



Weill Cornell
Medicine

Master of Science in Health Sciences for

PHYSICIAN ASSISTANTS PROGRAM

CLINICAL YEAR GUIDELINES

Class of 2027

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CLINICAL TEAM

For the purpose of the Clinical Year Guidelines the “Clinical Team” refers to the clinical education leadership and staff listed in the Clinical Team section below who are responsible for clinical instruction, supervision and student support:

Shari LeFauve, MS, PA-C	Clinical Curriculum Co-Lead	sal2037@med.cornell.edu	EE-1012
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POLICIES AND PRACTICES FOR PHYSICIAN ASSISTANT STUDENTS ON CLINICAL ROTATIONS

The following represents the general guidelines for the Weill Cornell Medicine MSHS for Physician Assistants (PA Program) students while functioning on clinical rotations at NewYork-Presbyterian Hospital, Cornell Campus and/or affiliates. The material outlined in this document is subject to change by the Program, Weill Cornell Medical College, and/or Cornell University. Students are advised to refer to the WCM MSHS for Physician Assistants [Student Handbook](#) for specific Policies and Practices regarding their responsibilities as students in the PA Program. The WCM MSHS for Physician Assistants [Student Handbook](#) outlines program-wide Policies and Practices all students must read and abide by.

GENERAL GOALS AND OBJECTIVES CLINICAL ROTATIONS or SCPE

Each student will participate in ten required SCPEs and five elective rotations. The general purpose of the SCPEs are to provide the physician assistant (PA) student with supervised clinical exposure to patients and the healthcare environment. These SCPEs allow the PA student to augment, strengthen and refine the knowledge and skills acquired during the preclinical phase of the PA Program. The student will participate as a member of the healthcare team and function under the direct supervision of preceptors.

The specific learning outcomes and instructional objectives set forth for each required SCPE can be found on [CANVAS](#), the learning management system, under [PA CLASS 2027 > Syllabus](#). While it is assumed that most, if not all material in the objectives will be seen by the student during the rotation, this cannot be guaranteed, and students are responsible for all material in the learning objectives. Students should refer to the specific course syllabus and course [CANVAS](#) folder for guidelines regarding the specific clinical rotation requirements and grading policies.

The ten required SCPEs are as follows: Surgery I, Surgery II, Internal Medicine I, Internal Medicine II, Internal Medicine III, Family Medicine/Primary Care, Pediatrics, Women’s Health, Emergency Medicine, and Behavioral and Mental Health.

The five elective rotations may be done in a variety of surgical and medical subspecialties or in any of the core rotations. Objectives for elective rotations are available on [Canvas](#).

While on clinical rotations, students are expected to participate fully as members of the team, and they will see patients and perform procedures. The Program utilizes OASIS to ensure students are meeting the learning outcomes by logging patient encounters and procedures specific to each rotation. PA students are

expected to log (45) patient encounters and procedures during each required clinical rotation. Students are advised not to limit themselves to the minimum numbers.

The minimum required procedures must be documented prior to the completion of the clinical rotations. Failure to perform and document (log) the required procedures may result in the student not being able to complete the program and graduate as originally scheduled.

While on clinical rotations, the PA student will be under the general medical supervision of a preceptor, who may be an attending physician, PA or nurse practitioner (NP). All patients seen by the PA student must be seen and evaluated by a preceptor. All invasive procedures will be performed under the direct supervision of a preceptor. All laboratory, radiological and medical record entries (i.e., notes, orders) will be co-signed by a preceptor prior to their entry in the medical record. PA students may NOT discharge inpatient, outpatient, or emergency department patients until the preceptor has seen the patient and discussed plans, instructions and/or follow-up care with the student and patient.

The following identifies the activities that a PA student may initially observe, secondly assist with, and thirdly perform while under the direct supervision of the preceptor.

1. Provide medical care under the direct supervision of a licensed preceptor vetted by the program for the following:
 - Perform a detailed and accurate history and physical.
 - Order laboratory, radiologic and special examination procedures as appropriate for the evaluation of illness.
 - Propose appropriate treatment plan based upon the presenting diagnosis and escalate care or refer as indicated.
 - Provide thorough patient education concerning treatment plan.
 - Accurately document information including admission notes, progress notes, intra-operative notes, post-operative notes, and discharge summaries in the medical record.
 - Obtain review and countersignature of the preceptor on all medical record entries.
 - Write orders (including medications) while at clinical sites, where permitted. All orders must be reviewed and countersigned by the preceptor.
2. Perform the following functions in the operating room under the direct supervision of the designated preceptor.
 - Prepare and drape the patient prior to surgery.
 - Serve as an assistant to the surgeon during surgical procedures.
 - Assist in closure of surgical wounds and post-closure sterile dressing of surgical wounds.
3. Perform the following diagnostic and therapeutic procedures under the direct supervision of the designated preceptor:
 - Evaluate and participate in the treatment of non-life threatening conditions. Initiate the evaluation of emergency conditions.
 - Participate in ACLS interventions and therapies.
 - Airway management procedures, including endotracheal intubation, oral airway insertion, suctioning, bag-valve-mask ventilation, and oxygen therapy.
 - Venipuncture, arterial puncture, intravenous catheterization with fluid therapy and venous cutdown.
 - Administration of medications via intradermal, subcutaneous, and intra-muscular injections

- in accordance with hospital and/or nursing guidelines.
- Cardiopulmonary resuscitation including the use of AEDs, manual defibrillation, and/or synchronized cardioversion.
 - Perform and interpret electrocardiograms (ECGs).
 - Application and removal of casts or splints fracture immobilization.
 - Nasogastric tube insertion.
 - Urethral catheterization.
 - Thoracentesis and chest tube insertion.
 - Wound care, to include wound vac management, and various suturing techniques.
 - Lumbar puncture.
 - Paracentesis and peritoneal lavage procedures.
 - Central venous catheter insertion via subclavian, internal jugular and femoral vein approaches.
 - Endoscopic procedures such as flexible sigmoidoscopy or colonoscopy.
4. Additional permitted functions of PA students, along with the specific attitudinal and behavioral expectations are outlined in the corresponding learning outcomes and instructional objectives for each required and elective rotation.

POLICIES AND PRACTICES FOR CLINICAL ROTATIONS

1. All clinical rotations are four weeks in length and begin on a Monday unless otherwise indicated. All decisions regarding the assignment of required and elective clinical rotations are made by the WCM Office of the Registrar, and Clinical Team. **There will be no changes in the clinical rotation schedule unless approved by the Clinical Team.**
2. **Any changes, including 1:1 swaps and site changes, are subject to add/drop rules:**
 - Changes must be at least 30 days prior to the start date of the course (60 days for Sub-Is).
 - Changes must not affect minimum or maximum enrollment limits at any site.
3. **Attendance on Clinical Rotations:**
 - Attendance on rotations is **mandatory**.
 - Students must collaborate with their preceptor to develop their clinical rotation schedule. Once it is created, it should be signed by the preceptor.
 - Students **MUST** upload their rotation schedule to CANVAS by 11:59pm on Friday of the first week of each rotation. The [template](#) for the rotation schedule can be found on Canvas. The first failure to upload schedule by allotted time will result in a warning. Subsequent failures will result in a 5-point deduction in clinical documentation assignment.
 - Once the schedule is uploaded to CANVAS, any changes to the rotation schedule must be emailed to the Clinical Course Director and Clinical Support Coordinator.
 - **Illness:** If a student is unable to attend rotation due to SICKNESS, they must notify the clinical preceptor of record and send an [Absence Request](#) to the attention of the entire Clinical Team by 8:00 am on the day of the absence. Absence request forms are available on CANVAS.
 - **Personal Days:** Requests for planned absences must be made in writing, using the [Absence Request](#) form, a minimum of 2 weeks prior to the requested absence (students are encouraged to submit the requests as far in advance as possible). Requests must be submitted to the entire Clinical Team, and are not considered excused until formally

- approved by the Clinical Team. Students should review requests for time off with the Preceptor of Record, including a plan for making up time missed from rotation.
- If a student follows the above process for an absence from clinical rotations, and receives approval from the Clinical Team, the absence is considered excused.
 - An absence is considered unexcused when a student fails to notify both the preceptor and the Clinical Team of their absence, according to the process noted above. Any student who has an unexcused absence on clinical rotations will get a Professionalism Report. The student will lose five (5) points from their H & P clinical documentation assignment and will be required to make up the missed time at the discretion of the Clinical Team.
 - **Any time missed during a clinical rotation, regardless of the reason, may be required to be made up. All absences must be promptly discussed with the Clinical Team.** Failure to notify the Program and/or preceptor of absences or failure to make up the missed time as directed by Clinical Team or preceptor, result in a deduction of (5) points from the student overall grade for the rotation. Continued noncompliance with program policy may lead to further disciplinary action. Make-up time may be scheduled during vacations and weekends or at the end of the clinical year with approval from the Clinical Team. Missed time must be completed before completion or a degree will be awarded. Students must submit written documentation of the time made up, signed by the preceptor. The Clinical Team must be made aware of when the time is being made up.
 - Students are expected to leave the rotation when released by the preceptor. Students are not permitted to leave the rotation based on a 'shuttle' or transportation schedule, unless specified explicitly in the transportation policy and discussed with the preceptor.
 - A preceptor must be present while a student is on a rotation, therefore in the event that a student misses a day from a rotation due to preceptor absence, the student must notify the Clinical Team to discuss the situation and ensure the required contact hours are met.
 - Students must attend the rotation on the day prior to the End of Rotation meeting. Students who fail to do so will lose five (5) points from their overall grade for the rotation. If this subsequent loss of points results in a failure of the rotation, the rotation must be made up as outlined below.
 - **Holiday/Vacation Time Off:** Students are not permitted to miss the first scheduled day of the rotation or the day prior to or after a scheduled holiday or vacation. Students are expected to be at their rotations until they are released by the preceptor. Many rotations require weekend and night call; therefore, students should not assume that a holiday will include a concurrent weekend and must discuss the expectations with the preceptor prior to making any travel arrangements. Students are not permitted to miss the first day back from a scheduled holiday or vacation. As such, students are expected to make all travel arrangements to ensure they comply with this requirement.
 - Students are advised to leave themselves one extra travel day in case of travel delays and/or cancellations.
 - Students are expected to be present on the first day of all rotations unless directed by the preceptor.
 - **Time off limits:** Students may miss up to five (5) excused days due to illness or other emergencies throughout the entire clinical phase of the Program; students may also request up to three (3) excused personal days throughout the clinical phase. Students may take no more than two (2) sick* or personal days during a single rotation. Students may not miss more than 8 excused days throughout the entire clinical year of 15 rotations.
 - In general, the time frame for an absence is expected to be no more than two consecutive days (including a Friday-Monday sequence).
 - *Students who are out from classes or rotations more than two (2) consecutive days

due to illness or injury must submit a medical provider's note to PA Program and Student Health Services stating that they were seen and may return to rotation.

- Students who experience a serious illness or injury must notify the PA Program and Student Health Services. A medical clearance from their treating medical provider is necessary prior to returning to clinical rotations. Any subsequent restrictions to student activity will be evaluated according to The Americans with Disabilities Act (ADA).
- In the event of an extended absence (defined as more than five (5) days missed in any given clinical rotation), students must discuss their situation with the Clinical Team prior to the absence (when possible) to arrange appropriate make-up time. Extended absences in an individual rotation may impact a student's ability to achieve the required clinical competencies for that rotation. In such cases, the student may be required to repeat the rotation in its entirety to demonstrate competency.
- **Excessive absenteeism and tardiness will be reviewed by the Committee on Promotion and Graduation and may be grounds for dismissal from the Program as per the Standards of Conduct and Professionalism.**

4. **ID/Dress:** PA students are required to wear and visibly display their WCM PA Program assigned ID at all times and identify themselves as PA students. Students are expected to present a neat, clean, and professional appearance at all times. Appropriate dress including white coat as directed by clinical preceptors. Additionally, NYP has a policy which includes:
 - The wearing of surgical issued burgundy scrubs is prohibited in non-patient care areas, including the Medical College library, cafeteria, and laboratories.
 - The wearing of burgundy scrubs by all personnel in non-surgical patient care areas or special care areas is prohibited.
 - Wearing burgundy scrubs outside of the Medical Center or entering or exiting the Medical Center is strictly prohibited.
 - Inappropriately dressed students may be sent home from rotations and/or rotation meetings and will lose 5 points from the overall rotation grade for each infraction. Further, a Professionalism Report may be filed.
 - Students should refer to the formal NYP Scrub policy available on the NYP [website](#).
 - **Expectation of time on site:** Students should expect to be on site for a given rotation for a minimum of eight hours per day and at least forty hours per week. Students should not leave at the end of the day until they are released by the preceptor. Students may be required to take overnight and/or weekend call, as specified by the clinical preceptor. Students must attend Grand Rounds, patient rounds, and case conferences when available and at the direction of their preceptor to maximize learning opportunities.
5. **General Guidelines for Surgical Rotations:** Surgical education traditionally involves long and demanding hours, reflecting the dedication and commitment of the surgical team. While the Program does not provide a strict limitation of hours for students when on rotations, it is recommended that students not exceed more than 70 hours per week. Students may choose to spend additional time on their rotation at their own discretion to enhance their learning experience. This guideline is designed to support flexibility, allowing each student to coordinate their schedule with the surgical team and to remain beyond scheduled hours if they wish to do so for educational benefit. The Program believes that imposing rigid work-hour limits could restrict valuable learning opportunities and hinder full integration into the surgical team environment.
6. **End of Rotation Meetings:** Students are required to return to the Program at the end of each clinical rotation for End of Rotation (EOR) meetings (see schedule on page 21). Additional required

days may be scheduled throughout the clinical year on an as needed basis. During the EOR meetings, students will take a rotation specific examination, participate in case-based learning activities, oral case presentations, perform practical examinations, attend lectures, etc.

Attendance at all EOR meetings is mandatory. If a student has an unexcused absence from an EOR meeting, it may be determined that the student has failed to complete all the required components of the rotation, and therefore failed the rotation and must repeat it at the end of the clinical year. Any unexcused absences from an EOR will be referred to the Committee on Promotions and Graduation for discussion on course of action. An excused absence from an EOR meeting may result in a loss of 5 points from the overall grade for the rotation. If this subsequent loss of points results in a failure of the rotation, the rotation must be made up as outlined below. Students should expect to spend the full day at the Program for the meetings and no travel plans should be made prior to 7:00 pm on those days.

7. **Communication:** To facilitate communication, students are required to carry their tagged mobile telephones and answer calls and texts in a timely manner. Written information and e-mail messages to students' Program issued WCMC e-mail accounts (@med.cornell.edu) will also be utilized. **Therefore, students are advised to check both their Program e-mail accounts and the online learning management system daily. Failure to respond to email in a timely manner (24-48 hours) will result in a warning. Subsequent failures to respond in a timely manner will result in a Professionalism Report.**
 - A student who cannot be reached on a rotation despite repeated attempts to be contacted will be considered absent from the rotation and the attendance policy above will apply.
8. **Emergency Instructions:** If a safety concern arises during a clinical rotation, the student should refer to site specific emergency instruction, and then contact a member of the Clinical Team immediately. Depending on the situation, all clinical activity at that site may be suspended pending investigation. If it is deemed necessary, an alternative clinical experience may be arranged so the student can meet the learning outcomes for the supervised clinical patient experience without significant disruption.
9. **Emergency On-Call Policy PA Program Faculty-on-Call:** Clinical students should call the Clinical Curriculum Co-Lead, Professor Shari LeFauve at 646-962-7605. If the student is unable to reach Clinical Curriculum Co-Lead, the student should contact the Program Director, Dr. Kelly Porta at 646-962-7334 or 516-375-5055.
10. **Difficulty On Rotations:** In the event that a student experiences any difficulty during a clinical rotation with either the preceptor or site, he/she is advised to contact the Clinical Curriculum Co-Lead immediately. The student may be given suggestions to manage the problem on their own, or if necessary, a faculty member will intervene. It is the student's responsibility to notify the Program of the outcome whether or not resolution is achieved between the student and preceptor.
11. Students must obtain appropriate immunizations and follow CDC recommendations for international travel for programs related to elective curricular components. Students must submit additional paperwork and proof of separate travel insurance prior to the start of international rotations. Students are responsible for all costs incurred while arranging and participating in international rotations. The PA Program reserves the right to mandate that a student return from an international site at any time during the rotation.
 - [Student Health Services Policies](#)
 - [Weill Cornell Travel Medicine \(WCTM\) | Patient Care](#)

- For country specific medical information: www.cdc.gov/travel
 - For general immunization schedules for clinicians evaluating what vaccines are needed for the general public: [Immunization Schedules for Healthcare Professionals | CDC](#)
12. All students must complete infection control training during the orientation phase of the Program. [Infection control](#) training is provided by the [Office of Environmental Health and Safety](#). Students are also required to take an online course in infection control. All students will undergo annual respirator training and fit testing, also through the Office of Environmental Health & Safety.
 13. All puncture wounds and other exposures to blood and body fluids should be managed as per the directions outlined in the following [Important Information on Emergencies and Blood-Borne Pathogen or Chemical Exposures](#). Students should report the incident immediately to the preceptor of record, the Student Health Service and the Clinical Curriculum Co-Leads as per the WCM MSHS for Physician Assistants [Student Handbook](#) (Policy for Management of Students, Faculty and Staff Following a Needlestick or Body Fluid, Puncture Wound Exposures Student Health Policies).
 14. All potential exposures to contagious infectious diseases, via respiratory or any other vector, should be reported immediately to the Student Health Service and the Clinical Curriculum Co-Leads.
 15. All program policies apply to all students, principal faculty, and the program director during any and all PA Program activities regardless of location. A signed clinical affiliation agreement or memorandum of understanding may specify that certain clinical sites have additional requirements in addition to program policies. Any policy changes will be reviewed by the program director and clinical curriculum co-leads to be sure such policies are in compliance with PA Program policies. Any additional rotation specific requirements will be posted to student site information on the clinical course information platform (CANVAS).
 - PA Program Policies can be located in the WCM MSHS for Physician Assistants [Student Handbook](#) and in the WCM MSHS PA Program Clinical Guidelines, both of which can be found on the program [website](#).
 - Students will not substitute for instructional faculty, clinical staff, or administrative staff at any point during their time in the program. Students are not permitted to accept payment for services rendered in connection with the performance of their clinical rotation duties. Students must notify the Program office immediately should they be put in such a position or have any questions or other concerns.
 - In addition, based on the academic rigor and time commitment of the program, it is strongly recommended that students abstain from any form of employment while enrolled in the program. Any student who is working or considering working during their time in the program must discuss with their academic advisor how this employment may or may not impact their academic performance.
 16. The Professionalism Policy outlines Student Responsibilities & Honor Code (refer to the WCM MSHS for Physician Assistants [Student Handbook](#)). All MSHS PA students must prioritize the care of patients demonstrating responsibility, maturity, and integrity.

ROTATION SPECIFICS FOR 2026 – 2027

1. The rotation schedule for the 2026-2027 clinical year includes 15 four-week clinical rotations.
2. Students are required to complete ten (10) required supervised clinical practice experiences (SCPE) and five (5) elective SCPEs.

Course	Description	Course Director	Rotation Duration
MEDC6001	Internal Medicine I	Prof. LeFauve	Four-weeks
MEDC6002	Internal Medicine II	Prof. LeFauve	Four-weeks
SURG6001	Surgery I	Dr. Fiore	Four-weeks
SURG6002	Surgery II	Dr. Fiore	Four-weeks
PRCM6001	Family Medicine/Primary Care	Prof. LeFauve	Four-weeks
PEDS6001	Pediatrics	Prof. LeFauve	Four-weeks
OBGY6001	Women’s Health	Dr. Fiore	Four-weeks
EMER6001	Emergency Medicine	Dr. Fiore	Four-weeks
MEDC6004	Internal Medicine III	Prof. LeFauve	Four-weeks
PSYC6001	Behavioral & Mental Health	Prof. LeFauve	Four-weeks

Dr. Fiore will be the assigned course director for all Surgical Elective Rotations and Prof. LeFauve will be assigned course director for all Medicine Elective Rotations.

3. All required rotations must be completed at established rotation sites -other locations will be at the discretion of and will be assigned by the Clinical Team.
4. Placement of students for required rotations is coordinated by the WCM Office of the Registrar and the Clinical Team. Placements will not take into consideration student’s residence location, and students will be required to travel to assigned clinical sites and locations regardless of distance; students should expect to participate in clinical sites dispersed throughout the 5 boroughs of New York City as well as Westchester, Nassau, and Suffolk Counties.
5. Students are **not** required to find or arrange **any** rotations or preceptors.
6. The sequence and scheduling of all rotations is coordinated by the Office of the Registrar, and the Clinical Team. The majority of required rotations should be completed prior to the completion of the majority of elective rotations ensuring completion of necessary pre-requisites ahead of elective rotations. The Program Director or the Clinical Team have the right to re-assign students to another clinical rotation site or location if necessary.
7. The remaining five (5) clinical rotations are Elective supervised clinical practice rotations. Students may select from the currently available elective rotation catalog at NewYork-Presbyterian Hospital/Weill Cornell Medicine and/or affiliated sites or external sites.
8. **Onboarding:** Rotation sites may require additional documentation including but not limited to background checks, drug testing, supplemental applications, and interviews for any student desiring to participate in rotations at that institution/practice. PA students are expected to review onboarding requirements as specified in the clinical course platform (CANVAS) and must complete all paperwork and provide all documentation as requested by the deadlines indicated by the Site

Director or Graduate Medical Education Office. Failure to do so may result in the submission of a Professionalism Report and may prevent timely start of a rotation or loss of rotation placement, which could delay graduation. Elective rotation preceptors have the right to make decisions about accepting students based upon the results of the application and/or interview.

9. **Transportation Policy:** All transportation arrangements and reimbursement requests must comply with this policy. Any deviation from these guidelines requires prior approval from the Clinical Team. The Clinical Team retains final authority to determine eligibility for transportation reimbursement, and approval of any request is not guaranteed.

- Getting to your Clinical Site
 - **Primary Method:**
 - **Shuttles:** WCM and NYP shuttles are available for certain sites – check schedules on [CANVAS](#) (in the Transportation section of Policies and Processes). All students are expected to take the shuttle to/from Westchester.
 - When shuttles are not available, use approved local public transportation systems (NYC subway and local bus service).
 - Commuter rail services, including but not limited to the Long Island Railroad, Metro-North or New Jersey Transit) are not eligible for reimbursement unless prior written approval is obtained from the clinical team.
 - **Lyft Pass Benefit:** For early/late shifts **only**:
 - Arrival **before 5:30 AM** or departure **after 7:00 PM (after 8pm from June 1 – September 1)**.
 - Weekend shifts or when public transit/shuttles are unavailable.
 - May only be taken to/from campus sites: The Weill Cornell Medicine main campus (1300 York Ave.), WCM PA Program (570 Lexington Ave.), Pennsylvania Station, Grand Central Station.
 - **Carpooling:** Strongly encouraged when using the Lyft Pass benefit or private car travel.
- **Reimbursement Process**
 - Submit **one request per rotation** within **30 days of rotation completion**.
 - Use the [Student Transportation Form](#)
 - Upload rotation schedule, and proof of payment (receipt or credit card statement) as instructed in the form.
- **Important Rules**
 - **Lyft Pass misuse = loss of benefit + Professionalism Report.**
 - External/international rotations: Transportation costs are your responsibility.
 - Rental cars and personal vehicle mileage reimbursement requests are not permitted.

10. **External and International rotations:**

- External rotations encompass both sites and preceptors not currently affiliated or regularly utilized by the PA Program for supervised clinical practice experiences. Students may request to do a maximum of **(1)** external clinical rotation placement throughout the clinical phase. Any requests to complete an additional external rotation will be reviewed by the Clinical Team and the Program Director. The opportunity to do external clinical rotations is a privilege and is contingent upon approval from the Clinical Team, Program Director, and the University Counsel's office. Students are advised that most external sites and some core sites

will require a background check, immunization titers, and drug screening. Students are responsible for this cost as well as all costs incurred while arranging and participating in external rotations.

- The opportunity to do International elective rotations is contingent upon approval from the Clinical Team, Program Director, and the University Counsel's office. Any and all clinical rotations occurring with clinical sites and preceptors outside of the United States can **only be used for elective rotations**.
 - Physician Assistant students are responsible for their own transportation costs to and from all international rotation sites.
- Students may be required to obtain appropriate immunizations (and must adhere to CDC immunization recommendations for international travel), submit additional paperwork and proof of separate travel insurance prior to the start of such rotations. Students are responsible for all costs incurred in the course of arranging and participating in international rotations. The PA Program reserves the right to mandate that a student return from an international site at any time during the rotation.
- The opportunity to do external or international rotations is a privilege and as such warrant's exemplary professionalism, attitude, and academic performance. Therefore, only students who are in good academic standing and have demonstrated exemplary professionalism, attitude, and academic performance will be permitted to do external or international rotations. Prior to pursuing an external elective rotation, a student must identify a preceptor and complete the required forms, [Student Request to Pursue an External Elective Rotation, and External Elective Rotation Information](#) found on (CANVAS), which will be reviewed by the Program Director for appropriateness, and to determine if the student is in good academic standing and exhibits the characteristics outlined above. Once approved, the student may proceed with the process.
- Students wishing to do an international elective rotation must obtain the instructions for application on the clinical platform or package in CANVAS specific to elective (e.g. CFHI). Students are responsible for following all directions and ensuring all documents are completed and returned to the Clinical Team by the indicated deadlines.
- External rotations: Applications for external rotations will be reviewed for approval once all components of the application are submitted. All requests and necessary paperwork for external rotations must be submitted to the Clinical Team **no less than three months prior to the start of the requested rotation date**.
 - All external elective rotations must be completely established and confirmed **no less than 30 business days** prior to the start of the rotation. In the event confirmation cannot be obtained, the student may be re-assigned to another clinical rotation and site.

11. **Health requirements:** Students must comply with all health requirements of each clinical site including drug screening where required. Students must be prepared to provide evidence of compliance including current health insurance directly to the clinical site if requested. Students are advised to work with the Office of Student Health as the PA Program does not have access to student medical records. Students are required to update all health information with Student Health Services prior to the start of the clinical year and annually thereafter.

12. **HIPAA:** Students must participate in all HIPAA training required by both Weill Cornell Medical College and each clinical site. Students are expected to comply with all HIPAA guidelines. Failure to comply with HIPAA guidelines may result in the imposition of fines and sanctions and may require meeting with the Committee on Promotions and Graduation to determine a course of action that

may include program dismissal. Any identified violation of patient privacy will result in a Professionalism Report.

13. **Cell Phone Use:** Students are advised to minimize the use of cell phones while on rotations. Students should not use their cell phones in patient care areas (including nurses' stations, group treatment sessions).
14. **Required training courses prior to clinical rotations:** Prior to starting clinical rotations, students must successfully complete American Heart Association BLS, American Heart Association ACLS, Infection Control, Child Abuse Reporting, WCM and NYP-required patient safety classes, online learning modules and discussion groups and other in-service training or course specific activities as directed by the Program.
15. **Additional Training Courses:** Students must participate in additional training classes as required by Weill Cornell Medical College and each clinical site. Failure to do so may result in removal from the rotation and necessitate the student repeat the rotation at the conclusion of the clinical year.
16. **Liability Insurance:** Cornell University provides general liability insurance for all students while they are acting within the scope of their duties, at the assigned clinical training site in an academic program of approved medical instruction. Coverage afforded by the University's professional liability policy covers students for approved on-site and off-site locations that are associated with affiliation. Off-site (external) locations must be approved by the Clinical Team in conjunction with the University Counsel's office prior to the commencement of the rotation. Any incident, either actual or alleged should be reported immediately to the PA Program office.

Please refer to the [Student Handbook](#) for additional policies below:

- Professionalism Policy and Protocols for Handling Lapses
- Social Media Policy
- The Americans with Disabilities Act (ADA)
- Artificial Intelligence and Digital Professionalism Guidelines

CLINICAL GRADING AND REQUIREMENTS

Please refer to the WCM MSHS for Physician Assistants [Student Handbook](#) under "Academics" and "Student Progress" for detailed information regarding academic and student progression policies.

The grading for all Supervised Clinical Practice Experience (SCPE) rotations will be as follows:

- During the clinical phase of the PA Program, a student must pass all components of each SCPE and all additional clinical-year coursework and requirements.
- Successful completion of ALL SCPEs are necessary for graduation from the PA Program. A failing grade in a rotation will require that the student successfully repeat ALL components of that rotation. A student may not fail and repeat more than a total of two rotations during the clinical phase. A failure of a repeated rotation will be considered unsatisfactory performance, and the student will be dismissed from the PA Program. Failure of a third rotation will be considered unsatisfactory performance, and the student will be dismissed from the PA Program. A student who has been dismissed from the Program is not permitted to participate in any subsequent clinical year activities.
- Successful completion of EACH clinical rotation is contingent upon achieving an overall passing

grade of 70% for the course and successful completion of each of the individual components of the rotation as outlined below. If a student receives a failing grade for a given rotation, they must successfully repeat ALL components of that rotation after the completion of the clinical year. If a student receives a failing grade they will be notified in writing and will be required to meet with the Clinical Team. All cases of SCPE failure will be brought before the Program Director and the Committee on Promotion and Graduation per the WCM MSHS for Physician Assistants [Student Handbook](#).

- If a student fails a clinical course (SCPE) the student must repeat the entire course (SCPE) at the conclusion of the clinical phase (unless this failure is the third failure whereby the above policy for dismissal will apply). Successful completion of the repeated (remediated) SCPE as defined in the Clinical Year Syllabus must be achieved before the student can receive a certificate of completion or granted a degree. The student is responsible for the completion of all assignments and evaluations related to the repeated SCPE.
- All SCPE EOR assignments must be completed and/or uploaded to CANVAS by **8am on EOR day** or for Blueprint assignment as specified below. Late submissions are subject to point deductions as outlined in each assignment below. Students will receive ONE warning for their first late submission of a required SCPE EOR assignment. Any subsequent late submissions will result in a **Professionalism Report**.

Preceptor Student Performance Evaluation (SPE)

- **30% of the overall grade** for all SCPEs
- The Preceptor of Record will be provided with an OASIS evaluation to complete for each student.
- At the discretion of the Preceptor of Record, students may ask that an evaluation also be sent to the preceptor with whom they spent the most time. This additional preceptor may only complete the SPE, if the program has verified their credentials as per ARC-PA standards.
- Students should not request copies of their completed evaluations from their preceptor.
- If more than one preceptor evaluation is submitted per a given SCPE, the scores will be averaged together.
- Students must obtain a passing score on the preceptor evaluation or average of evaluations in order to pass the rotation:
 - The Preceptor Evaluation is a Likert rating based on achievement of rotation specific learning outcomes:
 - Excellent (5 pts)
 - Very Good (4 pts)
 - Satisfactory (3 pts)
 - Below Average (2 pts)
 - Poor (1 pts)
 - The student is expected to demonstrate competency of each learning outcome by achieving a rating of Satisfactory (3) rating or better on each learning outcome. If a student receives a Below Average or Poor (2 or less) on a learning outcome, they will be required to remediate that learning outcome with the program. **Students receiving (2) or more ratings below Satisfactory will fail the rotation.**
- The grade for rotation is calculated from the numeric rating received. If a student receives all Satisfactory ratings, the average numeric score will be above 3.0 and marked as a PASS for rotation worth 30% of the final course grade.
- Failure to achieve a passing score on the preceptor evaluation will result in a failing grade for the SCPE and will necessitate that the student repeats the entire SCPE after the completion of the

clinical year.

- Any student who fails a SPE, will be considered at academic risk (see Clinical at-risk policy below) and meet with the Academic Affairs and Student Success Lead for focused remediation.
- The student must contact the Clinical Team if there are final evaluation concerns. Under no circumstances should a student approach the preceptor directly.
- A student who is permanently dismissed from a rotation will receive a grade of zero (0) for the preceptor evaluation. In this circumstance, the issues will be reviewed by the Clinical Team, Program Director and may necessitate a review by the Committee on Promotion and Graduation.

End of Rotation Specific Exams (*Required Rotations*)

- **Account for 50% of the overall grade** for the SCPE.
- All End of Rotation (EOR) exams are competency-based and follow the objectives provided in the course syllabus.
- Passing is defined as $\geq 67\%$ on required course examinations.
- After the completion of the EOR Examination, the student will be notified of their examination grade. If the grade is below 67%, the student receives written communication from the Clinical Team to follow the steps below:
 - Remediation of a failed exam must be completed within 7-10 days of the failed exam. Instructions for remediation will be given at the time a student is notified of the failing grade.
 - All students will receive a score report after exam scores are released. The score report provides the students with topic areas where they performed poorly, which allows for targeted review to improve knowledge and demonstrate application of such knowledge on the remediation exam.
 - If a student receives a grade of 67% or greater on the remediation exam, they will have successfully remediated the exam. Regardless of the remediation passing score, a grade of 67%, the minimum passing score, will be utilized for the examination component of the course grade.
 - Failure to successfully remediate the examination with a score of 67% or greater will result in a failing grade for the SCPE and will require the student repeat the entire rotation after the completion of the clinical year. The student will also be referred to the Committee on Promotion and Graduation.
 - If a student fails two (2) or more EOR exams (67%), they will be considered at “academic risk” (see Clinical At Risk Policy) and will be referred to the Academic Affairs and Student Success lead. A student will be placed on an academic improvement plan which may include additional test item practice, references, or academic support to improve their clinical performance.
 - Students scoring between 67-71% on two (2) or more EOR exams, will be considered at “academic risk” and be referred to the Academic Affairs and Student Success lead for academic counseling and/or tutoring to support student (See At Risk policy). Additionally, at any time, advisors may refer the student to the Student Success Lead for additional support and to assist in developing an individualized plan for the student.
 - If a student fails three (3) EOR exams, it is grounds for referral to the Committee on Promotion and Graduation. A student may **not** remediate more than three (3) EOR exams. Failure of the fourth (4) EOR exam is grounds for dismissal and the student will be referred to the Committee on Promotion and Graduation.
 - The grade policy for PAEA End-of-Rotation Examinations is outlined in Appendix A of this document.

Alternative Elective Projects (*Elective Rotations and Internal Medicine III*)

- An alternative project is required for All Elective Rotations and Internal Medicine III; it will account for 50% of the overall SCPE grade.
- The specific guidelines and grading rubric for the elective alternative projects can be found in CANVAS.
- Projects must be submitted to CANVAS by 8:00am the day of EOR meetings.
- Late submissions will result in a loss of 5 points from the final grade of the project for each day late.
 - Any student who fails to achieve a score of 70% or above on the elective project will be required to submit a revised project. Failure to achieve a score of 70% or above on the revised project will result in a failing grade for the rotation, will necessitate that the student repeats the entire rotation after the completion of the clinical year, and will be referred to the Committee on Promotion and Graduation.
 - Successful revision of a failing project will result in a grade of 70% for the paper and an overall grade of PASS for that given clinical rotation provided the student has successfully completed the remaining requirements for the rotation.

H & P and SOAP Note

- **Submission of 1 H&P and 1 SOAP Note will account for 20% of the overall course grade (10% for each note).** All notes must be submitted to CANVAS by 8am, prior to the start of the EOR meeting.
- H&Ps and SOAP notes are graded according to a rubric posted on CANVAS, with passing defined as $\geq 70\%$.
- Failure to turn in the H & P and SOAP NOTE by 8:00 am of the day of the end of rotation meeting will result in a 5-point deduction for each day late.
- The grade for that rotation will be an “Incomplete” until the H & P and SOAP notes are submitted.
- All submissions must be void of the patient’s ID or any identifying data. Any H & Ps or SOAP notes that contain patient identifying data will receive a grade of zero (0).
- See rubric posted on CANVAS.
-

Blueprint Assignment

- Required element of each SCPE course grade
- Students will be assigned a Blueprint assignment during week three (3) of every rotation.
- Students will receive 5 points for a completed submission.
- Failure to complete the assignment by the due date will be recorded as an “Incomplete” for rotation until the assignment is completed.

Mid-Rotation Feedback Form

Must submit to CANVAS by the **1st Day of the 3rd week of the SCPE.**

- Rotation specific forms are available on CANVAS.
- This form must be reviewed with and signed by the student and clinical preceptor as part of the performance appraisal process.
- Meetings should be logged in OASIS to complete this rotation requirement.
- Failure to complete this component of rotation on OASIS will result in an “Incomplete” until the information is properly submitted.

Documentation of Patient Encounters and Procedures

- A total of 45 patient /procedure encounters logs are required for each required rotation.
- A total of 20 logs are required for each elective rotation to satisfy all rotation requirements. The

specific encounters /guidelines for each rotation are found in the Rotation Syllabi and on OASIS.

- Failure to complete logging requirements will not satisfy the components of rotation and result in a grade of “Incomplete.”
- Students MUST review patient logs with preceptor during mid-rotation feedback meetings to ensure they are on target to complete rotation requirements.

Student Feedback

- Submission of student feedback is a required component of each rotation.
- Students must complete a Course Evaluation, Preceptor Evaluation and Site Evaluation for each SCPE.
- Failure to complete this component of rotation on OASIS will result in an “Incomplete” until the information is properly submitted.
 - All “Incomplete” grades in a given rotation must be satisfied before a student will be given an overall final grade for that rotation. Satisfactory completion of all “Incomplete” grades is necessary for graduation from the PA Program.

ROTATION PROGRESS VISITS

Rotation Progress Visits will take place throughout the clinical year.

- The specific guidelines for the rotation progress visits are outlined below.
- A member of the Clinical Team or designated faculty may make rotation progress visits during each rotation.
- Failure to be prepared for the Rotation Progress Visit per the guidelines below or to participate at the visit when assigned, will result in the loss of five (5) points from the overall grade of the clinical rotation.

Please refer to the WCM MSHS for Physician Assistants [Student Handbook](#) for information regarding the Summative Evaluation Policies and Practice process.

Please refer to the WCM MSHS for Physician Assistants [Student Handbook](#), section under Guidelines/Policies for Promotion and Graduation for details regarding remediation, deceleration, leave of absence, withdrawal, or dismissals.

The Clinical Team will be in communication throughout the clinical year with students via e-mail and/or telephone and/or text messages to monitor their progress and clinical experiences. The Clinical Team will also use these methods of communication to identify and address any issues that may arise.

In addition to the above methods of communication, each student will have ONE Rotation Progress Visit during the clinical year. The Clinical Team or designated faculty will make Rotation Progress Visits. Appointment for Rotation Progress Visit will be made the Monday of the second week of rotation following receipt of the Clinical Rotation schedules. Keep in mind these visits will occur throughout the clinical year and scheduling will be randomized. In the event that the student cannot be located on the day of the progress visit, they will be considered absent and in violation of the Attendance Policy (see above). At the site visit, the student should be prepared to:

1. Present a full patient case of an actual patient seen during the rotation including history, physical, assessment, work-up, plan and hospital course to date. All aspects of the history must be included: cc, HPI, PMH, allergies, FH, SOC HX, and ROS.

- The relevant findings of a problem-focused or complete physical exam should be included. Pertinent positive and negative findings are expected. Physical signs relating to the illness should be included.
- A complete differential diagnosis is expected. There should be at least three (3) different possibilities discussed. The student must be able to explain how each relates to the particular case.
- Discuss what lab tests were ordered on the patient. Each student must be able to explain why each test was ordered and be able to interpret all test results.
- The student must explain the final diagnosis that was given to the patient and why.
- Discuss the treatment plan. Students must give alternative treatments when applicable. Students must be prepared to discuss the pros and cons of the treatments and possible side effects.
- Discuss the patient's prognosis.
- The student is expected to discuss the patient and entertain questions from the faculty on-site and with the other students present at the meeting if applicable.
- Follow all HIPAA guidelines during the discussion.

The Clinical Team may also conduct unannounced site check-ins to engage with students and preceptors. In the event that a student is scheduled to be onsite (according to submitted rotation schedule) and is unable to be located, the student will be considered absent and in violation of the Attendance Policy (see above).

MID ROTATION FEEDBACK MEETINGS

[Mid-rotation Feedback Forms](#) are available on CANVAS for all students. Students must meet with their designated preceptor mid-way through the rotation to discuss their performance, and progress on completion of patient/procedure logging so that if any problems exist, they may be identified and rectified before the rotation is completed. These completed forms must be uploaded to CANVAS by the 1st day of the 3rd week of the rotation for review. In the event that a student is noted to have difficulty during the clinical year, the Clinical Team may REQUIRE submission of weekly mid-rotation evaluations to the Program. The first late submission of a Mid-rotation Feedback Form will result in a warning. Subsequent late submissions will result in a Professionalism Report being submitted. See course syllabus for rotation-specific Mid-rotation Feedback Forms.

PRECEPTOR EVALUATION FORMS

Preceptors must complete a required rotation - specific or elective rotation evaluation form for each student in OASIS. All forms are submitted via OASIS. This form provides an appraisal of the learning outcomes specific to rotation. Students must achieve a Satisfactory or higher rating in each learning outcome to pass rotation. Successfully passing the rotation is worth 30% of the grade for rotation. Preceptors provide valuable feedback and allows them to assess if the student meets the program competencies and appropriate professional identify formation. See course syllabus for rotation-specific SPEs.

END OF ROTATION MEETINGS

Students will return to the Program for End of Rotation (EOR) meetings on the last day of every clinical rotation unless otherwise specified in the Clinical Schedule or by the Clinical Team. Additional required EOR days may be scheduled throughout the clinical year. **Students are expected to remain at the Program for**

the entire day and no travel plans should be made prior to 7:00 pm on those days. Depending on rotation, EOR days may include:

- 1. EOR exams**
- 2. Submission of Alternative projects**
- 3. Submission of H&Ps and SOAP notes**
4. The Longitudinal Patient: Care and Management
5. Small group problem-based learning
6. Case-based learning activities
7. Presentations
8. PASM8000 Research Methods course lectures and participation
9. Career development or Job fair

PASM8000 Research Methods Course Lectures

Successful completion of all the requirements for the master's thesis research, including a successful oral defense and submission of a final thesis document in an acceptable format, is necessary for graduation from the PA Program.

- Mandatory course lectures will take place during the end of rotation meetings.
- A failed remediation is considered unsatisfactory performance in the PASM8000 Research Methods course and grounds for dismissal.
- See course syllabus for additional details.

CAREER DEVELOPMENT

As part of the preparation to begin a new career as a Physician Assistant, the program will provide workshops and host events for the following:

- Professional development
- Licensure
- CV writing and preparation
- Interviewing
- Credentialling
- Board Review
- Job fair

OSCE

Each student will be required to participate in one OSCE practical experience during the clinical year and additionally the final OSCE as part of the Summative Evaluation. The Summative OSCE is discussed separately in the [Student Handbook](#). Students must pass the OSCE with a grade of 70% or higher. If a student fails an OSCE, the student is offered one remediation (See Summative Remediation in [Student Handbook](#)). If the student does not pass the remediation, the student will be referred to the Committee on Promotion and Graduation and may be dismissed from the program. The OSCE will take place at the Clinical Skills Center of the Weill Cornell Medical College or other designated facility and utilize standardized patients. Additional information regarding the OSCEs will be made available prior to the scheduled event.

CLINICAL AT RISK POLICY

Students are considered at "academic risk" in the following circumstances during the clinical phase of the program:

Clinical Phase

- Any two (2) clinical phase assessment score 67-71%
- Any two (2) clinical phase assessment failures
- Course (SCPE) Grade 70-79%
- More than one learning outcome “below average or poor” on the preceptor evaluation
- ~~components~~
- Failed preceptor evaluation
- Any two (2) research assessment failures
- Any course failure
- At the direction of the program director or their faculty advisor

Summative Evaluation Assessments

- Failure of the End of Curricular assessment
- Failure of any section of the Technical Skills assessment
- Failure of the final OSCE
- Failure of the Thesis Defense

The following policy is used to identify “at risk” students during the clinical phase of the program.

1. The end-of-rotation examination grade will be reviewed by the Clinical Team within 24 hours of completion. If the End-of-Rotation Examination is below 67%, the student will have failed to pass that component of the rotation, and as per the Clinical Year Guidelines and Syllabus, will be required to review their performance review report of the initial exam and then take and pass a remediation examination.
 - a. If the End-of-Rotation Examination is 67-71%, the student’s academic advisor will be notified, and the student will be required to meet with their advisor to discuss their performance and recommend any additional resources needed.
2. At the completion of each rotation, the Clinical Team will review the preceptor’s evaluation of student performance within 30 days of the completion of the rotation, or as soon as the evaluation is completed (whichever occurs first). If any of the following are noted, the student’s academic advisor will be notified, and the student must meet with a member of the Clinical Team and/or their advisor, to discuss the evaluation and the rotation:
 - a. Any “Below Average” or “Unsatisfactory” entries
 - b. Two (2) or more “Average” entries
 - c. Concerning comments
 - d. Evaluation Average of 75% or less
3. After all components of each rotation are completed and evaluated, if the final average is 79% or less, the student will be required to meet with their advisor or a member of the Clinical Team, to discuss their performance and recommended for any additional resources that are needed.

The Program reserves the right to update the WCM Guidelines as well as additional documents related to Learning Outcomes and Instructional Objectives as needed. Students will be notified of all changes and will be provided updated objectives as appropriate.

STUDENT HOLIDAY CALENDAR 2026-2027

President's Day Holiday	Feb 16, 2026
Memorial Day Holiday	May 25, 2026
Summer Recess	May 25 – 29, 2026
Juneteenth Observed	June 19, 2026

Independence Day Holiday	July 3, 2026
Labor Day Holiday	Sept 7, 2026
Fall Recess	Sept 21 – 25, 2026
Thanksgiving Holiday	Nov 26 & 27, 2026
Winter Recess	Dec 21, 2026 – Jan 3, 2027
Martin Luther King, Day	Jan 18, 2027
President's Day Holiday	Feb 15, 2027

Students are not permitted to miss the day prior to a scheduled holiday or vacation, or the day following a holiday or vacation. Students are expected to be at their rotations until released by the preceptor. Students should not assume that a Holiday will include a concurrent weekend and must discuss the expectations with the preceptor prior to making any travel arrangements.

CLINICAL SCHEDULE CLASS OF 2027

**The last day of each rotation is routinely a mandatory "End of Rotation Meeting" day for the students.

***Additional call-back days may be scheduled as needed throughout the Clinical Year

Clinical Orientation: Jan 5 - 30, 2026

Rotation #1	February 2, 2026 – February 27, 2026
Rotation #2	March 2, 2026 – March 27, 2026
Rotation #3	March 30, 2026 – April 24, 2026
Rotation #4	April 27, 2026 – May 22, 2026

Summer Break: May 25 - 29, 2026

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Rotation #5	June 1, 2026 – June 26, 2026
Rotation #6	June 29, 2026 – July 24, 2026
Rotation #7	July 27, 2026 – August 21, 2026
Rotation #8	August 24, 2026 – September 18, 2026

Fall Break: September 21 - 25, 2026

Rotation #9	September 28, 2026 – October 23, 2026
Rotation #10	October 26, 2026 – November 20, 2026
Rotation #11	November 23, 2026 – December 18, 2026

Winter Break: December 21, 2026 – January 1, 2027

Rotation #12	January 4, 2027 – January 29, 2027
Rotation #13	February 1, 2027 – February 26, 2027
Rotation #14	March 1, 2027 – March 26, 2027
Rotation #15	March 29, 2027 – April 23, 2027

Board Review & Final Clinical Activities	April 26 – May 14, 2027
Graduation	Thursday, May 20, 2027

APPENDIX A: Grading Calculations for PAEA End-of-Rotation Examinations

1. Student scaled score obtained from PAEA
2. Calculation of Z-Score (Student Scaled Score – PAEA National Mean)/PAEA National Standard Deviation
3. Z-Score converted to % score, based on table below.

Minus 1.51 and less	66	Minus 0.2 – 0.39	77	1 – 1.5	89
Minus 1.4 – 1.5	67	Minus 0.01 – 0.19	79	1.51 – 1.8	91
Minus 1.2 – 1.39	69	0 – 0.4	83	1.81 – 2	93
Minus 0.9 – 0.19	71	0.41 – 0.6	85	2.01 – 2.5	95
Minus 0.7 – 0.89	73	0.61 – 0.8	86	2.51 – 3.0	97
Minus 0.4 – 0.69	75	0.81 – 1.0	87	>3	100