internal Medicine

Heide Newton, DVM, JD, DACVD

Assistant Professor of Veterinary Medicine

Kendrick Ng, DO

Instructor of Internal Medicine

Kimmy D. Ngo, PharmD

**Assistant Professor of Pharmacy Practice** 

William L. Ngo, DO

Assistant Professor of Family Medicine

Aaron L. Nguyen, MD

**Assistant Professor of Surgery** 

Anh Ngoc Nguyen, MD

Assistant Professor of Emergency Medicine

Brigitte Nguyen, PharmD

**Assistant Professor of Pharmacy Practice** 

Chidao L. Nguyen, DO, MS

Assistant Professor of Internal Medicine

Dana Huong Nguyen, PharmD

Assistant Professor of Pharmacy Practice

Eriq F-Q Nguyen, DDS

Assistant Professor of Dental Medicine

Giang C. Nguyen, PharmD

**Assistant Professor of Pharmacy Practice** 

Hienvu C. Nguyen, DPM

Assistant Professor of Podiatric Medicine & Surgery

Hieu T. M. Nguyen, DO

Instructor of Family Medicine

Hoang N. Nguyen, DPM

Assistant Professor of Podiatric Medicine & Surgery

Hung H. Nguyen, MD

Instructor of Internal Medicine

Huy A. Nguyen, DO

Assistant Professor of Family Medicine

Ken T. Nguyen, PharmD

**Assistant Professor of Pharmacy Practice** 

Khiem Thanh Nguyen, PharmD

Assistant Professor of Pharmacy Practice

Lan-Phuong Nguyen, PharmD

**Assistant Professor of Pharmacy Practice** 

Leigh-Anh Nguyen, PharmD

Assistant Professor of Pharmacy Practice

Linda T. Nguyen, PharmD

Assistant Professor of Pharmacy Practice

Loan P. Nguyen, DO

Assistant Professor of Neurology

Nga My Teresa Nguyen, PharmD

**Assistant Professor of Pharmacy Practice** 

Ngoc M. Nguyen, PharmD

Assistant Professor of Pharmacy Practice

Nhut M. Nguyen, BSc, RPh

**Assistant Professor of Pharmacy Practice** 

Phong K. Nguyen, MD

Assistant Professor of Physician Assistant

Education

Phoungdung T. Nguyen, PharmD

Assistant Professor of Pharmacy Practice

Phu Thien Nguyen, DO

Assistant Professor of Obstetrics/Gynecology

Phuong Nguyen, PharmD

Assistant Professor of Pharmacy Practice

Thanh Thuy N. Nguyen, PharmD

Assistant Professor of Pharmacy Practice

Trinh T. Nguyen, PharmD

Assistant Professor of Pharmacy Practice

Tuan Nguyen, MD

Assistant Professor of Internal Medicine

William N. Nguyen, MD

**Assistant Professor of Pathology** 

Y. Thanh D. Nguyen, MD

Assistant Professor of Internal Medicine

Karen J. Nichols, DO

Associate Professor of Internal Medicine

Peter J. Niciforos, MD

Assistant Professor of Family Medicine

Adam T. Nickel, DO

Instructor of Obstetrics/Gynecology

Gary W. Nickel, MD

Assistant Professor of Obstetrics/Gynecology

Angelica M. Nieto, DDS

Assistant Professor of Dental Medicine

Bijan Nikakhtar, MD

Professor of Internal Medicine

David J. Ninan, DO

Associate Professor of Anesthesiology

Reid A. Nishikawa, PharmD

**Assistant Professor of Pharmacy Practice** 

Gary J. Nishioka, MD, DMD Assistant Professor of Surgery

Kristi A. Nix, MD

**Assistant Professor of Pediatrics** 

Standley T. Nomura, PharmD

Assistant Professor of Pharmacy Practice

James W. Norcross, DO

Assistant Professor of Family Medicine

Robert E. Norcross, MD

**Associate Professor of Surgery** 

John M. Norian, MD, MA

Assistant Professor of Obstetrics/Gynecology

Suzanne E. Norman, DO

Assistant Professor of Family Medicine

Gary A. Norsworthy, DVM

**Professor of Veterinary Medicine** 

Eric M. North, MD

Assistant Professor of Family Medicine

Phoenix S. North, MD

Assistant Professor of Family Medicine

Jeffrey C. Northup, DO

Associate Professor of Obstetrics/Gynecology

Robert G. Novich, MD

**Assistant Professor of Psychiatry** 

Cameron Nouri, MD

Assistant Professor of Emergency Medicine

Maureen A. Nuccio, MD

Associate Professor of Internal Medicine

William H. Nuesse, MD

Assistant Professor of Family Medicine

Paul B. Nutter, MD

Assistant Professor of Physical Medicine &

Rehabilitation

Theodore T. Nyquist, MD

Assistant Professor of Family Medicine

Lawrence O'Connor, MD

Assistant Professor of Physician Assistant

Education

Chinyere N. Obasi, MD

Instructor of Surgery/Neurosurgery

Zaida Olivia Obeso, MD

Associate Professor of Family Medicine

Udoh O. Obioha, MD

Assistant Professor of Emergency Medicine

Clark G. Ochikubo, MD

**Assistant Professor of Pediatrics** 

Christine M Perry Ockerman, DO, MS

Assistant Professor of Emergency Medicine

Cynthia Odegard, PharmD

Assistant Professor of Pharmacy Practice

Gary Ogawa, PharmD

Assistant Professor of Pharmacy Practice

Lesley J. Ogden, MD

Assistant Professor of Emergency Medicine

Walter L. Ogden, MD

Associate Professor of Physician Assistant

Education

Anthony Oh, MD

Assistant Professor of Surgery/Oncology

Daniel S. Oh, MD

**Assistant Professor of Surgery** 

Razmik Ohanjanian, MD

Assistant Professor of Internal Medicine

Ikechukwu Ohiaeri, MD

**Assistant Professor of Psychiatry** 

Sushil K. Ojha, MD

Assistant Professor of Internal Medicine/

Gastroenterology

Philomena Okeke, BSN, RN Instructor of Graduate Nursing

Erling J. Oksenholt, DO

Professor of Emergency Medicine

Robert L. Oksenholt, DO

Assistant Professor of Internal Medicine

Michael J. Olek, DO Instructor of Neurology

Gisella V. Olivares, DO

Assistant Professor of Family Medicine

Joseph L. Olivarez, PA-C

Instructor of Physician Assistant Education

Lawrence M. Oloff, DPM

Professor of Podiatric Medicine & Surgery

Daniel Olson, DO

Assistant Professor of Family Medicine

Robert W. Olson, DO

Assistant Professor of Internal Medicine/ Cardiology

Shannon R. Olson, DMD

**Assistant Professor of Dental Medicine** 

Robert M. O'Malley, MD

Assistant Professor of Internal Medicine

Jeff D. Ondrak, DVM

Associate Professor of Veterinary Medicine

Gilbert N. Ondusko, MD

Assistant Professor of Emergency Medicine

JoAnn F. O'Neill, BSN

Instructor of Graduate Nursing

Glenn Ong-Veloso, DDS

Assistant Professor of Dental Medicine

Edward Onuma, MD

Assistant Professor of Internal Medicine/

Gastroenterology

Maung M. Oo, MD

Assistant Professor of Internal Medicine

James C. Opton, MD

Assistant Professor of Anesthesiology

Victor A. Oranusi, MD

Assistant Professor of Internal Medicine

William J. Origer, MD

Assistant Professor of Family Medicine

Gwendelyn S. Orozco, MSN

Assistant Professor of Graduate Nursing

Cathleen J. Ortiz, PharmD

**Assistant Professor of Pharmacy Practice** 

Julio C. Ortiz, DPM

Instructor of Podiatric Medicine & Surgery

D. Dean Orton, MD

Assistant Professor of Emergency Medicine

Eric T. Ory, MD

Assistant Professor of Emergency Medicine

Stephen E. Osburn, MD

**Assistant Professor of Pediatrics** 

Michael K. O'Shea, DPM

Assistant Professor of Podiatric Medicine &

Surgery

Henry A. Oster, MD, JD

Assistant Professor of Internal Medicine

Lauren O'Sullivan, DO

Assistant Professor of Obstetrics/Gynecology

Edward J. Ottenheimer III, MD

Assistant Professor of Internal Medicine

Honzen Ou, MD

**Assistant Professor of Surgery** 

Laura M. Ouellette, MD

Assistant Professor of Family Medicine

Bruce A. Ourieff, MD

Assistant Professor of Internal Medicine

Glenda S. Owens, PharmD, MS

Associate Professor of Pharmacy Practice

Mark P. Owens, MD

**Associate Professor of Surgery** 

Kevin M. Owyang, MD

Adjunct Assistant Professor of Physical

Therapy Education

Juan Rodrigo Oyarzun, MD Assistant Professor of Surgery

Olusola Oyemade, MD

**Assistant Professor of Pediatrics** 

Robert Pachorek, PharmD

**Assistant Professor of Pharmacy Practice** 

Louis G. Pack, DPM, MS

Assistant Professor of Podiatric Medicine & Surgery

Edward E. Packer, DO

Associate Professor of Pediatrics

Jeffrey Packer, DO

Associate Professor of Internal Medicine/

Nephrology

James A. Padova, MD

Assistant Professor of Internal Medicine

Paul J. Padova, DO

Instructor of Anesthesiology

Neil M. Paige, MD

Associate Professor of Podiatric Medicine &

Surgery

Nazifa Paillet, MSN, RN

**Assistant Professor of Graduate Nursing** 

John C. Pak, PharmD

**Assistant Professor of Pharmacy Practice** 

Bhanu P. Paladugu, MD

Assistant Professor of Internal Medicine

Joseph T. Palermo Jr., DO

Associate Professor of Internal Medicine

Yogesh K. Paliwal, MD

Associate Professor of Physician Assistant

Education

Ronald M. Palm, DO

Assistant Professor of Family Medicine

Jeffrey S. Palmgren, MD Assistant Professor of Surgery

Nyda H.C. Pamintuan, MD

Assistant Professor of Emergency Medicine

Shi-Hui Pan, PharmD, MS

Assistant Professor of Pharmacy Practice

Aditi Panchal, DPM

Assistant Professor of Podiatric Medicine & Surgery

Therese J. Parado, DDS

Assistant Professor of Dental Medicine

George C. Parides, DO

Assistant Professor of Internal Medicine/ Pulmonary

Diseases

Heran Angela Park, MD

**Assistant Professor of Pediatrics** 

James Park, DO

Assistant Professor of Neurology

Jin S. Park, MD

Assistant Professor of Internal Medicine

Robert E. Park, MD

Assistant Professor of Internal Medicine

Samuel Kyung Uk Park, MD

Assistant Professor of Family Medicine

Dennis R. Parker, DO

Assistant Professor of Family Medicine

Hugh M. Parker, MD

Assistant Professor of Internal Medicine

Richard A. Parker, DO

Associate Professor of Family Medicine/Sports

Medicine

David M. Parrack, DO

Assistant Professor of Surgery/Urology

Anjana Patel, PharmD

**Assistant Professor of Pharmacy Practice** 

Hemali P. Patel, MD

Instructor of Internal Medicine

Hiral L. Patel, DO

Assistant Professor of Anesthesiology

Ketan S. Patel, PharmD, MS

**Assistant Professor of Pharmacy Practice** 

Komal A. Patel, PharmD

Assistant Professor of Pharmacy Practice

Neemish N. Patel, PharmD

**Assistant Professor of Pharmacy Practice** 

Neil M. Patel, PhD

Adjunct Assistant Professor of Social Medicine

& Healthcare Leadership

Nirmal L. Patel, BS, RPh

Assistant Professor of Pharmacy Practice

Pratima V. Patel, PharmD

Assistant Professor of Pharmacy Practice

Raju Patel, DO

Assistant Professor of Internal Medicine

Sharmila R. Patel, MD

Assistant Professor of Internal Medicine

Vinod Patel, MD

Assistant Professor of Internal Medicine

Shawn T. Patrick, MD

Assistant Professor of Internal Medicine

David K. Patterson, MD

**Assistant Professor of Surgery** 

Marilyn E. Pattison, MD

Assistant Professor of Internal Medicine

Mark A. Patton, DO

Assistant Professor of Family Medicine

Steven J. Paulissen, MD

Assistant Professor of Internal Medicine

Michael Pavlovich, PharmD

Assistant Professor of Pharmacy Practice

Pierre V. Pavot, DO

Instructor of Neurology

Parisa Payman, DDS

Assistant Professor of Dental Medicine

Keith Payne, MS, PA-C

Assistant Professor of Physician Assistant

Education

Nicholas Charles Pazzi, DO

Assistant Professor of Family Medicine

Garrett H. Peard, MD

Assistant Professor of Internal Medicine

Jeffrey K. Pearson, DO

Assistant Professor of Family Medicine

Jill Pearson, MD

**Assistant Professor of Pediatrics** 

Gregory A. Pecchia, DO

Assistant Professor of Family Medicine

David J. Peck, DO

Assistant Professor of Family Medicine

Charles L. Pederson, MD, MPH

Assistant Professor of Occupational and

**Environmental Medicine** 

William D. Peffley, DO

Assistant Professor of Family Medicine

Christopher C. Peine, DO Assistant Professor of OMM

Jorge A. Pena, MD

Instructor of Internal Medicine

Amy H. Peng, PharmD

Assistant Professor of Pharmacy Practice

Dana A. Penner, MD

**Assistant Professor of Surgery** 

Donald W. Pennington, DO Assistant Professor of Surgery

Troy Pennington, DO, MS

Associate Professor of Emergency Medicine

Lydia Percy, PharmD

**Assistant Professor of Pharmacy Practice** 

Jorge F. Perez, MD

Assistant Professor of Emergency Medicine

Luis Jesus Mejia Perez, MD

Assistant Professor of Physician Assistant

Education

Mario L. Perez, DO

Assistant Professor of Internal Medicine

Jonathan E. Perley, MD

Assistant Professor of Surgery/Urology

Monica Perlman, MD, MPH

Associate Professor of Physician Assistant

Education

Rebecca L. Perlow, DO

Assistant Professor of Obstetrics/Gynecology

Kathryn A. Perry, DO

Assistant Professor of OMM

John G. Persichino, DO

Assistant Professor of Internal Medicine

Michele S. Person-Toomoth, DVM Instructor of Veterinary Medicine

Jamie S. Peter, PharmD

Assistant Professor of Pharmacy Practice

Sarah M. Peters, MD

Assistant Professor of Family Medicine

Timothy R. Peters, MD

Assistant Professor of Family Medicine

Arnold L. Petersen II, MD

Assistant Professor of Obstetrics/Gynecology

Ryan J. Petersen, MD

Assistant Professor of Emergency Medicine

Christian M. Peterson, DO Assistant Professor of Surgery

Patricia E. Peterson, MD

Assistant Professor of Obstetrics/Gynecology

Robert G. Peterson, MD

Assistant Professor of Family Medicine

Warren A. Peterson, DO

Assistant Professor of Dermatology

Russell S. Petrie, MD

Assistant Professor of Physician Assistant

Education

Sara D. Petry, MD

Assistant Professor of Psychiatry

Beverly Pettit, PharmD

Assistant Professor of Pharmacy Practice

John Pettit, MD

**Assistant Professor of Surgery** 

William J. Pevsner, DO

Assistant Professor of Family Medicine

Gurpal S. Phaguda, MD, MBA

Assistant Professor of Family Medicine

Andy D. Pham, PharmD

**Assistant Professor of Pharmacy Practice** 

Felix M. Pham, PharmD

Assistant Professor of Pharmacy Practice

John T. Pham, DO

Associate Professor of Family Medicine

Mino T. Pham, MD

Assistant Professor of Family Medicine

Sheri A. Pham, MD

Assistant Professor of Internal Medicine

Si V. Pham, PharmD

Assistant Professor of Pharmacy Practice

Vanthy B. Pham, PharmD

Assistant Professor of Pharmacy Practice

Castor C. Phan, PharmD

Instructor of Pharmacy Practice

Hai Phan, MD

Assistant Professor of Internal Medicine/ Nephrology

Anna Maria M. Phelps, MD Assistant Professor of Pathology

Craig M. Phelps, DO

Associate Professor of Family Medicine/Sports Medicine

John R. Phelps, MD

**Assistant Professor of Psychiatry** 

Ronald J. Philipp, DO

Associate Professor of Family Medicine

Brenda S. Phillips, DVM, DACVIM Professor of Veterinary Medicine

Jason L. Phillips, MD

Assistant Professor of Internal Medicine

Mitchel E. Phillips, DO, MS

Assistant Professor of Family Medicine

Wendell B. Phillips, DO

Assistant Professor of Family Medicine

Theresa Phung, PharmD

Assistant Professor of Pharmacy Practice

John R. Piconi, MD

Assistant Professor of Surgery/Urology

Allyn M. Pierce, DO

Professor of Obstetrics/Gynecology

Harry A. Pierce, DO

Associate Professor of Internal Medicine

William C. Pierce, MD, PhD

Assistant Professor of Internal Medicine

Remy A. Piibe, MD

Assistant Professor of Emergency Medicine

Sindu Pillai, MD

**Assistant Professor of Pediatrics** 

Elmer B. Pineda, DO

Assistant Professor of Surgery/ Urology

Gregorio S. Pineda, MD

Assistant Professor of Neurology

Gary R. Pingrey, DO

Assistant Professor of Family Medicine

Ronald E. Pinkerton, MD Professor of Family Medicine

Lynne B. Pirie, DO

Assistant Professor of Family Medicine/Sports

Medicine

Richard T. Pitts, DO

Associate Professor of Emergency Medicine

Carl A. Pizzuti, DDS

Assistant Professor of Dental Medicine

John G. Pladel, MSN, RN, PMHNP

Instructor of Psychiatry

Donald W. Plance, DO

Assistant Professor of Family Medicine

Carmelo A. Plateroti, DO

Assistant Professor of Dermatology

Leslie A. Pliskin, MD

Assistant Professor of Emergency Medicine

Carl A. Plonsky, MD

**Assistant Professor of Pediatrics** 

Yvonne Plowman, PharmD

**Assistant Professor of Pharmacy Practice** 

Luga Podesta, MD

Assistant Professor of Physical Medicine &

Rehabilitation

Adrianna E. Pollak-Lazzaro, DO, MPH Assistant Professor of Family Medicine

Panit Pollavith, PharmD

**Assistant Professor of Pharmacy Practice** 

Jennifer Polley, MD

**Assistant Professor of Pediatrics** 

Robert J. Ponec, MD

Assistant Professor of Internal Medicine

Robert Lee Poole, PharmD Professor of Pharmacy Practice

M. Jay Porcelli, DO, MS Professor of Family Medicine

Gregson J. Porteous, DO

Assistant Professor of Anesthesiology

Stuart Brent Porter, DO

Assistant Professor of Family Medicine

Steven C. Posson, DO

Assistant Professor of Family Medicine

Jay H. Post, MD

Assistant Professor of Radiology

Michael L. Potter, MD

Assistant Professor of Family Medicine

Larry Potts, MD

Assistant Professor of Emergency Medicine

Matthew E. Potts, MD

Assistant Professor of Emergency Medicine

David Pougatsch, DPM

Instructor of Podiatric Medicine & Surgery

Michael A. Pousti, MD

Assistant Professor of Surgery/Plastic and

Reconstructive

Michael J. Powell, DO

Associate Professor of Internal Medicine/

Rheumatology

Timothy J. Powell, MD

Assistant Professor of Family Medicine

Vance M. Powell, DO

Assistant Professor of Obstetrics/Gynecology

Brett C. Powers, DO

**Assistant Professor of Surgery** 

Venu Prabaker, MD

Associate Professor of Internal Medicine

Venugopal Prabaker, MD

Associate Professor of Internal Medicine

Arudi L. Prabhakar, MD

**Assistant Professor of Surgery** 

Preethi Prakash, MD

Assistant Professor of Internal Medicine

James S. Pratty, MD

**Assistant Professor of Psychiatry** 

Janet Prendergast, DO

Assistant Professor of Family Medicine

William J. Previte, DO

Assistant Professor of Surgery/ Orthopedics/Sports Medicine

Lauren A. Prewitt, DO

Adjunct Instructor of Obstetrics/Gynecology

Todd O. Primack, DO

Associate Professor of Anesthesiology

Charles Edward Pritchard Jr., DO Assistant Professor of Pediatrics

James L. Proffitt, MD

Instructor of Internal Medicine

Claude F. Provance, BS, RPh

Assistant Professor of Pharmacy Practice

Peter R Przekop, DO, PhD

Associate Professor of Internal Medicine

Victor I. Pulido, DO

Assistant Professor of Family Medicine

Philip Pumerantz, PhD

Adjunct Professor of Medical Humanities

Mark Purnell, MD

Assistant Professor of Surgery/Orthopedics

Lakshmi K. Puvvula, MD

Assistant Professor of Internal Medicine

Talia Puzantian, PharmD

Associate Professor of Pharmacy Practice

Paul A. Pyka, DO

Associate Professor of Obstetrics/Gynecology

Faisal M. Qazi, DO

**Assistant Professor of Neurology** 

Dany K. M. Quan, DO

Assistant Professor of Emergency Medicine

John F. Quinn, MD

Assistant Professor of Family Medicine

David C. Rabinowitz, DO

Professor of Internal Medicine/Pulmonary

Medicine

Richard L. Ragle, DO

Assistant Professor of Family Medicine

Noor Rahimi, DDS

Assistant Professor of Dental Medicine

Swapnil P. Rajurkar, MD

Assistant Professor of Internal Medicine

Stephen R. Rakower, MD Associate Professor of Surgery

Juan Ramirez, PhD

Adjunct Assistant Professor of Social Medicine

& Healthcare Leadership

Neill D. Ramos, MD

**Assistant Professor of Pharmacy Practice** 

Laura T. Rampil, DO

Assistant Professor of Family Medicine

Cameron A. Ramsay, MD

Assistant Professor of Internal Medicine

John F. Randolph, MD

Associate Professor of Family Medicine

Kambiz Raoufi, MD

Assistant Professor of Internal Medicine

Kevin B Rapeport, MD

Assistant Professor of Internal Medicine

Lawrence D. Raphael, MD

Associate Professor of Internal Medicine

Anna Rashidi, PharmD

**Assistant Professor of Pharmacy Practice** 

Masoud Rashidi, PharmD

**Assistant Professor of Pharmacy Practice** 

Wendy Rashidi, MD

Assistant Professor of Family Medicine

Damon B. Raskin, MD

Assistant Professor of Internal Medicine

Yelena Raskina, PharmD

Assistant Professor of Pharmacy Practice

Michelle A. Rasmussen, MD

Assistant Professor of Family Medicine

Edmond Rassivi, DMD

Assistant Professor of Dental Medicine

Bharat Rattan, MD, MPH

Assistant Professor of Internal Medicine

Hugo F. Rauld, MD

Assistant Professor of Obstetrics/Gynecology

Niren A. Raval, DO

Assistant Professor of Family Medicine

Marie A. Ray, MD

**Assistant Professor of Surgery** 

Bilal R. Rayes, MD

Assistant Professor of Internal Medicine

Simon Rayhanabad, MD

Assistant Professor of Physician Assistant

Education

Constanze S. Rayhrer, MD, MA Assistant Professor of Surgery\

Robert A. Read, MD, PhD Assistant Professor of Surgery

Miriam L. Reaves, MD

Assistant Professor of Family Medicine

Hanne Rechtschaffen, DO

Assistant Professor of Family Medicine

Carl A. Recine, MD

Assistant Professor of Radiology

Omar A. Reda, MD

**Assistant Professor of Psychiatry** 

Joe W. Redd, DO

Assistant Professor of Family Medicine

V. Gopikrishna Reddy, MD Instructor of Internal Medicine

Steven J. Redmond, MD

Assistant Professor of Internal Medicine

Lily A. Reed, MSN, FNP

Adjunct Assistant Professor of Graduate

Nursing

Lynda Reed, MSN, FNP

Instructor of Graduate Nursing

Mark T. Reeves, DPM

Assistant Professor of Podiatric Medicine & Surgery

Kay M. Reichlin, MD

**Assistant Professor of Psychiatry** 

Paul R. Reiman, MD

Assistant Professor of Physician Assistant

Education

Steven Reiner, MD

Adjunct Assistant Professor of Family

Medicine

Debi L. Reissman, PharmD

**Assistant Professor of Pharmacy Practice** 

Brooke D. Renard, MD

Assistant Professor of Obstetrics/Gynecology

Matthew D. Renner, MD, MS Instructor of Obstetrics/Gynecology

Mark D. Repoleg, MD

**Assistant Professor of Neurology** 

Rosemarie C.P. Reyes, DMD

Assistant Professor of Dental Medicine

Alvaro E. Rey-Rosa, MD

**Assistant Professor of Pediatrics** 

Kaveh Rezvan, DO

Assistant Professor of Internal Medicine

Farhad Rezvani, MD

Assistant Professor of Internal Medicine

David E. Rhodes, MD

Assistant Professor of Family Medicine

William A. Rhodes, DO

Assistant Professor of Family Medicine

Terence P. Rhone, DO

Assistant Professor of Internal Medicine

Emmett Lee Rice, DO

Professor of Family Medicine

Randy R. Richardson, MD

Assistant Professor of Radiology

Robin (Rob) L. Richardson, DO

Assistant Professor of Family Medicine

Peter L. Richel, MD

Instructor of Pediatrics

Douglas H. Richie, Jr., DPM

Associate Professor of Podiatric Medicine & Surgery

Joel S. Richmon, MD

Assistant Professor of Neurology

Keith P. Richter, DVM, DACVIM

Professor of Veterinary Medicine

James S. Rickards, MD

Assistant Professor of Radiology

Barry H. Rickman, VMD, PhD, DAVCP

Associate Professor of Veterinary Medicine

Jerome B. Riebman, MD Associate Professor of Surgery

Jeffrey D. Ries, DO Professor of Neurology

James D. Rifenbery, MD Assistant Professor of Surgery

Brendan M. Riley, DPM

Assistant Professor of Podiatric Medicine & Surgery

James B. Ringstrom, DPM

Assistant Professor of Podiatric Medicine & Surgery

Diana B. Rinkevich, MD

Assistant Professor of Internal Medicine

Donna Rios, BS, PA-C, RN

Instructor of Physician Assistant Education

Wesley E. Rippey, MD

**Assistant Professor of Surgery** 

J. Trees Ritter, DO

Assistant Professor of Internal Medicine

Susan L. Ritter, BS, RPh

**Assistant Professor of Pharmacy Practice** 

James C. Ritzenthaler, MD Instructor of Internal Medicine

Christine E. Rivers, DO

**Assistant Professor of Pediatrics** 

Albert Rizos, PharmD

Assistant Professor of Pharmacy Practice

Syed Arif Ali Rizvi, MD

Assistant Professor of Internal Medicine

Andrea A. Roberson, DO

Assistant Professor of Family Medicine

Natalie Roberts, DO

Assistant Professor of Internal Medicine

Donald P. Robertson, DO

Assistant Professor of Family Medicine

Mark S. Robertson, DO Assistant Professor of Surgery Brad E. Robinson, MD, MPH

Assistant Professor of Internal Medicine

Gregory E. Robinson, MD
Instructor of Internal Medicine

Jerome A. Robinson, MD

Instructor of Internal Medicine/Cardiology

Mark I. Robinson, MD

Assistant Professor of Internal Medicine/

Pulmonology

Robert Robitaille, DO

Assistant Professor of Family Medicine

Tari L. Roche, DO

Assistant Professor of Family Medicine

Patricia R. Rochette, DO Assistant Professor of OMM

Arturo Rodrigues, PA-C

Instructor of Physician Assistant Education

Jose L. Rodriguez, MD

**Assistant Professor of Surgery** 

Michael J. Rodriguez, MD

**Professor of Surgery** 

Katherine K. Roe-Choi, PharmD

Associate Professor of Pharmacy Practice

Ancel J. Rogers, MD

**Associate Professor of Surgery** 

Lee C. Rogers, DPM

Assistant Professor of Podiatric Medicine &

Surgery

Michael L. Rohrenback, DO

Assistant Professor of Family Medicine

Lorenzo Romney, DO

Assistant Professor of Family Medicine

Andrew J. Rooks, MD

**Professor of Psychiatry** 

Drago A. Rose, MD

**Assistant Professor of Psychiatry** 

Lauren H. Rose, MD

**Assistant Professor of Pediatrics** 

Marc R. Rose, MD

Assistant Professor of Surgery/Ophthalmology

Michael R. Rose, MD

Assistant Professor of Surgery/Ophthalmology

Michelle Y. Rose, PharmD

Assistant Professor of Pharmacy Practice

Mark E. Rosen, DO

Assistant Professor of Family Medicine

Marvin Rosen, MD

Assistant Professor of Family Medicine

David S. Rosenberg, MD

Assistant Professor of Podiatric Medicine & Surgery

Joshua M. Rosenberg, DO

Assistant Professor of Internal Medicine

Mona P. Rosenberg, DVM, DACVIM Professor of Veterinary Medicine

Barry S. Rosenblum, DO

Assistant Professor of Family Medicine

Wayne S. Rosenkrantz, DVM, DACVD Professor of Veterinary Medicine

Alan S. Rosenthal, DO

Professor of Internal Medicine

Arnold S. Ross, DPM, MS

Assistant Professor of Podiatric Medicine & Surgery

Charles S. Ross, DO

Associate Professor of Family Medicine

Dan Ross, PharmD

Adjunct Associate Professor of Pharmacy

Practice

Donald A. Ross, MD

**Assistant Professor of Surgery** 

Melvyn B. Ross, MD

Assistant Professor of Internal Medicine/ Cardiology

Phyllis M. Ross, PA-C

Instructor of Physician Assistant Education

Joseph J. Rossini, DO

Assistant Professor of Family Medicine

Julie A. Roth, DO

Assistant Professor of Family Medicine

Timothy J. Roth, DO

Assistant Professor of Family Medicine

Edward H. Rothberger, MD

Assistant Professor of Internal Medicine

Gary M. Rothenberger, DPM

Assistant Professor of Podiatric Medicine & Surgery

Arthur O. Rott, DO

Professor of Internal Medicine

Thomas S. Roukis, DPM, PhD

Professor of Podiatric Medicine & Surgery

Leon Rovner, MD

Assistant Professor of Internal Medicine

Carl E. Rowe, PharmD

**Assistant Professor of Pharmacy Practice** 

Frederick Anderson Rowe, MD

Assistant Professor of Internal Medicine

Stuart C. Rubin, DMD

Assistant Professor of Dental Medicine

Horst R. Rudrich, DO

Assistant Professor of Family Medicine

Michael Rudolph, MD

Assistant Professor of Emergency Medicine

Paul P. Rudolph, DO

Assistant Professor of Family Medicine

Brad W. Ruetenik, DPM

Assistant Professor of Podiatric Medicine & Surgery

Alberto A. Rullan, DPM, MPA

Associate Professor of Podiatric Medicine & Surgery

Gary P. Rupp, DVM, MS, DACT Professor of Veterinary Medicine Lindsay H. Russell, DPM

Assistant Professor of Podiatric Medicine & Surgery

Steven Sackrin, MD

John T. Sacha, MD

Instructor of Physical Medicine & Rehabilitation

Joie D. Russo, DO

Assistant Professor of Obstetrics/Gynecology

oceven Sackini, ivib

Assistant Professor of Internal Medicine

Steven M. Ruths, MD

Assistant Professor of Psychiatry

Janssen D.-L. Sacro, PharmD

**Assistant Professor of Pharmacy Practice** 

Michael N. Rutman, DO

Assistant Professor of Internal Medicine

Gurbinder S. Sadana, MD

Assistant Professor of Internal Medicine

Charles P. Ryan, DVM

Associate Professor of Veterinary Medicine

Habib Sadeghi, DO

Instructor of Family Medicine

David M. Ryan, DO

Assistant Professor of Family Medicine

Jay J. Sadrieh, MD Instructor of Pediatrics

James A. Ryan, MD

**Assistant Professor of Orthopedic Surgery** 

Alfredo A. Sadun, MD, PhD

Associate Professor of Surgery/Ophthalmology

Michelle A. Ryan, MD

Assistant Professor of Internal Medicine

Vahagun Safarian, PharmD

Assistant Professor of Pharmacy Practice

Traci D. Ryan, MD

**Assistant Professor of Neurology** 

Bahman Saffari, MD, PhD

Assistant Professor of Obstetrics/Gynecology

Richard Ryder, MD

**Professor of Family Medicine** 

Jeffrey M. Sage, DO

Assistant Professor of Surgery/Ophthalmology

Thomas K. Ryu, DO

Assistant Professor of Emergency Medicine

Jagneswar Saha, DO, PhD

Assistant Professor of Family Medicine

Anthony G. Saad, MD

**Assistant Professor of Pediatrics** 

Thomas E. Saito, PharmD

Richard I. Sakai, PharmD

Assistant Professor of Pharmacy Practice

Assistant Professor of Pharmacy Practice

Shida Saam, DO

Assistant Professor of Family Medicine

Conrad Salinas, MD

Associate Professor of Emergency Medicine

Erik M. Sabando, PharmD

Assistant Professor of Pharmacy Practice

Assistant Professor of Family Medicine

Rick A. Salisbury, MD

Assistant Professor of Internal Medicine

Lovina Sabnani, DO

Marcia E. Sablan, MD

Assistant Professor of Surgery/Ophthalmology

Darin J. Saltzman, MD, PhD

Associate Professor of Podiatric Medicine & Surgery

Suresh Sabnani, DO

Assistant Professor of Family Medicine

Shirley U. Salvatore, MD

Assistant Professor of Family Medicine

Mazin Q. Sabri, MD

Assistant Professor of /Orthopedic Surgery

Kooros Samadzadeh, DO

Assistant Professor of Internal Medicine

John S. Samimi, PharmD

Assistant Professor of Pharmacy Practice

Mark E. Sampson, MD

Assistant Professor of Emergency Medicine

Steven E. Sampson, DO

Assistant Professor of Physical Medicine &

Rehabilitation

Christopher James Sando, PharmD Assistant Professor of Pharmacy Practice

Eric J. Sandoval, DDS

Assistant Professor of Dental Medicine

Raynaldo G. Sandoval, MD

Assistant Professor of Internal Medicine

Chloe A. Sandquist, MD Assistant Professor of Surgery

Jorge Santibanez, MD

Assistant Professor of Internal Medicine

Dilip R. Sandordeker, PhD

Adjunct Professor of Pharmaceutical Sciences

David Saperia, MD

Assistant Professor of Physician Assistant

Education

David J. Saperstein, DO Professor of Radiology

Phisit Saphyakhajon, MD

**Assistant Professor of Pediatrics** 

Melanie E. Sarino, MD Instructor of Pediatrics

Jan O. Sarkin, MD

**Associate Professor of Surgery** 

Arthur Saroughian, PharmD

Associate Professor of Pharmacy Practice

Shirow D. Sasaki, PharmD

**Assistant Professor of Pharmacy Practice** 

Sampat S. Saste, MD

Assistant Professor of Internal Medicine

Jairus Sathianathan MD

Assistant Professor of Internal Medicine

Christopher J. Saucedo, MD

Assistant Professor of Physician Assistant

Education

Stanley R. Saul, DO

Professor of Surgery/Urology

Alicia D. Saulpaugh, MLIS

Adjunct Instructor of Social Medicine & Healthcare

Leadership

Gregory E. Saunders, MD
Assistant Professor of Surgery

William Savage III, MD

Assistant Professor of Internal Medicine

Michael A. Savidan, DDS

Assistant Professor of Dental Medicine

Marisa D. Sayler, MFA

Adjunct Instructor of Dental Medicine

Valerie L. Schade, DPM

Assistant Professor of Podiatric Medicine & Surgery

John D. Schaeffer, DO

Assistant Professor of Internal Medicine/ Neurology

Irving Schaffner, MD

Assistant Professor of Family Medicine

David J. Schapiro, PharmD

Assistant Professor of Pharmacy Practice

Ivan B. Schatz, MD

Associate Professor of Emergency Medicine

Patricia A. Schechter, DO

Associate Professor of Family Medicine

Kenneth Schell, PharmD

Assistant Professor of Pharmacy Practice

Kenneth C.J. Scherbarth, DO

Associate Professor of Family Medicine

Paul R. Scherer, DPM, MS

Professor of Podiatric Medicine & Surgery

Mark J. Scherlie, DO

Assistant Professor of Family Medicine

Clifton S. Schermerhorn, MD Associate Professor of Psychiatry

Steven A. Scheuer, MD Assistant Professor of Surgery

Andrew C. Schink, DPM

Professor of Podiatric Medicine & Surgery

John A. Schlechter, DO Assistant Professor of Surgery

Harry P. Schneider, DPM

Instructor of Podiatric Medicine & Surgery

Mark D. Schneider, DO

Associate Professor of Family Medicine

Robert B. Schorr, DO

Assistant Professor of Pediatrics/Psychiatry

Andrew O. Schreiber, MD Assistant Professor of Neurology

Saul E. Schreiber, DO

Associate Professor of Dermatology

Robert C. Schreiman, MD

Assistant Professor of Family Medicine

Carl S. Schreiner IV, MD Assistant Professor of Surgery

Suzie E. Schuder, MD

**Assistant Professor of Psychiatry** 

Alan J. Schulman, DVM

Professor of Veterinary Medicine

Rhonda L. Schulman, DVM, DACVIM Associate Professor of Veterinary Medicine

Edward H. Schultheiss, MD

Assistant Professor of Internal Medicine

George E. Schultz, DO

Assistant Professor of Internal Medicine

Peter Schultz, RN, MSN

Assistant Professor of Graduate Nursing

Timothy T. Schultz, DO Assistant Professor of OMM

Stephen E. Schuman, MPAS Instructor of Family Medicine

Lawrence Schuyler, DO

Assistant Professor of Family Medicine

Andrew I. Schwartz, DO

Assistant Professor of Family Medicine

Gregory D. Schwartz, MD

Assistant Professor of Internal Medicine

Paul E. Schwartz, MD

Associate Professor of Physician Assistant

Education

Charles Schwengel, DO

Assistant Professor of Family Medicine

Scott E. O. I. Scoggins, MA

Adjunct Instructor of Social Medicine & Healthcare

Leadership

James H. Scott, DO

Assistant Professor of Family Medicine

Kendall G. Scott, MD

Associate Professor of Physician Assistant

Education

Marie C. Scott, PharmD

Assistant Professor of Pharmacy Practice

Michael J. Scott III, DO, MPH

Associate Professor of Dermatology

Robert W. Seapy, MD

**Assistant Professor of Radiology** 

Mary K. Sebzda, DVM

Assistant Professor of Veterinary Medicine

Martin T. Sechrist, DO

Associate Professor of Family Medicine

Avedik Semerjian, MD

Assistant Professor of Internal Medicine/ Nephrology

Manohar R. Senra, MD

Assistant Professor of Internal Medicine

Michael A. Sequeira, MD

Assistant Professor of Physician Assistant

Education

Patrick F. Serynek, DO

**Assistant Professor of Surgery** 

Simrat S. Sethi, MD

**Assistant Professor of Psychiatry** 

Stephen R. Severance, MD

Associate Professor of Internal Medicine/

Gastroenterology

Conrado C. Sevilla III, MD

**Assistant Professor of Psychiatry** 

Turaj T. Shafa, PharmD

Assistant Professor of Pharmacy Practice

Ashini M. Shah, DDS

Assistant Professor of Dental Medicine

Tariq Shah, MD

Associate Professor of Pharmacy Practice

Edwin Shakhmalian, PharmD

Assistant Professor of Pharmacy Practice

Patricia S. Shakhshir, MSN, RN

Instructor of Graduate Nursing

James G. Shames, MD

Assistant Professor of Family Medicine

Munaf A. Shamji, MD

Assistant Professor of Internal Medicine

William S. Shanahan, MD

Assistant Professor of Radiology

Karen B. Shapiro, PharmD

Associate Professor of Pharmacy Practice

Philip Shapiro, MD

**Professor of Psychiatry** 

Homayoun Sharim, MD

Assistant Professor of Internal Medicine

Baljit Kumar Sharma, MD **Assistant Professor of Surgery** 

Surendra K. Sharma, MD **Assistant Professor of Surgery** 

Robert C. Sharp, MD **Professor of Pediatrics** 

Kyle J. Shaver, MD

Assistant Professor of Emergency Medicine

Sylvia J. Shaw, MD

Assistant Professor of Internal Medicine/

Endocrinology

Hossein Shayan, MD

**Assistant Professor of Surgery** 

Stephen W. Shea, DO

Assistant Professor of Orthopedic Surgery

Samuel R. Sheldon, PharmD

Assistant Professor of Pharmacy Practice

Dane J. Shepherd, DO

Associate Professor of OMM

Frank P. Sheridan, MD

**Assistant Professor of Pathology** 

Christopher L. Sherman, DO, MS

Assistant Professor of Surgery

Julie Ann Sherman, DO, MS

Assistant Professor of Family Medicine

Michael G. Sherman, MD, PhD

Assistant Professor of Internal Medicine

Milan R. Sheth, MD

Assistant Professor of Internal Medicine

Philip T. H. Shie, DO

Assistant Professor of Internal Medicine

Donald J. Shields, DVM

Assistant Professor of Veterinary Medicine

Christan T. Shimoda, DO

Associate Professor of Family Medicine

Kathleen Jane Shimoda, RN

Amy Y. Shin, PharmD

Assistant Professor of Pharmacy Practice

Daniel Y. Shin, MD

Assistant Professor of Physical Medicine &

Rehabilitation

Dong-Soo Shin, MD

**Assistant Professor of Surgery** 

Sally M. Shin, PharmD

Assistant Professor of Pharmacy Practice

Tatyana Shipillo, PharmD

**Assistant Professor of Pharmacy Practice** 

Paul K. Shitabata, MD **Professor of Pathology** 

William L. Shoemaker, DO

Assistant Professor of Orthopedic Surgery

Henrietta (Hennie) B. Sholars, DO

Assistant Professor of Family Medicine/ Osteopathic

Manipulative Medicine

John Philip Shonerd, DO

Assistant Professor of Family Medicine

Victoria Lynn Shook, MD

Assistant Professor of Physician Assistant

Education

Randall G. Shue, DO

Assistant Professor of Family Medicine

James W. Shuffield, DO

Assistant Professor of Family Medicine

Annie Shugarman, PA-C

Assistant Professor of Physician Assistant

Education

Alison W. Shuman, MD

**Assistant Professor of Pediatrics** 

J. K. Gavin Shumate, MS

Assistant Professor of Obstetrics/Gynecology

David Siambanes, DO

Assistant Professor of Orthopedic Surgery

Javed Siddiqi, MD

Professor of Surgery/Neurosurgery

Ronald M. Sidorsky, DPM

Assistant Professor of Podiatric Medicine & Surgery

John L. Sie, PharmD

**Assistant Professor of Pharmacy Practice** 

David M. Siegel, DO

**Assistant Professor of Surgery** 

David B. Siepmann, MD

Assistant Professor of Radiology

Mark E. Sikorski, DO

Assistant Professor of Family Medicine

Alexandra Silber, DVM

Assistant Professor of Veterinary Medicine

Jack H. Sills, MD

Professor of Physician Assistant Education

Antonio R. Silva, MD

Assistant Professor of Surgery/Oncology

Benjamin K. Silverman, MD Professor of Pediatrics

Andrew Simental, Jr., PharmD

**Assistant Professor of Pharmacy Practice** 

Rasheed Simjee, DMD

Assistant Professor of Dental Medicine

Lary A. Simms, DO, MPH

**Assistant Professor of Pathology** 

Armen Simonian, PharmD

**Assistant Professor of Pharmacy Practice** 

David Allan Simonowitz, MD

**Assistant Professor of Surgery** 

Arnold Y. Sin, MD

Assistant Professor of Emergency Medicine

Bruce D Sindel, MD

Assistant Professor of Pediatrics/Neonatology/

Perinatology

Harjinder P. Singh, MD

**Assistant Professor of Pediatrics** 

Ravinder P. Singh, MD

**Assistant Professor of Psychiatry** 

Ruby Singh, DO

Assistant Professor of Family Medicine

Tejinder Singh, MD

Assistant Professor of Internal Medicine

Prem Singla, MD

Associate Professor of Family Medicine

C. Paul Sinkhorn, MD

Associate Professor of Obstetrics/Gynecology

Keith Sinn, PharmD

Assistant Professor of Pharmacy Practice

Douglas J. Skarada, MD Assistant Professor of Surgery

Harry B. Skinner, MD, PhD

Professor of Physician Assistant Education

Daniel M. Skotte, Sr., DO

Assistant Professor of Family Medicine

Sandra L. Sleszynski, DO

Associate Professor of NMM/OMM

K. Turner Slicho, DO, MS

Assistant Professor of NMM/OMM

Samuel David Small, DO

**Associate Professor of Surgery** 

Kyle N. Smart, DO

Assistant Professor of Family Medicine

Alicia A. Smith, DVM

Instructor of Veterinary Medicine

Amber Smith, DO

**Assistant Professor of Pediatrics** 

Barry C. Smith, MD

Assistant Professor of Internal Medicine

Carl M. Smith, MD Professor of Radiology Carl W. Smith, MD

Assistant Professor of Orthopedic Surgery

David E. Smith, MD

Professor of Family Medicine/Addiction

Medicine

Gregory C. Smith, DVM

Professor of Veterinary Medicine

James E. Smith, PA-C, MS

Assistant Professor of Physician Assistant

Education

Keith U. Smith, DO

Assistant Professor of Anesthesiology

Kenneth R. Smith, DO

Assistant Professor of Family Medicine

Kevin Smith, MD

**Assistant Professor of Psychiatry** 

Larry D. Smith, DO

Assistant Professor of Internal Medicine

Michael B. Smith, MD

Assistant Professor of Obstetrics/Gynecology

Robert G. Smith, DPM, MSc

Assistant Professor of Podiatric Medicine & Surgery

Wyatt S. Smith, DO

Assistant Professor of Internal Medicine/

Hematology & Oncology

Melanie J. Smythe, DO

Assistant Professor of Family Medicine

Teram Snow, MD

Assistant Professor of Internal Medicine

Dorian D. Snyder, MD

Assistant Professor of Emergency Medicine

Hernani Q. Soberano, MD Assistant Professor of Pediatrics

Fred Soeprono, MD

Instructor of Pathology/Dermatopathology

Mehrzad M. Soleimani, DO

Olivia Solis, MLIS

Adjunct Instructor of Social Medicine & Healthcare

Leadership

Andrew Solkovits, DO

Assistant Professor of Family Medicine

Hamilton M. Solomon, PhD

Adjunct Assistant Professor of Physical

Therapy Education

Marshall G. Solomon, DPM

Professor of Podiatric Medicine & Surgery

Ransi M. Somaratne, MD

Assistant Professor of Internal Medicine

Joseph K. Song, MD

**Assistant Professor of Internal** 

Medicine/Cardiology

Willes Wolfe Sonnefield, MA, PT

Adjunct Assistant Professor of Physical Therapy

Education

Robert E. Soper, MD

**Assistant Professor of Psychiatry** 

Andrei Soran, MS

Adjunct Assistant Professor of Health

**Professions Education** 

Luis F. Soria, MS, MA

Adjunct Instructor of Dental Medicine

Victoria E. Sorlie-Aguilar, MD

Assistant Professor of Family Medicine

Vukman Soskic, MD

Assistant Professor of Internal Medicine

Adrienne E. Soucy, MD

Assistant Professor of Internal Medicine

Robert Southmayd, DO

Assistant Professor of Family Medicine

Emily S. Southward, DVM

Associate Professor of Veterinary Medicine

Stefan O. Spann, MD

Assistant Professor of Emergency Medicine

Trang Huong Sparks, PA-C, BS

Instructor of Physician Assistant Education

Eugene M. Spear, MD

Assistant Professor of Internal Medicine

Michelle Spencer, PharmD

Assistant Professor of Pharmacy Practice

Robert J. Spencer, DPM

Assistant Professor of Podiatric Medicine &

Surgery

Racquel Sperrazzo, PharmD

**Assistant Professor of Pharmacy Practice** 

Frances S. Spiller, DO

Assistant Professor of Internal Medicine

Richard Spini, PharmD

Assistant Professor of Pharmacy Practice

Yemelyan L. Spivak, MD

**Assistant Professor of Surgery** 

Sanjay S. Srivatsa, MD, MA

Assistant Professor of Internal Medicine

Deanna M. St. Germain, DO

Assistant Professor of Family Medicine

Christopher J. Stadherr, MD

Assistant Professor of Family Medicine

Joseph Stalfier III, MD

Assistant Professor of Obstetrics/Gynecology

Seth J. Stammerjohan, DVM

Instructor of Veterinary Medicine

Blayne A. Standage, MD

Associate Professor of Surgery

Kimberly L. Standley, PharmD

Assistant Professor of Pharmacy Practice

Ruth Stanhiser, MD

Assistant Professor of Family Medicine

Seth J. Stankus, DO

**Assistant Professor of Neurology** 

James W. Stavosky, DPM, MS

Professor of Podiatric Medicine & Surgery

Robert A. Steedman, MD Associate Professor of Surgery

Thomas M. Steele, MD

Assistant Professor of Internal Medicine

Amanda B. Steen, MD

Assistant Professor of Physical Medicine &

Rehabilitation

Lisa M. Steffensen-Gambrath, DO Assistant Professor of Family Medicine

Kenneth J. Steier, DO, MHA, MPH, MGH Associate Professor of Internal Medicine

Paul J. Steier, DO

Assistant Professor of Family Medicine

Daniel T. Stein, MD

**Assistant Professor of Surgery** 

Joel D. Stein, DO

Associate Professor of OMM

Laura A. Stein, MD

Assistant Professor of Family Medicine

Craig Steinberg, PharmD

Assistant Professor of Pharmacy Practice

Michael A. Steingard, DO

Assistant Professor of Orthopedic Surgery

Scott A. Steingard, DO

Assistant Professor of Family Medicine

Paul M. Steingart, DO

Professor of Family Medicine/Sports Medicine

John C. Steinmann, DO

Associate Professor of Orthopedic Surgery

Craig Stephen Stern, PharmD, MBA Assistant Professor of Pharmacy Practice

Electa Joy Stern, PharmD

Assistant Professor of Pharmacy Practice

Gloria J. Stevens, MD

Assistant Professor of Dermatology

Ted A. Stevens, DVM

Associate Professor of Veterinary Medicine

David C. Stewart, MD

Assistant Professor of Physical Medicine &

Rehabilitation

James R. Stewart, MD

Associate Professor of Physician Assistant

Education

John T. Stewart, MD

Associate Professor of Physician Assistant

Education

Kristine Stille, PharmD

Assistant Professor of Pharmacy Practice

Jeffrey S. Stoessl, MD

Assistant Professor of Family Medicine

Michael D. Stone, DO

Instructor of Emergency Medicine

William C. Stonecipher, DO

Assistant Professor of Family Medicine

Mitchel D. Storey, DO

Associate Professor of Family Medicine/Sports

Medicine

Cosimo N. Storniolo, MD

Assistant Professor of Internal Medicine

Lynn M. Strange, MD

Assistant Professor of Family Medicine

John Strathakis, DO

Assistant Professor of Dermatology

Howard N. Straub, DO

Professor of Surgery/Ophthalmology

Josef Strazynski, DO

Associate Professor of Family Medicine

Gregory D. Strebel, DO

Assistant Professor of Family Medicine

Jennifer Lynn Strickland, PharmD

Assistant Professor of Pharmacy Practice

Paul A. Strodtbeck, MD

Associate Professor of Physician Assistant

Education

Adam M. Strom, DVM, MS

Assistant Professor of Veterinary Medicine

Dana Strome, PA-C

Instructor of Physician Assistant Education

Sarah J. Strube, DO

**Assistant Professor of Pharmacy Practice** 

Patrick J. Stuart, DO

Assistant Professor of Family Medicine

Robert E. Stuart, MD

Assistant Professor of Family Medicine

Angela Y. Su, PharmD

Assistant Professor of Pharmacy Practice

Paul S. Sucgang, DO, MBA

Assistant Professor of NMM/OMM

Barbara S. Suk, PharmD

Assistant Professor of Pharmacy Practice

Stacey A. Sullivan, DVM, DACVIM

Associate Professor of Veterinary Medicine

Jocelyn L. Sumcad, MD

Assistant Professor of Physician Assistant

Education

Stuart S. Sumida, PhD

Adjunct Professor of Biomedical Science

Ted T. Sundin, MD

**Assistant Professor of Psychiatry** 

Allison Sung, DMD

Assistant Professor of Dental Medicine

Chairat Supsin, PharmD

Assistant Professor of Pharmacy Practice

Michael J. Suval, DO

Assistant Professor of Internal Medicine

Dale S. Svendsen, MD

**Assistant Professor of Pediatrics** 

Gretchen Swanson, DPT

Adjunct Associate Professor of Physical

Therapy Education

Sean L. Sweeney, DO

**Assistant Professor of Pediatrics** 

Erik E. Swensson, MD

**Assistant Professor of Surgery** 

Jamie L. Switzer, DO

Assistant Professor of Family Medicine

Brian M. Swope, DO

**Assistant Professor of Pediatrics** 

Atiq Syed, MD, MPH

Assistant Professor of Internal Medicine

John L. Sykora, MBA, BS, RPh

Assistant Professor of Pharmacy Practice

Joanne A. Tabata, PharmD

Assistant Professor of Pharmacy Practice

Tracy A. Taggart, MD

**Assistant Professor of Surgery** 

Daniel Taheri, MD

Assistant Professor of Dermatology

Parvis Taherpour, MD

Assistant Professor of Family Medicine

John Paul Takacs, DO

Assistant Professor of Family Medicine

Daljinder Takhar, DO

Assistant Professor of Family Medicine

Uqbah Taksh, MD

**Assistant Professor of Psychiatry** 

Benjamin C. Tam, MD

Associate Professor of Orthopedic Surgery

Jessica W. Tam, MD

Assistant Professor of Internal Medicine

Andrew Tan, PharmD

**Assistant Professor of Pharmacy Practice** 

Michael P. Tan, DO

Assistant Professor of Internal Medicine

Vivian Reen-Jeh Tan, MD

Assistant Professor of Internal Medicine

Masaji Tanaka, PharmD

Assistant Professor of Pharmacy Practice

Bruce L. M. Tanenbaum, MD Professor of Psychiatry

Bill W. Tang, MD

Assistant Professor of Obstetrics/Gynecology

Chin Tang, DO

Instructor of Psychiatry

Frank Q.-C. Tang, MD

Associate Professor of Physician Assistant

Education

Ha C. Tang, DO

Assistant Professor of Family Medicine

Pei-Yuen Tang, DO

Assistant Professor of Family Medicine

Dumrong Tangchitnob, MD

Assistant Professor of Obstetrics/Gynecology

Mark A. Tapscott, DO

Assistant Professor of Surgery

Muhammad A. Taqi, MD

**Assistant Professor of Neurology** 

Sharif Tarazi, MD

Assistant Professor of Internal Medicine

Pam Ehrlich Tarlow, PharmD

**Assistant Professor of Pharmacy Practice** 

Kevin J. Tarrant, MD

Assistant Professor of Anesthesiology

Ronald M. Tarrel, DO

**Assistant Professor of Neurology** 

Guy B. Tarvin, DVM, DACVS Professor of Veterinary Medicine Avetis Tashyan, PharmD

Assistant Professor of Pharmacy Practice

Armen Tate, PharmD

Assistant Professor of Pharmacy Practice

David M. Tate, MD

Assistant Professor of Internal Medicine

Hamideh Tavakoli-Ahmady, PharmD Assistant Professor of Pharmacy Practice

Randall W. Taylor, DMD, MPH

Assistant Professor of Dental Medicine

Collin Teguh, DO

Assistant Professor of Family Medicine

Brian W. Temple, MD

Assistant Professor of Pediatrics

Edward Tessier, BA

Adjunct Instructor of Health Professions

Education

Stephen W. Thacker, DO

Associate Professor of Family Medicine

"Ken" Khanh-Long Thai, PharmD

Associate Professor of Pharmacy Practice

Cynthia L. Thomas, DO

Assistant Professor of Family Medicine

Jack (John) L. Thomas, DO

Associate Professor of Family Medicine

Jason S. Thomas, MD

Assistant Professor of Psychiatry

Larry L. Thomas, MD

Assistant Professor of Emergency Medicine

Scott A. Thomas, DO

Assistant Professor of Anesthesiology

Steven C. Thomas, DO Professor of OMM

Clark R. Thompson, MD

**Assistant Professor of Surgery** 

Kevin H. Thompson, DO

Assistant Professor of Internal Medicine

Leonard J. Thompson, DO
Assistant Professor of Pediatrics

Kimberly A. Thompson-Dreher, DO Assistant Professor of Pediatrics

Julie G. Thompson-Dobkin, DO

Assistant Professor of Internal Medicine/ Neurology

Nguyen Thong, MD

Assistant Professor of Internal Medicine

Rama K.P. Thumati, MD

Assistant Professor of Internal Medicine/ Cardiology

Brian L. Tiep, MD

Assistant Professor of Family Medicine/ Pulmonary

Rehabilitation

Jeffrey Tipton, DO, MPH

Assistant Professor of Family Medicine/Public

Health

Herbert John Tirjer, DO

Assistant Professor of Surgery/Urology

Alfredo B. Tiu, DO

Assistant Professor of Internal Medicine

Richard W. Tobin, MD

Assistant Professor of Orthopedic Surgery

Jamie Tobitt, PharmD

Assistant Professor of Pharmacy Practice

Eric M. Toder, DO

Assistant Professor of OMM

Gilbert J. Toffol, DO

Assistant Professor of Internal

Medicine/Neurology

Liliana Tomona, MD

Assistant Professor of Family Medicine

Yee-Wing Tong, MD

Assistant Professor of Anesthesiology

Helen Tonnu, PharmD

Assistant Professor of Pharmacy Practice

Ivy Tonnu-Mihara, PharmD

Assistant Professor of Pharmacy Practice

John W. Topping, MD

**Assistant Professor of Surgery** 

Frank L. Tornatore, PharmD, MS Professor of Pharmacy Practice

Paul D. Tortland, DO

Associate Professor of Sports Medicine

Sandra P. Tou, DVM, DACVIM

Associate Professor of Veterinary Medicine

Angeline M. Tran, PharmD

Assistant Professor of Pharmacy Practice

Bao Cong Tran, MD

Associate Professor of Internal Medicine

Cynthia C. Tran, PharmD

**Assistant Professor of Pharmacy Practice** 

Doug Dung Anh Tran, MD

Associate Professor of Surgery/ Otorhinolaryngology

Justin S. Treat, DO

Assistant Professor of Internal Medicine

Ingrid E. Trenkle, MD

**Professor of Dermatology** 

Dennis Trigueros, MD

Assistant Professor of Emergency Medicine

Ajay Tripuraneni, MD

Assistant Professor of Internal Medicine

Narendra S. Trivedi, MD

Assistant Professor of Anesthesiology

Rohit R. Trivedi, MD Professor of Surgery

Lawrence Troxell, PharmD

Assistant Professor of Pharmacy Practice

Peter S. Tsai, MD

Instructor of Orthopedic Surgery

Sean I. Tsai, DO

William Tsai, DO

Assistant Professor of Family Medicine

Ambrose Y. Tsang, MD

Assistant Professor of Internal Medicine/Nephrology

Alice M. Tsao, MD

Assistant Professor of Anesthesiology

Jonathan C. Tsao, DO

Assistant Professor of Family Medicine

Cam Tsaowimonsiri, PharmD

**Assistant Professor of Pharmacy Practice** 

Clifford K. Tse, MD, MPH

Assistant Professor of Family Medicine

K. Edmund Tse, MD

Assistant Professor of Internal Medicine

Jemima H. Tso, MD

**Assistant Professor of Pediatrics** 

Lynette D. Tsugawa, DVM, DACVIM

Assistant Professor of Veterinary Medicine

Mitsuhiro Tsukiboshi, DDS, PhD

Assistant Professor of Dental Medicine

Erik S. Tu, MD

**Assistant Professor of Optometry** 

Michelle N. Tubbs, MSN, FNP

**Assistant Professor of Graduate Nursing** 

Diane M. Tungol, DDS

Assistant Professor of Dental Medicine

Stephen B. Turay, DO

Assistant Professor of Family Medicine

Stephen W. Turay, MD

Assistant Professor of Family Medicine

Alfred L. Turner, DO, MA

Professor of Family Medicine/ Osteopathic

Manipulative Medicine

Randall G. Turner, DO

Assistant Professor of Psychiatry

Debra A. Turull, DO

Assistant Professor of Obstetrics/Gynecology

Ty L. Tvedten, DO

Assistant Professor of Family Medicine

Rosemarie Tweed, DO

**Assistant Professor of Pediatrics** 

Jonathan J. Tye, MD, MPH

Assistant Professor of Internal Medicine/Cardiology

Kenneth Tye, MD

Assistant Professor of Internal Medicine/ Cardiology

Sheri R. Tysch, DO

**Assistant Professor of Pediatrics** 

Brian M. Tyson, MD

Assistant Professor of Emergency Medicine

Aaron Ufferman, MD

Assistant Professor of Internal Medicine

Karlis Uliss, MD

**Assistant Professor of Pediatrics** 

Thomas S. Umemoto, MD

Assistant Professor of Emergency Medicine

Paul M. Umof, MD

Assistant Professor of Emergency Medicine &

Occupational Medicine

Jennie Ung, PharmD

Associate Professor of Pharmacy Practice

Arthur C. Underleider, DO

Associate Professor of Family Medicine

Khushro B. Unwalla, MD

Associate Professor of Psychiatry

Sukhdev Uppal, MD

**Assistant Professor of Pediatrics** 

Matt C. Upshaw, DO

Assistant Professor of Family Medicine

Geraldine N. Urse, DO

Julian J. Uselman, DO

Assistant Professor of Family Medicine

Anne M. Vachon, DVM, PhD Professor of Veterinary Medicine

Patricia A. Vader, MLIS

Adjunct Instructor of Social Medicine & Healthcare

Leadership

Vijayalakshmi L. D. Vadrevu, MD, MS Assistant Professor of Internal Medicine

Daryoosh Valamanesh, MD

Assistant Professor of Internal Medicine

Christina S. Valencia, PharmD

**Assistant Professor of Pharmacy Practice** 

Guillermo J. Valenzuela, MD

Professor of Obstetrics/Gynecology

Melinda Sue Valenzuela, PharmD

Assistant Professor of Pharmacy Practice

Linh B. Van, PharmD

**Assistant Professor of Pharmacy Practice** 

Jana van Amburg, MD

**Assistant Professor of Surgery** 

Michael D. van Anrooy, MD

**Assistant Professor of Surgery** 

Nicole M.J. van der Heyden, MD, PhD, DVM

**Associate Professor of Surgery** 

Frederic J. van Dis, MD

Assistant Professor of Internal Medicine

John van Houten, MD

**Assistant Professor of Pediatrics** 

Blake H. van Meter, MD

Assistant Professor of Anesthesiology

Jessica R. van Scyoc, DVM

Instructor of Veterinary Medicine

John A. van Speybroeck, MD Assistant Professor of Surgery Carl D. Vance, MD

Assistant Professor of Internal Medicine

Olin N. Vance, DO

Assistant Professor of Emergency Medicine

Jennine Varhola, DO

Assistant Professor of Obstetrics/Gynecology

Surin Vasdev, MD

Assistant Professor of Internal Medicine

Dan Vasile, DO

Assistant Professor of Family Medicine

Emmanuel C. Vasilomanolakis, MD

Assistant Professor of Internal Medicine

Luis R. Vela, DO

**Assistant Professor of Orthopedics** 

Antero Velez, MD

Assistant Professor of Physician Assistant

Education

Mary Ruth Velicki, MS

Adjunct Instructor of Physical Therapy

Education

Thomas E. Venasche, MD

Assistant Professor of Family Medicine

Michelle F. Veneziano, DO

Assistant Professor of OMM

Kalyanasundaram Venkataraman, MD

Professor of Internal Medicine

Sanjay Verma, MD

Assistant Professor of Internal Medicine

Roger Vielbig, MD

Assistant Professor of Internal Medicine/ Cardiology

Rafael Villarosa, MD

Assistant Professor of Internal Medicine

Marcos Villasenor, DVM, MS

Instructor of Veterinary Medicine

Holly M. Viloria, MS, RN

**Assistant Professor of Graduate Nursing** 

William Vineyard, PharmD

Assistant Professor of Pharmacy Practice

Norman E. Vinn, DO

**Professor of Family Medicine** 

Roopa Viraraghavan, MD, MPH Assistant Professor of Pediatrics

Randy D. Visser, DO

Assistant Professor of Internal Medicine

Zak Vitaliy, MD

Assistant Professor of Internal Medicine

Steven J. Vitero, DDS

Assistant Professor of Dental Medicine

Michael P. Vitullo, DO

Assistant Professor of Emergency Medicine

Joseph Vivo, PharmD

Assistant Professor of Pharmacy Practice

Huu D. Vo, MD

Assistant Professor of Physician Assistant

Education

Jacqueline H. Vo, PharmD

Assistant Professor of Pharmacy Practice

Fred H. Volk, DO

Assistant Professor of Anesthesiology

Rosann E. Volmert, DO

Assistant Professor of Family Medicine

JoAnn Vorndran, BSN

Instructor of Graduate Nursing

William D. Voss, DO

Instructor of Family Medicine

Lee E. Vranna, MD

Assistant Professor of Physical Medicine and

Rehabilitation

Don Vu, PharmD

Instructor of Pharmacy Practice

Hoa Duong Vu, MD

Assistant Professor of Internal Medicine

Kelvin K. Vu, DO

Assistant Professor of Family Medicine

Liem Cong Vu, MD

**Assistant Professor of Pathology** 

Reed H. Vuong, DO

Assistant Professor of Family Medicine

Harish M. Vyas, PhD, RPh

Assistant Professor of Pharmacy Practice

Jennifer Wabin, MD

**Assistant Professor of Psychiatry** 

Barton H. Wachs, MD

Assistant Professor of Surgery/Urology

Jeffrey A. Wachs, DO

Assistant Professor of Family Medicine

Ralph D. Wade, DO

Assistant Professor of Family Medicine

Pushkar S. Wadgaonkar, MD Assistant Professor of Pediatrics

Kendall S. Wagner, MD, MS

Associate Professor of Physician Assistant

Education

Ihab M. Wahba, MD

Assistant Professor of Internal Medicine

Emile P. Wakim, MD

**Assistant Professor of Surgery** 

Paul E. Wakim, DO

Assistant Professor of Surgery/Orthopedics/Sports

Medicine

Autar K. Wali, MD

**Assistant Professor of Surgery** 

Gary B. Walker, MS, PA-C

Assistant Professor of Physician Assistant

Education

Bryan D. Walls, DO

Assistant Professor of Family Medicine/ Osteopathic

Manipulative Medicine

Jodi L. Walters, DPM

Assistant Professor of Podiatric Medicine & Surgery

Jiangnan Wang, MD

Assistant Professor of Internal Medicine

Jin Wang, MD

Assistant Professor of Internal Medicine

Daniel Wanwig, MD

**Assistant Professor of Internal** 

Medicine/Psychiatry

Harry James Ward, MD

Associate Professor of Internal Medicine

Jeffrey K. Ward, PharmD

Associate Professor of Pharmacy Practice

John R. Ward, MD

Assistant Professor of Family Medicine

Darryl M. Warner, DO

**Assistant Professor of Surgery** 

James P. Warren, MD

Assistant Professor of Radiology

Wignes K. Warren, MD

**Associate Professor of Pediatrics** 

Jennifer B. Warton, DO

**Assistant Professor of Pediatrics** 

Melanie D. Washington, DDS

Assistant Professor of Dental Medicine

Suzanne E. Wasp-Shasta, PharmD

**Assistant Professor of Pharmacy Practice** 

Deryck S. Watermeyer, MD

Assistant Professor of Anesthesiology

John F. Watkins, MD, PhD

Instructor of Internal Medicine

Judith A. Watkins, MD

**Assistant Professor of Psychiatry** 

Eric J. Watson, DO

Instructor of Physical Medicine and

Rehabilitation

Joseph Watson, DO

Assistant Professor of Family Medicine

Harry C. Watters, DO

Assistant Professor of Obstetrics/Gynecology

Karl E. Weaver, MD

**Assistant Professor of Psychiatry** 

Paul G. Weaver, DO

Assistant Professor of Family Medicine

Paul M. Webber, MD, MPH

Assistant Professor of Emergency Medicine

David Weber, DVM

Assistant Professor of Veterinary Medicine

R. Scott Weber, PharmD

Assistant Professor of Pharmacy Practice

Bruce A. Webster, MD, PhD

Assistant Professor of Emergency Medicine

Choog Y. Wee, MD

Associate Professor of Obstetrics/Gynecology

Patricia J. Weeks, MD

Assistant Professor of Family Medicine

Bruce J. Weimer, MD

**Assistant Professor of Neurology** 

Stewart K. Weinerman, MD

Assistant Professor of Surgery/Orthopedics

Gerald Weingarden, DO

Assistant Professor of Dermatology

Elliot Weinstein, MD

**Assistant Professor of Pediatrics** 

Frederick W. Weisensee, MD

Assistant Professor of Internal Medicine

Frederick R. Weiss, MD

Assistant Professor of Internal Medicine

Michael Weiss, DO

**Associate Professor of Pediatrics** 

Jill Weissman, PharmD

Assistant Professor of Pharmacy Practice

William Daniel Welsh, DO

Associate Professor of Family Medicine

Jay A. Wenig, DPM

Assistant Professor of Podiatric Medicine & Surgery

Robert C. Wesley, Jr., MD

Associate Professor of Physician Assistant

Education

Rachel West, DO

Assistant Professor of Family Medicine

Randall M. West, DO

Assistant Professor of Family Medicine

H. Eric Westman, DO

Associate Professor of Surgery/ Otorhinolaryngology

Jon-Marc Weston, MD

**Assistant Professor of Surgery** 

Dale L. Wheeler, PharmD

**Professor of Pharmacy Practice** 

Frank Whitchurch, DVM

Instructor of Veterinary Medicine

Frederick E. White, DO

Assistant Professor of Radiology

Klyda J. White, DO

Assistant Professor of Family Medicine

Peter J. White, MD

Assistant Professor of Anesthesiology

Michael Whiting, MD Instructor of Pediatrics

Donald D. Wicker, MD

Assistant Professor of Family Medicine

Richard P. Wikholm, MD Assistant Professor of Surgery

Janette M. Wilcox, DO

Assistant Professor of Family Medicine

Brett E. Wildermuth, DVM, DACVD

Assistant Professor of Veterinary Medicine

Joseph Wiley, MD

**Assistant Professor of Pediatrics** 

Jacqueline C. Wilk, MD

**Assistant Professor of Pediatrics** 

Kate J. Wilks, MD

Assistant Professor of Family Medicine

Diane C. Williams, MD

**Assistant Professor of Pediatrics** 

Kenneth L. Williams Jr., DO

Associate Professor of Family Medicine

Stephen A. Williams, MD

Assistant Professor of Internal Medicine

Susan A. Williams, MD

**Assistant Professor of Surgery** 

Theodore J. Williamson, MD, PhD

Assistant Professor of Radiology

Giselle H. Willick, PharmD

Associate Professor of Pharmacy Practice

Richard L. Wilmer, MD, MPH

Assistant Professor of Internal Medicine/Cardiology

Brian C. Wilson, MD

Assistant Professor of Radiology

Ethan B. Wilson, MD

Assistant Professor of Emergency Medicine

Jack M. Wilson, MD

Assistant Professor of Emergency Medicine

Michael E. Wilson, DO

Assistant Professor of Family Medicine

Rochelle L. Wilson, DO

Assistant Professor of Family Medicine

Webb C. Wilson, DO, MPH

Assistant Professor of Emergency Medicine

Tien T. Kiat Winarko, PharmD

Assistant Professor of Pharmacy Practice

Sarah E. Wind, DVM

Instructor of Veterinary Medicine

Craig Allen Winkler, MD

Assistant Professor of Internal Medicine

Heidi A. Winkler, MD

**Assistant Professor of Pediatrics** 

Jelani E. Winslow, DMD

Assistant Professor of Dental Medicine

Joel A. Winter, OD

**Assistant Professor of Optometry** 

Todd A. Winter, MD

Assistant Professor of Internal Medicine

Kimberly B Winters, DVM

Assistant Professor of Veterinary Medicine

Stanley Winters, BS, RPh

**Assistant Professor of Pharmacy Practice** 

Douglas J. Wise, DO

Assistant Professor of Family Medicine

Barry R. Wiss, DO

Assistant Professor of Internal Medicine/

Gastroenterology

Albert A. Witte, DO

Professor of Internal Medicine/Cardiology

Sandy Witzling, MD

Associate Professor of Surgery

David Wolf, PhD, MSc, DVM Professor of Veterinary Medicine

Victoriya D. Woolfer, MD

Assistant Professor of Internal Medicine

Paul J. Wolfrom, DO

**Assistant Professor of Surgery** 

Laurie M. Woll, DO

Associate Professor of Dermatology

Kimberly A. Wollmuth, MD Assistant Professor of Pediatrics

Christopher G. Wong, DVM

Associate Professor of Veterinary Medicine

Daphne L. Wong, MD

**Assistant Professor of Pediatrics** 

Darlene Wong, PharmD

Associate Professor of Pharmacy Practice

Donna Wong, DO

Assistant Professor of Family Medicine

Jason Wong, BS, RPh

Assistant Professor of Pharmacy Practice

Kelly T. Wong, DO

Assistant Professor of Family Medicine

Kenneth H. Wong, PharmD Professor of Pharmacy Practice

Noreen T. Wong, PharmD

Assistant Professor of Pharmacy Practice

Shirley P. Wong, DO

Assistant Professor of Obstetrics/Gynecology

Sunny W. Wong, DO

Assistant Professor of Internal Medicine

Wai Yee Wong, BS, RPh

Assistant Professor of Pharmacy Practice

Webster Wong, MD

Associate Professor of Pediatrics

William G. Wong, MD

Instructor of Internal Medicine

Benjamin K. Woo, MD

Assistant Professor of Psychiatry

Kathryn S. Woo, BS, RPh

Assistant Professor of Pharmacy Practice

Michael L. Woo, PharmD

Assistant Professor of Pharmacy Practice

Thomas A. Woodbury, DO

Assistant Professor of Family Medicine

Lawrence E. Woodhouse, PharmD

Assistant Professor of Pharmacy Practice

Cynthia M. Worden, DO Assistant Professor of OMM Sandor J. Woren, DO

Associate Professor of Emergency Medicine

R. Bruce Worth, MD

Assistant Professor of Family Medicine

George D. Wright, MD

Assistant Professor of Family Medicine

Palmer P Wright, DO

**Assistant Professor of Surgery** 

Craig J. Wronski, DO

Associate Professor of Psychiatry

William W. S. Wu, MD

Assistant Professor of Internal Medicine

Phillip A. Wunder, DO

Assistant Professor of Internal Medicine

Mary Wunderle-McIntosh, MD

Assistant Professor of Family Medicine

Steven G. Wynder, MD

**Assistant Professor of Surgery** 

Brett Wyrick, DO

**Associate Professor of Surgery** 

Jane J. Xenos, DO

Assistant Professor of NMM/OMM

Yu Cynthia Xu, MD

Assistant Professor of Pediatrics

Salpi K. Yaghoudian, PharmD Instructor of Pharmacy Practice

Dean T. Yamaguchi, MD, PhD

Professor of Podiatric Medicine & Surgery

Sussi A. Yamaguchi, DDS

Assistant Professor of Dental Medicine

Brian G. Yamate, PharmD

Assistant Professor of Pharmacy Practice

Anthony P. Yang, MD

Assistant Professor of Orthopedic Surgery

Haoshu Yang, PharmD

Instructor of Pharmacy Practice

Linda Lin-Lee Yang, MD

**Assistant Professor of Pediatrics** 

Sun Yang, BPharm, PhD

Assistant Professor of Pharmacy Practice

Edward B. Yanke, DO

Assistant Professor of Obstetrics/Gynecology

Barney A. D. Yanlowitz, DPM

Associate Professor of Podiatric Medicine & Surgery

Lovelle M. Yano, PharmD

**Assistant Professor of Pharmacy Practice** 

Eric S. Yao, MD

**Assistant Professor of Surgery** 

Donald E. Yarbrough, MS Assistant Professor of Surgery

Ralph A. Yates, DO

Assistant Professor of Family Medicine

Florence Yee, PharmD

**Assistant Professor of Pharmacy Practice** 

Julie E. Yeggy, MD

Assistant Professor of Internal Medicine

Andrew Yeh, DO

Assistant Professor of Obstetrics/Gynecology

Michael Yeh, MD, PhD

Assistant Professor of Internal Medicine

Raynold Vann Yin, PharmD

Instructor of Pharmacy Practice

Felix C.-M. Yip, MD

Assistant Professor of Surgery

Joseph S. Yorke, MD

Assistant Professor of Internal Medicine

Brian T. Yost, DO

**Professor of Orthopedic Surgery** 

Brian C. Young, DVM, DACVIM

Assistant Professor of Veterinary Medicine

Eugene Y. Young, DO

**Assistant Professor of Psychiatry** 

Jeffrey C. Young, DO

Associate Professor of Family Medicine

David Yu, PharmD

**Assistant Professor of Pharmacy Practice** 

Harry C. Yuan, DO, MPH

**Associate Professor of Pediatrics** 

Robert S. Yuan, DMD

Assistant Professor of Dental Medicine

Xiaojuan Carol Yuan, PharmD

Assistant Professor of Pharmacy Practice

Jimmy Yue, DO

Assistant Professor of Internal Medicine

John Yuen, PharmD

**Assistant Professor of Pharmacy Practice** 

James M. Yun, MD

**Assistant Professor of Surgery** 

Alidad Moussa Zadeh, DO Instructor of Internal Medicine

Syed M. Zaidi, MD

Assistant Professor of Internal Medicine

Joseph A. Zammuto, DO

Associate Professor of Family Medicine

Martin R. Zapata, DO

Assistant Professor of Internal Medicine

Rami Zarnegar, MD

**Assistant Professor of Surgery** 

Stephen W. Zecher, MPT

Adjunct Assistant Professor of Physical

Therapy Education

Alan M. Zeichner, DPM

Associate Professor of Podiatric Medicine &

Surgery

Robert Zelman, DO

Assistant Professor of Internal Medicine/ Cardiology

Zoltan Zentay, MD Instructor of Pediatrics

mistractor or reductives

Xiao-Ling Zhang, MD

Assistant Professor of Internal Medicine

George J. Zibilich, MD

Assistant Professor of Emergency Medicine

Nicole Zimmerman, PhD

Adjunct Instructor of Health Professions

Education

Sheldon S. Zinberg, MD

Professor of Internal Medicine

Phillip C. Zinni III, DO

Assistant Professor of Family Medicine

Jerett A. Zipin, DO

Instructor of Internal Medicine

Robert G. Zirschky, MD

**Assistant Professor of Orthopedic Surgery** 

Matthew D. Zollinger, MD

Assistant Professor of Internal Medicine &

Pediatrics

Janae D. Zolna-McLane, MD, MPH

Assistant Professor of Family Medicine

John P. Zopfi, DO

**Assistant Professor of Surgery** 

Timothy T. Zuk, MD

Assistant Professor of Family Medicine

Jinette O. Zumaeta, DDS

Assistant Professor of Dental Medicine

Courtney H. Zwahlen, DVM, DACVIM

Professor of Veterinary Medicine