



Weill Cornell Medicine

Master of Science in Health Sciences for Physician Assistants

**CLASS OF 2027
STUDENT HANDBOOK**

January 2026

ADMINISTRATIVE OFFICES / CONTACT INFORMATION

**Weill Cornell Medicine
Master of Science in Health Sciences for Physician Assistants**

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Preface

This edition of the Student Handbook is intended to provide general guidance to students regarding the organization and policies of the University, the Medical College, the Graduate School and the Weill Cornell Medicine MSHS for Physician Assistants (PA Program). Although a good faith attempt has been made to provide accurate information, this Handbook does not constitute a complete or legally binding statement of rights and responsibilities. Policies and procedures, as well as instructor assignments and curriculum, are subject to change. When circumstances require assurance of completeness or validity of information, the office that is the authority on that matter should be consulted. The faculty and staff of the PA Program will also be pleased to assist students in such consultations.

All academic policies shall be in effect for all settings, whether instruction is provided in person, remotely, or in a hybrid fashion combining in person and remote learning. Please contact the PA Program administration if the application of any specific policy to remote/hybrid situations remains unclear.

All information contained in this Student Handbook is subject to change. The PA Program staff are here to assist any student with further clarification and/or questions regarding Weill Cornell and/or the PA Program. Although every effort has been made to ensure the accuracy of the information presented herein, the PA Program is not responsible for typographical errors. Students will be notified in writing of any errors as soon as they are discovered.

University policy actively supports equality of educational opportunity. No person will be denied admission to the PA Program on the basis of any legally prohibited discrimination involving, but not limited to, race, color, creed, religion, national or ethnic origin, sex, sexual orientation, age, gender identity or disability. Echoing our program mission statement, the WCM PA Program strives to admit and educate highly competent, compassionate, and culturally sensitive physician assistants drawn from diverse backgrounds and experiences.

About the Institution

Weill Cornell Medicine

Weill Cornell Medicine (including the Weill Cornell Graduate School of Medical Sciences and Weill Cornell Medical College, as well as the Weill Cornell Physician Organization) provides top-quality education, outstanding patient care, and groundbreaking research. The institution is renowned for its commitment to "Care. Discover. Teach." Weill Cornell Medicine has evolved in response to contemporary challenges and opportunities, while advancing steadily in its mission to improve human health, both in New York and around the world.

Weill Cornell Medical College

Founded in 1898 and affiliated with what is now NewYork-Presbyterian Hospital since 1927, Weill Cornell Medical College is among the top-ranked clinical and medical research centers in the country. In addition to offering degrees in medicine, Weill Cornell also has PhD programs in biomedical research and education at the Weill Cornell Graduate School of Medical Sciences, and with neighboring Sloan-Kettering Institute and The Rockefeller University, has established a joint MD-PhD program for students to intensify their pursuit of Weill Cornell's triple mission of education, research, and patient care.

Weill Cornell Medical College is divided into 24 basic science and patient care departments that focus on the sciences underlying clinical medicine and/or encompass the study, treatment, and prevention of human diseases. In addition to its affiliation with NewYork-Presbyterian Hospital, Weill Cornell Medical College and the Weill Cornell Graduate School of Medical Sciences maintain major affiliations with Memorial Sloan-Kettering

Cancer Center, The Rockefeller University, the Hospital for Special Surgery, as well as with the metropolitan-area institutions that constitute NewYork-Presbyterian Healthcare Network. Weill Cornell Medical College and the Weill Cornell Graduate School of Medical Sciences are accredited by the Liaison Committee for Medical Education of the American Medical Association and the Association of American Medical Colleges.

Master of Science in Health Sciences for Physician Assistants Program (PA Program)

The Weill Cornell Medicine MSHS for Physician Assistants (PA Program), in its earliest model, was begun at The New York Hospital-Cornell Medical Center in 1973 as a Surgical Assistant (SA) Program for the purpose of training qualified individuals to assist in the care of the surgical patient. While our surgical curricular content remains strong, primary care training is paramount to all students, preparing them for practice in any field of healthcare delivery. As a result, our students are prepared to participate in direct patient care as integral members of any medical or surgical healthcare team. The program is comprised of three phases: a classroom and technical skills development pre phase, a preceptor guided clinical phase, and a research phase culminating in the development of a thesis and oral defense.

The twenty-seven month curriculum is conducted under the auspices of the Weill Cornell Medicine. The PA Program is registered with the New York State Education Department. The Accreditation Review Commission on Education for the Physician Assistant, Inc. (ARC-PA) has **granted Accreditation-Continued status to the Weill Cornell Medicine Master of Science in Health Sciences for Physician Assistants Program** sponsored by **Weill Cornell Medical College**. Accreditation-Continued is an accreditation status granted when a currently accredited program is in compliance with the ARC-PA Standards.

Accreditation remains in effect until the program closes or withdraws from the accreditation process or until accreditation is withdrawn for failure to comply with the Standards. The approximate date for the next validation review of the program by the ARC-PA will be **March 2033**. The review date is contingent upon continued compliance with the Accreditation Standards and ARC-PA policy. The program's accreditation history can be viewed on the ARC-PA [website](#).

Upon successful completion of all program requirements, Cornell University awards the Master of Science in Health Sciences degree. Graduates are then eligible to take the Physician Assistant National Certifying Examination (PANCE) administered by the [National Commission on Certification of Physician Assistants \(NCCPA\)](#).

The Weill Cornell Medicine MSHS PA Program is part of the Weill Cornell Medical College and as such, many of the policies set forth in this document are in accordance and subject to its guidelines as well as those of Cornell University.

Affiliations of Weill Cornell Medicine Physician Assistants Program

In order to provide its students with the broadest experiences in patient care, the Medical College and the PA Program are affiliated with a number of teaching hospitals that provide primary, secondary, and tertiary care to the Greater New York City community and residents of the tri-state area of New York, New Jersey and Connecticut. Many of the affiliated institutions are world-renowned leaders in their fields, and provide specialized care to patients from other states and countries

On December 31, 1997, the New York Hospital merged with Presbyterian Hospital, a full asset merger of two world-class academic hospitals. While this merger expands the range of clinical services that patients in the New York area and beyond can access, the two principal medical schools, the Joan and Sanford I. Weill Medical College of Cornell University and the Columbia University College of Physicians and Surgeons remain separate institutions with their own curricula for their medical students. NewYork-Presbyterian Hospital has an extensive

network of affiliate institutions that now comprise the NewYork-Presbyterian Healthcare Network.

Some of the affiliate institutions in which Weill Cornell Medicine Physician Assistant students may gain aspects of their clinical training include:

NewYork Presbyterian Hospital-Weill Cornell
Presbyterian Hospital-Columbia
NewYork-Presbyterian Hospital-Queens
Presbyterian Hospital-Lower Manhattan
NewYork-Presbyterian Hospital-Brooklyn Methodist
Behavioral
Health

Memorial Sloan-Kettering Cancer Center NewYork-
The Hospital for Special Surgery
Lincoln Medical and Mental Health Center NewYork-
Maimonides Medical Center
NewYork-Presbyterian Hospital-Westchester

NewYork-Presbyterian Hospital - Cornell Campus

Founded in 1771 under a charter granted by King George III of England, The New York Hospital was the first hospital in the city and the second in the country. Originally built downtown, the hospital has been located adjacent to the Medical College since 1932. A nonprofit, voluntary institution maintained by The Society of the New York Hospital, it has cared for more than five million patients since its founding. Three hospitals have merged with The New York Hospital over the years: The Lying-In Hospital, the Manhattan Maternity and Dispensary, and the New York Nursery and Child's Hospital.

The New York Hospital was the first hospital in the United States to care for the mentally ill. Today, mental and emotional illnesses are treated at the Payne Whitney Psychiatric Clinic, an integral part of The New York Hospital complex, and the Westchester Division of The New York Hospital, in White Plains, New York.

In 1927, the hospital integrated with Cornell University Medical College through the establishment of The New York Hospital-Cornell Medical Center. The agreement joined the facilities of the two institutions and provided for cooperation in the advancement of patient care, medical education, and scientific research.

Every clinical department is staffed by salaried faculty members, including the chief, who devote their full time to the service of the College and the Hospital. Other members of the faculty devote part of their time to private practices.

NewYork-Presbyterian Hospital has formed the NewYork-Presbyterian Healthcare System, a health care provider network which includes hospitals, ambulatory care sites, home care agencies and long-term care facilities in the New York metropolitan area.

NewYork-Presbyterian Hospital - Columbia Campus

The Columbia-Presbyterian site of the combined facility provides a learning experience for Weill Cornell students. Among many world-class educational opportunities at the Presbyterian campus is "The Cardiac Care Center," the largest heart transplant program in America

NewYork-Presbyterian Queens

NewYork-Presbyterian Queens is an acute-care institution providing primary and tertiary care to an urban population that reflects the remarkable ethnic and cultural heterogeneity of New York. It is a major trauma center, with the largest dialysis unit on the East Coast and one of the most advanced radiotherapy services in the United States. The Hospital sponsors the Silvercrest Extended Care Facility for the care of the chronically ill.

The Hospital has a twenty-year tradition of training students and residents in all the major clinical services. The

hospital, originally named Booth Memorial Hospital, opened in 1957. It rapidly expanded to meet the needs of the community and became a teaching center with affiliations to major university medical centers.

In December 1992, The New York Hospital assumed sponsorship. In 2015, the hospital was renamed NewYork-Presbyterian Queens, and it is now affiliated with the Weill Cornell Medical College.

NewYork-Presbyterian Lower Manhattan Hospital

Lower Manhattan Hospital is a wholly owned hospital of NewYork-Presbyterian and provides state-of-the-art healthcare services to people who work and live in Lower Manhattan.

As a campus of NewYork-Presbyterian, Lower Manhattan Hospital offers a comprehensive range of services to patients in a caring, culturally sensitive environment with access to all of the specialties and resources of a major academic medical center. The Hospital is affiliated with Weill Cornell Medical College and physicians are credentialed members of its faculty. Lower Manhattan Hospital is committed to pursuing clinical excellence and extending the many benefits of the Medical College's groundbreaking research programs to its patients.

The only acute care facility serving lower Manhattan, this campus is vital to meeting the health care needs of millions of residents, workers, and tourists. The Emergency Medical Services and state-of-the-art Emergency Medicine Department continue to provide outstanding care, and the Wellness and Prevention Center offers a wide range of screening and treatment programs in the areas of women's health, cardiovascular health, breast health, and preventive medicine.

NewYork-Presbyterian Brooklyn Methodist Hospital

A voluntary, acute-care teaching hospital, NewYork-Presbyterian Brooklyn Methodist Hospital endeavors to provide excellent health care services in a compassionate and humane manner to the people who live and work in Brooklyn and its surrounding areas.

As a major teaching hospital, with nine graduate medical education residency programs and six fellowship programs, NewYork-Presbyterian Brooklyn Methodist Hospital is equipped with highly advanced medical equipment and technology. Its staff of physicians, nurses, advanced practice providers, therapists, technologists, and other dedicated employees stand behind the excellent reputation NewYork-Presbyterian Brooklyn Methodist Hospital has earned during the 135 years it has served the local community.

Memorial Sloan-Kettering Cancer Center

Memorial Sloan-Kettering Cancer Center is the world's oldest and largest privately operated center devoted to prevention, patient care, research, and education in cancer. The prototype of the National Cancer Institute-designated comprehensive cancer centers, Memorial Sloan-Kettering has two operating organizations: Memorial Hospital, which provides inpatient care, newly expanded outpatient services, an extensive array of specialized and support services, and a broad program of clinical research; and the Sloan-Kettering Institute, with some 80 laboratories dedicated to biomedical investigation. Programs of basic and clinical research at

Memorial Sloan-Kettering aim to advance the understanding of the nature and the fundamental causes of cancer, and to improve the means for prevention, diagnosis, and treatment. The close collaboration between the Center's scientists and clinicians facilitates the rapid translation of results from the laboratory to the patient's bedside.

Originally established in 1884, Memorial Hospital has been affiliated with the Medical College since 1914. Many staff members of Memorial Hospital and Sloan-Kettering Institute hold faculty appointments either in the Weill Cornell Medical College or in the Graduate School of Medical Sciences, which offers doctoral degree programs through the Sloan-Kettering Division.

The Hospital for Special Surgery

The Hospital for Special Surgery (HSS), founded in 1863 by the New York Society for the Relief of the Ruptured and Crippled, was the first institution in the United States dedicated to the treatment of orthopedic conditions. Today it is a leader in the fields of orthopedics, rheumatology, and sports medicine. Affiliation with The New York Hospital-Cornell Medical Center began in 1949.

The hospital cares for well over 6,000 inpatients a year, and receives over 85,000 outpatient visits annually to HSS physicians and in more than 30 subspecialty clinics. It performs 25% of all joint replacement surgery in New York City. The hospital also maintains the School of Practical Nursing, an Osteoporosis Center, the International Center for Orthopedics and Rheumatology, and the country's only hospital-based computer-aided design and manufacturing facility for the custom design of artificial joints.

In addition to patient care and medical education, the hospital's research division investigates the causes and prevention of orthopedic and rheumatic diseases, and develops improved treatment of these diseases. HSS operates one of only 13 Multipurpose Arthritis Centers (MAC) in the country, and is a recipient of one of only two SCOR (Specialized Center of Research) grants for the study of lupus.

Lincoln Medical and Mental Health Center

Lincoln Medical and Mental Health Center is an acute care hospital providing care for the predominantly Latino residents of the South Bronx, an area with the highest incidence of asthma and of tuberculosis in New York City. Lincoln is a member of the New York City Health and Hospitals Corporation and is one of eleven public hospitals serving the metropolitan New York community.

Lincoln is best known for operating the busiest emergency room in New York City. With over 170,000 visits, it may even see more visits than any other emergency room in the nation. Staffed by full-time emergency medicine physicians, Lincoln also has an excellent emergency medicine residency training program. It is a level one trauma center with a surgical fellowship in critical care.

In addition to the acute care services provided by the emergency room, Lincoln offers a broad array of primary care and specialty services for adult and pediatric patients, with 400,000 outpatient visits per year. Lincoln has a Comprehensive Care for Patients with Asthma Clinic, serving thousands of patients annually.

NewYork-Presbyterian Westchester Behavioral Health

NewYork-Presbyterian Westchester Behavioral Health is located in White Plains, New York—with specialized psychiatric programs to meet the needs of adults, adolescents, and children from all backgrounds offering services across the continuum of care (inpatient, partial hospitalization, and outpatient psychiatric programs).

Maimonides Medical Center

Maimonides Medical Center is at the forefront of innovation in medical science and is the largest hospital in Brooklyn – the most populous borough in New York City. The Maimonides Heart & Vascular Institute ranks among the top 1% of hospitals in the US for heart attack and heart failure patient outcomes. The Surgery Department at Maimonides has experts in all major specialties. Its Cardiac, Neuro, Orthopedic, Thoracic and Urologic surgery divisions are among the best in the nation, with superb Anesthesiology Services, advanced imaging technology and next-generation Operating Rooms. The accredited Maimonides Cancer Center is the only full-service center in Brooklyn, providing all treatment modalities and specialties. Its highly regarded Breast Center is home to a Breast Imaging Center of Excellence. Maimonides is a state-designated Regional Perinatal Center, accepting high-risk maternity patients. More babies are born at Maimonides than at any other hospital in New York State. The Children's Hospital at Maimonides is the only one in Brooklyn and provides all major pediatric specialties. Care is provided in a modern Inpatient Unit, advanced Pediatric ICU, and accredited

Pediatric Emergency Center. Maimonides Medical Center is continuously enriching and expanding services to meet the growing needs of the residents of Brooklyn.

Other Facilities

The PA Program utilizes many other facilities throughout the metropolitan area. The locations are spread through the five boroughs (Manhattan, Bronx, Brooklyn, Queens, Staten Island) and give the Physician Assistant student exposure to a wide variety of patient populations.

Weill Cornell Medicine
Medical Education, Faculty and Staff Directory

Stephen and Suzanne Weiss Dean, Weill Cornell Medicine Provost for Medical Affairs, Cornell University	Robert A. Harrington, M.D.
Senior Associate Dean for Education, Weill Cornell Medicine	Joseph Safdieh, M.D.
Associate Dean, PA Studies and Program Director	Kelly E. Ragusa Porta, DMSc, PA-C
Medical Director	William Levine, M.D.
Associate Program Director, Admissions Lead	Christine Zammit, PhD, PA-C
Director of Curriculum	Gina Pontrelli, DHSc, PA-C
Foundational Curriculum Lead	William J. Ameres, M.S., PA-C
Research Curriculum Lead	Maria E. Compte, M.D., MPH & TM
Clinical Curriculum Co-Lead	Shari A. LeFauve, M.S., PA-C
Academic Affairs and Student Success Lead	Lisa B. Doron, M.S., PA-C
Clinical Curriculum Co-Lead	Carol Fiore, DMSc., PA-C, ATC
Student Affairs Lead	Aisha Khalid Khan, DMSc., PA-C
Program Manager	Suzanne Chouman, M.S.
Admissions and Student Services Coordinator	Alexis Blount
Preclinical Support Coordinator	Ann Worrell
Clinical Support Coordinator	Sahai Douglas
Receptionist and Administrative Specialist to Program Director	Cristina Gutierrez
Learning Specialist	Jennifer Patel, PhD

Emergencies, Safety, and Security Policies

Reporting Crimes, Emergencies, and Suspicious Behavior

Incidents of crime and other serious emergencies which require immediate assistance and which occur on the Medical College campus should be reported to the New York City Police Department (“NYPD”) by dialing 911 and NewYork-Presbyterian Hospital Security (“NYPH Security”) at (1-212-74)6-0911. Reports may be made on a confidential basis. An operator will ask you some routine questions such as your name, address, call-back number, and the nature of the incident you are reporting. Do not hang up until the operator tells you he or she has all the essential information. Information you can provide may be crucial to the safety of everyone involved in the call. If you believe you are in a hazardous situation and cannot remain on the call long, tell the operator this at the beginning of your call. The operator can then request the minimum information needed to get you help, and you can get to a safe place. The operator will need to know where you are and what happened so the appropriate help can be sent quickly. As difficult as it can be in an emergency, try to remain calm. It can be difficult to understand what a caller is saying for a variety of reasons, including language barriers and bad telephone connections. Strong emotions make effective communication even harder.

Additionally, students should report any crimes or other security concerns involving the Medical College and its students that occur off campus to NYPH Security (212) 746-0911. Such information assists the Medical College with reporting and notification requirements that help ensure the safety of the Medical College community.

All students should be familiar with the [Emergency Information](#) website. A link to this site is included as an app on all WCMC tagged phones, computers, and iPads. It contains quick, easy-to find, easy-to-read links to medical college policies and resources for mental health, medical health, sexual assault, weather emergencies, etc.

Additional Emergency Contacts

From on campus locations simply use the final 5 digits

Medical College		
Facilities Management & Campus Operations (facilities emergencies)	(1-212-74)6-2288	
Emergency repairs in campus housing	(1-212-74)6-1001	Monday-Friday, 9AM-5PM
	(1-212-74)6-1009	other times
Environmental Health & Safety (fire, chemical, biological, and radiological releases)	1-646-WMC-SAFE (962-7233)	any time
NewYork-Presbyterian Hospital-New York Weill Cornell Campus		
Security	(1-212-74)6-0911	any time
Fire	(1-212-74)6-FIRE (3473)	any time
Facilities Operations (facilities emergencies)	(1-212-74)6-1920	
Environmental Health & Safety	(1-212-74)6-1926	
Rape crisis program (emergency department)	(1-212-74)6-5050	
Counseling (social work)	(1-212-74)6-4320	
Switchboard	(1-212-74)6-5454	any time
Administrator On Call	(1-212-74)6-5020	any time
570 Lexington Avenue		
Front Desk Security	1-212-583-0471	

Weill Cornell Medicine Administrators

From on campus locations simply use the final 5 digits

Students may also contact these administrators to share any personal concerns:

Associate Dean, PA Studies and Program Director Kelly E. Ragusa Porta, DMSc, PA-C	1-646-962-7277
Assistant Dean, Assistant Dean, Student Professional Development Dana Gurvitch, M.D.	1-212-746-2916
Senior Associate Dean for Education Joseph Safdieh, M.D.	1-646-967-5026

Emergency On-Call Policy

PA Program Faculty-on-Call: On weekends and in the evenings, the Program office has voice mail. In case of an emergency *outside of normal PA Program office hours*:

- **Preclinical students** should contact the Preclinical Curriculum Lead, William Ameres at 646-962-7283.
- **Clinical students** should contact the Clinical Curriculum Co-Lead, Shari LeFauve at 646-962-7605.

If the student is unable to reach the Leads, the student should contact the Program Director, Dr. Kelly Porta at 646-962-7334 or 516-375-5055.

Emergency Planning and Preparedness

[Emergency Information | Weill Cornell Medicine](#) Emergency Planning and Preparedness resources are available to all students through the WCM Emergency Information website (emergency.weill.cornell.edu). [Student Resources](#), [Emergency Contacts](#) and [Response Guides](#), along with procedures for reporting emergencies.

Emergency Alerting Policies

Campus operating status of Emergency alerts are posted to the [Emergency Information](#) web site at emergency.weill.cornell.edu and may also be heard by calling 1-212-746-WCMC (9262).

[Response Guides](#) for specific types of emergencies are available at the [Emergency Information](#) web site. emergency.weill.cornell.edu/guides.

In an emergency, the Medical College will notify students using the [Weill Cornell Alert \(WCA\) Emergency Notification System \(ENS\)](#). Weill Cornell Alert can send simultaneous notifications to all students or select groups via email, cell phone, and text messaging.

All students are responsible for ensuring their contact information is accurate in the ENS. Further information and instructions to update contact information are at: emergency.weill.cornell.edu/UpdateWCA. Students may also receive emergency alerts from New York City by registering for Notify NYC at [Home | Notify NYC](#).

Suspicious Behavior

Students should report suspicious behavior to the NYPD and NYPH Security. It is important to remember that behavior, not a person, is suspicious. Signs of behavior that might be suspicious are:

- A person running and looking about furtively, as if he or she were being watched or chased.
- A stranger carrying property at an unusual hour or location, especially if the items are stereo equipment, office machinery, or a locked bicycle.
- A person going door-to-door in an office or residential building.
- Any person forcibly entering a locked vehicle or building.
- Transactions being conducted from vehicles, especially near schools or parks.

- A person or persons sitting in a parked car and closely scanning the area.
 - A person exhibiting unusual mental or physical symptoms.
 - Unusual noises, including gunshots, screaming, sounds of fighting, barking dogs, or anything suggesting danger or illegal activity.
- Students should report suspicious persons without proper identification in Medical School facilities to NYPH Security.

Crime Prevention Tips

- Keep yourself, your residence, your office, and your car safe by incorporating safe behavior into your daily routine.
- When you leave your room or office, even for a moment, always keep your doors and windows locked.
- Never leave your purse, wallet, book bag, notebook computer, or other property unattended, even for a moment.
- Be careful when people stop you for directions or money. Always reply from a distance; never get too close to the car or the person. If you feel uncomfortable about someone near you, go somewhere with people around and call the police or NYPH Security.
- If you are out after dark, use only well-lit routes and travel in groups when possible. Avoid construction areas, particularly sidewalks shadowed by scaffolding.
- Walk with the appearance of confidence. Make eye contact with passersby, and keep a firm grip on your property.
- Have keys ready so you can quickly get into your car or home.
- Although it seems courteous to open doors for others, especially persons carrying groceries or packages, do not open doors for strangers.

Campus Security Report

In addition to the information contained above, The Medical College and Graduate School of Medical Sciences annually distribute a campus security report to all students and employees containing descriptions of policies and procedures for reporting crimes and emergencies and campus crime data. The report lists telephone numbers and contact information for security in campus facilities and residences. Policies and procedures for handling sex offenses and programs for victims are also described. On request, prospective and current students and employees can receive the report from the Admissions Office or the Office of Human Resources. Upon request, prospective and current students and employees can receive the campus security report specifically pertaining to the PA Program at 570 Lexington Avenue from the Admissions Office or the Office of Human Resources. The report is available here: [Campus Security Report](#)

The report contains information about all Weill Cornell Medicine residential and non-residential buildings, including the dormitory and classroom spaces used by students of the PA Program.

Campus crime statistics can be accessed at ope.ed.gov/campussafety. The Advisory Committee on Campus Security will also provide upon request all campus crime statistics as reported to the United States Department of Education. The Advisory Committee on Campus Security may be reached by e-mail at CampusSecurity@med.cornell.edu.

Fire Safety

Fire safety includes fire alarm activation response, fire emergency response, emergency evacuation, and fire prevention. WCM develops and reviews guidelines and procedures addressing these topics, provides training programs and exercises to increase awareness amongst faculty, students, and staff; and collects data on the

effectiveness of the various fire safety program components.

Most areas in Medical College buildings are monitored by an early warning fire detection system and protected by fire sprinklers. Upon the activation of any fire sprinkler or fire detection or alarm-initiating device, there is an audible and visual indication throughout the building that the fire alarm has activated, while simultaneously notifying the NYC Fire Department of the potential fire emergency. Students must respond to all fire alarm activations and assume that each activation is a real fire emergency. Ignoring a fire alarm activation is against Medical College and NYC guidelines governing fire alarm activation response. Battery operated carbon monoxide detectors are in each Lasdon House Apartment to meet NYC Local Law 191 for buildings that contain fossil fuel burning equipment. These devices are not integrated into the fire alarm system and act independently. When in alarm, residents must evacuate and notify the housing desk attendant.

Every student is responsible for following guidelines governing Fire Prevention including:

- controlling the accumulation of trash and other combustibles,
- complying with the Medical College “No Smoking” policy,
- avoiding the use of unapproved open flames such as candles, canned cooking fuels, and propane gas; and
- using caution when heating and cooking food such as using microwaves and toasters.

Fire Safety Rules

Students must follow all WCM requirements and guidelines related to fire safety and fire prevention. Students may access this information on the Environmental Health & Safety website at: ehs.weill.cornell.edu/

Specific fire safety topics and building-specific evacuation procedures may be found in The [Fire Safety and Emergency Action Plan](#).

All students must follow instructions of WCM faculty and staff during fire alarm activations, fire drills, and other emergency situations. [Fire Safety Procedure](#)

570 Lexington Avenue Building

BUILDING-SPECIFIC FIRE SAFETY AND EVACUATION PROCEDURES GENERAL INFORMATION

Building Address: 570 Lexington Avenue, New York, NY 10022

Fire Alarm System: Fire Alarm System with Two-Way Voice Communication

Evacuation Type:

- Partial Evacuation - Fire Floor and Floor Above Evacuation Routes: Vertical Evacuation A Stairwell - (exits to 51 street) B Stairwell - (exits to lobby)
- If needed to evacuate building: Street level in front of 575 Lexington Avenue; if need to evacuate area report to the Education Center at 1300 York Ave

Assembly locations: Primary - 575 Lexington Ave (Street Level) Secondary - 1300 York Ave (Education Center)

If you discover fire or visible smoke, immediately follow the RACE procedure: R.A.C.E. is an acronym for the general procedures all occupants should follow in the event of a fire, visible smoke, or fire alarm activation. Follow R.A.C.E. procedure:

R – RESCUE: Remove occupants from the affected area. Provide assistance to others as appropriate. For patient care areas, rescue those in immediate danger from fire or smoke.

A – ALARM: Report the fire to the other occupants in the immediate vicinity by shouting “CODE RED” or “FIRE.” Activate the nearest fire alarm pull station to alert building occupants of the fire. Occupants in NYP buildings must call the NYP fire hotline at 746-FIRE (3473).

C – CONFINE: Close all doors, including interior doors, to the area to confine the fire and minimize the risk of the

fire spreading to the building. Damp towels should be placed at the base of the door to minimize smoke entering an area where occupants or patients are unable to evacuate.

E – EVACUATE / EXTINGUISH: In the event of a fire or fire alarm activation, occupants must exit the premises as specified in the Building-Specific Fire Safety Procedures or EHS-approved local fire safety plan. Fire extinguishers should only be used by trained personnel to extinguish small fires, and only after the other R.A.C.E. procedures have been fully implemented.

IF THERE IS A FIRE ALARM ACTIVATION:

Determine if you are on (1) a Fire Evacuation Floor or (2) an Alarm Floor.

- Horn and strobe activation on your floor - Fire Evacuation Floor. ▪ Advisory tone only (no strobe activation) on your floor - Alarm Floor. Fire Evacuation Floor Response - Fire alarm activation is on your floor or the floor below.
- Evacuate immediately if you see fire or smoke, utilizing the evacuation procedures identified above. Otherwise, all personnel must immediately re-locate to their designated evacuation assembly areas.
- Listen for public address system announcements and/or floor Fire Wardens for instruction. The public address announcement will state the location of the fire alarm activation and the appropriate evacuation response.
- Evacuate as directed. Alarm Floor Response - Fire alarm activation in building but not on your floor or the floor below.
- Listen for further announcements over the public address system and/or Fire Wardens.
- Continue your normal work duties.
- Do not evacuate unless you see smoke or fire or are otherwise instructed by the Fire Department, Fire Wardens, or over the public address system. If instructed to do so, evacuate as directed.

Questions: Direct questions concerning fire safety to Environmental Health & Safety. See directory in this handbook. In the event of a fire alarm, obey all commands. If there is a fire in your office building when you are on the premises during the off hours:

- Evacuate the area if you discover smoke or fire
- Immediately activate the building's fire alarm
- Then call the fire department
- Feel a door before opening it, if it is hot, do not open it
- Close, but do not lock all doors behind you
- Do not turn back for any personal belongings
- Do not use elevators
- Finally, always remember that smoke rises – so keep low!!!
- Know at least two exits on your floor

If asked to exit the building, proceed directly to the lobby of 570 Lexington Ave for further instructions.

Residential Fire Safety Plans

[Residential Fire Safety Plans](#) are updated annually and re-distributed to residents during National Fire Prevention Week in October. These plans are also available on the EHS website:

ehs.weill.cornell.edu/residential-fire-plans

Tampering with Fire Alarms and Malicious Alarm Activations

Tampering with fire safety equipment such as fire extinguishers, or fire protection system devices including smoke detectors and sprinkler heads is unlawful and subject to disciplinary action by the Medical College.

Transmission of a false fire alarm is punishable as a Class A Misdemeanor under New York State Penal Law

§240.50. Violators of this law will also be subject to disciplinary action by the Medical College.

PA Program Policies and Practices

Activity in the PA Program community for students is more than an academic commitment; it connotes a willingness by the student to act as a responsible medical professional. Participation in the PA Program community by faculty is more than instructing the next generation of medical professionals; it is a commitment to serve as mentor and role model of the standards of the medical profession. Inherent in the concept of a medical professional is an underlying integrity and ethical foundation that defines the tone and culture of the teacher-learner environment at the PA Program.

This section describes some key Program operational policies all program participants are expected to abide by while engaged in WCM PA Program sponsored activities.

1. All program policies apply to all students, principal faculty, and the program director during any and all Weill Cornell Medicine 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 Team to ensure compliance with WCM PA Program policies. Any rotation specific requirements will be posted to *Student Site Information* on the Programs Clinical Course online platform.
2. The program will not require any student at any time to provide or solicit clinical sites or preceptors. (see the Programs Clinical Guidelines and Syllabus for aligned information).
3. Students enrolled in the PA Program will not be asked to perform tasks involved in the standard operations of the program that are the responsibility of faculty and/or staff, and students will not be required to work for the program in any capacity.
4. Students will not substitute for instructional faculty, clinical, or administrative staff at any point during their time in the program.
5. All PA students are required to clearly identify themselves at minimum, by use of Program-supplied name tags, throughout the program and in all clinical settings to distinguish themselves from other health profession students and practitioners.
6. Students must comply with the policy below on immunization and health screening based on current Centers for Disease Control and Prevention recommendations for health professionals and on New York State mandates.
7. 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 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. [Weill Cornell Travel Medicine \(WCTM\) | Patient Care weillcornell.org/wctm](#). For country specific medical information: www.cdc.gov/travel. For general immunizations schedules for clinicians evaluating what vaccines are needed for the general public: [Immunization Schedules for Healthcare Professionals | CDC](#)
8. 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. Students must participate in HIPAA training and respirator training and fit testing in the first portion of their preclinical education. These are required by both Weill Cornell Medicine and each clinical site. Students are expected to comply with all HIPAA guidelines during all Program related activities. Failure to comply with HIPAA guidelines may result in dismissal from the Program.

9. Principal faculty, instructional faculty, the program director, and the medical director cannot participate as health care providers for students in the program, except in an emergency situation. Students will be instructed to bring all non-emergent health care concerns to the Student Health Service or their own established healthcare providers.
10. Any individual student may approach any member of the Program administration for individual guidance or for a personal concern. To encourage timely and confidential resolution of issues, email is not recommended. Face-to-face or phone communication is preferred. See section below regarding student Mental Health Service or Personal Issues for procedures addressing personal issues which may impact student progress in the PA program.
11. The PA Program does not grant advanced standing to applicants.

Please read the Student Handbook in its entirety for a full description of Program Policies and Practices.

Standards of Conduct and Academic Integrity Policies

The PA Program requires that faculty, students, and staff abide by fundamental standards of conduct expected of the members of the PA Program community in their interactions with each other. The PA Program's standards of conduct also enable students to begin to encounter and wrestle with the difficult moral and ethical questions that arise continuously throughout one's career as a physician assistant. In this capacity the standards of conduct promote and define expected behaviors, challenge unprofessional behaviors, and educate students, as well as faculty, to confront these challenges.

It shall be the responsibility of the students and faculty of the PA Program to uphold the integrity and ethical standards of the community to the fullest extent possible. The standards of conduct listed below set forth general responsibilities of students and faculty in a teacher learner environment. The full range of responsible conduct cannot be set forth in any policy document. Accordingly, students and faculty should view these enumerated responsibilities as an illustration and should strive to comply with both the letter and the spirit of these standards of conduct.

Student Responsibilities/Honor Code

In order for students to be permitted to continue their studies at the PA Program, students must demonstrate a range of skills and abilities, such as, maturity, reliability, good judgment, a sense of responsibility and morality, sensitivity and compassion for individual needs, the ability to synthesize and apply knowledge, and evidence that they are capable of becoming safe and effective physician assistants. Students must also assume responsibility for the integrity of the content of the academic work performed and submitted, including papers, examinations and reports.

The following are examples of conduct that is deemed unacceptable for students at the PA Program and is subject to disciplinary action (including but not limited to verbal warning, written warning, probation, suspension or dismissal):

- knowingly or carelessly representing the work of others as one's own;
- lying, cheating, or falsification of records whether personal or patient-related;
- using or giving unauthorized assistance in any academic work;
- restricting the use of material used to study in a manner prejudicial to the interest of other students;
- purposely misleading or giving false information to another student;
- posting of confidential, inappropriate, unauthorized or copyrighted information (including but not limited to, photos, images, text, audio, video, or lecture materials) on the Internet (including but not limited to: StudyBlue or similar crowdsourced learning platforms, LinkedIn, Facebook, Snapchat, Instagram or similar social media, web logs ("blogs"), and others);
- otherwise committing a breach of academic and/or professional integrity;
- repetitively or egregiously failing to fulfill the professional requirements and responsibilities of a clinical rotation;
- committing an act of physical abuse or violence of any kind;
- disorderly and/or obscene conduct on campus or in the hospital facility or its affiliates;
- bullying (including but not limited to verbal, physical force, or the use of electronic technology) which deliberately seeks to harm or humiliate another student, faculty, lecturer, administrative staff, or patient;
- obstructing, harassing, or interfering with teaching, Program administration or patient care; including the use of information and communication technologies as a means of intimidation, harassment, or unwarranted interruption;
- having repeated unexcused absences, late arrivals or early departures from a required course, examination, evaluation, rotation or end of rotation activities;
- failing to respond in a timely way to communications (phone calls, emails or other correspondence) from the administration, faculty, course leadership or their representatives;
- failing to comply with directives given by supervising authority;
- unauthorized entry to or use of Weill Cornell or hospital facilities or its affiliates;
- theft of or negligent damage to Weill Cornell or hospital property or its affiliates;
- use, possession, or distribution of controlled substances on campus or in the hospital;
- facilities or its affiliates;
- unauthorized use and/or possession of alcoholic beverages in the hospital or Weill;
- Cornell facilities or its affiliates;
- inappropriate use of the Weill Cornell seal, logo, name, symbol, or facsimile;
- failure to comply with any lawful directive of a university or WCM official within the scope of that person's duties or employment or any policy or rule that has been duly promulgated by the university, WCM, or the Physician Assistants Program thereof.

A student, or group of students, knowing of any situation in which a violation of any of the standards of conduct set forth above may have occurred, is responsible for providing any such information at minimum in writing to the PA Program Director and/or the Preclinical Lead or Clinical Team. Faculty is similarly required to report a violation to the PA Program Director. Each student matriculated at the PA Program shall be bound by standards of conduct described above and shall be presumed to be familiar with the above provisions.

Artificial Intelligence and Digital Professionalism Guidelines

Purpose

This is a living document that outlines the expectations for Weill Cornell Medicine students to engage ethically and professionally with AI tools in academic and clinical learning environments. This document will evolve as new research, technologies, and use cases emerge.

Guidance

1. Relevant Guidelines and Policies

Weill Cornell Medicine is subject to institutional guidelines and Cornell University policies with respect to Artificial Intelligence, and professional conduct:

- Weill Cornell Medicine PA Program: Honor Code (above)
- Cornell University: [Guidelines for Artificial Intelligence](#)
- Cornell University: [How to Talk to an AI Tool](#)

2. Principles of Digital Professionalism

All students are expected to adhere to the following principles when engaging with AI tools as a part of curricular activities:

- **Respect:** Use professional language, even when interacting with non-sentient systems.
- **Integrity:** Do not use AI to misrepresent your knowledge, skills, or clinical experiences.
- **Transparency:** Disclose when AI tools are used in assignments or projects.
- **Accountability:** Take responsibility for how AI-generated content is used and interpreted.
- **Ethical Awareness:** Avoid prompts that simulate unethical, illegal, or discriminatory behavior.

3. Examples of Prohibited Behaviors

The following behaviors are considered violations of digital professionalism when engaging with AI tools as a part of curricular activities:

- Using AI to fabricate patient interviews or clinical documentation.
- Submitting AI-generated work without disclosure or attribution (“AI-giarism”).
- Prompting chatbots with hate speech, discriminatory or adversarial language, or threats.
- Simulating unethical scenarios (e.g., lying to patients, falsifying data) without prior faculty oversight and approval
- Attempting to manipulate AI tools to produce offensive or inappropriate content.

Scope

This applies to all Weill Cornell Medicine students who are engaging with AI tools as a part of curricular activities.

Compliance

Students, faculty, and staff are encouraged to report concerns about inappropriate AI use to the Office of Curriculum.

If a breach in professionalism is confirmed, subsequent actions may include (but are not limited to) the issuance of a professionalism report, a Marginal grade for the course in which the professionalism breach occurred, restricted access to AI tools, and other remediation activities (such as guided reflection, ethics training, etc.).

References

<https://it.cornell.edu/ai>

[Generative AI in Academic Research: Perspectives and Cultural Norms](#)

[CU Committee Report: Generative Artificial Intelligence for Education and Pedagogy](#)

Generative AI Attribution Statement

During the preparation of this document, the author(s) used Microsoft Copilot to create an outline and summarize current topics surrounding digital professionalism. The author(s) then fully reviewed and edited the document, and take full responsibility for the content of the publication.

Professionalism and Protocols for Handling Lapses

Professionalism in medicine is essential for all members of the healthcare team including physician assistant students. *Professionalism* is broader than just "ethical behavior" or "personal comportment." It includes a larger overarching "construct" that includes other elements. However, central to any construct of professionalism are responsibility, integrity and respect for others. WCM expects that its students, faculty, staff and administrators will foster an environment characterized by professionalism at all times in all settings.

The Weill Cornell Medicine Master of Science in Health Sciences for Physician Assistants Program has three core competencies that comprise the construct of professionalism:

Professionalism and Ethics (P)

- Adhere to established standards of care in the role of the PA in the healthcare team.
- Demonstrate compassion, confidentiality, flexibility, civility, and respect when adapting to practice changes or during the delivery of team-based patient-centered care.
- Demonstrate respect and responsiveness to patients, the PA program, and the profession.
- Demonstrate cultural humility and responsiveness to a diverse professional and patient population, including, but not limited to, diversity in sex, gender identity, sexual orientation, age, culture, race, ethnicity, socioeconomic status, religion, and abilities.
- Demonstrate individual accountability and the ability to recognize personal limitations, admit mistakes and errors, accept constructive feedback, and commit to a path of lifelong learning and improvement.
- Demonstrate commitment to personal wellness and self-care.

Interpersonal and Communication Skills (OCS)

- Establish trusted therapeutic relationships with patients and patient-identified family or proxies to ensure needs and goals are met through the delivery of person-centered care.
- Recognize the cultural norms, needs, influences, and socioeconomic, environmental, and other population-level determinants to optimize communication with clinicians, patients, and other stakeholders.
- Communicate effectively, equitably, and respectfully to elicit, share, and document accurate information necessary to the delivery of high-quality care and services that are responsive to the needs of diverse populations.
- Demonstrate emotional intelligence, resilience, adaptability, honesty, and compassion in all interactions and conversations, including discussions pertaining to sensitive topics.

Interprofessional Collaboration

- Work effectively with other health professionals to provide collaborative, patient-centered care while maintaining a climate of mutual respect, dignity, diversity, ethical integrity, and trust.
- Communicate effectively with other professionals to establish and enhance interprofessional team dynamics, striving to improve patient outcomes.

For purposes of assessment, WCM defines professionalism as demonstrated competency in the following four domains.

- *Responsibility, Integrity and Ethics*
- *Self-improvement*
- *Relationships with patients*
- *Relationships with academic mentors, colleagues, the healthcare team and systems.*

These four domains can be further parsed into the attributes that students are expected to demonstrate as part of each domain in all settings.

- *Responsibility, integrity and ethics* includes such attributes as attendance at required classes and clinical encounters; reliable and timely performance of educational and clinical responsibilities, including completion of required course evaluations and health screening surveys and requirements; accurate, honest reporting of information; adhering to all medical college policies and personal comportment that includes proper dress, grooming, hygiene and ethical, emotionally-modulated conduct.
- *Self-Improvement* includes the ability to accept constructive criticism and modifying behavior appropriately.
- *Relationships with patients* includes a sensitivity to patient needs and perspectives that is a cornerstone for building rapport, patient advocacy (including putting the patient's needs above one's own) and maintenance of confidentiality and decorum.
- *Relationships with academic mentors, colleagues, the health care team and systems* include respect for and cooperation with faculty, staff, preceptors, and colleagues from different health care professions and the appropriate use of medical records and the internet.

Professional Codes Students Expected to Follow

Students are also expected to follow a number of policies that set the standards for professionalism in various settings that students pass through during the Physician Assistants Program. Students should familiarize themselves with these policies as described below.

Classroom and Learning Environments - see relevant sections of the WCM MSHS Student Handbook

- Program Policies and Practices
- Standards of Conduct and Academic Integrity Policies
- Training and Learning Environment Policies
- Sexual Harassment, Bias, and Substance Abuse Policies
- Academic Related Policies and Practices
- Student Progress Policies and Practices
- Guidelines for Promotion and Graduation
- Student Health Policies
- Attendance Policies

Patient Settings

HIPAA regulations governing confidentiality of patient information (see relevant section of Clinical Guidelines)

The NewYork-Presbyterian Credo

*Students are expected to adhere to any new policies of the medical college that are designed to address new situations or circumstances, e.g., public health emergencies such as COVID or safety concerns such as political unrest or criminal activity.

Assessing Professionalism

WCM expects that all physician assistant students will demonstrate professional behavior in all four domains at all times. The faculty will evaluate student professionalism in each of the four domains at every course assessment, as pertinent to the course goals and objectives. The faculty who are typically in the best position to evaluate professionalism are those who work closely with students in small group or the classroom setting in the preclinical year, in health care teams during the clinical rotations and as mentors on research projects. There are specific sections on many rating forms in each required course where faculty are asked to assess a student's professionalism either by rating, narrative comments or both. Faculty will be asked to consider the four 'screening' questions about a student's professionalism based on the four domains described above.

These questions are designed to identify any lapses in professionalism as defined below and would be included in a narrative and decision-making:

Did the student demonstrate professional and ethical behavior, as defined below, at all times?

Y=Yes N=N U = Unable to Assess (If unable to assess, further clarification may be requested)

- Responsibility: attendance, reliability, reporting, personal comportment
- Self-improvement: accepting constructive criticism
- Relationships with patients: rapport, sensitivity, advocacy, confidentiality
- Relationships with academic mentors, colleagues, the healthcare team and systems

Identifying Lapses in Professionalism

A lapse in professionalism is defined as:

- A breach of professional conduct; OR
- Insufficient demonstration of professional attributes

Breaches typically refer to a student's failure to adhere to policies that govern professional standards as describes above (e.g., academic policies in the Student Handbook or the "Student Responsibilities/Honor Code", HIPAA etc.).

Insufficient demonstration of professional attributes is typically noted on faculty or preceptor rating forms and indicates that a student has not met a competency standard for medical education program learning objectives ("Professionalism" and "Interpersonal and Communication Skills")

A lapse in professionalism might be observed or suspected by anyone in the WCM community. This could include a faculty member, preceptor, staff, administrator, other health professional, patient, or fellow student. Likewise, a lapse may occur in classroom, clinical, research or social settings, including the use of the internet.

While any single incident may have greater or lesser importance, WCM also identifies four levels of lapses in professionalism, with increasing degrees of significance:

- Isolated incident
- Pattern of incidents
- Continued pattern of incidents despite specific intervention
- Continued pattern of incidents; unable to correct behavior reliably

Protocols for Student with an Observed or Suspected Lapse in Professionalism If a lapse is observed or suspected within a course:

1. The course director, Preclinical or Clinical Leads, and/or Program Director assesses the incident
2. If initial assessment suggests that a lapse may have occurred, the student is referred to the Student Affairs Lead.
3. If after meeting with a student it has been determined a lapse in professionalism has occurred, a "Professionalism Evaluation Report (PR)" is completed (see Appendix A)
4. The Student Affairs Lead plans remedial action. This could include:
 - a. Monitoring the student's future behavior more closely
 - b. Input into the student's course assessment and grade **Note that a single egregious instance of unprofessionalism or an un-remediated pattern of unprofessionalism are grounds for a non-passing ("Remediation" or "Fail") grade, and, if severe may be grounds for dismissal from the PA Program. When remediation is required due to professionalism issues, additional professionalism issues are grounds for a non-passing ("Fail") grade.*
 - c. Direct observation of the student

- d. Standardized patient assessment
- e. Requiring a written reflection essay or literature review
- f. Assignment to a faculty coach or WCM Learning Specialist
- g. Referring the student to medical or mental health services
- h. Referring the student to the Promotions and Graduation Committee
- i. The completed Professionalism Report is maintained in the student file

See other sections for more description of the protocol for lapses in attendance, and for unexcused late submission of assignments.

If a lapse is observed or suspected outside a course:

The Student Affairs Lead assesses the incident.

1. If initial assessment suggests that a lapse may have occurred, the Student Affairs Lead may meet with the student.
2. Not all lapses will result in student- Student Affairs Lead meetings. For example, failure to complete routine compliance requirements in a timely manner (e.g., course evaluations, Student Health Screens) may result in automatic Professionalism Reports.
3. If a lapse has occurred, the Student Affairs Lead completes a "Professionalism Evaluation Report" (see Appendix B)
4. The Student Affairs Lead plans remedial action. This could include:
 - a. Monitoring the student's future behavior more closely
 - b. Direct observation of the student
 - c. Standardized patient assessment
 - d. Requiring a written reflection essay or literature review
 - e. Assignment to a faculty coach
 - f. Referring the student to the pertinent Student Evaluation Committee
 - g. Referring the student to medical or mental health services
 - h. Referring the student to the Promotions and Graduation Committee
 - i. The completed Professionalism Report is maintained in the student file.

Professionalism reports are based on observations made by faculty or staff and confirmed by the relevant course director, Preclinical or Clinical Leads, Student Affairs Lead and/or Program Director. As such, they are not subject to an appeal process. Once it has been determined that a Professionalism Report be filed during his or her meeting with the student, the student is permitted to write comments about the incident or describe what he or she believe to be mitigating circumstances. PRs become part of a student's official academic record and are reviewed by the Promotions and Graduation (P&G) Committee. An accumulation of PRs for recurring lapses in professionalism or an egregious incident of unprofessional behavior may result in program dismissal.

When a student's conduct while matriculated at the PA Program is in violation of the Student Responsibilities/Honor Code or raises a question about his or her suitability to practice medicine, the matter will be directed to the Committee on Promotion and Graduation for consideration and recommendation of corrective disciplinary action. The Committee on Promotion and Graduation may request that the PA Program Director or their designee appoint an ad hoc committee of faculty to review the matter. The student involved shall receive notice of the Committee on Promotion and Graduation's request for the appointment of the ad hoc committee, the membership of the ad hoc committee (at least one member of which will be a Physician Assistant) once assembled, and the details of the concerns under consideration by the ad hoc committee regarding the student's suitability for the practice of medicine.

The ad hoc committee will determine the scope, manner and extent of its review, consistent with the information provided by the Committee on Promotion and Graduation. The student shall have the right to appear before the ad hoc committee in order to present his or her position on the claims raised and his or her continued suitability. The student may be accompanied by an advisor (such as a family member, faculty member and/or counsel) who may assist the student but will not be a participant in the proceeding before the ad hoc committee; the student will remain responsible for acting on his or her behalf in the process. The ad hoc committee will forward its determination as to the student's suitability to the Committee on Promotion and Graduation.

When the recommendation of the ad hoc committee is to permit a student to continue with his or her studies based on a finding that the student continues to meet the standards of suitability for the practice of medicine, the Committee on Promotion and Graduation may accept the recommendation and conclude the process. The Committee on Promotion and Graduation retains the right to add its own recommendation to the recommendation of the ad hoc committee.

When the recommendation of the ad hoc committee is that the student does not satisfy the PA Program's standards of suitability for the practice of medicine and should not be permitted to continue studies at the PA Program, then the recommendation, together with the academic records, factual determination, including any recommendations for sanctions (which shall include a brief statement explaining the sanctions), as well as any other materials the ad hoc committee deems appropriate, shall be forwarded to the Committee on Promotion and Graduation. The Committee on Promotion and Graduation shall then review the recommendation and formulate its own position on the matter. The Committee on Promotion and Graduation has the discretion to rely on the record created by the ad hoc committee or to reopen the process to gather additional information. The student shall have an opportunity to submit whatever information he or she believes is relevant to the consideration. The recommendations of the ad hoc committee, and the Committee on Promotion and Graduation, shall be forwarded to the Program Director and Senior Associate Dean for Education and Assistant Dean, Student Professional Development for final action. A student can appeal a decision of the Committee on Promotion and Graduation per the policy in this handbook outlining information on Committee on Promotions and Graduation.

Training and Learning Environment Policies

Teaching Learning Environment and Student Mistreatment

WCM is committed to providing a learning environment that fosters mutual respect and the values of professionalism, ethics, and humanism in the practice of medicine and biomedical research. Workforce Members are expected to treat students fairly and respectfully in all settings where students are educated and are expected to create and maintain an academic environment conducive to the pursuit of free inquiry, the respectful interchange of diverse ideas and differing viewpoints, academic integrity and the advancement of patient care. WCM has a policy of zero tolerance for mistreatment of its students. It takes all allegations of Compromises to the Learning Environment and Student Mistreatment seriously and encourages students and other Workforce Members to report any such instances or perceived instances that involve medical students or physician assistant students to the WCM TLC. Likewise, WCM has zero tolerance for retaliation by any person against individuals who have reported Mistreatment or Compromises to the Learning Environment. The Senior Associate Dean for Education of WCM, as the designee of the Dean of WCM & Provost for Medical Affairs of Cornell University, working with the Office of Civil Rights and Investigations (OCRI), the Office of Professionalism (OOP), Department and Program Chairs, other appropriate College officials, and the Human Resources Department of WCM, the NewYork-Presbyterian Hospital (NYPH) and its affiliates and that of non-network affiliates, has the ultimate responsibility for ensuring a safe and respectful learning environment. By the

implementation of this policy, students and other persons reporting Student Mistreatment or Compromises to the Learning Environment to the TLC are entitled to understand:

1. The ways to report learning environment compromises or mistreatment;
2. The jurisdictional authority of the TLC;
3. The Reporter's and the Respondent's role in the investigation and resolution process;
4. The extent to which their anonymity may or may not be assured;
5. The timing of the investigative and adjudicative processes; and
6. Information about how the incident was resolved, to the extent permitted by WCM's by laws and by local, state, and federal laws.

Definitions

Compromise to the Learning Environment: Unprofessional behaviors and/or attitudes that convey disrespect for an individual or groups of individuals. These include but are not limited to disrespectful interactions with persons in the learning environment (students, house staff (i.e., a resident or fellow), faculty members, physicians and other members of the health care team, College and hospital employees and patients/visitors), use of unprofessional or derogatory language, violation of confidentiality of patients or others, and/or display of an attitude that disparages non-specific persons or groups based on characteristics that include but are not limited to their medical specialty, health care profession, patient status, age, gender, gender identity, sexual orientation, race-ethnic/cultural background, religion, political views, citizenship or military status, pregnancy or health care/disability condition.

Reporter (formerly known as "Complainant"): The individual who files a formal report that the learning environment was compromised for a student(s) or that a student(s) had been mistreated. The Reporter may be a medical or physician assistant student, faculty member, member of the house staff, or employee of WCM, NYPH and its affiliates, or any teaching affiliate of WCM.

Respondent: The individual who is alleged to have Compromised the Learning Environment and/or engaged in mistreatment of a medical student, visiting medical student or physician assistant student enrolled in the medical education programs for the MD degree or the Master of Science in health science for the physician assistants. The Respondent may be another student, faculty member, house staff member, or employee of WCM, NYPH and its affiliates, or any teaching affiliate of WCM.

Student Mistreatment: Use of language or actions directed at a specific individual student or group of students that include but are not limited to offensive names or disparaging remarks OR a denial of opportunities for training or awards OR the issuance of lower grades/evaluations based on a student's sex, sexual orientation, gender identity, race-ethnicity, economic, cultural or religious background, political views, military status, physical appearance, pregnancy or disability status rather than performance; public humiliation or public embarrassment; pressuring a student to perform medical procedures or clinical or research activities for which the student is insufficiently trained; violating a student's ownership of data or a project or reasonable entitlement to authorship; violation of a student's right to privacy under Family Educational Rights and Privacy Act (FERPA), Health Insurance Portability and Accountability Act (HIPAA), or other applicable government laws, regulations or WCM policies; interfering with a student's need to properly protect against or attend to a potentially serious health problem (including not permitting a student to leave a hospital unit, operating room or research laboratory to seek attention for a needle stick or splash with bodily fluids, interfering with a student's ability to adhere to hospital policies such as the use of personal protective equipment or following universal precautions); a requirement to perform personal services; unwanted sexual advances or requests to exchange sexual favors for grades or other rewards; threats of physical harm or sexual assault; or physical harm or sexual assault. WCM respects the academic freedom of its faculty to foster the presentation and respectful

interchange of ideas, some of which may be controversial or uncomfortable. Matters pertaining to a faculty member's pedagogic approach or ideas that may create discomfort or controversy per se are not considered mistreatment unless they involve derogatory or discriminatory statements or actions and/or severely Compromise the Learning Environment.

Teacher-Learner Committee (TLC): The committee comprised of faculty members and students appointed by and reporting to the WCM Dean charged with accepting, triaging, and (within its jurisdiction) investigating all reports of Compromises of the Learning Environment and/or perceived or actual mistreatment involving WCM and visiting medical students and WCM physician assistant students. The TLC's purview, charge, and membership are specified in the Medical Education Governance Document.

Workforce Members: Faculty; Staff; Students; Volunteers; Trainees; and other persons whose conduct, in the performance of work for WCM, is under the direction and control of WCM, whether or not they are paid by WCM.

Workforce Members at Affiliated Institutions: Any Workforce Member, including house staff (i.e., residents or fellows), and other persons whose conduct, in the performance of work for an institution affiliated with the WCM Medical Education (MD) and Physician Assistant Training Programs, is under the direction and control of the affiliated institution, whether or not they are paid by that institution.

Procedure

Ways of Reporting Compromises to the Learning Environment or Mistreatment of Students

Any Workforce Members who witness or are informed of possible Student Mistreatment or Compromises to the Learning Environment may seek the advice of the TLC and/or decide to file a report. Students and others are strongly encouraged to report incidents as soon as the incident occurs. Reporting to the TLC allows WCM to actively monitor the learning environment, to ensure that each incident is investigated fairly with due process for all involved, and to provide appropriate counseling to violators to prevent future instances of mistreatment or harm within the learning environment.

Students and others have multiple ways of reporting, including direct and anonymous reporting options. Reports that contain named individuals and descriptions of the incident will be reviewed by the TLC in a timely manner and will be investigated and adjudicated by the appropriate office depending on jurisdiction.

- Anonymous (option to self-identify) on the TLC Reporting Portal located on the TLC website: https://weillcornell.az1.qualtrics.com/jfe/form/SV_cOwBydS1IGjeEAu and on the required course websites.
- Anonymous on the Course Evaluation System (OASIS) (for student reporting only) at <https://cornell.oasisscheduling.com/> which is reviewed by the TLC at the time the evaluation is completed.

Direct (non-anonymous) report to the TLC at TLC@med.cornell.edu or a TLC member by email or phone.

Students who believe that a faculty member may evaluate or grade them unfairly in the course assessment process based on statements or behaviors made by the faculty member are strongly advised to report their concerns to the TLC **before** the course ends. The TLC may opt to discuss the matter with the course director immediately or to retain the report on file in the event the matter ultimately becomes part of a grade appeal process. Students are permitted to contest their grades through the appeal mechanism as outlined in [Appeals Process](#). Challenges to overturn grades based solely on allegations of Mistreatment may be compromised if

mistreatment is reported only **after** the final grade has been established and is known to the student.

Students may also report incidents of sexual harassment, inappropriate sexual conduct, and perceived discrimination (race, color, ethnicity, national origin, gender, gender identity, sexual orientation, height and weight, disability, religion) directly to the [WCM Office of Civil Rights & Investigations](#) and/or to the [Cornell University Hotline](#). Students are strongly encouraged to report all concerns involving the learning environment and Student Mistreatment to the TLC but may seek the advice from the OOP. OOP forwards any formal reports involving students in the learning environment to the TLC as OOP is not an investigative body.

Students may choose to discuss an incident of actual or perceived Mistreatment with course directors, faculty advisors, deans, other faculty, administrative staff, or others; however, such individuals are NOT responsible for keeping records of student reports, reviewing or investigating alleged incidents, or working through resolution. Faculty and staff should make this clear to the student who discusses the incident with them and may suggest that the student report the incident to the TLC. Likewise, students may discuss their concerns about the learning environment or seek advice about Mistreatment with WCM's student ombudsperson with the assurance of anonymity to the extent allowed by the [Ombudsperson Policy](#). As stipulated in that policy, the ombudsperson is not authorized to review, investigate or adjudicate instances of mistreatment. The ombudsperson will provide information to the student concerning additional ways the student can report on mistreatment, but does not conduct an investigation.

Any allegations of sexual conduct received by the TLC or OOP will be forwarded to the OCRI for further investigation.

Any concerns about FERPA or HIPAA violations can also be reported to the Office of Compliance (OOC). Students wishing to report a violation, ask a question, or seek advice may contact the TLC by emailing TLC@med.cornell.edu. When emailing the TLC, students may, if desired, request follow-up from a specific member of the TLC. Students need not provide extensive detail regarding mistreatment or potential mistreatment in the initial contact. A member of the TLC will reach out to set up a meeting, phone call or continue the conversation via email. More information on the TLC, and the complete policy referenced above can be found online at: [Teaching Learning Environment and Student Mistreatment](#)

Faculty shall educate and advise students about the specific standards that govern professional conduct in a rotation, a course or in a hospital setting, and, by his or her own conduct, set an example of the standards expected of the student.

If a student believes that a faculty member has violated a standard of conduct, the student may file a written request for an investigation with the Program Director. The Program Director serves as the student's advocate, will notify the Chairperson of the involved faculty member's department of the complaint and will investigate any such complaints. The Program Director is committed to establishing the facts fairly and promptly and will respect the rights and confidentiality of the involved parties. Students who wish to come forward and report inappropriate behavior on the part of a faculty member may do so without fear of retaliation or reprisal. After this notification takes place, the Chairperson of the relevant faculty member's department will take prompt action, normally within ten days from the written request for an investigation, in resolving the matter.

Faculty members are also required to inform the Program Director and Associate Dean, in writing, of any alleged violation by a faculty member of the standards of conduct outlined above. Faculty members, upon appointment to the Faculty, shall be bound by the standards of conduct set forth in this section and shall be presumed to be familiar with its provisions.

Student Ombudsperson

The Student Ombudsperson Office offers a safe place where all students at Weill Cornell Medical College and Graduate School of Medical Sciences may discuss problems or issues. Concerns about situations that interfere with work, study or student life may involve a classmate, advisor, or instructor. Issues may be academic related, interpersonal conflicts, and harassment. The Ombudsperson does not take a side in disputes. The Ombudsperson treats all inquiries as confidential, as described in our Ethical Principles below. We assist students in several ways:

- Listening and discussing concerns, questions, and complaints
- Provide information on Weill Cornell Medical College policies and practices.
- Provide information on how to make Weill Cornell aware of a particular problem.
- Discuss and assist the student in evaluating available options.
- Refer the student to the proper authority to resolve the situation.
- Assist students to devise ways in which they might resolve problems with others on their own.
- While maintaining confidentiality, provide feedback to the administration (or others in authority) when a systemic issue or trend occurs.

The Ombudsperson assists students in a variety of ways consistent with the WCM mission. Overall, the Ombudsperson is an advocate for fairness and equity.

For more information regarding the Student Ombudsperson, see: [Office of the Weill Cornell Student Ombudsperson | Student Services](#)

Standards of Conduct/Policies: Use of Computers, Network Systems, Electronic Communications

The Medical College's computers, network systems equipment, data, and software are a critical portion of the Medical College's infrastructure and are to be treated accordingly.

Students and faculty are responsible for their actions when using the Medical College's computers, electronic communications and network systems, whether or not their transgressions are intentional, accidental and/or can be corrected.

Users of Weill Cornell Medicine computers, tablets, and network systems shall respect:

- the privacy of other users' information, whether or not the information is securely protected;
- the ownership and intellectual property rights of proprietary and commercial software, including not using unauthorized copies of software even where the software may not be copy protected;
- the finite capacity of a computer system and limitations of use so as not to interfere unreasonably with the activity of other users;
- procedures (posted in computer facilities and/or online) established to manage use of the computer system;
- the rights of others not to be harassed, intimidated, or otherwise receive intrusive or inflammatory information through the computer system; and
- the Medical College's policies regarding responsible use of IT resources can be found at: [Responsible Use of IT Resources](#)

Copyright Infringement Policy

Copyright infringement is the act of exercising, without permission or legal authority, one or more of the exclusive rights granted to the copyright owner under section 106 of the Copyright Act (Title 17 of the United

States Code). These rights include the right to reproduce or distribute a copyrighted work. In the file-sharing context, downloading or uploading substantial parts of a copyrighted work without authority, including unauthorized peer-to-peer file sharing, constitutes an infringement, and may subject students to civil and criminal penalties.

In general, anyone found liable for civil copyright infringement may be ordered to pay either actual damages or "statutory" damages affixed at not less than \$750 and not more than \$30,000 per work infringed. For "willful" infringement, a court may award up to \$150,000 per work infringed. A court can, in its discretion, also assess costs and attorneys' fees. For details, see Title 17, United States Code, Sections 504 and 505. Willful copyright infringement can also result in criminal penalties, including imprisonment of up to five years and fines of up to \$250,000 per offense.

At Weill Cornell Medicine, the unauthorized distribution of copyrighted materials is also a violation of the standards of conduct, and may result in disciplinary action up to and including expulsion. Students are advised that this restriction pertains to any and all lecture materials including printed handouts, electronic media such as PowerPoint presentations, and any audio/video recordings of lectures or laboratories. **These are the intellectual property of the author and/or Weill Cornell Medicine and shall not be distributed in any form to any other recipients. Failure to respect intellectual property rights as defined herein may jeopardize a student's good academic standing in the Program and may result in disciplinary action.**

For additional information on the Copyright Infringement Policy, please visit [500.07 - Copyright Infringement | Information Technologies & Services](#)

All members of Weill Cornell Medicine are responsible for protecting the confidentiality, integrity, and availability of data created, received, stored, transmitted, or otherwise used by the college, irrespective of the medium on which the data resides and regardless of format. In the event the confidentiality, integrity, or availability of data is compromised, and a suspected incident has occurred, the incident should be reported immediately to the Information Technologies & Services Department (ITS) or appropriate compliance office. Reporting incidents quickly—regardless of certainty or magnitude—is critical to ensure the appropriate teams can respond and contain the incident as soon as possible [500.05 - Security and Privacy Incident Response Plan | Information Technologies & Services](#)

Social Media Policy

[Weill Cornell Medicine Social Media Policy](#)

Social Media Policy Guidelines

Naming: When identifying a student organization as being affiliated with WCM, the handle and name of the account should reflect both the student group name and Weill Cornell Medicine.

For example:

Instagram: [Student Organization Name]_weillcornell

X: [Abbreviated Student Organization Name]_WeillCornellBio: Each account bio should reflect that it is for a student-run organization, for example: Student-run account [insert department if appropriate] @WeillCornell. The bio must also include the phrase "Opinions are our own-not WCM's."

Administrators: University policy requires a minimum of two people – or two "account administrators" who manage the posting, comments, replies and responses to direct messages. These account managers must have a WCM CWID. Ideally, there are two student account administrators, and it is imperative to have one faculty

advisor who can maintain account access during student leadership transitions. We also encourage you to use social media best practices, which include:

Using a simple image or graphic as your avatar for a distinct visual identity. Any use of the Weill Cornell Medicine logo must be approved by the Office of External Affairs. You can reach our team at SOCIALMEDIAWCMC@med.cornell.edu.

Planning content strategy to enable regular posts:

- Define a clear target audience with an understanding of their use of the platform.
- Create a planned calendar for posting and enough content to be consistent and sustainable, typically at least a 90-day plan.
- Post at least once a week.
- Have a schedule for monitoring the account and posting/responding to inquiries.

All accounts must be registered as required by university policy:

weillcornell.az1.qualtrics.com/jfe/form/SV_5gQEW25DX3cfm6y

The Office of External Affairs social media team is available to discuss your account registration or offer tips and techniques to maximize your account. The enterprise WCM social media accounts will support student organization groups that are registered and follow brand standards and best practices.

Students are not permitted to take photos/videos of patients. Students may not use their personal cell phones or cameras for this purpose. If a student has taken a photo as directed by the attending physician, these photos may only be shared with the members of the team. No photo may ever be posted or disseminated via a social network, website, e-mail or used in a publication. Students are reminded that all patient information is protected under HIPAA. Violation of this policy may result in the imposition of fines and sanctions and/or dismissal from the Program. Further, students are advised to minimize the use of cell phones on rotations. Students should not use their cell phones in patient care areas (including nurses' stations).

Use of Email Policy

All WCM PA students will be provided with email services. Faculty frequently correspond with students via email. Both students and faculty are expected to reply to emails within 24 hours, or 48 hours if on weekends.

Weill Cornell Medicine provides a centrally-managed email service to faculty, staff, students, and affiliates for the purpose of furthering the mission of education, research, and patient care and for conducting general college business. As defined in ITS policies [500.01 – Response Use of Information Technology Resources](#) and [500.02 – Privacy of the Weill Cornell Medicine Network and Systems](#), incidental and occasional personal use of email is permissible. However, personal communications and data transmitted or stored on Weill Cornell Medicine information technology resources (such as email) are treated as business communications and data. Use of a Weill Cornell Medicine email account is subject to monitoring for performance and compliance purposes.

Expressive Activity Policy | University Policy

Definitions | Hazing at Cornell

Sexual Harassment, Bias and Substance Abuse Policies

The Human Resources Department and the Office of Equal Opportunity Programs are available to assist all members of the Medical College community with sexual harassment problems or questions. All discussions are confidential. In addition, the Medical College will provide, on request, training and consultation on the prevention of sexual harassment.

What is Sexual Harassment?

Sexual harassment in the academic environment or in the workplace can threaten a person's academic performance or economic livelihood. The Medical College defines sexual harassment as:

- Unwelcome sexual advances, requests for sexual favors, and other verbal and physical conduct of a sexual nature constitute sexual harassment if:
- submission to such conduct is made either explicitly or implicitly a term or condition of employment or academic status;
- submission to, or rejection of, such conduct by a person is used as the basis for an employment decision or an academic decision affecting that person; or
- such conduct has the purpose or effect of substantially interfering with a person's work or academic performance or of creating an intimidating, hostile, or offensive working or learning environment.

Sexual harassment is sex discrimination and is therefore illegal.

Dealing with Sexual Harassment Preliminary Action

You can sometimes stop someone from harassing you by taking direct action.

- **Say no** to the harasser. Ignoring the situation seldom will make it go away. If you have difficulty speaking about the situation, write the harasser a note describing the incident that you found offensive and request that it not happen again. Keep a dated copy of the message.
- **Keep a record of what happened and when it took place.** If others were present, include their names in the record. Keep a log of any conversations or actions pertaining to the incident(s).
- **Find out whether other students or co-workers have been harassed.** Together complaints are in a stronger position to deal with the situation and the offender.
- **Seek support from a close friend or trusted associate.** Sharing your feelings and experiences can help you cope with that often is a very difficult, frustrating situation.

If the harassment does not stop, consider discussing the matter with the harasser's supervisor or department chairperson, or with staff members in the Human Resources Department or the Office of Equal Opportunity.

Complaint Procedures/Policy

If a supervisor, administrator, faculty member or counselor receives a complaint or inquiry about sexual harassment, it is imperative that the Human Resources Department or Office of Equal Opportunity be contacted to provide advice on procedures for sexual harassment cases. Discussions with staff members of that office will help ensure the effective handling of the complaint and reestablish a working or learning environment free of harassment by taking immediate and appropriate action.

Any student or employee of the Medical College who suspects that he or she has experienced sexual harassment, as defined herein, should report the incident. If the reporting person wants to discuss the incident,

consider ways in which to deal personally with the situation, or seek a formal remedy for an instance of sexual harassment, the Human Resources Department and the Office of Equal Opportunity will provide assistance.

Grievance procedures exist to protect all students and academic and non-academic staff members.

Title IX Regulations

The Department of Education has recently promulgated regulations implementing the provisions of Title IX of the Education Amendments of 1972, prohibiting discrimination on the basis of sex in education programs and activities. The Medical College is subject to and in compliance with the statute and regulations. The regulations nevertheless require that you be informed of their provisions and these are summarized below:

For students, the regulations prohibit any act or policy which discriminates on the basis of sex or which has the effect of causing such discrimination. Specifically, the regulations prohibit discrimination in admissions, quality of housing, overall administration of financial aid, and access to curricular and extra-curricular activities. A student or applicant may not be discriminated against because of pregnancy, childbirth, or other conditions relating to pregnancy. Childbirth and other conditions relating to pregnancy must be treated as any other disability for purposes of leaves of absence.

For employees, the regulations likewise prohibit any act or policy that has the effect of treating members of one sex differently from the other. Specifically, the regulations prohibit discrimination in recruiting and hiring, promotion, job classification and assignment, wage and salary rates, fringe benefits, and granting leaves of absence. Pregnancy, childbirth, or conditions relating to pregnancy must be treated as a temporary disability for purposes of sick leave or other leave of absence plans. An individual may not be denied employment or otherwise discriminated against because of pregnancy or conditions related thereto.

[Brittney Blakeney, JD, Title IX Coordinator, Director, Office Institutional Equity](#) has been designated to investigate and seek resolution of complaints of all Weill Cornell medical and graduate students, regarding prohibited acts. Students are welcome to contact her at 212-746-9915, nosexualmisconduct@med.cornell.edu, or jdifede@med.cornell.edu to discuss any concerns that they may have. Further information on Weill Cornell Medicine's Title IX resources and student procedures may be viewed [here](#).

Bias and Hate Related Crimes Policies and Guidance

Hate/Bias-Related Crime Prevention Statement for Weill Cornell Medical College

New York State law requires Weill Cornell Medical College to inform students about the Hate Crimes Prevention Act of 2000 and how hate crimes (also known as bias-related crimes) can be prevented on campus.

Hate crimes are criminal activity motivated by the perpetrator's bias or attitude against an individual victim or group based on perceived or actual personal characteristics, such as their race, religion, ethnicity, gender, sexual orientation, or disability.

Bias-related behavior includes any action that discriminates against, ridicules, humiliates, or otherwise creates a hostile environment for an individual or group protected under this law.

Penalties for Hate/Bias-Related Crime

Penalties for bias-related crimes are very serious and range from fines to imprisonment for lengthy periods, depending on the nature of the underlying criminal offense, the use of violence or previous convictions of the offender. Hate/bias crime incidents that rise to a felony level are reported to the district attorney. Non-felony hate/bias crime incidents may be adjudicated through the *Standards of Conduct* as stated above.

Sanctions imposed by the College may include suspension, expulsion or other measures depending on the severity of the crime.

Reporting a Hate/Bias-Related Crime Incident

An individual who believes that she or he has been a target of a bias-related crime is encouraged to immediately report an incident to NYPH Security and/or 911, the Associate Dean, or the Office of Diversity and Inclusion at 646-962-9916. The incident will be reviewed and investigated, and a determination will be made as to how the allegation will be handled.

Availability of Counseling and Other Support Services

Counseling and personal support is available to victims of hate/bias-related crime through the Student Affairs Office at Olin Hall, Room 110. Another source of assistance is through the Victims Assistance Center located at 100 Centre Street, Room 231. The Center is open Monday through Friday, 8:00 a.m. to 8:00 p.m., and Saturdays and Sundays, 9:00 a.m. to 5:00 p.m. The staff can be reached at 212-335-9633.

Substance Abuse Policy

The Medical College recognizes that its students are potentially vulnerable to the alarming personal and societal problems caused by alcohol and drugs. Therefore, the Medical College offers aid to students who seek help for a drug or alcohol problem. Illegal possession of, distribution of, or trafficking in any drugs, or the abuse of drugs or illicit use of mind-altering drugs, or the abuse of drugs or alcohol are violations of Medical College policies. Such violations are not in accord with the Medical College's requirements of fitness or suitability for medicine as stated above in the Standards of Conduct. Alleged violators of these policies will be reviewed according to the procedures employed to determine a student's fitness or suitability for medicine.

Statement/Policy on Illegal Drugs and Substances

State and Federal law prohibit the possession, use and distribution of illegal drugs and substances.

The unlawful manufacture, distribution, dispensation, possession, or use of a controlled substance by any member of the Weill Medical College community, including employees, faculty members, students and visitors, is prohibited at all Cornell facilities including residences. Appropriate action including termination and/or dismissal will be taken for violations of the foregoing prohibition.

The University recognized the convincing medical evidence that the use of illegal drugs and substances poses a significant threat to health and condemns the use of such drugs and substances as harmful to the physical and psychological well-being of the user and the well-being of the Cornell community. Notify the person's supervisor, department chairperson, or dean of any criminal drug statute conviction (including acceptance of a guilty plea by a judicial authority) for a violation occurring in the workplace no later than five (5) days after such conviction.

The University will not condone criminal activity on its property, or on property under its control, and will take appropriate action whenever such conduct is discovered to enforce the law and its own internal regulations.

Statement on Drug and Alcohol Abuse

See WCM/HR [Interim Policy on the Use of Drugs and Alcohol](#)

Federal and New York laws and University regulations prohibit the illegal possession, use and distribution of illicit drugs and alcohol.

The unlawful manufacture, distribution, dispensation, possession, or use of an illicit drug or alcohol by any member of the Weill Medical College community, including employees, faculty members, students and visitors, is prohibited at all Cornell facilities (including residences) and activities. Appropriate action including termination and/or dismissal will be taken for violations of the foregoing prohibition.

The University will not condone criminal conduct on its property, or at Cornell or student sponsored activities, and will take appropriate action whenever such conduct is discovered to enforce the law and its own internal regulations. Violators of Federal and state laws may also be referred to appropriate civil and criminal authorities for prosecution.

Drug-Free Workplace Policy and Statement

The Drug-Free Workplace Act of 1988 requires Weill Medical College, as a Federal grant recipient and contractor, to certify that it will provide a drug-free workplace by, among other actions, requiring that each person engaged in a Federal grant or contract (including personnel and consultants) be given a copy of this Statement and notifying such person that as a condition of participation in such grant or contract, the person will:

- abide by the terms of this Statement; and
- notify the person's supervisor, department chairperson, or dean of any criminal drug statute conviction (including acceptance of a guilty plea by a judicial authority) for a violation occurring in the workplace no later than five (5) days after such conviction.

Weill Medical College shall, within thirty (30) days after receipt of notice take appropriate action against such person up to and including termination or dismissal, and/or require such person to satisfactorily participate in a drug assistance or rehabilitation program.

Sanctions

Violations of University Policy can result in termination, suspension or expulsion from the university.

Faculty and non-academic staff can be subject to disciplinary action up to and including termination of employment. Student violators can be subject to disciplinary action up to and including dismissal. Any drug or alcohol abuse violation may become part of a student's permanent record and may impact on a student's fitness or suitability for advancement.

Sanctions can include severe criminal penalties such as fines and/or imprisonment. The severity of the penalty depends upon the nature of the criminal act and the identity and amount of the drug involved. Examples of legal sanctions under Federal and New York laws: **LSD**: Possession with intent to sell can result in up to seven years in prison.

Marijuana: Sale to a person under the age of 18 years can result in up to seven years in prison. **Cocaine**: The possession of four or more ounces, or the sale of two or more ounces, can result in a minimum of 15-25 years, and a maximum of life in prison.

Alcohol: It is illegal in New York:

- For anyone under the age of 21 to possess with the intent to consume alcohol. A violation can mean up to a \$50 fine.
- For anyone of any age to give or sell alcohol to anyone under the age of 21, to anyone who is already drunk, or to anyone who is habitually drunk. A violation can mean three months in jail and up to a \$500 fine.
- For a licensed professional to practice medicine when impaired by alcohol (or any mind-altering drug), or to be a habitual abuser of alcohol, or to be dependent on or a habitual user of narcotics, barbiturates, amphetamines, hallucinogens, or other drugs having similar effects.
- A violation can mean loss of professional license and up to a \$10,000 fine.

Drug Screening Policy

Some clinical clerkships or elective sites may require students to complete and successfully pass drug screening for “drugs of abuse” as a requirement prior to working in their institution. A site may make arrangements for on-site testing or require the student to obtain screening on their own and have that verified by their home institution.

Procedure

Sites offering their own testing program will notify students of their procedures and arrange for consent, specimen collection and reporting. The testing institution will maintain records of these tests. Students with positive test results will be restricted from rotating at that site, and if reported to the Medical College, will be handled like a positive result as outlined below.

In the event a rotation or elective site requires drug screening, but does not provide on-site testing, the Medical College has established a contract with an outside vendor who will provide testing to meet these requirements. Students will be required to contact Student Health Services for a testing request and report to the vendor’s specimen collection center to submit a urine sample. *Students must make those arrangements and provide the specimen with sufficient time for the vendor to provide clearance documentation to the Medical College.* The cost of this testing is included in your Student Health fee.

Students requiring testing more frequently than once a year will be responsible for additional fees – you will be advised at SHS at the time of your request. The cost of testing is currently expected to be under \$40.

The drug screening provided by the vendor shall include testing for *at least* the following substances:

- Amphetamines
- Barbiturates
- Benzodiazepines
- Cocaine Metabolite
- Marijuana (THC) Metabolite
- Methadone
- Methaqualone
- Opiates
- Phencyclidine (PCP)
- Propoxyphene (Darvon) Students with a positive drug screen will have an opportunity to consult with a Medical Review Officer (MRO) provided by the vendor, to verify whether there is a valid medical explanation for the screening results. If after review by the MRO there is a valid medical explanation for the screening result, the vendor will notify the Medical College of a clear (negative) test. If, after review by the MRO there is not a valid medical explanation for the positive screen, then the test results will stand and will be treated as a positive result as outlined below.

Handling of Results

All results from the outside vendor will be forwarded to the Director of Student Health and scanned into the student’s medical record.

Negative results will be delivered directly to the student to forward to the PA Program as needed to complete rotation applications.

Positive results will be forwarded to the Program Director and the student may be required to have an administrative consultation with one of the Student Mental Health physicians.

Health Risks

The university recognizes the convincing medical evidence that alcohol abuse and the use of illegal drugs and substances pose a significant threat to health and considers alcohol abuse and the use of such drugs and substances as harmful to the physical and psychological well-being of the user and the well-being of the Cornell community.

The following list by category is only a short sampling of some risks involved:

Narcotics: Slow and shallow respiration, clammy skin, convulsions, coma, and death.

Stimulants: Increased pulse rate, blood pressure and body temperature; insomnia, agitation, convulsions, possible death.

Hallucinogens: Illusions and hallucinations, distorted perception of time and distance, psychosis, possible death.

Cannabis: Disoriented behavior, fatigue, paranoia, and possible psychosis.

Alcohol: Drowsiness, impairment of judgment and coordination, liver and heart damage, respiratory depression and death. Mothers who drink during pregnancy risk giving birth to infants with fetal alcohol syndrome, which can include irreversible physical abnormalities, irreversible physical and cognitive disability.

Counseling and Treatment

Cornell provides various awareness and education programs for faculty, staff and students about the dangers of illegal drugs and the abuse of alcohol. Confidential support services are available for those with abuse problems who individually pursue treatment and counseling.

A Drug-Free and Alcohol Abuse Awareness Program has been established at Cornell to inform members, staff and students about the dangers of drug and alcohol abuse in the workplace, the University's policy of maintaining a drug-free workplace, available drug and alcohol abuse counseling, rehabilitation and employee assistance programs, and the potential penalties for drug and alcohol abuse violations. Further information is available from the Human Resources Department, supervisors, department chairpersons or deans.

The Employee Assistance Program (EAP) is a short-term counseling and referral service for drug and alcohol abuse as well as other employee concerns. Through the EAP, eligible employees and their dependents may obtain free counseling for substance and alcohol abuse issues which affect them and their families. EAP counselors will assess each case and may make a referral to an appropriate internal program or outside agency best suited to address the rehabilitation needs. EAP counselors will also assist in determining how Cornell health insurance will be helpful in covering costs. The Academic Staff Handbook and Employee Handbook contain further information about the Employee Assistance Program. An EAP counselor can be contacted by calling (212-74)6-5890.

Students are reminded to review the Substance Abuse Policy (which covers illicit drug and alcohol abuse) set forth in the Student Handbook and that any drug or alcohol abuse violation may impact on a student's fitness or suitability for advancement. Professional staff and advisors are available to assist and direct students to internal and outside programs. Students may also obtain assistance by contacting the Weill Medical College Student Health Service at (646) 962-6942 or the Student Mental Health Service at studentmentalhealth@med.cornell.edu or (914) 997-8691.

Institutional Review

Weill Cornell Medical College will conduct a biennial review of its drug and alcohol abuse policies and programs to determine the effectiveness of such policies and programs, implement any necessary changes, and endure consistent enforcement of required sanctions.

No Smoking Policy

Smoking is prohibited on the Weill Cornell Medical College campus, including buildings, courtyards, entrances, garages, plazas, sidewalks, and all facilities controlled by Weill Cornell Medical College.

Students who observe anyone smoking on campus should courteously notify the person smoking that smoking is prohibited or alert security officers or Environmental Health & Safety to the infraction.

Students seeking to quit smoking may contact the Student Health Service to receive information about and referrals to smoking cessation programs.

Academics Related Policies and Practices

WCM MSHS for Physician Assistants Program Students are required to complete a rigorous academic program that will enable them to demonstrate a mastery of the substantive fields of study, the technical skills of a physician assistant and the personal demeanor and character suitable to the practice of medicine. The Program has developed a set of regulations to govern academic achievement and fitness to be a licensed and practicing physician assistant. It is the responsibility of each student to be fully familiar with the Program's academic requirements and standards, the regulations in this document, and the procedures that guide the application of these policies to students.

The faculty of the PA Program is vested with the primary responsibility for developing, interpreting, and applying these policies and procedures to PA Program students. In conjunction with the Weill Cornell Medical College administrators, the faculty considers how to assist a student who is not meeting the academic standards and the manner in which the policies of the PA Program will be enforced. The Program reserves the right to interpret how these policies and procedures shall apply in specific situations, has the authority to adjust time frames as needed, shall determine the staffing of committees, shall designate which bodies will consider a matter, and will provide guidance on how the review is to be conducted, in accordance with these rules, the complexity of a case and the resources available.

All policies and procedures outlined in this document apply to students while matriculated as a student in the PA Program, when at the campus, and when engaged in programs or activities related to PA Program studies and professional experiences even if away from campus.

The general standards applicable to study at the PA Program and for professional preparation are outlined in our stated Competencies for PA Graduates. They do not and cannot anticipate every issue that may arise, either substantively or procedurally.

Competencies for Physician Assistant Graduates

In accordance with the National Commission on Certification of Physician Assistants (NCCPA), Accreditation Review Commission on Education for the Physician Assistant (ARC-PA), the Physician Assistant Education Association (PAEA), and the American Academy of Physician Assistants (AAPA), the PA Program intends that, before graduation, a student will have demonstrated the competencies for practice described in the following sections:

1. Knowledge of Practice

Demonstrate comprehensive knowledge of biomedical and clinical sciences and the application of this knowledge to acute, chronic, urgent, and emergent patient-centered care of all persons across the lifespan.

Upon completion of the program, students will be able to:

- 1.1** Demonstrate critical thinking in all clinical encounters.
- 1.2** Apply principles of epidemiology, anatomy, physiology, pathophysiology, and biochemistry to identify health problems, risk factors, diagnostic and treatment resources, and disease prevention/health promotion strategies for all persons across the lifespan.
- 1.3** Acknowledge and address social determinants that affect access to high-quality healthcare.
- 1.4** Utilize technological advancements that safely manage patient information, promote patient-centered delivery of care, and increase access to healthcare.

2. Interpersonal and Communication Skills

Demonstrate effective exchange of information and collaboration with patients, patient-identified family or proxies, and health professionals. Upon completion of the program, students will be able to:

- 2.1** Establish trusted therapeutic relationships with patients and patient-identified family or proxies to ensure needs and goals are met through the delivery of person-centered care.
- 2.2** Recognize the cultural norms, needs, influences, and socioeconomic, environmental, and other population-level determinants to optimize communication with clinicians, patients, and other stakeholders.
- 2.3** Communicate effectively, equitably, and respectfully to elicit, share, and document accurate information necessary to the delivery of high-quality care and services that are responsive to the needs of diverse populations.
- 2.4** Demonstrate emotional intelligence, resilience, adaptability, honesty, and compassion in all interactions and conversations, including discussions pertaining to sensitive topics.
- 2.5** Recognize communication barriers and demonstrate the application of effective interpersonal, oral, written, and adjunctive means of addressing communication needs.
- 2.6** Clearly communicate risks and benefits of treatment plans and informed consent, adjusting to patient communication needs when necessary.

3. Person-Centered Care (3A & 3B)

Provide person-centered care that includes patient- and setting-specific evaluation. Ensure healthcare management that is evidence-based, supports patient safety, and advances health equity. Upon completion of the program, students will be able to:

3A) CLINICAL and TECHNICAL SKILLS

- 3A.1** Create a non-judgmental, trusting environment in all clinician-patient interactions.
- 3A.2** Gather accurate patient-centered history and physical examination data in support of holistic patient care.
- 3A.3** Elicit and acknowledge environmental and cultural influences affecting patient life-stories and healthcare realities.
- 3A.4** Perform, in a safe manner, core technical procedures common in PA medical and surgical practices, including but not limited to simple suturing, IV placement, Foley catheter placement, ABG procurement, phlebotomy, and intramuscular/intradermal/subcutaneous injections.

3B) CLINICAL REASONING and PROBLEM SOLVING

- 3B.1** Interpret patient-specific data collected from laboratory, imaging studies and procedures based on patient information and preferences, current scientific evidence, and clinical judgment to make informed patient-centered care decisions.
- 3B.2** Recognize and gather appropriate diagnostic test results, formulate a differential diagnosis and counsel/educate/empower patients and caregivers, enabling shared decision-making and patient-care

collaboration.

3B.3 Apply principles of biomedical and clinical sciences to clinical problem-solving and other evidence-based general practice skills.

4. Interprofessional Collaboration

Demonstrate the ability to engage with a variety of other healthcare professionals in a manner that optimizes safe, effective, patient- and population-centered care. Upon completion of the program, students will be able to:

- 4.1** Work effectively with other health professionals to provide collaborative, patient-centered care while maintaining a climate of mutual respect, dignity, diversity, ethical integrity, and trust.
- 4.2** Communicate effectively with other professionals to establish and enhance interprofessional team dynamics, striving to improve patient outcomes.
- 4.3** Identify how healthcare professionals can collaborate and integrate clinical care and public health initiatives to optimize patient care delivery.
- 4.4** Recognize when to refer patients to other disciplines to ensure they receive optimal care.

5. Professionalism and Ethics

Demonstrate a commitment to practicing medicine in ethically and legally appropriate ways and emphasizing professional maturity and accountability for delivering safe and high-quality care to patients and populations. Upon completion of the program, students will be able to:

- 5.1** Adhere to established standards of care in the role of the PA in the healthcare team.
- 5.2** Demonstrate compassion, confidentiality, flexibility, professional civility, and respect when adapting to practice changes or during the delivery of team-based patient-centered care.
- 5.3** Demonstrate respect and responsiveness to patients, the PA program, and the profession.
- 5.4** Demonstrate cultural humility and responsiveness to a diverse professional and patient population, including, but not limited to, diversity in sex, gender identity, sexual orientation, age, culture, race, ethnicity, socioeconomic status, religion, and abilities.
- 5.5** Demonstrate individual accountability and the ability to recognize personal limitations, admit mistakes and errors, accept constructive feedback, and commit to a path of lifelong learning and improvement.
- 5.6** Demonstrate commitment to personal wellness and self-care.
- 5.7** Implement leadership practices and principles.
- 5.8** Exhibit an understanding of the regulatory environment, and the laws and regulations regarding professional practice.

6. Practice-based Learning and Quality Improvement

Critical analysis of one's own practice experience, evolving medical knowledge and commitment to lifelong learning and practice improvement. Upon completion of the program, students will be able to:

- 6.1** Access and interpret current and credible sources of medical information.
- 6.2** Exhibit self-awareness to identify strengths, address weaknesses, and recognize limits in knowledge and expertise.
- 6.3** Implement new knowledge, guidelines, standards, technologies, or services that have been demonstrated to positively affect patient outcomes.
- 6.4** Identify improvement goals and perform learning activities that address gaps in knowledge, skills, and attitudes.

6.5 Recognize the impact of evidence-based information and quality assurance initiatives in the holistic approach to patient-centered team-based care.

7. Society and Population Health

Recognize and understand the influences of the ecosystem of person, family, population, environment, and policy on the health of patients and integrate knowledge of these determinants of health into patient care decisions. Upon completion of the program, students will be able to:

- 7.1** Recognize the influence of genetic, socioeconomic, environmental, and other determinants on the provision of healthcare for an individual and a community.
- 7.2** Recognize different types of healthcare access systems and insurance coverage including Medicare and Medicaid as payors.
- 7.3** Demonstrate awareness, accountability, responsibility, and leadership in patient advocacy by addressing barriers to healthcare.

Required Courses in the WCM MSHS for PA Program Curriculum

The PA program does not grant advanced standing. All students must complete all courses in the program.

The WCM MS in Health Sciences for Physician Assistants Program requires students to accrue **102.5 credits** over seven semesters. Specific course requirements are listed below:

Preclinical Phase

Semester I (17.5 credits total)

- PASP 6000 Physician Assistant Seminar (2.0 credits)
- PASP 6010 Medical Interviewing (2.0 credits)
- PASP 6040 Anatomy (8.0 credits)
- PASP 6060 Biochemistry (1.5 credits)
- PASP 6110 Surgical Aspects in Primary Care (2.0 credits)
- PASP 6210 *Fundamentals of Primary Care & Clinical Medicine I (2.0 credits)

Semester II (18 credits total)

- PASP 6020 Physical Diagnosis I (2.0 credits)
- PASP 6050 Physiology (4.0 credits)
- PASP 6080 Pharmacology (4.0 credits)
- PASP 6120 General Surgery (3.0 credits)
- PASP 6220 *Fundamentals of Primary Care & Clinical Medicine II (3.0 credits)
- PASP 6300 Obstetrics and Gynecology (2.0 credits)

Semester III (18 credits total)

- PASP 6030 Physical Diagnosis II (2.0 credits)
- PASP 6070 Pathology (3.0 credits)
- PASP 6400 Pediatrics (2.0 credits)
- PASP 6600 Psychiatry (1.5 credits)
- PASP 6130 Surgical Specialties (2.0 credits)
- PASP 6230 *Fundamentals of Primary Care & Clinical Medicine III (2.0 credits)

PASP 6500 **Emergency Medicine (1.5 credits)

PASP 6700 Biostatistics (2.0 credits)

PASP 6800 Epidemiology (2.0 credits)

*Longitudinal Educational Experience Advancing Patient Partnerships (LEAP) is a curricular component of Fundamentals of Primary Care and Clinical Medicine I, III.

** Telemedicine training, Basic Life Support and Advanced Cardiovascular Life Support are curricular components of this course.

Clinical Phase

During the Clinical Phase of the PA Program (Semesters IV, V, VI and VII), students must complete the courses below for another total **49 credits** of required coursework.

Required (Core) Rotations

MEDC 6001 Internal Medicine I (3.0 credits)

MEDC 6002 Internal Medicine II (3.0 credits)

MEDC 6004 Internal Medicine III (3.0 credits)

SURG 6001 Surgery I (3.0 credits)

SURG 6002 Surgery II (3.0 credits)

PRCM 6001 Family Medicine/Primary Care (3.0 credits)

PEDS 6001 Pediatrics (3.0 credits)

OBGY 6001 Women's Health (3.0 credits)

EMER 6001 Emergency Medicine (3.0 credits)

PSYC 6001 Mental and Behavioral Health (3.0 credits)

Students are not required to provide or solicit clinical sites or preceptors Elective Rotations (PASC 8010 – PASC 8050)

Five (5) Elective rotations (each 3 credits)-students may choose from the available sites at NewYork Presbyterian Hospital-Weill Cornell Campus and Affiliates.

Elective External and International Electives are allowed with permission from the PA Program Administration and the University Counsel. Such electives are considered a privilege and will not be permitted for students who have demonstrated a lack of professionalism. Only students in good academic and professional standing will be allowed to participate in these electives.

(Please note: *The use of the word "selective" could represent your elective rotations on the final transcript.*)

Research PASM 8000 Research Methodology and Application (4.0 credits)

This course begins during the orientation week for clinical rotations and continues throughout the clinical phase of the program. Lectures are typically given during scheduled end of rotation meetings. The course culminates with the successful defense of a master's thesis.

***Longitudinal Educational Experience Advancing Patient Partnerships (LEAP)**

LEAP (Longitudinal Educational Experience Advancing Patient Partnerships) is an additional required curricular component of the Physician Assistant Program which is part of each Fundamental of Primary Care and Clinical Medicine course series. LEAP is an innovative program that allows students of Weill Cornell Medicine to participate in the healthcare experiences of assigned patients (referred to hereafter as "patient-teachers") who

reside in their community, from the beginning of their PA Program experience and continuing throughout their training.

The goals of the LEAP program are:

1. to allow students to partner with patient-teachers early in their PA education
2. to provide a clinical experience that will complement and enrich classroom experiences
3. to help students understand the complexity of the healthcare system and appreciate patient's experiences within the system
4. to foster humanistic and culturally sensitive medical care
5. to explore the meaning of professionalism and collegiality
6. to experience the richness of the provider-patient relationship over time

Preclinical phase students are generally assigned two patient-teachers initially. Students are expected to engage with their patient-teachers at least once a month, ideally in the context of a medical office visit, hospitalization, home visit, virtual encounter (telemedicine), or phone call. Students meet monthly in small groups with two faculty members to discuss these experiences, review the clinical and psychosocial dimensions of patient care, and reflect on the strengths and weaknesses of the healthcare system. PA students will work collaboratively with medical students and Weill-Cornell/NYP faculty in the LEAP program.

** As part of the Emergency Medicine course in Semester 3, students will attend a Telemedicine training course, as well as earn certifications in both Basic Life Support and Advanced Cardiovascular Life Support. Summative Evaluation Policies and Practices

In accordance with the accreditation standards of Accreditation Review Commission on Education for the Physician Assistant (ARC-PA), students must successfully pass all components of a Summative Evaluation within the last (4) months of the program. This evaluation includes the following components: Medical Knowledge Exam, Final OSCE, Technical Skills Examination, Master's Thesis Defense. A score of 70% or higher must be achieved for each component. Failure to pass a component will necessitate remediation, which could result in delayed graduation.

Below is a description of each component.

1. Medical Knowledge Exam – Competency 1 - Knowledge of Practice

The standardized 300-question multiple-choice-exam that is one component to assess the student's readiness to graduate based on blueprint and content breakdown Competency is defined as a score of 1400 or greater. If a student scores below 1400, the student will be provided with a remediation plan and must pass the PAEA EOC reassessment (no earlier than 60 days after the 1st exam) in order to graduate. Failure to pass this exam will result in delayed graduation and referral to the Promotions and Graduation Committee. Students who score between 1400-1500, pass the MKE component of the Summative Evaluation. Although they pass, they are considered at risk for failing PANCE and will have a remediation plan assigned by the faculty with a program reassessment.

2. Final OSCE –Competency 1 -Knowledge of Practice, Competency 2- Interpersonal and Communication Skills, Competency 3-Person-Centered Care (3A Clinical and Technical Skills, 3B Clinical Reasoning and Problem-Solving Abilities), Competency 4- Interprofessional Collaboration, Competency 5-Professionalism and Ethics

The final OSCE consists of a problem focused vignette with a standardized patient at the clinical skills testing center. Students are evaluated by faculty on both their encounter with the Standardized Patient, written

documentation, and an oral presentation. The student must gather a problem-focused history and physical examination, communicate effectively with the patient, and provide problem-specific patient education.

Students will also complete a written assessment with possible differentials, an accurate diagnosis, and a comprehensive treatment plan. As part of the OSCE, the student gives an oral presentation for each case to a member of the medical team.

The OSCE is divided into different sections to verify competency in each area (Knowledge of Practice, Person-Centered Care (Clinical and Technical Skills, Clinical Reasoning and Problem-Solving Abilities), and Professionalism and Ethics, Interpersonal and Communication Skills, Interprofessional Collaboration.

Students must reach the minimum score in each section and receive a total score of 70% or higher on each OSCE case (see OSCE rubric for specific sections). If a student does not reach the minimum score for one or more sections, they must perform a remediation activity appropriate to that section. If the total score for an OSCE case is less than 70%, the student must repeat the OSCE. Passing the OSCE is a graduation requirement. If the student fails the reassessment, this will result in delayed graduation and referral to the Promotions and Graduation Committee.

3. Technical Skills Testing – Competency 3-Person-Centered Care (3A Clinical and Technical Skills)

Students must be prepared to demonstrate competency in any of the skills below. Students will be randomly assigned two of the skills listed and are required to demonstrate competency defined as 70%. If the student scores less than 70% on one of the skills, they will require remediation and retesting at another time. Passing of the technical skills section is a graduation requirement. Failure to pass the Technical Skills Testing will result in delayed graduation and referral to the Promotions and Graduation Committee.

- Arterial blood gases
- Intramuscular/Subcutaneous/Intradermal injections
- Intravenous placement
- Venipuncture
- Urinary catheterization
- Suturing

4. Master's Thesis Defense – Competency 1 Knowledge of Practice, Competency 6- Practice Based Learning and Quality Improvement, Competency 7- Society and Population Health

Students must successfully defend their Master's Thesis presentation as part of the Summative Evaluation. Competency is defined as an average score or higher in each competency section. Failure to meet this competency may require a rewrite and resubmission of the thesis, and/or an additional thesis defense; it may result in delayed graduation and referral to Promotions and Graduation Committee.

Technical Standards Policies

All candidates for the Physician Assistant (PA) Certificate of Completion and Master of Science in Health Sciences degree must possess the intellectual ability to learn, integrate, analyze, and synthesize data. They must have functional use of the senses of vision, hearing, equilibrium, and taste. Their exteroceptive (touch, pain, temperature) and proprioceptive (position, pressure, movement, stereognosis, and vibratory) senses must be sufficiently intact to enable them to carry out all activities required for a complete PA education. Candidates must have motor function capabilities to meet the demands of PA education and the demands of total patient care.

Specifically, all candidates must possess and maintain the following abilities and skills while enrolled in the PA

Program, from matriculation until completion of all degree requirements:

Observation: The ability to observe is required for demonstrations, visual presentations in lectures and laboratories, laboratory evidence and microbiological cultures, microscopic studies of microorganisms and tissues in normal and pathological states. A candidate must be able to observe patients accurately and completely, both at a distance and closely. This ability requires functional vision and somatic sensation and is enhanced by a sense of smell. This ability also requires maintaining a satisfactory level of attentive focus and vigilance for prolonged periods of time.

Communications: A candidate should be able to speak, hear, and observe patients in order to elicit information, perceive non-verbal communications, and describe changes in mood, activity and posture. The candidate must be able to communicate effectively and sensitively with patients including not only speech but also reading and writing. Communication in oral and written form with the health care team must be effective and efficient.

Motor: A candidate should have sufficient motor function to elicit information from patients by palpation, auscultation, and percussion, as well as carry out diagnostic maneuvers. A candidate should have motor function sufficient to execute movements reasonably required to provide general care and emergency treatment to patients. Such skills require coordination of gross and fine muscular movements, equilibrium, and sensation.

Intellectual-Conceptual, Integrative and Quantitative Abilities: Problem solving is a critical skill demand of PAs and this requires all these abilities. The candidate must also be able to comprehend three-dimensional relationships and the spatial relationship of structures.

Behavioral and Social Attributes: A candidate must have the emotional health to fully use his/her intellectual ability, to exercise good judgment, complete all responsibilities, and attend to the diagnosis and care of patients. A candidate must be able to develop mature, sensitive, and effective relationships with patients and colleagues. A candidate must be able to tolerate physical and emotional stress and continue to function effectively. A candidate must possess qualities of adaptability, flexibility and be able to function in the face of uncertainty. They must have a high level of compassion for others, motivation to serve, integrity, and a consciousness of social values. A candidate must possess sufficient interpersonal skills to interact positively with people from all levels of society, all ethnic backgrounds, and all belief systems.

The administration of the PA Program recognizes its responsibility to present candidates for the Master of Science in Health Sciences for Physician Assistants Degree and Certificate of Completion who have the knowledge and skills to function in a broad variety of clinical situations and to render a wide spectrum of patient care. The responsibility for these technical standards is primarily placed on the PA Program admissions committee to select entering PA students who will be the candidates for the MSHS PA Program *Master of Science in Health Sciences for Physician Assistants Degree and Certificate of Completion*.

Examination Policy

All examinations will start promptly at the time indicated in the Weill Cornell Medicine [Canvas® calendar](#). Students are expected to arrive for all exams/practicals at least 15 minutes prior to the scheduled start. Students will have the time indicated to complete the examination. If a student is going to be late for an exam, they must email the Preclinical or Clinical Directors. If a student arrives late for an exam there will be no extension of time. If a student arrives more than 15 minutes late, they may not be able to take the exam and may take at a later date and are subject to a 5-point deduction on that exam. Per the student honor code, students may not reproduce the contents of any examination by any means. Examination proctors are

responsible for the maintenance of a controlled testing environment. During the testing period, students will abide by the instructions of the proctor as well as testing platform (e.g., Exemplify/Exam Monitor) and will not disrupt the testing environment. If a proctor notices suspicious activity, the proctor may ask questions and document activity. Any dispute of a proctor's actions will be addressed at a later time by the MSHS PA Program Administration.

All student belongings (coats, hats, phones, apple/smart watch, books, backpacks, bags, beverages, snacks) must be inaccessible during exam administrations, either in their locker or in the front of the classroom. Students are to remove everything from their workspace except for an approved device (iPad or laptop) and if desired, a cleared dry erase board and marker, for use as "scrap." At the completion of the exam, the student is responsible for clearing the dry erase board and displaying the dry erase board and iPad screen with proof the exam uploaded. to the proctor.

No cell phones or other electronic devices including apple watches (other than the iPads or laptops) are permitted within the testing environment, unless specified by the proctor. No students should not leave the classroom until they have completed their exam (except for emergencies). Students are asked to use the bathroom prior to the exam starting. No questions will be entertained during the exam. There is no talking or use of electronic devices during the exam. Students may not take screenshots or pictures of the exam or write down exam questions.

In the event that a student is having a technology problem during the examination, they must alert the proctor or designated PA program faculty immediately and inform them of the issue to work towards a resolution.

When the testing environment is a proctored classroom setting, no student may leave the room until all students have arrived for the exam. Students are not permitted to leave their seats during the exam. Once the student has completed and successfully uploaded their exam, they may leave the room. Students who have finished the exam are reminded to be respectful of their classmates and be as quiet as possible while the exam is in progress. Students may not return to the exam room until the remainder of the class has completed the exam.

In accordance with the MSHS PA Program Standards of Conduct and the NCCPA policies, students are reminded of the following:

Students are not to discuss the test with other students:

- This includes sharing exam questions or general subject matter
- Students are not to seek information about the exam prior to its administration from other students
- Students are not to copy answers from other students during the exam,
- Students are not to make notes during the exam or copying or memorizing or reproducing test items
- Students are not to steal exam materials
- Students are to refrain from any behavior that may cast doubt on the exam. results

Students who are found to be in violation of this policy will be brought before the Committee on Promotion and Graduation in accordance with the policy outlined above in the Standards of Conduct.

Access to Examination Answers, Grades, and Student Assessment Forms

Examination, practical, and OSCE grades will be posted to Canvas by the course or pre-clinical directors once all examination review and item analysis have been completed. Students will be notified by the course or pre-clinical directors once graded items are available for viewing. Students are NOT permitted to request their

individual grades from any faculty or staff member before the grades have been officially posted. This process is meant to ensure exam consistency, confidentiality and adherence to academic standards. Once grades have been released, students may review their exam performance reports by appointment with their advisor, the course director or the Preclinical Lead. Students are not permitted to take notes or make copies when reviewing their exam.

Course Materials

Most course materials, including a schedule of classes and activities, are available via [Canvas](#), the Program's Learning Management System website although other platforms may be used to communicate with students such as Oasis which is utilized for the clinical year students. Materials can be downloaded for viewing and annotation for personal use only.

Communication to Students

To keep apprised of schedule changes, room assignments, exam information, and other course announcements, it is very important that students check the Canvas course website and their Cornell e-mail daily. Students may also be contacted by telephone as necessary, particularly for late changes to courses or weather-related emergencies.

Grading Policies

Individual course syllabi should be consulted for the level of performance required for successful completion of that course. Successful completion of a course includes, but is not limited to course work, maintaining professionalism, attendance, punctuality, and other criteria as stated in each course syllabus.

Student performance for the preclinical phase of the PA Program will be reviewed and tracked by the Preclinical Lead in conjunction with the student's Academic Advisor. Student performance for the clinical phase of the PA Program will be reviewed and tracked by the Clinical Team.

The Preclinical Lead, in conjunction with the course instructors; and the Clinical Co Leads, in conjunction with the rotation preceptors; determine the student's final grade in each course after evaluation of the student's performance in all aspects of the course work, including results of examinations. The grade of Honors, High Pass, Pass or Fail will be recorded on the student's final transcript. The grade of Pass (P) or Fail (F) is used for specific courses as identified by the course coordinator.

The grading system is as follows:

H = Honors (93-100)

HP = High Pass (83-92)

P = Pass (70-82)

F = Fail (below 70)

I = Incomplete

W = Withdrawal

AU = Audit (This term is used when a student has already taken this course and has received a passing grade. Students may audit courses they have already passed if they are repeating another course for a grade due to a prior failure.)

The interim grade "Incomplete," a non-passing temporary grade, may be assigned to any course in which the performance is otherwise satisfactory but the student has not completed a required component or activity. The Preclinical or Clinical Leads may permit the student to complete or remediate the course requirement at a subsequent agreed upon time. If the student does not complete the activities by the specified date, the grade of

“Incomplete” will become a “Fail” and the policies for failed courses will apply.

In the event that a student does not satisfactorily complete the requirements of a course, that student will receive a grade of “F” (Fail) and the policies for a failed course will apply. This includes the ability to participate in entering the clinical phase of the program.

Students may seek clarification about a grade for an examination, performance based assessment, or a final course grade that does not seem consistent with the student’s view of his or her performance. If the student believes that there is a credible basis to assert that the grade received does not reflect their objective course performance, the student should seek the guidance of either the Preclinical Lead or the Clinical Team, as appropriate. In the event that resolution of the matter cannot be achieved between the applicable Director and the student, the student may appeal the decision per the PA Student Grievance Policy.

Student Request for Grade Review/Appeal Policy

If a student believes that there is a credible basis to assert that an examination, written assignment, or grade awarded does not reflect the student’s objective course performance, the student must first seek the guidance of the Course Director before filing an appeal in writing for a formal Grade Review. This must be done within 30 calendar days of the posting of the grade. If a discussion with the Course Director (or designee if unavailable) does not resolve the issue, the student must present the concerns in writing for a request for a formal Grade Review or evaluation no later than 45 calendar days following the posting of the grade. Grades may not be appealed after this 45-day deadline has passed. The student should set forth the reasons for his or her request for review of the grade. In consultation with the faculty involved, the Program Director, or his/her representative, has discretion to request documents and relevant information that would be needed to conduct a full and fair assessment of the evaluation or grade under review. The Program Director shall determine a final resolution and communicate this to the student and to the appropriate Course Director within 30 calendar days of the request for course evaluation/grade review. The decision of the Program Director shall be considered final and is not subject to further appeal.

Grade Review Timeline Process and Checklist:

1. Student grade posted
2. Student emails Course Director within thirty (30) calendar days of grade posting
3. The Course Director (or designee if unavailable) meets with the student as soon as possible to address concerns and review applicable data. The meeting must occur within forty-five (45) days of the grade posting to allow student time to file an appeal to the Program Director for a formal grade review.
4. Course Director (or designee, if unavailable) promptly communicates decision in writing to student **grade upheld or grade changed**.
 - If grade is changed, the Course Director also submits a grade change form to the Registrar’s Office
 - If grade upheld (i.e., not changed), the student has forty-five (45) calendar days from grade posting to email the Program Director of the outcome of the meeting with the Course Director to file a request a formal Grade Review. (The request for a formal Grade Review can be filed only after the Course Director’s decision following his or her review of the student’s concerns.)
5. The Program Director has thirty (30) calendar days from student request for a formal Grade Review to adjudicate and communicate in writing to student and Course Director the final decision.

Student Progress Policies and Practices

Advisors to Students

Each student is assigned an Academic Advisor from among the principal PA Program faculty. This Academic Advisor will be the same throughout the student's entire education at the PA Program. Advisors are cognizant of the unique needs of the students in this Program and are a valued resource in all phases of the program. A list of Academic Advisors is provided, in writing, early in the preclinical phase.

Students will be required to meet with their Advisor at the mid-point of each semester of the preclinical phase and once during the clinical phase. The students are also required to meet with their Advisor after failing an exam or scoring between 70-75% on an exam during the preclinical phase to determine the need for academic support. At the completion of a semester, any student scoring less than 80% in a course will see their advisor to determine the need for academic support. Additionally, students are encouraged to contact their Advisor throughout their education at the PA Program with any concerns.

Student academic and professional difficulties will be evaluated by the Preclinical Lead or Clinical Team, and the Program Director. This surveillance occurs as early as possible so that appropriate strategies to remedy challenges may be offered to the student.

It is the responsibility of the student to seek advice from their Academic Advisor at the PA Program when a student is having academic difficulty with a course(s) (or their overall academic performance) during either the preclinical or clinical phase. Early intervention with academic challenges is in the student's best interest.

At any point during the Preclinical phase of the curriculum, if the Preclinical Lead determines the student to be "at academic risk" by meeting any of the criteria listed below, the Preclinical Lead will notify the student, the Academic Advisor and the Program Director in writing (a copy of such correspondence will be placed in the student's file).

- Any 2 Individual Course Exams in the same course 70-75%
- Final course grade less than 80%
- Fails any individual exam in a course with only 2 exams
- 3 or more individual exams are failed in the same semester
- 1 (or more) Courses are failed and remediated
- 2 Fundamental modules are failed and remediated

The Academic Advisor will then meet with the student and outline a plan to address the deficiencies in the student's performance as well as to help them improve. A student who continues to have academic difficulty despite an ongoing academic improvement plan may be referred to the Program Director for further counseling and advisement.

During the Clinical phase of the curriculum, if the Clinical Team determines the student to be "at academic risk," by meeting any of the criteria listed below, the Clinical Team will notify the student, the Academic Advisor and the Program Director in writing (a copy of such correspondence will be placed in the student's file). The Director of Clinical Team will then meet with the student and outline a plan to address the deficiencies in the student's performance as well as to help them improve. A student who continues to have academic difficulty may be referred to the Program Director.

- Any 2 EOR Exams score 70-75%
- 2 or more EOR exam failures
- Course/SCPE Grade less than 80%
- Preceptor evaluation less than 75%

- 1 (or more) courses/SCPEs failed and successfully remediated
- 1 (or more) courses/SCPEs failed and remediation failed requiring repeat

Regarding the Summative Evaluation, the summative evaluation is a 4-part evaluation occurring in the clinical phase during the last 4 months of the program.

- Failure of Medical Knowledge/End of Curriculum Exam
- Failure of Technical Skills Exam component
- Failure of the Final OSCE
- Failure of the Thesis Defense

Academic Counseling and Tutoring

The PA Program provides academic counseling and/or tutoring or supplemental support to students who have academic difficulty. Advisors may refer the student to the Learning Specialist for additional support and to assist in developing an individualized plan for the student. Alternatively, students may access resources through any program faculty member.

Financial Aid Guidelines for Academic Progress

Satisfactory academic progress is reviewed for each student receiving financial aid from Weill Cornell at the end of every payment term. If a student exhibits unsatisfactory academic performance as determined by the Committee on Promotion and Graduation, the student receives notification in writing from the Program Director, which includes a Financial Aid warning for the subsequent payment term. If a student fails to make satisfactory progress after a warning period, then the student is placed on probation and is ineligible for subsequent financial aid payment. Under this circumstance, a student may be offered an individual academic improvement plan in accordance with the Committee on Promotion and Graduation's criteria to re-establish satisfactory progress and is permitted to receive financial aid for an additional payment term. Failure to improve after warning and probation period may be grounds for academic dismissal.

Guidelines/Policies for Promotion and Graduation

The PA Program curriculum represents the academic standards students are required to meet. To be awarded the Master of Science in Health Sciences, a student must successfully complete all required preclinical and clinical coursework.

The curriculum of the PA Program is divided into two phases. The first phase consists of eleven of classroom education ("preclinical"), which is comprised of three academic semesters. Each semester's coursework builds upon the subject matter and experiences in the preceding semester. The second phase involves sixteen months of clinical training ("clinical"), which is comprised of 15 four-week clinical rotations over three academic semesters. A research project occurs during the clinical phase which is designed to prepare a student in writing and defending a thesis.

A student is expected to exhibit mastery of course objectives set by the faculty, and to complete the required courses, rotations, and summative elements as determined by the faculty. A student's progress is assessed and monitored on an on-going basis. If a student does not demonstrate an acceptable level of proficiency or has not made timely progress toward the satisfactory completion of the curricular requirements, the Committee on Promotion and Graduation will determine whether a student may continue in the PA Program. In the event the Committee on Promotion and Graduation determines a student does not satisfy these academic standards, including suitability to practice medicine the Committee may recommend that student be dismissed and may no

longer participate in any educational activities of the PA Program.

Upon the completion of each semester, a student's performance is evaluated and recorded by the Program faculty. The Committee on Promotion and Graduation will review the ongoing progress of each student at the conclusion of each semester of the curriculum. Meetings of the Committee on Promotions and Graduation will be scheduled as needed to address any academic or professional/ethical concerns.

The purpose of the Guidelines for Promotion and Graduation is to detail as clearly as possible the requirements necessary to successfully complete the PA Program. Course work, attendance, and class participation are all considered when arriving at a final grade. In the event of a pattern of “at academic risk” performance or failure or if there is a breach in professionalism during the preclinical or clinical phases of the PA Program, the following general principles will be applicable:

1. Any student who, in the judgment of the faculty, lacks suitability to enter the medical profession, may, pursuant to the Standards of Conduct and/or the Guidelines for Promotion and Graduation, be dismissed from the PA Program.
2. A student who exhibits unsatisfactory performance during either the preclinical, clinical phase, or research phase is subject to dismissal from the PA Program and the student's performance will be reviewed by the Committee on Promotion and Graduation. The Committee will make a recommendation to the Program Director, which may include dismissal, academic probation, or deceleration to a subsequent cohort of the Program (with a leave of absence until the start date of the next offering of the relevant coursework) so that the student may demonstrate satisfactory performance in any previously failed course. In the case of deceleration, in addition to repeating failed courses, the Committee on Promotion and Graduation may require the student to audit any course in which they received a marginally passing grade.
3. A student must successfully complete all of the course work of one semester before he or she can be approved by the Committee on Promotions and Graduation for promotion to the next semester or phase of the program.
4. A student will have access to a process of appeal in cases where a denial of academic advancement or dismissal is in question (See Appeals Process).

Preclinical Phase:

5. A student must successfully complete all components of every course in the preclinical phase of the PA Program before he or she can be approved for promotion to the clinical phase of the PA Program by the Committee on Promotion and Graduation.
6. An academic risk improvement plan individualized for the student in need or re-examination may be offered, at the discretion of course leadership, to a student who fails a course. Further details are described in the syllabus of each individual course.
7. A student cannot remediate more than two preclinical courses. If a student fails a course remediation, it is grounds for dismissal from the PA Program. No remediation will be offered to students who fails a third course as this is grounds for dismissal from the PA Program.
8. A student must pass each Fundamentals of Medicine module. A student may not remediate more than three modules. Failure of the fourth module is grounds for dismissal from the program.
9. A student must pass the End of Preclinical Summative Evaluation multiple choice examination and the End of Preclinical Summative OSCE (OSCE 2). If the student fails either of these evaluations they will be offered a remediation exam. Failure of the remediation exam is grounds for dismissal from the PA program.

Clinical Phase:

10. During the clinical phase of the PA Program, a student must successfully pass (or remediate, when

applicable) all components of each rotation and all additional clinical-year coursework and requirements. Successful completion of all rotations is necessary for graduation from the PA Program.

11. If a student fails the preceptor evaluation, the student fails the rotation and may necessitate that the student repeat (remediate) the entire rotation. The determination of a failing grade in a rotation is delineated in the *Clinical Year Guidelines and Syllabus*.
12. A failing grade in any rotation may necessitate that the student repeat (remediate) the entire rotation. The determination of a failing grade in a rotation is delineated in the *Clinical Year Guidelines and Syllabus*.
13. *A student may not remediate more than three (3) EOR exams. Failure of the fourth EOR exam is grounds for dismissal from the PA Program.*
14. A student may not fail and repeat (remediate) more than two rotations during the clinical phase. A failure of a repeated (remediated) rotation will be considered unsatisfactory overall performance and is grounds for dismissal from the PA Program. No remediation will be offered to students who fails a third rotation, as this is grounds for dismissal from the PA Program.

Research Phase:

15. 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.
16. A failed remediation is considered unsatisfactory performance in the *PASM 8000* Research Methodology and Application course and grounds for dismissal.

Summative Examination:

17. Students must successfully pass all components of a Summative Evaluation within the last four (4) months of the program. This evaluation includes the following components: Medical Knowledge Exam, Final OSCE, Technical Skills Examination, and Master's Thesis Defense. A score of 70% or higher is expected for each component. Failure to pass a component will necessitate remediation, which could result in delayed graduation or further action by the Committee on Promotion and Graduation. Failed remediation of a portion of the Summative Evaluation is grounds for dismissal.

Students are referred to Committee on Promotions and Graduation and are subject to dismissal from the program for the following reasons:

- Three (3) Preclinical Course failures
 - A student may successfully remediate a maximum of two (2) failed Preclinical courses. If they fail a third (3rd) course, they may not remediate and are subject to dismissal.
- Three (3) Clinical Course (SCPE) failures
 - A student may successfully remediate a maximum of two (2) failed Clinical courses. If they fail a third (3rd) course, they may not remediate and are subject to dismissal.
- Four (4) EOR **Exam** Failures
 - A student may successfully remediate a maximum of three (3) End-of-Rotation Exams (EOR). If a student fails a fourth (4th) EOR exam, they may not remediate and are subject to dismissal.
- Four (4) Fundamentals of Medicine **Module** Failures OR two (2) Fundamentals of Medicine **Module** Failures in one semester
 - A student may successfully remediate a maximum of 3 Fundamentals of Medicine Modules during the Preclinical year. If a student fails a 4th module exam, they may not remediate and are subject to dismissal.
 - A student may successfully remediate two Fundamentals of Medicine Module exams per semester. If a student fails a third (3rd) module exam, they may not remediate and are subject to dismissal.
- Any Failed remediation

- Summative Evaluation components (Medical Knowledge End of Curriculum Exam, Final OSCE, Technical Skills Testing, Thesis Defense)
- Summative Preclinical Assessments (Multiple Choice exam or OSCE)
- OSCE
- Breech in professionalism

Student Success Policy

The program faculty continuously monitors student performance throughout the preclinical, clinical, and research phases of the program. Students identified to fall below program defined professional and academic benchmarks will be given additional guidance and tools as soon as possible and entered into a structured student success program. The intent of these processes is to ensure students are able to successfully complete the program and ultimately pass the PANCE examination. The process is not intended to be punitive.

The process is as follows:

1. The preclinical lead, clinical lead, and research lead will monitor examination scores beginning early in the preclinical phase of the program and students falling two (2) standard deviations below the class average on any module in Fundamentals of Primary Care & Clinical Medicine (“Fundamentals I, II, III”), Obstetrics and Gynecology, Physical Diagnosis I and/or II, Pediatrics, Psychiatry, Emergency Medicine, two (2) end-of-rotation exams, and program competency examinations will be identified as falling below program benchmark.
2. The course director (s) will notify the Academic Affairs and Student Success Lead and faculty advisors of any student who meets the criteria outlined above.
3. The Academic Affairs and Student Success Lead will notify the student and faculty advisor of any student who meets criteria outlined above (see item 1), and a student success plan will be developed based on deficiency.
4. Academic tutoring will be strongly encouraged and can be arranged by the program for students who meet criteria as noted above. Additionally, other forms of student success and remediation activities may be developed by faculty (refer to academic tutoring).
5. Students may also be required to complete 30 questions weekly using the “create exam” feature on a platform such as Blueprint (Rosh) or an alternative question bank approved by the Academic Affairs and Student Success Lead. During the clinical phase of the program, students will complete a minimum of 30 questions weekly based on the current clerkship, for the *entire duration of the clinical year*. If you have access to various question banks, students may alternate submitting scores week to week between those question banks. Please note, during elective rotations students must select weekly questions based on different areas of medicine they may have found challenging or topics with lower practice scores. **Students must email the Academic Affairs and Student Success Lead a time stamped screenshot by Monday morning for each week of the clerkship.** You do not need to cc the other members of the Clinical Team on this email. I do not need the breakdown of questions/topics. Be sure to attach score **to the same email thread** every week and change the subject line to **“Student Success Questions Rotation #: Week #”** for the entire year.

Remediation Policy

Remediation in any of its forms (including at academic risk improvement plans, remedial assignments, re-examination, or course repetition) is an option which may be offered to an individual student at the discretion of the PA Program faculty, based on the student’s academic record and consideration of circumstances related to the completion of the course.

Preclinical phase:

During the preclinical phase, a student who fails a course or assessment will be offered the opportunity to remediate (unless this failure is the third course failure or fourth EOR or Fundamental module whereby the above Guidelines for Promotion and Graduation will apply). Remediation is coordinated in conjunction with the Preclinical Lead and will consist of but is not limited to re-examination, remedial academic assignments, or other tasks.

In the three Fundamentals of Primary Care and Clinical Medicine courses, failure to achieve a passing score in a module will require successful remediation of that module with a repeat assessment. Remediation of a failed module must be completed in 14 days of notification of the failed module. Instructions for remediation will be given at the time a student is notified of a failed module. The student will be required to pass (with a 70% or greater) a remediation assessment. Once the remediation assessment has been passed the grade will be adjusted to a 70%. Failure to successfully remediate the assessment with a score of 70% or greater will result in a failing grade for the module (the remediation grade will stand). This will necessitate a cumulative remediation of the course. If the student fails the remediation exam, this is grounds for dismissal and the student will be referred to Committee on Promotions and Graduation. A student cannot successfully remediate more than two (2) modules in one semester or more than three (3) modules in the preclinical year. Failure of the fourth module is grounds for prompt automatic dismissal and the student is referred to the Committee on Promotion and Graduation.

At the end of the preclinical year, students must pass the Summative Preclinical multiple choice exam and Summative End of Preclinical OSCE (OSCE 2) in order to progress to the clinical year. If a student fails either of those assessments, they will be offered a remediation assessment.

Remedial work, including re-examination, for courses in which a student has not received a passing grade will ordinarily be offered at times which do not conflict with regularly scheduled academic activities.

Remedial work and any re-examination needed in preclinical phase courses will be scheduled within two weeks after the end of the semester and may require completion within the first week of the subsequent semester. A course failure in the third semester must be remediated prior to the beginning of the clinical rotations.

Students of the preclinical phase who successfully remediate a course will be given a maximum grade of Pass (70%). Students who do not successfully remediate will receive a grade of Fail for the course. A failing grade for a remediated course is considered unsatisfactory performance and grounds for dismissal and is referred to the Committee on Promotion and Graduation.

The Committee on Promotion and Graduation will determine whether a student may continue in the PA Program. In the event the Committee on Promotion and Graduation determines a student does not satisfy these academic standards, including suitability to practice medicine, the Committee may recommend that student be dismissed and may no longer participate in any educational activities of the PA Program.

Clinical Phase:

If a student fails a clinical course (rotation) the student must repeat the entire course (rotation) at the conclusion of the clinical phase (unless this failure is the third failure whereby the above Guidelines for Promotion and Graduation will apply). Successful completion of the repeated (remediated) rotation as defined in the Clinical Year Syllabus must be achieved before the student will receive a certificate of completion or degree. The student is responsible for the completion of all assignments related to the repeated rotation.

If a student fails a preceptor evaluation, the student fails the rotation and must repeat/remediate the rotation. If a student fails an End of Rotation examination, they must take and pass a remediation exam to pass the rotation. If the student fails the remediation exam, they fail the rotation and must repeat the rotation. If a student fails 3 rotations, it is grounds for dismissal and is referred to the Committee on Promotion and Graduation. A student may not remediate more than 3 EOR exams. Failure of the fourth EOR exam is grounds for dismissal and the student is referred to the Committee on Promotion and Graduation.

Students of the clinical phase who successfully repeat (remediate) a rotation will be given a grade of Pass. Students who do not successfully repeat (remediate) a rotation will receive a failing grade for the course (rotation). A failing grade for a repeated (remediated) rotation is considered unsatisfactory performance and grounds for dismissal, and the policy above will apply.

Research Phase:

As part of the Master of Science in Health Sciences for Physician Assistant degree, students will participate in PASM 8000 Research Methodology and Application. This course will take place throughout the clinical year, culminating with the successful defense of a Master's thesis.

All students must successfully complete and defend a Master's thesis under the guidance of a Weill Cornell Medicine approved thesis committee and electronically submit an approved final draft of the thesis in advance of published deadlines. Students are required to complete all components of the Research Methodology and Application course as indicated by the course syllabus in order to be eligible for the certificate of completion and the MSHS degree. The thesis defense is the capstone event of the research phase of the program; students must earn a grade of Pass as determined by consensus of the Master's Thesis Special Committee, and also must achieve a score of 70% or higher on the Master's Thesis Defense Summative Evaluation as determined by a designated faculty member in attendance at the student's thesis defense. Unsatisfactory performance will be remediated in one of the following ways, as determined by consensus of the Master's Thesis Special Committee: 1) a repeat of the oral defense after a sufficient time to prepare and incorporate formative feedback, or 2) circulation among the Committee of a revised thesis document which must address each of the deficiencies identified in the oral defense. A failed remediation is considered unsatisfactory performance in the Research Methodology and Application course and grounds for dismissal, and the policy above will apply.

Deceleration Policy

Deceleration is defined as the loss of a student from their entering cohort who remains matriculated in the Physician Assistant program (see ARC-PA definition).

Deceleration may result for the following reasons:

1. If a student fails the remediation of a course (if approved or recommended by the Committee on Promotions and Graduation)
2. If the student takes a leave of absence for personal reasons (if approved by the Program Director), for example, medical, personal, financial reasons.

Leave of Absence Policy

A Leave of Absence (LOA) is an approved specified period of time in which a student is excused from rotations or didactics and may return without reapplication to the PA Program. A student may request and be granted a LOA from the PA Program, if the following conditions are met:

1. The student must be in good academic standing as judged by the Committee for Promotion and Graduation.
2. A student must write a formal detailed letter to the Program Director, detailing the request for the LOA. The

LOA must be for a legitimate reason, as judged by the Program Director and the Committee for Promotion and Graduation, i.e., personal, financial, illness, etc.

The PA program curriculum is “lock-step,” therefore, if a student takes a leave of absence in the preclinical year, the student must wait until the following year to resume study with the subsequent cohort. In the clinical phase of the program, depending upon the length of the leave of absence, graduation may be delayed, which may result in a delayed ability to take PANCE and begin working.

A LOA is granted by the Committee for Promotion and Graduation on the recommendation of the Program Director and is only for the requested and approved period of time and cannot be extended without the student repeating the formal procedure outlined above.

The leave of absence does not relieve the student of the obligation to comply with the policies and procedures of the PA Program, including but not limited to, those standards governing course remediation and repetition, completion of academic work and time frames for completion of the PA Program curriculum.

A student on LOA is responsible for the fee schedule that is in effect upon their return to the PA Program. Taking a leave of absence also may have implications for student loan deferment/repayment status, housing, health coverage, or financial aid eligibility. Prior to applying for a leave of absence, students should discuss their individual circumstance with the Office of Financial Aid to ensure that loans and financial aid are not adversely affected by the leave.

Students on leave may also be charged other fees to continue to receive PA Program benefits or services.

Students who do not return to full-time status at the end of an approved leave, and who have not applied for and been approved for continuation of their leave of absence status, will be considered to have withdrawn from the PA Program. Under certain circumstances, a student who wishes to return from a leave may have to satisfy previously set conditions for rematriculation.

Types of Leaves

Medical

A medical leave of absence is granted by the Program Director upon the recommendation of the student’s treating physician and/or an administrative physician consultant appointed by the PA Program. The purpose of the medical leave is to enable students to seek treatment for a health-related condition that interferes with the student’s ability to undertake the curriculum or that poses a threat to the health and safety of the student or others. The term of the leave is for a period of time based upon the recommendation of the treating physician and/or administrative physician consultant. The leave may be extended based upon the recommendation of the treating physician and/or an administrative physician consultant. To apply for a medical leave, a student must meet with the Program Director who can provide the student with the name of an administrative physician consultant as needed.

Personal

The Program Director grants a personal leave of absence. A personal leave enables a student to take time off, in extenuating circumstances, to address issues of a personal nature, including those related to the health and well-being of a family member or partner.

Leaves Initiated by the PA Program

Under certain circumstances, a student experiencing difficulty in the PA Program may be permitted, or required, to take a leave of absence as discussed above in the Standards of Conduct.

Return to Studies from Leaves of Absence

At the time a leave of absence is granted, the PA Program determines the length of the leave and the conditions, if any, for a return from the leave of absence. Extensions of a leave of absence are not automatic, even if within the time frame permitted for the category of leave.

A student who determines that they will not be returning at the time scheduled for a leave to end should consult with the Program Director as early as possible before the scheduled return date. This will enable a student to learn whether or not an extension of the leave of absence can be granted, or if the student needs to make other arrangements.

Similarly, if conditions have been set for a student's eligibility to return from a leave, the student should demonstrate, in a timely fashion to the Program Director, that they have satisfied the rematriculation requirements.

If a student does not return from a leave at the conclusion of the set time period, and has not received an extension in writing, the individual will be deemed to have withdrawn from the PA Program. Similarly, if a student has not satisfied the criteria to return, if any, and has not received an extension in writing, they will be deemed to have withdrawn. No further action will be necessary to finalize the withdrawal.

Withdrawal Policy

Any student who chooses to withdraw from the PA Program must submit a letter to the Program Director requesting "withdrawal in good standing". A student may withdraw in good standing if the following conditions are met:

1. All financial obligations to Weill Cornell are met or approved arrangements have been made to satisfy any and all obligations.
2. A student must write a formal detailed letter to the Program Director, outlining reasons for withdrawal.
3. A formal exit interview has been conducted by a member of the Program Administrative staff.
4. All preclinical or clinical coursework, up to the date of request of withdrawal, must be complete and/or in good standing.
5. Upon presentation to the Committee for Promotion and Graduation a formal decision to grant a student a "withdrawal in good standing" will be made. The Committee for Promotion and Graduation reserves the right to deny a "withdrawal in good standing" if a student does not fulfill all of the conditions listed. A student who withdraws from the Program is subject to reapplication.

Dismissal Policy

A student may be subject to dismissal for the reasons including but not limited to those listed below.

Students are referred to Committee on Promotions and Graduation and are subject to dismissal from the program for the following reasons:

- Three (3) Preclinical Course failures
 - A student may successfully remediate a maximum of two (2) failed Preclinical courses. If they fail a third (3rd) course, they may not remediate and are subject to dismissal.
- Three (3) Clinical Course (SCPE) failures
 - A student may successfully remediate a maximum of two (2) failed Clinical courses. If they fail a third (3rd) course, they may not remediate and are subject to dismissal.
- Four (4) EOR **Exam** Failures

- A student may successfully remediate a maximum of three (3) End-of-Rotation Exams (EOR). If a student fails a fourth (4th) EOR exam, they may not remediate and are subject to dismissal.
- Four (4) Fundamentals of Medicine **Module** Failures OR two (2) Fundamentals of Medicine **Module** Failures in one semester
 - A student may successfully remediate a maximum of 3 Fundamentals of Medicine Modules during the Preclinical year. If a student fails a 4th module exam, they may not remediate and are subject to dismissal.
 - A student may successfully remediate two Fundamentals of Medicine Module exams per semester. If a student fails a third (3rd) module exam, they may not remediate and are subject to dismissal.
- Any Failed remediation
 - Summative Evaluation components (Medical Knowledge End of Curriculum Exam, Final OSCE, Technical Skills Testing, Thesis Defense)
 - Summative Preclinical Assessments (Multiple Choice exam or OSCE)
 - Fundamentals of Medicine module exam
 - OSCE
- Breach in professionalism

[Tuition Refund Policy](#)

Student Grievance and Appeals Policy

It is a principle of the PA Program that the materials outlined above will be maintained within the Program in order to foster academic excellence and professional integrity. To achieve this, the students must know the expectations and policies of the PA Program, understand how these will be applied and be familiar with the grievance process. The grievance process should be applied as follows:

Informal Procedure:

1. Class representatives will be elected at the start of the preclinical phase. It is the responsibility of these representatives to be the liaison between the Program administration and the entire student body. Students are encouraged to utilize their class representatives when a problem of general concern arises.
2. Any individual student may approach any member of the Program administration for individual guidance or for a personal concern. To encourage timely and confidential resolution of issues, email is not recommended. Face-to-face or phone communication is preferred.
3. Students may seek advice from the Program Director about unresolved matters or responses that the student considers unsatisfactory.

Formal Procedure:

The Program will invoke formal procedures to address unresolved matters and, in those circumstances, where an informal process is not realistic. The formal process is as follows:

1. The student should draft a letter describing in detail the student's grievance addressed to the Program Director. The student should explain what occurred, when it occurred, and how it affected him/her. In the letter the student must provide as much information as possible with supporting documentation. Students should be sure to indicate what resolution they may be seeking as a remedy.
2. In consultation with the faculty involved, the Program Director has discretion to request documents and relevant information that would be needed to conduct a full and fair assessment of the situation.
3. After investigating the complaint, the Program Director will respond to this letter with a formal written

resolution in a timely manner.

4. Should the situation go unresolved, further advice may be sought by the student from the Senior Associate Dean of Education.

No set policies or procedures can anticipate every issue or situation and circumstances at times require alternations and/or adaptations. While maintaining a program commitment to these policies and applying them fairly, the Weill Cornell Medicine PA Program does, however, reserve the right to modify policies and/or procedures at times as it may deem necessary.

Appeals Process for Academic and Conduct Decisions

A student can appeal a decision of the Committee on Promotion and Graduation. During the appeals process the student's status as determined by the Committee on Promotion and Graduation will remain in effect until finalization of the appeals process. This appeal must be made in writing by the student within ten (10) working days of the Program Director's written notification to the student of the decision of the Committee on Promotion and Graduation. The Program Director will then appoint an ad hoc committee to consider the appeal ("Appeal Committee") whose membership will not include any member of the Committee on Promotion and Graduation. The members of this committee will be made up of faculty from the Weill Cornell Medical College and Graduate School of Medical Sciences, including at least one core PA Program faculty member. The student shall receive at least seven (7) days advance written notice of the date, time and place of the appeal meeting with the Appeal Committee. Prior to the meeting, the student may submit a written response to the Appeal Committee regarding his/her performance. The student shall have access to his/her educational file and may appear before the Appeal Committee with an advisor or legal counsel if they so wish. Any such advisor or counsel shall be an observer of the proceeding but may not participate in or speak at the Committee meeting. After the Appeal Committee has rendered a final decision, it will notify the Program Director who will notify the Senior Associate Dean of Education. Prompt written notification to the student by the Program Director will follow.

Reserve Rights/Changes to Policy

The PA Program, and Medical College reserve the right to determine whether existing policies and procedures address a particular situation, or whether circumstances are of such magnitude to require additional actions. It is recognized that the faculty at large reserves the authority to intervene in the application of these policies and procedures, although it is not anticipated that the faculty will exercise this inherent authority unless the faculty determines that existing policies and procedures do not address the situation.

Student Health Policies

The Medical College is dedicated to providing the finest medical care to its students. The following summary highlights the Student Health Service and the Student Health Insurance Plan.

All students must have comprehensive health care coverage. The Medical College has designed a package which should meet the needs of most students and their dependents. The program consists of 2 integrated components: Student Health Services (SHS) and a Student Health Insurance Plan (SHP) underwritten by Cornell University and administered through Aetna Student Health. Enrollment and waiver services are managed through Gallagher Student Health & Special Risk. In brief, students who use the coordinated program will have their choice of participating physicians with modest co-payments. In this program, students also have the option to go outside the Aetna network, but will be required to meet a deductible and higher out-of-pocket costs.

Please note: As stated in PA Program accreditation standards, the principal faculty, the program director, and the medical director cannot participate as health care providers for students in the program, except in an emergency situation. Students will be instructed to bring all non-emergent health care concerns to the Student Health Service or their own established healthcare providers.

Student Health Services

All PA students must participate. For details of the annual fee, please see the Tuition and Fees by Program details on the [Student Accounting](#) website below.

This fee cannot be waived. Adult dependents and children under the age of eighteen are not seen in the SHS. With the Medical College's plan for families, dependents under the age of eighteen are fully covered for all care if they are seen by participating pediatricians.

The SHS Medical Director is the primary care provider for all full-time, matriculated students and is not involved in the academic evaluation of students. In conjunction with a registered nurse, all non-emergency medical problems and preventive care are managed at the SHS. After hours and on weekends there is limited telephone coverage available for emergencies. The SHS Medical Director determines the need and appropriateness of referrals to specialists/subspecialists and should be consulted for referrals.

LOCATION: 230 E 69th St (between 2nd and 3rd Aves) New York, NY 10021
Telephone: (646) 962-6942
Hours: Currently: 8:00 am- 12 noon and 1:00 - 4:00 pm, Monday - Friday, by appointment
After Hours: Urgent/Emergency Care - Physician-on-Call Service

To reach the doctor on call after hours, dial the answering service at (646) 962-6942. If urgent medical care is needed, the physician will direct the student to New York-Presbyterian Hospital.

Services Available at SHS

Most services rendered within the confines of Weill Cornell Medicine Student Health Services are done at no additional charge beyond the annual SHS fee. Services performed outside of SHS, including consultations, labs and imaging will be billed to insurance.

The Director of Student Health is a family medicine trained physician with broad expertise, and together with the SHS Nurse Administrator provides care in many areas including:

- evaluation and management of common conditions in primary care, “sick visits.”
- chronic disease management
- contraceptive counseling and management
- cervical cancer screening
- routine physicals and other preventive services
- primary care mental health screening and treatment
- sports medicine care occupational health services (management of body fluid exposures, needle stick injuries)
- pre-travel consultations
- immunizations
- allergy shots (in consultation with an allergist)
- ancillary services, including phlebotomy; and a limited number of point-of-care testing, such as urine dipsticks and rapid strep throat tests; completion of elective rotation requests and other forms
- referrals to other specialists, including mental health services, laboratories and imaging centers as needed

Services may be provided in-person or via telehealth provided the student is physically located in a jurisdiction in which the Director of Student Health is licensed.

Student Health Services and Attendance

Student Health Services cannot excuse students for missed educational and rotation activities. It will, however, evaluate and treat students and provide documentation that a student was seen at SHS. Faculty will determine the need for making up missed work if appropriate. If a student has a condition that poses a risk to patients in the clinical setting, Student Health Services will assist in determining appropriate restriction of duties.

Student Health Insurance Plan

The [Student Health Plan Information | Student Services](#) is specifically tailored to meet the needs of our students. The health insurance premium cost details for PA students can be found on the Student Accounting website. To identify the cost for dependents, please use the table available on the website within the 'Dependent Health Insurance Rates' section of the website. Additional details can be found at [Insurance Information | Student Services](#).

For coverage and plan benefits please visit [Student Health Plan Information | Student Services](#). Once on the site, select 'view your insurance plan details.'

While all students must participate in the SHS, participation in SHP is optional when a student already maintains comparable coverage. Students must provide evidence of being enrolled in a comparable insurance plan in order to waive coverage. Students with other health insurance policies are responsible for determining the specific benefits, limitations and differences of their policies from SHP as well as filling out required forms and settling financial issues with their insurance company. These students may also be limited in their choice of specialist referral depending on which of the Weill Cornell faculty participate in their specific insurance plan. Health insurance is a complex matter with stark and subtle differences among policies. Before waiving participation in the Medical College plan, students should carefully review the eligibility, coverage, payment, and restriction features of individual, parent's, or spouse's insurance plan.

Criteria for Waiving Participation in the Student Health Insurance Plan

In order to waive enrollment in the SHP students must obtain coverage that is comparable to our plan. Comparable coverage requires that the alternate plan meet the specifications listed on the Student Accounting [Physician Assistants Class of 2027 | Student Services](#).

An enrollment waiver must be submitted each year by the posted deadline. Any student who does not submit a waiver by this deadline will be held responsible for the annual health insurance charge. Students who cancel SHP after the deadline will be charged a \$150 cancellation fee. See the Student Accounting [Physician Assistants Class of 2027 | Student Services](#) for more information.

Referrals to Specialists/Subspecialists

Students in Cornell's SHP: you do not need written referrals, however, we recommend that you obtain a recommendation from Student Health Services as we have long standing relationships with many participating physicians in many specialties at the Medical Center and outside the medical center. **Please understand that if you choose a specialist who is Out-of-Network, you may have a higher out-of-pocket-cost.**

Students with other health insurance: you do not need the SHS Director's approval or referral, but you are encouraged to obtain a recommendation from the SHS Director, as he may know "student friendly" physicians that may participate in your plan. Students are responsible for familiarizing themselves with their plan benefits, restrictions, and provider network and payment procedures.

Students are responsible for arranging the appointment and for handling billing and charges.

Medical Emergencies Policies

medicaleducation.weill.cornell.edu/student-resources/student-health-services/emergencies

Emergency Instructions for Weill Cornell Medical and Graduate Students Enrolled in Student Health Services (SHS)

- For life-threatening emergencies, call 911 and/or go directly to the nearest emergency department. Notify SHS the next possible business day to assist with coordinating follow-up.
- If you or a friend have an immediate concern about suicide, call our Student Mental Health Program: (212) 746-5775. You may also call the suicide hotline: (800) 273-8255 [(800) 273-TALK], or walk yourself or your friend to the NewYork-Presbyterian/Weill Cornell Emergency Department.
- If you have experienced a sexual assault, or a non-sexual assault with possible blood/infectious body fluid exposure, go immediately to the emergency department for evidence collection and possible post-exposure prophylaxis for HIV – ideally begun as soon as possible after exposure. Please call (646) 962-6942 to report the situation to SHS or the clinician on call, so that we may assist you with follow-up.
- If you have an occupational blood/infectious body fluid exposure, please refer to Blood-Borne Pathogen Exposures, below.
- If you have a chemical exposure, please refer to Chemical Exposures, below.
- Emergency Department care is subject to your health insurance plan's deductibles and co-pays. If you are enrolled in the Student Health Insurance Plan and are referred to another physician for follow-up from the emergency department, we advise you to follow up at SHS first to ensure that the recommended physician is in your insurance network.
- For all other emergencies after hours, call (646) 962-6942 to be connected with an on-call clinician who can provide you with advice and instructions. You will be advised if there is no on-call clinician available, at which time you can follow one of the options above or follow up with SHS during normal business hours.

Emergency Instructions for Visiting Students

Visiting students do not have access to Weill Cornell Medicine Student Health Services. In the event of a true emergency, they should call 911 and/or report to the nearest emergency department for care. They should contact their home institution for additional instructions.

Students are financially responsible for care provided outside of Student Health Services subject to insurance copays, coinsurance, and deductibles.

Immunizations and Other Health Policy Requirements

Weill Cornell Medicine Student Health Services collects all health/immunization data for students in all degree programs at Weill Cornell Medicine and advises each respective academic programs of their student's compliance with campus health requirements as defined by Weill Cornell Medicine and NewYork Presbyterian Hospital. [Policies | Teach](#)

All students in patient-facing academic programs must have a patient registration, medical history and physical examination on file at SHS, completed at time of enrollment.

COVID-19:

Weill Cornell Medicine requires all students be vaccinated against COVID-19 with documentation of either a

primary COVID vaccine series (complete vaccination before Fall 2022), bivalent booster (vaccinated between Fall 2022 and September 2023) OR documentation of the most recent vaccine booster (vaccinated after September 2023). Acceptable vaccines include US FDA-approved or FDA-authorized vaccines - Pfizer, Moderna, Novavax and Johnson & Johnson. Students who have received older vaccines are advised to stay up to date and receive the most recent vaccines they are eligible for as recommended by the Centers for Disease Control.

Students who received primary immunization for COVID outside of the United States with a vaccine that is not FDA approved or FDA authorized but listed for emergency use by the World Health Organization should provide their vaccine documentation (in English) and are advised to obtain an updated FDA-authorized or FDA-approved vaccine in the U.S.

Students who seek a vaccine exemption for medical or religious reasons should contact Student Health Services for guidance.

Measles, mumps, and rubella:

New York State Public Health Law sec 2165 requires post-secondary students to demonstrate immunity to measles, mumps and rubella. Our institution prefers demonstration of proof of immunity by serologic titer but will accept vaccination history of two doses of MMR administered after age 1 and at least 4 weeks apart. Any student who is not immune by titer (e.g., negative, inconclusive or equivocal) or is unable to provide vaccination records will require boosters (two doses of MMR vaccine administered 4 weeks apart). Under NYS Public Health Law, students failing to demonstrate immunity, or in process of receiving the vaccines within 30 days of the start of classes, may be placed on administrative leave and prevented from participating in academic activities until they meet our requirements.

If you are allergic to any of the vaccines or vaccine components, you will need to provide documentation from a physician not related to you. Contact Student Health Services for information on a medical exemption.

For students who are in patient-facing academic programs, there is no "moral objection" permissible for vaccination for healthcare workers. If you have had titers drawn previously, provide copies of the lab reports to Student Health Services in addition to your immunization record. Neither documentation of being "immune" without actual lab reports, nor clinical history of disease, is sufficient proof of immunity.

Hepatitis B/C: Incoming students in the MD, MD/PHD, Physician Assistant, and PHD programs must provide results for hepatitis B surface antigen, hepatitis B surface antibody and hepatitis C testing. We recommend students begin the two- or three-injection series upon arrival at the medical college if they have not received the vaccine previously. The hepatitis B vaccine will be offered to all students free of charge at Student Health Services for students that are not immune to hepatitis B where vaccination is recommended. Students who lack immunity to hepatitis B after vaccination may need to repeat the two- or three-dose series and/or undergo additional testing to exclude chronic infection with hepatitis B.

Meningitis: New York State Public Health Law sec 2167 requires all college and university students to complete a meningitis information response form. It acknowledges that you have received information about meningococcal meningitis and the availability of a vaccination. You are not required to have the vaccination. If you did not receive meningococcal meningitis information or the response form in your SHS pre-matriculation information packet, please contact the SHS.

As per the Centers for Disease Control and Prevention's guideline for infection control in healthcare personnel, and working agreements with NewYork-Presbyterian Hospital, the following additional vaccines and screening are required:

Varicella: A positive *titer* indicating immunity or two doses of vaccine at least 30 days apart with a follow-up *titer*. Clinical history of disease is not sufficient proof of immunity for our campus. Titers will be checked at SHS if there is no lab report provided with registration materials.

Tetanus–diphtheria (Td) or tetanus–diphtheria–acellular pertussis (Tdap): Students must provide documentation of receipt of a dose of Tdap within the last 10 years. Td in the last 10 years is acceptable for students with a medical contraindication to Tdap vaccine.

Tuberculosis Testing:

Initial:

All students matriculating at Weill Cornell Medicine must provide results of an interferon gamma release assay (“TB Blood test”) performed in the six months prior to arrival to campus. Students who are not tested before starting classes will be tested through Student Health Services.

Students with a positive TB test must submit an x-ray report dictated by a radiologist in English within 12 months of arrival (and after the positive test). Students must also provide documentation by a health care provider that the student is free of symptoms of tuberculosis. If the individual has received treatment for tuberculosis infection (latent or active) then treatment records should also be provided. Student Health Services will provide evaluation and treatment like any other condition any time this documentation is missing or if a student tests positive during their course of study.

Subsequent:

Students in academic programs that involve patient contact are required to undergo a yearly tuberculosis risk assessment and may need periodic/targeted TB testing in accordance with NYS and CDC recommendations. Students that conduct research with tuberculosis may require more frequent assessment and testing.

Rotation sites may have testing requirements beyond Weill Cornell Medicine’s and Student Health Services will help support/adjudicate on a case-by-case basis. Students must follow the requirements of the clinical sites in order to begin their rotation. This may require the repeating of titers as determined by the clinical site.

Periodic health assessments: Students enrolled in patient-facing academic programs will undergo a pre-rotation health assessment and tuberculosis risk screen at the end of their preclinical curriculum in preparation for rotations at NewYork-Presbyterian Hospital and its affiliates. This must be completed prior to starting the clinical rotations or students may be prevented from participating on the rotations. This screening occurs yearly until the student graduates.

Influenza: All students enrolled in patient-facing academic programs must be vaccinated yearly against the flu in the absence of a medical contraindication. This is provided free of charge by SHS during the fall and early winter (assuming supplies are adequate SHS follows all applicable Medical College and NewYork-Presbyterian Hospital Policies and Procedures. We will notify students and their academic programs of any additional screenings, vaccinations, or policies that may be recommended after the printing of this edition.

Students 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. (see Clinical Guidelines and Syllabus for additional information). [WCM International Opportunities | Office of International Medical Student Education](#)

Policy for Management of Students, Faculty and Staff Following a Needlestick or Body Fluid, Puncture

Wound Exposures ([Emergencies](#) | [Teach](#))

Blood-Borne Pathogen Exposures

All puncture wounds and other exposures to blood and body fluids must be reported immediately to the Clinical Team and Student Health Services or to the NYP/WCM Medical Center Emergency Department.

This policy applies to all matriculated students at Weill Cornell Medical College and the Graduate School of Medical Sciences.

An exposure is defined as contact by: (1) needle stick or sharp puncture wound, (2) open cut, burn or abrasion contaminated by body fluids or tissues (blood, blood products, bloody fluids, semen, CSF, amniotic fluid, menstrual discharge, pleural, peritoneal, pericardial fluid, inflammatory exudates, and any other body fluid or tissue contaminated with blood), or (3) splash to mucous membranes (e.g., eye or mouth) with such materials.

In the event of a needle stick or body fluid exposure, follow these steps immediately:

1. Cleanse the injury with soap and water, or flush mucous membranes with water/saline.
2. Inform your supervising resident, preceptor or attending to arrange prompt counseling and testing of the source patient for HIV, Hepatitis B and Hepatitis C.
3. Let your resident, preceptor or attending know you are expected to receive immediate medical attention after an incident. Obtain and bring source patient information with you.
 - During business days, between 8 a.m. and 4 p.m., report to Weill Cornell Medicine Student Health Services. Call 646-962-6942 to advise you are en route. If SHS is closed, report to the NYP/WCM Emergency Department for initial evaluation, and follow up at SHS the next business day.
 - If you are at a local campus affiliate (e.g., NYHQ, Lincoln, Methodist, Brooklyn Hospital, MSKCC, HSS) observe local reporting procedures to expedite source testing. You must still report to SHS for evaluation, management and reporting. Taxi receipts for local travel will be reimbursed.
 - If you are at an away rotation, follow the requirements of the visiting institution or report to the nearest emergency department, and report the incident on your return to campus.

Additional instructions will be provided by SHS or Emergency Medicine staff after initial evaluation.

Students are advised to carry their health insurance cards at all times. Health insurance should be billed for these services.

Needlestick and body fluid incident reports may be sent to other campus offices for QI as part of the overall campus safety plan.

Infection Control Policy

Students in the patient care setting are at increased risk of acquiring and transmitting communicable diseases to patients, visitors and colleagues. Student Health Services works closely with various campus offices to ensure that students are appropriately trained, screened, treated, and when necessary, removed from patient contact.

All students with patient contact must complete infection control training periodically. Infection control training is provided by the Office of Environmental Health and Safety, as well as through an online course in infection control, and covers numerous topics including universal precautions, clinical safety and blood-borne pathogen training. Students may be required to undergo additional training modules by NewYork-Presbyterian Hospital. All students with patient contact will also undergo respirator training and fit-testing, also through the Office of Environmental Health & Safety.

Students exposed to communicable illness, or with signs and symptoms of communicable illness, are advised to set up a visit with Student Health for evaluation, and, if appropriate, prophylactic treatment. Student Health will notify public health authorities or the hospital epidemiology department as needed, so that exposed patients can receive appropriate evaluation and treatment. Students may require temporary restriction of patient contact/academic duties, and the Director of Student Health will coordinate with the student, their supervisor and/or appropriate associate dean or director to ensure that they do not pose a hazard to the Cornell community.

Conditions that require evaluation and/or treatment include:

- tuberculosis exposure
- staphylococcal infection or carriage
- group A streptococcal infection
- gastroenteritis
- blood-borne pathogen exposure
- varicella exposure
- scabies exposure
- lice exposure
- chronic infectious disease
- influenza
- meningococcal disease
- conjunctivitis
- other communicable disease and/or symptoms such as herpes simplex, herpes zoster, measles, mumps, rubella, unexplained fever, unexplained cough, pertussis, rash or open sores, and fingernail bed disease

Medical Records

All medical information collected at SHS is documented in the campus enterprise electronic medical record, Epic, and subject to all applicable local, state, and federal laws with regards to medical records privacy and security. Records generated at SHS are not released to any other party without a signed, written release of confidential medical information. Immunization records are provided free to the student while they are still attending WCMC.

A charge may be assessed on medical records and immunization records after a student has graduated. Students with chronic medical conditions or complex medical backgrounds wishing to coordinate care at SHS may request outside medical records be sent to Weill Cornell Student Health Service using the contact information above. SHS does not pay for outside record requests.

E-Mail Communications

Student Health Services sends out periodic blast e-mails to all students with important announcements, deadlines and updates. Students utilizing non-WCMC email clients are advised to set up filters to ensure delivery of these important messages. Blast emails will only be sent to official Weill Cornell e-mail addresses.

Guidelines and Limitations for the Student Health Services Use of E-mail

SHS is committed to the privacy of the people who rely on us for care and the confidentiality of their health information. State and federal laws also protect the confidentiality of this sensitive information. Students need to be aware that:

- E-mail cannot be considered a confidential mode of communication.
- E-mail should not be considered a replacement for direct, face-to-face contact with a provider.

To help insure privacy, patients and clients are cautioned against sending sensitive, detailed personal information to SHS via e-mail.

SHS staff members limit the use of e-mail communication to:

- General questions
- Appointment reminders
- Routine administrative follow-up

A health care provider may recommend that a student make an appointment for more complex concerns. Please be aware that copies of e-mail communication may be placed in your confidential medical record.

E-mail should *never* be used to convey information of an urgent nature to SHS. SHS cannot guarantee prompt responses to e-mail messages. Students who have an urgent physical or mental health concern (about yourself or someone else) can call SHS for a telephone consultation with a health care provider.

Mental Health Services/Personal Issues: Policies and Practices

Program Director: Patricia Marino, Ph.D.

Associate Professor for Psychology in Clinical Psychiatry Weill Cornell Medicine

914-997-8691

Email: pam2029@med.cornell.edu

Student Mental Health Program

Weill Cornell Medicine's Student Mental Health Program offers our students access to free, confidential, mental health services by appointment. We are staffed by psychologists and psychiatrists from diverse cultural, national, and clinical backgrounds who are skilled in treating a wide range of issues. Appointments are scheduled promptly and in consideration of our students' scheduling needs and preferences.

We offer a range of services from supportive psychotherapy focused on identifying and enhancing coping skills to consultation and assessment of all psychiatric conditions and treatments including psychotherapy, psychopharmacotherapy, and neuropsychological assessment.

This is not an emergency service, and students should expect communication for an appointment during regular business hours Monday - Friday.

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This is not an emergency service and students should expect communication for an appointment during regular business hours Monday - Friday.

- A student must self-refer for the Student Mental Health program and request an appointment.
- Care is confidential and is not part of the student educational record.
- All visits with the clinicians are covered under the Student Health Fee - there is no separate charge unless lab tests or imaging studies are ordered. This is analogous to the care students receive at the Student Health

- office.
- Clinicians have no student evaluation role within the medical college.

How to Access Our Services

To request an appointment please send an email including your name and contact information to studentmentalhealth@med.cornell.edu. Students need not disclose the details of their concerns when requesting an appointment. Our program assistant will respond during regular business hours to schedule your appointment.

Please review our Cancellation/No Show Policy and Telehealth Policy on the [Policies | Teach](#).

If you are in urgent need of emergency assistance during our off hours please call 911 or go to your nearest emergency room. Help is also available by contacting the National Suicide Prevention Lifeline at 1-800-273-TALK (8255).

Program Director:

Lisa Sombrotto, MD

Vice Chair, Integrated and Collaborative Care Department of Psychiatry lsombrot@med.cornell.edu
[Mental Health Services | Medical College \(cornell.edu\)](#)

Student Affairs

The Office of Student Affairs serves as liaison to student support services including housing, student health, student mental health, financial aid, student accounts, and disabilities and accommodations. In addition, the Office of Student Affairs assists with professional identity formation, advises/counsels students as issues arise, evaluates and facilitates short and long term leaves of absences, communicates with the teacher-learner committee, and provides oversight for all student groups and student government bodies.

If a student has a personal issue, they should consult with their advisor and/or engage with the Office of Student Affairs (studentaffairs@med.cornell.edu).

Privacy and Confidentiality

Weill Cornell Medicine Student Health Services staff follow the requirements of the Family Educational Rights and Privacy Act (FERPA) and the Health Insurance Portability and Accountability Act (HIPAA) to ensure the privacy and confidentiality of all student medical records. Personal information collected at SHS will be used solely for treatment, payment and operations and will not be disclosed to any outside parties unless legally obligated to do so.

Students are expected to activate their online patient portal to access all lab test results for tests performed at Student Health Services. Students who request laboratory results by telephone must speak to the Nurse Administrator giving their name, date of birth and identifying the specific laboratory test. Results will not be e-mailed.

Laboratory tests are usually performed by NewYork-Presbyterian Hospital laboratories or Quest Diagnostics and are entered into the computer system by name and medical record number. This system is able to track who has accessed results. Patients concerned about a breach in privacy may contact the Privacy Officer at NewYork-Presbyterian Hospital.

Requests for student medical information by any individual or organization outside of Weill Cornell Medicine will be directed to the Director of Student Health. Unless so required by law, no medical information will be released without the approval of the Director of Student Health, the student, and in rare cases, the Office of University

Counsel.

If a needle stick injury occurs, students are encouraged to follow the specific guidelines outlined by the policy in this Handbook. If the student wishes to preserve confidentiality, open discussions with other students, house staff and staff physicians are discouraged.

Disability Services and Accommodation Requests

Disability is defined by the Americans with Disabilities Act of 1990 as “a physical or mental impairment that substantially limits one or more major life activities.” An individual may also qualify as disabled if they have had an impairment in the past or is seen as disabled based on a personal or group standard or norm. Such impairments may include physical, sensory, and cognitive or intellectual impairments. Mental disorders (also known as a psychiatric or psychosocial disability) and various types of chronic disease may also be considered qualifying disabilities. A disability may occur during a person’s lifetime or may be present from birth. Disability can be permanent or short-term.

The Medical College and the Graduate School of Medical Sciences of Weill Cornell Medicine are dedicated to providing equal educational opportunities for students with disabilities. Federal law states that no qualified student will be excluded, denied participation or subjected to discrimination from any program or activity. (Please refer to [Student Disability Accommodations](#) website for the three components of the disability accommodation process.)

Childcare/Elder Care Policies

Program Overview: Bright Horizons' back-up care programs provide a safety net for those days when regular dependent care arrangements fall through. The *Back-Up Care Advantage Program* supplements, rather than replaces, these arrangements and is a comforting emergency alternative when you need it the most.

Bright Horizons' Center-Based Child Care Network: The *Back-Up Care Advantage Program* provides your child with access to high-quality back-up care programs at Bright Horizons child care centers located close to your home or work, when your child's regular care arrangements have fallen through. The age groups primarily served at our centers include infant -- Pre-K. Additional age groups including school age may be supported at various locations across the country.

Extended Network Center Based Child Care: You have the option to use one of our extended network child care locations close to your home or work in the event you are unable to identify a suitable Bright Horizons' Community Child Care Center to meet your child's needs. You can take comfort in knowing our network of child care centers meets established standards of quality for accreditation or state licensing, including developmentally appropriate curriculum, appropriate health and safety policies, teacher-to-child ratios, and teacher qualifications.

In-Home Care: You also have access to Bright Horizons' nationwide network of high-quality childcare providers qualified to provide your child with a safe and secure in-home care experience. Personal care assistants, home health aides, and nannies commonly provide care in a child's home.

In-Home Mildly Ill Care: Mildly ill in-home care is available when your child is injured or suffering from a common, short-term non-contagious illness or shows symptoms of an illness. It does not matter whether your child is an infant, toddler, preschool-aged, school-aged, or a teenager. Bright Horizons Family Solutions knows the concern you have about the quality of care your child needs to feel better and has built a nationwide network of home health care professionals to provide your family with confidence that your child's health care

needs are being met while you are at work.

Adult/Elder Care: Back-up adult care is also available in your home or the home of your adult relative. Providers can assist in caring for your family member who requires homemaker or companion services (such as household tasks, cooking, shopping and laundry), personal care services (such as help with dressing, bathing and toileting), or even medical care (such as the administration of medication, dressing and wound care, and blood pressure and diabetes monitoring). Non-medical adult care is provided by sitter companions, personal care assistants, and home health aides. Medical care is provided by certified nursing assistants (CNAs), licensed practical nurses (LPNs), or registered nurses (RNs) depending on the medical skill level needed.

Self-Care: Self-care is available in the event an employee is in need of assistance. Restrictions on utilization are the same as for any other adult/elder care request and count against the employees available usages for the contract period. [Childcare and Eldercare at Weill Cornell | Office of Faculty Engagement & Inclusion](#)

Libraries and Related Policies and Practices

[Samuel J. Wood Medical Library](#)

library.weill.cornell.edu

The Samuel J. Wood Medical Library (located just inside the 1300 York Avenue lobby) is the principal information resource of the Weill Cornell Medical College and Graduate School of Medical Sciences of Cornell University and the NewYork-Presbyterian Hospital/Weill Cornell Medical Center.

Composed of the Samuel J. Wood Library and the C.V. Starr Biomedical Information Center, the library is committed to ensuring effective retrieval and use of information to create new knowledge and improve health.

NOTE: Prior to contacting SMARTDesk or accessing other Information Technology resources, students of the PA Program should first bring all IT issues to the attention of the PA Program by emailing pasupport@med.cornell.edu

SMARTDesk – [SMARTDesk | Weill Cornell Medicine Samuel J. Wood Library](#) SMARTDesk staff can help with the following:

- Tagging and setting up your mobile device to access Weill Cornell services while you wait
- Resolving issues with your laptop or mobile device
- WCMC account help, such as password or login issues
- Learning how to use ITS-provided software SMARTDesk is open Monday - Friday 9 am - 5 pm

Interlibrary Loan and TripSaver – If we do not own an item, we will get that item free of charge for you from another library. Requests usually arrive within a week. With our TripSaver service, we will pull items in our collection and scan them for \$5.

Tri-Cat Catalog – The shared online catalog of WCM's Samuel J. Wood Medical Library, Rockefeller University, and Memorial Sloan-Kettering Cancer Center. It lists not only the print holdings but also has direct links to electronic books and journals. You can limit your searching to "Weill Cornell Medical College (E-Resources only)." Regular Library Hours: (You must present a valid ID when entering the library.)

- Monday - Thursday: 8 a.m. - 12 a.m.
- Friday: 8 a.m. - 8 p.m.
- Saturday: 10 a.m. - 8 p.m.
- Sunday: 12 p.m. - 12 a.m.

The 24/7 Study Room is only available to WCMC medical, graduate and PA students, clinical fellows, and residents. See website ([Weill Cornell Medicine Samuel J. Wood Library | Weill Cornell Medicine /](#)) for summer/holiday schedules.

Computers and Wireless

1. *Desktops* – All computers are fully networked and have Microsoft Word, PowerPoint, and Excel. Computers located downstairs in the Computer Room also have EndNote & SAS.
2. *Wireless networks* – ITS tagged laptops use WMC Secure. For guest access, use WCM Guest Services.
3. *Laptop checkout* – Check out a wireless laptop from the Circulation Desk for use while in the Library.

Printing & Photocopying

In order to pay for printing and photocopying, you need to set up a PaperCut account. Charges are \$0.50/color and \$0.10/black and white. Students have a weekly allotment of \$20 credited to their print account by the College.

Library Etiquette

Cell phone conversations limited to the Commons (main room just inside Library entrance).

Food and drinks limited to the Commons. Drinks in spill-proof mugs are allowed throughout the Library. You can purchase a Library spill-proof mug at the Cornell Store or Smart Desk.

Services

Classes – Free classes are offered each semester, such as Unleash the Power of Google and EndNote Basics.

Request a consultation – Our Education & Outreach department provides customized orientations, library tours, help with literature searching and clinical & community outreach services.

SCISSORS – A suite of services for researchers: get help with formulating questions, setting up search alerts, literature reviews, planning for meeting presentations or grant proposals, complying with NIH Public Access Policy, manuscript preparation, and journal selection.

Electronic Resources

The Library offers access to a wide variety of databases for your research and clinical information needs. Connect to PubMed and other frequently used tools under the Top Databases label on the left side of the Library's website. Access other databases through E-Resources. Most databases, unless labeled "Free," must be accessed from within WCMC or via EZproxy (see Remote Access section below).

E-books

Over 12,000 titles, including the *Current Protocols* series, *Current Medical Diagnosis and Treatment* and *Harrison's*. Search for e-books by limiting e-books in the search toolbar.

E-Journals

Over 9,500 titles. Link to these journals from Tri-Cat or the e-Journals link from our website. Popular databases

PubMed – premier clinical literature database; links to a host of biomolecular resources from NCBI. **UpToDate** – a practical clinical reference, contains the equivalent of 40,000 pages of original, peer-reviewed text which provides specific, practical recommendations for diagnosis and treatment

AccessMedicine – suite of resources for clinical practice and education

Other databases

MD Consult – full-text access to selected medical texts, medical journals, practice guidelines, drug information,

patient handouts, and CME materials

MedU – virtual patient case sessions

MICROMEDEX – in-depth drug information including PDR, POISINDEX and Lab Advisor **uCentral** – 5-Minute Consult (pediatric & clinical) and Harrison's Manual for mobile devices **VisualDX** – enter patient findings and create a differential diagnosis

Remote Library Access

EZproxy is a service that allows Weill Cornell's current faculty, students, staff and NewYork Presbyterian/Weill Cornell's residents and fellows to remotely access the library's subscribed (paid) electronic content such as e-journals, e-books, and other e-resources while off-campus.

For more information library.weill.cornell.edu/about-us/remote-access-to-library-resources

GET IT button

Click on the GET IT button in many of our databases to connect to full text, see our print holdings, or request an inter-library loan.

Bibliographic management tools

Several bibliographic management tools are available to students, such as EndNote, Mendeley and Zotero. Depending on the specific tool, both web-based and desktop-based options may be available. For more details library.weill.cornell.edu/research-support/bibliographic-management-tools

Neighboring Libraries

As registered users of Weill Cornell Medical Library, you also have courtesy privileges at the Hospital for Special Surgery (HSS), Memorial Sloan-Kettering Cancer Center (MSKCC), and Rockefeller University (RUL) libraries. Information about hours and access is available at the Weill Cornell Medical College Library Circulation Desk. You can also call or visit each library for further information.

Hospital for Special Surgery Library

541 East 70th St 8th Floor Main Building

<http://www.hss.edu/Professionals/Academic-Training/The-Kim-Barrett-Memorial-Library/> Information 212-606-1210 or via email at medlib@hss.edu

Memorial Sloan Kettering Cancer Center Library

430 East 67th St <http://library.mskcc.org> Information 212-639-7443

Rockefeller University Library

1230 York Avenue Welch Hall, 1st floor

Tuition, Fees, and Refund Policies

The fee schedule for the Class of 2027 can be found here: [Physician Assistants Class of 2027 | Student Services](#). The program's academic years do not correspond directly to calendar years; the three academic years consist of one 6-month period, one 12-month period, and one 9-month period.

If a student has pending financial aid, finance charges are waived and tuition will be deducted as the disbursement of loan money arrives.

Please note that this tuition cost is set for the entire period of continuous matriculation at the PA Program. This policy is subject to change.

Student Identification Cards Policy

During orientation, the PA Program Office will facilitate the issuing of two (2) identification (ID) cards: an I.D. for the Weill Cornell Medicine campus and an I.D. for the 570 Lexington Avenue building. The Security Department for the main campus is located opposite the Starr Building entrance. The Program office assists with the issuance of the 570 Lexington Avenue I.D. Students must have both I.D. Cards with them at all times. I.D. cards must be worn and visibly displayed at all Program activities.

Lost cards must immediately be reported as follows: Both cards, if lost/stolen, must be reported to the Program office at (646) 962-7277; the Weill Cornell I.D. must be reported to the Security Department on the main campus at (212) 746-0911. The 570 Lexington Avenue I.D. must be reported to the PA Program Office.

The 570 Lexington Avenue I.D. will allow access to the building, student facilities and building elevators. Student hours for access to the PA Program Student Center are as follows: Monday through Friday 8:00 am – 10:00 pm, Saturday and Sunday 9:00 am – 3:00 pm. If lost or stolen students are required to pay for replacement of these I.D.'s through the PA Program office.

Communications Policy

It is the student's responsibility to keep contact information current in the PA Program files. This includes name changes, address, all telephone numbers, emergency contacts, etc. Students will be issued a Weill Cornell e-mail account. This is the only acceptable format for exchange of electronic information between the student and the PA Program. Therefore, students are advised to:

- check their Weill Cornell e-mail accounts on a daily basis
- check the PA Program 9th floor bulletin board on a daily basis
- check for calendar and announcements posted through Canvas (<https://medcornell.instructure.com>)
- check for clinical announcements in Oasis

Mobile Heartbeat Communication System Policy

While on clinical rotations, the main source of communication will be through your mobile device. At that time, please make sure that your most current mobile number is up to date and listed in Oasis. Your phone must be tagged with ITS. You can have the tagging done at the [SMARTdesk](#).

Once tagged you will follow these directions to install Mobile Heartbeat.

1. Contact NYP Information Technology services so they can register your account on Mobile Heartbeat - *NYP Help Desk at 4-HELP, 6-HELP, (212-746-4357) or servicedesk@nyp.org*
2. Navigate to the following site on my iPhone using Safari: bit.ly/mhbnyp
3. Click the "MH-CURE 10.3.1.7" link under "iOS Client Prod" which will allow you to install Mobile Heartbeat on your iPhone
4. Once installed on your iPhone, navigate to "Settings>General>Device Management" and click trust/verify for "Oyster". (*Note, Oyster is the name of the company in charge of the app*)
5. The first time you access the app on your iPhone, you will be presented with a login screen. You must enter "nypp-p" for username, keep the password blank, and then submit.
6. Once the above step is completed, you will be able to access Mobile Heartbeat as yourself using your CWID and password. Note, please contact NYP Information Technology services if your role is incorrect (i.e., Nurse) when you first log in to Mobile Heartbeat.

If you should have any problems with this setup please contact - *NYP Help Desk at 4-HELP, (212-746-4357) or servicedesk@nyp.org*

iPad (Program-Provided, ITS-tagged) Policy

All PA Program students are required to use a PA Program-provided iPad throughout their training. These will be necessary to enable Weill Cornell library access as well as completion of course work including online examinations and instructor/course evaluations. iPads may not be available at orientation but will be distributed to students at the earliest opportunity. Upon completion of all degree requirements of the PA Program, the iPad may be retained by the graduate.

Use of Personal Laptop Computers Policy

The PA Program-provided iPad cannot be used in certain situations, such as the computer lab component of the PASP 6700 Biostatistics course. Students will have at least one month's notice of these situations. If students do not have access to a laptop on these occasions, they must notify the faculty well in advance of the date on which it is needed.

Should a student also wish to use their own laptop computer for any purpose requiring regular access to the Weill Cornell Medicine network, the device must be compliant with published minimum requirements and must be "tagged." The Office of Information Technologies and Services (ITS) will be "tagging" and performing mandatory encryption of each PA student's laptop computer as requested. These steps will permit students to securely and wirelessly connect to the Weill Cornell Medical College (WCMC) Network.

For policies regarding supported computers and other devices, visit the ITS website at: [500.10 - Device Minimum Security Requirements | Information Technologies & Services](#). For additional information on networking policies for computers, please visit here: [Network Policy | Information Technologies & Services](#). Once enrolled, students are eligible for software discounts including Microsoft products (such as Microsoft Office) at: [How to download personal software from OnTheHub | Information Technologies & Services](#)

Textbooks Policy

Prior to the start of each semester, students will be provided with an up-to-date listing of required textbooks for that semester. Many titles will be available online through the Weill Cornell Medical Library site.

Medical Instruments Policy

Prior to beginning the Physical Diagnosis course, the faculty will discuss in detail the diagnostic equipment required by the PA Program. At that time, students will be provided with the required medical equipment. This equipment will be used throughout the curriculum.

Dress Code for Physician Assistant Students Policy

It is the viewpoint of the PA Program that professionalism stems not only from how we dress for the people we serve but also the manner in which we carry ourselves. Your attire should represent the Weill Cornell Medicine community, the PA Program, and the profession. In the spirit of this, the Program has established a dress code for all PA Program students.

During the preclinical and clinical phases of the PA Program, students are expected to be clean, well groomed, and dressed in a manner appropriate to their academic and clinical responsibilities. This requires “business casual” attire in the classroom setting. Furthermore, for all clinical settings in which interactions with patients and other providers can reasonably be expected (including training sessions with standardized patients), the PA Program considers the following enhanced dress code as appropriate and professional:

1. Identification card with photograph facing outward; must be worn at all times.
2. Short white coat with red WCGS patch on left upper arm, two inches from shoulder. *Note: Each student is required to purchase a short white coat and affix the official Weill Cornell Seal on the left upper arm. The cost of two coats will be reimbursed by the PA program. (Details provided at Orientation)*
3. Clothing: Clean, appropriately sized (not too tight, not too loose), neat, ironed, and well cared for business casual attire.
4. Scrubs: only while on services at NewYork-Presbyterian Hospital and on various rotation sites, when required. Scrubs are not to be worn outside of these environments. *(Please Note: Scrub attire intended for use in the Operating Room is prohibited in certain areas. Read the section titled OR Burgundy Scrub Policy.)*
5. Fingernails must be clean and short to allow for proper hand hygiene and instrument use, and to prevent glove puncture and injury to patients. Artificial nails and decorative nail designs are prohibited. Furthermore, in the OR setting, no nail polish is allowed.
6. Piercings: should not interfere with patient care or infection control policies.

Examples of Unacceptable Attire in Clinical Settings:

Jeans, overalls, sweatshirts, sweatpants, shorts, leggings, halter or tank tops, non-collared T-shirts, workout clothes, sandals or open-toe shoes, caps, bandanas, baseball hats, other attire that may reasonably be expected to interfere with academic or clinical activities of the Program or University.

Lab Coats Policy

Program approved short white lab coats as well as student IDs are required to be worn during all clinical experiences in the preclinical phase and on all clinical rotations. Students of the PA Program are expected to present a neat, clean, well groomed, professional appearance at all times. In addition, in a clinical setting, students shall dress in a manner that is distinctive from the hospital house staff and attending staff that will readily identify them as students.

Failure to adhere the above dress code may result in disciplinary action.

Operating Room Burgundy Scrub Policy

The following regulations pertain to the wearing of Operating Room Burgundy scrub attire within NewYork-Presbyterian Hospital:

1. The wearing of burgundy scrubs is prohibited in non-patient care areas, including the Medical College library, cafeteria, and laboratories.
2. The wearing of burgundy scrubs by all personnel in non-surgical patient care areas or special care areas is prohibited.
3. The wearing of burgundy scrubs outside of the medical center, or to enter or exit the medical center, is strictly prohibited.
4. The name and departments of personnel/students exiting or entering wearing burgundy scrubs will be obtained by the security staff and forwarded to the Operating Room Committee for further disciplinary action.

"Green" OR scrubs may be in use at other facilities, with similar prohibitions regarding use outside the OR.

Students must be aware of and adhere to the OR scrub policy at each clinical campus.

Assessment of the Program: Policies and Practices

In the PA Program's continuing efforts to maintain quality education our program utilizes many assessment tools. These include surveys and performance evaluations. Matriculated students and recent graduates provide an opportunity for the PA Program to determine if our stated program goals were met. The PA Program considers the ever-changing environment in which healthcare is delivered. To best anticipate the future needs of students and practitioners alike. These assessment tools are utilized on a consistent basis.

Students are required to complete an online evaluation of the course and instructors/preceptors at the conclusion of each course and upon exiting the program. Given the crucial nature of this evaluation, transcripts may be withheld pending course/instructor evaluation completion to ensure a good response rate.

Graduate Surveys: Graduates may be requested to complete an online survey to better identify their transition to clinical practice and any potential strengths or weaknesses related to their preparedness for taking the Physician Assistant National Certifying Examination and related fields such as administrative, research and education.

Service Work Policy

In accordance with ARC-PA (Accreditation Review Committee on Education for the Physician Assistant, Inc.) Accreditation Standards for Physician Assistant Education Guidelines, students enrolled in the PA Program will not be asked to perform tasks involved in the standard operations of the program that are the responsibility of faculty and/or staff, and students will not be required to work for the program in any capacity.

To maximize the clinical learning environment and to adhere to the ARC-PA's accreditation standards, students will not be used to substitute for regular clinical or administrative staff while on clinical rotations nor will they be permitted to accept payment for services rendered in connection with the performance of their rotation.

Students must notify the PA 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.

Liability Insurance Policy

Weill Cornell provides general liability insurance for all students while they are acting within the scope of their duties in an academic program of approved medical instruction (a student may elect to purchase additional liability insurance through the American Academy of Physician Assistants at personal expense, but this is not required).

Note that the insurance afforded to a student does not apply to damage to property owned, rented to, or under the care, custody, and control of the student. It is advised that students obtain personal property coverage (which may be available as part of a homeowner's or renter's policy) for equipment, instruments and other property purchased by a student and utilized during preclinical and clinical instruction.

Coverage afforded by the University's professional liability policy covers students for on-site and approved off-site locations. Approved off-site locations would include rotations at affiliated hospitals and clinics.

Student rotations at a non-affiliated off-site location must be approved by the Clinical Team and University Counsel prior to the commencement of the rotation.

Any incident, either actual or alleged, which you have knowledge of must be reported immediately to the PA Program office. If you have any questions about the liability insurance policy, please call the PA Program office.

Attendance Policies

Students at the PA Program are physician assistants in training who are expected to carry out all academic responsibilities in a professional manner. The PA Program has a duty to establish criteria for professional comportment as an important part of its mission to train students to become effective physician assistants. Students must handle absences from required program activities in a manner that reflects a standard of professional responsibility for practicing physician assistants. When a student does not attend a required session and has not provided in advance an appropriate request for permission or explanation of the absence, the absence will be considered unexcused.

Preclinical Attendance

The curriculum of the PA Program in the preclinical phase uses many kinds of learning formats, including in-person synchronous and pre-recorded lectures, as well as small group collaborative sessions. Unless specified otherwise, attendance at all course activities is mandatory. Several of the components promote active learning by requiring students to work collaboratively in the educational process. In such a collaborative learning structure, student attendance will often contribute to the student's academic mastery of that component.

Students are required to attend and participate fully in all scheduled educational activities throughout the preclinical phase of the PA Program. Makeup assignments for course work missed due to absence may be required, at the discretion of the Preclinical Lead. Any student exhibiting a pattern of missing class or educational activities prior to examinations will be counseled to avoid these absences; subsequent pre-exam absences will subject the student to a grade deduction or zero on the exam at the discretion of the Preclinical Lead.

Time-off limits: Students may miss up to five (5) excused days due to illness or other emergencies throughout the entire preclinical phase. Students may take no more than two (2) sick or personal days during a single preclinical semester. A half day excused absence is recorded as a full day taken.

Attendance on Clinical Rotations

- Attendance on rotations is **mandatory**.
- 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.
- **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.
- 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) Student Handbook.

- 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.**

*****PLEASE REFER TO THE MOST RECENT VERSION OF THE CLINICAL GUIDELINES FOR ADDITIONAL, CURRENT INFORMATION*****

Generally, the PA Program recognizes that emergent absences due to illness, personal emergency or family emergency are not under the control of students and that it may be impossible for students to consult with the PA Program faculty prior to being absent for these reasons. Nevertheless, it is incumbent upon the student to notify the PA Program faculty (and preceptor) as soon as possible when these events occur so that the PA Program may be assured of the student's well-being and may make plans with the student for the resumption of regular activities. Such events are not to be confused with other absences, which can be anticipated and planned for in advance (e.g., major family events or celebrations, professional off-campus events, employment interviews). Only through proper notification and/or permission (see below) will these latter types of absences be considered "excused" absences by the PA Program Office.

Absences without proper notification, including planned absences without prior request for permission, are considered "unexcused absences." Such absences may result in sanctions that may include, but are not limited to, receiving a zero grade for the activity missed, or if serious, receiving a failing grade in the course or rotation.

Some voluntary absences are not considered reasonable by the PA Program. Actions such as purchasing tickets for travel or engaging in other elective activities on course instruction days are not acceptable practice. Students who engage in such conduct must assume full responsibility for whatever ramifications in their performance assessment result from their actions, as described above, since these actions result in unexcused absences. PA Program faculty are not required to administer make-up examinations, equivalent or extra sessions to accommodate these voluntary unexcused absences.

Time Frame Expectations

In general, the time frame for an absence is expected to be no more than two consecutive days (including a Friday-Monday sequence). Emergent absences expected to last no more than two days require the student notify the Preclinical Lead or the Clinical Team. Planned absences of more than two days require that the student obtain the permission of the Preclinical Lead or the Clinical Team. When a student is uncertain about whether an absence will be considered potentially excusable, the student should consult their Academic Advisor.

Students who are out from classes or rotations more than two (2) consecutive days due to illness or injury may be required to submit a medical provider's note to PA Program and SHS stating that they were seen and may return to class/rotation.

Holiday/Vacation Time Off

The following holidays are recognized by Weill Cornell Medicine: **New Year's Day, Martin Luther King, Jr. Holiday, Presidents' Day, Memorial Day, Juneteenth, Independence Day, Labor Day, Thanksgiving Holiday (Thanksgiving Day and the following day), and Christmas Day.** Additional scheduled time off will be delineated in a Student Calendar to be distributed, by cohort, to each matriculating class at orientation.

Students are not permitted to miss classes prior to a scheduled holiday or vacation. Students are expected to be at their classes until released by the lecturer. 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 this requirement. Students are advised to leave themselves one extra travel day in case of travel delays and/or cancellations. Students should not assume that the class is canceled unless specifically notified by the PA Program office. The PA Program office, when aware of cancellation, will notify students as expeditiously as possible. If an instructor does not arrive within 20 minutes of the scheduled start time, a member of the class should contact the PA Program for further assistance. Students should not contact instructors independently.

If a student will be absent, arrive late, or depart early for any reason, the PA Program must be notified by telephone and/or e-mail at least two hours prior to class start. If a student is subject to an extended absence (two or more consecutive days), the student must submit a written note from a suitable authority explaining the absence. If an absence is anticipated, an *Absence Form* (Appendix C) must be submitted to the PA Program office one week prior to taking time off. No request for time off should be considered authorized until a copy has been returned to the student indicating PA Program approval.

Lateness to class demonstrates unprofessional behavior. Students who arrive late for a lecture or class activity are expected to join as soon as possible with minimal disruption. Repeated lateness or unexpected absences may lead to disciplinary action as per Standards of Conduct.

Jury Duty Policy

New York State has rigorous regulations regarding service on juries and does not allow students to be excused from jury duty.

A student who receives a jury duty notice from New York County and cannot make the dates assigned because he or she is scheduled for a class, rotations, or elective, should call the number provided on the jury notice, explain that you are a student, and offer another two-week period during which you would be able to serve. The student may be asked to go to the court clerk to discuss your situation in person. There is no guarantee that students will be allowed to postpone jury service, but one's willingness to make oneself available during the next break or vacation may aid the request. Students, who repeatedly postpone jury service, eventually will be required to serve, regardless of their academic schedule.

Religious Observances Policy

Weill Cornell recognizes that the members of its community, including students, observe a variety of religious faiths and practices. Few of the various religious days of observance are part of Weill Cornell's holiday calendar. However, the PA Program recognizes and respects the religious beliefs and practices of its students and seeks to accommodate them reasonably within the requirements of the academic schedule. As a result, Weill Cornell will not penalize a student who must be absent from a class, examination, study, or work requirement for religious observance. Students who anticipate being absent because of religious observance must request permission for the absence from the Preclinical Lead or the Clinical Team as appropriate. (See Attendance Standards). These requests should be made as early as possible in advance of an anticipated absence of a day, days, or portion of a day. In the clinical phase of the program, it is expected that these requests be made prior to the beginning of the first rotation. In all cases, students should make arrangements to make up all missed days and assignments.

Whenever feasible, PA Program faculty will avoid scheduling examinations and assignment deadlines on religious holidays. A student absent from a class because of religious observance shall not be penalized for any class, examination, or assignment deadline missed on that day or days.

In the event an examination or assignment deadline is scheduled on a day of religious observance, a student unable to attend class shall be permitted the opportunity to make up an examination or to extend any assignment deadline missed. No fees of any kind shall be charged by Weill Cornell for making available an opportunity to make up an examination or assignment.

No adverse or prejudicial effect shall result to any student who takes advantage of the provisions of this policy. If a student believes that they are not being granted the full benefits of the policy and has not been successful resolving the matter with the Preclinical Lead or the Clinical Team, the student may confer with the Program Director. In the event a student continues to believe that they are not receiving the benefits of this policy, the student may file an appeal under the appeal provision of the grievance policy.

Finals Week – in the event that a religious holiday falls during finals week, students are advised to speak with the Preclinical Lead as soon as possible to make alternative arrangements such as taking the examination during vacation week. All final examinations must be completed prior to the start of subsequent semester.

Request and Notification

In general, absences are excused at the discretion of the Preclinical Lead and the Clinical Team, and prior permission to be excused from a scheduled activity is to be sought by the student in writing using the PA Program *Absence Form* (Appendix C). Students must ask for permission individually for themselves; students may not request permission for absences on behalf of other students. Emergent absences require notification and planned absences require both notification and permission in order to be considered excused.

In the process of permitting an excused absence, the PA Program administration will determine how the appropriate faculty or clinical preceptor are to be notified and the role of the student in this process. In any discussion of a requested absence, the student must include an explicit discussion of:

- The reason for the absence
- The student's plan to acquire the information missed, including making up time missed from clinical rotations
- The arrangement by the student for coverage of all clinical or course responsibilities
- The student's arrangements to identify and notify all faculty, house staff, and students affected by this absence
- The time frame of the absence

Student Transportation Policy

Transportation is the responsibility of each individual student. Recommended routes of travel are provided. Clinical students should anticipate their required working hours at each clinical site as they make appropriate plans for travel. The current transportation reimbursement policy will be provided during the clinical orientation, and will be available in writing in the Clinical Guidelines. Students should not expect to be reimbursed by the PA Program above any reasonable and customary travel expenses as set forth in policy.

Student Records Policy

It is the policy of the Medical College to protect information contained in student records from unauthorized disclosure and to comply with the provisions of the Family Education Rights and Privacy Act of 1974 (FERPA) and regulations thereunder. The policy extends to students the right to inspect and review their education records and provides students the right to request that their record be amended if the student believes that the record contains inaccurate or misleading information or if it violates the student's privacy rights. If a student believes the Medical College has failed to comply with the requirements of FERPA, a student may file a complaint with

the United States Department of Education.

A. Releasing Education Records

Education records may be released in person or in writing to an inquirer, and only with the written and signed consent of the student, except when FERPA authorizes disclosure without consent as indicated below.

Directory Information

The following information about each student is considered public directory information and may be released or disclosed without a student's consent. However, a student may elect to have his/her directory information withheld by completing Information Non-Disclosure Statement and submitting it to the Weill Cornell. The Non-Disclosure form must be on file with the Program office within ten days of the start of the Program.

- Name
- Date and place of birth
- The most recent previous educational institution attended Major fields of study
- Degrees and awards received Honor society memberships Extracurricular activities Dates of attendance
- Local address and telephone number

Weill Cornell Medicine, including Weill Cornell Medical College, Weill Cornell Graduate School of Medical Sciences, and the Physician Assistants Program, reserves the right to release such directory information as evaluated on a case-by-case basis.

Personally Identifiable Information

The following information is considered personal information of each student and will not be released or disclosed except with a student's signed, written consent, or as provided herein:

- Grades and academic standing Evaluations
- Financial aid information
- Undergraduate record and scores on standardized tests (MCAT, GRE, others) Social Security number
- Personally Identifiable information may be disclosed without consent:
 - to students who request an opportunity to inspect their education records;
 - to members of the faculty and other Weill Cornell officials with legitimate need to know;
 - to institutions at which a student seeks to enroll;
 - to specific federal and state officials, as provided by law;
 - in connection with a student's application for, or receipt of financial aid;
 - to organizations conducting studies for, or on behalf of, educational institutions or agencies, for the purpose of developing, validating, or administering predictive tests, administering student aid programs and improving instruction, if such studies are conducted in a manner which will not permit personal identification of students or their parents by persons outside the organization doing the study and such information will be destroyed when no longer needed for the purpose for which it is conducted;
 - to courts, government agencies, and others in compliance with a judicial order or lawfully issued subpoena, provided that an effort is made to inform the student by telephone or mail before complying with the subpoena or order;
 - to accrediting organizations in order to carry out their accrediting function; and to the parents of a dependent student as defined in the Internal Revenue Code.
 - to appropriate parties in a health or safety emergency if knowledge of this information is necessary to protect the health and safety of the student or other individuals.
- Anyone who releases education records must maintain the name of the party making the request, any additional party to whom it may be re-released, and the legitimate interest the party had in requesting or obtaining the information. A student may inspect this record of requests.

B. Permitting Students to Inspect and Review Education Records

A student may inspect and review his or her education records after making a written request. The Medical College may refuse to permit a student to inspect the following education records:

- Records of instructional, supervisory, and administrative personnel which are the in the sole possession of the maker and are not accessible or revealed to any other person except a temporary substitute.
- Financial records of a student's parents
- Medical and counseling records available only to those participating in the student's treatment.
- Letters of recommendation placed in the student's education record prior to January 1, 1975, or with respect to which a student has waived right of access.
- Education Records connected with an application to attend the Medical School if that application was denied or the applicant never attended the Medical School.

Such privileged information will not be disclosed to students, except that with respect to medical records, a student may have a physician or other appropriate professional review the record.

Faculty and staff members are deemed to have a legitimate need for privileged information contained in a student's education record when such information is required: (1) for purposes of evaluations or recommendations; (2) for purposes of any internal or external action or proceedings affecting the student or the institution with respect to the student, including proceedings to amend or correct an education record. Custodians of the records and members of their immediate staffs have right of access at all times.

Faculty and staff members are defined as all members of the Medical College Faculty, the executive and administrative officers of the University and the Medical College, including from the Office of University Counsel, and members of their professional staffs, and outside professionals working on a matter with any of the named categories of Medical College employees.

Process/Policy for Inspecting Records and Amendment of Records

A request by a student to review and inspect the records and information relating directly to him or her shall be in writing, addressed to the custodian of records, signed by the student, and thereafter retained in the record folder. Requests for inspection will be honored as soon as practicable, but in no event later than forty-five (45) days from the date of receipt of the request.

A student may inspect records only in the presence of a designated administrator. Students may obtain copies of material in their education record, other than the transcript and permanent record card, by paying a per page fee. All such copies shall bear a conspicuous legend that the copy is not an official document. Transcripts and record cards may not be copied because of the possibility of misuse.

A student may request that his or her record be amended on the grounds that the information contained therein is inaccurate, misleading, inappropriate, or in violation of his or her right of privacy. Such custodian must decide whether to amend the record as required within a reasonable amount of time. If the custodian or maker of the record refuses to make the requested change, then, such custodian shall inform the student of the decision and of the student's right to a hearing. Upon request of the student, the Program Director will promptly appoint a member of the faculty or administrative staff not having a direct interest in the matter to investigate the matter and hold a hearing. Any such hearing will be held upon five (5) days written notice to the student and those persons called to testify; and will afford the student a full opportunity to present evidence relevant to the issues. A student, at his or her own expense, may be accompanied or represented by an attorney or an advisor.

After conclusion of the investigation and hearing, the faculty or staff member conducting the same shall submit

a written report and recommendation to the Program Director, based solely on the evidence presented. The Program Director will thereafter notify the student in writing as to whether or not the record will be amended. If the record is not to be amended, the student shall have the opportunity to place in the record a written statement commenting on the information, which was sought to be corrected, and/or setting forth reasons for disagreeing with the decision not to correct the file. If the record is to be amended, the Program Director shall instruct that the record be amended accordingly and inform the student of the amendment in writing.

C. Custody and Location of Records

Student education records are maintained in the following offices and requests for inspection should be addressed to those offices:

General records - including disciplinary records, are maintained in either the office of the Program or the Program Director.

Departmental records - maintained on-site or can be accessed through a request made directly to the WCM MSHS PA Program Director.

Financial records - maintained in the Office of Student Accounting or the Program.

[Document requests](#) - transcripts are maintained by the [Office of the Registrar](#).

Student Life

Life in New York City

New York is one of the world's great cities. The Upper East Side of Manhattan is a comfortable, convenient, and generally safe residential neighborhood. Students have easy access to an unparalleled range of cultural and recreational activities including art, music, theater, cinema, sports, and dining. Most of these activities are within walking distance or easily reached by public transportation. As a result, few students require an automobile. All students are to assume full responsibility for housing, meals, telephone service, transportation, parking facilities, books, equipment, and other living expenses.

Housing Policy

While the PA Program cannot guarantee housing, we encourage you to reach out to [Housing | Weill Cornell Medicine](#) to inquire about available options. Please reference Financial Aid for tuition, fees, and off-campus housing estimates.

Class Representatives Policies

Each cohort will elect four (4) preclinical students to represent their class and serve as liaisons between the program faculty and classmates. These elections are held within the first six (6) weeks of the program and these elected representatives may serve on various Weill Cornell Medicine committees. The prior cohort's elected representatives, in collaboration with a designated faculty member, will facilitate the election process for the incoming preclinical cohort. Specific duties of class representatives I, II, III and IV may change from cohort to cohort; the current duties will be delineated in a separate document to be provided to students in advance of the scheduled election.

Class Representative I, who most recently completed their preclinical phase, will create an anonymous online ballot, and send to the new preclinical cohort for voting. Once the votes have been tallied and results finalized, the class will be notified via email and the elected students will assume the responsibilities of their role effective immediately.

Eligibility to participate as a class representative and/or serve on any Weill Cornell Medicine committee will be determined by the PA Program faculty. Students must be in good academic standing and not be considered at academic risk throughout the duration of their matriculation; otherwise, their participation may be suspended or terminated. Every effort will be made to minimize the impact of committee involvement with academic classes and rotations. Students who find participation on a committee or their responsibilities as a class representative interferes with their academic performance should discuss their situation with the Preclinical Lead or Clinical Team to determine if continued participation is advisable.

Student Society (AAPA/NYSSPA)

Members of the student body may represent the PA program as a member of a student society which will be officially recognized by other organizations including the Student Academy of the American Academy of Physician Assistants (AAPA) and New York State Society of Physician Assistants (NYSSPA). Students interested in becoming part of the student society should contact the PA program faculty member designated as Student Society advisor. Representation in the student society is a yearly term with elections occurring in April-May each year.

Refer to the following website pages for details and positions available.

- www.aapa.org/about/aapa-governance-leadership/student-academy/
- www.NYSSPA.org/PASStudentResources

The PA Program will assist students in becoming members of the Student Academy of the [American Academy of Physician Assistants](#) and the [New York State Society of Physician Assistants](#). Students may also consider independently joining specialty organizations such as the [American Academy of Surgical Physician Assistants](#).

Weill Cornell Medicine Directory

Students may search for faculty and staff contact information via the Weill Cornell Medicine directory, which is accessible online at directory.weill.cornell.edu/. If any difficulty is encountered in locating this information, students should contact the PA Program for assistance.

Appendix A – Professionalism Evaluation Report (PR) (Course)

Professionalism Evaluation Report (PR) (Course)

Student:

Course:

Course Director, Pre-clinical Director,
Clinical Director, and/or Program Director:

Date

We have found that the student has not demonstrated competency in the element(s) of professionalism indicated below.

1. Responsibility, Integrity and Ethics

- ☐ Attendance at required classes and clinical encounters
- ☐ Reliable, timely performance of educational and clinical responsibilities
- ☐ Accurate, honest reporting of information
- ☐ Personal comportment dress, grooming, hygiene, conduct

2. Self-improvement

- ☐ Accepting constructive criticism
- ☐ Modifying behaviors appropriately

3. Relationships with patients (i.e. clinical and standardized)

- ☐ Establishing rapport
- ☐ Sensitivity to patient needs and perspectives
- ☐ Advocacy
- ☐ Confidentiality and decorum

4. Relationships with academic mentors, colleagues, the healthcare team and systems

- ☐ Respect for, and cooperation with, all colleagues
- ☐ Appropriate use of medical records

Comments (required)

Remedial Action

Student Comments (optional)

I have read this evaluation and discussed it with the course director, Pre-clinical Director, Clinical Director and/or Program Director

Student signature:

Date:

Course Director, Pre-Clinical Director,
Clinical Director, and/or Program Director signature:

Date:

Appendix B - Professionalism Evaluation Report (Outside a Course)

Student:

Date:

We have found that the student has not demonstrated competency in the element(s) of professionalism indicated below.

1. Responsibility, Integrity and Ethics

- ☐ Attendance at required session(s)
- ☐ Reliable, timely performance of educational and clinical responsibilities D Accurate, honest reporting of information
- ☐ Personal comportment: dress, grooming, hygiene, conduct

2. Self-improvement

- ☐ Accepting constructive criticism
- ☐ Modifying behaviors appropriately

3. Relationships with patients

- ☐ Establishing rapport
- ☐ Sensitivity to patient needs and perspectives
- ☐ Advocacy
- ☐ Confidentiality and decorum

4. Relationships with colleagues, the healthcare team and systems

- ☐ Respect for, and cooperation with, all colleagues
- ☐ Appropriate use of medical records

Comments (required):

Weill Cornell Medicine
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PA STUDENT EXCUSED ABSENCE REQUEST FORM

Please complete the following information to request approval for absence during the pre-clinical or the clinical year.

Today's Date: _____ Pre-Clinical ☐ Clinical ☐

Student Name: _____ Class of _____

Date(s) requested: Pre-Clinical Semester # ☐ or Clinical Rotation # ☐
(Note start/end date(s) and/or time(s))

Reason: LEAP appointment ☐ Medical ☐ Personal ☐ Other ☐
(Please explain)

Save as a pdf: **AbsenceRequest_Last Name_Class year_date submitted(1-1-2025)**

Send pre-clinical requests to the attention of Ann Worrell: amw7006@med.cornell.edu

Send clinical requests to the attention of Sahai Douglas: sdo3001@med.cornell.edu

PROGRAM USE ONLY

☐ APPROVED _____

☐ DENIED _____

☐ Pending as of _____ Under review by _____

Send reply to Student, Advisor, Ann/Sahai Copy to *student file*.

Appendix D - Tutoring Declination

Tutoring Declination

Student:

Cohort: __Preclinical __Clinical

Semester:

Faculty:

Date:

The MSHS PA Program provides tutoring or supplemental support to students who have academic difficulty. Currently, (_____) declines program provided tutoring services, although strongly recommended. Student aware they can notify faculty at any time with any changes.

Student Signature:

Faculty Signature: