Western University of Health Sciences (Western University) 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 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 Western University 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.

Please Note:
Text for the catalog was prepared as of June 2001. The information herein applies to the academic year 2001-2002 and is subject to change at the discretion of the University.

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.

Office of Admissions, Mondays, 8:30 am - 12 noon, Tuesdays-Fridays, 8:30 pm - 5 pm
University Switchboard - (909) 623-6116.
Western University of Health Sciences Catalog Vol. 12, No. 1, Summer, 2001
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 Western University. 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 Western University, 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 Western University 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
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WESTERN UNIVERSITY OF HEALTH SCIENCES

GENERAL INFORMATION

Western University of Health Sciences (Western University) 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, Western University has preserved and enhanced its mission, expanding it to include educational programs in the allied health professions, pharmacy, graduate nursing and veterinary medicine.

INSTITUTIONAL MISSION

Western University is a graduate university of medical sciences that educates health professionals to practice and teach with excellence and compassion. Within a learner-centered environment, the University encourages lifelong learning, supports faculty and student scholarly activities, provides patient care in support of clinical training, and enhances the quality of life in the region through community service.

VALUES

The people of Western University are dedicated to caring as they pursue their educational, scholarly, patient care, and public service activities. The University encourages the diversity and interdisciplinarity of its 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.

VISION

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

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-effectiveness," "e-efficiency," and "e-learning."

To ensure organizational effectiveness and development.

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 of 1977. In January 1978, COMP received pre-accreditation 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 State 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 was 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, 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 (ACH) due to its multi-faceted 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 of 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 Western University's College of Pharmacy will complement other health care team members by offering their expertise in comprehensive drug therapy management.

In March of 1998 Western University 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.

The arrival of the World Wide Web as an electronic information management tool provide 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.

Western University 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. She is the first female dean of a veterinary college in the United States. Western University is committed to providing an AVMA-accredited educational program that will serve as a new paradigm in veterinary education. Western University's College of Veterinary Medicine's goal is to enroll its charter class of students in the fall of 2003.
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 works to improve the capabilities of primary health care providers to meet the growing needs of people with disabilities.

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 will be awarded the Master of Science (MS) degree in Physician Assistant Studies. Current with this program change, the faculty developed an on-line 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.

KEY FACTS ABOUT WESTERN UNIVERSITY

- Western University of Health Sciences had the highest percentage of graduates of the nation's medical schools entering family medicine, according to New Physician magazine's 1995 Annual Primary Care Scorecard. Approximately 65 percent of the doctor of osteopathic medicine graduates are practicing in primary health care fields.
- Students in all educational programs consistently score at the top on national boards and state licensure examinations.
- Graduates of COMP are sought by top residency programs nationally and many serve as chief residents in their chosen specialties.
- Total number of alumni (1982 - 2000) is 3,094
- Enrollment 2000-2001 (as of January 15, 2001) was 1,500
- College of Osteopathic Medicine of the Pacific: 696
- College of Allied Health Professions: 352
  - Physical Therapy: 133
  - Health Professions Education: 18
  - Physician Assistant: 196
  - Health Sciences – LPAT: 5
- College of Pharmacy: 404
- Master of Nursing/Family Nurse Practitioner: 48

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, where pluralism and academic freedom are at its foundation. Western University is committed to an open environment that promotes, accepts and celebrates different points of view.

Western University is comprised of 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.

FREQUENTLY CALLED NUMBERS

President (909) 469-5200
Academic Affairs (909) 469-5578
Finance and Administration (909) 469-5693
Admissions (DO) (909) 469-5335
Admissions (All Other Programs) (909) 469-5542
Student Affairs (909) 469-5340
Office of Student Services (909) 469-5616
Western University Medical Center (909) 865-2565
Department of Physical Therapy Education (909) 469-5300
Department of Physician Assistant Education (909) 469-5378
Department of Health Professions Education (909) 469-5397
College of Osteopathic Medicine of the Pacific (909) 469-5505
Director of Student Services (909) 469-5414
Clinical Rotations (909) 469-5260
Assistant Dean of Educational Affairs (909) 469-5257
College of Allied Health Professions (909) 469-5390
College of Graduate Nursing (909) 469-5523
College of Pharmacy (909) 469-5500
Financial Aid (909) 469-5353
Learning Enhancement and Academic Development (909) 469-5408
Bursar (909) 469-5403
Technical Support Services (909) 469-5432
Multimedia Services (909) 469-5432
Registrar (909) 469-5342
Bookstore (909) 469-5416
Center for Disability Issues & the Health Professions (909) 469-5380
Security (909) 469-5475
Library (909) 469-5321
College of Veterinary Medicine (909) 469-5627
The main campus of Western University 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.

Alumni Center
The Alumni Center is a 32,000 square-foot facility, located at the corner of Gibbs and Second Streets. The main level of the Alumni Center includes the office of Alumni and Constituent Relations and three lecture halls: Cooper Hall, Swift Hall and Trendle Hall. The lower level of the Alumni Center accommodates the microbiology (The Rene', and Namey laboratories, the Oswald Suter Microbiology Prep Room) laboratories, a multipurpose teaching lab, The Roy and Marion Kramer Research Laboratory, other research labs and student lockers.

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. The bookstore is open from 7:30 am until 5:30 pm Monday through Friday. Located in the rear of the bookstore is a popular gathering place, the Hop Shoppe.

Business Center

Health Professions 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, conference rooms, and offices for the Multimedia Department and the Department of Strategic Planning and Institutional Effectiveness.

Health Sciences Center (HSC)
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 offices of the Provost, and 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.

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; offices for the Center for Disability Issues and the Health Professions; and offices for the department of Risk Management and temporary offices for the faculty and administration of the College of Veterinary Medicine.

Health Sciences Library and Learning Resources Center

The newly opened Health Sciences Library and Learning Resources Center houses the University’s book, journal and media collections. It also provides office space for the library staff, the staff of the Department of Instructional and Informational Technology, and the Learning Enhancement and Academic Development office. The ground floor is reserved for library circulation services, a disability center, historical museum, and study space where students may use laptops. Books and serial collections are housed on the second and third floors, respectively, and offices for library and instructional and information technology staff are found on the fourth floor. The basement serves as the University’s Network Operations Center and provides office and work space for the Technical Support Staff.

The mission of the Health Sciences Library is to educate by providing library materials and information services to students, faculty and staff of the University. To further student adaptability and life-long learning, it has become the goals of the staff of the Health Sciences Library to:

- monitor and evaluate the growing electronic sources on the Internet;
- add links to these sources to our internal computer collection; and
- educate our students, faculty, administration, staff and alumni so that they are able to use these resources at home, in the office, and at public and hospital libraries.

Student Services Center/South Campus Building

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

University Administration Center

The University Administration Center houses the University's executive offices. The first floor contains the offices for the Executive Vice President for Administration and Finance, Vice President of Policy and Research, Vice President of University Advancement, and the offices of Major Gifts, Special Events, Communications, Publications, and Foundation, Corporate and Government Relations. The office of the University Counsel is located in the basement.

The Office of the President and the Office of the Executive Vice President of Academic 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.

Western University Campus Gourmet

The Western University Campus Gourmet is a food court providing a Subway sandwich shop, a TCBY yogurt store, and Mamma Ilardo's pizza. The 1950s diner-themed eating establishment is designed to serve the Western University community, shoppers at Antique Row, neighboring business populations, and the general public. A lounge for Western University students occupies the back part of the Campus Gourmet building. Hours of the food court are: 7:30 am to 6 pm Monday through Friday and Saturdays and Sundays from 10 am until 4 pm.

Western University Health Care Facilities and Medical Centers

Western University Health Care Facilities and Medical Centers comprise a health care delivery network of the institution, which operates two medical centers. These medical centers have been established to meet the needs of the communities in which they are located and also to serve as training facilities for Western University students.
Western University Medical Center
360 E. Mission Boulevard
Pomona, CA 91766-1889
(909) 865-2565

Opened in 1984, Western University Medical Center is an ambulatory, primary care medical center that addresses the health care needs of Pomona's less advantaged communities, as well as those from participating managed care organizations, and provides clinical learning opportunities for Western University students. Osteopathic family physicians and physician assistants, who are also Western University faculty, and support personnel staff the medical center. In addition to health care services, the Center provides health screenings for youth athletic programs. The Center is also a member of the Pomona Clinic Coalition, made up of the County of Los Angeles Department of Health and a group of area health providers, which provides preventive and primary care health services to people who do not have medical insurance or can not afford medical care.

Osteopathic Center for Children (OCC)
4235 54th Place
San Diego, CA 92105-2303
(619) 583-7611

The Osteopathic Center for Children, the only one of its kind in the world, was founded by Viola M. Frymann, DO, FAAO, an internationally-recognized osteopathic physician and one of the founders of Western University. OCC's program helps its young patients to perform at their optimum potential. The science of osteopathy in diagnosis and treatment is integrated with music therapy, nutritional education, and other modalities that assist growth and development in the child. An educational program for families enables them to better understand and help their children. Research is an integral part of the center's operation, as is teaching osteopathic medical students about the diagnosis and treatment of exceptional children through formal instruction and observation. Dr. Frymann's staff at OCC consists of osteopathic physicians, a developmental optometrist, a neurological developmentalist, a therapeutic musician, and support staff.

The physicians and physician assistants who work at Western University Medical Centers have faculty appointments at Western University of Health Sciences and are involved in both the didactic and clinical teaching aspects of the curriculum.

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.

- During the daytime hours, security guards are assigned to patrol the parking lots directly north, and northeast behind the North Campus buildings along First Street, and they patrol the lots behind the South Campus building, Health Sciences Center and Health Professions Center. It is strongly suggested that you do not leave your car overnight in any of the parking lots or streets surrounding the campus, as a security guard is not on duty after 11:00 p.m. Mondays - Thursdays, after 7:00 p.m. on Fridays, and after 10:00 p.m. on Saturdays and Sundays.
• 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 the following in the order listed.

Campus Security (909) 623-6116, ext. 3000
Dr. Christopher N. Oberg, Executive Vice President of Finance and Administration (909) 621-5022
Dr. George Charney, Executive Vice President of Academic Affairs (909) 593-1776
Dr. Philip Pumerantz, President (909) 985-0224
STUDENT SERVICES

Recreational Facilities
Western University provides YMCA or designated fitness club individual memberships for students at no cost. If interested, students must 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 non-prime time racquetball courts, Nautilus exercise equipment, aerobics, Jacuzzi, steam rooms, etc. Family memberships may be purchased at reduced rates until the end of the month in which students begin matriculation. Western University will contribute up to $80.00 for the 1999-00 academic year for students in the MSN/FNP at the Las Vegas Track only, for a paid membership in the student's name at a fitness facility. Proof of a fitness membership is required prior to the University approving the reimbursement.

On the Pomona campus, the HPC 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.

Upon request, discount cards for all major southern California amusement parks are available in the Student Affairs Office.

Community Activities
The Western University "This Week," which is updated every week, lists Western University seminars and events that are open to students, faculty, staff and families.

Area colleges publish monthly calendars of social, cultural and educational events that are posted on the student bulletin board behind the lecture halls. Events are usually open to the public.

Student Government

Over 35 organizations have been established within the student body. The umbrella for all of the other organizations is the Student Government Association, which is charged with official representation of the student body.

Student Government Association - 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:

Commencement Committee - The purpose of this committee is to plan and, in some areas, implement the University's graduation ceremony and related events. The committee submits to the President the results of its deliberations for this consideration and approval. The committee and its chair are appointed by the
President. The Student Government Association President and the President (or an appointee) of the MSIV class are also voting members.

**Financial Aid Committee** - Student Body Treasurer, PAI Class Treasurer, MSII Class Treasurer, PharmDII Class Treasurer and MPTI Class Treasurer, will be voting members. The student members may be excluded from certain meetings if the discussion includes confidential material from other students’ files. The duties of this Committee are to select students for scholarships and assist the Director of Financial Aid in formulating policy regarding financial aid programs. The Committee is comprised of faculty representatives, the Dean of Student Affairs, the Director of Financial Aid and two students.

**The Humanism in Health Sciences Committee** - To create a climate for defining, teaching, and implementing humanism and diversity through various ongoing programs. These programs are grounded in a philosophy that fosters valuing the diversity and humaneness of persons on our campuses and in our communities. The committee will support and encourage scholarly activities that promote humanism and diversity.

**Library Committee** - One representative from each class on campus will be a voting member. The duty of the Committee is to advise the Librarian in matters of concern to the faculty and students relevant to the Library.

**University Student Conduct Committee** - The function of the Student Conduct Committee is to investigate alleged violations brought to its attention by the Academic Deans. The Committee may recommend a course of action if a violation has been identified.

**STUDENT ORGANIZATIONS**

The following organizations are currently approved and active on campus:

**American College of Osteopathic Family Physicians (ACOFP)** - Promotes the training of osteopathic family physicians and provides a better understanding of the scope of services rendered by the osteopathic family physician. Advisor Emeritus: Dr. Burton Routman.

**The American Medical Women's Association (AMWA) and the National Osteopathic Women Physicians' Association (NOWPA)** - These are two national and on-campus organizations that exist for the purpose of supporting women in medicine. Our on-campus chapters are very active in supporting women medical students by hosting both DO and MD speakers, sending members to National Women's Health Care Conventions, networking through the annual Mentor Dinner, running the Nursery Nutrition Project, supporting the Los Angeles Babies with AIDS Walk-a-Thon and developing Board Review Notes. In addition, both organizations have access to low interest student loans, grants and fellowships. Most importantly, AMWA and NOWPA exist for the purpose of making friends, lending support and rendering service within our campus and local community. Advisor: TBA

**American Pharmaceutical Association-Academy of Students (APhA-ASP)** - APhA exists to serve its members, to enhance pharmacists’ abilities to provide pharmaceutical care, and to further the public’s recognition of the pharmacists’ value as a health resource. As an academy of APhA, ASP promotes the professional practice interests of pharmacy students, establishes programs/activities for members, and provides a means for members to participate in APhA's policy-making process. Advisor: Dr. Joanne Yasuda.

**Asian-American Health Profession Student Association (AAMSA)** - Enhances the awareness of the Asian communities to the osteopathic profession and provides services to the University and Asian communities. Advisor: Dr. Stanley Wong.
Biomedical Research & Literature Club (BIOMED R & L) - Reviews current medical literature and presents reviews and case studies. Advisor: Dr. James Martin

California Doctors Ought to Care (CAL-DOC) - Through patient education, to get people to stop smoking, and thereby have them live longer, healthier lives. Advisor: Dr. Richard Sugerman.

California Society of Health-System Pharmacists-Western University (CSHP-Western University) - The purpose of CSHP-Western University is to provide students an opportunity to become knowledgeable about pharmacy practices in organized healthcare settings. Advisor: Dr. Kari Franson.

Chicano/Latino Medical Student Association (CMSA) - Serves as part of a statewide communication and support network for medical and pre-medical students interested in developing health care services for Hispanic underserved communities. Advisor: Ms. Susan Hanson.

Christian Medical/Dental Society (CMDS) - Encourages and aids Christian students in their spiritual and professional growth through weekly meetings and other special events. Advisor: Ms. Bonnie MacKay

Digital Medicine Association (DMA) – The purpose of the DMA is to explore the integration of information technology in health care and to enhance health professions education programs through the inclusion of informatics. Advisor: Scott Helf, DO

Emergency Medicine Club (EMC) - Promotes the interest and education of students in emergency medicine and exposes them to a variety of common emergencies. Students will be exposed to practical procedures they can use in their third and fourth years. Instruction and practice will be provided of invaluable techniques necessary in the field of emergency medicine. Advisor: Dr. Jonathan Leo; Dr. Francis Yang

Hillel - Provides access on the Western University campus to Jewish culture. Meets to discuss pertinent aspects of Jewish life through seminars and invited speakers. Also seeks to establish a link between students and the surrounding Jewish community. Advisor: Dr. Richard Sugerman.

International Medicine Club - Promotes cross-cultural experience and community involvement to better appreciate primary care. Students invite physicians to share their experiences in international health. The club also sponsors medical student foreign exchange through the International Federation Medical Student Association (IFMSA). Advisor: Dr. Rafi Younoszai.

Islamic Medical Society of Western University - Serves as a religious outlet and meeting place for the growing number of Muslim students on the Western University campus. Activities include campus celebrations of two holidays, Eld u'l'Fitre, Eld u'l'Adha, speakers and a companion program with Pilgrim Place, a convalescent home in Claremont. Advisors: Drs. Nadir Kahn and Rafi Younoszai.

Latter-Day Saints Student Association (LDSSA) - This organization was founded to establish and provide a spiritual balance to medical education through discussions and activities geared to that purpose. Advisor: Dr. Jonathan Leo.

Los Angeles County Medical Association – Medical Student Section, Western University of Health Sciences Osteopathic Chapter. The Western U chapter of the LACMA – Medical Student Section promotes osteopathic principles and practice in Los Angeles County via educational presentations to other health professionals and potential practitioners. The organization serves educate members about issues pertinent to the field of medicine and provide students with access to legislative policy surrounding organized medicine. Students serve on policy-making committees and attend seminars, conventions and political rallies to insure adequate representation of COMP. Advisor: Michael Jeong, DO
Middle Eastern Medical Students Organization (MEMSO) - This organization is to unite students of Middle Eastern background and promote their cultures on campus. Advisor: Dr. Nadir Khan.

Military Club - The Military Club is open to all students regardless of military affiliation. Those students on military scholarships will have the opportunity to join student chapters of the Association of Military Osteopathic Physicians and Surgeons (AMOPS) and the Uniformed Services Academy of Family Physicians (USAFP). The primary goals of the club are to: provide information concerning rotations, internships and residencies in military facilities, provide information concerning the practice of osteopathic medicine and family practice medicine within the armed forces, to provide information concerning life and opportunities in the military in general. Advisor: Dr. Richard Sugerman.

Montclair Clinic - Students volunteer to provide health services at a "free" clinic in Montclair.

Neocortex Yearbook - A yearbook is published annually for the University. Students write, draw, design, edit and take photos for the yearbook. Advisor: Ms. Patti Delesante.

Osteopathic Physicians and Surgeons of California - Medical Students Section (OPSC-MSS) - Provides an avenue for student input to the state medical association and allows early involvement in OPSC. Helps DO candidates to enhance their career opportunities through collegial relationships with practicing physicians via participation in CME seminars; clinical preceptorships, and guidance of physician mentors. Advisor: Dr. Jay Porcelli; Dr. Alan Cundari.

Physical Therapy Awareness Club (PTAC) - Provides opportunities for all students to partake in various PT related lectures, convocations, debate panels including current issues and legislation and technique demonstrations. Activities include guest speakers, participation in APTA functions and hands-on treatment techniques. Advisor: Dr. LeeAnne Carrothers.

Pomona Community Health Action Team (PCHAT) - The purpose of this club is to provide and serve the medical needs of the Pomona Community. Advisors: Dr. Rafi Younoszai and Dr. Burt Routman.

Santa's Workshop - Western University students provide assistance to disadvantaged families during the holiday season. Advisor: Ms. Gisele Tackoor.

SANUS: The World's Only Osteopathic Theater Troupe - Promotes health through artistic expression. Theatrical production company composed of production staff and cast who will select two plays to be presented annually. Advisors: Drs. Jeffrey Felton and Dennis Kiick.

Sigma Sigma Phi - This fraternity was established to provide service to the University and profession and is the official osteopathic honorary fraternity. It promotes educational programs for the entire student body and participation in community projects, health fairs, high school athletic physicals and blood pressure checks. Advisor: Dr. George Charney.

South Asian Student Association (SASA) - The purpose of this organization is to raise awareness of South Asian Students in osteopathic medicine and to provide an interdisciplinary forum for South Asian students to share their cultural identity. Advisor: Dr. Nadir Khan.

Sports Medicine Club - The purpose of this group is to provide seminars, speakers and other educational avenues for students interested in Sports Medicine. Also, to sponsor school and club health checks, act as liaison to area athletic events and possibly engage in research. Advisor: Dr. Casey Chaney; Dr. Alan Cundari.

Student Associate Auxiliary (COMPléments-SAA) - COMPléments is the Student Associate Auxiliary (SAA) for spouses and partners of students and is chartered by the national Auxiliary to the American Osteopathic Association (AAOA). It has been organized by the Auxiliary to the Osteopathic
Physicians and Surgeons of California to further the goals of the University and the osteopathic medical profession, to serve the local community and to promote fellowship and unity within the school. SAA COMplements regularly plans social, cultural and charitable activities for the benefit of the students, spouses, University and community. Advisor: Mrs. Jeanne Charney.

**Student National Medical Association (SNMA)** - Fosters a commitment for students to excel and mentor. Our goal is to produce quality health care team members armed with the knowledge, skill and insight needed to practice medicine within underrepresented communities. Advisor: Dr. Beverly Guidry.

**Student Osteopathic Internal Medicine Association (SOIMA)** - the purpose of this organization is to represent aspiring internists through an early exposure to the field of internal medicine. Advisor: Dr. Kevin Jenkins.

**Student Osteopathic Medical Association (SOMA)** - Provides community service to increase awareness of osteopathic medicine. Sponsors lecturers, blood pressure clinics, etc. Advisor: Dr. Donald Krpan.

**Student Osteopathic Surgical Association (SOSA)** - Provides opportunities for all students to learn about surgery as a career and helps students develop basic skills for their clinical rotations. Activities include operating room shifts for all interested students and procedure workshops including suturing, casting, central lines, chest tubes and lumbar puncture. Advisor: Dr. Jonathan Leo.

**Undergraduate American Academy of Osteopathy (UAAO)** - Promotes the instruction and understanding of unique osteopathic principles and technique. Guest lecturers are invited to the campus to speak to members on manipulative therapy and osteopathic philosophy. Advisor: Dr. David Redding.

**Women's Health Interest Group** - To further the interest of students considering a career in Obstetrics and Gynecology, Family Medicine, or other Primary Care women's health. Advisor: Dr. Kay Kalousek.

**Western University of Health Sciences/Physician Assistant Student Society (WUHS/PASS)** - To promote the Physician Assistant profession and represent the University at the national level. Advisor: Mr. Roy Guizado.

**STUDENT EMPLOYMENT**

Because of the nature of the academic program of the University, students are urged to use great caution in seeking employment during the academic year.

The University does have a work-study program for students who qualify. For more information, contact the Financial Aid Office.

**HEALTH SCIENCES LIBRARY AND LEARNING RESOURCES CENTER**

Location: Corner of Third and Gibbs Streets – entrance is on Gibbs Street

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Study Rooms – The library has seven study rooms that may be used for study groups on a first-come, first-served basis. Laptops may be used on the first floor or on the second and third floors in the study rooms only.
Audio-Visual Lab – The lab may be used by WesternU students, faculty and staff only. Videos and slides are available for use with televisions, VCRs, and slide projectors. There are also six computers that may be used with several CD-ROMs that are available in the Lab.

Computer Lab – This lab may be used by Western University students, faculty and staff. There are twelve computers that may be used to search the Library’s WebCat (online public catalog), or do research on the Internet. Workshops will be held in this lab periodically.

Interlibrary Loan – Material not owned by the University Library may be requested via interlibrary loan by Western University faculty, staff and students. There is a charge for this service.

Borrowing Privileges and Policies – Western University faculty, staff and students are eligible to borrow library materials. Other interested users may be eligible and should inquire at the Circulation Desk.

- **Books**: On campus students may check out items for seven days and renew them twice if no one else has requested the time. Students on rotation and distance education students may check out items for one month with no renewal. Fines are charged for overdue books. Renewals may be made by phone. A “hold” may be placed on books that are charged out. **You must have your student ID/employee ID with you in order to borrow books.**
- **Journals**: Bound or unbound journals (periodicals, newsletters, etc.) do not circulate.

Note: More detailed information, especially in regard to library fines and student conduct within the Library, may be found in the *Library Handbook* at the Circulation Desk.

**CENTER FOR DISABILITY ISSUES AND THE HEALTH PROFESSIONS**
(SECOND FLOOR, HEALTH SCIENCES CENTER)

The Center for Disability Issues and the Health Professions assists students with disabilities from the time of admission to graduation. The Center is located on campus at 309 E. Second Street/College Plaza, (909) 469-5385 voice, (909) 469-5520 TDD or email bpremo@westernu.edu.

**CDIHP Services**

Each student at Western University is unique. Only upon consultation with the student, dean and faculty member can specific plans for accommodations be made. To assist with a documented disability, staff from CDIHP may communicate, when appropriate, with the instructor and may also ask the student to discuss his/her needs with the instructor. Decisions on appropriate accommodations, auxiliary aids and/or services are made following an individualized assessment of each request and after discussion of the options available with one of the CDIHP staff.

The following is a sample list of the types of services and accommodations that might be provided, based upon CDIHP’s assessment of each student’s specialized needs:

- academic modifications
- disability management advising
- auxiliary aids
- examination accommodations
- mobility assistance
- physical access and architectural modification (i.e., building platforms or adding disabled parking spots)
- reader services
- study skills advisement
- taping of academic lectures
- transcription services for specific classes
- extended time for examinations
- a private, quiet, well-lit room for examinations
• alternative testing formats
• consultation with staff of CHIHP and professors regarding facilitation of education of students with disabilities

It is a student’s responsibility to provide timely and sufficient written medical documentation about the student’s disability or disabilities. Students must check with the Center about documentation requirements. Students must request services or accommodations directly from the Center, which in consultation with the student, can recommend the appropriate services or accommodations. There is no charge to students for services that are specifically needed to support the educational program.

For additional information, contact Ms. Sharon McCrary at (909) 469-5447; TDD (909) 469-5520 or check the Center’s web page at www.westernu.edu/cdihp.

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 Western University 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
(BASEMENT, UNIVERSITY ADMINISTRATION CENTER)

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 (Course Director, Dr. Mahtab Jafari); and
• Care Teams and Monthly Care Teams News.

STUDENT HOUSING

The University does not provide on-campus or off-campus housing accommodations for its students; however, there is an off-campus housing referral system to help students locate houses, apartments, roommates, etc. A local map, the real estate sections of local newspapers, and information on activities in the surrounding communities are available in the Student Affairs Office. Incoming students may wish to subscribe to the local newspapers: the Claremont Courier, 111 South College Avenue, Claremont, 91711; and the Inland Valley Daily Bulletin, 2041 E. 4th Street, Ontario, 91761-1020.
All students on clinical rotations are responsible for making their own housing arrangements. Some hospitals offer housing on a first-come, first-served basis. It is the student's responsibility to contact the hospital for information regarding availability and cost of housing. The COMP Office of Clinical Rotations has a housing book available for the perusal of DO students and will assist as much as possible with guidance regarding housing, but the final responsibility for housing arrangements will be the student's. 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 sticker for $180. 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 this parking lot between the hours of 7:00 a.m. to 6:00 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 lots 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 - Annual parking permits are also available at a significant discount ($140, or quarterly at $40) through the City of Pomona for those individuals wishing to pay for their parking in this manner. Applications are available in the Student Affairs Office, or contact the Pomona City Hall Treasurer's Office, 505 South Garey Avenue, Pomona, CA 91766, (909) 620-2262. Those who elect to park in the metered lots without a permit will be required to pay 75 cents per day per vehicle.

Parking along the streets is permitted with certain posted restrictions.

Secured bicycle parking is available on the west side of the Student Services building. Motorcycles must be parked in the parking lots.

PSYCHOLOGICAL COUNSELING SERVICES:
877- WESTRNU (877-937-8768) OR (949) 650-2217

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 Mental Health Alternatives 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.

Mental Health Alternatives
Dominic J. Bronell, Ph.D.
W. Doyle Edson, Ph.D.

Locations
4B-4 Village Loop Road 881 Dover Drive #390
Phillips Ranch, CA 91766 Newport Beach, CA 92663
OFFICE OF LEARNING ENHANCEMENT AND ACADEMIC DEVELOPMENT  
(SECOND FLOOR, HEALTH PROFESSIONS CENTER)

The Office of Learning Enhancement and Academic Development (LEAD) is a division of the Office of Strategic Planning and Institutional Effectiveness. The LEAD Office’s goal is to help each Western University student successfully complete his or her course of instruction. The Office assists students in many ways. The Director interviews students in academic difficulty and evaluates their respective approaches to learning, study and processing information. The Director devises and implements methods to solve identified barriers to successful learning and aids individual students during their processes of resolution. The Director plans and implements group workshops to enhance learning skills each year for students in each Western University program. The Director 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 selected 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 assist in the administration of the Summer Anatomy Prematriculation Program (SAPP). SAPP is a three-week program designed to orient incoming, first-year osteopathic medical students to the Western University campus and community, and to ease adjustment to the demands of their academic environment. It serves as a “head-start” for students with little or no background in anatomy. The LEAD Office endeavors to enhance all students’ sense of belonging by working closely with individual students in overcoming environmental, social, cultural, or academic barriers that may interfere with their learning.

The LEAD Office serves all Western University students. All academic and personal counseling and referrals to other campus services are completely confidential. The Director is available for students on a walk-in basis or appointments can be made by phone or e-mail. The office is located in the Health Professions Center on the second floor. Office hours are 8:30 a.m. to 4:30 p.m., Monday through Friday. The Director can be reached by phone at (909) 469-5408 or e-mail dhacker@westernu.edu.

UNIVERSITY REGISTRAR  
(FIRST FLOOR, STUDENT SERVICES CENTER)

STUDENT FILES: PRIVACY AND ACCESS

The Family Educational Rights and Privacy Act of 1974, also known as the Buckley Amendment, (a) establishes a post-secondary student's general right to inspect and review his/her academic records and (b) generally prohibits outside parties from obtaining the information contained in such records without the student's written consent. A student may choose to waive access to certain confidential recommendations placed in the file.

The paragraphs below delineate the procedures under which Western University will meet the law's requirements. Western University currently maintains the following types of educational records that are directly related to its students.

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 Western University 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.

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:

(a) Financial records of parents or any information contained therein, or
(b) Any confidential recommendations to which the student has properly waived the right of access.

A student who desires to have any material in the files altered or expunged on the grounds that such material is inaccurate or misleading, or that is being maintained in violation of his/her right to privacy or other rights, may obtain a hearing before a special committee. The special committee will be composed of representatives of students, faculty, and administrators. At the hearing, the student will be afforded a full and fair opportunity to present evidence relevant to the issues raised. The committee's decision will be made in writing within a reasonable period of time after the conclusion of the hearing. The committee's conclusions may then be appealed by means of a complaint filed with the U.S. Department of Education. Whether or not a student requests a hearing and regardless of the outcome of any such hearing, the student may in any event insert into his/her files a personal written explanation concerning any material the student believes is inaccurate, misleading, or otherwise inappropriate.

Reviewing the File

Students and former students may review any of the above files that directly relate to them upon completion of a form available from the Registrar. On this form the student will specify the records he/she wishes to examine. The Registrar will then collect the desired material. In no case will access be withheld more than 45 days after the proper request has been made. If the student wishes, the University will also supply copies of material in the file at 25 cents per page.

The privacy of student files is and will continue to be scrupulously maintained. Western University will make public without consent only certain "directory information." This information consists of a student's name, address, telephone listing, e-mail address, photograph, class schedule, full- or part-time status, date and place of birth, major field of study, dates of attendance, degrees and awards received, and the most recent previous educational institution or agency attended by the student. A student who prefers that some or all of such "directory information" not be made public, must notify the Registrar in writing within ten (10) days after registration day.

Except for directory information and except as to certain parties listed in the Act, the University will not release to outsiders any student's file, or information contained in it, unless prior written consent has been obtained from the student. The outside parties excepted by the Act generally consist of certain federal and state officials, accrediting organizations and educational agencies who need the information for valid educational purposes. The University is also authorized to release information contained in a student's file in any emergency situation involving the need to protect the health or safety of the student or other persons.

A student (or applicant for admission) is permitted to waive access to confidential recommendations written on his/her behalf regarding, (1) admission to any educational agency or institution, (2) an application for employment, or (3) the receipt of an honor or honorary recognition.

A student who consents to release to outside parties any part of his/her file must do so in writing, personally signed and dated. Such writing must specify the records to be released, the reasons for such release, and the names of the parties to whom such records will be released. A form is available in the Registrar's Office for this purpose. A student whose consent is required may also request a personal copy of the specific records in question. As stated previously, there is a copying fee.

The University will maintain a record identifying all outside parties who have requested or obtained access to a student's educational records and the specific interest they had in obtaining such access. This
All such records are made available to students with the following limitations:

a. Recommendations submitted to the department by third parties under conditions of confidence, e.g., letters of recommendation, will be shown only upon receipt of a signed release by the third party;

b. Student records requiring the interpretation of a professional, i.e., medical, psychiatric, psychological testing, etc., must be reviewed in consultation with the appropriate professional;

c. Generally, the school must have written permission from the student before releasing any information from a student's record. However, the law allows schools to disclose records, without consent, to the following parties:
   - School employees who have a need-to-know
   - Other schools to which a student is transferring
   - Certain government officials in order to carry out lawful functions
   - Appropriate parties in connection with financial aid to a student
   - Organizations doing certain studies for the school
   - Accrediting organizations
   - Individuals who have obtained court orders or subpoenas
   - Persons who need to know in cases of health and safety emergencies
   - State and local authorities to whom disclosure is required by state laws adopted before November 19, 1974.

Three items of information from student records are considered "public" information:

- the fact of attendance
- the dates of attendance and
- the fact and date of graduation

With the exception of the above, no other student record information is divulged or released to persons or agencies outside the University without the expressed written request or authorization of the student.

d. Under certain circumstances, the program may request written permission of the student to provide demographic data such as names, addresses, etc., to persons or agencies outside the University conducting research or other scholarly activities.

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 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 will receive one unofficial copy of their transcripts after grades have been posted at the conclusion of each academic year. 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 Academic 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 below a grade of "U" or "I". Only the remediated grade is calculated into the GPA.
To request an official transcript, a form must be completed in the Registrar's Office. There is a $5.00 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. In extreme emergencies, transcripts may be faxed for a fee of $10.00, provided that a Fax Disclaimer form is completed and the fee is paid. 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 two weeks. 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, State or National Board Scores, and letters of recommendation for internships, residencies, employment, staff privileges, specialty certification, and licensing. Remember to allow two weeks for processing of transcript requests.

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.

CLASS RANK
Student's class ranking, with the exception of MSHPE, FNP/MSN and PharmD, may be obtained from the Registrar's Office in writing, with appropriate identification. The class ranking is based on letter grades and/or percentages.
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 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 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 Dean of Student Affairs or her designee. Complaint forms may be obtained from the Dean of 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 Western University's Sexual Harassment Policy (See below).

All complaints of discrimination shall be investigated promptly and resolved equitably. The Dean of Student Affairs will refer the matter to the appropriate Academic Dean, the Executive Vice President for Academic Affairs/CAO, or to the Executive Vice President of Finance and Administration, (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 Western University, 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 Western University'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.

Western University 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 Western University.
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. Any student with a disability who believes that he or she is unable to meet the Minimum Technical Standards, but believes that a reasonable accommodation will permit that student to complete the program successfully, should contact the Learning Enhancement and Academic Development Office (LEAD) as soon after admission as possible. 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:
   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:
   The 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.
   a. Construction of New Buildings and Facilities:
      1. 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.
      2. 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.
   b. Renovation and Alteration of Existing Buildings and Facilities:
      1. 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.
2. 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 Western University that all persons, regardless of their gender, should enjoy freedom from discrimination of any kind. Sexual harassment is a form of sexual discrimination, and Western University 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.
3. 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 Western University.
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 Dean of Student Affairs, or her designee. Complaint forms may be obtained from the Dean of Student Affairs' office.

To protect all parties involved, Western University 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 Dean of Student Affairs, or her designee, the complainant, and the alleged harasser;
b. A meeting among the Dean of 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 Dean of Student Affairs will refer the matter to an appropriate official of Western University, as follows:

a. In the case of an offending student, the complaint will be directed to the appropriate Academic 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 Executive Vice President for Academic Affairs/CAO, the Executive Vice President of Finance and
Administration, 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 Western University'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 Western University, the decision of the President shall be final. Any person who believes that he/she has been the victim of sexual harassment at Western University is, however, entitled to file a complaint with an applicable state or federal agency at any time during Western University's proceedings.

**DRUG-FREE ENVIRONMENT**

Western University 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 Western University counseling center, (contact the Student Affairs Office for name and phone number), offers assistance to students. Students are encouraged to check with their private insurance carrier for available programs. For those with Western University insurance, the name and phone number for the insurance carrier is Renaissance, (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 Dean of 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.

STUDENT HEALTH AND SAFETY
Matriculants into Western University'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. 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 Western University. Proof of such coverage is required at the time of each
registration. Health insurance is available through the University at a reasonable cost.

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, scrubsuits 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 Academic 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 inside campus buildings, health care facilities where patient care is delivered, or inside University
vehicles.

REQUIRED IMMUNIZATIONS
Since students will have some exposure to patients during the first year, NO STUDENTS WILL BE
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 or serologic titers showing immunity), Polio, Tetanus/Diphtheria (within 10 years), Hepatitis B (proof of completion of 3 shot series or serologic titers showing immunity), P.P.D. (Purified Protein Derivative) (within the last six months) or chest x-ray (within the last year), Varicella (chicken pox) - proof of completion of the age appropriate immunization series or positive serologic titers. These immunizations/tests may require updating on a more frequent basis prior to beginning clinical training if specified in the affiliation agreement with the clinical training site. POSITIVE PPD OR CHEST X-RAY MUST BE FOLLOWED UP AT THE UNIVERSITY CLINIC.

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.

No student will be permitted to register or attend classes without having proof of completing required immunizations.

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.

No food or drink is allowed in the Library at any time.
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 Western University 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.

1. 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. 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 and contribute to his or her training and growth.

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. A violation of these standards is an abuse of the trust placed in every student and could lead to suspension or dismissal.

2. Orientation/Registration

Attendance at Orientation is mandatory for all incoming first-year students for the DO, PharmD, MPT, MSPA, and MSN/FNP programs.

a. Students will be required to register in person on the registration day specified in the University Calendar or as otherwise directed by the Registrar. Assessed tuition and fees and all prior debts must be paid in full on or before registration day each academic year.

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

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

d. All DO, MPT, MSPA, PharmD and MSN/FNP 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. If there is no proof of current coverage, a health insurance policy provided by the University is available.

3. 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 Academic Dean. Except in rare and special circumstances, the application will be accompanied by a personal interview. 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.
In addition, students must report to the Registrar's Office to sign the withdrawal form to officially withdraw from the University/Program. Students who do not complete this application for voluntary withdrawal will not be considered for re-admission at a later date.

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 Academic 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.

4. 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 requesting a Leave of Absence must apply in writing to the appropriate Academic Dean. 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 Academic 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 year must go through the following procedure:

a. In writing, request a Leave of Absence from the appropriate Academic Dean.
b. Obtain a Leave of Absence form from the Registrar. After completing the student’s portion, meet personally with the appropriate Academic Dean or designee to discuss the reason for the leave. After consulting with the appropriate Academic 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.
c. Take the form to the faculty advisor, who will provide counsel and sign the form.
d. Take the signed Leave of Absence form to the other listed administrative officials for their signatures.
e. 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, 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 Academic Dean, 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 appropriate Academic Dean.

5. Academic Advisement
Students will be assigned a faculty advisor upon matriculation. 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
Academic 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.

6. 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.

7. Student Academic Progress Committee
   See the appropriate Program Specific section of this catalogue.

8. Standards of Professional Conduct: Statement and Procedures
   Complete confidence in the honor and integrity of the health professional is essential. Such confidence depends entirely on the exemplary behavior of the individual 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, to relations 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.

   Professional Concerns - Upon accepting admission to the University, each student agrees to abide by basic standards of honesty and academic integrity. Students should only matriculate here if they agree with these basic standards. They include, but are not limited to, the following:
   
   a. A student never represents the work of others as his/her own.
   b. A student should acknowledge the other members of the group when work is carried out jointly.
   c. A student never gives or receives assistance during an exam.
   d. A student is always accountable to clinical faculty while on clinical training.

   Acts of dishonesty, invasion of privacy, theft, acts of violence, sexual harassment and disrespect for personal and University property are examples of unacceptable behavior.

   The administration, faculty and staff are here to serve the students. Personal gifts are discouraged, and monetary gifts are prohibited.

   Reporting Alleged Violations - Upon witnessing a possible professional violation, any member of the academic community should report the incident to the respective Academic 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 Academic Dean. The report should include the name and signature of the individual making the report.

   In most circumstances, the Academic Dean will meet with the student to discuss the nature of the possible violations that have been reported and the actions, if any, that the Dean intends to take. The Dean may resolve the matter without convening a hearing before the Student Conduct Committee, unless the student requests that a hearing be convened. In some circumstances, the Academic Dean or the Executive Vice President for Academic Affairs/Chief Academic Officer may refer the matter directly to the Student Conduct Committee for hearing.

   When a matter is referred to the Student Conduct Committee, the University 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 or the Executive Vice President of Academic Affairs/Chief Academic Officer may prepare the written charges. The Chair of the Student Conduct Committee, or the chairperson of the hearing panel that will hear the matter, will notify the student of the time and date of the hearing and shall provide the student with a copy of the written charges.
9. **Student Conduct Committee**

   **Purpose** - The Student Conduct Committee considers violations of the Standards of Professional Conduct when requested by the respective Academic Dean.

   **Composition** - The Student Conduct Committee is composed of six elected faculty members. The Dean of Student Affairs is a non-voting, ex officio member of the committee. When the Dean of Student Affairs is absent or unavailable, a designated representative will participate in Student Conduct Committee proceedings or hearings. Student representatives shall participate as members of hearing panels when a matter concerning a student is referred to the Student Conduct Committee for hearing.

   **Hearing Panels** - When a matter concerning a student is referred to the Student Conduct Committee, it will be determined by a hearing panel comprised of three faculty members serving on the Student Conduct Committee and two student representatives. Student representatives shall be from the same College as the student involved, and shall be selected from the Vice Presidents and Secretaries of each class on campus. The Chair of the Student Conduct Committee shall appoint the individuals who will serve on the hearing panel, and shall designate one member of the hearing panel as its Chairperson. If it is not reasonably feasible for the Chair of the Student Conduct Committee to appoint hearing panel members from the foregoing individuals, either because of a conflict of interest or for any other reason, the Chair may appoint alternate faculty members or student representatives to serve on the hearing panel. The Dean of Student Affairs, or a representative of the Dean of Student Affairs, is entitled and normally participates as a non-voting, ex officio member of each hearing panel. Each hearing panel acts with the full authority of the Student Conduct Committee, and the hearing panel's determination constitutes the determination of the Student Conduct Committee as a whole.

   **Protocol for Meetings on Alleged Violations of Professional Conduct** -
   
   a. The chairperson of the Student Conduct Committee, or the chairperson of the hearing panel, will notify the student in writing of the specific charges and the time and date of the hearing when the charges will be considered. The notice also shall state whether expulsion from the University may be considered if the charges are found to be true.

   b. Except as provided below, the meeting will be closed to all individuals not directly involved. The hearing panel may exclude witnesses, except during the time they are testifying.

   c. 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 other circumstances warrant, the student may request permission for a mentor to appear at the meeting to assist the student. The advisor is normally limited to advising the student and is not permitted to examine witnesses or otherwise participate directly in the proceeding. However, the hearing panel may permit the mentor to participate directly where special circumstances are shown that warrant such participation. The student shall make any request for permission for a mentor to appear or participate in writing, which shall identify the mentor the student desires and provide any additional information the student deems relevant to the request. Normally, the chairperson of the hearing panel will inform the student within three business days of receipt of the request whether the mentor will be permitted to attend the hearing.

   d. If requested, the specific charges will be read to the student by the chairperson of the hearing panel. If the charges are not read, the charges will be deemed to be those specified in the notice of the hearing.

   e. The student may testify and present evidence and witnesses on his/her behalf. The student is subject to questioning by members of the hearing panel, as are all witnesses.

   f. The student may question witnesses called by the hearing panel.

   g. The hearing panel may, if it chooses, consider affidavits, declarations and other written statements and documents. Under normal circumstances, the student shall be provided copies of any such documents at least two days prior to the hearing. If the student desires to present any written documents, they must be provided to the hearing panel at least two days prior to the hearing. The hearing panel shall give such weight to the documents, as it deems appropriate under the circumstances.

   h. The chairperson of the hearing panel, at his/her discretion, may continue any hearing if warranted due to the unavailability of a person considered important to the hearing or due to other circumstances. It shall be the responsibility of the student to present all evidence he/she deems relevant at the scheduled hearing unless such evidence cannot be presented due to circumstances beyond the student's control.

   i. The hearing panel shall determine whether, based on the evidence presented, it is more likely than not that the charges made are true.
j. The hearing panel determines that the charges are true, it shall also make a recommendation with respect to sanctions to be imposed. The hearing panel may consider any prior disciplinary action against the student and any other information it deems pertinent in making a recommendation. The student shall have the right to present evidence of any mitigating circumstances he/she deems relevant, but such evidence must normally be submitted within two days of notification to the student that the hearing panel has found the charges to be true.

k. No deviation from the procedures specified herein shall be grounds for objection by the student unless the student calls an error to the attention of the hearing panel in time to permit the hearing panel to conform to the specified procedure. Moreover, procedural deviations shall not be grounds of objection where, under all of the facts and circumstances, the student has been provided fair notice of the charges and a fair hearing.

l. The hearing panel will make its recommendations to the appropriate Academic Dean.

Status of Student Pending Action - Pending a determination by the appropriate Academic Dean following a hearing and a recommendation by a hearing panel of the Student Conduct Committee, 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. Thereafter, the status of the student will not be altered pending determination of a timely appeal by the student, except that the Executive Vice President for Academic Affairs/Chief Academic 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 Academic 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

10. Promotion

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

a. A student will be recommended to the appropriate Academic Dean for promotion by the respective Student Academic 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", "R", 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).

c. 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).

d. 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.

11. Probation

a. Probation is defined as a period of time, specified by the appropriate Academic Dean, during which the student's progress will be closely monitored by the respective Student Academic Progress 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:

1. Inadequate academic progress as determined by the specific Student Academic Progress Committee (see appropriate Program Specific section of this Catalog).

2. When directed to repeat a year for academic reasons.

3. 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.

b. When a student is placed on probation, he/she will be notified in writing by the appropriate Academic 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 Academic 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 Academic Progress Committee and the student's Faculty Advisor. The Student Academic Progress Committee will consider when the terms of the academic probation have been satisfied and recommend to the appropriate Academic Dean that probation can be rescinded.

c. 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.

d. 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.

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

f. 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.

12. Remediation

Every effort will be made to provide each student ample opportunity to demonstrate competency in each area of the academic program. Please see appropriate Program Specific section.

13. Remediation: Financial Aid Policy

Students who are required to repeat coursework due to an unsuccessful prior attempt must contact a Financial Aid officer in regard to financial aid eligibility.

Students who have been recommended by the Student Academic Progress Committee and appropriate Academic Dean to repeat the year due to unsatisfactory progress (GPA) or in cases where there is a satisfactory GPA, but deficiencies are noted that impede promotion, the following criteria must be met to be eligible for financial aid:

a. Full time attendance recorded.

b. Placed on one-year probation.

c. Must be tested and graded.

d. Must be monitored closely.

It is the student's choice to audit course work to strengthen skills as long as he/she has met satisfactory progress such as GPA and is fully aware that he/she will not be eligible to apply for any financial aid to cover these audit costs. The student will be financially responsible for himself/herself until promoted by the appropriate Academic Dean.

If, at the end of the academic year, the student is still considered to be making unsatisfactory progress and must remediate, he/she is removed from the list of Title IV and Title VII financial aid recipients. Summer remediation is not covered by financial aid and cannot be considered an expense item on the next year's budget.

Appropriate tuition and fees will be determined by the Executive Vice President of Finance and Administration.

14. 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.

Either the President, Executive Vice President for Academic Affairs/CAO, or appropriate Academic Dean has the authority to summarily suspend a student when the student admits to guilt or when, in the
opinion of the President, Executive Vice President for Academic Affairs/CAO or appropriate Academic 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 Academic Dean can be made to the Executive Vice President for Academic Affairs/CAO. Any student who has been summarily suspended may also request, in writing to the appropriate Academic Dean, a hearing by the Student Conduct Committee, and a hearing shall be convened within ten (10) working days of the date such request is made. Students who are suspended are not entitled to remain in class or on clinical rotations/assignments during the appeal.

15. Dismissal

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

The Student Academic Progress Committee may recommend dismissal of a student as provided in the Program Specific section of this Catalog.

The Student Conduct Committee may recommend dismissal of a student for matters pertaining to suspected personal or professional misconduct that include, but are not limited to: academic integrity, unsatisfactory attendance, inappropriate interaction with instructors, fellow students, and University and hospital personnel, improper approach to and interaction with patients, and inappropriate personal dress/appearance.

In its deliberations, the Student Conduct Committee/Student Academic Progress Committee may consider the student's academic record and will also consult with the student's faculty advisor, the student, and other faculty and administrators when appropriate. After considering all pertinent information, the Student Conduct Committee/Student Academic Progress Committee will forward its written recommendation regarding dismissal to the appropriate Academic Dean.

The decision will be made by the appropriate Academic Dean, based upon the recommendation of the Student Academic Progress Committee or Student Conduct Committee. The Student Academic Progress Committee or Student Conduct Committee will base its recommendation not only on the student's academic record, but will also consult with the student's faculty advisor, other faculty and administrators, and the student involved, when appropriate.

16. Student Appeal Process

The appropriate Academic 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 (5) working days following written notification to the student of the action of the respective Academic Dean, the student may appeal the decision in writing to the Executive Vice President for Academic Affairs/CAO. Upon written request from the student, the Executive Vice President for Academic Affairs/CAO 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 Executive Vice President for Academic Affairs/CAO will be final.

b. 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 Executive Vice President for Academic Affairs/Chief Academic Officer 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 Academic Dean that is being appealed.
c. 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.

17. **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 Academic 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 Executive vice President of Academic Affairs/CAO, whose decision shall be final.

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

18. **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.
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 Western University; 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. For example, in recent years the rate of tuition increase has been kept at or below five percent. 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 two installments. The first assessment of tuition and fees occurs at the beginning of each academic year, and the second is assessed approximately half-way through the academic year. 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).

Western University charges tuition based on an “academic” year and covers two period of enrollment. 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 Professions Education program will pay tuition and fees on a trimester year. Refunds will be based on the trimester.

Other Fees

a. Audit/Remediation Fee: The fee charged for auditing or remediating a class will be calculated on a prorata basis.

b. Other Fees and Expenses

<table>
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<th>Fee</th>
<th>Amount</th>
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<tr>
<td>Late Registration Fee</td>
<td>$ 30 per day</td>
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<tr>
<td>Breakage Fee</td>
<td>Cost of Replacement</td>
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<tr>
<td>Lost I.D. Badge</td>
<td>$ 10</td>
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<tr>
<td>Lost Locker Key</td>
<td>$ 40</td>
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<tr>
<td>Copy of Official Transcript (each)</td>
<td>$ 5</td>
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<tr>
<td>Faxed Transcript</td>
<td>$ 10</td>
</tr>
<tr>
<td>Copy of Student File Material</td>
<td>25 cents per page</td>
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</tbody>
</table>

PRE-PAID 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) 469-5354 or the Bursar’s Office at (909) 469-5403.
WESTERN UNIVERSITY TUITION REFUND POLICY

Western University 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 Academic Dean according to the procedures specified in this Catalog for their program. Western University 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 Western University's refund policy should be directed to the Bursar’s Office.

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 payment 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.

COMPREHENSIVE HEALTH PLAN

It is mandatory that all Western University 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, at least equal in benefits to the plan recommended by the University, 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. There are several available options. The plan with the better benefits is recommended. Dependent coverage, although not required, is optional at an additional premium (see Health Plan Brochure).
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 [www.fafsa.ed.gov](http://www.fafsa.ed.gov). Students are required to inform Western University’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 Western University’s website under “Financial Aid”. Western University reviews and administers all of its programs without discrimination as to race, creed, sex, 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 Western University 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 can not 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.

Federal Subsidized Stafford Loan: Available to undergraduate and graduate students by participating lending institutions and guaranteed by the federal government. The interest on these loans is subsidized (paid) by the federal government while the student is enrolled at least half-time in school. The maximum annual Subsidized Stafford loan limits per program are as follows:

- $8,500 DO, PharmD, MSHPE, MPT, MPA, and MSN/FNP programs
- $2,625 FNP certificate program

Federal Unsubsidized Stafford Loan: Available to undergraduate and graduate students by participating lending institutions and guaranteed by the federal government. However, the federal government does not pay the interest while the student is in school. Subsidized Stafford loan eligibility must be determined first, before a student can apply for an Unsubsidized Stafford loan. The maximum annual Unsubsidized loan limits per program are as follows:

- $32,222 DO (1st & 2nd year) program
- $36,667 DO (3rd year) program
- $34,444 DO (4th year) program
- $23,889 PharmD (1st, 2nd & 4th year) program
- $26,667 PharmD (3rd year) program
- $10,000 MSHPE program
- $26,667 MPT, MSN/FNP, MPA programs
- $4,000 FNP certificate program

Aggregate Loan Limits for Subsidized & Unsubsidized Stafford Loans: The total loan debt a student may have outstanding from all Stafford Loans combined are separated below by program. Outstanding loans include student loans received while the student completed undergraduate and graduate work. Within the aggregate amounts below, the subsidized Stafford maximum may not exceed $65,500.

- MSHPE Program: $138,500 (less the aggregate amount of any subsidized loans made to the student).
Because Western University participated in the Health Education Assistance Loan (HEAL) program before its phase out in 1998, students who are enrolled full time are allowed an increase in annual unsubsidized Stafford loan amounts. As a result, they also have a higher aggregate as indicated below.

**DO Program:** $189,125 (less the aggregate amount of any subsidized loans made to the student). Within this aggregate, the additional HEAL unsubsidized maximum is $80,000.

**PharmD, MPT, PA, and MSN/FNP Programs:** $189,125 (less the aggregate amount of any subsidized loans made to the student). Within this aggregate the additional HEAL unsubsidized maximum is $50,000.

**Federal Perkins Loan:** For eligible undergraduate and graduate students and subject to 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.

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
TITLE VII PROGRAMS LOANS & SCHOLARSHIPS**

**Loans for Disadvantaged Students (LDS):** Provides long-term, five percent interest loans to eligible osteopathic medical students from disadvantaged backgrounds, subject to fund availability.

**Primary Care Loans (PCL):** For eligible students and subject to availability of funds. The long-term five percent fixed simple interest loan amounts vary, depending on financial need and federal allocation. Students must provide parental income information and sign a contract to practice in primary care until the loan is paid in full.

**Scholarships with Service Requirements**

**National Health Service Corps Scholarships (NHSC):** This scholarship provides full tuition, fees, books, and a monthly stipend for osteopathic medical students and physician assistants who possess a bachelor’s degree. Students must serve in a designated medically underserved area (rural, inner city or Indian health). Minimum obligation is two years and a student must be an U.S. citizen.

**Military Health Professions Scholarships:** The Army, Navy and Air Force offer Health Professions Scholarship programs to medical students for tuition, fees, books and supplies, and a monthly stipend. While in school, students are expected to serve forty-five days of active duty per year, when possible, with pay. 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.

**UNIVERSITY ADMINISTERED SCHOLARSHIPS**

**The Dr. Robert E. Corey Memorial Scholarship Fund:** Established January 1983 as a memorial to Robert Corey, DO. Recipients are selected from second, third and fourth year students 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:** Established June 1977, and is available for students of all disciplines who express a desire to work in primary care in an underserved/rural area.

**Asian American Scholarship:** Awarded to students of Asian descent, who are in good academic standing, demonstrates financial need and is dedicated to serving the Asian community.

**UNIVERSITY ADMINISTERED LOANS**

**WesternU Emergency Loan Programs:** Limited funds made available on a short-term basis to meet financial emergencies. The maximum loan is $500 interest-free. Since this is a revolving loan fund, it is expected to be repaid in ninety days.

**Roger E. Coe Loan Fund #1:** Established in March 1981 by a gift from Roger M. and Ruby M. Coe. Two loans of $2,500 are made in the spring of each year. Loans will be made to osteopathic medical students who have completed their second or third year at Western University and are particularly interested in osteopathic manipulative skills. Interest begins to accrue at the time the loan is disbursed at the rate of eight
percent. First payment begins immediately after graduation with full repayment of loan funds within five year.

VETERANS’ EDUCATIONAL BENEFITS
The Student Affairs Office will provide certification of enrollment services for veterans attending Western University. The Financial Aid Office will serve as a direct liaison between our University and Veterans’ Administration regarding underpayment, overpayment, or non-payment benefits. Students expecting to collect educational benefits may obtain further information from Western University’s Financial Aid Office. As of this publication DO, MSN/FNP, MPT, MPA, and PharmD programs are eligible. In order to continue collecting benefits, a veteran must be making satisfactory progress towards a degree.

GRADUATE TEACHING FELLOWS IN THE DEPARTMENT OF OSTEOPATHIC MANIPULATIVE MEDICINE
This Fellowship program in the Department of 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. OMM Fellows assist in lecturing and teaching practical skills to graduate 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 from each MSII class annually.

TUITION REFUND POLICY
Western University of Health Sciences has established a refund policy for all students who find it necessary to withdraw from the University or take a leave of absence during the academic year. 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 Catalogue for their program. Western University may amend its institution refund policy at any time. Amendments will become effective for the academic year that follows official notification of the amendment. Any questions concerning Western University’s refund policy should be directed to the Bursar’s Office.

If a recipient of Student Financial Aid (SFA) loan funds withdraws from school after beginning attendance, the amount of SFA 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 of the earned aid that was not received. Title IV funds are awarded to a student under the assumption that 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 that the student was originally scheduled to receive.

Definition of a Title IV recipient
A recipient of loan assistance is a student who has actually received Title IV funds or has met the conditions that entitle the student 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.

Funds to include in the Calculation
The calculation of earned Title IV program assistance loan funds that were disbursed or could have been disbursed to a student. This includes Subsidized and Unsubsidized loan funds, and funds from the Federal Perkins Loan Program.

Title IV Aid Disbursed
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 Department and/or Federal Family Education
Loan (FFEL) funds received from a lender. A student’s aid is counted as disbursed for the calculation if it is disbursed as of the date of the institution’s determination that the student withdrew. **Calculation of Amount of SFA Program Assistance Earned**

The amount of SFA Program assistance earned is the percentage of SFA Program assistance earned multiplied by the total amount of SFA Program assistance that was disbursed (and that could have been disbursed) for the payment period as of the day the student withdrew. The percentage earned is one of the following:

- If the day the student withdrew 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 from which assistance was awarded.
- If the day the student withdrew after the student has completed 60 percent of the payment period the percentage earned is 100 percent.

**Determining the Withdrawal Date**

The definition of withdrawal date is for determining the amount of aid a student has earned. 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.

<table>
<thead>
<tr>
<th>Withdrawal Type</th>
<th>Circumstance</th>
<th>Student’s Withdrawal Date*</th>
<th>Date of the Institution’s Determination that the Student has Withdrawn**</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Official Notification</strong></td>
<td>The student begins the school’s withdrawal process, or</td>
<td>The date the student begins the school’s withdrawal process, or</td>
<td>The date the student provides official notification or begins the withdrawal process whichever is later.</td>
</tr>
<tr>
<td></td>
<td>The student otherwise provides official notification to the school of intent to withdraw.</td>
<td>The date that the student otherwise provides the notification.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(If both circumstances occur, use the earlier withdrawal date.)</td>
<td>(If both circumstances occur, use the earlier withdrawal date.)</td>
<td></td>
</tr>
<tr>
<td><strong>Official Notification Not Provided</strong></td>
<td>Official notification not provided by the student because of circumstances beyond the student’s control.</td>
<td>The date that the school determines is related to the circumstance beyond the student’s control.</td>
<td>The date that the school becomes aware that the student has ceased attendance.</td>
</tr>
<tr>
<td></td>
<td>All other instances where student withdraws without providing official notification.</td>
<td>The midpoint of the payment period or period of enrollment, as applicable.</td>
<td></td>
</tr>
<tr>
<td><strong>Leave of Absence Related</strong></td>
<td>The students does not return from an approved leave of absence, or</td>
<td>The date that the student began the leave of absence.</td>
<td>The earliest 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. (In the case of an unapproved absence, the date that the student began the leave of absence.)</td>
</tr>
<tr>
<td></td>
<td>The student takes an unapproved leave of absence</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Withdrawal After Rescission of Official Notification</strong></td>
<td>The student withdraws after rescinding a previous official notification of withdrawal.</td>
<td>The student’s original withdrawal date from the previous notification.</td>
<td>The date the school becomes aware that the student did not, or will not, complete the program period or period of enrollment.</td>
</tr>
</tbody>
</table>
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.

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 earlier of the (1) payment period or period of enrollment (as appropriate), (2) academic year, or (3) education program.

Return of Unearned SFA Program Funds

When a return of Title IV funds is due, the school and the student both have a responsibility for returning funds. Whatever funds are not returned by the school must be returned by the student. Although this requirement speaks 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 calculated first. The student’s repayment obligation is determined after the school’s share is calculated. If the student receives more SFA Program assistance than the amount earned, the school, or the student, or both, must return the unearned funds as required. Western University must return the lesser of

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

The student must return or repay, as appropriate, the remaining unearned SFA Program funds.

Order of Return of Title IV Funds

A school must return Title IV funds to the program 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 Federal Stafford Loans
- Subsidized Federal Stafford Loans
- Federal Perkins Loans

Method of Order of Return of SFA Program Refunds

The student returns funds to loan programs in accordance with the terms of the loan. In other words, the student will repay any unearned loan funds in the same manner that he or she will be repaying earned loan funds.

**WESTERN UNIVERSITY CALENDAR**

<table>
<thead>
<tr>
<th>Event</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>INDEPENDENCE DAY</td>
<td>Wednesday, Jul. 4, 2001</td>
</tr>
<tr>
<td>Last day of classes</td>
<td>Tuesday, Jul. 3, 2001</td>
</tr>
<tr>
<td>Classes resume</td>
<td>Thursday, Jul. 5, 2001</td>
</tr>
<tr>
<td>CONVOCATION</td>
<td>Saturday, Aug. 11, 2001</td>
</tr>
<tr>
<td>LABOR DAY</td>
<td>Monday, Sept. 3, 2001</td>
</tr>
<tr>
<td>(no classes)</td>
<td></td>
</tr>
<tr>
<td>COLUMBUS DAY</td>
<td>Monday, Oct. 8, 2001</td>
</tr>
<tr>
<td>(no classes)</td>
<td></td>
</tr>
<tr>
<td>THANKSGIVING RECESS</td>
<td>Wednesday (noon), Nov. 21, 2001</td>
</tr>
<tr>
<td>Last Day of Classes</td>
<td></td>
</tr>
<tr>
<td>Classes Resume</td>
<td>Monday, Nov. 26</td>
</tr>
<tr>
<td>WINTER RECESS</td>
<td>Friday, Dec. 21, 2001</td>
</tr>
<tr>
<td>Last Day of Classes</td>
<td></td>
</tr>
<tr>
<td>Classes Resume</td>
<td>Monday, Jan. 7, 2002</td>
</tr>
<tr>
<td>MARTIN LUTHER KING HOLIDAY (no classes)</td>
<td>Monday, Jan. 21, 2002</td>
</tr>
<tr>
<td>PRESIDENTS DAY</td>
<td>Monday, Feb. 18, 2002</td>
</tr>
<tr>
<td>(no classes)</td>
<td></td>
</tr>
<tr>
<td>HONORS DAY</td>
<td>Monday, Apr. 8, 2002</td>
</tr>
<tr>
<td>MEMORIAL DAY</td>
<td>Monday, May 27, 2002</td>
</tr>
<tr>
<td>(no classes)</td>
<td></td>
</tr>
<tr>
<td>COMMENCEMENT</td>
<td>Friday, May 31, 2002</td>
</tr>
</tbody>
</table>

*The College of Osteopathic Medicine of the Pacific, the College of Pharmacy, the College of Graduate Nursing, and the programs of the College of Allied Health (MPT, PA, and MSHPE) maintain specific, detailed program calendars. Please consult the appropriate program to determine additional official dates.*
COLLEGE OF OSTEOPATHIC MEDICINE OF THE PACIFIC

Doctor of Osteopathic Medicine Program

Accreditation
The academic program of the College of Osteopathic Medicine of the Pacific (COMP) is accredited by the Bureau of Professional Education of the American Osteopathic Association.

The Osteopathic Philosophy
Osteopathic medicine is a contemporary school of medical thought and practice, founded on the concept that the normal state of a person is health. The philosophy of osteopathic medicine has its roots in antiquity, 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 this concept, and gave it a new meaning and implementation with a system of diagnosis and treatment that made it the cornerstone of osteopathic medicine.

There are four fundamental principles of osteopathic diagnosis and treatment:

1. The body tends to be self-healing and self-regulatory in the disease processes. The ability to maintain integrity in a continually changing external environment is mediated through an elaborate communication network. The communication network embraces the circulatory and neuromusculoskeletal systems.
2. Intimate interrelationships exist between structure and function at all levels of biologic organization.
3. Abnormalities of the neuromusculoskeletal system are invariably present during disease. When subjected to manually applied forces, these abnormalities are ameliorated coincidentally with the clinical improvement of the patient.
4. Health is an equilibrium state and maintaining this state requires constant biological adjustment.

While employing osteopathic manipulation, the osteopathic physician utilizes other recognized modalities for diagnosis and treatment. All modalities of treatment are based upon an evaluation of the patient's personal state of development, family and social environment.

TECHNICAL GUIDELINES FOR ADMISSION AND MATRICULATION
A candidate for admission to the Doctor of Osteopathic Medicine Program must have the use of certain sensory and motor functions, or reasonable accommodations, 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 osteopathic 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 osteopathic patient care. The osteopathic medical student must be able consistently, quickly, and accurately to 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 DO degree 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 as a reasonable accommodation, when appropriate. Under all circumstances, a candidate should be able to perform in a reasonably independent manner:

1. 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.
2. 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 English.

3. Motor: Candidates and students should have sufficient motor functions that enable them to execute movements, with or without reasonable accommodation, 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 osteopathic 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, and the performance of simple obstetrical maneuvers and osteopathic manipulation. These actions require coordination of both gross and fine muscular movements, equilibrium and functional use of the senses of touch and vision.

4. 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 osteopathic 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.

5. Behavioral and Social Attributes: Candidates and students must possess the emotional health required for full utilization of the intellectual abilities, the exercise of good judgement, 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 Doctor of Osteopathic Medicine program, along with all other programs at Western University of Health Sciences, shares a commitment to develop creative ways of opening the DO curriculum to competitive, qualified individuals with disabilities. In doing so, however, the DO Degree Program must maintain the integrity of its curriculum and preserve those elements deemed essential to educating candidates to become effective osteopathic physicians.

ADMISSIONS POLICIES AND PROCEDURES

Western University/COMP accepts applications from all qualified candidates. 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 and may suggest future academic success, the Admissions Committee recognizes that these statistics, by themselves, do not guarantee later success as a physician. Therefore, non-academic criteria are also important in making the selection. Western University/COMP 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 osteopathic medicine, and professional promise. To ascertain these factors, an on-campus interview is required before acceptance is given. The College may exercise its discretion to rely upon additional considerations. Western University/COMP is committed to admitting competitive, qualified individuals with disabilities.

Early Admission Decision Program

Western University of Health Sciences/College of Osteopathic Medicine of the Pacific is pleased to offer an Early Admission Decision Program. Qualified applicants may take advantage of the Early Admission Decision Program if they apply only to Western University/COMP and submit their application to AACOMAS prior to June 15.

Highly qualified candidates who have a strong preference for Western University/COMP are eligible for an early admission decision. Candidates must have a minimum science GPA of 3.30, a minimum overall GPA of 3.30, and a minimum average MCAT score of 9. All prerequisite coursework must be completed at the time of application. The AACOMAS application must be filed prior to June 15. The Western
University/COMP supplementary application and all supporting documents must be filed prior to August 1. Interviews and decisions are granted August through September. If you apply as an Early Admission Decision candidate, you must apply only to Western University/COMP. For further information, and to request an Early Admission Decision Program application form, contact the Admissions Office at (909) 469-5335, or write to:
Western University of Health Sciences
College of Osteopathic Medicine of the Pacific
Admissions Office
309 E. Second Street
Pomona, CA 91766-1854

Entrance Requirements
Candidates for admission to Western University/COMP must meet these requirements at the time of application:
1. Ninety semester hours, or three-fourths of the credits required for a baccalaureate degree, from a regionally accredited college or university.
2. One academic year or its equivalent in English, biology, physics, inorganic chemistry, organic chemistry and behavioral sciences.
3. 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, 2255 North Dubuque Road, P.O. Box 4056, Iowa City, Iowa 52243, phone (319) 337-1357. This examination is offered in the spring and summer. 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 prior to January of the entering year.

Please note that the majority of candidates accepted for admission will have completed four or more years of pre-professional study prior to matriculation, and that the quality of Western University/COMP students is quite high. Successful candidates typically have both science and overall grade point averages of 3.2 or above on a 4.0 scale and a mean MCAT score over 8.0. Please keep in mind that academic grades and the MCAT score are just two of the factors used in the evaluation process.

AACOMAS
The College of Osteopathic Medicine of the Pacific of Western University of Health Sciences, along with the other colleges of osteopathic medicine, participates in a centralized application service, the American Association of Colleges of Osteopathic Medicine Application Service, 5550 Friendship Blvd., Suite 310, Chevy Chase, Maryland 20815-7231. Individuals interested in applying to Western University/COMP should write directly to AACOMAS for information and application materials or obtain application request cards from the Western University/COMP Admissions Office. At this time, applicants should also make arrangements to have official transcripts of all prior undergraduate and graduate course work forwarded to AACOMAS.

Upon receipt of the initial application and transcript(s), AACOMAS will collate materials, compute grades, and transmit standardized information to the applicant and to those osteopathic medical colleges that the applicant designates. AACOMAS takes no part in the evaluation or selection of applicants. After a review of the AACOMAS application, if both a minimum grade point average of 2.5 on a 4.0 scale has been achieved overall, as well as in the sciences, and a minimum of 90 semester hours has been completed, the Admissions Committee may request additional information from the applicant for further consideration. Keep in mind, however, that the above grade point average is only the bare minimum, and candidates in the 2.5 range need to be sure this is a sufficiently strong GPA to meet the academic challenges at Western University/COMP successfully. Previously, candidates admitted to Western University/COMP have had substantially higher grade point averages.

Additional information will include the following:
1. A supplementary application provided by Western University/COMP will be sent only after receipt of the initial application from AACOMAS. There is a non-refundable supplementary application fee of $60.
2. 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 committee, the student may submit evaluations from three classroom professors, two of whom must be in the sciences, and;

3. A letter of recommendation from a physician. A letter from a DO is preferred.

The supplementary required information must be returned within 30 days to the Director of Admissions, Western University of Health Sciences/COMP, 309 E. Second Street, Pomona, California 91766-1854. After the applicant's file is complete, the Admissions Committee reviews it to determine whether the candidate will be granted an interview. If a candidate is deemed of interest to Western University/COMP, he or she is invited to the campus at his or her own 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/COMP student; a personal interview with members of the Admissions Committee and faculty; and a tour of the facilities. The candidate's application and interview are evaluated by the Committee and the candidate is notified of the status of his or her application in approximately three weeks.

**Note:** Candidates accepted to Western University/COMP must have a complete set of official transcripts mailed to the Admissions Office no later than July 1. For your information, AACOMAS retains the original set of transcripts it receives from applicants.

**Transfer Policy**

Western University/COMP offers a transfer program for persons who have completed one or more years of medical studies at a medical school accredited by the American Osteopathic Association (AOA). Candidates seeking transfer must be in good academic standing at the school where they are enrolled and be eligible for continuation there. Candidates are expected to meet the minimum entrance requirements that are required of our entering first-year students. Please refer to the Admissions Policies and Procedures section in the catalog for specific information regarding these requirements.

Transfer applications are available from the Admissions Office after September 1. Application deadline for students wishing to transfer into the second year is March 1st. Application deadline for students wishing to transfer into the third year is January 1.

Candidates must provide:

1. Official transcripts from all colleges and universities attended. Official transcripts showing the successful completion of studies at the osteopathic medical school where currently enrolled.
2. Official MCAT scores.
3. Letters of recommendation from three science professors at your college of osteopathic medicine are required, as is a letter from a DO.
4. A fully completed transfer application, accompanied by a non-refundable application fee of $100; and,
5. Upon request, candidates must submit a letter of good academic standing from the Academic Dean of the osteopathic medical school where currently enrolled. If an interview is granted, candidates are invited to the campus at their own expense. Candidates should plan to spend a half day on campus for orientation and interview. Approximately three weeks after the interview, candidates will receive a letter stating the decision of the Admissions Committee. Acceptance of a transfer student will be dependent upon the student's current academic good standing, qualifications, academic compatibility and available space. Confirmation of available seats does not occur until mid-June.

Applications are to be sent directly to:

Western University/COMP, Admissions Office
309 E. Second Street
Pomona, California 91766-1854

Decisions of the Admissions Committee regarding the admission of applicants to the Doctor of Osteopathic Medicine program are final.
REGISTRATION

All students are required to register in person on the registration day specified in the University Calendar or as otherwise directed by the Registrar. Failure to register on that day may be grounds for dismissal. Third- and fourth-year DO students must complete registration materials, including financial arrangements, prior to June 15. Failure to register by June 15 may be grounds for dismissal. Full tuition and fees and all prior debts must be paid in full on or before registration day each academic year. Matriculation and graduation are subject to the satisfactory completion of all academic requirements and payment of all outstanding debts to the University. The receipt of a final transcript from an undergraduate college 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 at the time of registration. This coverage must be maintained or in effect throughout the academic year. If there is no proof of current coverage, a policy provided by the University is available. Attendance at Orientation is mandatory for all incoming first-year students.

TUITION AND FEES

By action of the Board of Trustees, DO tuition and fees for the 2001-02 academic year (subject to change) are as follows:

<table>
<thead>
<tr>
<th>ACADEMIC YEAR 2001 - 2002</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>$28,010</strong> Tuition (Annual)</td>
</tr>
<tr>
<td>For DO applicants accepted at Western University, the tuition deposit is $1,000, payable within two weeks after notification of acceptance. This payment is non-refundable. An additional payment of $1,000 is due by May 15 for those accepted for admission prior to May 1 and by June 15 for those accepted after May 1. This additional payment is non-refundable. Upon matriculation the entire $2,000 is applied toward the total tuition. For applicants who are granted deferred admission to the DO program, the entire $2,000 deposit required to hold a seat in the next year’s class is non-refundable. An additional enrollment deposit of $500 is due on May 15 of the entering year. This total deposit of $2,500 is non-refundable and will be applied toward tuition, upon registration and matriculation. If an applicant fails to register, all tuition deposits are forfeited.</td>
</tr>
</tbody>
</table>

| $40 Student Body Fee (1st and 2nd year) |
| Covers student government expenditures, social activities and public relations. |

| $20 Student Body Fee (3rd and 4th year) |

Other Fees and Expenses

| $600. Medical Equipment |
| $800. Required and Recommended Texts-Fall |
| $300. Required and Recommended Texts-Spring |
| $45. Anatomy Supplies-Gloves, Scrub, Dissection Kit |
| $30. (per day) Late Registration Fee |
| $50. Special Examination Fee |
| $40. Lost Locker Key |
| $10. Lost ID Badge |
| $5. (each) Copy of Official Transcript |
| $0.25 (per page) Copy of Student File Material |
| (replacement cost) Breakage Fee |
National Board Fees (DO Program)

The College requires students to take all sections of COMLEX Level 1 and Level 2 of the National Board of Osteopathic Medical Examiners as one of the requirements for graduation. These fees, which are subject to change by NBOME, are as follows:

$255 NATIONAL BOARD EXAMINATION, COMLEX LEVEL 1 (end of second year)
$255 NATIONAL BOARD EXAMINATION, COMLEX LEVEL 2 (end of fourth year)

Clinical Rotation Expenses

During the third and fourth years, some students may elect to do some clinical rotations away from the Pomona area. 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. Because of the elective and individual nature of the experience, these fees are also the student's responsibility.

ACADEMIC REQUIREMENTS

Academic Advisement

Students will be assigned a faculty advisor upon matriculation. Advisement by the faculty should be viewed by the student as a privileged part of the academic process. The academic advisor-student relationship can become one of the most valuable aspects of medical education. It will provide 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.

Grading Policies and Credit Hours

a. Official grades are turned into the Registrar from the Dean of Osteopathic Medicine, at which time, official grade reports are deposited in the student mail lockers. Enrolled students will receive an unofficial copy of their transcript after grades have been posted at the conclusion of each academic year. COMP makes use of a combination of numeric scores and letter grades. A numeric score is utilized in the first two years, and a 4-value letter grade is used in the last two years.

<table>
<thead>
<tr>
<th>Years 1 &amp; 2</th>
<th>Interpretation</th>
<th>Years 3 &amp; 4</th>
<th>Letter Grade</th>
<th>Grade Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>90-100</td>
<td>Excellent (numeric range 90-100)</td>
<td>A</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>80-89</td>
<td>Good (numeric range 80-89)</td>
<td>B</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>70-79</td>
<td>Satisfactory (numeric range 70-79)</td>
<td>C</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Below 70</td>
<td>Unsatisfactory (numeric range less than 70)</td>
<td>U</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>I</td>
<td>Incomplete</td>
<td></td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Au</td>
<td>Audit</td>
<td></td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>M</td>
<td>Missing</td>
<td></td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>W</td>
<td>Withdrawal</td>
<td></td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Cr</td>
<td>Credit</td>
<td></td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>NCr</td>
<td>No Credit</td>
<td></td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Cert</td>
<td>Certification</td>
<td></td>
<td>0</td>
<td></td>
</tr>
</tbody>
</table>

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/grade point average will be calculated and posted on the transcript. Class ranking is also computed, and will appear on the transcript at the student’s request only. Class ranking is also available upon request in the Registrar’s Office. Cumulative class ranking for transfer students will not be calculated until they complete one full academic year. Five-year program students will not be ranked until they have
completed 1A and 1B of the five-year program. Osteopathic undergraduate teaching fellows will not be ranked until their final year.

b. The cumulative numeric score will be calculated at the end of each semester during the first two years of the curriculum and is the average of all course numeric scores weighted by the number of course credit hours attempted. The grade point average will be calculated at the end of each semester for 3rd and 4th year students and is the sum of earned grade points divided by the sum of credit hours passed and failed. If a course, system, or clinical rotation is repeated or remediated, only the last score/grade earned enters into the computation of the cumulative numeric score/grade point average, but the original numeric score/grade 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 Academic Affairs. After completion of eight (8) clinical rotations, the Student Academic Progress Committee will review the student’s progress. The Student Academic Progress Committee will recommend to the Dean of Osteopathic Medicine the manner in which the scheduling of the student’s Fourth Year clinical rotations should proceed.

No numeric score or grade will be changed unless the instructor certifies in writing to the Registrar that an error in computing or recording the grade/score occurred or that the student has remediated a numeric score of below 70 or an Unsatisfactory grade after being directed to do so by the Dean of Osteopathic Medicine, as recommended by the Student Academic Progress 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 grades remain on the official transcript unless a clerical error occurs. Remediated grades are recorded below the original numeric score in the first two years or below the original “U”, “NCr”, or I in the last two years. Only the remediated score/grade is calculated into the GPA/cumulative numeric score.

c. For 3rd and 4th year students, no grade 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:

1. When the Office of Clinical Rotations receives a signed written statement from the preceptor specifying that a clerical error has been made regarding a grade, and that the purpose of the change is to correct that clerical error.
2. When the preceptor 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.
3. When a remediation process, that has been directed by the Student Academic Progress Committee and authorized by the Dean, is completed and a written evaluation is received in the Office of Clinical Rotations.

All grade changes must have the approval of the Dean of Osteopathic Medicine.

The student should make every effort to discuss his/her evaluation(s) with the assigned preceptor(s) prior to leaving the clinical rotation.

d. If a student leaves a rotation before it is finished without the permission of the Assistant Dean for Academic Affairs, or is asked to leave a rotation by the Preceptor or the Director of Medical Education of a hospital, a grade of “U” on that rotation may be assigned by the Dean of Osteopathic Medicine or Assistant Dean for Academic Affairs.

e. Standards of Satisfactory Progress - Students must maintain at least a cumulative score of 70 on a yearly basis during the first two years and a “C” average during the last two years to be considered making satisfactory academic and professional progress.

A numeric score below a 70 during the first two years or a “U” in the last two years must be remediated for promotion or graduation.

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 year, unless other arrangements are made with the instructor and the Dean of Osteopathic Medicine.

Replacement of an “I” will be under the direction of the instructor with the approval of the Dean. If the required work is not completed within the specified time, the “I” will be converted automatically to a “60”. 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 indicated by an asterisk and followed by the grade/numeric score earned.

Credit Courses (Cr/NCr) - Courses graded for Credit/No Credit are those designated by the faculty as courses required for promotion but not assigned letter grades. The student must satisfy the requirements of these courses to receive credit.

Audit Classes (Au) - Students will not be eligible for Financial Aid if they are auditing classes only, and are not taking tests and having their progress monitored.

Exemption from Individual Core Curriculum Course
Students with advanced work or degrees in a particular subject may formally petition the professor and the Dean of Osteopathic Medicine for credit for an individual core 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 Osteopathic Medicine may suggest other alternative or additional criteria for determining exemption.

Student Examination Policies

a. Students will be seated for examinations such that there will be a vacant seat between them and the students on either side, and this alternate seating shall be utilized for examinations unless precluded by space availability.

b. Students are not to communicate in any way during the examination, are not to look at any other students’ examination paper, and are to face the front of the classroom at all times.

c. There will be at least two different versions of the same examination.

d. 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 the student has to leave the room, his/her examination will be turned into the proctor.

e. Once a student finishes an exam and leaves the examination room, he or she will not be permitted to re-enter the room until the exam is declared over.

f. All students’ belongings, i.e. notebooks, calculators, headwear, and head sets, etc., will be kept in front of the room. No food or drink will be allowed during examinations.

g. No student questions will be answered during the examination period. Students should be permitted to point out typographical errors present in the examination notebook. If students have questions, they can be written on the back of the examination booklet.

h. Violations of these examination policies as stated in the Student Handbook or Standards of Professional Conduct, will be brought before the Student Conduct Committee.

Violations of Examination Policies

a. If there is reason to suspect a violation of examination policies during an exam, the proctor(s) suspecting a violation should share the information with the other proctor(s) in the classroom immediately.

b. Proctors immediately should attempt to confirm the violation.

c. If the proctors agree that a violation has occurred, then the examination booklet(s) and the scantron(s) will be confiscated, in which case the student(s) will be asked to leave the examination room.

d. The proctor responsible for the conduct of the examination, after the completion of the examination, will immediately make a verbal report to the Assistant Dean of Academic Affairs and the Dean of Osteopathic Medicine, that a violation has been observed. The individuals making the verbal report must submit a written report to the Dean of Osteopathic Medicine during the same day as the incident occurs.

e. The Dean of Osteopathic Medicine may convene the Student Conduct Committee as soon as possible to investigate the violation, if deemed appropriate.

f. If the evidence presented to the Student Conduct Committee is conclusive, the recommendations to the Dean of Osteopathic Medicine may include, but not be limited to:

1. Dismissal from the academic program.
2. Academic Probation - Period to be recommended by the Committee.
3. Make-up examination, including written and/or oral.
4. The numerical grade on a make-up examination will be 80% of the grade attained.
   g. In the case of insufficient evidence, the committee will recommend to the Dean of Osteopathic Medicine that no action be taken against the student.
   h. After the receipt of the recommendation of the Student Conduct Committee by the Dean, the disposition of the incident will be conveyed to the involved student(s) by the Dean of Osteopathic Medicine, in writing, as soon as possible, but not exceeding three working days.

Examination Proctoring Policy
   a. The number of rooms for any examination will be determined by the Assistant Dean of Academic Affairs in consultation with the system or course coordinator or discipline leader.
   b. The Assistant Dean of Academic Affairs will receive a copy of the proctoring schedule from the discipline leader/coordinator, by noon on the last working day before the scheduled exam.
   c. A minimum of two proctors per exam will be in the exam room at all times.
   d. Typographical or other errors pointed out by students should be brought to the attention of the system or course coordinator immediately.
   e. Proctors will not answer questions during the examination period, and will see that students are looking at their own examination paper.
   f. Proctors will be responsible for handing out examinations/Scantrons® to each student, assuring proper seating, and collection of examination notebooks and Scantrons®.
   g. Proctors should see to it that all students’ belongings are kept at the front of the examination room.

Students on Clinical Rotations - NBOME Examination (COMLEX, Level 2)
Fourth year medical students on rotation at the time NBOME, COMLEX Level 2 examination is offered, may arrange for time-off just prior to, and during administration of the examination. Western University/COMP requests all training program directors and/or preceptors to release students three working days (weekends included) before the exam, at 7:00 am, and expect their return to duty at 7:00 am the day after the examination is concluded. For example, if the exam is administered on Tuesday and Wednesday, the student should be released from duty on Saturday morning at 7:00 am, and will return to duty at 7:00 am on Thursday morning.

Students on Clinical Rotations may contact the Rotations Office toll-free at 1-800-249-9131.

Promotion
Promotion is defined as academic and professional progression from one academic year to the next.
   a. A student will be recommended to the Dean of Osteopathic Medicine for promotion by the Student Academic Progress Committee.
   b. A student may not be recommended for progression from one academic year to the next with any outstanding grades of “I”, “NCr” in a required course, “U” or numeric score of less than 70 on his/her academic record, or with a yearly grade point average of less than 2.0/cumulative numeric score of less than 70.
   c. When considering a student for promotion, ethical, professional, and personal conduct may also be taken into consideration (see Probation in University Academic Policies, section a-3).
   d. A student will be promoted provided that all legal and financial requirements of the University as stated in the University Catalogue have been satisfied.
   e. All academic requirements must be met prior to recommendation for graduation within a maximum of six academic years.
   f. All students beginning with the incoming class of 2005 are required to pass Part I of the COMLEX examination before they are allowed to enter into the 4th year.

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.
Graduation
A student will be recommended for the degree Doctor of Osteopathic Medicine provided he/she:

- Has completed at least four years in an accredited osteopathic college or equivalent.
- Has been enrolled in the Western University of Health Sciences/College of Osteopathic Medicine of the Pacific during his/her final two academic years.
- Is not on probation and has completed all prescribed academic requirements with a cumulative numeric score of at least 70/grade point average of at least 2.0 and has no outstanding grade of I or U or a grade of “NCr” in a required Credit/No Credit course.
- Has taken all sections of Level I of the COMLEX examination of the NBOME (National Board of Osteopathic Medical Examiners). Beginning with the Class of 2003 (entering in 1999), he/she has taken all sections of Level I and Level II of COMLEX.
- Has taken and passed Clinical Performance Examinations I and II. Students who have not passed either Clinical Performance Examination I or II are required to remediate the examination they did not pass.
- Has demonstrated superior ethical, professional, or personal conduct, as defined in Probation in the University Academic Requirements section, which would make it appropriate to award the degree of Doctor of Osteopathic Medicine.
- Has complied with all the legal and financial requirements of the University as stated in the University Catalogue.
- Unless special permission has been granted by the President of the University, all students must attend in person and participate in the commencement program at which time the degree is conferred. If the President grants special permission to be excused from graduation, the graduate may be required to present him or herself to the Provost or appropriate Dean, at a later date, to take the required oath (if relevant) to receive the diploma.
- Is expected to complete all requirements for graduation by July 31 and is expected to march with his/her class in the graduation ceremony. At the discretion of the Dean of Osteopathic Medicine, an exception may be made for a student with an authorized leave during the senior year. No student will receive his/her diploma until the student has completed all requirements for graduation. Diplomas should be dated as appropriate to completion date of the academic requirements.

Probation
All statements in the General Academic Requirements section on Probation apply, plus the following:

- Inadequate academic progress as determined by the Student Academic Progress Committee. These include, but are not limited to, receiving a numeric score less than 70 in the first two years in any course or system, a grade of NCr in a required Cr/NCr course, or a “U” in any clinical rotation or EFM course.
- A cumulative score of less than 70 in the first two years or a GPA of less than 2.0 in the last two years.
- When directed to repeat a year for academic reasons.
- Seriously deficient ethical, professional, or personal conduct.

- 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 a score less than 70 in the first semester will be removed from probation after one semester 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 “U” grade in a clinical rotation or in an EFM course must remediate the “U” and will then be subject for review by the Student Academic Progress Committee at the end of the third or fourth year, respectively, and may be recommended for continuation on or removal from probation at that time.
Remediation

If a student receives a final numeric score below 70 in a course or system during the first two years, or has a cumulative numeric score below 70, that student will be reviewed by the Student Academic Progress Committee.

If a student receives a “U” in a clinical rotation in years three or four, that student will be reviewed by the Student Academic Progress Committee.

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.

a. Where deemed appropriate, the Student Academic Progress Committee, after consultation with the course instructor, system coordinator, or Director of Clinical Rotations, 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.
4. Repeat the academic year.
5. Withdraw from the University (see Dismissal section for criteria for this option).

b. The score/grade achieved by remediation will be the score/grade recorded EXCEPT that the highest score/grade a student may earn by options a-(1) or a-(2) is a score of 70 in the first two years and a “C” in the last two years. The score/grade achieved by remediation will be recorded on the transcript beneath the original score/grade.

c. Numerical scores or grades earned during an attempted remediation of a course, system, or clinical rotation will be reviewed critically by the Student Academic Progress Committee and the Dean of Osteopathic Medicine. Failure to earn at least a 70 in the first two years or a “C” in the last two years or “Cr” may result in dismissal from the College or repeating the year.

d. 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 Osteopathic Medicine, based upon the recommendation of the Student Academic Progress Committee. The Student Academic Progress Committee will base its recommendation on the student’s academic record and considerations after consultation with the student’s faculty advisor, course instructor, system coordinator, Director of Clinical Rotations, clinical preceptor, and the student involved, when appropriate.

e. Any student who is required to remediate a course must be notified in writing by the Dean of Osteopathic Medicine 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 be sent by Certified Mail or hand-delivered to the student and must be acknowledged with the signatures of the Dean of Osteopathic Medicine 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 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 on the next year’s budget. Students attend at their own expense.

Appropriate tuition and fees will be determined by the Executive Vice President of Finance and Administration in consultation with the Executive Vice President for Academic Affairs and the Dean of Osteopathic Medicine.

Five-Year Program

Effective July 1, 2000, students will no longer be admitted to this program. The following rules and requirements remain applicable for students currently enrolled in the Five-Year Program only.

a. The decision to enter the Five-Year Program is a one-time student option.

b. At the time the student opts for the Five-Year Program, prior courses completed and graded will be shown on the transcript.

c. The words “Five-Year Program” will be printed at the beginning of the transcript.
d. During the second semester of the first year (I-A portion), the student will audit the Dermal, Neurosensory, Musculoskeletal Systems and Introduction to Clinical Medicine. These will be listed on the transcript along with the designation “Au”. If a student chooses to take the examinations in audited courses and does well, it will not be possible to convert the “Au” to a grade.

e. The student will be required to repeat any courses that were completed and graded before going on the Five Year Program if a “U” grade was received. Courses that are remediated will be taken concurrently with the courses taken in the second year (I-B portion) of the Five Year Program. Recommendations for remediation will be made to the Dean of Osteopathic Medicine by the Student Academic Progress Committee.

f. The student’s progress will be monitored carefully each semester by the Student Academic Progress Committee, the Assistant Dean of Academic Affairs and the Dean of Osteopathic Medicine. Students in the first two years of the Five-Year Program will be dismissed if their grade point average is below 2.0 at the end of any semester or if they receive a final grade of “U” or “NCr” in any course.

g. Students admitted to this program will be charged one year of full tuition for year I-A of the Five-Year Program. Western University charges tuition for five years, however, the tuition charged for years I-B, II, III and IV are seventy-five percent of the published tuition for other DO students.

Five-Year Program Schedule

**YEAR I-A:**

<table>
<thead>
<tr>
<th>First Semester</th>
<th>Credit Hours</th>
<th>Second Semester Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gross Anatomy</td>
<td>14.5</td>
<td>OP&amp;P 2.5</td>
</tr>
<tr>
<td>OP&amp;P</td>
<td>2.0</td>
<td>Medical Ethics Cr</td>
</tr>
<tr>
<td>Embryology</td>
<td>1.0</td>
<td>Substance Abuse Cr</td>
</tr>
<tr>
<td>Histology</td>
<td>2.0</td>
<td>BCLS (during orientation)</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>19.5</strong></td>
<td></td>
</tr>
</tbody>
</table>

(Audit Introduction to Clinical Med. Week, Dermal, Neurosensory & Musculoskeletal Systems)

**Summer I:** Enrollment in and successful completion of a Study Skills Course

**YEAR I-B:**

<table>
<thead>
<tr>
<th>First Semester</th>
<th>Credit Hours</th>
<th>Second Semester Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Biochemistry</td>
<td>4.5</td>
<td>Introduction to Clinical</td>
</tr>
<tr>
<td>Microbiology</td>
<td>5.5</td>
<td>Medicine Week</td>
</tr>
<tr>
<td>Pathology</td>
<td>2.5</td>
<td>Dermal System</td>
</tr>
<tr>
<td>Physiology</td>
<td>1.5</td>
<td>Neurosensory System</td>
</tr>
<tr>
<td>Pharmacology</td>
<td>3.5</td>
<td>Musculoskeletal System</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>17.5</strong></td>
<td></td>
</tr>
</tbody>
</table>

(The student must attend the MS I Classes that OP&P TA’s attend, and at the discretion of the OP&P Department Chair, may be used as an OP&P TA.)

**YEARS II, III, & IV:** In year II, the student will re-enter the standard COMP curriculum, and will continue in the standard curriculum throughout years II, III and IV.

**Dismissal**

The University may require withdrawal at any time it deems necessary to safeguard its standards of scholarship, conduct, and orderly operation. The Student Academic Progress Committee or the Student Conduct Committee may recommend dismissal of a student for appropriate reasons as stated below:
a. A student with a yearly score of less than 70 at the end of the First or Second year will be recommended for dismissal.

b. A student who received final 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 will be recommended for dismissal.

c. A student who received Unsatisfactory grades in three clinical rotations in one academic year will be recommended for dismissal.

d. A student who receives a score of below 70 in the first two years or a “U” in the last two years in a remediated course, system, or clinical rotation may be recommended for dismissal.

Student Academic Progress Committee

a. The Student Academic Progress Committee is comprised of five faculty members with the following ex officio members: Dean of Student Affairs; Assistant Dean of Academic Affairs; and the Associate Dean of Clinical Affairs & Research.

b. Each year, the Student Academic 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 Academic Progress Committee by the Registrar with additional input from the Dean of Osteopathic Medicine and the Director of Clinical Rotations, where appropriate.

c. After reviewing a student’s achievement and performance records, the Student Academic Progress Committee may recommend to the Dean of Osteopathic Medicine any of the following courses of action for a student: promotion, probation, remediation, dismissal from the University, psychological and educational assessment and other appropriate recommendations, or no action.

d. The Student Academic Progress Committee also has the responsibility of recommending the awarding of the degree of Doctor of Osteopathic Medicine to all students who satisfactorily complete all requirements for graduation as stated in the University Catalogue and this Student Handbook to the Faculty as a whole.

e. All recommendations of the Student Academic Progress Committee shall be in writing to the Dean of Osteopathic Medicine, who will make the information available to the affected student.

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. Frequent absences will be viewed as violations of the Standards of Academic and Professional Conduct. Implementation of the attendance policy for on-campus courses will be the responsibility of the Assistant Dean of Academic 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 Assistant Dean of Academic Affairs or his designee. For a student to be considered to take any examination at other than the scheduled time, the student must have prior approval by the Assistant Dean of Academic Affairs.

A student who cannot attend an exam due to unforeseen circumstances including illness, should phone or e-mail the Assistant Dean of Academic Affairs and Course Instructor/System Coordinator as soon as possible prior to or after the exam has been administered. A written explanation of the absence (including documentation on physician letterhead stationery, if it is an illness) must be provided the next day the student is on campus to the Office of the Assistant Dean of Academic Affairs and the Course Instructor/System Coordinator). If a student misses an examination, the Assistant Dean of Academic Affairs in consultation with the Course Instructor/System Coordinator will rule on whether the absence is excused or unexcused. If the absence is ruled excused, the student will be permitted to take a make-up examination, the nature and time of the examination will be at the discretion of the Course Instructor/System Coordinator. If the absence is excused, 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 practical examination without a valid excuse as determined by the Assistant Dean of Academic Affairs and the Course Instructor/System Coordinator, this is grounds for summary failure (a score of zero) of that examination.

In the case of an unexcused absence, the student who fails the examination will be referred to the Student Academic Progress Committee for recommendations regarding remediation or dismissal. If the Student Academic Progress Committee recommends that the student take a remediation examination, the maximum score that the student can achieve on a remediation 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 with referral to the Student Academic Progress Committee as depicted above. In such a case, a written report will be sent by the Course Instructor/System Coordinator to the Office of the Assistant Dean of Academic Affairs, with a copy sent to the Chair of the Student Academic Progress Committee and the Dean of Osteopathic Medicine for appropriate disposition.

Attendance and absences during the third and fourth years are outlined in the COMP Clinical Rotations Manual.

CURRICULUM
The curriculum at COMP is a four-year full-time academic and clinical program leading to the granting of the degree of Doctor of Osteopathic Medicine (DO).

This curriculum stresses the interdependence of the biological, clinical, behavioral, and social sciences. The emphasis is to educate physicians for primary care medicine with specific roles of osteopathic principles in the maintenance of health and treatment of disease.

The educational program is centered around the basic concepts of osteopathic medicine. The College of Osteopathic Medicine of the Pacific identifies and develops 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:

a. To accord primacy to the role of the musculoskeletal system in the total body economy.

b. To recognize and emphasize the inherent capacity within the total person to overcome disease and maintain health; to educate physicians to cooperate with this therapeutic capacity in their methods of treatment, and;

c. To provide sufficient academic training to make students aware of health needs that must be referred to a specialist.

A primary care physician must first of all be capable of problem-solving and develop expertise in diagnosis. In order to achieve this goal, the curriculum adopted at COMP emphasizes the integration of basic and clinical science aspects of medical practice. With this approach, practice in problem-solving becomes a part of the learning experience.

The curriculum is divided into three phases:

I. Introduction to the basic sciences.

II. Correlated system teaching, incorporating basic and clinical sciences in the study of ten (10) organ systems of the body, and;

III. Clinical experiences.

The four-year curriculum has been developed to appropriately prepare the graduate for the post-doctoral training years of his/her choice.

In addition to the regular curriculum, COMP offers elective courses. These focus on the art of medicine and seek to sensitize the future physician to the important aspects of life and to instill a greater sense of ethics and human values. Various extracurricular activities also contribute to the personal and professional growth of students, among them a student drama troupe called SANUS.

Summer Preparatory Program
The College offers an optional three-week introductory preparatory program to a selected number of incoming DO students. The students will have to purchase a workbook and remit a tuition fee of $300. See course description for DO 5001, below, for additional information.

PHASE I: First Year-First Semester (CORE courses)
The first semester of the first year is designed to introduce the students to the basic concepts of anatomy (gross, embryology, and histology), biochemistry, microbiology, pathology, pharmacology, and physiology. Interwoven throughout the curriculum are osteopathic principles and practice.

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>DO 5010</td>
<td>Biochemistry</td>
<td>4.5</td>
</tr>
<tr>
<td>DO 5020</td>
<td>Embryology</td>
<td>1</td>
</tr>
<tr>
<td>DO 5025</td>
<td>Medical Genetics</td>
<td>1</td>
</tr>
<tr>
<td>DO 5030</td>
<td>Gross Anatomy</td>
<td>14.5</td>
</tr>
</tbody>
</table>
DO 5040 Histology (2 credit hours)
DO 5050 Microbiology (5.5 credit hours)
DO 5060 Pathology (2.5 credit hours)
DO 5070 Pharmacology (3.5 credit hours)
DO 5080 Physiology (1.5 credit hours)
DO 5090 Osteopathic Principles and Practice I (2 credit hours)

**PHASE II:** Second semester-first year through Second semester-second year

This phase begins in the second semester of the first year and continues throughout the second year. The basic and clinical sciences concerned with one particular organ system of the body are integrated in classroom instruction. This approach emphasizes the relevance of basic sciences to clinical practice. The osteopathic approach is continually emphasized by lecture and laboratory demonstration including manipulative techniques. Other courses not directly related to a system are also included in Phase II as Family Medicine Core Courses.

**First Year-Second Semester**
- DO 5110-Dermal System (4 credit hours, 4 weeks)
- DO 5120-Neurosensory System (17.5 credit hours, 10 weeks)
- DO 5130 Musculoskeletal System (7.5 credit hours, 4 weeks)
- DO 5140 Medical Ethics (Cr/NCr)
- DO 5150 Introduction to Clinical Medicine (ICM) I (2 credit hours, 1 week)
- DO 5160 Behavioral Science and Substance Abuse (2.5 credit hours)
- DO 5190 Osteopathic Principles and Practice II (2.5 credit hours)

**Second Year-First Semester**
- DO 6010 Blood and Reticuloendothelial System (7.5 credit hours, 3 weeks)
- DO 6020 Cardiovascular System (14.5 credit hours, 9 weeks)
- DO 6030 Public Health (1 credit hour, 1 week)
- DO 6040 Respiratory System (9.5 credit hours, 7 weeks)
- DO 6050 Psychiatry (2 credit hours)
- DO 6090 Osteopathic Principles and Practice III (2.5 credit hours)

**Second Year-Second Semester**
- DO 6110 Renal System (5.5 credit hours, 3 weeks)
- DO 6120 Endocrine System (5.5 credit hours, 3 weeks)
- DO 6130 Reproductive System (8 credit hours, 4 weeks)
- DO 6140 Gastrointestinal System (13 credit hours, 7 weeks)
- DO 6150 Introduction to Clinical Medicine (ICM) II (Cr/NCr)
- DO 6160 Medical Jurisprudence (1 credit hour)
- DO 6190 Osteopathic Principles and Practice IV (5 credit hours)

*Clinical Performance Examination I will be administered at the end of the second year of the curriculum. Students are required to pass this examination in order to be promoted to Phase III of the curriculum.

**PHASE III:** Clinical Training-Third and Fourth Years

**Rotations Office**

The Director of Clinical Education and the Rotations Office staff are dedicated to providing our students with the best possible clinical education and providing exceptional service to everyone with whom they interact. The Office assists the College of Osteopathic Medicine of the Pacific and its students with planning for and completion of their clinical training in the third and fourth years.

**Goals**

The goal of COMP’s clinical curriculum is to prepare each COMP student with the knowledge, attitudes and skills to excel in their chosen postdoctoral training program. Specifically, the student will be able to:

- Identify the wide range of normal human functioning.
• Recognize, diagnose and treat the most commonly encountered health conditions in a family practice;
• Recognize, diagnose and treat the acute, life-threatening conditions encountered by the family physician.
• Differentiate health and common health problems from less common diseases.
• Recognize conditions or situations which are best handled by consultation and/or referral.
• Provide continuity of health care beginning with initial patient contact.
• Assess and treat chronic medical conditions in various stages of progression.
• Develop appropriate, professionally intimate relationships with patients.
• Understand patients' individual concerns and incorporate those concerns into routine patient care.
• Integrate osteopathic philosophy and practices into routine patient care.
• Access medical references including up-to-date medical literature to understand current medical knowledge and thought.
• Understand and apply the concepts of community oriented primary care, epidemiology, health screening and prevention, and;
• Understand and work with the family unit to improve the health and welfare of the individual patient and his/her family.

Clinical Curriculum
COMP's clinical curriculum consists of the following four-week rotations:

**Third Year**
1 Family Practice
3 Internal Medicine (2 General; 3rd General, GI, CARD, or PULM)
1 Surgery (General)
2 Pediatrics
1 Psychiatry
1 Obstetrics/Gynecology
1 Osteopathic Manipulative Medicine
1 Geriatrics
1 Vacation (not first rotation)

**Fourth year**
1 Family Practice
2 Internal Medicine (General, GI, CARD, PULM, NEURO)
1 Surgery (General or subspecialty)
1 Emergency Medicine
5 Electives
1 Vacation

**Clinical Performance Examination II will be administered during the fourth year of the DO curriculum. Students are required to pass Clinical Performance Examination II in order to graduate from the Doctor of Osteopathic Medicine program.**

Each year's curriculum requirements may be completed in any order. There is a mandatory four week break at the end of the MSIII year.

The minimum length of a rotation is four weeks. Rotations may not be split. A substantial number of rotations may be assigned for MSIII and IV years by the Rotations Office, including a block of rotations (four - six). The student may express a preference for preceptors, geographic locations, etc. for the remaining rotations.
Implementation

Preceptors and hospitals will implement the curriculum in a manner which balances the learning needs of the students and the educational resources available at the site. Preceptors 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 board, 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. We hope that physicians will 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 preceptor or their professional designate.

Evaluation of Students on Clinical Rotations

The "preceptor 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 including a rotation grade. If the preceptor of record cannot or will not assign a grade, the Assistant Dean for Academic Affairs will determine a grade for the rotation.

Recording of Grades

No grade may be changed more than 20 business days after it is reported by the Clinical Rotations Office to the Registrar for any reason other than a clerical error. Within those 20 days, a grade may only be changed if the Rotations Office receives a signed statement from the preceptor specifying that a clerical error had been made regarding the grade.

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 Medical School Curriculum Committee, the faculty, the Dean of Osteopathic Medicine and the Executive Vice President of Academic Affairs. Unless otherwise noted, student performance in these courses is graded using the College's numerical score system during the first two years and a letter grade in the final two years of the curriculum.

DO 5001 Summer Preparatory Program (0 credit hours, Cr/NCr)

The purpose of the Summer Preparatory Program is to prepare incoming students for the Gross Anatomy course and to provide an introduction to Biochemistry. The anatomy component focuses on the skeletal, muscular, cardiovascular and nervous systems, along with a brief overview of the other body systems. Also included in the program are presentations that focus on enhancing student study and test-taking skills. This course is designed for students not having prior coursework in human anatomy. Acceptance into this program is at the discretion of the instructor/coordinator. The course is elective and does not count toward meeting the requirements of the Doctor of Osteopathic Medicine curriculum. A separate tuition of $300 is charged for this program.

DO 5010 Biochemistry (4.5 credit hours, Numeric Score)

This course explains the molecular basis of life and how human physiology can be understood in biochemical terms. The broad objective is to contribute to the formation of a solid foundation of knowledge for future comprehension of the biochemistry of each organ system, the disease states caused by biochemical abnormalities and the biochemical basis for clinical diagnosis and therapy.
DO 5020 Embryology (1 credit hour, Numeric Score)
This course traces, through lectures and demonstrations, the basic developmental stages of the human from fertilization to organogenesis. Specific attention is given to anomalies of early development and teratology. Basic information necessary to understand the development of organ systems is provided.

DO 5025 Medical Genetics (1 credit hour, Numeric Score)
This course provides the student with an introduction to genetic principles and practices applicable to the contemporary practice of medicine. Topics covered include pedigree analysis, structural gene mutations, the human genome, X-linked genetic transmission, triple repeat diseases, inborn errors of metabolism and newborn screening.

DO 5030 Gross Anatomy (14.5 credit hours, Numeric Score)
The objective is to provide the student with an understanding of the structure and arrangement of the gross anatomical features of the human body. Students are introduced to the language of anatomy and the clinically important relationships through lectures and laboratory dissection of cadavers. Models, radiographs and special demonstrations are used to help emphasize areas useful to the physician.

DO 5040 Histology (2 credit hours, Numeric Score)
The course introduces the student to an understanding of the structure and function of cells and tissues using light and electron microscopy. Emphasis is on the structural specialization, function and interaction of cells in forming the four basic tissues and the study of the structural arrangements of the basic tissues in organs. The aim of the lectures is to introduce and amplify the laboratory work and stress current concepts. The laboratory provides an opportunity for the visual examination of cells, tissues and organs using the light microscope.

DO 5050 Microbiology (5.5 credit hours, Numeric Score)
The objective of the course is to enable students to recognize and describe major groups of microorganisms responsible for infectious diseases. The course stresses the structure, physiology and genetics of microorganisms in relation to their pathogenicity. The salient features of bacteria, fungi, protozoa, viruses and viroids are discussed. In addition, a thorough knowledge of the host-parasite relationship, including characteristics of organisms contributing to disease and host-defense mechanisms, are stressed. Fundamental concepts of immunology, including the structure of antigens and antibodies, serological reactions, their underlying principles and their diagnostic applications are emphasized. Laboratory experiments are designed to augment the lectures and to provide the student with an appreciation of the functioning of a diagnostic laboratory.

DO 5060 Pathology (2.5 credit hours, Numeric Score)
The course is devoted to the basic pathogenesis and morphology of disease. Cell injury and death, inflammation, the repair process, hemodynamic changes, neoplasia, chemical and physical injuries are discussed. The laboratory is designed to supplement the lectures, utilizing glass slides, gross specimens and Kodachrome slides. Introductory lectures on laboratory medicine are presented.

DO 5070 Pharmacology (3.5 credit hours, Numeric Score)
This is a basic course designed to orient medical students to the effect of drugs on biological systems. The initial part of the course deals with general principles in pharmacology, including drug absorption, distribution, action, toxicity, biotransformation and elimination. The latter part of the course focuses upon chemotherapeutic agents used in treating infectious diseases. Concepts and principles will be introduced which are important for the rational evaluation and utilization of drugs in the practice of osteopathic medicine.

DO 5080 Physiology (1.5 credit hours, Numeric Score)
This course is an integrated approach to the general physiology of cells, with a special emphasis on excitable cells, i.e., the neuron and muscle cell. Basic concepts on the functions of cells and control of cellular activities are reviewed. The course is designed to provide a solid foundation for the first-year
medical student to comprehend basic physiologic theory and to integrate these principles into a better understanding of organ and system function and, ultimately, enable a better appreciation of total body physiology.

DO 5090 Osteopathic Principles and Practice (2 credit hours, Numeric Score)

This core course is designed as an introduction and development of the basic philosophy and principles of osteopathic health care. The course is offered throughout the four semesters of Phase I and Phase II. Emphasis is on the sequential development of palpatory diagnostic and therapeutic skills of osteopathic manipulative medicine. Recognizing the contribution of the musculoskeletal system to health and disease, the course integrates the osteopathic philosophy of patient care with the systems approach of medical education. The course teaches osteopathic history, philosophy, problem-solving and patient management, incorporating multiple osteopathic manipulative techniques as appropriate, including: muscle energy, myofascial release, high velocity and low amplitude, counterstrain, articulatory techniques, trigger point and osteopathy in the cranial field.

DO 5110 Dermal System (4 credit hours, Numeric Score)

The first system studied is the Dermal System. Problems of the skin are discussed by qualified medical professionals. The clinical lectures are coordinated with embryology, histology, physiology, biochemistry, pharmacology, microbiology, pathology and dermatopathology.

DO 5120 Neurosensory System (17.5 credit hours, Numeric Score)

This course deals with the brain, spinal cord and the peripheral nervous system. The embryology, histology and neuroanatomy along with biochemistry, physiology and pharmacology are considered. In addition to infections of the nervous system, pathology, neurology, ophthalmology, otorhinolaryngology are important components. Sleep disorders, cerebrovascular disorders, aging and dementia are also considered.

DO 5130 Musculoskeletal System (7.5 credit hours, Numeric Score)

The importance of the musculoskeletal system is readily apparent, being the largest system of the body, comprising nearly 70 percent of the body mass. The embryology, histology and functional anatomy, including kinesiology, are presented in this course as well as biochemistry, pharmacology, physiology and microbiology. The pathology and clinical aspects of this system are discussed along with the related topics of sports medicine, rehabilitative medicine, exercise, rheumatoid diseases and orthopedics as they all relate to the primary care practice of osteopathic medicine.

DO 5140 Medical Ethics (0 credit hours, Cr/NCr)

This is an introduction to the ethical principles and methods of analysis used in medical ethics. The aim is to provide a systematic framework for resolving ethical dilemmas encountered in the practice of medicine. Medical Ethics is covered in Phases II and III.

DO 5150 Introduction to Clinical Medicine I (ICM I) (2 credit hours, Numeric Score)

The primary purpose of the Introduction to Clinical Medicine sequence is to prepare students for clinical rotations. The preparation is geared both to communication and clinical skills. ICM-I is designed to introduce the clinical skills believed to be the most important in becoming an osteopathic physician. It is a one-week introductory course taught during the MSI year. Students are taught basic history taking and physical examination skills. The course emphasizes the cognitive and affective skills needed for clinical reasoning and communication between the patient and the physician. Verbal and non-verbal communication techniques are taught utilizing real, as well as simulated, patients.

DO 5160 Behavioral Science and Substance Abuse (2.5 credit hours, Numeric Score)

This course deals with biological, psychological and social aspects of behavior in relation to medicine. Major topics include etiology and treatment of substance abuse, the physician-patient relationship, emotion and personality, etiology of gender identity and sexual orientation, evolutionary origins of behavior, genetic and environmental aspects of behavioral disorders. The course is designed to challenge students and to show them how their patients' behaviors are a major contributor to health and disease. The course also
deals with the physician's role in educating and bringing about behavior change in patients, peers and the community.

DO 5172 Sports Medicine (0 credit hours, Cr/NCr)

DO 5190 Osteopathic Principles and Practice II (2.5 credit hours, Numeric Score)
   Continuation of DO 5090.

DO 6010 Blood and Reticuloendothelial System (7.5 credit hours, Numeric Score)
   Besides considering the embryology, histology and biochemistry of the hemopoietic and lymphoreticular organs, during this system, the influences of microbiologic and pharmacologic agents are discussed. Basic immunology, the mechanisms of immunologic injury and immune tolerance, transplantation, tumor immunology and the immunodeficiency states are covered in this course. In addition, the pathology and clinical aspects of hematologic diseases and diseases of the lymph-reticular system are presented along with the pertinent laboratory tests. The laboratories provide hands-on experience to examine normal and abnormal blood smears, perform blood tests and examine lymph node neoplasms.

DO 6020 Cardiovascular System (14.5 credit hours, Numeric Score)
   The embryology, histology and gross anatomy of the heart and blood vessels are reviewed. The biochemistry, pharmacology, physiology and microbiology as related to this system are discussed. The pathology is presented as well as the clinical diagnostic and treatment modalities. Included in this system is the Advanced Cardiac Life Support (ACLS) course in which students receive certification as ACLS Providers.

DO 6030 Public Health (1 credit hour, Numeric Score)
   The purpose of this course is to help students understand public health and its importance to the practicing physician. Epidemiology, community health, immunization procedures, communicable disease control, environmental and occupational health are discussed. Interaction of the physician with public health agencies is stressed as is working with public health statistics.

DO 6040 Respiratory System (9.5 credit hours, Numeric Score)
   The embryology, histology and gross anatomy of the lungs and nasotracheobronchial tree are presented. Respiratory physiology and defense mechanisms as well as microbiology, biochemistry and pharmacology relating to the system are discussed. Pathology of the upper and lower respiratory system is presented along with clinical presentations of diagnostic and treatment modalities.

DO 6050 Psychiatry (2 credit hours, Numeric Score)
   The psychiatric component of illness forms a major part of the practice of medicine. The ability to recognize and deal with, or to refer, such cases poses a formidable challenge to the practitioner. Using personal and professional skills, using ancillary personnel wisely, and cooperating with the psychiatrists requires background knowledge and skill. This course is designed to provide that help and is taught during the Cardiovascular System.

DO 6071 Advanced Cardiac Life Support (0 credit hours, Cr/NCr)
   A series of didactic and practical educational exercises designed to meet the requirements for Advanced Cardiac Life Support certification from the American Heart Association.

DO 6090 Osteopathic Principles and Practice III (2.5 credit hours, Numeric Score)
   Continuation of DO 5190.

DO 6110 Renal System (5.5 credit hours, Numeric Score)
   The embryology and histology of the kidneys and urinary system are initially presented. The biochemistry, physiology and pharmacology of fluid and electrolyte balance with major emphasis on kidney function are presented. The microbiology, pharmacology, and clinical management of urinary infections are fully discussed. The identification, diagnosis and treatment of renal and urinary disorders are explored.
DO 6120 Endocrine System (5.5 credit hours, Numeric Score)

Endocrinology is a subject of broad range spreading over many disciplines. The system is approached in a logical sequence by a consideration of the anatomy of the hormone secreting glands, the biochemical description of what a hormone is, how hormones are studied and measured and the physiology in maintaining homeostasis. Pathologies of the endocrine system are discussed and the pharmacology of endocrine drugs is presented. Clinical manifestations of endocrine disorders of all ages are presented with emphasis on identification, diagnosis and treatment. The system concludes with a consideration of evaluation and management of endocrine emergencies.

DO 6130 Reproductive System (8 credit hours, Numeric Score)

The anatomy, embryology and histology of both the female and male reproductive systems are considered. The physiology, biochemistry, pathology, pharmacology and microbiology of both reproductive systems are also discussed in depth. In addition, the basic science disciplines discuss their principles with respect to the relationships which exist between mother and fetus during pregnancy. Clinical lectures on obstetrics, gynecology, perinatology, nutrition, the problem of child abuse and the management of pregnancy are presented during this segment. Human sexuality is incorporated.

DO 6140 Gastrointestinal System (13 credit hours, Numeric Score)

The gastrointestinal system is one of the more complex and involved systems of the body. The embryology and histology are discussed. The complicated biochemistry and physiology, the influence of pharmacology and the problems with microbiology are presented along with the clinical and pathological aspects of the system. The nutrition course is incorporated in this system.

DO 6150 Introduction to Clinical Medicine II (ICM-II) (Cr/NCr)

ICM-II provides students with opportunities to learn and practice clinical patient assessment skills during the pre-clinical phase of osteopathic education. The early integration of these pre-clinical experiences provides students the opportunity to learn the skills, values and attitudes that are most important for the development of caring, compassionate osteopathic physicians. ICM-II is taught in conjunction with each major system. All ICMs are concerned with the system being presented concurrently in the curriculum. This is a required course for credit and promotion to the clinical phase.

DO 6160 Medical Jurisprudence (1 credit hour, Numeric Score)

Despite variance in state laws, the major factors of medical legal practice are rather common to all geographic areas. Using California laws as a base, the general rules of medical practice are presented. The obligations of the physician to the community, the patient, the hospital, colleagues and society form a small but important part of the study. The course in Phase II discusses duties and responsibilities and the medical, legal, and ethical aspects of medicine. Standards of care, vicarious liability and negligence are also included. Additional symposiums are conducted during the Essentials of Family Medicine courses in Phase III of the curriculum.

DO 6171 Differential Diagnosis (0 credit hours, Cr/NCr)

This course provides students with exposure and practice in case presentations and the application of differential diagnosis skills to selected problems in formulating evaluation or therapeutic intervention plans. Facilitators provide real-world thinking and experience to assist students in developing the above skills. This course helps prepare students for clinical rotations, where they will be asked to present cases that they are evaluating and managing. The course is integrated with each of the systems.

DO 6172 Emergency Medicine (0 credit hours, Cr/NCr)

This course is taught during the systems in Phase II, with subsequent lectures interspersed in Phase III. The purpose is to educate osteopathic medical students in the basics of emergency medicine, utilizing a structural and functional approach wherever possible. Basic areas covered in detail are physical and emotional trauma, poisonings, the paramedic system and emergency cases from all areas of clinical medicine as they relate to a given body system.
DO 6173 Geriatrics (0 credit hours, Cr/NCr)

This challenging and difficult area of clinical practice requires additional skills and knowledge not readily derived from standard textbooks of medicine. The student is instructed on special problems of the elderly with emphasis on improving his/her clinical skills to deal with the unique diagnostic, therapeutic and psychosocial problems of the elderly. This sequence is integrated into the Systems.

DO 6174 Human Sexuality (0 credit hours, Cr/NCr)

The purpose of this course is to promote student understanding of human sexuality by presenting a variety of issues ranging from normal to dysfunctional sexuality. It is a one-week course taught as a portion of the Reproductive System (DO 6130). The course covers a range of human sexuality issues including the anatomy and physiology of reproduction, pathology, normal sexual response and psychosexual development throughout the life cycle. The theory and practice of treatment for sexual dysfunction are considered. Current therapeutic concepts and techniques are discussed along with required case reviews, which include diagnosis, treatment plan and prognosis.

DO 6175 Nutrition (0 credit hours, Cr/NCr)

The body is capable of handling most problems within a reasonably balanced nutritional state. Furthermore, healing and recovery from surgery or illness is facilitated by a good nutritional state. The course provides the basic information on which to evaluate the nutritional requirements of the body in health and disease. A review of the vitamins and their indications as well as limitations, the use and need for the trace minerals and the proportion of carbohydrates, fats and proteins of the balanced diet are discussed. Clinical nutrition is also emphasized in this course, which is taught during the Gastrointestinal System (DO 6140).

DO 6176 Pediatrics (0 credit hours, Cr/NCr)

Recognizing that the child is not just a small adult, this lecture series is devoted to the special problems of childhood. These subjects are integrated during Phase II in each system as appropriate. All systems contain an element of pediatrics and this course is designed to cover those aspects that are peculiar to pediatrics (infancy to adolescence). Additional pediatric presentations are given in Phase III during the Essentials of Family Medicine courses.

DO 6190 Osteopathic Principles and Practice IV (5 credit hours, Numeric Score)

Continuation of DO 6090.

DO 7010 Family Practice I (10 credit hours, Letter Grade)

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 interprofessional communication. In subsequent courses in this series, greater involvement and independence in patient management are expected.

DO 7020 Internal Medicine I (10 credit hours, Letter Grade)

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 interprofessional communication. In subsequent courses in this series, greater involvement and independence in patient management are expected.

DO 7021 Internal Medicine II (10 credit hours, Letter Grade)

Prerequisite DO 7020. Continuation of DO 7020.

DO 7022 Internal Medicine III (10 credit hours, Letter Grade)

Prerequisite DO 7020. Supervised clinical education in general internal medicine or one of the internal medicine subspecialties of 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 interprofessional communication. In subsequent courses in this series, greater involvement and independence in patient management are expected.
DO 7030 Surgery I (General) (10 credit hours, Letter Grade)
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 interprofessional communication. In subsequent courses in this series, greater
involvement and independence in patient management are expected.

DO 7060 Osteopathic Manipulative Medicine (10 credit hours, Letter Grade)
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 interprofessional communication.

DO 7070 Pediatrics I (10 credit hours, Letter Grade)
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 interprofessional communication.

DO 7071 Pediatrics II (10 credit hours, Letter Grade)
Prerequisite: DO 7070. Continuation of DO 7070.

DO 7080 Psychiatry (10 credit hours, Letter Grade)
Prerequisite: DO 7010 or DO 7020. 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 interprofessional communication.

DO 7090 Obstetrics/Gynecology (10 credit hours, Letter Grade)
Prerequisite: DO 7010 or DO 7020. 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 interprofessional communication.

DO 7100 Geriatrics (10 credit hours, Letter Grade)
Supervised clinical education in geriatrics including clinical management, technical and procedural
skills, interpretation of diagnostic data, patient education, development of diagnostic and management plans
and interprofessional communication.

DO 7510 Family Practice II (10 credit hours, Letter Grade)
Prerequisite: DO 7010. Continuation of DO 7010.

DO 7520 Internal Medicine IV (10 credit hours, Letter Grade)
Prerequisite DO 7021 and 7022. Supervised clinical education in general internal medicine or one of the
internal medicine subspecialties of gastroenterology, pulmonology, neurology, or cardiology. 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, greater involvement and independence in patient management are
expected.

DO 7521 Internal Medicine V (10 credit hours, Letter Grade)
Prerequisite DO 7520. Supervised clinical education in general internal medicine or one of the internal
medicine subspecialties of gastroenterology, pulmonology, neurology, or cardiology. Expected
competencies include clinical management, technical and procedural skills, interpretation of diagnostic data,
patient education, development of diagnostic and management plans and interprofessional communication.

DO 7530 Surgery II (10 credit hours, Letter Grade)
Prerequisite DO 7030. Supervised clinical education in general surgery or one of the surgical
subspecialties of ophthalmology, orthopedics, urology or cardiovascular/thoracic. 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, greater involvement and independence in patient management are expected.

DO 7540 Emergency Medicine (10 credit hours, Letter Grade)
Prerequisite: DO 7010 or DO 7020. 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 interprofessional communication

DO 7550 Elective (10 credit hours; repeatable to a maximum of 50 credit hours, Letter Grade)
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 Rotations.

DO 8050 Essentials of Family Medicine I (EFM-I) (3.5 credit hours, Letter Grade)
The primary purpose of the Essentials of Family Medicine sequence is to serve as an assessment tool and review of basic clinical knowledge, as well as special topics critical to the student's becoming a complete osteopathic physician and lifelong clinical learner. The program is designed to review, augment, and amplify clinical material presented to the students during the first two years of medical school, as well as provide advanced information and techniques that will be valuable during rotations, residency and eventual medical practice. Classes are presented in a multidisciplinary format that includes lectures, workshops, demonstrations, multi-media presentations and other modalities. It is geared toward providing practical and up-to-date information regarding recent innovations in medicine.

EFM-I is designed to help students gain the essential knowledge and skills that form the foundation for their clinical rotations and medical careers. Course content focuses on helping students begin to apply theoretical information in real world contexts. Topics include clinical, medico-legal and ethical issues. Sessions are scheduled over 3 weekends. Attendance is mandatory at all sessions.

DO 8550 Essentials of Family Medicine II (EFM-II) (3.5 credit hours, Letter Grade)
Continuation of EFM I (DO 8050). EFM-II is designed to promote mastery of the essential knowledge and skills learned during EFM-I, while also promoting lifelong learning and preparation for board exams. It is designed to assist students in moving from their general knowledge base to more specific applications of medical material. Overall, the course is designed to help students pull together their vast base of medical knowledge and apply this information effectively in the practice of medicine. To accomplish this, the course more closely resembles a continuing-education format, with physicians from specialty fields as presenters. The sessions are scheduled over 3 weekends. Attendance is mandatory at all sessions.

Elective Courses

DO 6181 An Osteopathic Approach to Challenged Children (Cr/NCr)
This course provides interested second year-students with an introduction to the causes, prevention, and treatment of brain injury and its resulting neurological impairments commonly classified as mental retardation, cerebral palsy, and learning and behavior problems. The course emphasizes osteopathic palpatory diagnosis and treatment but recognizes the essential contribution of other supportive modalities.

IS 5010 Literature and Medicine (Cr/NCr)
An elective course is offered to second-year students during the spring semester. The course is designed to expose medical students to selected themes and approaches to the humanities, focusing on literature that relates to medical concerns of the healthcare professionals and the general public.
IS 5030 Art Experience (Cr/NCr)
Goals of the course focus on the student being able to have a meaningful art experience that addresses the connection between art and life. Students will also acquire a general understanding of the basic constructs of art including art appreciation and learn how to think creatively through their work.

HONORS AND AWARDS
The following awards for DO students are presented annually on Honors Day in April:
- Provost's Student Government Award
- Dean's Award
- William G. Woodman, MD Humanitarian Memorial Award
- Russell B. McCaughan Award
- Neocortex Award
- William G. Stahl, DO, FACOS Memorial Scholarship
- Anthony Joseph Ronzo, Sr. Memorial Award
- Auxiliary to the Osteopathic Physicians and Surgeons of California Scholarship Award
- COMP Western University Service Award
- Community Clinic Service Award
- Class of 1989 Award
- McGraw-Hill Award
- Joseph and Dorothy Gendron Journalism Award
- Dr. V. Gladys Shutt Memorial Award
- Richard E. Eby Leadership Scholarship
- Mickey and Nell Clamage Memorial Scholarship Award
- Roy G. and Marion L. Kramer Endowment Fund Award
- Muriel Chapman, DO, Memorial Award
- Robert W. Finegan Memorial Award
- Jeff Plumb Memorial Award
- The President's Society Award
- Dr. Alex M. Rene, Memorial Scholarship Award
- Linda Fox Memorial Endowment Fund Award
- Louise Kramer Memorial Scholarship Award
- Guy M. Allmon Scholarship Fund Award
- Glen Scheresky Memorial Scholarship Award
- American Association of Colleges of Osteopathic Medicine
- Council of Student Council Presidents, Student DO of the Year Award
- Dr. Sheila Xenos Memorial Award
- Osteopathic Physicians and Surgeons of California Matthew L. Weyuker Scholarship Award

The following awards are presented annually to graduates at the Commencement Dinner Dance:
- President's Award
- Dean's Award
- Gate Pharmaceutical Student Award
- Edward B. Parris and Jacqueline A. Parris Award
- Dr. Frank T. Carr Memorial Award
- Steven W. Dyer Award
- Janet M. Glasgow Memorial Achievement Citation of the American Medical Women's Association
- American College of Osteopathic Family Physicians Award
- Pauline Weiss Pumerantz Memorial Award
- Richard H. and Anna Kaiser Memorial Award
- New Mexico Osteopathic Medical Association Foundation for Osteopathic Education and Professional Development Award for Academic Excellence
- Osteopathic Physicians and Surgeons of California Award
- Shirley Jane Watters Memorial Award
- Rev. & Mrs. Al and Verna Braswell Award
- Leonard E. Peck, Sr. Memorial Award
- Phoenix Award
Charles Vowels, MD, Memorial Award
Alumni Memorial Award
Society of Academic Emergency Medicine Excellence in Emergency Medicine Award.
James R. Sawrey Memorial Award
Dr. Alex M. Rene, Memorial Award
National American Osteopathic Foundation: The Donna Jones Moritsugu Memorial Award

ACADEMIC CALENDAR 2001-2002

DO PROGRAM

Tuesday, Wednesday, Jun. 5-6, 2001
NBOME COMLEX Level 1

Wednesday, Jun. 6, 2001
Fall Semester Tuition Due (ISAC students)

Tuesday, Wednesday, Jun. 12-13, 2001
NBOME COMLEX Level 3

Wednesday, Jun. 20, 2001
Registration (3rd & 4th years)
Fall Semester Tuition Due (3rd & 4th years)

Monday, Jun. 25, 2001
Clinical Rotations Begin

Wednesday, Jul. 4, 2001
Independence Day

Friday - Sunday, Jul. 20-22, 2001
II-4 EFM Weekend

Thursday, Aug. 9, 2001
Registration (1st and 2nd year)
Fall Semester Tuition Due (1st & 2nd years)

Saturday, Aug. 11, 2001
Convocation/White Coat Ceremony

Monday, Aug. 13, 2001
Classes Begin (1st and 2nd years)

Saturday, Aug. 25, 2001
OMAC

Tuesday, Wednesday, Aug. 28-29, 2001
COMLEX Level 2

Monday, Sept. 3, 2001
Labor Day - no classes

Friday - Sunday, Sept. 14-16, 2001
I-1 EFM Weekend

Monday, Oct. 8, 2001

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Columbus Day - no classes
Tuesday, Wednesday, Oct. 16-17, 2001
COMLEX Level 1

Wednesday, Nov. 7, 2001
Spring Semester Tuition Due (4th years)

Friday - Sunday, Nov. 9-11, 2001
II-5 EFM Weekend

Saturday, Nov. 10, 2001
OMAC

Wednesday, Nov. 21, 2001
Thanksgiving Recess - Noon

Monday, Nov. 26, 2001
Classes Resume

Thursday, Dec. 6, 2001
Spring Semester Tuition Due (3rd years)

Tuesday, Wednesday, Dec. 4-5, 2001
COMLEX Level 3

Friday - Sunday, Dec. 7-9, 2001
I-2 EFM Weekend

Friday, Dec. 21, 2001
Last Day of Classes

Monday, Dec. 24, 2001
Winter Recess Begins

Wednesday, Jan. 2, 2002
Spring Semester Tuition Due (1st & 2nd years)

Monday, Jan. 7, 2002
Classes Resume

Tuesday, Wednesday, Jan. 15-16, 2002
COMLEX Level 2

Monday, Jan. 21, 2002
<table>
<thead>
<tr>
<th>Event</th>
<th>Dates</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Martin Luther King Holiday - no classes</td>
<td>Monday, April 8, 2002</td>
<td>Honors Day</td>
</tr>
<tr>
<td>Friday - Sunday, Feb. 1-3, 2002</td>
<td></td>
<td></td>
</tr>
<tr>
<td>II-6 EFM Weekend</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Monday, Feb. 18, 2002</td>
<td></td>
<td>President's Day - no classes</td>
</tr>
<tr>
<td>Friday - Sunday, Mar. 1-3, 2002</td>
<td></td>
<td>May 31, 2001</td>
</tr>
<tr>
<td>1-3 EFM Weekend</td>
<td></td>
<td>Commencement</td>
</tr>
<tr>
<td>Monday, Mar. 18, 2002</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Spring Vacation Begins</td>
<td>Tuesday, Wednesday, Jun. 4-5, 2002</td>
<td>COMLEX Level 1</td>
</tr>
<tr>
<td>Monday, Mar. 25, 2002</td>
<td></td>
<td>Tuesday, Wednesday, Jun. 11-12, 2002</td>
</tr>
<tr>
<td>Classes Resume</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**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

Doctor of Pharmacy Program

ACCREDITATION
The College of Pharmacy is accredited by the American Council on Pharmaceutical Education.

PHARMACY: ABOUT THE PROFESSION
The practice of pharmacy has evolved from a historical emphasis on the preparation and distribution of drug products to new activities and responsibilities that focus on the rational, safe and cost-effective use of drugs. Just as it is generally assumed that physicians are primarily involved in providing medical care and nurses in providing nursing care, pharmacists are the primary providers of pharmaceutical care. The mission of the pharmacy profession, therefore, is to meet the pharmaceutical care needs of the public.

As a pharmacist you will be able to care for your patients in many important ways:

- Participate in the planning and implementation of effective drug therapy.
- Monitor and evaluate drug therapy to identify and solve patient-specific drug therapy problems.
- Evaluate clinical literature.
- Prepare medications.
- Select the drug product dosage form.
- Calculate the dose and determine the dosing schedule.
- Educate and counsel patients, and;
- Work with other health care providers and the patient to promote health and prevent disease.

THE DEGREE
The Doctor of Pharmacy degree (PharmD) is awarded in recognition of the highest level of professional education in pharmacy in the United States. To earn the PharmD degree, students complete four years of professional study following a minimum of two years of preprofessional education at an accredited college or university.

Students who complete this program are eligible to take state pharmacy licensing examinations. After passing this examination, graduates are licensed to perform all the duties and responsibilities of a practicing pharmacist.

CAREER OPPORTUNITIES
Our graduates find a vast array of exciting career pathways open to them. The opportunities below represent only a small list of possible career options.

Community Practice
Pharmacy offers a variety of professional opportunities in the community setting. Independent pharmacies, corporately owned pharmacies and neighborhood health care clinics all provide opportunities for direct patient care. Other examples of community practice include specialized home health care, consulting for nursing home patients and conducting patient education programs.
Institutional Practice
Pharmacists in hospitals and other health care institutions may be involved in direct patient care, teaching, drug use evaluation, clinical research studies, public service and administration.

Managed Care Pharmacy
Pharmacists practice in a variety of managed care organizations including health maintenance organizations and preferred provider organizations. In these settings, pharmacists develop formularies, implement drug utilization reviews and analyze physician prescribing patterns.

Pharmaceutical Companies
Research and development, testing of drugs in humans, production, quality control, marketing, public relations, sales, and management are some of the career opportunities available in industry.

Public Service Practice
Pharmacists practice in federal government agencies and services including the Food and Drug Administration (FDA); Drug Enforcement Administration (DEA); the Army, Navy and Air Force; Public Health Service; and Department of Veterans Affairs.

Academia
Opportunities for careers in colleges or schools of pharmacy include administration, teaching, research and clinical service. Additional opportunities in teaching, research, or practice may required post-graduate education or training beyond the doctor of pharmacy degree.

THE COLLEGE OF PHARMACY
A major goal of the College of Pharmacy is to prepare competent and caring practitioners. We are prepared to offer you a quality educational experience.

Modern Facilities
You will receive instruction in a modern facility with classrooms and breakout rooms furnished with state-of-the-art equipment.

A Friendly Environment
You will be treated as a colleague and a professional who is seeking to become a competent pharmacy practitioner.

Supportive Faculty
You will receive instruction from faculty members who are committed to excellence in pharmaceutical education. Many faculty members are practicing clinical pharmacists who are actively providing primary care or consultative services to patients in a variety of practice settings.

A Rich Student Life
You will have an opportunity to participate in a number of professional pharmacy organizations as well as other school-wide activities.

ACADEMIC COURSE WORK
To obtain the PharmD degree you will complete a curriculum that contains both didactic and clinical components.

The Didactic 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 and pharmacokinetics and learn how to apply this knowledge to pharmacy practice. Your studies will include communication skills, patient counseling, laws about drugs and pharmacy practice, health care systems, physical assessment and evaluation of the drug literature.
The Clinical Training Component

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 42 weeks in these training sessions, called advanced pharmacy practice experiences. Such pharmacy practice experiences will take place in hospitals as well as in clinics, community pharmacies and other settings where pharmacists practice.

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 Western University, we retain smaller class sizes, offering you a closer relationship with your faculty and fellow students. The College of Pharmacy is looking for individuals who have excellent communication skills, who care for people and are compassionate, who are dedicated and determined, who are dependable and who 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 prepharmacy and science grade point average requirement is 2.5. Grades of "C-" in any of the prerequisite courses are not accepted. Prerequisite courses are subject to review each year. For the latest information, you should consult our web site at www.westernu.edu.

1. Prerequisite Courses

   College English (1 semester)
   English Composition (1 semester)
   Speech Communication (1 semester)
   General Chemistry with lab (2 semesters)
   Organic Chemistry with lab (2 semesters)
   Human Anatomy with lab* (1 semester)
   Human Physiology with lab* (1 semester)
   Microbiology with lab-Medical Microbiology is preferred (1 semester)
   Calculus (1 semester)
   Electives (2 semesters)-Electives must be met from two of the three following areas: public speaking/debate, social sciences, or economics.

   *If anatomy and physiology are combined, we will accept a minimum of 5 semester units. Anatomy and physiology must be taken out of 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. All prerequisite course work in progress must be completed no later than the spring semester or quarter immediately preceding matriculation.

2. Test of English as a Foreign Language (TOEFL)

   TOEFL (including essay) is required for all applicants submitting course work from foreign schools, and all permanent and temporary residents of the United States. EXCEPTION: The TOEFL exam will be waived for students graduating with a confirmed baccalaureate or higher degree from a United States institution at the time of application. A minimum score of 550 on the paper based test or 213 on the computer-based test is required. TOEFL scores must be submitted at the time of application. TOEFL scores are valid for 2 years.

3. Recommendations

   Three satisfactory recommendations (forms are provided by the College) are required as part of the admissions application. 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, motivation toward the profession and maturity.
Application Procedures and Deadlines

Candidates may obtain an application as early as August of the academic year preceding the year in which they plan to matriculate. Applicants are considered without regard to race, color, national origin, age or gender. Western University strives to accommodate individuals with disabilities. The application postmark deadline for the class entering in the fall is December 1 of the preceding year.

To request an information brochure and/or an application, contact the Admissions Office at:

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

In addition to submitting a completed application, the applicant must submit a non-refundable application fee of $60, three letters of recommendation, an academic/professional record form, must complete a personal questionnaire (form provided by the University) and submit official transcripts from all colleges attended. All application materials are to be included in the application packet. After receipt of the packet, the Admissions Office will evaluate the applicant's transcripts to ascertain that all prerequisite courses have been completed and that the applicant's cumulative GPA is satisfactory. Applicants who wish to use course work completed outside of the United States must submit their transcripts for evaluation to World Education Services or Josef Silny and Associates. A course-by-course evaluation is required and all course work must be designated as undergraduate, graduate, or professional. Western University will only honor evaluations from one of the above services. The evaluation must be included with the application packet.

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 interview will participate in an assessment of written and verbal communication skills. Interviews are typically held in January and February. Decisions of the Admissions Committee regarding the admission of applicants to the Doctor of Pharmacy program are final.

TUITION AND FEES

In estimating costs for one academic year of study at Western University's College of Pharmacy, you should include tuition and fees, laptop computer and printer, books and supplies, room and board, and other miscellaneous expenses. Actions of the Board of Trustees setting tuition and fees for the academic year are established during the previous spring term. The most current tuition and fees are as follows:

- **Tuition** - $25,635 in 2001-2002 Academic Year.
- **Mandatory fees specific to the College of Pharmacy** will be provided separately.
- **Application Fee** - Non-refundable $60 fee for those applying to the Western University College of Pharmacy.
- **Enrollment Deposit** - $500 for students admitted to the College of Pharmacy. Upon enrollment, this deposit is applied toward the tuition for the academic year. Persons who fail to enroll forfeit the entire deposit.

**Other Fees**

- $30 (per day) Late Registration Fee
- $40 Lost Mail Locker Key
- $5 (each) Copy of Official Transcript
- $10 (each) Copy of Official Transcript Faxed
- $10 Lost ID Badge
- $0.25 (per page) Copy of Student File Material
- (replacement cost) Breakage Fee
The College of Pharmacy requires that each enrolled student have a notebook or laptop computer during class, after class hours and while on rotations.

FINANCIAL ASSISTANCE

All PharmD students are eligible to apply for need-based financial aid. For information, please write to the Financial Aid Office, Western University of Health Sciences, 309 E. Second Street, Pomona, California 91766-1854

ACADEMIC POLICIES AND PROCEDURES

Grading Policy

Students are required to meet a specified set of outcome objectives in each block in the curriculum. The block facilitator will provide the student with a syllabus at the beginning of the block that includes the required outcome objectives, instructional methods, assessment methods, a day-by-day schedule, and grading criteria. Achievement of the outcome objectives will be assessed through individual quizzes, examinations, and individual performance on any assignments given in that block. The minimum passing score (P) in any block is 80%. Students who earn a grade of 90% or higher will receive a grade of “high pass” (HP). A student who fails to meet the minimum requirement of 80% will receive a grade of “no pass” (NP) and will be automatically placed on academic probation (see Probation below). Policies requiring remediation of failed blocks are set forth under Failure to Meet Standards, below. All recorded grades will remain on the official transcript except in cases where clerical errors have occurred. The grading policies for the professional practice component of the curriculum (the Introductory Professional Practice Experience [IPPE], the Advanced Pharmacy Practice Experiences [APPE] and the Advanced Electives [AEs]) are set forth in separate policies.

Grading procedures

Block grades: end of block grades will be assigned as follows:

<table>
<thead>
<tr>
<th>Grade</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>HP</td>
<td>High Pass; a student has achieved a minimum of 90%.</td>
</tr>
<tr>
<td>P</td>
<td>Pass; a student has achieved a minimum of 80%.</td>
</tr>
<tr>
<td>NP</td>
<td>No Pass; indicates the student has not achieved the minimum of 80% in the block (See Failure to Meet Standards section).</td>
</tr>
<tr>
<td>NP/P</td>
<td>Indicates a student has successfully remediated a block. The “NP” will remain on the student’s transcript.</td>
</tr>
<tr>
<td>I</td>
<td>Incomplete (Refer to the policy on Attendance and Absences).</td>
</tr>
<tr>
<td>I/P</td>
<td>Indicates a student has successfully completed a block following receipt of an incomplete grade. The “I” will remain on the student’s transcript.</td>
</tr>
<tr>
<td>I/NP</td>
<td>Indicates a student has unsuccessfully completed a block following receipt of an incomplete grade.</td>
</tr>
<tr>
<td>M</td>
<td>Missing</td>
</tr>
<tr>
<td>W</td>
<td>Withdrawal (Refer to the General Academic Policies and Procedures above).</td>
</tr>
</tbody>
</table>

Advanced Pharmacy Practice Experiences (APPE)/Advanced Electives (AE) grades will be assigned as follows:

<table>
<thead>
<tr>
<th>Grade</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>P</td>
<td>Pass.</td>
</tr>
<tr>
<td>NP</td>
<td>No Pass; student has not achieved the rotation outcomes.</td>
</tr>
<tr>
<td>NP/P</td>
<td>Indicates a student has successfully remediated APPE/AE. The NP will remain on the student’s transcript.</td>
</tr>
<tr>
<td>I</td>
<td>Incomplete (Refer to the policy on Attendance and Absences and on Student Progress).</td>
</tr>
<tr>
<td>I/P</td>
<td>Indicates a student has successfully completed an APPE/AE following receipt of an incomplete grade. The “I” will remain on the student’s transcript.</td>
</tr>
<tr>
<td>I/NP</td>
<td>Indicates a student has unsuccessfully completed an APPE/AE</td>
</tr>
</tbody>
</table>
following receipt of an incomplete grade.

M = Missing
W = Withdrawal (Refer to the General Academic Policies and Procedures above).

Credit hours
To be eligible for graduation, a student must complete the following required components of the Doctor of Pharmacy program:

<table>
<thead>
<tr>
<th>Year</th>
<th># of Credits per year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>40</td>
</tr>
<tr>
<td>2</td>
<td>40</td>
</tr>
<tr>
<td>3</td>
<td>44</td>
</tr>
<tr>
<td>4</td>
<td>50</td>
</tr>
<tr>
<td>Total</td>
<td>174</td>
</tr>
</tbody>
</table>

Learning Assurance
Competency-based education provides students opportunities to achieve block outcomes, thus, learning assurance will be provided in each block. Block faculty will work with students to help them achieve the required standards as stated in the block syllabus. Assessment methods are intended to ensure that outcomes are met, and if not, they are to be used as a means of assessing the area(s) of difficulty. Various methods will be employed to help students via the block syllabus. If additional points are assessed for any assignment or examination for which learning assurance has been provided, the actual numerical score will be recorded as no greater than 80%.

Failure to Meet Standards
Students who fail to achieve the 80% standard in a block will be given a grade of “NP” and will be placed on academic probation automatically by the Dean (See General Academic Policies and Procedures on Probation). Students who receive a designation of “NP” in up to two blocks during one academic year will be required to enroll for remediation for each block for which a grade of “NP” has been recorded. Block remediation may include a variety of activities such as faculty-student conferences, independent study and other types of coursework. However, in all cases, a final comprehensive remediation examination will be required to demonstrate successful attainment of the required standards. It is the student’s responsibility to prepare for the comprehensive remediation examination and other assigned coursework that may be required. Students will be required to pay a fee of $250 for each block remediated. The Academic Performance and Standards Committee will coordinate the block remediation schedule.

If remediation is successful, the student’s transcript will reflect a grade change of NP to NP/P. The original grade of NP will remain on the official transcript. If a student fails any block remediation, he/she may be dismissed from the program. The Academic Performance and Standards Committee will review each case of failure of block remediation and make a recommendation to the Dean.

Remediation for Blocks in the First and Second Professional Years
The Office of the Association Dean for Academic Affairs will post the schedule for the comprehensive remediation examinations the week following the end of the last block of the academic year. Comprehensive remediation examinations will take place during the four weeks following the last block of the academic year. Students must be available for any scheduled comprehensive remediation examination they are required to take.

One comprehensive remediation examination will be administered that covers all block objectives (those areas the student failed plus all other required competencies). Each block requiring remediation will have a separate examination. Students must pass the comprehensive remediation examination to be promoted to the next academic year. Students will be required to pay a fee of $250 for each comprehensive remediation examination.
Remediation for Blocks in the Third Professional Year

The Office of the Associate Dean for Academic Affairs will post the schedule for the comprehensive remediation examinations the week following the end of the last block of the third year. The comprehensive remediation examinations for P3 students (Blocks 3.1-3.5) will be scheduled in January. Students will not be scheduled to start Advanced Pharmacy Practice Experiences (APPEs) until all blocks are successfully remediated. The Academic Performance and Standards Committee must approve any exceptions. One comprehensive remediation examination will be administered that covers all block objectives within each block the student failed (those areas the student failed plus all other required outcomes). Each block requiring remediation will have a separate exam. The consequences of not passing remediation are outlined below under Student Progress.

Attendance and Absences

Students are to be in class Monday-Friday from 8 am to 3 p.m., unless the block schedule notes otherwise.

When a student must be absent, he/she must contact the Block Facilitator as soon as possible. If unable to reach the Facilitator, the student must leave a message with a contact telephone number. Accommodation for excused absences will be made, whenever possible, to assist students in situations involving illness or other emergencies. The Block Facilitator may require documentation of the reason(s) for the absence. The Block Facilitator/Faculty will determine how the missed materials will be completed.

If the absence is over three class days in duration, the case will be referred to the Academic Performance and Standards Committee, to determine, in consultation with Block Faculty, if ongoing accommodation can be made given the anticipated length of absence. The Committee may, at its discretion, recommend that the student be assigned an Incomplete Grade (I) for the block. Refer to Student Progress (below) for procedures to remove an Incomplete Grade. If the Committee determines that it is not possible for the student to continue in the program, a leave of absence may be recommended. Leaves of absence are governed by University policy. The Academic Performance and Standards Committee will make these determinations on a case-by-case basis after review of the facts and forward a recommendation to the Dean.

This policy also applies to students on APPE/AE. These students are also governed by policies contained in 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 blocks, 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 accommodation 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 blocks in the core curriculum in the College of Pharmacy is not permitted either in summer or during the academic year. The only independent study that is permitted is via learning assurance and remediation.

Holidays: Western University publishes an annual list of holidays recognized by the University. A student who requests time off for a holiday other than those observed by Western University must do so in writing to the Block Facilitator a minimum of 5 school days before the start of the block in which the holiday falls. If the request is approved, 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 Block Facilitator in the timeframe noted, the absence will be considered an unexcused absence, and no remediation will be permitted. The Western University holiday schedule does not apply to students on Advanced Pharmacy Practice Experiences and on off-campus Advanced Electives. Students will follow the rotation site holiday schedule on Advanced Pharmacy Practice Experiences and on Advanced Electives.

Professional Meetings and Other Related Absences: All students are required to attend one professional meeting each year as indicated on the College’s academic calendar.
Policy for Academic Dishonesty

The faculty takes the position that honesty and integrity are among the most valued traits of a professional person. As future professionals, each student must assume personal responsibility for honesty and integrity.

The College of Pharmacy faculty will not tolerate academic dishonesty. **Verification of an offense is grounds for dismissal.** Academic dishonesty includes, but is not limited to activities such as changing examination answers after the graded examination has been returned, cheating, plagiarism, bringing in unauthorized resources to exams or other assessed exercises, and signing another student’s name on attendance records or team examinations/assignments.

All incidents that compromise academic integrity must be documented and referred to the Dean for review. This Dean will investigate all allegations, and either resolve the issue or forward the issue to the University Student Conduct Committee. The student may appeal the action following policies listed in the **General Academic Policies and Procedures** section of this Catalog.

Student Examination and Assignment Policies and Grade Appeals

**Excused Absence from an Exam:** Excused absences are for emergencies. In the case of an emergency the student must notify the Block Facilitator at the earliest time possible (see **Attendance and Absences** Section above). Students who are excused from an examination/assignment will be permitted to take/complete the examination/assignment at a time designated by the block faculty. **[NOTE: Examination/Assignment refers to any graded assessment in the block.]** The student will be eligible to earn full credit for the examination/assignment under these circumstances. However, a student who does not take/complete the individual examination/assignment and who is not excused by the Block Facilitator will receive a zero for the examination/assignment. If emergencies arise that require a student to miss more than one examination or assignment in a block, the student’s performance will automatically be referred to the Academic Performance and Standards Committee for review.

**Requests for an Examination or Assignment Regrade:** This section applies to all graded assessments. Any request by a student to have an examination or assignment regraded must be made in writing and submitted to the Block Facilitator **within two working days** of return of the examination or assignment. The student must specify which question(s) and answer(s) are to be reconsidered in the request. The request should be accompanied by lecture notes or referenced sources that support the student’s original answer. On receipt of the request, the Block Facilitator will consider the request and document the decision regarding the request in writing to the student. The Block Facilitator will maintain a copy of the request and action taken. If the request for a regrade concerns a faculty member other than the Block Facilitator, the faculty member has the option of regrading the examination/assignment in its entirety. The Block Facilitator will respond to the student within two working days of receiving the written request.

If the student disagrees with the decision and has adhered to the timelines specified for regarding, he/she may petition the Academic Performance and Standards Committee for an appeal of the regrade decision.

**Grade Appeals:** A Grade Appeals Sub-Committee, if required, shall be constituted by the Academic Performance and Standards Committee. It shall consist of at least one member of the Academic Performance and Standards 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 Committee will conduct its own investigation in conjunction with such an appeal following established procedural guidelines for handling student appeals of an academic nature. An alternate appointed by the Dean will replace members of the Committee who may have a conflict of interest in a particular case, e.g., a faculty member on the Committee may be the person who administered the grade that is being appealed.

**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 front section of this Catalogue.
Student Progress

Academic Progression Blocks 1.1 through 3.5: To progress to the next academic year, a student must pass all blocks in the current academic year. The Academic Performance and Standards Committee will review each student’s progress at the end of every block.

Failure to Meet Standards – First Block Actions: When a student does not achieve the required standard in a block, the Dean will automatically place him/her on academic probation. The Dean will notify the student in writing within two weeks of receiving his/her final block grade. Letters will be distributed either by the Dean or via certified and regular mail delivery. Student confidentiality will be maintained. The terms of probation will be specified at the time a student is placed on probation. If a student is placed on probation, he/she must meet with his/her faculty advisor monthly and may not hold office in any University or College organization. The student will develop a corrective plan and submit it to his/her faculty advisor within five working days. This plan should include problems the student is experiencing (e.g., the number of hours the student is working, illness), the need for assistance from the Learning Enhancement & Academic Development (LEAD) program, and actions the student will take to prevent further difficulties. The faculty advisor will approve the plan and make appropriate referrals as necessary. Both the student and the faculty advisor will sign the plan, and both parties will retain a copy. The student will submit a copy of the plan to the Academic Performance and Standards Committee in a timely manner. On a monthly basis, the student and faculty advisor will evaluate the plan and make changes as necessary.

Failure to Meet Standards – Second Block Actions: When a student does not achieve the required standard in a second block in an academic year, the Academic Performance and Standards Committee will schedule a meeting with the student. The student may invite his/her faculty advisor to the meeting. During the meeting the corrective plan previously developed will be reviewed carefully, revised, and appropriate additional referrals will be recommended, if needed. The student will continue on probation.

Failure to Meet Standards – Third Block Actions: When a student does not achieve the required standards in a third block in an academic year, he/she will meet with the Academic Performance and Standards Committee. The student may invite his/her faculty advisor to the meeting. At this time, the Committee may recommend one of the following actions to the Dean: (1) The student may be required to withdraw from the program “not in good academic standing,” and allowed to repeat the entire academic year; or (2) be dismissed from the program (see Dismissal in General Academic Policies and Procedures section). A recommendation regarding the disposition of a particular student’s case will be made by the Academic Performance and Standards Committee based on review of the student’s overall academic performance and with input from the student’s advisor, block faculty or other individuals the Committee may consult. The Committee will send a written recommendation to the Dean, who will make a final decision regarding the course of action to be taken. The student has the right to appeal this decision according to established policy (see Student Appeal Process in General Academic Policies and Procedures section). If a student is required to repeat an entire year of the program, he/she is responsible for meeting with the Associate Dean for Academic Affairs to establish his/her schedule to ensure that all required blocks are completed.

Incomplete grade (I): An Incomplete grade (I) indicates that a student has not been able to complete all required work for issuance of a letter grade. An incomplete grade must be replaced before the student registers for the next academic year, unless other arrangements are made with the Dean. The activities to replace an incomplete grade may vary depending on individual circumstances. In some cases, Faculty may require the student to take the block in the year following. The procedures for making up an incomplete grade must not be in conflict with the College’s policy on Independent Study. The Block Facilitator and Block Faculty should have a plan for removing the incomplete grade when assigning the I grade. Replacement of an incomplete will be under the direction of the Block Facilitator and Block Faculty and will be processed by the Office of the Associate Dean for Academic Affairs. A fee may be assessed. The incomplete grade (I) remains on the transcript followed by the Pass grade when earned (I/P).

Eligibility to participate in Advanced Pharmacy Practice Experiences (APPEs): Courses in the first through third years must be completed successfully before beginning APPEs. Students may not start an APPE until the Academic Performance and Standards Committee has been notified that all blocks have been remediated successfully. The Academic Performance and Standards Committee will ensure that students are eligible to begin APPEs.

Progression to the Fourth Professional Year: Students must have completed at least three rotations successfully by the end of July 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 three APPEs unless a student is required to remediate a block during Rotation 1 or if there is an extenuating circumstance (e.g., maternity leave, illness). The Academic Performance and Standards Committee will monitor the progress of any student who is on academic probation.

**Failure to Meet Standards on APPE:** When a student receives a NP or an Incomplete grade (I) in a rotation, the faculty member directing APPE assignments will notify the committee in a timely manner. He/she will make recommendations to the committee regarding remediation. The Academic Performance and Standards Committee will approve the remediation plan. The student will be placed on academic probation until he/she remediates the APPE. 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. If a student drops or fails this required APPE, he/she must complete another APPE successfully with another voting, full-time faculty member.

**Progression to Advanced Electives/Comprehensive Review and Assessment:** Students may not begin elective requirements (coursework, Advanced Electives, Research Elective) until all APPE rotations are completed successfully. Students may not complete the Comprehensive Review and Assessment until all other requirements are completed. Any students requesting an exception to this policy will be considered on a case by case basis by the Academic Performance and Standards Committee. The recommendation of the Academic Performance and Standards Committee will be forwarded to the Dean for his/her action.

**Incivility**

The College of Pharmacy does not tolerate incivility by any member of the College/University community. This includes faculty, staff, students, guests, and visitors. Examples of incivility include rude, sarcastic, obscene, disruptive or disrespectful behavior, threats, and damage to property. Complaints of incidences of incivility will be reported to the Dean. Should violations by students be determined to have occurred, the Dean either will resolve the issue or forward the issue to the Student Conduct Committee. Students have the right of appeal through the Student Appeal Process.

**Veterans**

Veterans who fail to maintain satisfactory progress for more than five (5) blocks will not be certified to receive any Veterans’ benefits until they have corrected the situation and are making satisfactory progress.

**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.

**Program Completion and Eligibility for Graduation**

All coursework in the College of Pharmacy must be completed within six (6) years of beginning the program. Exceptions may be made only upon recommendation of the Academic Performance and Standards Committee in consultation with the Dean. Students eligible for graduation must be approved by a vote of the College Faculty.

**Graduation**

A student will be recommended for the Doctor of Pharmacy degree provided he/she:

- Has been enrolled in the Western University of Health Sciences, College of Pharmacy, for the duration of the Pharm.D. program.
- Is not on probation and has completed all prescribed academic requirements and has no outstanding grade of “I” or “NP”.
- Has demonstrated no serious deficiencies in ethical, professional, or personal conduct that would make it inappropriate to award the Doctor of Pharmacy degree.
- Has complied with all the legal and financial requirements of the University as stated in the University Catalogue.

No student will receive his/her diploma until that student has successfully completed all requirements for graduation.
All students must attend and participate in the Commencement program at which time the degree is conferred, unless special permission has been granted by the President of Western University of Health Sciences. If the President grants special permission to be excused from graduation, the graduate may be required to present himself or herself to the Provost, Executive Vice President of Academic Affairs or appropriate Dean at a later date in order to take the required oath (if relevant) to receive his or her diploma.

DESCRIPTION OF BLOCKS/COURSE DESCRIPTIONS

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.

FIRST YEAR

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).

PHRM 5111 Foundations of Clinical Practice I (4 credits)

This block is designed to introduce the student to the knowledge, skills and attitudes necessary for successful completion of the Pharm.D. curriculum, and to begin to develop foundation skills for patient-centered pharmacy practice. General topics include an introduction to contemporary pharmacy practice and the role of the pharmacist as a health care provider, written and verbal communication skills, developing team collaboration skills, humanism, introduction to ethics and professionalism, time management, resume writing, pharmacy abbreviations and equivalents, medical terminology, pharmaceutical calculations, pharmacy law, introduction to over the counter medications and pharmaceutical care, introduction to drug information, and introduction to the US health care system. (Formerly PHRM 5101)

PHRM 5112 Foundations of Clinical Practice II (3 credits)

This block is designed to further advance and reinforce the knowledge, skills and attitudes initially introduced to the student in PHRM 5111 and to develop clinical foundation skills necessary for patient-centered pharmacy practice. General topics include written and verbal communication skills, developing team collaboration skills, medical terminology, pharmaceutical calculations, pharmacy law, over the counter medications and pharmaceutical care, introduction of patient medical history and the patient medical record, drug information, the top 200 drugs and drug cards, physical assessment skills, patient counseling skills, belief systems and pharmaceutical care, introduction to pharmacy practice-community pharmacy and inpatient hospital pharmacy clerkships. Prerequisite: PHRM 5111. (Formerly PHRM 5105)

PHRM 5113 Foundations of Clinical Practice III (5 credits)

This block is designed to further advance and reinforce the knowledge, skills and attitudes initially introduced to the student in PHRM 5111, and further enhanced in PHRM 5112, and to develop clinical foundation skills necessary for patient-centered pharmacy practice. General topics include written and verbal communication skills, developing team collaboration skills, medical terminology, pharmaceutical calculations, pharmacy law, over the counter medications and pharmaceutical care, introduction to patient SOAP notes, the top 200 drugs and drug cards, First Aid certification, patient counseling skills, introduction to pharmacy practice-community pharmacy and inpatient hospital pharmacy clerkships, current issues in pharmacy practice and the medication use system. Prerequisite: PHRM 5112. (Formerly PHRM 5110)

PHRM 5114 Comprehensive Review (1 credit)

This block summarizes and provides a final integration of materials and skills learned during the first year. A final comprehensive examination and a clinical skills assessment examination are administered and year-long team assignments are finalized with presentations and poster sessions.

PHRM 5211 Introduction to the Pharmaceutical Sciences (1 credit)

This course introduces the chemical, physicochemical, biopharmaceutical and mathematical principles and concepts that are fundamental to the study of the pharmaceutical sciences. Functional group chemistry is introduced with emphasis on acid-base properties, contributions to solubility, chemical stability and chemical incompatibilities. An introduction to the basic mathematical and graphical principles relevant to
students in pharmaceutics, biopharmaceutics and pharmacokinetics is also presented. Rational approaches to problem-solving in the pharmaceutical sciences is an important component.

**PHRM 5212 Integrated Biological Sciences I (3 credits)**
This series of blocks (PHRM 5212, 5213, 5214 and 5215) presents general principles of biochemistry, molecular biology, physiology, pharmacology and medicinal chemistry. The purpose of these blocks is to demonstrate their interdependence and to provide an integrated, scientific basis for the development and therapeutic use of drugs. The series focuses on the human system and provides the organizational knowledge and background relevant to the management of homeostasis blocks of the second and third years. The biochemistry and molecular biology portions present the common features of most biochemical pathways and their relevance in diagnosing and treating disease, as well as developing therapeutic agents. With physiology, the organization of biological systems (homeostasis) is emphasized with the objective of demonstrating how the breakdown of organization leads to disease and the manipulation (interference or enhancement) of organization provides the basis for therapeutic intervention. The intent is to demonstrate how an understanding of biochemistry and molecular biology is fundamental toward developing an appreciation of medicinal chemistry and the development of drug entities. Principles addressing cellular and tissue physiology provide a conceptual framework to introduce pharmacology by emphasizing commonalities of drug mechanism with drug classification. Fundamental principles are emphasized with the intent of providing their relevance for prevention and treatment of disease using therapeutic agents, which themselves can be considered as modifications of intrinsic, biological compounds. (Formerly PHRM 5102)

**PHRM 5213 Integrated Biological Sciences II (3 credits)**
Continuation of PHRM 5212. Prerequisite: PHRM 5212. (Formerly PHRM 5103)

**PHRM 5214 Integrated Biological Sciences III (3 credits)**
Continuation of PHRM 5213. Prerequisite: PHRM 5213. (Formerly PHRM 5104)

**PHRM 5215 Integrated Biological Sciences IV (4 credits)**
Continuation of PHRM 5214. Prerequisite: PHRM 5214.

**PHRM 5301 Pharmaceutics/Biopharmaceutics I (3 credits)**
This block introduces the student to physicochemical principles and their applications in order to develop an understanding of the manufacture, compounding, and proper use of liquid (homogeneous and disperse systems) and solid dosage forms. Prerequisite: PHRM 5211. (Formerly PHRM 5107)

**PHRM 5302 Pharmaceutics/Biopharmaceutics II (3 credits)**
This block deals with the manufacture, compounding and proper use of different dosage forms (topicals, suppositories, aerosols, parenteral and novel drug delivery systems). Additionally, students will be introduced to innovations in biotechnology processes and products. Prerequisite: PHRM 5301. (Formerly PHRM 5108)

**PHRM 5401 Immunology (3 credits)**
The first part of this block introduces students to the basics of immunology including cells, organs and effector systems involved in both cell mediated and humoral mediated immune activity. The second part of the block focuses on regulatory interactions between different components of the immune system and the deleterious effects of aberrant immune processes. (Formerly PHRM 5106)

**PHRM 5501 Pharmacokinetics (4 credits)**
This block gives the student an introduction to principles of pharmacokinetics. The relationships between physicochemical characteristics and physiological factors to drug disposition are discussed. The relevance of pharmacokinetics to drug therapy is presented. Prerequisites: PHRM 5111, PHRM 5301 and PHRM 5302. (Formerly PHRM 5109)
SECOND YEAR AND FIRST HALF OF THE THIRD YEAR

The 6200 series describes the didactic curriculum for second-year pharmacy students (P2). The 6300 series denotes the didactic curriculum for the first half of the third year (P3).

PHRM 6201 Health Care Administration/Drug Information (4 credits)
This block covers Health Care Administration and Drug Information. Health Care Administration provides an overview of the health care system in the US in terms of its evolution, structure, function, components and interrelationships between stakeholders of the system. The Drug Information component of this block continues the student's development in drug information. Introduces the student to research methodology and biostatistics.

PHRM 6212 Introduction to Homeostasis and Nutrition (4 credits)
This block introduces homeostasis and covers materials from basic biochemistry to advanced pharmacotherapeutics as they relate to nutrition. Introductory topics such as laboratory interpretations, fluid-electrolytes, and acid-base disorders will be covered in addition to the nutrition related topics. Accordingly, the overall goal of this block is to equip pharmacy students with elemental tools essential for providing pharmaceutical care as well as to integrate knowledge, skills, and attitudes to provide an individualized nutrition pharmacotherapeutic plan for a given patient. (Formerly PHRM 6207)

PHRM 6213 Gastrointestinal and Hepatobiliary Systems (4 credits)
This block provides the student with an understanding of the gastrointestinal and the hepatobiliary systems. Specific emphasis is placed on the pharmacological treatment of peptic ulcer disease, inflammatory bowel disease, alcoholic liver disease, and hepatitis. (Formerly PHRM 6202)

PHRM 6214 Nephrology and Pulmonary Systems (4 credits)
This block is designed to teach the student how to solve patient-based pharmacotherapeutic problems in nephrology (kidney diseases) and pulmonology (lung diseases). Hypertension pathophysiology and treatment are introduced in this course, including national guidelines for diagnosis and treatment. Nephrology topics include evaluation of renal function, acute renal failure, chronic renal failure (e.g. diabetic nephropathy and primary glomerular diseases), complications of renal failure (e.g. fluids and electrolytes, anemia, and secondary hyperparathyroidism), renal transplant, and appropriate drug dosing in renal disease. Pulmonary topics include asthma (adult and pediatric), chronic bronchitis, emphysema, and cystic fibrosis. Students learn the proper use of inhalers, spacers, nebulizers, and peak flow meters. Several critical care medicine topics and venous thromboembolism are also components of this block. Major concepts of prior block material is reinforced throughout the block. (Formerly PHRM 6204)

PHRM 6215 Foundations of Clinical Practice IV (4 credits)
This block is designed to allow the student an opportunity to strengthen their knowledge in the content areas previously covered in the second year blocks. Students will engage in team case discussions, which incorporate and integrate aspects of those disease states previously covered. In addition, students will continue to expand their knowledge of individual drug therapies by the construction of individual drug cards. Skills (e.g., counseling, patient education, calculation applications, drug information applications) relevant to the practice of pharmacy will be practiced in this block. Students will receive certification for the administration of immunizations. Prerequisite: PHRM 5113. (Formerly PHRM 6205)

PHRM 6216 Endocrine and Reproductive Systems (4 credits)
This block provides students with the knowledge, skills and attitudes to manage pharmacotherapeutic regimens in endocrine-related diseases, such as diabetes and thyroid disorders, and reproductive medicine. Gender-related health concerns are also addressed. (Formerly PHRM 6203)

PHRM 6217 Cardiovascular System (4 credits)
This block contains epidemiology, anatomy, physiology, pharmacology, and pharmacotherapy as they relate to cardiology. Accordingly, the overall goal of this block is to enable students to integrate their knowledge of these topics in the context of formulating an individualized pharmacotherapeutic plan for a given patient with cardiac disease(s). (Formerly PHRM 6206)
PHRM 6208 Neurosensory System (4 credits)
This block focuses on the pathophysiology, pharmacology, and pharmacotherapy relevant to diseases affecting the central nervous system. The main goal of this block is to provide students with the fundamental knowledge, skills and attitudes required to provide optimal pharmaceutical care to patients with neurologic disorders. Disease states covered include dementias, epilepsy, headache, Parkinsonism, acute and chronic pain and stroke.

PHRM 6209 Psychiatry (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 disease states. The content of the block will span psychiatric diseases, substance abuse and toxicological states. Students are provided the opportunity to practice clinical problem assessment and therapeutic drug monitoring in preparation for providing pharmaceutical care.

PHRM 6210 Foundations of Clinical Practice V (4 credits)
This block is designed to allow the student an opportunity to strengthen their knowledge in the content areas previously covered in the second year blocks. Students will engage in team discussions, which incorporate and integrate aspects of those disease states previously covered. In addition, students will continue to expand their knowledge of individual drug therapies by the construction of individual drug cards. Skills (e.g., counseling, patient education, calculation applications, drug information applications) relevant to the practice of pharmacy will be practiced during this block. Students will receive instruction on the pharmacist’s role in investigational drug services. Prerequisite: PHRM 6215.

PHRM 6301 Infectious Disease (4 credits)
This block is an integrated approach to microbiology, antimicrobial pharmacology and infectious disease syndromes. The initial part of the block deals with the 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, diagnosis, clinical features, preventive and infection control measures associated with major infectious syndromes due to common bacteria and parasites.

PHRM 6302 HIV, AIDS and Organ Transplantation (4 credits)
This block is an extension of PHRM 6301 with a focus on special patient populations and opportunistic infections including fungal and viral infections. Pharmacology of antiviral and antifungal agents and the applications in treating infections will be discussed. The latter part of the block will focus on basic pharmacology of immunotherapeutic agents and their applications in transplantation.

PHRM 6303 Drug Information/Pharmacy Administration (4 credits)
This block covers Drug Information and Pharmacy Administration. The Drug Information component of this block continues the students' development of the knowledge, skills and attitudes in drug information. Pharmacy Administration covers the components of the pharmaceutical distribution system, including production, logistics, utilization and external subsystems. This block also presents an introduction to human resource management, strategic planning and marketing, purchasing and inventory, financial management and continuous quality improvement; and their applications to pharmacy and health care.

PHRM 6304 Oncology (4 credits)
The objective of this block is to provide an introduction in the pathophysiology, medicinal chemistry, pharmacology, and therapeutic knowledge in the management of hematological disorders, hematological malignancies and solid tumors. Students will receive instruction in the following areas: appropriate cancer screening and prevention information to the general public; basic pharmacology of the commonly used antineoplastic agents in clinical settings; supportive care in oncology and patient specific treatments; and appropriate treatments for the common types of hematological disorders.
PHRM 6305 Pharmacoeconomics (4 credits)
This block provides students with an understanding of the fundamentals of pharmacoeconomics and its value to decision making in health care. The block will include the terminology of pharmacoeconomics and involve understanding, performing and evaluating different types of pharmacoeconomic analysis. Students will be able to use their background in research methodology and statistics to conduct a 10-step evaluation of published pharmacoeconomic studies.

ADVANCED PHARMACY PRACTICE EXPERIENCES (APPEs): SECOND HALF OF THE 3RD YEAR (P3) AND FIRST HALF OF THE 4TH YEAR (P4)
The APPE 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.

Required rotations:
PHRM 7110 Ambulatory care externship (8 credits)
Supervised patient care experience in an outpatient setting under the supervision of a preceptor or faculty member of the College of Pharmacy.

PHRM 7120 Institutional care externship (8 credits)
Supervised patient care experience in a hospital or other institutional setting under the direct supervision of a preceptor or faculty member of the College of Pharmacy.

PHRM 7210 Ambulatory care clinical (8 credits)
Supervised clinical pharmacy experience emphasizing the development of pharmaceutical care skills in an out-patient setting.

PHRM 7220 Institutional care clinical (8 credits)
Supervised clinical pharmacy experience emphasizing the development of pharmaceutical care skills in a hospital or other institutional setting such as a long term care facility.

Elective Rotations:
PHRM 7330 Elective clerkship I (8 credits)
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)
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)
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.

Electives:
FOURTH YEAR (P4): 16 credits of elective coursework and 2 credits in the comprehensive review and assessment are required.
The 8000 series is designed for elective coursework and the comprehensive assessment/review weeks. 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. Finally, each student completes a required comprehensive two-week review and assessment at the end of the program.

**PHRM 8200 Elective Coursework (4 credits)**
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 Elective Apprenticeships (16 credits)**
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. Repeatable to a maximum of 16 credits.

**PHRM 8600 Research Electives (16 credits)**
Supervised participation in pharmacy related research under the direct supervision of a faculty member. Repeatable to a maximum of 16 credits.

**PHRM 8800 Other Electives (4-16 credits)**
Individualized, supervised educational experiences in an area of special interest related to pharmacy practice beyond that provided by previous coursework in the Doctor of Pharmacy curriculum and not eligible for credit within PHRM 8200, 8400 or 8600. Repeatable to a maximum of 16 credits.

**PHRM 8999 Comprehensive Review and Assessment (2 credits)**
A two-week series of didactic and other educational experiences designed to provide students with a review of the Doctor of Pharmacy Curriculum and conduct assessments of the student's competency for pharmacy practice.
Sample Schedule: The following schedule represents an example of the schedule for the blocks in one academic year. This schedule is subject to change.

<table>
<thead>
<tr>
<th>Year</th>
<th>Block No.</th>
<th>Block Title</th>
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<tbody>
<tr>
<td>First Year</td>
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<tr>
<td><strong>Fall</strong></td>
<td>5111</td>
<td>Foundations of Clinical Practice I - Introduction to Pharmacy</td>
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<td></td>
<td>5112</td>
<td>Foundations of Clinical Practice II</td>
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<td></td>
<td>5211</td>
<td>Introduction to Pharmaceutical Sciences</td>
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<td></td>
<td>5212</td>
<td>Integrated Biological Sciences I</td>
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<td></td>
<td>5213</td>
<td>Integrated Biological Sciences II</td>
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<td></td>
<td>5301</td>
<td>Pharmaceutics/Biopharmaceutics I</td>
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<td></td>
<td>5302</td>
<td>Pharmaceutics/Biopharmaceutics II</td>
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<td><strong>Spring</strong></td>
<td>5214</td>
<td>Integrated Biological Sciences III</td>
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<td></td>
<td>5215</td>
<td>Integrated Biological Sciences IV</td>
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<td>5401</td>
<td>Immunology</td>
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<td>5501</td>
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<td>Foundations of Clinical Practice III</td>
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<td>5114</td>
<td>Comprehensive Review</td>
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<td>Second Year</td>
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<td><strong>Fall</strong></td>
<td>6201</td>
<td>Health Care Administration/Drug Information</td>
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<td>6212</td>
<td>Intro. Homeostasis/Nutrition</td>
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<td>6213</td>
<td>Gastrointestinal and Hepatobiliary Systems</td>
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<td>6214</td>
<td>Nephrology and Pulmonary Systems</td>
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<td>6215</td>
<td>Foundations of Clinical Practice IV</td>
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<td><strong>Spring</strong></td>
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<td>Endocrine and Reproductive Systems</td>
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<td>Cardiovascular System</td>
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<td>Neurosensory System</td>
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<td>6209</td>
<td>Psychiatry</td>
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<td>6210</td>
<td>Foundations of Clinical Practice V</td>
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<td>Third Year</td>
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<td><strong>Fall</strong></td>
<td>6301</td>
<td>Infectious Diseases</td>
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<td>HIV, AIDS and Transplantation</td>
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<td>Oncology</td>
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<td>Pharmacoeconomics</td>
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<td>R2</td>
<td>Ambulatory Care Experiential (AX)</td>
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<td>R3</td>
<td>Inpatient Care Clinical (IC)</td>
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<td>Fourth Year</td>
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<td>Ambulatory Care Clinical (AC)</td>
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<td></td>
<td>R7</td>
<td>Elective rotation</td>
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<td></td>
<td>R8</td>
<td>Off</td>
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<tr>
<td>January-May</td>
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<td>Advanced Electives: Apprenticeships, coursework, research</td>
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<tr>
<td>May</td>
<td></td>
<td>Comprehensive assessment and review</td>
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HONORS AND AWARDS
The following awards for PharmD students are presented annually on Honors Day in April.

President's Society Award
Provost's Student Government Award
Dean's Award
American Society of Health Systems Pharmacists Student Leadership Award
Eli Lilly and Company Award
Linda Fox Memorial Endowment Fund Award
Guy M. Allmon Scholarship Fund Award

The following awards are presented annually to graduates at the Commencement Dinner Dance:

Merck Award
APhA-ASP Mortar & Pestle Professionalism Award
Roche Pharmacy Communications Award
Dr. Arasb Ateshkadi Memorial Award
SmithKline Beecham Award
Facts & Comparisons Award of Excellence in Clinical Communication
Pfizer US Pharmaceuticals Outstanding Leader Award
TEVA Pharmaceuticals Outstanding Student Award
Perrigo Award for Excellence in Nonprescription Medication Studies
Mylan Pharmaceuticals Award
Dean's Award

ACADEMIC CALENDAR 2001-2002
(subject to change)

Wednesday, Aug. 1, 2001
Fall Semester Tuition Due (4th years)

Wednesday, Aug. 8, 2001
Fall Semester Tuition Due (1st, 2nd and 3rd years)

Wednesday, Aug. 8-Thursday, Aug. 9, 2001
Orientation

Saturday, Aug. 11, 2001
Convocation/White Coat Ceremony

Monday, Aug. 13, 2001
Classes begin

Friday, Sept. 1, 2001
Fall Semester Tuition Due (4th years)

Monday, Sept. 3, 2001
Labor Day:

Friday, Oct. 5, 2001
Professional Association Day

Monday, Oct. 8, 2001
Columbus Day

Wednesday, Aug. 21, 2001 (12:00 noon)
Thanksgiving recess

Monday, Nov. 26, 2001
Classes Resume

Friday, Dec. 21, 2001
Last Day of Classes, Autumn Semester

Wednesday, Jan. 2, 2002
Spring Semester Tuition Due (1st, 2nd & 4th years)

Monday, Jan. 7, 2002
Classes resume

Monday, Jan. 21, 2002
Martin Luther King Holiday

Friday, Feb. 2, 2002
Spring Semester Tuition Due (3rd years)

Monday, Feb. 18, 2002
Presidents Day

Friday, May 24, 2002
Last Day of Classes, Spring Semester

Friday, May 31, 2002
Graduation
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 support 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.
COLLEGE OF ALLIED HEALTH PROFESSIONS

Master of Science in Health Professions Education Program

ABOUT THE MASTER OF SCIENCE IN HEALTH PROFESSIONS EDUCATION PROGRAM
The curriculum for the Master of Science in Health Professions Education places graduate studies in health professions education within a framework of theory and practice that integrates the functional needs of the working health practitioner with the scholarship and professional experiences necessary to meet requirements for an advanced degree in education. Course work is designed to promote knowledge, values and skills essential for competent teaching, as well as attitudes that foster a continuing interest in education. Strategies employed to conduct instructional activities reflect principles of adult learning. Small group discussions, one-to-one teaching, and individual consultation are frequently utilized to promote discussion and group problem-solving among program participants.

Designed for professionals who are currently teaching or plan to teach in any of a number of health disciplines, the Master of Science in Health Professions Education program utilizes learning activities that draw on the functional requirements of health professionals to illustrate educational concepts and methodologies. In addition to acquiring expertise in the principles of teaching and learning, program planning and evaluation, participants are encouraged to develop educational research projects of their own. Facilities and personnel of the College of Allied Health Professions are accessible for technical support and consultation throughout the program.

The faculty includes scholars, researchers and administrators from a variety of backgrounds. All are committed to the improvement of teaching in the health professions through the process of professional development.

EDUCATIONAL PHILOSOPHY
The College of Allied Health Professions supports Western University of Health Sciences' mission to increase the availability of health care providers to serve the needs of the people living in the western region of the United States. In addition, the College of Allied Health Professions provides educational opportunities for students in a variety of health careers. Classes are offered in an environment intended to foster respect for the uniqueness of humanity. Students are provided with classroom and clinical experiences designed to prepare them to function as competent health care practitioners.

Goals of the Department of Health Professions Education
The MSHPE program provides students with a background in theory and practical application in health professions education. In fulfillment of the mission of the University, the Department’s goals are to:
1. Educate healthcare professions who will function as teachers in a variety of healthcare settings.
2. Educate healthcare professionals who will function as academic leaders in various healthcare settings.
3. Create educational opportunities for healthcare professionals.
4. Enhance continuing professional education in healthcare.
5. Further develop clinical education partnerships throughout the United States (West).
6. Provide educational service to the healthcare community.

Objectives of the Department of Health Professions Education
The MSHPE program is designed to prepare healthcare professionals with skills in teaching and learning, educational administration, scholarship, and research. Upon completion of the program, students should be able to:
1. Demonstrate proficiency in adult education practices based upon sound principles.
2. Apply educational theories, models, and concepts in a healthcare setting.
3. Create, implement and analyze valid research projects in health professions education or the clinical setting.
4. Collaborate with other academic healthcare specialists.
5. Teach in a health professions setting.
6. Contribute research to the health professions.
TECHNICAL GUIDELINES FOR ADMISSION AND MATRICULATION

A candidate for admission to the MSHPE Program 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 Master of Science in Health Professions 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 MSHPE Program.

1. 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.
2. 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 preparation of a thesis or special project requires 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 completion 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, concern for others, interpersonal skills, interest, and motivation are all personal qualities to be assessed during the admissions and educational processes.

The MSHPE program, along with all the other programs at Western University of Health Sciences, shares a commitment to develop creative ways of opening the MSHPE curriculum to competitive, qualified individuals with disabilities. In doing so, however, the MSHPE Program must maintain the integrity of its curriculum and preserve those elements deemed essential to educating candidates to become effective teachers and role models.

ADMISSIONS POLICIES AND PROCEDURES

Admission to the Master of Science in Health Professions Education Program is through the Department of Health Professions Education. Students may apply for either the fall or spring semesters. Western University is committed to admitting competitive, qualified individuals with disabilities. For technical guidelines, please see above.

Application Requirements

Applicants to the MSHPE Program should be health professionals or in a career that involves education of health professionals. Candidates must meet the following academic requirements:

1. A bachelor's degree from an accredited institution is preferred. However, consideration will be given on a case-by-case basis to applicants holding an advanced professional degree, provided that the applicant has completed at least 90 semester hours at the undergraduate level from a regionally
accredited college or university, 30 units of which must consist of upper division coursework; i.e., junior or senior level courses.

2. A 2.5 GPA or above for undergraduate work; 3.0 or above for graduate work.

Decisions of the Admissions Committee regarding the admission of applicants to the Master of Science in Health Professions Education program are final.

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. Deadline for receipt of application materials is no later than 30 days prior to the first day of classes for each semester.

To request an informational brochure and/or an application, contact the admissions office at:
Office of Admissions
Western University of Health Sciences
309 E. Second Street
Pomona, CA 91766
(909) 469-5336

In addition to submitting an application, the applicant must submit a nonrefundable application fee of $35, a written statement of the manner in which this training will be used within the context of the candidate’s career and official transcripts from all undergraduate and graduate institutions attended.

Transfer of Credits
The maximum number of graduate units that may be transferred from another institution offering programs of graduate studies is six semester units. Only graduate credit relevant to the MSHPE Program at Western University completed within the last five years may be applied toward completion of the master's 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 of B or above in the course. An official transcript and a course description should be submitted to the chair of the HPE Department. The MSHPE faculty will determine whether or not work undertaken at other institutions qualifies for transfer. No transfer credit will be given for HPE 5999, HPE 5300, or HPE 5208.

Continuing Education and Non-degree students
An applicant who has a bachelor's degree and/or advanced degree and does not wish to pursue a master's degree 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, or (c) other professional development needs, may consider enrollment as a non-degree student. A limited number of applicants may enroll as non-degree students each semester. The usual admission and 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. An unlimited number of semester units may be completed while in non-degree status. Should the student wish to change enrollment status, the usual admission procedures must be followed. Previous course work will be reviewed by program faculty to determine acceptable courses to be transferred into the master's level program. Questions about transferring from non-degree to degree status should be directed to the Chairperson, Department of Health Professions Education.

Readmission
Graduate students 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 program requirements in place at the time of readmission.

REGISTRATION POLICIES AND PROCEDURES
Prior to each semester a class schedule is compiled and made available to students. All candidates for the MSHPE degree are required to obtain pre-registration advisement in order to promote greater efficiency in the registration and enrollment process. Enrollment occurs during the weeks prior to the first class
meetings, on an appointment basis. Students may register at the initial class meeting, but could be denied admission to a specific class due to space availability. An individual must enroll for a minimum of three semester hours of credit for each semester in which they wish to be identified as students.

New Graduate Students
New graduate students are notified by mail of their admission status. This notification will include a list of courses available during the next semester and the necessary registration materials. Completed registration materials and fees may be submitted through the mail, or in person, prior to the first week of classes.

Continuing Graduate Students
Continuing students will receive registration information and materials by mail prior to the beginning of the semester. Should this information not arrive for any reason, it is the student's responsibility to contact the office of Student Affairs for the appropriate materials. Completed registration materials and fees may be submitted to the Registrar through the mail or in person, prior to the first week of classes.

Late Registration
Students must follow the registration procedures and timelines printed in the Class Schedule provided at the beginning of each regular semester. The days of registration and late registration are listed in that document. Appropriate fees for late registration will be assessed.

Add/Drop and Withdrawal from Courses
In order to add or drop a class, the student must obtain a Change of Registration form from the Chairperson, complete and submit it prior to the end of the third week of classes of each semester. Withdrawal from a course (not the program) requires completion and submission of the appropriate withdrawal form obtained from the Chairperson. Please note that this will not result in an "incomplete" (I) grade.

ACADEMIC REQUIREMENTS

Course Load
A graduate student at Western University of Health Sciences must enroll in at least eight semester hours per term to be considered full-time. To be considered full-time when enrolled in fewer than eight hours, the student must be registered in all remaining courses necessary for completion of the graduation requirements for the master's degree.

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 18 semester hours during the calendar 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. A letter specifying terms of the continued enrollment will be mailed to the student.

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 MSHPE Program.

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. Students are required to keep the Registrar informed of their current address and telephone number. Forms for this purpose are available in the Student Affairs office.
Grading System

Official grades are turned in to the Chairperson of the MSHPE Program from the course instructors. Official grade reports are then prepared by the Registrar and mailed to the student. Western University of Health Sciences makes use of letter grades, which may include a plus/minus (+ / -) system of grading. A four-valued letter grade scale will be given, indicating:

<table>
<thead>
<tr>
<th>Grade</th>
<th>Quality Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>A - Excellent</td>
<td>4</td>
</tr>
<tr>
<td>B - Good</td>
<td>3</td>
</tr>
<tr>
<td>C - Satisfactory</td>
<td>2</td>
</tr>
<tr>
<td>U - Unsatisfactory</td>
<td>0</td>
</tr>
<tr>
<td>I - Incomplete</td>
<td>0</td>
</tr>
<tr>
<td>Au - Audit</td>
<td>0</td>
</tr>
<tr>
<td>W - Withdrawal</td>
<td>0</td>
</tr>
<tr>
<td>Cr - Credit</td>
<td>0</td>
</tr>
<tr>
<td>NCr - Non-credit</td>
<td>0</td>
</tr>
</tbody>
</table>

Courses are rated at one semester hour for each 12 contact hours. 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.

No 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 an Unsatisfactory grade.

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 academic semester. Should extenuating circumstances arise, the student may petition for a one-semester extension to complete the course work. Arrangements for the Incomplete and its removal must be approved by the instructor prior to the end of the semester in which the original Incomplete grade was assigned. Grade changes must be certified by the instructor prior to the end of the semester following the original grade assignment.

Academic Standing

An overall grade point average of 3.0 (B) must be maintained during graduate work undertaken at Western University of Health Sciences in order to qualify for advancement to candidacy. A 2.0 (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 3.0 (B) overall grade point average. Any grade below a 2.0 (C) may not be applied toward graduation. Any student whose grade point average falls below a 3.0 (B) average will be placed on probation.

Academic Requirements

<table>
<thead>
<tr>
<th>REQUIRED CORE</th>
</tr>
</thead>
<tbody>
<tr>
<td>HPE 5100 Teaching and Learning Theory</td>
</tr>
<tr>
<td>HPE 5102 Principles of Instructional Design and Clinical Teaching</td>
</tr>
<tr>
<td>HPE 5104 Evaluation Methods</td>
</tr>
<tr>
<td>HPE 5106 Research Methods I</td>
</tr>
<tr>
<td>HPE 5108 Instructional Technology</td>
</tr>
<tr>
<td><strong>Total:</strong> 17 credit hours</td>
</tr>
</tbody>
</table>

SELECTIVES (Select at least nine credit hours)

<p>| |</p>
<table>
<thead>
<tr>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>HPE 5200 Historical Issues in Health</td>
</tr>
<tr>
<td>Professions Education</td>
</tr>
<tr>
<td>HPE 5202 Legal/Ethical Issues in Health Care</td>
</tr>
</tbody>
</table>
HPE 5204  Educational Administration/Leadership  3 credit hours
HPE 5206  Research Methods II  3 credit hours
HPE 5208  Special Topics  1-3 credit hours
HPE 5210  Disabilities in the Health Professions  3 credit hours
HSCI 5014  Introduction to Community Health Education  3 credit hours

**ELECTIVES**
(Maximum of nine credit units counted towards the degree)

<table>
<thead>
<tr>
<th>Course</th>
<th>Title</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>HPE 5300</td>
<td>Directed Field Experience</td>
<td>1-3</td>
</tr>
<tr>
<td></td>
<td>(repeatable to a maximum of 6 units)</td>
<td></td>
</tr>
<tr>
<td>HPE 5302</td>
<td>Independent Study</td>
<td>1-3</td>
</tr>
<tr>
<td></td>
<td>(repeatable to a maximum of 6 units)</td>
<td></td>
</tr>
<tr>
<td>HPE 5999</td>
<td>Thesis/Special Project</td>
<td>3-6</td>
</tr>
</tbody>
</table>

**Residency Requirements**
Of the 32 required units, 26 must be completed with course work offered by the MSHPE Program.

**Language Requirements**
No foreign language classwork or test of proficiency is required of candidates for the MSHPE degree.

**Time Limits**
All requirements for the degree must be fulfilled within five years from the date of initial registration. Extensions of this time limit may be granted through petition to the faculty.

**Advancement to Candidacy**
At least one semester prior to when the student plans to complete the unit requirements, he or she must file an "Application for Advancement to Candidacy" form. This step is undertaken as a prelude to sitting for the Comprehensive Examinations or scheduling the final oral examination for students selecting the thesis or special project options.

**Final Integrative Exercise**
The Master of Science degree is awarded following satisfactory completion of all course work and one of the following three options described below: (1) a thesis, reporting the results of an original research project on a topic related to the program goals; (2) a special project report, which presents the results of development or implementation of a formal health professions educational activity; or (3) a comprehensive examination. Prior to graduation, the student must complete the Master of Science in Health Professions Education graduation requirements options form and return it to the Chairperson, Master of Science in Health Professions Education. Names of candidates for graduation are presented to the Student Academic Progress Committee, the Dean of Allied Health Professions and to the Western University of Health Sciences faculty for approval.

All students who have completed graduation requirements must attend, in person, and participate in the Commencement program at which time the degree is conferred. The President may approve exemptions to this last requirement.

**Thesis/Special Project Option**
A student who selects either the thesis or special project option is responsible for selecting a Thesis/Special Project Committee. This committee consists of a committee chair and one additional committee member. After a student has been advanced to candidacy, the candidate is responsible for obtaining and completing the Master of Science Committee form from the chair of the HPE department. Students are responsible for meeting with the HPE department chairperson, who will assist the student in obtaining a thesis/special project committee chairperson. The committee chairperson must be a full-time employee at Western University with a faculty appointment in the HPE program. No committee chairs of
the thesis/special project option will be permitted from outside Western University. Students must also obtain a committee member for the thesis/special project option. The committee members may be a scholar from outside the University, but must be approved by the Department Chairperson.

**Graduation Requirements**

A student will be recommended for the degree of Master of Science in Health Professions Education provided he or she:

1. Has satisfactorily completed the 32-unit course requirement in the MSHPE curriculum.
2. Has satisfactorily completed a thesis, special project or comprehensive examination.
3. Is not on probation and has completed all prescribed academic requirements.
4. Has complied with all the legal and financial requirements of the University as stated in the University catalog.
5. Has demonstrated no serious deficiencies in ethical, professional personal conduct, as defined previously, and;
6. Attends in person and participates in the Commencement program at which time the degree is awarded, unless special permission has been granted by the President of the University. If the President grants special permission to be excused from graduation, the graduate may be required to present himself or herself to the Provost or appropriate Dean at a later date in order to take the required oath (if relevant) to receive his or her diploma.

**TUITION AND FEES**

**Schedule of Fees**

<table>
<thead>
<tr>
<th>Fee</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>$225</td>
<td>Unit cost per semester hour (32 semester hours minimum for MSHPE degree)</td>
</tr>
</tbody>
</table>

**Other Fees and Expenses**

<table>
<thead>
<tr>
<th>Fee</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>$35</td>
<td>Application Fee</td>
</tr>
<tr>
<td>$50</td>
<td>Continuous Registration Fee</td>
</tr>
<tr>
<td>$30</td>
<td>(per day) Late Registration Fee</td>
</tr>
<tr>
<td>$10</td>
<td>Lost ID Badge</td>
</tr>
<tr>
<td>$5</td>
<td>(each) Copy of Official Transcript</td>
</tr>
<tr>
<td>$0.25</td>
<td>(per page) Copy of Student File Material</td>
</tr>
</tbody>
</table>

Tuition and fees are subject to change without notice upon approval by the Board of Trustees. All fees are mandatory for each student and are non-refundable.

Obligation for payment in-full of tuition and fees is due upon matriculation. The MSHPE Program can offer a schedule of divided payments for students demonstrating financial need (for more information see the Bursar).

**PROGRAM OF STUDIES**

The Master of Science degree can be completed with one year of full-time study (two regular semesters and one summer session). However, most candidates elect part-time participation and plan a program of study that requires four regular semesters and one or two summer sessions.

The courses listed below comprise the Master of Science in Health Professions Education curriculum offered by Western University of Health Sciences.

**COURSE DESCRIPTIONS**

**HPE 5100 Teaching and Learning Theories (3 credit hours)**

This survey course is designed to introduce the student to teaching and learning theories as they apply to the adult learner. The interrelationship between learning and teaching styles and how these impact the learning environment are covered. Teaching methods and strategies designed to enhance classroom learning in the health professions are emphasized. The design of practical learning activities is underscored. Not open for student with credit for HPE 503
HPE 5102 Principles of Instructional Design & Clinical Teaching (6 credit hours)
This course is designed to provide the student with the skills needed to develop educational programs in the health professions and incorporating the role of the clinical instructor. Practice is given in applying descriptive principles of teaching and learning to the design of a unit of instruction. Included will be the construction of a needs assessment, data analysis, writing instructional objectives, defining instructional strategies, designing learning activities, selecting media and planning evaluation. Not open for students with credit for HPE 512 or HPE 520.

HPE 5104 Evaluation Methods (3 credit hours)
The purpose of this course is to assist the student to acquire the skills necessary to conduct student performance and program evaluations. Measurement of student performance in the formal educational and clinical setting includes construction and use of written examinations, simulations, rating scales, chart audits, observation techniques, and other measures of cognitive, affective and psychomotor behavior. Included is an overview of procedures for item analysis and test validation. Not open for students with credit for HPE 514.

HPE 5106 Research Methods I (2 credit hours)
This introductory course is designed to prepare the health professions student to understand principles for the analysis and interpretation of quantitative data in health professions education research. It will include measurement theory, the graphical presentation of data, probability theory, and the use of descriptive and inferential statistics in the interpretation of data. As a result, the student will be able to read original research reports in a more critical manner. Not open for students with credit for HPE 518.

HPE 5108 Instructional Technology (3 credit hours)
This course provides an overview of the principles and applications of instructional media in the realm of adult and health education settings. The goal of this course is to provide for competence in the planning, selection and use of various forms of instructional technology for health care training programs. Emphasis will be made on an understanding of the principles of teaching and learning. Utilizing those principles, practical applications will be addressed, including the design and development of various instructional approaches as well as the appropriate selection and application of the various media forms. Students will function as members of a seminar, will produce a media-based instructional presentation and will write a limited research paper on current trends in instructional technology applications. Not open for students with credit for HPE 513.

HPE 5200 Historical Issues in Health Professions Education (3 credit hours)
This course provides a survey of the historical development of issues in health care, including early types of medicine and medical education in antiquity through contemporary issues in health professions education. Not open for students with credit for HPE 501.

HPE 5202 Legal/Ethical Issues in Health Care (3 credit hours)
This course will introduce the student to the ethical and legal challenges of modern health care and health care education. Insight into the basic ethical and philosophical concepts involved in health care education will be stressed. The historical background on laws that define the roles and responsibilities of health care professionals and educators will be presented. Students will be given the opportunity to explore personal values regarding a variety of issues facing health care workers and educators today. Not open for students with credit for HPE 509.

HPE 5204 Educational Administration/Leadership (3 credit hours)
This course will introduce the student to selected management theories. Leadership styles will be emphasized. Motivation and human behavior theories related to the functions of health care organizations, including the development of human resources and fiscal responsibilities, will be stressed. Trends in health care management will be surveyed. Not open for students with credit for HPE 511.
HPE 5206 Research Methods II (3 credit hours)

The purpose of this course is to introduce students to a variety of research methodologies employed in both clinical and educational settings. 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. Not open for students with credit for HPE 530.

HPE 5208 Special Topics (formerly HPE 599) (1-3 credit hours)

This format is designed to permit in-depth study of a single issue in health professions education. Current issues and/or trends may be included.

HPE 5210 Disabilities in the Health Professions (3 credit hours)

This is an introductory course presenting issues involved in educating health professions students with cognitive, physical and sensory disabilities. Topics include history and culture of disabilities in the health professions, assistive technology, legal aspects, and communication.

HSCI 5014 Introduction to Community Health Education (3 credit hours)

This course provides an overview of the development and implementation of patient education programs in the community and in acute, long-term clinical settings. Models for preparing health education programs will be presented, including design considerations, appropriate for age, ethnic, cultural, and socioeconomic differences. Assessment of need, developing objectives, designing learning activities, implementation, and evaluation are emphasized. Practical application will include the design and implementation of one unit of instruction based on a health education subject.

HPE 5300 Directed Field Experience (3-6 credit hours)

This course is designed for health professionals who are teaching in a classroom/clinical/laboratory setting. Under the supervision of MSHPE faculty, students will design and implement instruction appropriate to the learning environment in which they are participating. Three to four lectures represent one semester credit hour. Self evaluation and revision of presentations are stressed. Student may enroll up to a maximum of 3 credit hours per semester, repeatable to a maximum of 6 credit hours. Graded Cr/NCr. Not open for students with 6 or more credits for HPE 515.

HPE 5302 Independent Study (1-6 credit hours)

Registration in this course permits students, under MSHPE faculty supervision, to contract for special educational projects or readings in education which relate to individual professional needs and interests. A maximum of 3 credit units may be taken per semester, repeatable to a maximum of 6 credit hours. Graded Cr/NCr. Not open for students with 6 or more credits of HPE 590.

HPE 5999 Thesis/Special Project (3-6 credit hours)

Students who plan to partially fulfill graduation requirements for the Master of Science degree by writing a thesis or completing a Special Project must register in this course. Graded Cr/NCr. Not open for students with 6 or more credits for HPE 580.

HONORS AND AWARDS

The following awards are presented annually at the University's Honors Day ceremony in April:

- President's Society Award
- Guy M. Allmon Scholarship Fund
- Linda Fox Memorial Endowment Fund

The following awards are presented annually at the University's commencement dinner:

- Dean's Award
- Don and Jean Griva Memorial Award
ACADEMIC CALENDAR
2001-2002
MSHPE PROGRAM
(subject to change)

Fall Semester
Tuesday, Sept. 4 - Friday, Sept. 14, 2001
Registration
Wednesday, Sept. 5, 2001
Fall Semester Tuition Due
Monday, Sept. 10, 2001
Classes begin
Friday, Sept. 21, 2001
Last day to add/drop class
Monday, Oct. 8, 2001
Columbus Day (no class)
Wednesday, Nov. 21, 2001
Thanksgiving recess (noon)
Monday, Nov. 26, 2001
Classes resume
Friday, Dec. 21, 2001
Last day of classes
Last day to file for Advancement to Candidacy
Spring Semester
Wednesday, Jan. 2, 2002
Spring Semester Tuition Due
Thursday, Jan. 3 - Friday, Jan. 11, 2002
Registration
Monday, Jan. 7, 2002
Classes begin
Monday, Jan. 21, 2002
Martin Luther King Jr. holiday (no class)
Friday, Jan. 25, 2002
Last day to add/drop class
Monday, Feb. 18, 2002
President's Day (no class)
Monday, Mar. 18, 2002
Spring Break
Monday, Mar. 25, 2002
Classes resume
Monday, April 8, 2002
Honors Day
Wednesday, May 1, 2002
Last day for Oral Examinations
Friday, May 10, 2002
Last day of classes
Friday, May 31, 2002
Commencement
Summer Semester
Monday, Jun. 10 - Friday, Jun. 4, 2002
Registration
Monday, Jun. 10, 2002
Summer Semester Tuition Due
Monday, Jun. 17, 2002
Classes begin
Thursday, Jul. 4, 2002
Independence Day observed (no class)
Monday, Jul. 8, 2002
Last day to add/drop class
Friday, Aug. 30, 2002
Last day of classes
COLLEGE OF ALLIED HEALTH PROFESSIONS

Master of Physical Therapy Degree Program

Accreditation
The Master of Physical Therapy Program in the College of Allied Health Professions is accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE).

The Practice of Physical Therapy
The physical therapist is a health care provider who is academically and clinically prepared to provide physical therapy services to individuals with dysfunctions of the neuromusculoskeletal, cardiovascular, pulmonary and integumentary systems. These services include evaluating and diagnosing movement dysfunctions, setting goals and determining patient prognosis, planning and implementing treatment intervention, and reassessing patient progress. In addition, the physical therapist educates the patient/client to prevent injury, maintain and promote health and wellness. The physical therapist also contributes to society and the profession through administration, education, consultation, and research.

MPT Degree Program
The Master of Physical Therapy (MPT) Degree program at Western University was initiated in January 1992. The educational philosophy of the program emphasizes student-centered, problem-solving learning and the role of the physical therapist as a health care provider and a member of the health care team.

Mission of the Program
In keeping with the University's mission, the mission of the Physical Therapy program is to educate competent, caring, culturally sensitive, reflective practitioners who will:

• participate as members of the health care team to provide high quality care to patients;
• as life-long learners, acquire, analyze, synthesize and apply knowledge in new settings;
• contribute to the verification of physical therapy evaluation and intervention techniques, and discover new, more effective methods of patient care;
• be leaders in providing health care service and education to promote health and fitness of community members; and
• play important roles in developing health policy and appropriate standards for physical therapy practice.

Program Goals
The graduate of the MPT 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 all aspects of the research process; and will be a responsible member of the community and the profession. Upon completion of the educational program in physical therapy, the graduate will be able to:

• Have an understanding of the osteopathic philosophy with its emphasis on caring for, and appreciation of the patient as a whole person;
• Demonstrate respect for all individuals;
• Practice physical therapy as an entry-level clinician generalist by assuming responsibility for the components of that role;
• Communicate with peers, colleagues, patients, clients, family members and the community-at-large in a style that is commensurate with their level of understanding;
• Appreciate the place of research in the advancement of physical therapy;
• Serve as a role model for healthy behaviors in both the clinical setting and community;
• Participate in the community as a representative of the physical therapy profession, as an advocate for the patient or client in a health care environment, and as a concerned citizen;
• Continue lifelong learning through continuing education, specialization and participation in professional organizations; and

• Establish priorities in order to maintain a balance between personal and professional life.

Description of the MPT Program

The curriculum for the Master of Physical Therapy Program will prepare the graduate to be a PT generalist. The curriculum consists of 11 modules, each having a particular emphasis.

Curriculum Design

The MPT program is two years plus 16 weeks in length. Didactic education, which includes classroom and PT laboratories to practice procedures on classmates, is followed by clinical education assignments in a wide variety of clinical settings. Year I consists of one 15-week and one 11-week didactic education periods, followed by Clinical Practicum I for two weeks. To complete year I, the student has a 15 week didactic phase, followed by Clinical Practicum II for two weeks.

Year II consists of the following activities: the 12-week didactic education phase followed by a one week break and a Clinical Practicum III for 12 weeks; a five week break followed by one 12 week and one six week didactic period.

Year III (the final phase) consists of Clinical Practicum IV for 12 weeks, followed by four weeks of elective courses given in the continuing education format. Students will give research presentations to the faculty and the PT community during this final four weeks on campus.

MPT students will complete their education in May and participate in the University-wide June graduation. State licensure examinations are now computerized and can be taken following graduation.

The faculty includes scholars, researchers, administrators and clinicians from the professions of physical therapy, psychology, education, osteopathy, medicine and from the basic sciences. All faculty are committed to the preparation of the Master of Physical Therapy professional who will be well versed in all aspects of physical therapy and dedicated to their profession and to the patients they serve.

TECHNICAL GUIDELINES FOR ADMISSION AND MATRICULATION

A candidate for admission to the MPT 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. Also, 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:

a. Use appropriate verbal, non-verbal, and written communication with patients, families, and others.

b. Determine the physical therapy needs of any patient with potential movement dysfunction.

c. Safely, reliably, and efficiently perform appropriate physical therapy procedures used to assess the function of the movement system.

d. Perform treatment procedures in a manner that is appropriate to the patient's status and desired goals.

A candidate for MPT 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 disabilities in certain areas. Under all circumstances, a candidate should be able to perform all physical therapist functions at entry-level competency in a reasonably independent, timely manner.

1. Observation: Candidates and students ordinarily must have sufficient vision to be able to observe demonstrations and laboratory exercises. They must be able to observe a client accurately at a distance and close at hand.

2. 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, it may be
permitted for some people with disabilities in this area. Candidates and students must be able to read, write, and communicate verbally in English.

3. Motor: Candidates and students ordinarily should have sufficient motor function such that they are able to execute movements reasonably required to provide assessment and physical therapy treatment procedures to clients.

Examples of reasonable required assessment procedures include, but are not limited to:
- a. Functional abilities
- b. Pain
- c. Gait
- d. Strength
- e. Balance
- f. Movement patterns

Examples of reasonably required treatment procedures include:
- a. Balance training
- b. Exercise techniques
- c. Gait training
- d. Activities of daily living training and functional activities

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 unlikely to succeed.

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. 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 MPT program, along with all other programs at Western University of Health Sciences, shares a commitment to develop creative ways of opening the MPT curriculum to competitive, qualified disabled individuals. In doing so, however, the MPT 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 will accept applications for admission from all qualified candidates. Western University is committed to admitting competitive, qualified disabled individuals. For technical guidelines, please see above.

Application Requirements

The applicant must have earned a BA or BS degree from a regionally accredited college or university by the time he/she matriculates in the MPT program. The minimum acceptable grade point average in overall science and in the baccalaureate degree is 2.5 on a 4.0 scale. Exception: the undergraduate GPA requirement of 2.5 will be waived for applicants who have attained a GPA of 3.0 or above in 15 or more post-graduate units or who have been awarded a master's degree with a minimum GPA of 3.0.

The MPT program is looking for students who come from a broad, liberal arts background with the baccalaureate degree being 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 Western University will be able to problem-solve in clinical practice and will also be able to communicate appropriately with the client about the client/patient care plan.

1. Prerequisite Courses

- **English Composition** - 1 course (minimum of 3 semester units or 4 quarter units)
- **Psychology** - 2 courses, must be out of the Psychology Department (minimum of 3 semester units each or 4 quarter units each)
- **Statistics** - 1 course, only statistics courses that are cross listed in math, statistics or biometry will be accepted (minimum of 3 semester units or 4 quarter units)
- **Human Anatomy** - 1 course of lecture and lab (minimum of 4 semester units or 6 quarter units)
- **Human Physiology** - 1 course of lecture and lab (minimum of 4 semester units or 6 quarter units)
- **General Chemistry** - a full course sequence of lecture and lab (minimum of 8 semester units or 12 quarter units)
- **Physics** - a full course sequence of lecture and lab – emphasis on light, heat, sound, and electricity (minimum of 8 semester units or 12 quarter units)

Anatomy and Physiology must be taken out of the Anatomy, Physiology, A&P, Biology or Zoology departments. The Anatomy and Physiology must be "human." Combined Anatomy and Physiology courses will be considered only if a combined course sequence is completed.

Grades of "C" or better are required in each prerequisite course. A grade of "C-" in any prerequisite course is not acceptable. No prerequisite course work may be taken on a 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.

Three prerequisite courses may be in progress at the time of application during the spring, summer or fall semester or quarter. Please submit official transcripts directly to the Admissions office upon completion of course work in progress. Final transcripts and/or final grades (including degree verification) for all course work in progress must be received prior to registration date in January.

2. Graduate Record Examination (GRE) Score Report

Official GRE Score Report must be mailed directly to Western University from Educational Testing Service (ETS).

3. Clinical Experience

Credit will be given for up to 500 hours of volunteer or work experience in a variety of physical therapy settings. Extra credit will be given for different types of settings, provided that at least 100 hours is spent in each setting. Types of settings may include acute hospital, outpatient, rehabilitation, pediatric and home health. Preference will be given to applicants who have experience at more than one setting.

4. Recommendations

Three satisfactory recommendations (forms provided) are required as part of the admissions application. We require one academic recommendation, one from a physical therapist, and the third recommendation may be academic or from a physical therapist.

**Application Procedures and Deadline**

The MPT program has a January matriculation date. The application postmark deadline is September 1. The Department of Physical Therapy will make admissions decisions on a rolling basis. They will review applications, conduct interviews and make admissions decisions throughout the admissions cycle. We encourage students with complete application packets to apply early. Applicants who cannot attend and wish to reapply for the following year will be considered with the new applicant pool.

To request an information brochure and/or an application, contact the admissions office at:

Office of Admissions
Western University of Health Sciences
309 E. Second Street
Pomona, CA 91766-1854
(909) 469-5541

In addition to submitting an application, the applicant must submit a non-refundable application fee of $60, three letters of reference, academic/professional record form, work experience form, a written
personal statement, and official transcripts from all colleges attended. After receipt of the packet, the Admissions Office will evaluate the applicant's transcripts to ascertain the science and baccalaureate grade point average.

Applicants who wish to use course work completed outside of the United States must submit their transcripts for evaluation to World Education Services, Josef Silny and Associates, Educational Credential Evaluators, Inc., or International Education Research Foundation, Inc. A course-by-course evaluation is required and all course work must be designated as undergraduate, graduate or professional. Western University will only honor evaluations from the above services. The evaluation must be included with the application packet.

The Admissions Committee reserves the right to select potential candidates for personal interviews. These interviews are designed to allow the applicant to learn more about Western University's MPT program as well as allow the Admissions Committee to learn about the applicant. The interview process is typically held during July and August.

Decisions of the Admissions Committee regarding the admission of applicants to the Master of Physical Therapy program are final.

Registration

First-year and second-year MPT students are required to register in person on the registration day in January. Final phase (Year III) students must register before leaving campus at the end of Year II. Failure to register may be grounds for dismissal. Full tuition and fees and all prior debts must be paid in full on or before the registration deadline each academic year. Matriculation is subject to satisfactory completion of all academic requirements and payment of all outstanding debts to the University. Prior to registration, the receipt of final transcripts from undergraduate colleges, a physical examination, and immunizations as outlined on the physical examination form, are additional requirements for incoming students. Attendance at Orientation Day is also mandatory for incoming first-year students.

TUITION AND FEES

By action of the Board of Trustees, the tuition and fees effective January 1, 2002, (subject to change) are as follows:

- **$1,250** Tuition Deposit for incoming students
  (Payable two weeks after acceptance)
- **$500** Enrollment Deposit
  (Students returning from leave of absence only -
  Due by October 15)
- **$26,375** Total Tuition Annual
- **$8,790** Final Phase - Year III
- **$40** Student Body Fee, year I and II MPTs,
  covers student council, social activities, public relations.
- **$20** Student Body Fee, final phase MPTs.

*Upon matriculation, the entire $1,250 is applied toward the total tuition.

**For accepted candidates who are students returning from leave of absence, a $500 enrollment deposit is due October 15 prior to enrollment. The deposit is nonrefundable and credited toward tuition upon enrollment.

Tuition and fees are subject to change without notice upon approval by the Board of Trustees. All the above-listed fees are mandatory for each student and are nonrefundable.

Other Fees and Expenses

- **$500** Required and Recommended Texts
- **$10** (per day) Late Registration Fee
- **$40** Lost Locker Key
- **$10** Lost ID Badge
- **$5** (each) Copy of Official Transcript
$10 (each) Copy of Official Transcript Faxed
$0.25 (per page) Copy of Student File Material
(replacement cost) Breakage Fee

ACADEMIC REQUIREMENTS

Academic Advisement Policy
Students will be assigned a faculty advisement 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.

Standards of Academic Performance
Good academic standing implies that a student maintained a minimum GPA of 2.70 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 Chairperson as soon as evidence of such substandard performance is available.

Grade Scale/Grade Points/Class Ranking
The following academic standards and grading scale applies to students enrolled in the Physical Therapy Program:

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Letter Grade</th>
<th>Grade Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>93 - 100</td>
<td>A</td>
<td>4.0</td>
</tr>
<tr>
<td>90 - 92</td>
<td>A-</td>
<td>3.7</td>
</tr>
<tr>
<td>87 - 89</td>
<td>B+</td>
<td>3.3</td>
</tr>
<tr>
<td>83 - 86</td>
<td>B</td>
<td>3.0</td>
</tr>
<tr>
<td>80 - 82</td>
<td>B-</td>
<td>2.7</td>
</tr>
<tr>
<td>77 - 79</td>
<td>* C+</td>
<td>2.3</td>
</tr>
<tr>
<td>73 - 76</td>
<td>* C</td>
<td>2.0</td>
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<tr>
<td>Below 73</td>
<td>U</td>
<td>0</td>
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<td></td>
<td>NCr</td>
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<td>Cr</td>
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* 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 2.7. If the number of "C"s" and "C+"s" totals an amount to bring the student's GPA to below 2.7, then this is not satisfactory performance based on professional expectations.

Clinical Practica Grades

<table>
<thead>
<tr>
<th></th>
<th>Grade Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cr</td>
<td>Satisfactory Performance/Completion of clinical practicum assignment</td>
</tr>
<tr>
<td>NCr</td>
<td>Unsatisfactory Performance/Completion of clinical practicum assignment</td>
</tr>
</tbody>
</table>

The class ranking is computed at the end of each graded module, based upon overall GPA.
Credit Hours

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 1.0 will be assigned for each week of Clinical Practica experience (i.e., Clinical Practicum I is two weeks and receives 2 credits). A cumulative grade point average will be calculated and posted on the transcript. Class ranking is also computed and will appear on the transcript at the student's request only. Class ranking is also available upon request in the Registrar's Office.

The grade point average will be calculated at the end of each module and if a course is repeated, only the last grade earned enters into the computation of the grade point average, but the original grade remains on the student's transcript.

Official grades are turned in to the Registrar from the Department Chairperson, at which time official grade reports are deposited in the student mail lockers. Enrolled students will receive an unofficial copy of their transcript in July and January of each academic year.

No course grade will be changed unless the instructor 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:

a. If, following distribution of unofficial transcripts in the student's locker, the student has reason to dispute the grade, it should be done in writing within five (5) working days to the Department of Physical Therapy Education Chairperson. Upon written request from the student, the Department Chairperson shall review the case with the instructor(s) and a decision shall be made by the course instructor(s) to affirm or modify the grade. Within seven (7) working days the Department Chairperson shall notify the student in writing of the decision. A copy of the letter shall be sent to the appropriate faculty member(s). The faculty member(s) has the sole responsibility to make the official grade change.

b. If the student is not satisfied with the outcome of the grade dispute procedure to the Department Chairperson, the student may then appeal in writing to the Dean of the College of Allied Health Professions within five (5) working days. The Dean of the College of Allied Health Professions shall review the case with the student, Chairperson of the Department of Physical Therapy Education and the course instructor(s) and a decision shall be made by the course instructor(s) to affirm or modify the grade. Within seven (7) working days the Dean shall notify the student in writing of the decision. A copy of the letter shall be sent to the appropriate faculty member(s) and Chairperson. The faculty member(s) has the sole responsibility to make the official grade change.

Evaluation

a. General: The Modules of the program 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 modular component to assist the students and the faculty members in evaluating the degree of attainment of the objectives throughout the 28-month curriculum.

b. 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 self-evaluation.

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 topics, SOAP notes, evaluations, treatment plans and home programs.

5. Clinical Evaluations: Supervising Clinical Instructors 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 Practica. The
Clinical Performance Instrument (CPI), which incorporates entry-level physical therapist clinical performance criteria, is utilized. Students are responsible for securing their CPI or other evaluation tools from the Center Coordinator of Clinical Education/Clinical Instructor (CCCE/CI) on each practicum and ensuring that it is completed and returned to the Director of Clinical Education after each practicum. CCCE/CI's 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 practicum. The CI will indicate whether the Clinical Practicum was a successful experience in accordance with designated objectives, or was unsuccessful in meeting clinical objectives. While the CI may recommend success or failure of the Clinical Practicum, the Director of Clinical Education determines and administers the actual course grade.

c. Grade Reports: Final grade reports are issued at the completion of each module and will be placed in student lockers.

Due to the nature of the curriculum, modular completion dates do 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 up-to-date summary of student performance is maintained in the Department Office and is available to each student for review.

d. Review of Examinations: Examinations are graded as soon as possible and are kept on file for student review. Student performance in clinical courses is monitored closely 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.

Professional Performance

a. Ability-based Assessment: The faculty supports the concept of development of professional behaviors throughout the program. These behaviors 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 Western University 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 formal and informal feedback throughout the program. The student will be responsible for ongoing self-assessment and for seeking feedback from faculty 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 module/year of the program, before the student is allowed to progress to the next module/year, the student’s record of achievement is reviewed by the faculty. The quality of professional behavior expected of Western University MPT 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 practicum.

The faculty determines if the student has demonstrated the knowledge, skills, and attitudes necessary to be eligible for progress for the next module/year. In special instances, the faculty may be convened at other than scheduled times to consider cases of unusual circumstances, such as probationary or dismissal cases.

b. Attendance: Students are expected to attend all scheduled activities and observe the following policies:
Excused Absences
1. All unanticipated absences due to illness, accident, other unexpected events must be reported immediately to the department secretary and course instructor.
2. Absences requested for physician/dentist appointments for student or dependents will be considered excused only if requested in advance of the appointment. Due to the intense nature of the curriculum, students are encouraged strongly to schedule appointments for days when classes are not held, evenings, or Saturdays.
3. All anticipated absences for any reason, regardless of length, must have the prior approval by the Faculty to be considered excused.
4. Students on Clinical Practica are responsible for notifying their supervising CI, CCCE, and the Director of Clinical Education regarding all absences, whether anticipated or unanticipated.

Unexcused Absences
1. Any discovered or reported absence for which the Chairperson/Faculty does not have an explanation will be considered unexcused.
2. Students whose absence is determined to be unexcused will be required to provide an explanation regarding the circumstances involved. The Chairperson/Faculty will determine if the absence remains unexcused.
3. Unexcused absences may be sufficient cause for placing a student on professional probation and continued unexcused absences may be grounds for dismissal from the program.
4. Absences on the first or last day of a module or Clinical Practicum, or on the day before or after a scheduled break, vacation, or weekend, are considered unexcused unless prior written approval has been granted. If such an absence is the result of a sudden unavoidable circumstance, the Department Chairperson should be notified as soon as possible and provided with an explanation for the absence.

c. Student Examination Policy
1. Students are not to communicate in any way during examinations and are to face the front of the classroom at all times.
2. During scheduled examination hours, students are highly discouraged from going to the bathroom, but will be allowed to go one at a time. Student will be required to turn in the exam and Scantron® sheet as he/she leaves the room.
3. 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.
4. All students’ belongings, i.e., notebooks, calculators, and headsets, etc., will be kept in front of the room.
5. Questions will be answered at the discretion of the proctor during the examination period.
   Students should be permitted to point out typographical or other errors present in the examination to the proctor.
6. Alternate seating shall be utilized for all examinations unless precluded by space availability.
7. Violations of these examination policies or of Standards of Professional Conduct will be brought before the Student Conduct Committee.

Student Academic Progress Committee
a. The Student Academic Progress Committee of the College of Allied Health Professions is comprised of Department Chairs, the Dean of Student Affairs/Registrar and elected faculty members.
b. Each year, the Student Academic 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.
c. After reviewing a student’s achievement and performance records, the Student Academic Progress Committee may recommend to the Dean 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 Academic Progress Committee also has the responsibility of recommending to the Faculty as a whole the awarding of the degree of Master of Physical Therapy upon satisfactory completion of all requirements for graduation as stated in the Catalogue.
e. All recommendations of the Student Academic Progress Committee shall be made in writing to the Dean of Allied Health Professions, who will make a final decision and inform the student in writing.

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 Student Academic Progress Committee.
b. A student may not be recommended for progression from one academic year to the next with any outstanding grades of “I” or “U” on his/her academic record or with a yearly grade point average of less than 2.7.
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 Catalogue have been satisfied.

Graduation
A student will be recommended for the degree of Master of Physical Therapy provided he/she:
a. Has satisfactorily completed two years and four months education at the University in the MPT curriculum.
b. Is not on probation and has completed all prescribed academic and clinical education requirements with a cumulative grade point average of at least 2.7 and has no outstanding grade of “I” or “U,” or “NCr” in a required course.
c. Has demonstrated no serious deficiencies in ethical, professional, or personal conduct, as defined previously.
d. Has complied with all the legal and financial requirements of the University as stated in the Catalogue.
e. Unless special permission has been granted by the President of the University, all students must attend in person and participate in the Commencement program at which time the degree is conferred. If the President grants special permission to be excused from graduation, the graduate may be required to present himself or herself to the Provost or appropriate Dean at a later date in order to take the required oath (if relevant) to receive his or her diploma.

Academic Warning
The student who demonstrates unacceptable performance in any unit of study during any portion of the program is notified of such performance by the Instructor of the course, as well as the Department Chairperson, in writing, as soon as it becomes evident. This constitutes an academic warning. Continued poor academic performance can lead to academic probation and/or dismissal.

Academic Probation
a. Unsatisfactory or No Credit Course Grades
"U" or “NCr” in any required course constitutes a failing grade, and places the student on academic probation, requiring that the course be remediated or retaken based upon the recommendation of the course instructor. A grade of “U” or “NCr” in a required course will prevent participation in a clinical practicum until the course is successfully remediated and requires that the ACCE 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 28 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 remediation of a course will be recorded on the official transcript beneath 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.
4. If a student repeats a course the next time that course is offered in the MPT curriculum, the student will have that new grade for the course recorded on the official transcript beneath the original course grade of “U” (Unsatisfactory) or “NCr” (No Credit).
5. Failure to earn a grade of “C” or higher or “Cr” on repeating a course of study will render a student subject to dismissal from the program.
6. A third “U” or “NCr” in required coursework in the program will render a student subject to dismissal from the program.

b. Module/Overall GPA
1. Students must attain a modular GPA of 2.7 and maintain an overall GPA of 2.7. The module GPA and overall GPA will be calculated at the end of each Module.
2. A student whose modular or overall GPA falls below 2.7 must meet with the Department Chairperson and the ACCE. In order to closely monitor clinical performance, the ACCE will determine the subsequent clinical placement.
3. If the modular or overall GPA falls below 2.7, 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 attains a modular GPA below 2.7 in two consecutive modules the student will be subject to dismissal from the program.

**Tutorial Assistance Program**

A Tutorial Assistance Program (TAP) has been established at the University to assist students experiencing academic difficulty. Students will be recommended for this program by a faculty advisor or professor. The tutors will be chosen from the student body on the recommendation of the faculty of record for the class.

**General Procedures**

a. The student may request a tutor by:
   1. contacting the course instructor and/or the Department Chairperson,
   2. contacting his/her advisor or,
   3. going directly to the Learning Enhancement and Academic Development (LEAD) Office.

Student requests will be reviewed by the course instructor and/or the Department Chairperson. Upon approval, the student will be deemed eligible for services under TAP. Five hours per course is the maximum number of hours for which a student may be tutored per week.

b. The course instructor may recommend that the student seek a tutor, based upon a poor performance on a single exam or poor cumulative score.

c. The student’s advisor may recommend that the student seek a tutor, based upon any knowledge he or she may have about the student’s academic difficulty. In addition, the advisors will receive copies of letters from the Chairperson to students having academic difficulty.

d. To initiate tutoring following a recommendation or student request for tutoring, the student follows these steps:
   1. The student obtains from the LEAD Office a list of names of tutors available for the course in which the student is having problems.
   2. The student is assigned a tutor by the LEAD Director from the list of available tutors.
   3. Once assigned, the tutor and tutee meet with the course instructor to discuss the student’s specific problems. The instructor should make some recommendations as to what areas the tutor should emphasize.
   4. The tutor and student arrange mutually agreeable times for the tutoring sessions.
   5. The tutor must have the course instructor sign the time sheet before it is turned in to the LEAD Office.

A student may obtain up to five hours of tutoring per course per week during the module. By example: A Year I MPT student may be tutored in Anatomy I and Kinesiology I for a total of 10 hours per week during the module. Generally, tutoring begins after a student has received grades at 73 percent or lower on an exam. The student may continue to be tutored for a course until he/she has obtained a B- (80%), or
higher average grade for the course. As the student moves into Module V, the student may qualify for up to 20 hours of tutorial assistance per week (three musculoskeletal courses plus Research Design II). Any time a student has received 73 percent or less on an exam, the student, faculty member or student’s faculty advisor may immediately request tutorial assistance.

**Modified Year I MPT Curriculum**

The MPT program offers Modified Year I curriculum for students experiencing academic difficulties or students with disabilities. This modified program is a three-year and four-month curriculum in which the first year standing curriculum is spread over a two-year period. Guidelines for this program include:

a. Potential candidates for the Modified Year I MPT Curriculum will be identified by the midway point of Module I after midterm examinations in the following five courses: Anatomy I, Kinesiology I, PT Science I, PT Science II, and Physiology.

b. The Modified Curriculum is not an option unless the student manifests serious academic problems by the midway point of Module I.

c. Recommendation of individual students for the Modified Curriculum shall be made through the Dean of the College of Allied Health Professions by recommendations from the Department of Physical Therapy Education Faculty and the College of Allied Health Professions, Student Academic Progress Committee.

d. The decision to enter the Modified Curriculum is a onetime student option.

e. At the time the student opts for the Modified Curriculum, the modified curriculum will be based upon courses in which the student is receiving satisfactory grades by midterm of Module I. The Modified Curriculum will be outlined for the student, so that Year I of the MPT curriculum will be taken over two years. As the student enters Year II of the curriculum, it is expected that the student would attend all classes and clinical assignments as defined in the standard curriculum.

f. The student's progress will be monitored carefully each module by the Department Chairperson for the Department of Physical Therapy Education, College of Allied Health Professions Student Academic Progress Committee, and the Dean of the College of Allied Health Professions.

g. Students admitted to this program will pay two years, four months consecutive years of tuition and mandatory fees, and only mandatory fees for the additional year in the curriculum.

**Professional Probation**

Violations of the Standard of Professional Conduct will be dealt with as described under the General University Academic Policies and Regulations of this catalogue.

**Dismissal**

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

a. A second grade of "U" or "NCr" in the same required course;

b. A third grade of "U" or "NCr" in required courses in the program;

c. Unacceptable performance on more than one of the clinical practica;

d. Lack of professional or personal attributes considered appropriate for continuance in the program and profession;

e. Any event that could result either in academic or professional probation for a student currently on academic or professional probation;

f. Violation of the terms of probation as stated in a letter at the time the student is placed on probation.

**Exemption from Individual Course**

Students with advanced work or degrees in a particular subject formally may petition the instructor and the Department Chairperson 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. The student must comply with the attendance policy until notification that exemption has been granted by the Dean, based upon recommendation of the Department Chairperson. The instructor, before recommending exemption, may require acceptable performance on an examination. The instructor, in
consultation with the Department Chairperson, may suggest other alternative or additional criteria for determining exemption.

**Confidentiality of Medical Records and Health History Information**

All data gathered about patients and their illnesses, including all items within patients’ medical histories are privileged information.

a. 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.

b. Charts or contents, e.g., lab reports, etc., are not to be removed from the hospital or clinical setting.

**Use of Physical Therapy Equipment and Laboratories**

The DPTE policy for use of the PT equipment in the PT Skills Laboratories is as follows: No one is to use the PT equipment except MPT students who have received education and have had practice on the equipment in the laboratory. These MPT students must be checked out by a faculty member as being competent to use the equipment. MPT students using the equipment should be doing so in conjunction with a class they are taking, or in preparation for a clinical practicum, or to conduct a clinical research project. If equipment is used for a research project, the MPT faculty advisor will be responsible to check out student competency in using the equipment.

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 of the intended date of use.

**CURRICULUM ORGANIZATION**

The MPT curriculum is continually evaluated to assure the best educational experience and outcomes. With this consideration, the following is an outline of curriculum organization.

<table>
<thead>
<tr>
<th>Year I</th>
<th>Semester Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Module I - 15 Weeks</strong></td>
<td></td>
</tr>
<tr>
<td>PT 5000 Psychosocial Aspects of Health Care</td>
<td>3</td>
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<tr>
<td>PT 5010 Today's Health Care System</td>
<td>2</td>
</tr>
<tr>
<td>PT 5030 Anatomy I</td>
<td>6</td>
</tr>
<tr>
<td>PT 5050 Kinesiology I</td>
<td>3</td>
</tr>
<tr>
<td>PT 5070 Physical Therapy Science I</td>
<td>2</td>
</tr>
<tr>
<td>PT 5075 Physical Therapy Science II</td>
<td>3</td>
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<tr>
<td>PT 5100 Physiology</td>
<td>4</td>
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<td><strong>Total</strong></td>
<td>23</td>
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</tbody>
</table>

| **Module II - 11 Weeks** | |
| PT 5020 Medical Terminology & Documentation | 1 |
| PT 5035 Anatomy II | 5 |
| PT 5055 Kinesiology II | 3 |
| PT 5080 Physical Therapy Science III | 3 |
| PT 5120 Human Life Sequences | 2 |
| PT 5130 Research Design I | 2 |
| PT 5141 Preparation for Clinical Practicum I | 1 |
| **Total** | 17 |

| **Module III - 2 Weeks** | |
| PT 7010 Clinical Practicum I | 2 |
| **Total** | 2 |

| **Module IV - 15 Weeks** | |
| PT 5135 Research Design II | 2 |
| PT 5142 Preparation for Clinical Practicum II | 1 |
PT 5200 Foundations of Musculoskeletal Intervention 4
PT 5205 Evaluation and Treatment of Upper Quarter Musculoskeletal Problems 5
PT 5210 Evaluation and Treatment of Lower Quarter Musculoskeletal Problems 6
PT 5220 Principles of Teaching and Learning 2
PT 5230 Role of Physical Therapy in Clinical Medicine Problems 4
Total 24

Module V - 2 Weeks
PT 7020 Clinical Practicum II 2
Total 2

Year II

Module VI - 12 Weeks
PT 5143 Preparation for Clinical Practicum III 0.5
PT 6000 Neuroanatomy 4
PT 6005 Neurophysiology 4
PT 6010 Evaluation and Treatment of Neurologic Disorders 8
PT 6020 Principles of Electrotherapeutic Evaluation and Treatment 4
Total 20.5

Module VII - 12 Weeks
PT 7030 Clinical Practicum III 12
Total 12

Module VIII - 12 Weeks
PT 5144 Preparation for Clinical Practicum IV 0.5
PT 6030 Physiology of Exercise 4
PT 6040 Evaluation and Treatment of the Cardiopulmonary System 4
PT 6050 Principles of Administration and Management 3
PT 6060 Prosthetics, Orthotics and Gait 3
PT 6070 Prevention and Management of Problems in the Aging Adult 3
PT 6200 Applied Research II 1
Total 18.5

Module IX - 6 Weeks
PT 6075 Prevention and Management of Problems in the Pediatric Patient 3
PT 6100 Rehabilitation: The Neuro-Musculoskeletal and Cardiopulmonary Systems 5
Total 8

Final Phase (Year III)

Module X - 12 Weeks
PT 7040 Clinical Practicum IV 12
Total 12

Module XI - 4 Weeks
PT 6500 Electives 4
PT 5000 Psychosocial Aspects of Health Care (3 credit hours)
(Formerly PT 500)
    Prerequisite: Acceptance to program. Introduction to the psychological and sociological effects of acute, chronic, terminal, traumatic and congenital medical problems on the patient, family and therapist; communication skills including interviews, verbal and non-verbal communication.

PT 5010 Today's Health Care Systems (2 credit hours)
(Formerly PT 501)
    Prerequisite: Acceptance to program. World and national factors that affect today's health care systems, who gets care and how it is paid for, legal and ethical responsibilities of health care providers, role of physical therapy, the team approach, and the professional organization.

PT 5020 Medical Terminology and Documentation (1 credit hour)
(Formerly PT 502)
    Prerequisite: Acceptance to program. Medical terminology and appropriate abbreviations used for patient care documentation. Survey of basic skills of written communication in areas of patient evaluation, treatment notes and discharge summaries. Introduction to the concepts of impairments, disabilities and handicaps, and how the concepts apply to documentation and patient problem solving. May require some clinical observations.

PT 5030 Anatomy I (6 credit hours)
(Formerly PT 503)
    Prerequisite: Acceptance to program. Two courses of normal human anatomy including upper and lower extremities, trunk and neck; cadaver dissection. Emphasis on neuromusculoskeletal and cardiopulmonary systems. Lecture and laboratory.

PT 5035 Anatomy II (5 credit hours)
(Formerly PT 504)
    Prerequisite: PT 5030. Continued from Module I. Lecture and laboratory.

PT 5050 Kinesiology I (3 credit hours)
(Formerly PT 505)
    Prerequisite: Acceptance to program, concurrent enrollment in or successful completion of PT 5030. Introduction to biomechanics, theoretical principles and clinical application of these principles to the joints and muscles of the upper quarter. Emphasis is on normal function, but pathokinesiology is addressed to introduce clinical relevance. Lecture and Laboratory.

PT 5055 Kinesiology II (3 credit hours)
(Formerly PT 506)
    Prerequisite: PT 5030, 5050, and concurrent enrollment in PT 5035. Continued from Module I, and applied to the lower quarter. Includes analysis of open and closed chain kinematics of the lower extremity. Observation skills and analysis of normal gait are emphasized. Lecture and laboratory.
PT 5070 Physical Therapy Science I (2 credit hours)
(Formerly PT 507)
Prerequisite: Acceptance to program. Introduction to the physical therapy skills of transfers, gait training, bed mobility, wheelchair selection and management, cushions, range of motion and monitoring of physiological responses. Lecture and laboratory.

PT 5075 Physical Therapy Science II (3 credit hours)
(Formerly PT 508)
Prerequisite: Acceptance to program. Application of sterile technique and universal precautions, physiologic principles and applications of heat and cold modalities, ultrasound, massage and hydrotherapy. Lecture and laboratory.

PT 5080 Physical Therapy Science III (3 credit hours)
(Formerly PT 509)
Prerequisite: PT 5030, concurrent enrollment in PT 5035. Basic skills of manual muscle testing, gait and postural evaluation. Practice on real and simulated patients. May require some clinical observation. Lecture and laboratory.

PT 5100 Physiology (4 credit hours)
(Formerly PT 511)
Prerequisite: Acceptance to program. Human physiology with emphasis on the various body systems.

PT 5120 Human Life Sequences (2 credit hours)
(Formerly PT 510)
Prerequisite: PT 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.

PT 5130 Research Design I (2 credit hours)
(Formerly PT 512)
Prerequisite: Acceptance to program. Application of research methods to clinical studies. Examines and explains the process of testing and improving what health professionals do to and for clients or patients.

PT 5135 Research Design II (2 credit hours)
(Formerly PT 513)
Prerequisite: PT 5130. Guided instruction in the development, planning and writing of a proposal for a research project. Cr/NCr only.

PT 5141 Preparation for Clinical Practicum I (1 credit hour)
(Formerly PT 514)
Prerequisite: Acceptance to program. This one hour seminar course will offer an introduction to clinical education in physical therapy to include an overview of the affiliation agreement. Scheduling and assignment for Clinical Practicum I will also be incorporated herein. Cr/NCr.

PT 5142 Preparation for Clinical Practicum II (1 credit hour)
(Formerly PT 515)
Prerequisite: PT 5141. This one hour seminar course will continue from PT 5141 on various aspects of clinical education, including expectations of clinical performance and utilization of the evaluation tool. Scheduling and assignment for Clinical Practicum II will also be incorporated herein. Cr/NCr.
PT 5143 Preparation for Clinical Practicum III (.05 credit hour)
(Formerly PT 516)
Prerequisite: PT 5141, 5142. This one hour seminar course will continue from PT 5142 on various aspects of clinical education including issues of professionalism in the physical therapy field. Scheduling and assignment for Clinical Practicum III will also be incorporated herein. Cr/NCr.

PT 5144 Preparation for Clinical Practicum IV (0.5 credit hour)
(Formerly PT 517)
Prerequisite: PT 5141, 5142, 5143. This one hour seminar course will continue from PT 5143 on various aspects of clinical education including the role of the health care team and the licensure process. Scheduling and assignment for Clinical Practicum IV will also be incorporated herein. Cr/NCr.

PT 5200 Foundations of Musculoskeletal Intervention (4 credit hours)
(Formerly PT 522)
Prerequisite: Satisfactory completion of PT 5020 through 5100. Basic concepts of evaluation and treatment of musculoskeletal problems are presented to prepare the student for application to specific regional problems in the later sequenced courses. Content includes the overall process, general pathology, interpretation of diagnostic testing, trauma and healing, tissue mutability, strengthening, pain modulation, management of limited problems, strategies for identification of problems, strategies for treatment and documentation. Lecture and laboratory.

PT 5205 Evaluation and Treatment of Upper Quarter Musculoskeletal Problems (5 credit hours)
(Formerly PT 523)
Prerequisite: Satisfactory completion of PT 5020 through 5100, 5200. Evaluation and treatment of upper extremity musculoskeletal problems will be approached regionally beginning from distal to proximal. Content includes subjective interview, physical examination, treatment and documentation of specific problems of the hand, wrist and forearm, elbow, shoulder and scapula, cervical spine and head. Lecture and laboratory.

PT 5210 Evaluation and Treatment of Lower Quarter Musculoskeletal Problems (6 credit hours)
(Formerly PT 524)
Prerequisite: Satisfactory completion of PT 5020 through 5100, 5200, 5205. Evaluation and treatment of lower extremity musculoskeletal problems will be approached regionally beginning from distal to proximal. Content includes subjective interview, physical examination, treatment and documentation of specific problems of the foot and ankle, knee, hip, thoracic and lumbar spine and sacroiliac joints. Lecture and laboratory.

PT 5220 Principles of Teaching and Learning (2 credit hours)
(Formerly PT 530)
Prerequisites: Acceptance to the program. Introduction to the aspects of: 1) verbal and non-verbal communication, 2) communication with patients and others with respect to learning styles, gender differences, culture, disabilities, 3) group dynamics and teamwork, 4) learning theories, and 5) the variety of teaching methods available. Student projects and presentations required.

PT 5230 Role of Physical Therapy in Clinical Medicine Problems (4 credit hours)
(Formerly PT 533)
Prerequisite: PT 5030, 5035, 5100. General medical and surgical disorders, their etiology and clinical manifestations. General pathological conditions and mechanisms of disease processes; treatment for selected medical problems, including arthritis, cancer, immune disorders, endocrine disorders and wounds.

PT 6000 Neuroanatomy (4 credit hours)
(Formerly PT 526)
Prerequisite: Acceptance to the program. Normal anatomy and function of the central, peripheral, and autonomic nervous systems; laboratory with specimens. Lecture and laboratory.
PT 6005 Neurophysiology (4 credit hours)  
(Formerly PT 527)  
Prerequisite: PT 5100. Human neurophysiology with emphasis on normal cellular and systemic functions of the central and peripheral nervous systems.

PT 6010 Evaluation and Treatment of Neurologic Disorders (8 credit hours)  
(Formerly PT 528)  
Prerequisite: PT 5030, 5035, 5070, 5080; concurrent enrollment in PT 6000, 6005. Systematic approach to a variety neurologic problems of the central and peripheral nervous systems. Emphasis is on the impairments and clinical manifestations of the anatomical lesions, evaluation techniques and interventions. Lecture and Laboratory.

PT 6020 Principles of Electrotherapeutic Evaluation and Treatment (4 credit hours)  
(Formerly PT 529)  
Prerequisites: PT 5100, 6000, 6005. Basic concepts in electrical safety and instrumentation, detailed concepts and applications of electrotherapy introducing principles of electrophysiologic testing and therapeutic application of electrical stimulation (ES), including strengthening (NMES), re-education, pain reduction (TENS), tissue repair (ESTR) and iontophoresis. Electrophysiologic testing to include an introduction to electromyography (EMG), nerve conduction velocity (NCV) and other electrophysiologic tests. Lecture and laboratory.

PT 6030 Physiology of Exercise (4 credit hours)  
(Formerly PT 531)  
Prerequisite: PT 5100. This course addresses bioenergetics as well as the acute and chronic physiological responses of the human body during exercise and other special conditions. The physiological basis of therapeutic exercise is the foundation for this course. Lecture and laboratory.

PT 6040 Evaluation and Treatment of Cardiopulmonary System (4 credit hours)  
(Formerly PT 532)  
Prerequisite: PT 5030, 5100. Introduction to evaluation and treatment of diseases of the cardio-pulmonary system; includes physiology and pathophysiology, evaluation methods, treatment methods and prevention. Lecture and laboratory.

PT 6050 Principles of Administration and Management (3 credit hours)  
(Formerly PT 534)  
Prerequisite: PT 5010, 5020. Organization and administration of a physical therapy department including budget considerations, hiring-interviewing techniques, marketing, and medical-legal issues.

PT 6060 Prosthetics, Orthotics, and Gait (3 credit hours)  
(Formerly PT 538)  
Prerequisite: PT 5030, 5035, 5050, 5055, 5080. Evaluation and application of prosthetic and orthotic devices to physical therapy clients. Evaluation of abnormal and pathological gait patterns. Lecture and laboratory.

PT 6070 Prevention and Management of Problems in the Aging Adult (3 credit hours)  
(Formerly PT 535)  
Prerequisite: PT 5000 through 5120, 5200 through 5230, 6000 through 6020; concurrent enrollment in PT 6030, 6040, 6050. Systematic, problem solving approach to the geriatric client with emphasis on prevention, etiology, clinical manifestations, evaluation, treatment and resources.

PT 6075 Prevention and Management of Problems in the Pediatric Population (3 credit hours)  
(Formerly PT 536)  
Prerequisite: PT 5030, 5035, 5070, 5080, 5100, 5120, 6000, 6005, 6010. Systematic, problem solving approach to the pediatric client with emphasis on prevention, etiology, clinical manifestations, evaluation and treatment. Lecture and laboratory.
PT 6100 Rehabilitation: The Neuromusculoskeletal and Cardiopulmonary Systems (5 credit hours)
(Formerly PT 537)
Prerequisite: PT 5000 through 5120, 5141 through 5144, 5200 through 5230, 6000 through 6070.
Emphasis is on the various roles of physical therapy throughout the process of rehabilitation. Exposure to
customers with complex problems and special needs is included. There is a potential for off site experience
as a member of a rehabilitation team and work with experts in other medical professions. Experiences
provided to expose students to rehabilitation measures and techniques with real and/or simulated patients.
Lecture and laboratory.

PT 6200 Applied Research I (1 credit hour)
(Formerly PT 540)
Prerequisite: PT 5130, 5135. Individually planned studies under the direction of a senior investigator.
Studies to be pertinent to work in physical therapy. Cr/NCr.

PT 6210 Applied Research II (1 credit hour)
(Formerly PT 541)
Prerequisite: PT 5130, 5135, 6200. Students give presentation of research proposal to PT community.
Cr/NCr.

PT 6500 Electives (4 credit hours)
(Formerly PT 539)
Prerequisite: Approval of instructor. Students select from a variety of topics presented in the style of
continuing education courses and attend an average of 12 hours/week for four weeks. Laboratory
experiences may be included. Cr/NCr.

CLINICAL PRACTICA

PT 7010 Clinical Practicum I (2 credit hours)
(Formerly PT 518)
Prerequisite: Satisfactory completion of PT 5000 through 5130, PT 5141. Forty hours per week for two
weeks under the direct supervision of a physical therapist serving as the clinical instructor. Application of
Modules I and II will be emphasized in this clinical experience. Cr/NCr.

PT 7020 Clinical Practicum II (2 credit hours)
(Formerly PT 519)
Prerequisite: Satisfactory completion of PT 5000 through 5142, 5200 through 5230. Forty hours per
week for two weeks under the direct supervision of a physical therapist serving as the clinical instructor.
Application of Modules I through IV will be emphasized in this clinical experience. Cr/NCr.

PT 7030 Clinical Practicum III (12 credit hours)
(Formerly PT 520)
Prerequisite: Satisfactory completion of PT 5000 through 5143, 5200 through 5230, 6000 through 6020.
Forty hours per week for twelve weeks under the direct supervision of a physical therapist serving as the
clinical instructor. Application of Modules I through VI will be emphasized in this clinical experience. Cr/NCr.

PT 7040 Clinical Practicum IV (12 credit hours)
(Formerly PT 521)
Prerequisite: Satisfactory completion of all courses, except PT 6210 and 6500. Forty hours per week
for twelve weeks under the direct supervision of a physical therapist serving as the clinical instructor.
Application of Modules I through IX will be emphasized in this clinical experience. Cr/NCr.
HONORS AND AWARDS
The following awards are presented to PT students annually on Honors Day in April:

- Physical Therapy Student Recognition Award
- Physical Therapy Class Award
- Elizabeth A. Rogers Chairperson's Award
- Asian American Physical Therapy Scholarship Award
- Roy G. and Marion L. Kramer Endowment Fund Award
- Guy M. Allmon Scholarship Fund Award
- Linda Fox Memorial Endowment Fund Award
- President's Society Award
- Rebecca E. Pabst Memorial Scholarship Award
- Shannon Marie Fogard Memorial Scholarship Award
- Casa Colina Centers for Rehabilitation Scholarship Award
- Dean's Award

The following are presented at graduation:

- Dean's Award
- Physical Therapy Faculty Award
- Physical Therapy Outstanding Clinical Performance Award
- Physical Therapy Outstanding Service Award
- Physical Therapy Academic Achievement Award
- Outstanding Research Proposal Award
<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
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<tr>
<td>Jan. 2, 2002</td>
<td>Spring Semester Tuition Due</td>
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<tr>
<td>Monday, Jan. 7, 2002</td>
<td>MPT ’04 Registration</td>
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<tr>
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<td>MPT ’04 Module I Begins</td>
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<td>MPT ’03 Module VI Begins</td>
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<td>MPT ’02 Module X Begins</td>
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<tr>
<td>Sunday, Jan. 13, 2002</td>
<td>MPT ’04 Welcome Luncheon and White Coat</td>
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<td>Ceremony</td>
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<td>Monday, Jan. 21, 2002</td>
<td>Martin Luther King, Jr. Holiday</td>
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<td>Monday, Feb. 18, 2002</td>
<td>President's Day Holiday</td>
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<tr>
<td>Monday, Apr. 1, 2002</td>
<td>MPT ’02 Spring Break</td>
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<td>MPT ’03 Module VII Begins</td>
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<td>Monday, Apr. 8, 2002</td>
<td>MPT ’02 Module XI Begins</td>
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<td>Monday, Apr. 22, 2002</td>
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<td>Monday, Apr. 29, 2002</td>
<td>MPT ’04 Module II Begins</td>
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<td>Friday, May 3, 2002</td>
<td>MPT ’02 Last Day of Classes</td>
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<td>Monday, May 27, 2002</td>
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<td>Friday, May 31, 2002</td>
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<td>Monday, Jun. 24, 2002</td>
<td>MPT ’03 Summer Break</td>
</tr>
<tr>
<td>Thursday, Jul. 4, 2002</td>
<td>Independence Day - No Classes</td>
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</table>
COLLEGE OF ALLIED HEALTH PROFESSIONS

Master of Science in Physician Assistant Studies
Primary Care Physician Assistant Program

ACCREDITATION
The Primary Care Physician Assistant Program of the College of Allied Health Professions is accredited by the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA).

VISION STATEMENT
The Western University of Health Sciences Primary Care Physician Assistant Program will be nationally recognized as an innovative leader in Physician Assistant education. Our faculty will continue to educate a diverse student body who will provide humanistic and comprehensive primary care medicine with a special focus on the underserved populations.

Our students will be the cornerstone for providing primary health care services. Employers will seek our graduates to join their health care teams and participate as integral members. Through these partnerships, access to comprehensive patient care will increase for underserved populations. Our students and graduates will serve in key political positions, on a state and national level, to steer the future of the physician assistant profession.

Our graduates, students and faculty will provide quality health care to underserved populations. The faculty will forge and fortify educational experiences so that our students can ensure quality health care. We will offer job-matching strategies to ensure that our graduates work in primary care medicine. Quality health care education and services will be provided by interdisciplinary teams. The medical team concept of teaching and patient care will be assured though the faculty's continued acquisition of knowledge.

MISSION STATEMENT
The Primary Care Physician Assistant Program supports the University's mission by educating primary care providers who are trained in delivering humanistic care as integral members of a health care environment, and to meet the growing demands for primary care providers to provide health care to underserved populations. The mission of Western University's Primary Care PA Program is to provide education in primary care medicine to PA students in a humanistic and comprehensive manner. The education and skills gained will allow students to provide culturally sensitive care to underserved populations.

THE PHYSICIAN ASSISTANT ROLE
Physician assistants are health care professionals licensed to practice medicine with physician supervision. Within the physician/physician assistant relationship, physician assistants exercise autonomy in medical decision making and provide a broad range of diagnostic, therapeutic, preventive, and health maintenance services. The clinical role of the physician assistant includes primary and specialty care in medicine and surgical practice settings. Physician assistant practice is centered on patient care and may include educational, research and administrative activity. As part of their comprehensive responsibilities, PAs conduct physical exams, diagnose and treat illnesses, order and interpret tests, counsel on preventive health care, assist in surgery, and can write medical orders.

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 those areas of basic medical science and clinical disciplines and specific problem solving.
Physician assistant practice is characterized by clinical knowledge and skills in areas traditionally defined by family medicine, internal medicine, pediatrics, obstetrics, gynecology, surgery, and psychiatry/behavioral medicine.

Physician assistants practice in ambulatory, emergency and long-term settings. Physician assistants provide health care services to diverse patient populations of all ages with a range of acute and chronic medical and surgical conditions. They need 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) in mid-October and April of each year. 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 is 770-399-9971. The PAC phone number is 916-263-2323.

The PAC may grant interim approval to an applicant for licensure as a physician assistant provided that the applicant provides evidence that he or she is a graduate of an approved program and has applied for, and therefore not taken, the first examination required by Section 1399.507 subsequent to the applicant’s successful completion of the approved program. If the applicant fails the examination, the interim approval automatically terminates upon the applicant’s receipt of notice of failure by the PAC or by the NCCPA.

An applicant who has been granted interim approval and who is subsequently notified by the NCCPA or by the PAC that he or she has passed the examination required in Section 1399.507 shall complete the licensure process by paying the initial licensure fee as requested within 90 days from notification that the applicant is now ready for licensure. If the applicant does not complete the licensure process by end of the 90-day period, the interim approval shall automatically terminate.

PROGRAM GOALS

The primary goal of the Western University 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 a variety of patient populations with a special emphasis placed on the underserved. 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. The program goal of 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.
This goal also permits the development of attributes that will serve the graduate in the greatest spectrum of potential employment opportunities.

The program has also established the goal of incorporating appropriate elements of the traditional osteopathic philosophy into the training of physician assistants. These elements include:

- An understanding of the patient as a "whole person."
- Emphasis on those aspects of health education that stress "wellness" and disease prevention.
- An appreciation of the role of physical medicine in the diagnosis and management of illness.

The curriculum is designed to accomplish the following objectives. Students attain these objectives as they progress through the curriculum.

**Knowledge**

Upon completion of this program the graduate should know:
1. The pre-clinical, clinical and behavioral sciences that form the foundation for functioning as a PA.
2. The spectrum of normal measurements that define the healthy individual at all ages.
3. The pathophysiologic processes that commonly cause deviations in normal clinical measurements.
4. The fundamentals of health maintenance.
5. Patient management regimens for common primary health care problems.
6. Accepted strategies for disease prevention.
7. How to apply a systematic process of problem solving to the diagnosis of disease.
8. The components of normal human behavior and the major deviations from these patterns.
9. The health care resources available to the health care provider and patient.
10. The role of the physician in a variety of health care environments.
11. How the various health care delivery systems function and the role of the PA within each system.
12. The general principles of managed care as it applies to patients and primary care providers.
13. The fundamentals of various types of research modalities.
14. The research modalities and applications for problem solving in regards to disease, health promotion and disease prevention.

**Skills**

Upon completion of this program the graduate should be able to:
1. Obtain a medical history.
2. Perform a complete physical examination.
3. Perform and interpret diagnostic tests.
4. Accurately report information obtained from a patient.
5. Manage, with the supervision of a physician, common health care problems.
6. Assess mental health status.
7. Recognize signs and symptoms of disease processes.
8. Communicate empathetically with a patient.
10. Critically interpret medical literature and apply it appropriately in clinical practice.
11. Gather community resources for patients.
12. Implement community health projects and guidelines.
13. Participate in quality assurance programs.
14. Develop health care resources for other providers and patients.
15. Participate in medical research activities.

**Attitudes**

Program graduates should exhibit respect and appreciation for:
1. All individuals who seek their care.
2. Self and other members of the health care team/profession.
3. An individual's right to confidentiality.
4. The sanctity of human life.
5. The dignity of patients.
6. The multiple physical and emotional factors that influence the health of individuals.
7. The many value systems in our society.
8. The importance of continuing medical education after graduation.
9. The effectiveness as a contributing team member in health care.
10. An increased PA role in regards to the medical community, health care delivery systems and the patient.

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, accurate history and perform a complete routine physical examination on patients of any age group; elicit a pertinent and accurate history and perform a problem-oriented screening examination in situations requiring an interval evaluation.
• Select, perform and/or interpret the appropriate routine laboratory and diagnostic studies/procedures for the purpose of completing an adequate database.
• Identify problems, organize and integrate data, record and present.
• Accurately present an oral case.
• Implement a management plan, including performing or assisting.
• 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.

Associated Competencies
In addition to the above entry-level competencies, physician assistant graduates are expected to function in a variety of environments, interact appropriately with diverse populations, and engage in many activities for continued professional and personal growth. The role of the physician assistant as a primary health care provider imposes many legal and ethical restrictions on behavior. Although not strictly related to the “clinical role” of the physician assistant, there are a large number of activities that contribute to the broad process of “professional development” and “role identity” which are essential for optimal performance as a health professional. These activities are related to areas such as administration, education, consultation, ethical, and legal considerations of the profession. The program will endeavor to provide its students with educational experiences that will introduce these attitudinal objectives.

TECHNICAL GUIDELINES FOR ADMISSION AND MATRICULATION
A candidate for admission to the Primary Care 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 and student must be able consistently, quickly and accurately to 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 Primary Care PA Program, 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 Primary Care PA Program 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. Western University is committed to admitting competitive, qualified disabled individuals. For technical guidelines, please see above.

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 2.5 on a 4.0 scale and GPA of 2.7 on a 4.0 scale in all course work listed as prerequisites for the PA program. 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:
   - 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, preferably from the math or statistics department)
   - Spanish is strongly recommended.
   - Genetics is strongly recommended.
*Note: English prerequisites must be taken from the English department. English as a Second Language (ESL) courses are not accepted for the English prerequisites.

**Note: 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.

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).

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 considered essential. The extracurricular or community activity does not need to be medical in nature.

Application Procedures and Deadlines

Beginning with the entering class of August 2002, the PA program will be participating in the first central application service for physicians assistant programs. The Central Application Service for Physician Assistants (CASPA) was created by the Association of Physician Assistant Programs (APAP) as a service to applicants and member programs. CASPA will begin accepting applications late spring 2001. 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. Western University’s application deadline to apply to CASPA is December 1, 2001. Applicants are considered without discrimination on the basis of race, color, national origin, age, or sex.

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
Western University of Health Sciences
309 E. Second Street
Pomona, CA 91766-1854
(909) 469-5541

CASPA
apply@caspaonline.org
(240) 497-1895

In addition to the CASPA application, applicants must submit a supplemental application. After the CASPA application has been received, a supplemental application (provided by Western University) will be sent to all applicants who meet the overall GPA of 2.5. However, this does not ensure that you will meet our minimum prerequisite of 2.7 or that all prerequisite classes will be acceptable. A final evaluation and calculation will be completed upon receipt of your supplemental application. The supplemental application deadline for the class entering in August 2002 is February 15, 2002. The supplemental application consists forms requesting additional information, one letter of reference, and a personal statement. A non-refundable application fee of $45 must be submitted with the supplemental application materials. All application materials must be returned as part of one supplemental application packet.

Applicants who wish to use course work completed outside of the United States must submit their transcripts for evaluation to World Education Services, Josef Silny and Associates, Educational Credential Evaluators, Inc., or International Education Research Foundation, Inc. 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 will only honor evaluations from the above services. The evaluation must be submitted to CASPA.

The applicant's personal statement 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, 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. The Western University 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 Western University must have a complete set of official transcripts mailed to the
Admissions Office no later than July 1. For your information, CASPA retains the original set of transcripts
it receives from applicants.

REGISTRATION
First year students are required to register in person on the registration day specified in the University
Calendar or as otherwise directed by the Registrar. Failure to register on that day may be grounds for
dismissal. Full tuition and fees and all prior debts must be paid in full on or before registration day 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 from an undergraduate
college 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 at the time of registration. This coverage must be maintained or in effect throughout
the academic year. If there is no proof of current coverage, a policy provided by the University is
available. Attendance at Orientation is mandatory for all incoming first-year students.

TUITION AND FEES
By action of the Board of Trustees, PA tuition and fees for the 2001-2002 academic year (subject to
change) are as follows:

$19,095   Tuition Annual
For PA applicants accepted at Western University, an entrance fee of $250
payable upon acceptance is applied to tuition.

$40   Student Body Fee, 1st year
Covers student council expenditures, social activities and public relations.

$20   Student Body Fee, 2nd year

Other Fees and Expenses
$1200   Required and Recommended Texts
$45   Uniform Jacket/Patch, Name Badge
$6500   Diagnostic Equipment Kit
$30   (per day) Late Registration Fee
$40   Lost Mail Locker Key
$5   (each) Copy of Official Transcript
$10   (each) Copy of Official Transcript Faxed
$10   Lost ID Badge
$0.25   (per page) Copy of Student File Material
(replacement cost) Breakage Fee

ACADEMIC REQUIREMENTS

Academic Advisement
Students will be assigned a faculty advisor by the Dean 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
appropriate Dean or Dean’s designee. 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 year to the next.

a. A student will be recommended to the Dean of the College of Allied Health Professions for promotion by the Allied Health Student Academic Progress Committee.

b. A student may not be recommended for progression from one semester or phase to the next with any outstanding grades of “I” or “U” on his/her academic record or with a semester grade point average of less than 2.5. Grades of “D” must be remediated before progression to next phase.

c. When considering a student for promotion, professional, ethical, and personal conduct may also be taken into consideration (as described under Probation, a-4).

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

Graduation

A student will be recommended for the Master of Science in Physician Assistant Studies provided he/she:

a. has completed at least two years of the Western University Primary Care PA program.

b. has been enrolled in the Western University Primary Care PA 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 at least 2.5 and has no outstanding grade of “D”, “I” 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 Catalogue.

f. All students must attend in person and participate in the Commencement program at which time the Master of Science in Physician Assistant Studies is conferred, unless special permission is received from the President. If the President grants special permission to be excused from graduation, the graduate may be required to present himself or herself to the Provost or appropriate Dean at a later date in order to take the required oath (if relevant) to receive his or her degree.

g. is within one clinical rotation of completion of all requirements for graduation to be able to march with his or her class in the graduation ceremony. At the discretion of the Dean of the College of Allied Health Professions, an exception may be made for a student with an authorized leave during the Senior 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.

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 Academic Progress Committee, faculty advisor and the Program Chairperson. 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 for any of the following reasons:

1. Immediately upon receiving a course grade of "D" or "U" in any course.

2. A grade point average of less than 2.5 at end of the semester.

3. When directed to repeat a year for academic reasons.

4. Seriously deficient ethical, professional, or personal conduct.
Members of the faculty or administration will render a special report in writing 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 and the reasons will be stated. Notification must be by certified mail or hand-delivered and acknowledged by signatures of the student and the Dean of the College of Allied Health Professions or his designee. Copies of the letter will be placed in the student's permanent file and distributed to the Chairman of the Allied Health Student Academic Progress Committee and the student's faculty advisor. The Allied Health Student Academic 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. Students are removed from probation when the following occur:
   1. After one semester, provided he/she has regained a semester grade point average of 2.5.
   2. When all “D” or “U” grades have been satisfactorily remediated according to the Remediation section of the Catalogue (below).
   3. When the specified terms of probation for ethical, professional, or personal conduct are met.
   4. When 2nd 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.

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 “D” or “U” grade in a course or has a semester grade point average of less than 2.5, that student will be reviewed by the Allied Health Student Academic Progress Committee and procedures for remediation by the Physician Assistant faculty will be recommended to the SAPC, who in turn makes a recommendation to the Dean. 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 Allied Health Student Academic 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 original earned grade is a “U”).
      (b) Complete special projects or studies in the deficient area(s).
      (c) Repeat the course, with or without promotion into the subsequent semester. The student cannot start Phase II or Phase III until the grade of “D” or “U” has been remediated.
      (d) Repeat the academic year.
      (e) 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 options do not apply to clinical education.
3. The grade achieved by remediation will be the grade recorded EXCEPT that the highest grade a student may earn by options (a) or (b) is a grade of “C”. The grade achieved by remediation will be recorded on the transcript beneath the original grade.

4. Grades earned during an attempted remediation of a course will be reviewed critically by the Allied Health Student Academic Progress Committee and the Dean of the College of Allied Health Professions. Failure to earn at least a “C” 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, based upon the recommendation of the Allied Health Student Academic Progress Committee. The Allied Health Student Academic Progress Committee will base its recommendation on the student's academic record and considerations after consultation with the Physician Assistant Faculty Student Advisor, course instructor, and the student, when appropriate.

6. Any student who is required to remediate a course will be notified in writing by the Dean of the College of Allied Health Professions Education at least two weeks prior to the remediation date (or within two weeks after the close of the academic year in which the student is presently enrolled, whichever comes first). Notification must be by Certified Mail or hand-delivered to the student and must be acknowledged with the signatures of the Dean of the School of Allied Health Professions, or his designee, and the student.

c. Students who have been required by the Dean of the School 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 School of Allied Health Professions.

Clinical Education/Preceptorship Remediation

Any student who receives a grade of “U” for a clinical education/preceptorship grade will be required to repeat the entire clinical education/preceptorship. The student must complete all deficiencies for the clinical education/preceptorship prior to completion of the program. The grade achieved by repeating the rotation/preceptorship will be recorded on the transcript. Remediated grades are recorded below a grade of “U.” Only the remediated grade is calculated into the G.P.A.

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 Title IV and Title VII financial aid recipients.

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. The tutors will be chosen from the second year class and a list of alumni on the recommendation of the faculty in each discipline. For assistance, contact the Learning Enhancement and Academic Development Office.

Students can also self identify for TAP.
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 Objectives". The level of attainment listed in these areas is that expected of graduates of the program. However, students are expected to attain these goals as they progress through the Program and certain patterns of attainment are expected along the temporal course of the curriculum.

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 Primary Care Physician Assistant Program. Academic performance is considered sub-standard and unacceptable if any one or more of these standards are not met:

a. Phase I:
   During Phase I (Didactic Phase), students must earn a grade of "C" or better in each course. All "D's" or "U's" will be remediated to a "C" (see Remediation Section). If a remediated grade of "C" is not earned, the student will be required to repeat the entire course of study.

   Students must maintain a GPA of 2.5 during Phase I. In addition, the following applies regarding cumulative GPA:
   1. Students whose GPA falls below 2.5 must meet with the department chairperson prior to registration for the next semester.
   2. Students whose GPA falls below 2.5 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.

b. Phase II:
   Senior Seminar I, II and III Requirement
   1. In Senior Seminar I and II, a grade of "C" or better must be earned. All "D's" will be remediated to a "C". If a remediated grade of "C" is not earned, the student will be required to repeat the entire course of study.
   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 to a “C” grade.

c. Clinical Education Phase II and Phase III
   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 Allied Health Student Academic Progress Committee.

   If a student receives a grade of “U” in Phase II, he/she must repeat the rotation before advancing to Phase III.

The Allied Health Student Academic Progress Committee and the Professional Conduct Committee may be convened to consider cases relating to unusual circumstances.
Out-of-Area Clinical Education
Clinical Education that is greater than 180 miles in any direction from Western University, Pomona Campus, is considered an out-of-area rotation clinical education. Permission for out-of-area rotations clinical education is granted by the Clinical Education Coordinators and the PA Faculty.

To participate in out-of-area rotations, students must:

- Exemplify ethical and professional behavior throughout their didactic and clinical rotations phase.
- Have a GPA of 3.0 from Phase I, receive a “B” or better on all preceptor assigned grades and maintain a “B” or better in Senior Seminar I and II.
- Provide the Clinical Education Coordinators with transportation and room and board for out-of-area site visits.
- Sign a waiver releasing Western University from any responsibility regarding NCCPA Board performance.

Clinical Rotation Education Assignment Appeal
A change in clinical rotation education assignment may be requested in writing by the student for the following reasons:

a. After completing one week in the rotation, the student deems the rotation is not of high quality.

b. The student is requesting a change in a clinical rotation assignment for a specific month under a preceptor not affiliated with the PA Program.

Completed paperwork requesting an upcoming rotation change must be submitted to the Clinical Education Coordinators 30-60 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, may have the remainder of their clinical rotations reassigned by the Clinical Education Coordinators.

Rotational Clinical Education Observation
Any student who has been "deemed unsafe" may be placed in an observational mode until further notice, for the remainder of his/her rotation. A student may be placed in observation mode for one month only, then 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.

a. Primary Care Physician Assistant Program name tags/badges are to be worn at all times while on campus, and at clinical rotation education sites.

b. Short white “intern” type jackets are required at all times, beginning with Phase II of the curriculum.

c. Female students may wear slacks or other appropriate dress. Modesty must be a consideration for necklines and hemlines.

d. 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.

e. “Blue jeans” are NOT appropriate dress for either male or female students during the clinical phases.

f. “Tennis Shoes”, “Joggers”, and other forms of athletic shoes are NOT considered appropriate attire.

g. Students should consider the image projected to the patient and others with regard to hairstyle and length, beards, mustaches and jewelry.
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 Western University 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 Program Chair and/or Clinical Education Coordinators. 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. A student may be placed in observational mode by the Program Chair during the investigation, or may request that the student be summarily suspended during the investigation.

Academic Warning

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 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 Allied Health Student Academic 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.

a. Phase I: Students will be placed on academic probation as a result of "D" or "U" work in any unit of study.

b. Phase II: Students will be placed on academic probation as a result of any of the following:
   1. A final grade of "U" in any clinical rotation.
   2. A final grade of “D” or “U” in Senior Seminar I and II.

c. Phase III: Students will be placed on academic probation as a result of any of the following:
   1. Unacceptable performance in Senior Seminar III (the comprehensive examination.) Students failing to achieve a passing score on the program comprehensive examination will be required to demonstrate attainment of competencies related to the areas of deficiency through re-evaluation. If the student has not attained the necessary competencies in the areas of deficiency through re-evaluation, he/she may be required to complete a course of remedial study.
   2. Less than “C” performance on any portion of the preceptorship grades.
   3. Students will not be allowed to graduate until all competencies have been achieved.

Attendance

Attendance is expected for all lectures, classes, and academic-related activities. It is required that students observe the following policy:

a. Excused Absences
   1. All 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 excused 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, regardless of length, must have the prior approval by
the faculty to be considered excused.
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.
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 absences from a clinical rotation education can result in any of the following:
   (a) repeat the entire rotation
   (b) make up days assigned at the convenience of the preceptor
   (c) grade of Incomplete assigned

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 in patient rotations.
   Under no circumstances should a student initiate orders for any patient on any rotation clinical
educational rotation without immediate physician consultation and countersignature. In addition, under no
circumstances should a student sign transmittal medical orders.
   Under no circumstances should a student accept samples from pharmaceutical representatives on behalf
of the preceptor or himself.
   These guidelines must be strictly adhered to for the student's protection and the protection of the
patients seen by students.

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.

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 "D's", "U's" or a combination of one “D” and one “U” throughout
the 24-month program may be dismissed from the program.
b. Lack of professional attributes considered appropriate for continuance in the program and profession.
c. Any event that could result in either academic or professional probation for a student currently on academic or professional probation.
d. Violation of the terms of probation.
e. Presenting him/herself as a physician.

Examination Policies
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, and headsets, etc., will be kept in front of the room.
e. Questions will be answered at the discretion of the proctor during the examination period. Students should be permitted to point out typographical or other errors present in the examination to the proctor.
f. Alternate seating shall be utilized for all examinations unless precluded by space availability.
g. Students are not to communicate in any way during the examination, are not to look at any other student's examination paper, and are to face the front of the classroom at all times. All pagers, cellular phones, etc., are to be turned to vibrate mode.
h. Violations of these examination policies and of Standards of Academic and Social Conduct will be brought before the Student Conduct Committee.
i. 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.

Evaluation and Grading
a. General: The degree of competency expected of all program graduates upon completion of the professional curriculum is defined by the "Functions and Tasks of Physician Assistant Graduates". 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 differently 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 single answer multiple choice, matching, True/False, short answer, essay and patient management type questions are used.
   2. 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.
   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 topics, written histories, physicals, discharge summaries, research papers, etc.
5. 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.

6. 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 required 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.

7. 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 by the 10th of the month following the rotation.

8. Literature Review: Students can be requested to review current literature and complete a one-page, typed and double spaced critique. The critique will be evaluated on content, validity, clarity and clinical relevance.

9. 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 and skills 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 and a clinical skills component.

10. Grade Reports: Final grade reports are mailed to students at their home addresses upon completion of each semester by the Registrar.

   A class ranking may be obtained from the Registrar’s Office in writing with appropriate identification. The class ranking is based solely on letter grades, not percentages.

   Due to the nature of the clinical curriculum, i.e., variable duration and sequencing of clinical courses education, course completion dates rarely coincide with traditional grading periods.

   In these cases when final grades are not available at grade reporting time, 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.

11. Review of Examinations: Examinations are graded as soon as possible and one examination is kept on file for student review.

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

<table>
<thead>
<tr>
<th>Grade</th>
<th>Percentage</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>90% - 100%</td>
<td>4</td>
</tr>
<tr>
<td>B</td>
<td>80% - 89%</td>
<td>3</td>
</tr>
<tr>
<td>C</td>
<td>70% - 79%</td>
<td>2</td>
</tr>
<tr>
<td>D</td>
<td>65% - 69%</td>
<td>1</td>
</tr>
<tr>
<td>U</td>
<td>Less than 64%</td>
<td>0</td>
</tr>
</tbody>
</table>
13. Clinical Rotation Education Grading Criteria: The Clinical Education grade is based on the student’s singular performance as assessed by the preceptor and the patient write-up.

(a) Student Performance from supervising preceptor  60%
(b) Patient Write-Up (one per month)  40%

100%

1. Students are required to earn a final course grade of “C” or better in each clinical rotation. Students cannot earn two or more “U’s” or “D’s” or a combination of one “D” and one “U” throughout the entire 24 months of the program. Students will not be allowed to advance to Phase III (Advanced Clinical Preceptorship) until all deficient clinical rotation Education grade(s) are completed/remediated. Remediation will delay the student’s progress to preceptorship and extend the program completion date.

The following applies regarding Cumulative GPA:
   a. Students whose GPA falls below 2.5 must meet with the Program Chair prior to registration for the next semester.
   b. Students whose GPA falls below 2.5 are not eligible for further registration unless probationary status is granted by the Dean of the College of Allied Health Professions.
   c. Students participating in Out-of-Area Rotations Clinical Education must maintain a cumulative GPA of 3.00 in all preceptor assigned grades and Senior Seminar I and II. The program will revoke the privilege of the Out-of-Area Rotation Clinical Education if the student’s GPA falls below a 3.00.

2. To receive a complete grade for each clinical rotation education, all assigned documents must be submitted to the PA Department, Pomona campus:
   a. Twice Monthly Time Records
   b. Time records/Monthly Schedules
   c. Returned Preceptor/Site Evaluation Form

Failure to submit items a and b and c at the end of each month will result in a grade of Incomplete (I).

14. Preceptorship Grading Criteria: Advanced Clinical Preceptorship grades is are based on the student’s performance as assessed by the preceptor and the patient write-up.

   a. Student Performance Form from supervising preceptor  80%
      (one per month)
   b. Patient Write-up (one per month)  20%
      100%

1. Students are required to receive a grade of “C” or better on their preceptorship evaluation. The preceptor is responsible for evaluating the student's performance monthly during the preceptorship. Students will be evaluated on the basis of their clinical medical knowledge, diagnostic skills and treatment plans, as well as their motivation, willingness to accept responsibility and interaction with patients, staff and supervisors. It is the student’s responsibility to ensure that THE STUDENT PERFORMANCE FORM for the preceptorship evaluations (3) are returned to the program by the last day of each month.

2. The following documents must be submitted in order to receive a final grade:
   a. Twice Monthly Time Records/Monthly Schedules
   b. Returned Preceptor/Site Evaluation Form.
   c. Final resume by July 31st.

Failure to submit items a-c will result in a grade of Incomplete (I).
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 the grade occurred. If the student believes there is just cause to dispute a grade for a course, the procedure is as follows:

Make 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, 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.

Upon written request from the student, the Department Chairperson shall review the case with the instructor(s) and a decision shall be made by the course instructor(s) to affirm or modify the grade. Within seven (7) working days, the Department Chairperson shall notify the student in writing of the decision. A copy of the letter shall be sent to the appropriate course instructor(s). The course instructor(s) has the sole responsibility to make the official grade change.

If the student is not satisfied with the outcome of the grade dispute procedure to the Department Chairperson, the student may then appeal in writing to the Dean of the College of Allied Health Professions within five (5) working days. The Dean of the College of Allied Health Professions shall review the case with the student, Chairperson of the PA program and the course instructor(s) and a decision shall be made by the course instructor(s) to affirm or modify the grade. Within seven (7) working days the Dean shall notify the student in writing of the decision. A copy of the letter shall be sent to the appropriate course instructor(s) and Chairperson. The course instructor(s) has the sole responsibility to make the official grade change.

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:

Contact the Clinical Education Coordinators, and notify them in writing of their concerns in reference to their clinical performance grade.

The Clinical Education Coordinators 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 Coordinators. The student will be notified in writing by the Clinical Education Coordinators of the outcome. If the student does not agree with the outcome of the investigation, he/she may appeal this decision to the Department Chair. If the student does not agree with the Department Chair’s decision, the student has the right to appeal to the Dean of the College of Allied Health Professions.

Communications

Lockers: To improve the communication network and to foster student-staff and student-student interchanges, lockers are located in the Health Sciences Center Student Commons. 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 the U.S. Postal Service or through telephone communication.

a. Each student will be assigned one locker.
b. During any portion of the program for which the student is present in the Physicians Assistant Program on a daily basis, i.e., lecture series, he/she should check his locker daily.
c. During Phase I of the program, each student should check his/her locker daily.
d. During Phase II & III of the program, correspondence from the program will be mailed to the student.
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 to the student.

Telephone:
a. During the course of the program, it is frequently necessary for members of the program staff to contact students regarding scheduling and re-scheduling of classes, meetings, and other program
events, etc. Each class is responsible for developing a telephone communication network to include names and home phone numbers for each member of the class. This "chaining" is utilized to communicate last minute changes, announcements, etc. Each student is responsible for advising the program departmental secretary of telephone number changes as soon as they occur.

b. Use of the program telephones is allowed only in emergency situations or with special permission from the program faculty or staff; 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.

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
   1. Complete Physical Exam
   2. POP with a SOAP Note

b. Review the following videos:
   Universal Precautions
   Sterile Techniques

A second session may be scheduled if deficiencies are noted by the faculty.

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 exception. In rare instances a child will be permitted in the classroom for lecture if:

a. an immediate childcare emergency develops, and
b. the student calls the PA program before the child is brought onto campus, and
c. permission is obtained and granted by the instructor for the child’s presence in the classroom.

During the Pediatrics Course children will be invited to class to participate in the pediatric workshop. Any student deemed overusing this privilege, will have it revoked.

Student Academic Progress Committee

a. The Student Academic Progress Committee is comprised of department chairs and faculty members of the College of Allied Health Professions.

b. Each year, the Student Academic 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 Academic Progress Committee by the department chairs and faculty members.

c. After reviewing the student’s achievement and performance records, the Student Academic 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 Academic Progress Committee also has the responsibility of recommending to the faculty, as a whole, the awarding of the Master of Science degree upon satisfactory completion of all requirements for graduation as stated in the University Catalogue.

e. All recommendations of the Student Academic Progress Committee shall be in writing to the Dean of the College of Allied Health Professions, who will make the information available to the student.
### CURRICULUM ORGANIZATION

#### First Semester

<table>
<thead>
<tr>
<th>Course #</th>
<th>Title</th>
<th>Sem. Hours</th>
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<tbody>
<tr>
<td>PA5000</td>
<td>CPR</td>
<td>0.5 (Cr/NCr)</td>
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<tr>
<td>PA5005</td>
<td>Medical Terminology</td>
<td>1 (Cr/NCr)</td>
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<tr>
<td>PA5010</td>
<td>Structure &amp; Function I</td>
<td>5</td>
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<tr>
<td>PA5020</td>
<td>Clinical Skills I</td>
<td>3</td>
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<tr>
<td>PA5030</td>
<td>Physical Assessment I</td>
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<tr>
<td>PA5040</td>
<td>Health Promotion/Disease Prevention I</td>
<td>3</td>
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<tr>
<td>PA5050</td>
<td>Introduction to Adult Medicine &amp; Pathophysiology I</td>
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<td>PA5060</td>
<td>Pharmacology and Therapeutics I</td>
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<tr>
<td>PA5070</td>
<td>Psychosocial Dynamics</td>
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#### Second Semester

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<tr>
<td>PA5011</td>
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<td>Introduction to Adult Medicine &amp; Pathophysiology II</td>
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#### Third Semester

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<tr>
<td>PA5100</td>
<td>Pediatrics</td>
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<tr>
<td>PA5110</td>
<td>OB/GYN</td>
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<td>PA5120</td>
<td>Geriatrics</td>
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<tr>
<td>PA5130</td>
<td>Emergency Medicine</td>
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<tr>
<td>PA5140</td>
<td>Professional Roles &amp; Responsibilities</td>
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<tr>
<td>PA5160</td>
<td>Health Care Delivery System</td>
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### PHASE II

#### Fourth Semester

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<th>Title</th>
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<tr>
<td>PA6020</td>
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<td>Clinical Rotations I (4)</td>
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<td>PA6970</td>
<td>Applied Clinical Project I</td>
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#### Fifth Semester

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<th>Title</th>
<th>Sem. Hours</th>
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<tbody>
<tr>
<td>PA6030</td>
<td>Senior Seminar II</td>
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<td>###</td>
<td>Clinical Rotations (4)</td>
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<tr>
<td>PA6980</td>
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<td><strong>Total</strong></td>
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**PHASE III**
Sixth Semester
Year II Students

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<th>Course #</th>
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<th>Sem. Hours</th>
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<tr>
<td>PA6040</td>
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<tr>
<td>PA7900</td>
<td>Advanced Clinical Preceptorship</td>
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<tr>
<td>PA6990</td>
<td>Applied Clinical Project III</td>
<td>7</td>
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<td>Total</td>
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<td>18</td>
</tr>
</tbody>
</table>

**COURSE DESCRIPTIONS**

**PA 5000 Cardiopulmonary Resuscitation (0.5 credit hour, Cr/NCr)**
This course is taught in accordance with the American Heart Association (AHA) guidelines. Students will gain a basic knowledge of the resuscitation process and the required techniques. Upon successful completion, the student will receive a certificate of completion from the AHA.

**PA 5005 Medical Terminology (1 credit hour, Cr/NCr)**
This course is taught in accordance with the American Heart Association (AHA) guidelines. Students will gain the knowledge and skills, beyond basic life support, of advanced cardiac resuscitation. Upon successful completion, the student will receive a certificate of completion from the AHA.

**PA 5010 Structure and Function I (5 credit hours)**
An integration of sciences: anatomy, physiology, and biochemistry as they contribute to the understanding of clinical medicine. This course is correlated to the Introduction to Adult Medicine course.

**PA 5011 Structure and Function II (5 credit hours)**
Continuation of PA 5010.

**PA 5020 Clinical Medical Skills I (3 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 (4 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 (4 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 (3 credit hours)**
Continuation of PA 5040.
PA 5050 Introduction to Adult Medicine and Pathophysiology I (5 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 and Pathophysiology (5 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 (3 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 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 (3 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 (3 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.

HPE 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.

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 (3 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, that 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 (7 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 I (3 credit hours)
A clinical rotation that provides students with experience in a primary health care setting and will focus on medical problems most commonly encountered by a family practitioner and certified physician assistant.

PA 7020 Family Practice II (3 credit hours)
This rotation is an extension of the Family Practice I experience and will permit students to extend their experiences in primary health care. Students may elect to return to the site of their initial family practice rotation or select a second type of primary care experience including such opportunities as migrant, or Indian Health Service activities.

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/out patient setting. The student will participate in the direct care of patients including initial interview, physical examination, hospital rounds, clinical conferences and management decision sessions.

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.
PA 7050 Urgent Care (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 non-life-threatening illness and injury as well as triage and assess true emergent cases.

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.

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.

PA 7080 General Surgery I (3 credit hours)

Students are involved in the direct care of patients undergoing surgery including both pre-surgical evaluation and post-surgical maintenance. Students may select either in-patient or out-patient surgical settings.

PA 7090 Public Health (3 credit hours)

This rotation provides the students with an insight into epidemiology and how various public health agencies play a significant role in health promotion and disease prevention.

PA 7110 Community Medicine Service (3 credit hours)

This rotation provides experience in community health. It exposes students to common problems seen in family medicine as well as conditions seen in public health. This allows the student to understand how community clinics play a significant role in health promotion and disease prevention.

PA 7120 Neurology (3 credit hours)

This rotation provides the student with the opportunity to learn initial diagnosis, differential diagnosis, work-up and follow-up of inpatients with new or complicating neurological problems.

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. Repeatable for a maximum of 6 credit hours. Repeating the same decimal subdivision is not permitted, except for PA7500.99.

PA 7500.01 Orthopedics
PA 7500.02 Oncology
PA 7500.03 Family Practice III
PA 7500.04 Infectious Disease
PA 7500.05 Cardiology
PA 7500.06 Cardiothoracic Surgery
PA 7500.07 Geriatrics
PA 7500.08 General Surgery II
PA 7500.09 Rheumatology
PA 7500.10 Endocrinology
PA 7500.11 Dermatology
PA 7500.12 Occupational Medicine
PA 7500.13 Trauma Surgery
PA 7500.14 Psychiatry
PA 7500.15 Otolaryngology
PA 7500.90 Directed Research/Independent Study
PA 7500.99 Other
PA 7900 Advanced Clinical Preceptorship (9 credit hours)
Advanced Clinical Preceptorships prepare the second year PA student for the transition from student to primary care practitioner. This course is three months in length and provides the student with valuable patient management data while also emphasizing continuity of care.

HONORS AND AWARDS
The following are presented on Honors Day:

Dean's Award
PA Class President Award
PA Class Morale Award
PA Class Award
Joseph and Dorothy Gendron Journalism Award
Western University PA Service Award
The President's Society Award
Linda Fox Memorial Endowment Fund Award
Guy M. Allmon Scholarship Fund Award

The following are presented at graduation:

Dean's Award
PA Class President Award
PA Class Morale Award
PA Class Award
Western University PA Service Award
Blake Award of Academic Excellence
Martha Medina Memorial Award
The Bertha Oliver Memorial Award
Andrea J. Reina Memorial Award
ACADEMIC CALENDAR
2000-2001
PA PROGRAM

Aug. 6-9, 2001
Orientation/Registration

Wednesday, Aug. 8, 2001
Fall Semester Tuition Due (1st years)

Saturday, August 11, 2001
Convocation/White Coat Ceremony

Monday, August 13, 2001
Classes begin (1st year)

Monday, Aug. 27, 2001
Fall Semester Tuition due (2nd years)

Saturday, September 1, 2001
Rotations begin (2nd year)

Monday, September 3, 2001
Labor Day - No Class

Monday, October 8, 2001
Columbus Day - No Class

October 18-21, 2001
CAPA Convention - No Classes

Wednesday, November 21, 2001
Thanksgiving recess - Noon

Monday, November 26, 2001
Classes Resume

Friday, December 14, 2001
Last Day of Lectures for Fall Semester

December 17-21, 2001
Finals Week

Monday, December 24, 2001
Winter Recess

2002

Monday, January 7, 2002
Classes Resume

Thursday, Jan. 17, 2002
Spring Semester Tuition Due (1st years)

Monday, January 21, 2002
Martin Luther King Day - No Classes

Thursday, Feb. 14, 2002
Spring Semester Tuition due (2nd years)

Monday, February 18, 2002
President's Day - No Classes

Monday, March 18, 2002
Spring Break Begins

Monday, March 25, 2002
Classes Resume

Monday, April 8, 2002
Honor's Day

Friday, May 10, 2002
Last Day of Lecture for Spring Semester

May 13-17, 2002
Spring Semester Finals

Friday, May 31, 2002
Graduation

Monday, June 3, 2002
First Day of the Summer Session

Thursday, July 4 - Friday, July 5, 2002
Independence Day - No Classes

Friday, August 2, 2001
Last Day of Summer Semester
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-malfience, 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.
COLLEGE OF ALLIED HEALTH PROFESSIONS

Master of Science in Health Sciences – Licensed Physician Assistant Track

About the Master of Science in Health Sciences -Licensed Physician Assistant Track (MSHS-LPAT)

The curriculum for the on-line Master of Science in Health Sciences Licensed Physician Assistant Track is an innovative program designed for working Physician Assistants with Baccalaureate degrees who wish to obtain a Masters degree. Course work is designed to be multi-disciplinary in approach. Delivering the coursework on-line takes into consideration the busy lives of everyday working Physician Assistants.

Facilities and personnel of the College of Allied Health Professions are accessible for technical support and consultation throughout the program. The faculty includes Physician Assistants, scholars, researchers, and administrators from a variety of backgrounds. All are committed to the multi-disciplinary approach in teaching in the health professions.

GOALS OF THE MSHS-LPAT PROGRAM

In fulfillment of the mission of the College of Allied Health Professions, the MSHS-LPAT program's goals are to:

1. Educate health care professionals who function as physician assistants in health care settings.
2. Create advanced educational opportunities for physician assistants.
3. Enhance continuing professional education in health care.
4. Provide an educational service to the physician assistant community.

Objectives of the Program

1. Relate classroom and clinical instructional methodologies to a variety of health care settings.
2. Develop scholarly activities that will increase knowledge in physician assistant practice.
3. Provide an opportunity to complete a comprehensive summative examination demonstrating core knowledge of physician assistant studies.
4. Enhance research opportunities for MSHS-LPAT candidates.

ADMISSIONS POLICIES AND PROCEDURES

Admission to the Master of Sciences in Health Science - Licensed Physician Assistant Track (MSHS-LPAT) is through the Department of Physician Assistant Education. Students may apply for either the fall or spring semesters. Western University is committed to admitting competitive, qualified individuals with disabilities.

Application Requirements

Applicants must submit the following:

1. proof of Interim PA licensure or
2. copy of state PA Licensure and
3. copy of NCCPA card
4. proof of Baccalaureate Degree from an accredited institution
5. transcripts of all undergraduate course work.
6. completed application form and $35 non-refundable application fee

Candidates must meet the following academic requirements:
1. A bachelor's degree from an accredited institution.
2. A 2.5 GPA or above for undergraduate work; 3.0 for graduate work.
**Application Procedures and Deadlines**

Students may submit application materials on-line. Students are advised to submit application materials on-line as early as possible prior to the semester in which they wish to begin their program of studies. Deadline for receipt of application materials is no later than 30 days prior to the first day of classes for each semester.

To request an informational brochure and/or an application, contact the admissions office at:

Office of Admissions
Western University of Health Sciences
309 E. Second Street/College Plaza
Pomona, CA 91766
(909) 469-5336

or on the Internet at http://www.westernu.edu.

In addition to submitting an application, the applicant must submit a nonrefundable application fee of $35, and official transcripts from all undergraduate and graduate institutions attended.

**Transfer of Credits**

The maximum number of graduate units that may be transferred from another institution offering programs of graduate studies is nine semester units. Only graduate credit relevant to the MSHS-LPAT Program at Western University completed within the last five years may be applied toward completion of the master's 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 of B or above in the course. An official transcript and a course description should be submitted to the Chair of the PA Department. The PA faculty will determine whether or not work undertaken at other institutions qualifies for transfer. No transfer credit will be given HSCI 5999.

**Re-Admission**

Graduate students 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 program requirements in place at the time of readmission.

**Registration Policies and Procedures**

Prior to each semester, a class schedule is compiled and made available to students. All candidates for the MSHS-LPAT degree are required to pre-register on-line. Advisement is available in order to promote greater efficiency in the registration and enrollment process. Enrollment occurs during the weeks prior to the first class meetings, on an appointment basis. Enrollment is available biannually, during the Fall and Spring semesters. Students may register at the initial class on-line, but could be denied admission to a specific class due to on-line availability. An individual must enroll for a minimum of six (6) semester hours of credit for each semester in which they wish to be identified as students.

**New Graduate Students**

New graduate students are notified on-line of their admission status. This notification will include a list of courses available during the next semester and the necessary registration materials. Completed registration materials and fees may be submitted through the mail, or in person, prior to the first week of classes.

**Continuing Graduate Students**

Continuing students will receive registration information and materials on-line prior to the beginning of the semester. Should this information not arrive for any reason, it is the student's responsibility to contact the office of Student Affairs for the appropriate materials. Completed registration materials and fees may be submitted to the Registrar on-line, through the mail, or in person, prior to the first week of classes.
Late Registration
Students must follow the registration procedures and timelines printed in the Class Schedule provided at the beginning of each regular semester. The date of registration and late registration are listed. Appropriate fees for late registration will be assessed.

Add/Drop and Withdrawal from Courses
In order to add or drop a class, the student must obtain a Change of Registration form on-line, complete and submit it prior to the end of the third week of classes of each semester. Withdrawal from a course (not the program) requires completion and submission of the appropriate withdrawal form. Please note that this will not result in an "incomplete" (I) grade.

ACADEMIC REQUIREMENTS

Course Load
The program is designed to be completed in two academic years.
A graduate student at Western University of Health Sciences must enroll in at least six 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 master's degree.

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 16 semester hours during the calendar 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. A letter specifying terms of the continued enrollment will be sent on-line to the student.

Student Rights and Responsibilities
It is the responsibility of the student to be familiar with the contents of the catalogue 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 MSHS-LPAT Program.
A student may opt to complete the program of study and degree requirements described in the catalogue at the time of his or her graduation, provided all revised policies of the later catalogue are followed. Students are required to keep the Registrar informed of their current address and telephone number. Forms for this purpose are available in the Student Affairs Office.

Grading System
Official grades are turned in to the Chair of the Department of Physician Assistant Education from the course instructors. Official grade reports are then prepared by the Registrar and mailed to the student. Western University of Health Sciences makes use of letter grades, which may include a plus/minus (+ / -) system of grading. A four-valued letter grade scale will be given, indicating:

<table>
<thead>
<tr>
<th>Grade</th>
<th>Quality</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>Excellent</td>
<td>4</td>
</tr>
<tr>
<td>B</td>
<td>Good</td>
<td>3</td>
</tr>
<tr>
<td>C</td>
<td>Satisfactory</td>
<td>2</td>
</tr>
<tr>
<td>U</td>
<td>Unsatisfactory</td>
<td>0</td>
</tr>
<tr>
<td>I</td>
<td>Incomplete</td>
<td>0</td>
</tr>
<tr>
<td>Au</td>
<td>Audit</td>
<td>0</td>
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<tr>
<td>W</td>
<td>Withdrawal</td>
<td>0</td>
</tr>
<tr>
<td>Cr</td>
<td>Credit</td>
<td>0</td>
</tr>
<tr>
<td>NCr</td>
<td>Non-credit</td>
<td>0</td>
</tr>
</tbody>
</table>
Courses are rated at one semester hour for each 12 contact hours. 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.

No 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 an Unsatisfactory grade.

**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 academic semester. Should extenuating circumstances arise, the student may petition for a one-semester extension to complete the course work. Arrangements for the Incomplete and its removal must be approved by the instructor prior to the end of the semester in which the original Incomplete grade was assigned. Grade changes must be certified by the instructor prior to the end of the semester following the original grade assignment.

**Academic Standing**

An overall grade point average of 3.0 (B) must be maintained during graduate work undertaken at Western University of Health Sciences in order to qualify for advancement to candidacy. A 2.0 (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 3.0 (B) overall grade point average. Any grade below a 2.0 (C) may not be applied toward graduation. Any student whose grade point average falls below a 3.0 (B) average will be placed on probation.

**Graduation Requirements**

A 33-unit requirement exists for the award of the Master of Science-Licensed Physician Assistant Track. A total of 18 credit hours of Core Requirements are required of all MSHS-LPAT candidates. Students need to select at least 15 credit hours of Selectives and are responsible for finding their Clinical Residency requirement. The student will also be required to complete one of the following: 1) thesis, or 2) special project.

<table>
<thead>
<tr>
<th>Core Master of Science</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>HPE 5106 Research Methods I</td>
<td>2 credit hours</td>
</tr>
<tr>
<td>HPE 5206 Research Methods II</td>
<td>3 credit hours</td>
</tr>
<tr>
<td>HSCI 5016 Success Strategies for Distance Learning</td>
<td>1 credit hour</td>
</tr>
<tr>
<td>HSCI 5999 Thesis/Special Project</td>
<td>5 credit hours</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>11 credit hours</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Core Health Science</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>PA 5071 Advanced Studies in Special Populations I</td>
<td>3 credit hours</td>
</tr>
<tr>
<td>PA 5072 Advanced Studies in Special Populations II</td>
<td>3 credit hours</td>
</tr>
<tr>
<td>PA 5160 Health Care Delivery Systems</td>
<td>3 credit hours</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>9 credit hours</strong></td>
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</tbody>
</table>

<table>
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<tr>
<th>Core Physician Assistant</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>HSCI 5000 Pathophysiology</td>
<td>3 credit hours</td>
</tr>
<tr>
<td>HSCI 5012 Pharmacotherapeutics</td>
<td>3 credit hours</td>
</tr>
<tr>
<td>HSCI 5014 Community Health Education</td>
<td>3 credit hours</td>
</tr>
<tr>
<td>HSCI 5018 Practicum in Community Health Education</td>
<td>3 credit hours</td>
</tr>
<tr>
<td>HSCI 5010 PA Assessment</td>
<td>1 credit hour</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>13 credit hours</strong></td>
</tr>
</tbody>
</table>

**Grand Total** | **33 credit hours**
Language Requirements

No foreign language class work or test of proficiency is required of candidates for the MSHS-LPAT degree.

Time Limits

All requirements for the MSHS-LPAT must be fulfilled within five years from the date of initial registration. Extensions of this time limit may be granted through petition to the faculty.

Advancement to Candidacy

At least one semester prior to when the student plans to complete the unit requirements, he or she must file an "Application for Advancement to Candidacy" form. The Master of Science in Health Sciences – Licensed PA Track Degree is awarded following satisfactory completion of all coursework, including thesis/special project. Names of candidates for graduation are presented to the Student Academic Progress Committee, the Dean of Allied Health Professions, and to the Western University of Health Sciences faculty for approval.

The Master of Science-Licensed Physician Assistant Track degree is awarded following satisfactory completion of all course work. The student will also be required to complete one of the following: 1) thesis, or 2) special project. Prior to graduation, the student must complete the Master of Science-Licensed Physician Assistant Track "Application for Advancement to Candidacy" form. Names of candidates for graduation are presented to the Student Academic Progress Committee, the Dean of Allied Health Professions, and to the University Board of Trustees for approval.

All students who have completed graduation requirements must attend, in person, and participate in the Commencement program at which time the degree is conferred. The President may approve exemptions to this last requirement.

Summary

A student will be recommended for the degree of Master of Science-Licensed Physician Assistant Track provided he or she:

1. Has satisfactorily completed the 33-unit course requirement in the MSHS-LPAT curriculum.
2. Has completed one of the following: 1) thesis, or 2) special project.
3. Is not on probation and has completed all prescribed academic requirements.
4. Has complied with all the legal and financial requirements of the University as stated in the University catalogue;
5. Has demonstrated no serious deficiencies in ethical, professional, or personal conduct, as defined previously,
6. Attends in person and participates in the Commencement program at which time the degree is awarded, unless special permission has been granted by the President of the University. If the President grants special permission to be excused from graduation, the graduate may be required to present himself or herself to the appropriate Dean at a later date in order to take the required oath (if relevant) to receive his or her diploma.
TUITION AND FEES

Schedule of Fees

$225  Unit cost per semester hour (33 semester hours minimum for MSHS-LPAT degree)

Other Fees and Expenses

$35.  Application Fee  
$50.  Continuous Registration Fee  
$30.  (per day) Late Registration Fee  
$10  Lost ID Badge  
$5.  (each) Copy of Official Transcript  
$0.25   (per page) Copy of Student File Material

Tuition and fees are subject to change without notice upon approval by the Board of Trustees. All fees are mandatory for each student and are non-refundable. Obligation for payment in-full of tuition and fees is due upon matriculation. The MSHS-LPAT Program can offer a schedule of divided payments for students demonstrating financial need (for more information see the Bursar).

COURSE DESCRIPTIONS

The Master of Science-Licensed Physician Assistant Track is designed to be completed in one to two academic years. The curriculum is designed to be multi-disciplinary in approach. This program has been designed to accommodate the needs of the everyday working PA. The courses below comprise the Master of Science-Licensed Physician Assistant Track curriculum offered by the Western University of Health Sciences.

Core Master of Science in Health Sciences Requirements

HSCI 5016  Success Strategies for Distance Learning (1 credit hour)
This course provides new students with a comprehensive introduction to Western University's distance learning program for Physician Assistants. Following an overview of the most important services, policies, instructional methods, and resources, the student will have an opportunity to assess their own readiness for the program. Knowledge and skills derived will help ensure successful completion of the program.

HPE 5106  Research Methods I (2 credit hours)
This introductory course is designed to prepare the health professions student to understand principles for the analysis and interpretation of quantitative data in health professions education research. It will include measurement theory, the graphical presentation of data, probability theory, and the use of descriptive and inferential statistics in the interpretation of data. As a result, the student will be able to read original research reports in a more critical manner.

HPE 5206  Research Methods II (3 credit hours)
The purpose of this course is to introduce student 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.

HSCI 5999  Thesis/Special Project (5 credit hours)
Students are required to write a thesis or special project.
Core Health Science Courses

PA 5071 Advanced Studies in Special Populations I (3 credit hours)
This course surveys issues confronted by healthcare providers while treating and evaluating patients with existing disabilities. Topics include the history of disabilities in the health professions, ethics, communication, language, accessibility, and the responsibilities of healthcare providers under the Americans with Disabilities Act.

PA 5072 Advanced Studies in Special Populations II (3 credit hours)
This second exploration of Special Populations builds on themes and concepts presented in PA 5071.

PA 5160 Health Care Delivery Systems (3 credit hours)
This course introduces students to current models of health care delivery utilized in the American health care system. It will also explore the current role of a PA within the system and how it is evolving.

Core Physician Assistant Courses

HSCI 5000 Pathophysiology (3 credit hours)
This course integrates basic knowledge of human anatomy and physiology with pathological changes in various body systems to facilitate the diagnosis and treatment of common, acute, chronic, and complex health problems. The differential impact of these health problems and their treatment on patients throughout the life cycle (e.g., pediatric, adult/family, obstetric, geriatric) will also be discussed.

HSCI 5010 PA Assessment (1 credit hour)
The PA Assessment course provides prospective masters students with a means of validating their current knowledge of Physician Assistant practices. This comprehensive course, which is based on concepts assessed through the Physician Assistant National Certification Exam or PANCE, may be completed entirely through independent study, using materials provided over the world wide web.

HSCI 5012 Pharmacotherapeutics (3 credit hours)
This course presents advanced pharmaceutical principles and practices that will facilitate the PA’s ability to prescribe and monitor the effects of medications on patients with common, acute, chronic, and complex health problems.

HSCI 5014 Introduction to Community Health Education (3 credit hours)
This course provides an overview of the development and implementation of patient education programs in the community and in acute, long-term clinical settings. Models for preparing health education programs will be presented, including design considerations, appropriate for age, ethnic, cultural, and socioeconomic differences. Assessment of need, developing objectives, designing learning activities, implementation, and evaluation are emphasized. Practical application will include the design and implementation of one unit of instruction based on a health education subject.

HSCI 5018 Practicum in Community Health Education (3 credit hours)
This course provides students working in the community with an opportunity to demonstrate their application of community health education principles in the practice setting. The student will be expected to design a community health project to improve healthcare outcomes.
## ACADEMIC CALENDAR 2001-2002

### Fall Semester
- **Sept. 4 - 14, 2001**
  - Registration
- **Wednesday, Sept. 5, 2001**
  - Fall Semester Tuition Due
- **Monday, Sept. 10, 2001**
  - Classes begin
- **Friday, Sept. 21, 2001**
  - Last day to add/drop class
- **Monday, Oct. 8, 2001**
  - Columbus Day (no class)
- **Friday, Nov. 16, 2001**
  - Application Deadline for Spring 2002
- **Wednesday, Nov. 21, 2001**
  - Thanksgiving recess (noon)
- **Monday, Nov. 26, 2001**
  - Classes resume
- **Friday, Dec. 21, 2001**
  - Last day of classes
  - Last Day to file for Advancement to Candidacy

### Spring Semester
- **Jan. 3-11, 2002**
  - Registration
- **Monday, Jan. 7, 2002**
  - Classes begin
- **Monday, Jan. 21, 2002**
  - Martin Luther King, Jr. holiday (no class)

### Summer Semester
- **Monday, May 27, 2002**
  - Memorial Day (no classes)
- **May 28-31, 2002**
  - Registration
- **Thursday, July 4, 2002**
  - Independence Day (no classes)
- **Monday, July 8, 2002**
  - Classes resume
  - Last day to add/drop class
- **Friday, August 2, 2002**
  - Last day of classes
COLLEGE OF GRADUATE NURSING

Master of Science in Nursing/Family Nurse Practitioner Program
Post-Masters Family Nurse Practitioner Track
Advanced Practice Nurse to Family Nurse Practitioner Track
Master of Science in Nursing Track

MISSION
The Western University College of Graduate Nursing (CGN) has established a community for learning that offers bachelor-prepared nurses an opportunity to expand their education through a web-based Master of Science in Nursing and Family Nurse Practitioner certificate program in preparation for providing primary health care for their community. The CGN faculty members foster excellence, creativity, innovation, self-reflection, personal and professional accountability, collaboration, cultural sensitivity, a passion for caring, leadership, and lifelong scholarship through a mentoring relationship with students.

In accordance with the mission of Western University of Health Sciences, the faculty endeavor to:
- improve the health of the community through the preparation of professional advanced practice nurses with expertise for effective provision of family-centered care for primary health care needs of a rapidly changing society; and,
- develop each student’s potential, reflect democratic values and ethical principles through role modeling, sharing of knowledge, caring, and advocating mutual respect.

PHILOSOPHY
The College of Graduate Nursing is distinguished by the faculty’s beliefs about nursing, persons, environment, health and nursing education:

**Nursing**, as a professional discipline, is an art and a humanistic science of caring. The art of nursing is in its understanding of the meaning of a holistic health-illness experience and the perception of the moral and ethical significance of care, as well as the integration of technical skill with relevant theory. The art of nursing employs critical thinking and respect; it fosters open and effective oral and written communication with clients and colleagues. The humanistic science of nursing is the generation and application of the body of theoretical nursing knowledge, behavioral and natural science, the humanities, and the arts, employed in a caring, respectful manner.

The professional practice of nursing is the directing of knowledge, competencies and processes toward assisting persons to achieve quality of life, health, well-being, or peaceful death. Advanced practice nursing competencies are complex psychomotor and interpersonal skills, leadership, collaboration, self-evaluation, and scientific application and inquiry that are guided by professional standards. Processes include critical thinking, accountability, problem solving, decision-making, caring, advocacy, and involvement. Knowledge for Advanced Practice Nursing is built upon the foundation acquired in a Bachelor of Science in Nursing and its related arts and sciences, as well as information gained from prior nursing experience. Expertise for Advanced Practice focuses on socio-cultural, ethical, economic and political issues, advanced technology, theory, research, and advanced physical and psychological sciences. Evidence-based professional nursing practice demands recognition that each individual has unique needs that can be assessed and incorporated into a research-based nursing plan.

**Persons** who participate in family-centered nursing care are individuals with unique lifestyles, knowledge, beliefs and values, needs, and goals and are able to make autonomous decisions. These clients of nursing involve complex biological, behavioral, emotional, sociocultural, philosophical and spiritual dimensions and interact dynamically with their environment. Clients interact through relationships with families, in various forms, and communities. Persons have a right and responsibility to participate collaboratively with nurses and other health professionals in decisions and shared accountability for outcomes.
Environment is both the internal and external contexts of the individual. Environment involves reciprocal multidimensional and dynamic forces that affect the person’s health and well being.

Health is a multidimensional, adaptive state of being reflecting internal and external environmental and developmental influences. Health is a relative condition, characterized by wellness, illness, disease, or dysfunction. Health may be a reflection of individual perceptions of balance and harmony.

Nursing Education is a process that provides opportunities to expand and extend knowledge for continued growth and competency of the individual and the profession. It draws on multiple disciplines and involves organized learning experiences that augment previous knowledge and skills in preparation for professional nursing practice. Nursing education is a flexible process that fosters creativity and independent and critical thinking. We value self-directed learners, continual learning, and active engagement in a teaching/learning partnership. The educational process supports personal, social and intellectual development while assisting students to attain academic and professional goals. Through the provision of meaningful learning experiences, nursing education seeks to assist the learner to formulate and structure nursing knowledge, while distinguishing relevant from non-relevant information and developing safe and effective nursing practice. The educational program seeks to evoke honesty, excitement of discovery, encourage self-expression and serve as a catalyst for lifelong learning.

Teachers and learners in the learning community engage in interactive processes that enhance the potential and respect of each person. Teachers act as facilitators, and through their expertise and skill, are role models for student professional practice. The faculty as a whole focuses on the provision and organization of the curriculum and provides a milieu that encourages questioning, growth and mutual evaluation.

The CGN faculty believes that students are active, self-directed, adult learners who are committed to safe and effective professional practice and rigorous courses of study. Students are accountable for integrity of academic accomplishments, professional practice and self-assessment. Students bring unique backgrounds and have individual goals that create differing responses to the learning process. Learning is a personal responsibility.

ACCREDITATION
The Western Association of Colleges and Universities accredits Western University of Health Sciences. In addition, the programs of the College of Graduate Nursing are Board of Registered Nursing approved and designed to comply with national accrediting and approval agencies. Graduates are eligible to apply for state certification and to sit for the appropriate national certification examinations. The College of Graduate Nursing has completed the process for national professional accreditation through the Commission on Collegiate Nursing Education (CCNE) and anticipates approval in Fall 2001.

OUTCOME COMPETENCIES FOR GRADUATES
Graduate education for Advanced Practice Nursing is based on undergraduate nursing knowledge and experience. The CGN places emphasis on critical thinking, clinical competence, communication, decision-making, accountability, writing, and technological competence.

The course of study, including specifically stated learning activities, is a series of sequential courses designed to assist learners in attaining the following behaviors prior to being approved for program completion.

Graduates of the Western University of Health Sciences College of Graduate Nursing, as candidates for state and national certification will:
1. Critically analyze literature for the purpose of evidence-based advanced nursing practice, education, and lifelong scholarship.
2. Participate in the development of new nursing knowledge through the application and development of theory and research.
3. Apply knowledge from the humanities and physical, social, psychological, nursing, medical, and pharmacological sciences to decision-making in order to provide and evaluate accountable primary health care which is commensurate with professional and legal parameters of the role of Family Nurse Practitioner.
4. Provide individualized client and family-centered health care that demonstrates recognition of reciprocal environmental interaction and diversity of socio-cultural values and beliefs among members of a rapidly changing society.
5. Apply comprehension of changing national and local public policy related to health care standards, health care systems and financing when planning and providing health care for individuals, families, and communities.
6. Empower client collaboration and decision-making for desired health care outcomes and quality of life through advocacy, caring, and the application of critical thinking skills, theories of learning and communication, and ethical principles.
7. Integrate health promotion, illness prevention, and health maintenance strategies into holistic health care provided for diverse individuals, families, and communities.
8. Provide leadership through participation in professional and community development activities and advocacy of the advanced nursing practice role.
9. Demonstrate mastery of traditional and electronic access to information resources for research, study, and practice.

CURRICULUM

The College of Graduate Nursing currently offers two Post-Master’s Family Nurse Practitioner tracks, a Master of Science in Nursing track, and a combined Master of Science in Nursing/Family Nurse Practitioner program.

The Master of Science in Nursing/Family Nurse Practitioner Program (MSN/FNP) curriculum requires the completion of 50 semester units over a two- or three-year period. The Post-Masters Family Nurse Practitioner (FNP-only) Track curriculum requires 41 semester units for completion and can be completed in one year. Both of these tracks require the completion of 675 preceptored clinical hours.

The Advanced Practice Nurse to Family Nurse Practitioner (APN-FNP) track requires 20 semester units for completion and can be completed in one year. The APN-FNP track requires the completion of 180 clinical hours.

The Master of Science in Nursing track requires 25 semester units to be completed in a year. This degree track is designed for Advanced Practice Nurses. Graduates will be prepared to meet the criteria established by the California Board of Registered Nursing as advanced practice nurses. 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.

Instructional Design: Distance Learning

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.

12 Month Academic Year

The twelve month academic calendar begins in August and includes three 15-week semesters with two-week breaks between each semester.

Integrated Courses

For the clinical programs (MSN/FNP or FNP-only) 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 (courses).

Essential 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.

Web-based Learning

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 of the assigned readings. Students are expected to be on-line and engaged in learning activities from the first day of the first semester. The CGN Web site is 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.

Weekend Seminars
Each semester students are required to attend two intensive, two- to three-day weekends on campus. These classes provide valuable time for faculty and peer interaction, student presentations, lectures, clinical and didactic testing, skills laboratories, and selected clinical practice with faculty.

Culminating Experience
Master's degree education usually culminates with a required research or research-based project or thesis. The MSN/FNP program and MSN programs, however, require that each student complete a project that features the implementation of a clinical improvement project (one credit hour). Students enrolled in the MSN/FNP program must complete a minimum of 540 clinical hours prior to beginning their culminating project in enrolling and CGN 5608

Program Completion
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 3.0
• Completion of 675 clinical practice hours (MSN/FNP and FNP-only) or 180 hours for APN-FNP students. Students must satisfactorily demonstrate all clinical competencies.
• Completion of the culminating experience project (MSN/FNP and MSN students).
• Has complied with all the legal and financial requirements of the University as stated in the University Catalogue.
• Has demonstrated no serious deficiencies in ethical, professional or personal conduct as outlined in Standards of Professional Conduct
• Students enrolled in Post-Master's Tracks (APN-FNP or FNP-only) will be candidates for the FNP Certificate only

Unless the President of the University has granted special permission, all students must attend in person and participate in the Commencement program at which time the degree is conferred. If the President grants special permission to be excused from graduation, the graduate may be required to present himself or herself to the Provost Executive Vice President of Academic Affairs or appropriate Dean at a later date in order to receive his or her diploma.

ADMISSION POLICIES
Prerequisite Requirements for MSN/FNP Program*

• 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 overall in the last 60 semester units or 90 quarter units
• Pathophysiology
• Statistics
• Registered Nurse (RN) licensure in the state where preceptored clinical hours will be completed
• 1 year experience as a Registered Nurse (RN)

Prerequisite Requirements for Post-Masters Track (FNP-Only)*

• Master of Science in Nursing or related field
• BSN in Nursing** from a National League of Nursing (NLN) or Commission on Collegiate Nursing Education (CCNE) accredited program
• GPA of 3.0 overall in the last 60 semester units or 90 quarter units
• Pathophysiology
• Statistics
• Registered Nurse (RN) licensure in the state where preceptored clinical hours will be completed
• 1 year experience as a Registered Nurse (RN)
Prerequisite Requirements for MSN-only Track*

- BSN Degree in Nursing** from a National League of Nursing (NLN) or Commission on Collegiate Nursing Education (CCNE) accredited program
- Nurse Practitioner, FNP, PNP, Women's Health, Adult, GNP, CRNA, CNM, or CNS
- GPA 3.0 overall in the last 60 semester units or 90 quarter units
- Statistics
- Registered Nurse (RN) licensure in the state where preceptored clinical hours will be completed
- 1 year experience as a Registered Nurse (RN)

Prerequisite Requirements for Advanced Practice Nurse to Family Nurse Practitioner (APN-FNP) Track

- Master of Science in Nursing or related field
- BSN in Nursing** from a National League of Nursing (NLN) or Commission on Collegiate Nursing Education (CCNE) accredited program
- GPA of 3.0 overall in the last 60 semester units or 90 quarter units
- Pathophysiology
- Statistics
- Registered Nurse (RN) and/or Nurse Practitioner (NP) licensure in the state where preceptored clinical hours will be completed
- 1 year experience as a Registered Nurse (RN)
- Verification of Advance Practice Nurse Specialty

*Students who do not meet the requirements for admission may petition the Admissions Committee for special consideration.
** Bachelors in a related field will be reviewed on a case-by-case basis.

Requirements for Admissions (All Tracks)

- Completed Application
- Three Letters of Reference (faculty & employers within past two years)
- Resume
- Personal Statement which addresses your understanding of advanced practice nursing, personal career goals and how your background strengthens your aptitude to become an Advanced Practice Nurse
- Application Fee of $60
- Official transcripts from all colleges/universities attended
- All graduates must agree to sit for the national certification examination within six months of graduation
- Decisions of the Admissions Committee regarding the admission of applicants to its programs are final.

Computer Requirements

The following is a list of computer equipment necessary for the Web-based programs:

- PC System - Minimum 133 MHz Intel Pentium® processor or equivalent
- 100 MB of free hard disk space
- Minimum 32 MB RAM
- Modem - 56k or higher
- Newest version of Internet Explorer
- Windows 95 or higher
- New version of Microsoft Office Suite (Standard Suite or higher)
- New version of virus protection that supports weekly updates
- CD-ROM drive
- 16-bit sound card and speakers
- Internet service provider (flat rate recommended)
- Printer
- Real Player plug-in, G2 or better
• Dedicated telephone line (recommended)
• E-mail account (by registration)

**MSN-Harbor Track**

In conjunction with the Harbor-UCLA Research and Education Institute's Women's Health Care Nurse Practitioner Program, an accelerated Master of Science in Nursing degree is available for graduates and currently enrolled students of the Women's Health Care Nurse Practitioner Program. For more information, please contact the Western University College of Graduate Nursing. Students admitted to this track must complete at least 17 units of Western University coursework. Additional units may be required based upon assessment of transfer coursework.

**REGISTRATION**

Following completion of the admissions procedure and written documentation of acceptance into Western University's College of Graduate Nursing, an orientation packet will be mailed directly to the student. All students will complete registration at the campus-based orientation in Pomona. Registration will be completed via mail for continuing students and will be done annually prior to each academic year.

**Orientation and Pre-Program Independent Study**

All students enrolled in the College of Graduate Nursing will be required to complete two mandatory seminars on the Pomona campus. Orientation will include computer skill training (e-mail, e-mail attachments, address book use, file management, and Microsoft software use), an introduction to computer-based learning, and an overview of Western University curriculum. Students will complete registration, purchase medical equipment and orient to the services of the University at this time. Students will begin a Strategies for Success course, which is an example of Western University of Health Sciences' computer-based courses. Students enrolled in Advanced Physical Assessment will begin skills training.

Students who successfully complete the Advanced Physical Assessment course will be able to begin their clinical preceptored experience.

**Medical Information**

Verification of the following must be on file in the Office of the Registrar at the time of registration:

- Completion of Western University's History and Physical form
- Medical clearance for participation in program/clinical
- A recent (within past six months) PPD or Chest X-ray report indicating that the student is free of tuberculosis (all students). Students are required to submit documentation of PPD/Chest X-ray annually while enrolled at Western University.

In addition, student enrolled in clinical tracks must file:

- Verification of immunization or immunity for: Polio, MMR, Diphtheria/tetanus (within past 10 years) and completion of the Hepatitis B series
- Current CPR certification (and maintained throughout the program of study)

**Health Insurance**

All students must be covered by health insurance throughout the program. Proof of health insurance must be provided at the time of registration annually.

**TUITION AND FEES**

By action of the Board of Trustees, the tuition and fees for the 2001-2002 year are as follows:

- MSN/FNP Program 50 units @ $450/unit
- FNP-Only Track 41 units @ $450/unit
- APN-FNP Track 20 units @ $450/unit
- MSN-Only Track 25 units @ $400/unit
- MSN-Harbor Track 17 units (minimum) @ $400/unit
- Student Body Fee $40/year
Other Fees and Expenses

<table>
<thead>
<tr>
<th>Service</th>
<th>Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Application Fee</td>
<td>$60</td>
</tr>
<tr>
<td>Required Textbooks</td>
<td>$1500 (approximate)</td>
</tr>
<tr>
<td>Medical Equipment</td>
<td>$400 (approximate)</td>
</tr>
<tr>
<td>Computer with Modem</td>
<td>$1500 (approximate)</td>
</tr>
<tr>
<td>Lodging/Meals/Travel</td>
<td>varies, depending on distance and mode of travel.</td>
</tr>
<tr>
<td>Lost ID Badge</td>
<td>$10</td>
</tr>
</tbody>
</table>

Note: All tuition and fees are subject to change.

Library Services

Western University's library resources can be accessed on the Internet at: http://www.westernu.edu. Database access is available to distance students following registration. Nursing students will access the internet sites for some resources and perform database searches for class assignments or research projects. Full text articles are not always available via the World Wide Web, therefore, students are expected to utilize traditional library services for research assignments, whether in the student's community or near their home.

Required Supplies for Clinical

Physical Exam Equipment:
- Lab Coats (to be worn at all times)
- Name Tag (to be worn at all times)
- Ophthalmoscope
- Otoscope
- Pen Light
- Reflex Hammer (brush & pin set)
- Ruler (cm)
- Stethoscope
- Tuning Fork # 512
- Hand Held Snellen Chart

Bookstore

Textbooks, medical equipment and software are available through the University Bookstore. All items can be ordered by phone and mailed directly to your home using a credit card.

ACADEMIC POLICIES AND PROCEDURES

Academic/Clinical Advisement

Entering students are offered academic advisement both on-line and in person as they prefer. On-going students have the opportunity to make appointments to see the designated faculty advisor or individual instructors on-line, by appointment, or on any on-site Seminar Weekend. All students must meet with an advisor in the semester prior to their anticipated completion date for a final review of graduation requirements and approval to file for graduation. All students will be assigned a faculty advisor during the first semester.

Standards of Academic Performance

An overall grade point average of 3.0 is required for graduation. The curriculum is designed to assure that every graduate will demonstrate the desired level of performance for all Outcome Competencies (See section on Curriculum). In addition, graduates are expected to demonstrate critical thinking skills as well as excellence in written and oral communication.
Academic Progression

The College of Graduate Nursing offers a variety of academic tracks for flexibility of program completion. Part-time students will need to work with an academic advisor to complete a Plan for Program Completion. Therefore, it is expected that each student will enroll in and successfully complete every course in a sequential progression. An administrative fee will be charged for additional semesters that exceed the timeframe for the program/track and are needed to complete coursework.

A passing grade of a "B" is required for each theory course. Students who earn less than this passing grade and wish to continue in the program must remediate to progress in the program.

Minimum competency, as outlined in course syllabi for clinical courses, is required to achieve a passing grade of “Credit”. A grade of “No Credit” is the equivalent of a “U” grade for 7570 courses. A “U” denotes an unacceptable level of performance, and students are not able to progress in the program. (See Evaluation and Grading below)

Student Academic Progress Committee

The Student Academic Progress Committee is comprised of a minimum of two faculty members, the Dean, and is chaired by the Academic Coordinator. The committee chair will be responsible for communicating all recommendations of the committee in writing to the student and Dean.

The Student Academic Progress Committee shall periodically review the academic achievements and the performance of all students. Following review of a student's achievement and performance, the Student Academic Progress Committee Chair may recommend to the Dean any of the following courses of action for a student: promotion, probation, remediation, dismissal from the University, psychological and/or education assessment and other appropriate recommendations.

The Student Academic Progress Committee also has the responsibility of recommending to the faculty as a whole the awarding of the degree of Master of Science in Nursing to all students who satisfactorily complete all requirements for the Master of Science in Nursing/Family Nurse Practitioner Program or MSN-only Track. Students completing all requirements for the AFP-only or APN-FNP tracks will be eligible for state licensure as a Family Nurse Practitioner.

Evaluation and Grading

Competency-based learning is the underlying principle for the instructional design of the program and the evaluation of student achievement. Each course has specific learning objectives, evaluative criteria and expected outcomes. Assessment methods are stated clearly in each syllabus.

The cumulative letter grade of “B” or better must be attained for each course to indicate competency for this graduate program. The grade for each evaluative component for courses 5015, 5401-3, 5550, 5501-2, 5601-8, 5950, and 7570 must be at least a “B” or 80% to demonstrate an acceptable level of performance and enable the student to progress in the curriculum. The grade for each evaluative component for courses 5000, 5101-2, 5200, 5301-2, 5611, 5801-2, 5850, and 5990 must be at least a “C” or 70% to demonstrate an acceptable level of performance and enable the student to progress in the curriculum.

Grade point average is based on the following numerical values for letter grade:

<table>
<thead>
<tr>
<th>Grade</th>
<th>Value</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>4.0</td>
<td>Achievement of an “A” for a course exceeds the acceptable level of performance in a graduate level program.</td>
</tr>
<tr>
<td>B</td>
<td>3.0</td>
<td>Achievement of an “B” for a course meets the acceptable level of performance in a graduate level program.</td>
</tr>
<tr>
<td>C</td>
<td>2.0</td>
<td>Achievement of a “C” minimally meets the requirement for evaluative components within a course. Achievement of a “C” for a course grade does not meet the performance level for this graduate level program. (See section on Remediation).</td>
</tr>
<tr>
<td>U</td>
<td>0</td>
<td>Achievement of an “U” denotes an unacceptable performance. Students receiving a “U” grade are not able to progress in the program. 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 unable to progress in the curriculum without a formal review by the Student Academic Progress Committee. If the</td>
</tr>
</tbody>
</table>
Committee finds that the student demonstrates the potential for remediation, then the student will be placed on Academic Probation with a formal signed progression contract. A signed copy of this contract will be filed with the Dean. Probation is defined as a period of time specified by the Dean, Chair of the Student Academic Progress Committee and the faculty of record for the course(s). If a student does not comply with the remediation contract, the student will be dismissed from the College.

Credit/No Credit: CGN 5000 (Strategies for Success) and CGN 7570 (Primary Care Clinical) are graded as credit/no-credit and are not included in the numerical values for computing grade point averages.

Credit (Cr) = Achievement of the grade “Credit” signifies that a student meets the acceptable level of performance in a graduate level program.

No Credit (NCr)= Achievement of the grade “No Credit” indicates an unacceptable level of performance in a graduate level program. A grade of “No Credit” is the equivalent of an “U” grade.

I = 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 incompletes 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 until completion of course work is completed. If the student does not complete the contractual agreement satisfactorily, a grade of “U” will be given with recommendation for dismissal from the College of Graduate Nursing.

IP = Students who do not complete 90 hours of clinical (2 units) within a semester or 45 hours of clinical (1 unit) in the first semester will be assigned a grade of “In Progress”. A grade of “IP” is replaced with a grade of “Cr” when the necessary number of hours is achieved. Students must complete outstanding clinical hours and an additional 90 hours minimum in the following semester to progress in their clinical experience. Students who fail to meet the 90 hours minimum for two consecutive semesters will be placed on Academic Probation and are at risk for dismissal.

Remediation

Every effort will be made to provide each student with 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 active participation in the educational program as demonstrated by regular attendance at seminar sessions and clinical experience, individual initiative, and utilization of available resources.

Remediation options may include any of the following:

a. Taking a comprehensive exam
b. Completing special projects or studies in a deficient area
c. Repeating the course(s)
d. Repeating a specific learning objective

Eligible students who achieve a “U” or “No-Credit” may be given a Remediation Contract, which will outline the Remediation Plan and date for completion. This plan will be written by the Faculty Member of Record with input from the Student Academic Progress Committee and Dean. A signed copy of this contract for remediation will be filed with the Dean.
Upon completion of the student remediation contract, the instructor will submit a recommendation to the Student Academic Progress Committee and the Dean. Approval of both the Committee and the Dean is required for the student to continue. Successful completion will be recorded as a letter grade of “B” or “Cr” with removal of the “Unsatisfactory” on the official transcript for the course in the identified semester. A "B" is the highest letter grade that can be attained in a theory course upon successful remediation, or credit (“Cr”) for a non-theory course.

**Administrative Fee for Additional Term**

Students who do not complete coursework or clinical hours during the final semester will be charged an additional administrative fee for making up coursework or clinical hours after the semester. This option is only available with the approval of the Instructor of Record and the Dean.

**Leave of Absence/Withdrawal**

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. The Request for a Leave of Absence must be submitted in writing and approved by the Dean on the recommendation of the Student Academic Progress Committee. The student will need to obtain the endorsement of at least one instructor on the Leave of Absence form that the student has the potential for program completion. Leaves may be granted for the balance of an academic year and may be extended if the student seeks approval from the Dean at least one month prior to the start of the subsequent academic year.

**Probation/Dismissal**

A request for Student Probation or Dismissal may be initiated by an individual faculty member, the Student Academic Progress Committee, or the Dean, and submitted to the Chief Academic Officer. The grounds for such an action may be based on academic, character or professional issues. The basis for making the decision will be the University policy for student conduct as outlined in the 2001-2002 Catalog.

**Seminar Weekend Attendance**

Two campus-based seminar weekends are held each semester (after completing orientation sessions). The first seminar weekend usually occurs during week 5, and the second seminar weekend usually occurs during week 10 of the semester. Seminar weekends begin at 8 a.m. on Friday and conclude by 3 p.m. on Sunday.

Dates of the weekend seminars are published and distributed at the beginning of each semester. Attendance is mandatory for all seminars. Students who do not comply with this policy must make an appointment with the Dean immediately to avoid termination of their enrollment for the semester in question. Based on the recommendation from concerned faculty, the Dean will make a determination about a student’s continued enrollment. A student’s right to appeal this decision is described in the General Academic Policies and Procedures Section of this Catalog.

**Clinical Training**

Clinical training begins after the student has: (1) completed the Advanced Physical Assessment course, (2) successfully completed the Advanced Physical Assessment competency based physical assessment testing, and (3) complied with the documentation of all the University’s health, safety and immunization requirements.

**Preceptors:** Students are encouraged to identify a qualified preceptor in their community prior to starting the program. A student’s primary preceptor may be a physician trained in family practice or internal medicine, preferably board certified, or a master’s degree prepared, certified FNP working in primary care. The College encourages multiple rotations for specific experience if needed to optimize student learning. A student’s primary 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.

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 Western University faculty. 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. Western University maintains malpractice and accident insurance coverage for enrolled students. Professional nursing malpractice insurance (in the student role) is recommended but not required.

**Scheduling:** While the College encourages students to schedule the same clinical day(s) each week to provide consistency for the agency and patient follow-up, scheduled days may be individualized to accommodate illness, employment, or family responsibilities.

**Clinical Hours:** Eight-to-16 hours per week of clinical training are required of full-time students throughout the two academic years to complete 675 hours. Following successful completion of the Physical Assessment course, full-time students are expected to complete 3-5 units of clinical training each semester. Forty-five hours must be completed for each unit, for a total of 15 units. A student, by special arrangement with a faculty advisor, may complete a minimum of 90 clinical hours per semester (2 units) and complete the remaining hours in subsequent semesters or at the end of the program. This arrangement would require a student to enroll for another semester(s) to complete required clinical hours before being awarded a certificate of completion for the program. An administrative fee will be charged for the additional semester(s).

**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 beginner as they progress in the clinical practicum.

It is recommended that MSN/FNP and FNP-only students see approximately 810 patients during their program. The goal for patient mix is: Pediatrics 15%, Adults 40%, Geriatrics 20%, GYN 15%, 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 a semester. The clinical faculty of record will review students’ clinical e-logs each semester. Students are required to submit clinical e-logs periodically throughout the semester. In addition, Preceptor Evaluations are documented periodically.

**Record Keeping and Clinical e-Logs:** Students will record each patient seen in the Clinical e-Log. Clinical e-Logs for the College of Graduate Nursing are provided to the student. Students may print the e-Logs to use for manual recording in clinic, but must enter the data into the Clinical e-Logs before submitting to the College. Students will receive an orientation to e-Log use. E-Logs will be submitted biweekly via e-mail attachment to the clinical instructor of record, clinical coordinator and/or Dean upon request and at the end of each semester. 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.

Students will maintain a calendar of hours, which is included in their evaluation of short-term goals and initialed/verified by the preceptor.

**Clinical Site Visits:** Faculty visits to the clinical site are a major key to the success of this program. Student competency will be evaluated at this time by observing the student's interaction with patients, preceptors, and staff. In addition, the clinical faculty provides guidance and support as well as assistance with problem solving. Chart documentation is also reviewed and assessed. Students who receive an unsatisfactory site visit evaluation must complete a remediation process. **Note:** Students who live a great distance from the campus may be required to perform clinical competency evaluation, as needed, at a Western University faculty member’s clinic setting or at a Western University clinical training site. Efforts will be made to have these evaluations coincide with seminar weekends to minimize travel costs.
COURSE DESCRIPTIONS

CGN 5000 Strategies for Success in the FNP Program (1 unit, Cr/NCr)
This course provides new students with a comprehensive introduction to Western University's Nursing Programs. In addition to learning about Western University of Health Sciences, students will discover in more detail what will be expected of them as MSN/FNP students, and what they can expect from Western University's faculty and staff. Following an overview of the most important services, policies, instructional methods and resources, students will have an opportunity to assess your own readiness for the program and an ability to succeed as a self-directed learner. Students will also be oriented to the technological skills needed to complete their program. The awareness, knowledge and skills derived from this part of the course will help ensure successful completion of the program.

CGN 5015 Clinical Reasoning (1 unit)
This course is designed for advanced nurse practitioner students to refine their history and physical examination skills for the clinical setting. Its purpose is to take the students to the “next step” of health assessment – beyond the basic history and physical examination to using a diagnostic reasoning process. By integrating knowledge gained from this course with that learned in concurrent and subsequent courses, students will continue to refine their ability to diagnose common problems. Students will also learn how to evaluate and use assessment information with patients across the lifespan and with patients who present with sensitive issues. This systematic approach to clinical problem-solving will provide the undergirding structure to guide students as they tackle increasingly complex patient management problems.

CGN 5101 Health Systems I (2 units)
This course provides an overview of the American health care system with special emphasis given to the emergence of managed care and its subsequent impact on health care planning, delivery and evaluation. The various institutions and workforce segments that currently make up the American health care system are introduced and compared with those of other industrialized countries. The course includes an overview of health care economics, with particular attention given to the impact of health insurance (private and government funded) on health care spending in this country. Managed care is presented as a major emerging force in health care decision making and delivery. The impact of managed care reforms on the Family Nurse Practitioner role is emphasized.

CGN 5102 Health Systems II (2 units)
The second part of Health Systems introduces the need for and tools currently available to measure the quality of health care in this country. Special emphasis is given to identifying and measuring nursing-sensitive patient outcomes and how they are related to treatment options and resource use. The course also introduces case management and disease management as strategies for achieving desired patient outcomes through the coordination of care. Students will learn about the multitude of means by which quality of health care is currently assessed and measured in this country, including research based quality initiatives such as standardized clinical practice guidelines, benchmarking, and report cards.

CGN 5200 Nursing Theory (3 units)
This course explores the theoretical context of contemporary nursing practice that serves to guide nursing practice and primary health care. In addition, this course will integrate knowledge from the physical, biological and behavioral sciences to systematically and critically apply selected conceptual frameworks to the study of nursing, family systems and the response to illness. Through this experience, the graduate nursing student will develop an appreciation for the process of theory development in nursing, compare and contrast various theoretical perspectives used in nursing practice, and apply these nursing theories critically.

CGN 5301 Nursing Research I (2 units)
Nursing Research I is designed to lay the foundation for understanding the research process and its importance in advancing nursing practice. The course emphasizes research critique and application to
advanced practice nursing. Evaluation of quantitative and qualitative research literature, literature review skills, and decision-making related to clinical significance are explored.

CGN 5302 Nursing Research II (2 units)
Nursing Research II focuses on the design and implementation of a research study. Review of research methodology, research process, rights of subjects, grant writing and dissemination of findings are explored in this course.

CGN 5401 Primary Care Management I (2 units)
Primary Care Management I integrates the 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 elderly clients. This new understanding of pathophysiology and the student’s evolving clinical decision-making skills is applied to the interpretation of assessment data and the diagnosis and treatment of primary care clients and their families across the life cycle.

CGN 5402 Primary Care Management II (2 units)
Primary Care Management II 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 elderly 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.

CGN 5403 Primary Care Management III (2 units)
Primary Care Management III 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.

CGN 5501 Pharmacology I (2 units)
Pharmacology I provides the means for learning the necessary pharmaceutical principles and practices to enable students to prescribe and monitor the effects of medications on the health and well being of clients with common, acute, or infectious health problems. The course will address the effects of these problems and related pharmacotherapy on patients from the various stages of the life cycle, i.e., pediatrics, adult/family, obstetrics and geriatrics.

CGN 5502 Pharmacology II (2 units)
Pharmacology II provides the means for learning the necessary pharmaceutical principles and practices to enable students to prescribe and monitor the effects of medications on the health and well being of clients with chronic and complex health problems. The course will address the effects of these problems and related pharmacotherapy on patients from the various stages of the life cycle, i.e., pediatrics, adult/family, obstetrics and geriatrics.

CGN 5550 Advanced Pharmacology (3 units)
This course is designed to provide advanced practice nurses enrolled in the MSN-only and APN-to-FNP track students with an accelerated review of current pharmacotherapeutic concepts. The course will prepare students to prescribe and monitor the effects of medication on the health and well being of patients. The course qualifies the master’s-prepared FNP to receive a Furnishing Number in the State of California.

CGN 5601 Advanced Physical Assessment (2 units)
This FNP Role Development 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 more sophisticated assessment techniques, recognition and interpretation of clinical assessment data, diagnostic and therapeutic 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.

CGN 5602 Health Promotion Over the Life Span (1 unit)
This FNP Role Development course is designed to encourage the Family Nurse Practitioner student to apply preventive health concepts and health promotion strategies across the life span, using the U.S. Public Health Service guidelines as a resource. Students will learn how to apply health promotion lifestyle changes in the primary care patient population. Concepts such as health screening and immunization/prophylaxis in pediatric and adult clients will be examined. Methods of counseling clients in lifestyle behaviors such as nutrition, physical activity, smoking cessation, and violence prevention will also be explored.

CGN 5603 Current Social Issues Affecting Family Health (1 unit)
This FNP Role Development course focuses on the social 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 child abuse, domestic violence, substance abuse, adolescent pregnancy, and poverty; as well as geriatrics issues related to functional independence, polypharmacy, dementia, depression, and elder homelessness.

CGN 5604 Advanced Skills (1 unit)
In this FNP Role Development course, students will learn diagnostic and therapeutic procedures and skills critical to advanced practice nursing. These procedures and skills include microscopy, Norplant and IUD insertion and removal, endometrial biopsy, x-ray interpretation, colposcopy and cryotherapy, suturing, office orthopedic appliances and treatment techniques, and cardiovascular monitoring.

CGN 5605 Cultural Diversity (1 unit)
This FNP Role Development course explores the impact of patients’ cultural beliefs and values on medical practice and the health care provider. The course emphasizes the importance of cultural sensitivity and cultural competency in delivering high quality care. Culturally determined folk beliefs and health traditions are examined in the context of community health and family health care.

CGN 5606 Complementary Medicine (1 unit)
This FNP Role Development course focuses on the scientific basis for practices of alternative or complementary therapy utilized by health care consumers in this country. Among the complementary therapies students will consider are acupuncture, yoga, biofeedback, chiropractic, dietary supplements, exercise, herbs, homeopathy, hypnosis, imagery, massage, relaxation, meditation, spiritual healing and energy work.

CGN 5607 Professional Issues (1 unit)
This FNP Role Development 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 take students on a guided tour of some of the critical issues that determine the practitioner’s scope of practice, career options, and political involvement. In addition, the course presents guidelines for resolving legal and ethical issues that are often confronted by the NP. Finally, students will be introduced to some valuable tools for ongoing professional development such as professional organizations and journals.

CGN 5608 Advanced Applications in Family Nurse Practice (1 unit)
This culminating FNP Role Development course provides an opportunity for students to synthesize concepts, skills and techniques from previous courses and apply their learning toward assessing and managing advanced case studies across the life span.
CGN 5611 Advanced Studies in Social Systems (2 units)
This course is designed for nurse practitioners enrolled in the APN to FNP track. This course focuses on the diverse array of social issues and systems that the Nurse Practitioner must negotiate. The areas of focus in this course are: health care ethics; social issues such as management of domestic violence and substance abuse; cultural diversity skills; complementary and alternative therapeutics; and health promotion and disease prevention concepts across the lifespan.

CGN 5801 Collaborative Project I (0.5 unit)
Collaborative Projects are based on a problem or a project that requires a collective solution. Each Collaborative Project provides the opportunity for small groups of students to work together in a learning experience that integrates their current coursework, encourages the application of new concepts, and stimulates the kind of thinking and interaction that are relevant to students’ ongoing advanced practice role development.

CGN 5802 Collaborative Project II (0.5 unit)
As with Collaborative Project I, the second Collaborative Project is based on a problem or a project that requires a collective solution. The Collaborative Project provides the opportunity for small groups of students to work together in a learning experience that integrates current coursework, encourages the application of new concepts, and stimulates the kind of thinking and interaction that are relevant to students’ ongoing advanced practice role development.

CGN 5850 Advanced Role (3 units)
This is a culminating course that examines transitional roles for the advanced practice nurse (APN), with focus on understanding and applying leadership and other related theories, exploring diverse leadership roles and associated issues, and development of knowledge and skills needed for leadership roles. An overall goal of the course is to expand the student’s understanding of the broad scope of responsibilities of APNs through the assumption of leadership roles within the profession.

CGN 5950 Certification Review (1 unit)
This course is required to be completed prior to graduation for all students enrolled in the MSN/FNP and FNP-only programs. This comprehensive testing review will further assist the MSN/FNP and FNP-only student to prepare for the national certifying examination to become an Advanced Practice Nurse. Testing and review modules are systems-based. Following a pre-assessment examination (self-evaluation), students will have access to a detailed modular review program during the Clinical Experience (CGN 7570) course. Students are required to achieve a score of 80% or higher on the final examination. Students may repeat the final examination one time if they do not achieve a score of 80% or higher.

CGN 5990 Culminating Project (1 unit)
The Culminating Project is an independent study project that serves as a culminating experience for the FNP program. The project requires the student to develop a clinical improvement initiative that will offer valuable insights into high-risk patient populations and the kinds of contributions FNPs can make in providing care for these populations.

CGN 7570 Clinical Experience (2-5 Units per Semester; Repeatable to a total of 15 units; Cr/NCr)
The Clinical Experience course offers FNP, ANP-FNP, and MSN/FNP students the opportunity to begin providing comprehensive health care to individuals and families within a culturally diverse environment in collaboration with physicians, nurse practitioners and other health care professionals. Students are expected to draw on their preceptored experiences to develop sound clinical judgment applied to health promotion, health maintenance, and diagnosis and management of common, acute, chronic and complex health problems for individuals across the life cycle.
CURRICULUM
MSN/FNP Program

**Prerequisites:** Statistics and Pathology Review

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* One additional semester can be taken to complete clinical hours. Students are expected to complete a minimum of 90 hours (2 units) per semester to progress in the curriculum.*
## CURRICULUM

### FNP-Only Program

**Prerequisites:** Statistics and Pathology Review

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* One additional semester can be taken to complete clinical hours. Students are expected to complete a minimum of 90 hours (2 units) per semester to progress in the curriculum.
### CURRICULUM
**APN to FNP Track**

**Prerequisites:** Statistics and Pathology Review

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**Total Program Units**: 19
HONORS AND AWARDS

The following honors and awards are presented annually at the University's Honors Day ceremony in April:

- Academic Achievement Award
- Spirit Award
- CGN Leadership and Community Excellence Award
- President's Society Award
- Joseph and Dorothy Gendron Journalism Award
- Guy M. Allmon Scholarship Fund
- Linda Fox Memorial Endowment Fund
- Dean's Award

The following honors and awards are presented annually to graduates at the University's Commencement Dinner:

- FNP Primary Care Award
- Class of 2000 Award
- Academic Achievement Award
- Class Service Award
- Dean's Award
Academic Calendar
2001-2002

Semester Format (15 Week)

Thursday, Jul. 4, 2001
Independence Day - No classes

Friday, Jul. 5 - 9, 2001
First Preprogram Seminar (new students)

Jul 13-15, 2001
Seminar Weekend (continuing students)

Aug., 4-10, 2001
Second Preprogram Seminar (new students)

Aug. 10, 2001
Summer Semester Ends (continuing students)

Aug. 19, 2001
Preprogram end (new students)

Aug. 22, 2001
Fall Semester Tuition Due

Aug. 27, 2001
Fall Semester Begins

Sept. 21-23, 2001
Seminar Weekend

Nov. 9-11, 2001
Seminar Weekend

Dec. 10, 2001
Fall Semester Ends

Dec. 11, 2001 - Jan. 1, 2002
Semester Break

Jan. 2, 2002
Spring Semester Begins

Feb. 1-3, 2002
Seminar Weekend

Feb. 7, 2002
Spring Semester Tuition Due

Mar. 1, 2002
Application Deadline (Fall 2002)

Mar. 8-10, 2002
Seminar Weekend

Apr. 12, 2002
Spring Semester Ends

Apr. 13-28, 2002
Spring Break

Apr. 29, 2002
Summer Semester Begins (continuing students)

May 31-Jun. 2, 2002
Seminar Weekend (continuing students)

TBA, Jun., 2002
Graduation

Jun. 27, 2002
Preprogram Begins (new students)

Jun. 27-Jul. 1, 2002
First Preprogram Seminar (new students)

Jul. 12-13, 2002
Seminar Weekend (continuing students)

Aug. 4-8, 2002
Second Preprogram Seminar (new students)

Aug. 9, 2002
Summer Semester Ends (continuing students)

Aug. 18, 2002
Preprogram Ends (new students)
BOARD OF TRUSTEES, ADMINISTRATION & FACULTY
WESTERN UNIVERSITY OF HEALTH SCIENCES

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    David Hacker, MA
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College of Osteopathic Medicine of the Pacific
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Assistant Dean, Academic Education/Director of Clinical Education:
    Ron Berezniak, PhD
Chairperson, Department of Anatomy: Richard Sugerman, PhD
Chairperson, Department of Basic Medical Sciences: Robert Fiorindo, PhD
Chairperson, Department of Family Medicine: Alan D. Cundari, DO, MS
Chairperson (Acting), Department of Geriatrics: Ehab Tuppo, DO
Chairperson, Department of Internal Medicine: J. Michael Finley, DO
Chairperson, Department of Obstetrics/Gynecology: TBN
Chairperson, Department of Osteopathic Manipulative Medicine:
    Raymond Hruby, DO
Chairperson, Department of Pathology: Cyrus Parsa, DO
Chairperson, Department of Pediatrics: Frances Yang, DO
Chairperson, Department of Surgery: J. Vivian Davis III, DO
Director, Education and Academic Research: Richard Winn, MA
Director, Osteopathic Center for Children: Viola M. Frymann, DO, FAAO
Director, Student Services: Gisele Tackoor, JD
Manager, Western University Medical Center: Joanna Varner

College of Allied Health Professions
Dean, College of Allied Health Professions: Stephanie D. Bowlin, EdD, PA-C
Chairperson, Department of Health Professions Education:
    Michael Burney, MS, PA-C
Chairperson, Department of Physician Assistant Education:
    Roy Guizado, MS, PA-C
Chairperson, Department of Physical Therapy Education:
    Donna Redman-Bentley, PhD, PT
Director of Clinical Education, Department of Physical Therapy Education: Georgeanne Vlad, MA, PT
Academic Coordinator of Clinical Education, Department of Physician Assistant Education: Rebecca Maldonado, BS, PA-C
Coordinator, Clinical Education, Department of Physician Assistant Education: Jane Riplog

College of Pharmacy
Dean, College of Pharmacy: Max D. Ray, PharmD, MS
Associate Dean, Academic Affairs: Wallace Murray, PhD
Assistant Dean, Graduate Education and Research: Ed Soltis, PhD
Assistant Dean, Development: Sam K. Shimomura, PharmD
Director, Center for Drug Development: William Garner
Director, Center of Pharmacy Practice Research & Development: Katherine K. Knapp, PhD
Director, Introductory Professional Practice Experience:
  Craig Hitchman, BPharm
Curriculum Development and Assessment Specialist:
  Nancy E. Kawahara, PharmD, MS
Coordinator, Student Services: Mark Iannuzzo

College of Graduate Nursing
Dean, College of Graduate Nursing/Director, MSN/FNP Program:
  Karen Hanford, MSN, FNP, PA-C
Associate Dean, M. Elizabeth Towner, PhD, FNP
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Clinical Education Coordinator, MSN/FNP Program:
  Susan E. Lominska, MN, RN

College of Veterinary Medicine
Dean, College of Veterinary Medicine: Shirley D. Johnston, PhD, DVM

FACULTY
Maja Altarac, Adjunct Assistant Professor of Social and Administrative Sciences, 2000. MD, University of Sarajevo; MPH, PhD, Johns Hopkins University

Dayle Chakerian Armstrong, Assistant Professor of Physical Therapy Education (2000). AS, BS, Mount St. Mary's College; MS, University of Southern California.

Mary K. Bailey, Assistant Professor of Physical Therapy Education, 1999. BS, California State University, Long Beach; MS, California State University, Fullerton.

Gerald Bales, Assistant Professor of Anatomy, 1996. BA, MA, Chico State University; PhD, University of Southern California.

Ronald Berezniak, Associate Professor of Health Professions Education, 1999. BS, Bloomsburg State College; MA, Glassboro State College; PhD, University of Pennsylvania.

Gurupadappa V. Betageri, Professor of Pharmaceutical Sciences, 1998. BS, Karnatak University; MS, Bangalore University; PhD, University of Alberta.

Nancy Bjerke, Assistant Professor of Physical Therapy Education, 1997. BS, Loma Linda University; MPT, Loma Linda 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.

Dion R. Brocks, Associate Professor of Pharmaceutical Sciences, 1998. BSc, MPharm, PhD, University of Alberta.

Sherry A. Brown, Assistant Professor of Pharmacy Practice, 2000. BS, PharmD, Philadelphia College of Pharmacy and Science.

Michael Burney, Assistant Professor of Physician Assistant Education, 1996. BS, University of Southern California; PA, MS, College of Osteopathic Medicine of the Pacific.

Rosslynn S. Byous, Assistant Professor of Physician Assistant Education, 1991. BA, University of California, Santa Barbara; MS, University of LaVerne; PA, Charles Drew University of Medicine and Science; DPA, University of LaVerne.

LeeAnne Carrothers, Adjunct Associate Professor of Physical Therapy Education, 1992. BS, University of California, Davis; MS, PT, University of Southern California; PhD, California Graduate Institute.

Shawn K. Centers, Assistant Professor of Pediatrics, 1999. BS, Georgetown College; DO, Nova Southeastern University.

Casey Chaney, Associate Professor of Physical Therapy Education, 1993. BS, MS, Russell Sage College; PhD University of Utah, College of Health.

George Charney, Professor of Surgery/Anesthesiology, 1997. BA, Brooklyn College; DO, Philadelphia College of Osteopathic Medicine.

Jack J. Chen, Assistant Professor of Pharmacy Practice, 2000. BA, University of California, San Diego; BS, Massachusetts College of Pharmacy and Allied Health Sciences; PharmD, University of Utah.

Eunice P. Chung, Assistant Professor of Pharmacy Practice, 1999. BS, University of California, Berkeley; PharmD, University of California, San Francisco.

Norman Coakley, Assistant Professor of Family Medicine, 1997. DO, College of Osteopathic Medicine of the Pacific.

Frank Comunale, Professor of Surgery/Anesthesiology (Emeritus), 1997. BS, Tufts University; MD, Boston University.

Suellen Crano, Associate Professor of Health Professions Education, 1999. BA, MA, EdS, The George Washington University; PhD, Michigan State University.

Alan D. Cundari, Associate 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.

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.

Jeffrey Felton, Professor of Microbiology, 1993. BS, Massachusetts Institute of Technology; PhD, Tufts University.

J. Michael Findley, Associate Professor of Internal Medicine, 2000. BS, Michigan State University; DO, Chicago College of Osteopathic Medicine.
Robert P. Fiorindo, Professor of Physiology, 1980. BS, Albright College; MS, University of Maryland; PhD, University of California, Berkeley.

Duane H. Foley, Professor of Physiology, 1984. BS, University of California, Davis; PhD, University of California, Davis.

James Dana Foster, Associate Professor of Anatomy, 2000. BS, MS, Oakland University; PhD, Temple University.


Spencer B. Gilbert, Professor of Pathology, 1995. MD, Chicago Medical School.

Robert A. Graf, Assistant Professor of Pharmaceutical Sciences, 1999. AB, University of California, Berkeley; PhD, University of Hawaii.

Lee R. Grunden, Professor of Pharmacology (Emeritus), 1980. BS Oregon State University; PhD, University of California, San Francisco Medical Center.

Vitalita 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.

Roy A. Guizado, Assistant Professor of Physician Assistant Education, 1995. PA-C, College of Osteopathic Medicine of the Pacific; MS, Western University of Health Sciences.

Karen J. Hanford, Professor of Nursing, 1997. BSN, San Francisco State University; MSN, California State University, Chico; FNP, PA, University of North Dakota.

Rick M. Hirsh, Assistant Professor of Family Medicine, 2000. AS, Fullerton College; BS, Loma Linda University; DO; Western University of Health Sciences.

Raymond J. Hruby, Professor of Family Medicine/Osteopathic Manipulative Medicine, 1999. BA, St. Vincent College; DO, College of Osteopathic Medicine and Surgery; MS, West Coast University.

Carol J. Huston, Adjunct Professor of Nursing, 1998. BS, University of Iowa; MSN, California State University, Chico; MPA, DPA, University of Southern California.

Mahtab Jafari-Fesharaki, Assistant Professor of Pharmacy Practice, 1996. PharmD, University of California, San Francisco.

Kevin Jenkins, Professor of Internal Medicine, 1981. BS, Capital University; DO, College of Osteopathic Medicine & Surgery.

Gary R. Johnston, Professor of Veterinary Medicine, 1999. BA, University of Washington; DVM, Washington State University; MS, University of Minnesota.

Shirley D. Johnston, Professor of Veterinary Medicine, 1998. BS, University of Washington; DVM, Washington State University; MS, PhD, University of Minnesota.
H. James Jones, Assistant Professor of Osteopathic Manipulative Medicine, 1997. BS, California State University, Long Beach; DO, College of Osteopathic Medicine of the Pacific.

Anita Kay Kalousek, Assistant Professor of Family Medicine, 2000. BA, Loma Linda University; DO, MS, College of Osteopathic Medicine of the Pacific.

Sylvia Kamath, Professor of Anatomy, 1995. MS, Bangalore University; MBBS, Madras University.

Nancy Edman Kawahara, Assistant Professor of Pharmacy Practice, 2000. PharmD, MSEd, University of Southern California.

Jerry Kellogg, Adjunct Assistant Professor of Nursing, 1998. BA, University of California, Riverside; MA, California State University, Los Angeles.

Nadir Khan, Professor of Microbiology, 1978. BS, DJ, Government Science College; MS, University of Karachi; PhD, University of Missouri.

Dennis M. Kiick, Associate Professor of Biochemistry, 1995. BS, San Diego State University; PhD, University of North Texas.

Katherine K. Knapp, Professor of Social and Administrative Sciences, 2001. BA, MA, MS, University of Michigan; PhD, University of California, Davis.

Donald J. Krpan, Professor of Family Medicine, 1987. BS, University of Nevada; DO, University of Health Sciences, College of Osteopathic Medicine, Kansas City.

Craig S. Kuehn, Professor of Anatomy, 1985. BS, California State Polytechnic University, Pomona; PhD, University of Southern California.

Maria Lambros, Assistant Professor of Pharmaceutical Science, 1999. BS, University of Athens; MS, University of Cincinnati; PhD, University of Minnesota.

Anandi V. Law, Assistant Professor of Social and Administrative Sciences, 1999. BPharm, University of Bombay; MS, PhD, The Ohio State University.

Craig L. Lenz, Associate Professor of Family Medicine, 1999. BSE, Princeton University; MEd, University of Pennsylvania; DO, Philadelphia College of Osteopathic Medicine.

Jonathan Leo, Associate Professor of Anatomy, 1995. BA, MacAlister College; PhD, University of Iowa.

Diane Lithgow, Professor of Nursing, 1997. BS, University of California, Irvine; BSN, MSN, California State University, Long Beach.

Susan E. Lominska, Assistant Professor of Nursing, 2000. ASN, Chaffey College; BA, University of Kansas; BSN, California State University, Los Angeles; MN, University of California, Los Angeles.

Rebecca Maldonado, Instructor of Physician Assistant Education (2000). BS, California State University, Long Beach; PA, College of Osteopathic Medicine of the Pacific.

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.
James F. May, Professor of Anatomy, 1981. BS, California State College, Los Angeles; MS, Occidental College; PhD, University of Southern California.


Christian G. Merkel, Professor of Biochemistry, 1979. BA, University of Cincinnati; MA, University of California, Santa Barbara; PhD, University of Cincinnati.

Mary Anne Morelli, Assistant Professor of Osteopathic Manipulative Medicine/Family Medicine, 1992. BA, California State University; DO, College of Osteopathic Medicine of the Pacific.

Tony Mosconi, Assistant Professor of Anatomy, 1997. BS, Allegheny College; MS, PhD, Albany Medical College.

Wallace J. Murray, Associate Professor of Pharmaceutical Sciences, 1999. BS, San Diego State University; PhD, University of California, San Francisco.

Amelia Naccarto-Coleman, Assistant Professor of Physician Assistant Education, 1995. BA, West Virginia University; BS, MAS, Johns Hopkins University.

Gayle H. Nelson, Professor of Anatomy (Emeritus), 1980. BA, Walla Walla College; MS, University of Maryland; PhD, University of Michigan.

Nancy Nielsen-Brown, Instructor of Physician Assistant Education, 1995. BTh, University of La Verne; AS, Cypress College; PA, University of Southern California.

Stephen A. O'Barr, Assistant Professor of Pharmaceutical Sciences, 1999. BS, University of California, San Diego; PhD, Arizona State University.

Christopher Oberg, Associate Professor of Health Professions Education, 1998. BA, University of California, San Diego; PhD, The Claremont Graduate School.

Alice Shoemaker Oglesby, Professor of Microbiology (Emerita), 1979. BS, University of Oklahoma; MA, University of Kansas; PhD, University of California, Berkeley.

Mark P. Okamoto, Associate Professor of Social and Administrative Sciences & Pharmacy Practice, 2000. BS, University of California, Los Angeles; PharmD, University of Southern California.

Cyrus Parsa, Professor of Pathology, 1992. BS, California State University, Northridge; DO, University of Health Sciences, Kansas City.

Sunil Prabhu, Assistant Professor of Pharmaceutical Sciences, 1996. PhD, School of Pharmacy, Western 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.

Lara M. Rasmussen, Assistant Professor of Veterinary Medicine, 1999. BS, DVM, University of California, Davis; MS, University of Minnesota.
Max D. Ray, Professor of Pharmacy Practice, 1996. BS, University of South Carolina, MS, PharmD, University of Tennessee.

David Redding, Assistant Professor of Osteopathic Manipulative Medicine, 1996. BS, PT, California State University, Long Beach; DO, 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, Assistant Professor of Anatomy, 2000. BA, Valparaiso University; MA, PhD, University of Chicago.

R. Ashley Robinson, Professor of Veterinary Medicine, 1998. BVSc, University of Sydney; Dip. Microbiol, Otago University; MPH, PhD, University of Minnesota.

Burton N. Routman, Professor of Family Medicine, 1995. BA, Johns Hopkins University; DO, University of Osteopathic Medicine and Health Sciences.

Margaret J. Rowberg, Assistant Professor of Nursing, 2000. BSN, MSN, California State University, Long Beach.

Stanley Saul, Professor of Surgery/Urology, 1985. BS, Albright College; DO, Philadelphia College of Osteopathic Medicine.

Clifton S. Schermerhorn, Associate Professor of Family Medicine, 1999. AA, Orange Coast College; BA, California State University, Fullerton; MD, American University of the Caribbean.

James D. Scott, Assistant Professor of Pharmacy Practice, 2000. BS, MEd, PharmD, University of Florida.

Michael A. Seffinger, Assistant Professor of Family Medicine/Osteopathic Manipulative Medicine, 1999. BA, University of California, Santa Cruz; DO, Michigan State University.

David M. Selkowitz, Associate Professor of Physical Therapy Education, 2000. BS, State University of New York, Buffalo; MS, Boston University.

Natalie Semaan, Assistant Professor of Pharmacy Practice, 2000. BS, Portland State University; PharmD, University of the Pacific.

Karen Shapiro, Assistant Professor of Pharmacy Practice, 2000. BA, Boston University, PharmD, University of Southern California.

Sam Shimomura, Professor of Pharmacy Practice, 1997. PharmD, University of California, San Francisco.

Gail L. Singer-Chang, Assistant Professor of Family Medicine, 1999. BA, San Diego State University, MA, PsyD, California School of Professional Psychology, Los Angeles.

Quentin W. Smith, Associate Professor of Health Professions Education, 1999. AAS, Hudson Valley Community College; BS, State University of New York, Downstate Medical Center; MS, State University of New York, Stony Brook.

Edward E. Soltis, Professor of Pharmaceutical Sciences, 1998. BS, Butler University; PhD, University of Florida.

Sandra Stuckey, Assistant Professor of Physical Therapy Education, 1991. BS, Michigan State University; MA, California State University, Los Angeles; PT, Stanford University.
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Richard A. Sugerman, Professor of Anatomy, 1980. BA, California State University, San Diego; MS, PhD, University of New Mexico.

Reza Taheri, Assistant Professor of Pharmacy Practice, 2000. BA, PharmD, University of Minnesota.

Brett P. Thomas, Assistant Professor of Osteopathic Manipulative Medicine/Family Medicine, 1996. BS, University of Florida; DO, Southeastern University of Health Sciences.

M. Elizabeth Towner, Adjunct Professor of Nursing, 2000. BS, Duquesne University; MSN, University of California, San Francisco; FNP, Indiana University; PhD, University of Texas.

Carl E. Trinca, Professor of Social and Administrative Sciences, 1995. BS, MS, PhD, University of Arizona.

Ehab Tuppo, Assistant Professor of Geriatrics/Internal Medicine, 2000. BS, MS, MA, Wayne State University; DO Michigan State University.

Guillermo Valenzuela, Associate Professor of Obstetrics/Gynecology, 1995. MD, Catholic University Medical School.

Karen Van Leuven, Adjunct Associate Professor of Nursing, 1997. BSN, University of Delaware; MS, University of San Francisco; PhD, University of California, San Francisco; FNP, Western University of Health Sciences.

Georgeanne Vlad, Assistant Professor of Physical Therapy Education, 1991. BS, California State Polytechnic University, Pomona; MA, University of California, Santa Barbara; PT, Children's Hospital, Los Angeles.

Edward J. Wagner, Assistant Professor of Physiology, 2001. BS, University of California, Los Angeles; PhD, Michigan State University.

Donald E. Walters, Associate Professor of Pharmacology, 2001. BS, St. Louis College of Pharmacy; PhD, University of Louisville.

Sompon Wanwimolruk, Associate Professor of Pharmaceutical Sciences, 2001. BSc, MSc, Mahidol University; PhD, Flinders University of South Australia.

Michael Weiss, Assistant Professor of Family Medicine/Pediatrics, 1994. BS, University of Michigan; DO, College of Osteopathic Medicine of the Pacific.

Stanley K. Wong, Professor of Pharmacology, 1981. BS, MS, PhD, University of Wisconsin.

Siu-Fun Wong, Associate Professor of Pharmacy Practice, 1997. BS, University of California, Los Angeles; PharmD, University of California, San Francisco.

Annie Wong-Beringer, Associate Professor of Pharmacy Practice, 1997. PharmD, University of Southern California, Los Angeles.

Frances Yang, Assistant Professor of Pediatrics, 1999. BS, California State Polytechnic University, Pomona; DO, Western University of Health Sciences.
Joanne Yasuda, Assistant Professor of Pharmacy Practice, 1996. BA, University of California, Los Angeles; PharmD, University of Southern California, San Francisco.

Bartley Yee, Assistant Professor of Family Medicine, 1999. BS, University of California, Los Angeles; DO, Michigan State University.

LaTanya J. Young, Assistant Professor of Physician Assistant Education, 2000. BS, Xavier University of Louisiana; MMS, Emory University; MPH, University of California, Los Angeles.

Rafi Younoszai, Professor of Anatomy, 1979. BS, University of California, Berkeley; PhD, University of Minnesota.
## CLINICAL AND ADJUNCT FACULTY

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mary L. Adair, PA-C</td>
<td>Instructor of Physician Assistant Education</td>
</tr>
<tr>
<td>Ross Mitchell Adams, DO</td>
<td>Assistant Professor of Pediatrics</td>
</tr>
<tr>
<td>Cyrus Afrasiabi, MD</td>
<td>Associate Professor of Internal Medicine</td>
</tr>
<tr>
<td>Afshin Afrookhteh, JD</td>
<td>Assistant Professor of Physician Assistant Education</td>
</tr>
<tr>
<td>Chandrahas Agarwal, MD</td>
<td>Assistant Professor of Internal Medicine/Cardiology</td>
</tr>
<tr>
<td>Vandana Agarwal, MD</td>
<td>Assistant Professor of Internal Medicine/Oncology &amp; Hematology</td>
</tr>
<tr>
<td>Luz del Carmen Aguirre, MD</td>
<td>Assistant Professor of Physician Assistant Education</td>
</tr>
<tr>
<td>Joseph Aiello, DO</td>
<td>Assistant Professor of Family Medicine/Osteopathic Manipulative Medicine</td>
</tr>
<tr>
<td>Laye Akinloye, PA-C</td>
<td>Associate Professor of Physician Assistant Education</td>
</tr>
<tr>
<td>Murtadha Al-Marashi, MD</td>
<td>Associate Professor of Internal Medicine/Neurology</td>
</tr>
<tr>
<td>Steven Alder, MD</td>
<td>Assistant Professor of Internal Medicine/Pathology</td>
</tr>
<tr>
<td>John G. Alevizos, DO</td>
<td>Assistant Professor of Family Medicine</td>
</tr>
<tr>
<td>Brent R. Allan, MPH, DO</td>
<td>Assistant Professor of Family Medicine/Osteopathic Manipulative Medicine</td>
</tr>
<tr>
<td>Ethan R. Allen, DO</td>
<td>Professor of Family Medicine</td>
</tr>
<tr>
<td>Larkin Allen, DO</td>
<td>Assistant Professor of Surgery/Ophthalmology</td>
</tr>
<tr>
<td>Robert F. Altamura, DO</td>
<td>Associate Professor of Internal Medicine</td>
</tr>
<tr>
<td>Louis R. Alvarez, MD, MPH</td>
<td>Assistant Professor of Family Medicine/Psychiatry</td>
</tr>
<tr>
<td>M. Mark Alwan, MD</td>
<td>Assistant Professor of Obstetrics/Gynecology</td>
</tr>
<tr>
<td>Deepak Anand, Ph.D.</td>
<td>Assistant Professor of Pharmacy Practice</td>
</tr>
<tr>
<td>Kenneth Anderson III, DO</td>
<td>Assistant Professor of Family Medicine</td>
</tr>
<tr>
<td>Ray E. Anderson, DO</td>
<td>Assistant Professor of Family Medicine</td>
</tr>
<tr>
<td>Wayne E. Anderson, DO</td>
<td>Assistant Professor of Internal Medicine/Neurology</td>
</tr>
<tr>
<td>William G. Anderson, DO, FACOS</td>
<td>Professor of Surgery</td>
</tr>
<tr>
<td>Soran Andrei, MS</td>
<td>Assistant Professor of Health Professions Education</td>
</tr>
<tr>
<td>Elias I. Anoub, MD</td>
<td>Assistant Professor of Surgery/Otorhinolaryngology</td>
</tr>
<tr>
<td>Jeffrey P. Anthony, DO</td>
<td>Assistant Professor of Family Medicine/Sports Medicine</td>
</tr>
<tr>
<td>Michael D. Antos, MD</td>
<td>Assistant Professor of Internal Medicine/Pediatrics</td>
</tr>
<tr>
<td>Y. Paul Aoyagi, MD</td>
<td>Associate Professor of Physician Assistant Education</td>
</tr>
<tr>
<td>Rubina Aqueel, MD</td>
<td>Assistant Professor of Internal Medicine/Endocrinology</td>
</tr>
</tbody>
</table>
Neal S. Archer, DO
Associate Professor of Family Medicine

John J. Aryanpur, MD
Assistant Professor of Surgery

Allison Atkinson, PA-C
Assistant Professor of Physician Assistant Education

Gary K. Augter, MS, DO
Assistant Professor of Family Medicine/Dermatology

Gino Aveni, PA-C
Instructor of Physician Assistant Education

Paul A. Aversano, DO
Associate Professor of Internal Medicine/Neurology

Aziz F. Awad, DO
Assistant Professor of Family Medicine

Mg San Aye, MD
Assistant Professor of Surgery/Ophthalmology

Muhammad A. Azam, MD
Assistant Professor of Physician Assistant Education

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Na’Imah D. Powell-Williams, MD  
Assistant Professor of Physician Assistant Education
<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Specialty</th>
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<tbody>
<tr>
<td>Arudi L. Prabhakar, MD</td>
<td>Assistant Professor of Surgery</td>
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<tr>
<td>Venu Prabaker, MD</td>
<td>Associate Professor of Internal Medicine</td>
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<td>William J. Previte, DO</td>
<td>Assistant Professor of Surgery/Orthopedics/Sports Medicine</td>
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<td>Todd O. Primack, DO</td>
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<td>Associate Professor of Obstetrics/Gynecology</td>
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<td>Hugo F. Rauld, MD</td>
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<td>Niren A. Raval, DO</td>
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<td>Carl A. Recine, MD</td>
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<td>Joe W. Redd, DO</td>
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<td>David E. Rhodes, MD</td>
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<td>Terence P. Rhone, DO</td>
<td>Assistant Professor of Internal Medicine</td>
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<tr>
<td>E. Lee Rice, DO</td>
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<tr>
<td>Robin (Rob) L. Richardson, DO</td>
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<td>Joel S. Richmon, MD</td>
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<td>Ronald D. Richmond, MD</td>
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<td>Jerome B. Riebman, MD</td>
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<tr>
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Stephen W. Turay, MD  
Assistant Professor of Family Medicine

Alfred L. Turner, DO  
Assistant Professor of Family Medicine/ 
Osteopathic Manipulative Medicine

Sheri R. Tysch, DO  
Assistant Professor of Pediatrics

Paul M. Umof, MD  
Assistant Professor of Family Medicine/ 
Emergency Medicine & Occupational Medicine

Khushro B. Unwalla, MD  
Assistant Professor of Family Medicine/ 
Psychiatry

Sukhdev Uppal, MD  
Assistant Professor of Pediatrics

Geraldine N. Urse, DO  
Assistant Professor of Family Medicine

Daryoosh Valamanesh, MD  
Assistant Professor of Internal Medicine

Guillermo J. Valenzuela, MD  
Professor of Obstetrics/Gynecology

James P. Veen, DO  
Assistant Professor of Physician Assistant 
Education

Roger Vielbig, MD  
Assistant Professor of Internal Medicine/ 
Cardiology

Rafael Villarosa, MD  
Assistant Professor of Internal Medicine

Norman E. Vinn, DO  
Associate Professor of Family Medicine

Michael P. Vitullo, DO  
Assistant Professor of Family Medicine/ 
Emergency Medicine

Monique Ngoc Vo, PharmD  
Assistant Professor of Pharmacy Practice

Lee E. Vranna, MD  
Assistant Professor of Family Medicine/Physical 
Medicine and Rehabilitation

Barton H. Wachs, MD  
Assistant Professor of Surgery/Urology

Ralph D. Wade, DO  
Assistant Professor of Family Medicine

Paul E. Wakim, DO  
Assistant Professor of Surgery/ 
Orthopedics/Sports Medicine

Wendy Waldman, RPh  
Assistant Professor of Pharmacy Practice

Bryan D. Walls, DO  
Assistant Professor of Family Medicine/ 
Osteopathic Manipulative Medicine

James P. Warren, MD  
Assistant Professor of Internal Medicine/ 
Radiology

Harry C. Watters, DO  
Assistant Professor of Obstetrics/Gynecology

Gerald Weingarden, DO  
Assistant Professor of Family Medicine/ 
Dermatology

Elliot Weinstein, MD  
Assistant Professor of Pediatrics
Frederick R. Weiss, MD
Assistant Professor of Internal Medicine

Michael Weiss, DO
Associate Professor of Pediatrics

Jill Weissman, PharmD
Assistant Professor of Pharmacy Practice

Erna L. Wells, MPA, RN, CCM
Professor of Physician Assistant Education

Randall M. West, DO
Assistant Professor of Family Medicine

H. Eric Westman, DO
Associate Professor of Surgery/Otorhinolaryngology

Frederick E. White, DO
Assistant Professor of Internal Medicine/Radiology

Peter J. White, MD
Assistant Professor of Surgery/Anesthesiology

Rosamond C. White, PhD, RN, NP
Assistant Professor of Physician Assistant Education

Janette M. Wilcox, DO
Assistant Professor of Family Medicine

Imani S. Williams, PA-C
Assistant Professor of Physician Assistant Education

Kenneth L. Williams Jr., DO
Assistant Professor of Family Medicine

Paul W. Willis, DO
Assistant Professor of Family Medicine

Brian C. Wilson, MD
Assistant Professor of Internal Medicine/Radiology

Rochelle L. Wilson, DO
Assistant Professor of Family Medicine

Deborah Kay Winberry, PA-C
Instructor of Physician Assistant Education

Heidi A. Winkler, MD
Assistant Professor of Pediatrics

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

Laurie M. Woll, DO
Associate Professor of Family Medicine/Dermatology

Donna Wong, DO
Assistant Professor of Family Medicine

Thomas A. Woodbury, DO
Assistant Professor of Family Medicine

Clarence Woods Jr., MD
Associate Professor of Physician Assistant Education

Sandor J. Woren, DO
Associate Professor of Family Medicine

R. Bruce Worth, MD
Assistant Professor of Family Medicine

George D. Wright, MD
Assistant Professor of Family Medicine

Craig J. Wronski, DO
Assistant Professor of Family Medicine/Psychiatry

Brett Wyrick, DO
Associate Professor of Surgery

Anthony P. Yang, MD
Assistant Professor of Surgery/Orthopedics

Cecile Yared, PharmD
Assistant Professor of Pharmacy Practice

Ralph A. Yates, DO
Assistant Professor of Family Medicine

Florence Yee, PharmD
Assistant Professor of Pharmacy Practice
Jeffrey C. Young, DO
Assistant Professor of Family Medicine

John Yuen, PharmD
Assistant Professor of Pharmacy Practice

Joseph A. Zammuto, DO
Assistant Professor of Family Medicine

Stephen W. Zecher, MPT
Adjunct Assistant Professor of Physical Therapy Education

Robert Zelman, DO
Assistant Professor of Internal Medicine/Cardiology

Nicole Zimmerman, PhD
Instructor of Health Professions Education

Sheldon S. Zinberg, MD
Professor of Internal Medicine

Phillip C. Zinni III, DO
Assistant Professor of Family Medicine

Robert D. Zipser, MD
Associate Professor of Internal Medicine/Gastroenterology

John P. Zopfi, DO
Assistant Professor of Surgery/Trauma Surgery
1. ALUMNI CENTER
2. UNIVERSITY PARK
3. BOOTH CENTER
4. BUSINESS CENTER
5. CENTENNIAL PARK
6. FOUNDERS PARK
7. HEALTH PROFESSIONS CENTER
8. HEALTH SCIENCES CENTER
9. VETERINARY SCIENCES CENTER (future site)
10. MAINTENANCE/AUXILIARY SERVICES FACILITY
11. STUDENT SERVICES CENTER
12. UNIVERSITY ADMINISTRATION CENTER
13. WESTERN UNIVERSITY MEDICAL CENTER
14. WESTERN UNIVERSITY CAMPUS GOURMET/STUDENT LOUNGE
15. HEALTH SCIENCES LIBRARY AND LEARNING RESOURCES CENTER
16. WESTERN UNIVERSITY VETERINARY MEDICAL CENTER (future site)
17. INLAND EMPIRE CREDIT UNION
18. VETERINARY SCIENCES (future site)

How to Reach Western University
The University's main campus is located about 35 miles east of Los Angeles, in the City of Pomona. Ontario International Airport is six miles east of the University and Los Angeles International Airport is located 60 miles west.
Transfer Policy

WesternU/COMP offers a transfer program for persons who have completed one or more years of medical studies at a medical school accredited by the American Osteopathic Association (AOA) or Liaison Committee on Medical Education (LCME) and whose curriculum is academically compatible with that of WesternU/COMP.

Candidates seeking transfer must be in good academic standing at the school where they are enrolled and be eligible for continuation there. Candidates are expected to meet the minimum entrance requirements that are required of our entering first-year students. Please refer to the Admissions Policies and Procedures section for specific information regarding these requirements.

Transfers from an LCME accredited medical school or college to a College of Osteopathic Medicine (COM) shall require that no less than the last fifty percent (50%) of instruction be completed within the COM. In the case of such transfers, the COM requirement for osteopathic manipulative medicine must be completed prior to graduation.

Transfer applications are available from the Admissions Office after September 1. Application deadline for students wishing to transfer into the second year is March 1. Application deadline for students wishing to transfer into the third year is January 1. We do not accept applications for transfer into the fourth year.

Candidates must provide:

1. Official transcripts from all colleges and universities attended.
   Official transcripts showing the successful completion of studies at the medical school where currently enrolled.

2. Official MCAT scores.

3. Letters of recommendation from three science professors at your college of medicine and a letter from an osteopathic physician.

4. A fully completed transfer application accompanied by a non-refundable application fee of $100.00.

5. Upon request, candidates must submit a letter of good academic standing from the Academic Dean of the medical school where they are currently enrolled. If an interview is granted, candidates are invited to the campus at their own expense. Candidates should plan to spend a half-day on campus for orientation and interview. Approximately three weeks after the interview, candidates will receive a letter stating the decision of the Admissions Committee. Acceptance of a transfer student will be dependent upon the student’s current academic good standing, qualifications, academic compatibility and available space. Confirmation of available seats in the MSII class does not occur until mid-June.

Decisions of the Admissions Committee regarding the admissions of applicants to the Doctor of Osteopathic Medicine program are final.

Applications are to be returned directly to: WesternU/COMP, Admissions Office
309 E. Second Street
Pomona, CA 91766-1854

National Board Review Policies

The following policies are to be followed for any D.O. class wishing to have a National Board Review course.

• No organized National Board Review course will be permitted on campus during the academic year (when classes are being conducted).
• The COMP faculty (by discipline) will be available at the end of the MS-2 Spring semester for scheduling discipline reviews.
• No outside vendor or review organization can be invited to campus for a discussion without the approval of the Director of COMP Student Services.
• Any outside vendor or review organization to be considered for conducting a review course shall negotiate the contract with the Director of COMP Student Services and the COMP Assistant Dean of Academic Affairs.
Final approval for any Review course will be by the Dean of the College of Osteopathic Medicine of the Pacific.

**Page 56-57: Phase I: First Year-First Semester (CORE courses)**

Replace the listed courses with the following listing containing revised credit hours:

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>DO 5010</td>
<td>Biochemistry</td>
<td>4.5</td>
</tr>
<tr>
<td>DO 5020</td>
<td>Embryology</td>
<td>1</td>
</tr>
<tr>
<td>DO 5025</td>
<td>Medical Genetics</td>
<td>1</td>
</tr>
<tr>
<td>DO 5030</td>
<td>Gross Anatomy</td>
<td>12.5</td>
</tr>
<tr>
<td>DO 5040</td>
<td>Histology</td>
<td>2</td>
</tr>
<tr>
<td>DO 5050</td>
<td>Microbiology</td>
<td>5</td>
</tr>
<tr>
<td>DO 5060</td>
<td>Pathology</td>
<td>2.5</td>
</tr>
<tr>
<td>DO 5070</td>
<td>Pharmacology</td>
<td>2.5</td>
</tr>
<tr>
<td>DO 5080</td>
<td>Physiology</td>
<td>1.5</td>
</tr>
<tr>
<td>DO 5090</td>
<td>Osteopathic Principles and Practice I</td>
<td>2</td>
</tr>
</tbody>
</table>

**Page 57: Phase II: Second semester-first year through Second semester-second year**

Replace the listed courses with the following listing containing revised credit hours:

**First Year-Second Semester**

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>DO 5110</td>
<td>Dermal System</td>
<td>3.5</td>
</tr>
<tr>
<td>DO 5120</td>
<td>Neurosensory System</td>
<td>15.5</td>
</tr>
<tr>
<td>DO 5130</td>
<td>Musculoskeletal System</td>
<td>6.5</td>
</tr>
<tr>
<td>DO 5140</td>
<td>Medical Ethics</td>
<td>Cr/NCr</td>
</tr>
<tr>
<td>DO 5150</td>
<td>Introduction to Clinical Medicine I (ICM I)</td>
<td>2 credit hours, 1 week</td>
</tr>
<tr>
<td>DO 5160</td>
<td>Behavioral Science &amp; Substance Abuse</td>
<td>4 credit hours</td>
</tr>
<tr>
<td>DO 5190</td>
<td>Osteopathic Principles and Practice II</td>
<td>2.5 credit hours</td>
</tr>
</tbody>
</table>

**Second Year-First Semester**

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>DO 6010</td>
<td>Blood &amp; Recticuloendothelial System</td>
<td>6.5</td>
</tr>
<tr>
<td>DO 6020</td>
<td>Cardiovascular System</td>
<td>9.5</td>
</tr>
<tr>
<td>DO 6030</td>
<td>Public Health</td>
<td>1.5</td>
</tr>
<tr>
<td>DO 6040</td>
<td>Respiratory System</td>
<td>9</td>
</tr>
<tr>
<td>DO 6050</td>
<td>Psychiatry</td>
<td>2</td>
</tr>
<tr>
<td>DO 6090</td>
<td>Osteopathic Principles &amp; Practice III</td>
<td>2.5 credit hours</td>
</tr>
</tbody>
</table>

**Second Year-Second Semester**

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>DO 6110</td>
<td>Renal System</td>
<td>5</td>
</tr>
<tr>
<td>DO 6120</td>
<td>Endocrine System</td>
<td>5.5</td>
</tr>
<tr>
<td>DO 6130</td>
<td>Reproductive System</td>
<td>7</td>
</tr>
<tr>
<td>DO 6140</td>
<td>Gastrointestinal System</td>
<td>11</td>
</tr>
<tr>
<td>DO 6150</td>
<td>Introduction to Clinical Medicine II (ICMII) (Cr/NCr)</td>
<td>1.5 credit hours</td>
</tr>
<tr>
<td>DO 6160</td>
<td>Medical Jurisprudence</td>
<td>1.5</td>
</tr>
<tr>
<td>DO 6190</td>
<td>Osteopathic Principles &amp; Practice IV</td>
<td>2.5 credit hours</td>
</tr>
</tbody>
</table>

**Page 58, Clinical Curriculum:** Replace the third year clinical rotations requirements with the following:

**Third Year**

1 Family Practice
3 Internal Medicine (2 General; 3rd General, GI, CARD, or PULM)
1 Surgery (General)
2 Pediatrics, or 1 Pediatrics and 1 additional Family Practice
1 Obstetrics/Gynecology
1 Osteopathic Manipulative Medicine
1 Psychiatry
1 Geriatrics, or 1 additional Family Practice, or 1 additional Internal Medicine
1 Vacation

Page 60:

DO 5030 Gross Anatomy: Change credit hours from 14.5 to 12.5
DO 5050 Microbiology: Change credit hours from 5.5 to 5
DO 5070 Pharmacology: Change credit hours from 3.5 to 2.5

Page 61:

DO 5110 Dermal System: Change credit hours from 4 to 3.5
DO 5120 Neurosensory System: Change credit hours from 17.5 to 15.5
DO 5130 Musculoskeletal System: Change credit hours from 7.5 to 6.5
DO 5160 Behavioral Science and Substance Abuse: Change credit hours from 2.5 to 4
DO 6010 Blood and Reticuloendothelial System: Change credit hours from 7.5 to 6.5
DO 6020 Cardiovascular System: Change credit hours from 14.5 to 9.5
DO 6030 Public Health: Change credit hours from 1 to 1.5
DO 6040 Respiratory System: Change credit hours from 9.5 to 9
DO 6110 Renal System: Change credit hours from 5.5 to 5

Page 63:

DO 6130 Reproductive System: Change credit hours from 8 to 7
DO 6140 Gastrointestinal System: Change credit hours from 13 to 11
DO 6160 Medical Jurisprudence: Change credit hours from 1 to 1.5

Page 64:

DO 6190 Osteopathic Principles and Practice IV: change credit hours from 5 to 2.5
STUDENT LOAN DEFERMENT PROCESSING

Western University of Health Sciences participates in the National Student Clearinghouse, located in Herndon, Virginia. Three times a semester, the University submits a report of students' enrollment status to the Clearinghouse, 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.

The Registrar's Office will continue to process deferment requests to lending agencies that do not participate in the Clearinghouse, however.
Page 112: PT 5200 Foundations of Musculoskeletal Intervention has increased from 4 to 5 credit hours, effective with the class entering in January 2001.

Page 112: PT 5210 Evaluation and Treatment of Upper Quarter Musculoskeletal Problems has decreased from 6 to 5 credit hours, effective with the class entering in January 2001.

Page 115: PT 5200 has increased from 4 to 5 credit hours.

Page 115: PT 5210 has decreased from 6 to 5 credit hours.

Page 117: The following courses have been added to the offerings of the Department of Physical Therapy Education:

**PT 8100  Pharmacology for the Physical Therapist (3 credit hours)**
Prerequisite: Bachelor’s or Master’s degree in Physical Therapy. This course addresses basic and applied pharmacology for the practicing physical therapist. The content includes the effects of pharmacotherapy on the health and well being of physical therapy patients.

**PT 8120  Medical Screening and Systems Review (3 credit hours)**
Prerequisite: Graduate of an accredited Physical Therapy program and current licensure as a physical therapist. This course familiarizes the physical therapist with patient history and systems review from the medical and physical therapy perspectives. Lecture notes, internet discussions, and case discussions are used to prepare the PT for the appropriate medical screening and physical examination skills required to practice in a direct access environment. A systems approach is used to discuss common medical conditions, their epidemiology, etiology, clinical manifestations, medical management and issues related to PT screening, examination, interventions, and red flags.
Catalogue Supplement: Master of Science in Physician Assistant Studies

Page 139: PA 5000 CPR has been removed from the curriculum of the first semester of the MSPA program. The total number of credit hours required for the first semester is thereby reduced to 27 units.

Page 140: Delete the course title and course description for PA 5000 CPR.

Page 140: The course description for PA5005 Medical Terminology should read as follows:

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.

Page 143: Replace the decimal place numbering system for PA 7500 Extended Core Selectives with the following:

PA 7500A Orthopedics
PA 7500B Oncology
PA 7500C Family Practice III
PA 7500D Infectious Disease
PA 7500E Cardiology
PA 7500F Cardiothoracic Surgery
PA 7500G Geriatrics
PA 7500H General Surgery II
PA 7500J Rheumatology
PA 7500K Endocrinology
PA 7500L Dermatology
PA 7500M Occupational Medicine
PA 7500N Trauma Surgery
PA 7500P Psychiatry
PA 7500Q Otolaryngology
PA 7500Y Directed Research/Independent Study
PA 7500Z Other