2020-2021

STUDENT CATALOG





Welcome to Pacific Northwest University of Health Sciences (PNWU)!

PNWU is a nonprofit university founded in 2005 by a visionary and dedicated group of physicians and community leaders. With generous support from the founders, trustees, donors, community agencies, and health systems, PNWU is fulfilling its mission of educating students to become physicians and other health care professionals for rural and medically underserved communities throughout the Pacific Northwest.

This catalog is a guide for you, faculty, and staff to understand PNWU policies and procedures and is intended to support high ideals in learning and conduct to assure that our graduates exceed professional standards and expectations for health care providers.

I wish you continuous learning and great success at PNWU!

Sincerely,
Michael J. Lawler, PhD
President

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ABOUT THE UNIVERSITY

Mission Statement

Pacific Northwest University of Health Sciences educates and trains health care professionals emphasizing service among rural and medically underserved communities throughout the Northwest. (Approved by the Board of Trustees on November 20, 2013.)

Vision

Revolutionizing Community Health.

Core Themes

- Academic Success
- Healthcare Professionals for the Rural and Medically Underserved of the Northwest
- Service to Community

Institutional Values

- Mission Driven Committed to create, sustain, and improve quality educational programs specifically for rural and medically underserved communities
- Collaborative Working together with thoughtful actions, efforts, and concerns to meet each opportunity, issue, or challenge presented
- Compassionate Every individual is respected and treated with consideration, kindness, and understanding
- Genuine Real people providing real solutions which have direct impact on community health, resources, and outcomes
- Student Focused Unwavering support for every student empowers all to realize their full potential
- Healthy At PNWU, you'll learn what it means to be part of a healthy community, and how you thrive by being part of it

History of Pacific Northwest University of Health Sciences

In response to the growing health care needs of the Pacific Northwest, community leaders in Yakima, Washington, formulated a plan to establish a health sciences university with an initial focus on an osteopathic medical school. Pacific Northwest University of Health Sciences (PNWU) was founded as a 501(c)(3) corporation on February 16, 2005. In the following two years, those community members, several of whom became the original Board of Trustees, raised over \$20 million in cash and in-kind contributions, primarily from the Yakima community. A portion of the 70-acre plot of land, which is the present site of the medical school, was one of the in-kind contributions. The capital raised established the financial reserves required by the American Osteopathic Association, Commission on Osteopathic College Accreditation (AOA COCA) to apply for accreditation for an osteopathic medical school.

The Washington Higher Education Coordinating Board (HECB) (now the Washington Student Achievement Council) authorized PNWU to offer the degree of doctor of osteopathic medicine (DO) in March 2007. Pacific Northwest University of Health Sciences College of Osteopathic Medicine (PNWU-COM) was granted applicant status from the AOA COCA on November 7, 2005, and pre-accreditation status in April 2007. PNWU-COM became the second of only two medical schools in Washington State and was the first new medical school in the Pacific Northwest in over 60 years.

The AOA COCA voted to award Initial Provisional Accreditation status to PNWU-COM at their August

25-26, 2007 meeting. This action established the initial class size of 70 students. That inaugural class matriculated in August 2008.

Ground breaking for Butler-Haney Hall, the first building on the PNWU campus, was held May 16, 2007, and the dedication ceremony to celebrate the completion of Butler-Haney Hall was held July 23, 2008. Less than two years later, construction of the Cadwell Student Center began. It was completed in February 2011. In the spring of 2012, the PNWU Board of Trustees awarded the contractor bid to undertake the expansion of Butler-Haney Hall which was completed just over a year later. The expansion delivered a 7,600 square- foot auditorium which can be divided into two auditoria with occupancy of 200 individuals per side, additional offices, a larger library and simulation laboratory, and a café area for students. The campus continues to grow as evidenced by the University Conference Center which was completed in 2015.

PNWU received the Institutional Review Board/Independent Ethics Committee Registration from the US Department of Health and Human Services on April 27, 2009, which officially established the PNWU Institutional Review Board (IRB). This was a crucial first step in establishing the path to research at PNWU.

The COM was accredited by the AOA COCA in April 2012, and the inaugural class graduated a month later. With accreditation of the COM achieved, PNWU sought to expand the class size from 70 to 135 as part of the University's plan to further address the physician shortage. The class size increase was granted and the first class of 135 students matriculated in the fall of 2013.

Following accreditation of the COM, the University embarked on regional accreditation through the Northwest Commission on Colleges and Universities (NWCCU) and was accredited by the Commission at the January 2018 meeting. Accreditation by NWCCU indicates that PNWU meets or exceeds criteria for the assessment of institutional quality evaluated through a peer review process and allows PNWU to pursue additional health care education programs.

The University is always looking to expand its services. In November of 2014, PNWU was approved by the AOA to sponsor continuing medical education (CME). One year later, PNWU was recognized as a CME sponsor by the Washington State Medical Association. This allows PNWU to provide both DO and MD continuing education. Additionally, PNWU has established an Office of Interprofessional Practice and Education to advance collaborative health care research and engagement opportunities throughout the Northwest. Most recently, the Board of Trustees approved PNWU to offer a Doctor of Physical Therapy (DPT) Program. Initial steps are underway with application for accreditation to be submitted by June 2021.

Accreditation

Pacific Northwest University of Health Sciences

PNWU is accredited by the Northwest Commission on Colleges and Universities (NWCCU).

Contact information for NWCCU:

Northwest Commission on Colleges and Universities

8060 165th Avenue N.E., Suite 100

Redmond, WA 98052

General phone: 425.558.4224

http://www.nwccu.org/

College of Osteopathic Medicine

PNWU-COM has been granted accreditation by the Commission on Osteopathic College Accreditation (COCA) of the American Osteopathic Association.

Contact information for the AOA COCA:

American Osteopathic Association Commission on Osteopathic College Accreditation

142 E. Ontario St.

Chicago, IL 60611-2864

Toll-free phone: 800.621.1773 General phone: 312.202.8000

Fax: 312.202.8200

Email: predoc@osteopathic.org

https://osteopathic.org/accreditation/

Physical Therapy Program

PNWU is seeking accreditation of a new physical therapist education program from the Council on Accreditation in Physical Therapy Education (CAPTE). The program is planning to submit an Application for Candidacy, which is the formal application required in the pre-accreditation stage, on June 1, 2021. Submission of this document does not assure that the program will be granted Candidate for Accreditation status. Achievement of Candidate for Accreditation status is required prior to implementation of the professional phase of the program; therefore, no students may be enrolled in professional courses until Candidate for Accreditation status has been achieved. Further, though achievement of Candidate for Accreditation status signifies satisfactory progress toward accreditation, it does not assure that the program will be granted accreditation.

Contact information for CAPTE:

Council on Accreditation in Physical Therapy Education (CAPTE) American Physical Therapy Association 1111 North Fairfax Street Alexandria, VA, 22314

Phone: 703.706.3240 www.capteonline.org

State Authorization

Pacific Northwest University of Health Sciences is authorized by the Washington Student Achievement Council (WSAC) and meets the requirements and minimum educational standards established for degree-granting institutions under the Degree-Granting Institutions Act. This authorization is subject to periodic review and authorizes Pacific Northwest University of Health Sciences to offer specific degree programs. The Council may be contacted for a list of currently authorized programs. Authorization by the Council does not carry with it an endorsement by the Council of the institution or its programs. Any person desiring information about the requirements of the act or the applicability of those requirements to the institution may contact the Council at P.O. Box 43430, Olympia, WA 98504-3430 or by email at degreeauthorization@wsac.wa.gov.

Nondiscrimination

PNWU is an equal opportunity employer and makes employment and student application decisions on the basis of merit. The University shall not discriminate against faculty, staff, volunteers, students, or applicants on the basis of race, ethnicity, color, religion, sex, gender, national origin, age, disability, sexual orientation, gender identity, marital status, or any other characteristic protected by law for any reason including recruitment, selection and promotion.

PNWU will include a statement of nondiscrimination in all its brochures and catalogs dealing with student admission, programs, and scholarship, and refer to its nondiscrimination policy in other written advertising that is uses as a means of information prospective students of its programs.

Diversity, Inclusion, and Equity

PNWU consciously considers and works to embed diversity, inclusion, and equity into its mission driven activities to foster and sustain an affirming environment where each member of the community can succeed. In adherence to mission, PNWU specifically works to enable individuals, groups, and practices that reflect the particular differences and challenges associated with rural and medically underserved communities of the Northwest.

Conflict of Interest and Disclosure

The Board of Trustees and employees shall disclose any conflict of interest. An actual conflict of interest arises in a situation where financial or other personal or professional considerations compromise an individual's objectivity, professional judgment, professional integrity, and/or ability to perform his or her professional responsibilities to the University. In addition to situations that clearly give rise to an actual conflict of interest, individuals are cautioned also to consider gray areas that might create the perception of, or the potential for, a conflict of interest. Perceived or potential conflicts of interest can be said to exist in situations where an individual member of the University community, a member of the individual's family, or a close personal relation has financial interests, personal relationships, or professional associations with an individual, individuals, or outside organization, such that their activities within the University could appear to be influenced by that interest or relationship.

Additional Conflicts of Interest - Related to Pharmaceuticals or Similarly Related Industry

- 1. Gifts: gifts or gratuities offered by industry to specific individuals are prohibited.
- 2. Meals: meals may be accepted when brought on site for groups to enjoy which do not create an advantage for industry.
- 3. Training/Consulting, Travel and CME: Industry support for travel stipends, educational scholarships, and visiting professorships may only be provided in the form of unrestricted educational grants with monies going directly into an educational account and not directly to specific individuals. Any training activities must be clearly differentiated from sales activities. All content must be controlled by the University.
- 4. Samples, Supplies, and Medical Equipment: A written letter of agreement must accompany any such items clarifying the intention of such donation and that no guid guo pro is expected.
- 5. Research: The Dean with advice from the Dean's Council has oversight over COI and should be consulted when considering accepting industry support of any kind.

Resources - Finding Information

This catalog serves as the primary resource for information, services, and policies. However, there are several other places to obtain pertinent information and updates.

- PNWU.edu: The website is a resource for all student needs, latest news, University calendar, forms, directory, and links to other important information.
- Student Handbook: A compilation of procedures and guidelines that provide the framework of expectations for academic performance, conduct, behavior, and professionalism as a student at PNWU.
- Self-Service: PowerCAMPUS, Self-Service, is the portal for class schedule, University account balance and statements, student ID, financial aid, grades, and transcripts.
- Moodle: A learning management system used for coursework information, assignments, and course syllabi.
- E*Value: Clinical rotation schedules, credentialing documents, and evaluations.
- ProgressIQ: Academic advising tool to track a student's progress in meeting their academic goals, and monitors course activity grades.
- Panopto: Review lecture recordings according to your own pace.
- MedU: Access virtual patient cases.

Disclaimer

The Student Catalog is the University's official compilation for all curriculum and serves as the basis for program requirements for the academic year. The catalog represents information and requirements that may be altered from time to time by the University at its sole discretion. The provisions of the Student Catalog do not constitute a contract. The University reserves the right to change any provision or requirement at any time. The University complies with the Drug-Free Workplace Act of 1988 and the Drug-Free Schools and Communities Act Amendments of 1989.

The Catalog is the responsibility of Enrollment Services. Any recommendations for additions, deletions, or changes in the Catalog must be submitted in writing to the appropriate dean. Final approval must be granted by the president of the University.

Most of the forms, policies and procedures referred to throughout this catalog are available on the University website, <u>PNWU.edu</u>. All inquiries regarding the Student Catalog should be directed to Enrollment Services at <u>registrar@pnwu.edu</u> or 509.249.7888.

Contact Information

Administrative offices are open weekdays from 8:00 a.m. to 5:00 p.m. Visitors are strongly encouraged to make appointments before visiting the campus to ensure that the person they need to see is available. The PNWU official mailing address is:

Pacific Northwest University of Health Sciences

Mailing address: 111 University Parkway, Ste. 202, Yakima, WA 98901 Physical address: 200 University Parkway, Yakima, WA 98901-1448

509.452.5100 - Main office 866.329.0521 - Toll Free 509.452.5101 - Fax

Website: <u>PNWU.edu</u> Email: <u>info@pnwu.edu</u>

ACADEMIC CALENDAR

This is an overview; a day-by-day schedule will be available to each student.

Summer Term Begins

Last Day to Withdraw with a Partial Tuition Refund

Summer Term Ends

Summer Term Grades Due

Orientation for First-Year Students

Fall Term Begins

Last Day to Withdraw with a Partial Refund

Labor Day (No Classes)

Constitution Day

Mid-Term for Fall Term

Veterans Day (No Classes)

Thanksgiving Break (No Classes)

Fall Term Fnds

Fall Term Grades Due

Spring Term Begins

Martin Luther King Jr. Day (No Classes)

Last Day to Withdraw with a Partial Refund

Presidents' Day (No Classes)

Mid-Term for Spring Term

Spring Recess (No Classes)

Spring Term Ends

Commencement

Spring Term Grades Due Memorial Day (No Classes)

May 18, 2020

June 5, 2020

August 7, 2020

August 14, 2020

Week of August 3, 2020

August 10, 2020

August 28, 2020

September 7, 2020

September 17, 2020

October 9, 2020

November 11, 2020

November 25-27, 2020

December 11, 2020

December 18, 2020

January 4, 2021

January 18, 2021

January 22, 2021

February 15, 2021

March 5, 2021

March 8-12, 2021

May 14, 2021

May 15, 2021

May 21, 2021

May 31, 2021



GENERAL POLICIES

Academic Freedom

The University will foster and maintain full freedom of discussion, inquiry, teaching and research, and standards of professional conduct and public morals. The faculty, the staff, the administration, and the students of the University are entitled to discuss relevant subjects freely in the classroom. In scholarship and publication, each faculty, staff, administrator, and student is entitled to investigate, pursue inquiry, and discuss freely those subjects, which they are competent to address; and to develop, maintain, and present opinion and reasoned conclusions relevant to the work.

Scholarly Activity

The Office of Scholarly Activity (OSA) serves PNWU programs and engages community partners in scholarly endeavors. OSA provides resources for research coordination including design, IRB administration, grant submissions, fund management, and dissemination of scholarly outcomes.

Scholarly activities fall into the following categories: research (bench, translational, and/or human subjects), organized clinical discussions, rounds, journal clubs, conferences, peer reviewed funding, publication of original research or review articles in peer reviewed journals, chapters in textbooks, publication or presentation of case reports or case series, clinical series at local, regional, or national professional and scientific society meetings, and/or participation in national committees or educational organizations. All PNWU faculty, staff, and students are strongly encouraged to notify OSA when involved or engaged in any level of scholarly activity/research.

Accommodations

Students may find that they have disabilities that diminish academic performance. PNWU reasonably accommodates students, who are otherwise qualified for admission and can meet the minimal technical standards as stated in this catalog, with disabilities as long as there is evidence establishing a relationship between the disability and the need for accommodation, and the accommodation does not impose an undue hardship on the University. All reasonable accommodations are determined on a case-by-case basis by conducting an individualized assessment.

Attendance

Failure to attend designated mandatory activities as published in the course syllabus will result in consequences as described. Students are responsible for the work they have missed. Only an excused absence will be eligible for makeup of any assessments.

The Family Educational Rights and Privacy Act (FERPA)

The <u>Family Educational Rights and Privacy Act</u> (FERPA) of 1974 is a federal law governing access to student education records. FERPA stipulates conditions for release of information from education records and affords students the opportunity to review and seek revision of those records. Pacific Northwest University of Health Sciences (PNWU) accords all the rights provided by the law and reserves for itself the right to use and release student education records under the conditions specified by the

law.

Education records, as defined by FERPA, include admission, academic, financial aid, placement records, and other information directly related to students with the exception of:

- Police records created by PNWU for the purpose of law enforcement;
- Student health records that are created and used solely in connection with the provision of health care;
- Employment records that relate exclusively to individuals in their capacities as employees; and
- Alumni or other post-attendance records.

FERPA regulations apply only to records held for institutional use concerning students who enroll at the University; they do not govern records of applicants who are denied admission or who choose not to attend the University, nor do they govern records kept by a University official that are the sole possession of the maker and are not normally revealed to anyone else except a temporary substitute (e.g., temporary reminder notes). FERPA stipulates that institutions may not disclose personally identifiable information contained in education records without a student's written consent, except under conditions specified by FERPA. Information is considered personally identifiable if it contains a student's name or the name of family members, a student's local or family address, an identification number, or descriptions or data sufficient to identify an individual.

FERPA permits access to student education records for school officials with legitimate educational interests. Student employees, students serving on official committees, and students serving in other positions in which they assist a University employee in performing her or his official tasks are considered school officials. No student employee shall have access to student education records within the college of their program.

With certain exceptions allowed by the law and listed below, no persons outside the University shall have access to, nor will the institution disclose any information from, a student's education record without the written consent of the student. FERPA permits information to be released from education records without written consent of the student to the following officials and agencies:

- Officials of other institutions to which students are applying to enroll
- Persons or organizations providing financial aid
- Individuals and organizations charged with oversight of the University, or of federal or state programs in which the University participates
- Accrediting agencies
- Parents of any student under the age of 21, regardless of the student's dependency status, in cases where the student has violated laws or University rules governing alcohol or controlled substances
- Persons as directed by a judicial order or lawfully issued subpoena, provided the University makes a reasonable attempt to notify the student in advance of compliance (unless directed by judicial authorities not to disclose the existence of an order or subpoena)
- Persons in an emergency to protect the health or safety of students or other persons
- The Immigration and Naturalization Service under the terms and provisions of immigration law

With the exception of alcohol and drug violations, PNWU does not release information from student education records to parents without the written consent of students.

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FERPA permits the University to release information concerning violent crimes and non-forcible sex offenses (statutory rape or incest) committed by its students. Victims of an alleged violent crime or non-forcible sex offense may be informed of the final results of University disciplinary hearings concerning the allegation. When a student is an alleged perpetrator of a violent crime or a non-forcible sex offense and the University concludes with respect to that allegation that the student has violated University rules, the University may release to the public the name of the student, the offense committed, and the sanction the University imposes against the student.

FERPA further allows student education records to be released to individuals or organizations performing research on behalf of, or in cooperation with, the University. When education records are released for research purposes, FERPA requires the University and its research partners to implement procedures to safeguard their confidentiality. In addition, records released for research must be returned or destroyed when the research is completed, and research findings may not be presented in a manner that makes it possible to identify confidential data from an individual's education record. PNWU will release information from student education records to outside researchers only under the conditions specified by FERPA and only to those that agree in writing to safeguard the confidential information contained therein.

At its discretion, PNWU may publish or release *directory information* in accordance with the provisions of FERPA. Directory information includes student name, University and permanent home address and telephone number, e-mail address, a photograph, date of birth, dates of attendance, enrollment status, class, major fields of study, previous institutions attended, awards and honors (including honor roll), degrees conferred (including dates), residency placement, and participation in officially recognized activities. Students may withhold directory information by giving written notification to Enrollment Services within two weeks after the beginning of the term. Requests for non-disclosure of directory information will be honored until graduation unless students submit a written request to have the block on their directory information removed. Students who wish to withhold directory information after they graduate, which would include their dates of attendance and degrees conferred, must submit another written request to Enrollment Services.

FERPA provides students with the right to inspect and review information contained in their education records, to challenge the content and accuracy of those records, to have a hearing if the outcome of the challenge is unsatisfactory, and to submit explanatory statements for inclusion in their files if they disagree with the decisions of the hearing panel. Enrollment Services has been designated by PNWU to establish procedures by which students may review their education records.

Students wishing to review their education records should submit a written request, clearly specifying the records of interest, to the official responsible for maintaining those records. Enrollment Services will assist in identifying the appropriate official. The responsible official will then make arrangements for the student to inspect the records within 45 days of the request and will notify the student of the time and place of inspection. Students may have copies made of their records with certain exceptions (e.g., students may not have a copy of academic records for which a financial "hold" exists, or a transcript of an original or source document produced by another institution or by a person not employed by PNWU). Copies will be made at the student's expense at prevailing rates, which are listed in Student Affairs.

Only records covered by FERPA, as delineated in the paragraph defining education records, will be made available for inspection. (However, students may have their health records reviewed by their own

physicians.) Furthermore, the University is permitted or required to withhold from students the following sorts of records: financial information submitted by their parents, confidential letters of recommendation to which students have waived their rights of inspection, and education records containing information about more than one student. In the latter case, the institution will permit access only to the parts of education records that pertain to the inquiring student.

Students who believe their education records contain information that is inaccurate, misleading, or held in violation of privacy rights or other rights, may ask the University to amend a record. In such cases, the student should write to the University official responsible for the record, identify the parts of the record the student believes should be changed, and indicate the reasons it should be changed. If University officials agree with the student's request, the appropriate records will be amended. If the University decides not to amend the record as requested by the student, the student will be notified and advised of her or his right to a hearing regarding the request for amendment. Additional information regarding the hearing procedures will be provided to the student when notified of the right to a hearing. FERPA confers to the student the right to challenge grades only in cases where the grade has been incorrectly recorded. However, PNWU has other procedures for appealing grades.

Student requests for a formal hearing must be made in writing to Student Affairs, who, within a reasonable period of time after receiving such a request, will inform the student of the date, place, and the time of the hearing. Students may present evidence relevant to the issues raised and may be assisted or represented at the hearings by one or more persons of their choice, including attorneys, at their own expense. The hearing panels that adjudicate such challenges are appointed by Student Affairs. The decisions of the hearing panel will be based solely on the evidence presented at the hearing and are final. They will consist of written statements summarizing the evidence and the reasons for the decision and will be delivered to all parties concerned. If the decision is in favor of the student, the education records will be corrected or amended in accordance with the decision of the hearing panel. If the decision remains not to amend the student's education record, the student has a right to insert a statement in her or his record commenting on the information therein. This statement will be maintained as a permanent part of the student's record and must be included when the record is disclosed to an authorized party.

Students who believe the adjudications of their challenges were unfair, or not in keeping with the provisions of FERPA, may request the assistance of the President of Pacific Northwest University of Health Sciences. Students who believe their FERPA rights have been violated may also file complaints with The Family Policy Compliance Office, US Department of Education, 400 Maryland Avenue S.W., Washington, DC 20202-4605.

Children in Learning Environment

Children of students are allowed in the learning environment for infrequent, brief visits (generally not longer than two hours) or to participate in University programs and events within the specified parameters detailed in the policy.

Career Counseling

Student Affairs leads a multi-department effort to provide guidance and information for student career

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choices. Links to a number of websites may be found on the <u>Career/Residency</u> webpage that are helpful career advising resources as well as sites that can assist you in understanding the physician licensing, the residency match process, searching for rural residency programs, and our student-alumni network.

Counseling Services

PNWU provides mental health services through its <u>Student Assistance Program (SAP)</u>. SAP is to provide the student, spouse or domestic partner, and dependent members of the student's family with an opportunity to confidentially discuss problems and concerns that may be affecting their lives. Within this confidential program, students are given appropriate resources designed to help with specific problems.

Licensed psychologists and mental health counselors are available for short-term care. If longer-term care is needed, contact Student Affairs for assistance. This care is available for all students both on campus and away at clinical courses.

The PNWU student acknowledges that, from the time of acceptance to the University and until withdrawal or graduation from the University, the student may be subject to psychiatric, psychological, or medical assessment and/or evaluation and/or treatment to ensure fitness for duty as the University sees fit. Any student need for psychiatric, psychological, or medical assessment and/or treatment whether voluntary or due to a recommendation or requirement by the Student Progress Committee, or any other PNWU official will be at the sole expense of the student.

Health Care Coverage and Health Care Providers

PNWU students must present proof of personal health care coverage, as defined by the Affordable Care Act (ACA), to Enrollment Services at matriculation and again by August 1 of each year they are enrolled. They must maintain personal health care coverage throughout their educational program. The student is solely responsible for their medical bills. The University assumes no responsibility to seek reductions or waivers. PNWU secures disability insurance for each student.

The University does not endorse any specific health care coverage plan or health care provider. The University does provide students a list of health care professionals and hospitals to assist students in finding diagnostic, preventative, and therapeutic health services. A <u>list of providers</u> is available as a resource at PNWU.edu. It is the desire of PNWU to assist and support students in receiving needed physical health care by establishing agreements with healthcare service providers within the Yakima community.

It is recommended that students obtain healthcare from non-PNWU affiliated faculty members. However, if the situation arises the PNWU employee must recuse him/herself from any discussions, or decision involving the students' academic or professional progress.

Immunizations

PNWU, in conjunction with requirements of regional hospitals and clinics and the Center for Disease Control (CDC) recommendations for Health Care Providers (Immunization of Health-Care Personnel:

Recommendations of the Advisory Committee on Immunization Practices (ACIP) Recommendations and Reports **November 25, 2011 / 60(RR07);1-45)**, adheres to the following requirements:

Required immunizations must be current as of start of classes of the student's first year and maintained thereafter. Blood test documenting immunity is required in some cases and to prove immunity when there is no vaccination record.

- Hepatitis A
- Hepatitis B and quantitative assay
- Tetanus, Diphtheria, and Pertussis (Tdap)
- Tetanus toxoid (Td)
- Diphtheria, Pertussis, Tetanus (DPT)
- Measles, Mumps, and Rubella (MMR) and quantitative assay
- Varicella or serum titer
- Polio (Type OPV/IPV)
- Influenza vaccination annually
- Tuberculosis surveillance annually

Students may be required by an external clinical facility to have additional immunizations or tuberculosis screening. Students must comply with these requests and pay for them at their own expense.

Criminal or Civil Convictions and Criminal Background Check

Prior to matriculation and starting full-time clinical experiences with a contracted/affiliated hospital or healthcare facility, students are required to undergo a criminal background check, at their own expense, to enhance patient safety and protection. This is a requirement placed on healthcare facilities by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO). An entity that is approved and licensed to perform background checks will be selected at the sole discretion of PNWU.

After a criminal background check has been completed, all admitted students must notify Enrollment Services and current students must notify Student Affairs within three days of any criminal or civil recordable event that occurs. The recordable event must be reviewed to determine the student's academic standing and eligibility for clinical experiences. Students are expected to fully cooperate with Enrollment Services or Student Affairs in documenting the recordable event.

The criminal background search may include, but not limited to, sources such as the following:

- Social security number trace
- Washington State Patrol criminal background check
- Criminal histories background check
- Nationwide wants & warrants
- HHS/OIG list of excluded individuals, GSA list of parties excluded from Federal Programs
 Consumer report information related to character, general reputation and credit that may be
 subject to the Fair Credit Reporting Act
- Sex offender background check
- Anti-Terrorism and USA Patriot Act
- Sanctions

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PNWU-COM will review any findings for severity, frequency/pattern, time period, rehabilitation, unprofessional behavior, accountability, and outcome. The applicant/student should investigate possible consequences on future licensure.

Drug and Alcohol

PNWU is committed to being a drug-free, healthy, and safe place of learning. The unlawful possession, use, distribution, or sale of illicit drugs, controlled substances, prescription drugs, alcohol, other intoxicating substances, and drug related paraphernalia by employees or students on PNWU property or as part of any of its activities is prohibited. No alcoholic beverages or illegal drugs may be manufactured in any academic facility, clinic, or hospital associated with PNWU.

Any student who has been convicted of an offense under any federal or state law involving the possession or sale of illegal drugs or the abuse/misuse of alcohol during their enrollment at PNWU is subject to immediate suspension and possible dismissal at the discretion of the Student Progress Committee, and/or the dean.

PNWU makes available drug or alcohol counseling, treatment, or rehabilitation or re-entry programs. Students may seek these services through the Student Assistance Program. For more information, please see the Counseling Services section of the Student Catalog. Students may also contact the Washington Physicians Health Program to participate in their confidential services: www.wphp.org.

Drug Screen

The Joint Commission on Accreditation of Healthcare Organizations (JCAHO) requires all individuals involved in the delivery of health care to comply with applicable health screening requirements, including drug screening. In compliance with this requirement, PNWU requires that all students agree to undergo a drug screen whenever it is requested of them. The student will be charged for the cost of the drug screen.

- A copy of the drug screen will be delivered directly to the student upon request with a copy to Enrollment Services.
- Any questionable or adverse findings, non-compliance, or a diluted test will be referred to the Admission Committee for further evaluation for accepted students. An adverse or questionable drug screen may result in a rescinded offer of admission.
- Any questionable or adverse result, non-compliance, or diluted test for a current student will be referred to Student Affairs. The student may not be allowed to participate in any classroom activities and will be referred to the Student Progress Committee to determine their ability to continue at PNWU and may result in dismissal from PNWU.

<u>Tobacco - Smoke - Vape - Free</u>

PNWU is a tobacco-, smoke-, vape-free environment. Smoking and use of tobacco products are prohibited on University owned or leased property, and in University vehicles and any vehicle located on University property.

Personal Property

PNWU is not responsible for personal property that is lost, damaged, or stolen. If employees or students bring personal property/items/belongings onto University property, owned or leased, the employee or student is responsible for said property.

Personal property is not covered under the University's insurance. All personal property brought onto University property, owned or leased, may be inspected with just cause.

Employment

A health professions curriculum content and time required for completion is such that any outside employment by the student is strongly discouraged.

Food Service/Dining Facilities

Pacific Northwest University of Health Sciences offers limited catering and vending options.

Gambling

Gambling is not permitted on PNWU property.

Dress Code

Students will, during regular business hours (Monday - Friday, 8:00 a.m. -5:00 p.m.), be dressed appropriately with awareness to personal hygiene, cleanliness, professional demeanor, and professional dress. Modest professional apparel, or scrubs (top and bottom), will be required for all activities in PNWU buildings. In the case of special events, students must adhere to professional dress.

Housing

Students must secure their own housing during the duration of their health professions education. PNWU may have suggestions to assist students in their search for appropriate, affordable housing. Students may find resources for housing in the Yakima Valley on the PNWU.edu website.

A PNWU employee who may have influence in academic assessment or promotion of students may not provide housing/accommodations to students.

Notification of Emergency Contact

In the event of an emergency involving a PNWU student, PNWU may contact the person the student has designated as their emergency contact. If the student is considered by a representative of PNWU in their judgment to be in a physical or mental crisis, the representative may contact the student's designated emergency contact. By providing the name and phone number of an emergency contact,

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the student is granting PNWU the authority to notify the emergency contact of the student's condition.

It is the responsibility of the student to keep their emergency contact information up to date.

Official Mailing Address

It is imperative that Student Affairs have current records regarding name, mailing address, telephone number, and emergency contact information. <u>PowerCAMPUS Self-Service</u> must be updated immediately with any change in information.

Official Photo

The official photo of all students is taken upon matriculation. If a student wants to update their photo it must be done by the PNWU designated photographer. All retakes will be at the student's expense.

Student Rights, Responsibilities, and the Honor Code

The PNWU Student Government developed an honor code as a way to educate and emphasize the importance of professionalism in the classroom, lab, clinic, and community. As part of orientation the student government association has each student sign and agree to uphold the PNWU Honor Code, as follows:

Honor Code

Adherence to an honor code will promote the growth and development of health care professionals at Pacific Northwest University of Health Sciences. We therefore commit to the following:

Pledge of Academic Standards

- Students will neither give nor receive aid in examinations or independent class work.
- Students will not represent others' work as their own.
- Students will abide by academic standards as put forth by each class instructor.

Pledge of Professionalism

- Students will appreciate and respect the diverse perspectives of peers, faculty, and the community at large.
- Students will conduct themselves as ambassadors to the community from PNWU.
- Students will treat others with respect.

Pledge of Community Obligation

• Students understand that the integrity of the honor code is predicated upon agreement of the entire student body to uphold the spirit and the letter of the honor code.

Charge to Uphold

- Students' first obligation is to directly approach peers concerning perceived transgressions.
- In the event a student cannot fulfill the above obligation, they may ask a member of the student body to act as their proxy.
- Students understand that failure to report indiscretions constitutes an infraction in kind.
- Students' final resource by which to report honor code violations is the Associate Dean for

Student Affairs.

<u>Sexual and Other Misconduct</u> (Including Harassment, Stalking, Bullying, and Intimidation)

PNWU strives to provide a safe environment for students to learn, and employees to work, free from the detrimental effects of sexual and other harassment, bullying, intimidation, and any form of unlawful discrimination as prohibited by Federal and State laws. Any violation of PNWU policy or applicable law by a faculty member, fellow student, employee or persons doing business with or for PNWU, male or female, will result in corrective or disciplinary action which could include dismissal from PNWU, termination from employment, or termination of any contractual relationship. Some violations could result in a report to law enforcement.

This policy applies to all PNWU programs and activities.

The relationship between a student and faculty/preceptor or patients must always be kept on a professional basis. Conduct in an unprofessional manner will be considered improper behavior and will be grounds for disciplinary action, including dismissal from PNWU.

Reporting Violations and Filing a Complaint

Any student who believes they have experienced sexual misconduct, sexual harassment, nonsexual harassment, intimidation, or bullying by anyone, including a faculty member, fellow student, employee, or by persons doing business with or for PNWU should report such conduct to the Title IX Coordinator or their designee. If the individual is comfortable doing so, they should also tell the offender that such conduct is unwelcome and unacceptable.

Individuals who have witnessed policy violations are encouraged to make a prompt report.

All individuals considering reporting policy violations but wishing to discuss the process or related issues can seek advice from certain confidential resources who are not required to share private personally identifiable information – such as mental health service providers or off campus crisis clinics who are by law permitted to maintain confidentiality. Most campus resources have certain legal obligations including a duty to report, so they are not in a position to advise individuals on a confidential basis or maintain confidentiality. However, most resources can discuss the process.

For additional information or to file a complaint, contact: Title IX Coordinator – Erin Murphy 111 University Parkway, Ste. 202 | Yakima, WA 98901 EMurphy@pnwu.edu | (509) 249.7714

Note that the Title IX Coordinator has broad responsibilities to the University and is not a confidential resource; individuals cannot make a report to the Title IX Coordinator in confidence.

Credit by Examination

Students presenting extraordinary admission credentials may be granted credit in the appropriate

course(s) if all of the following criteria are satisfied:

- Credit must have been earned at an accredited college or university
- Upon approval, a special examination will be administered under the auspices of the applicable department and a minimum score of 80 percent must be earned on the examination

Credit earned by examination appear on the transcript with a pass (P) grade only. A percentage grade will not be issued and the credits will not be included for class ranking purposes.

Credit for Experience

PNWU does not grant advanced standing or credit based upon experience.

Student Transfers and Waivers

PNWU does not accept transfer students, transfer credits, or waive the requirements set forth in the student admission policy or process.

The transferability of credits earned at Pacific Northwest University of Health Sciences is at the discretion of the receiving college, university, or other educational institution. Students considering transferring to an institution should not assume that credits earned in any program of study at Pacific Northwest University of Health Sciences will be accepted by the receiving institution. Similarly, the ability of a degree, certificate, or diploma, or other academic credential earned at Pacific Northwest University of Health Sciences to satisfy an admission requirement of another institution is at the discretion of the receiving institution. Accreditation does not guarantee credentials or credits earned at Pacific Northwest University of Health Sciences will be accepted by or transferred to another institution. To minimize the risk of having to repeat coursework, students should contact the receiving institution in advance for evaluation and determination of transferability of credits and/or acceptability of degrees, diplomas, or certificates earned.

Grade Posting

Text BoxPNWU adheres to the grade posting practices recommended under FERPA. Grades are not posted in a public manner either by student name, social security number, or student identification number. Faculty members, or their designee, will post grades in the PowerCAMPUS Self-Service system. FERPA permits the posting of grades in a public manner only if the student is assigned a unique identifier known only to the student and the faculty member.

Transcripts, Diplomas, and Records

Permanent education records maintained by PNWU are the responsibility of Enrollment Services. Transcripts of academic records will only contain information regarding academic status. In cases where disciplinary action leads to the student's ineligibility for re-enrollment (dismissal), disciplinary action will become a part of the permanent academic record. Disciplinary records or information from such records will be made available to persons outside of PNWU only on the formal written request of

the student involved or as otherwise allowed by law or regulation.

An official academic transcript will be transmitted directly to a legitimate educational institution, hospital, or governmental or non-governmental agency on secure, on-line, request of the student (graduate) involved.

Unofficial academic transcripts are available to the student (graduate) from <u>PowerCAMPUS Self-Service</u>.

Students who have not fulfilled their financial and other obligations to PNWU shall not have transcripts or recommendations made available until such obligations are met.

If the University has knowledge that a student or graduate is in default on a federal, state, outside agency, or institutional loan or service obligation, the University will withhold all official transcripts, National Board scores, and letters of recommendation for internships, residencies, employment, staff privileges, specialty certification, and licensing.

Diplomas will be mailed to students after the graduation ceremony and upon completion of all graduation requirements as defined in the student catalog. A request for duplicate diplomas may be made to Enrollment Services.

Students who have not received a diploma due to failure to satisfactorily fulfill their obligations to the University prior to the date of graduation and who have failed to do so following graduation shall not have the privilege of receiving transcripts, other records, or recommendations sent to any institution or entity until such obligations are cleared.

Questions or concerns regarding records and grades should be brought to Enrollment Services.

Record Retention

The University complies with federal, state, and local laws, and accreditation body guidelines regarding record retention and disposition. All vital records are maintained securely for the appropriate amount of time. The record retention procedures for the University include, but are not limited to:

- Academic records will be maintained by the University, and governed by the Family Education Rights and Privacy Act as a permanent student record.
- Non-academic records of disciplinary actions will be maintained by the University as the responsibility of Student Affairs. These actions are maintained as part of the student's permanent record.
- In cases where disciplinary action leads to a student's dismissal/ineligibility or re-enrollment, the record becomes a part of the permanent academic file and transcript.
- Financial aid records will be maintained by the University for three years after the end of the award year in which the student last attended.

Leave of Absence

A leave of absence (LOA) is a period of time approved by PNWU during which the student is not in attendance, but is considered enrolled. Leave of absence is a temporary interruption in a student's education, generally reserved for medical conditions and emergency situations.

All requests for a LOA must be in writing, be signed, be dated and include the reason for the student's request. The request must be submitted in advance, unless unforeseen circumstances prevent the student from doing so. There must be a reasonable expectation that the student will return from the LOA in order for the request to be approved. The LOA, together with any additional leaves of absence, must not exceed a total of 180 days in any 12-month period.

Prior to granting the LOA the student must receive student loan counseling regarding the effects of failure to return from a LOA. A student no longer attending classes and not approved for a LOA will be considered withdrawn as of the last date the student attended classes.

A student returning from a LOA must resume training at the same point in the academic program that they began the LOA and complete the coursework started prior to the LOA. The returning student must be in compliance with the minimum technical standards required by the appropriate program. The University will assess no additional institutional charges nor disburse any additional or subsequent financial aid proceeds until the student completes the coursework started prior to the leave of absence.

A student failing to return from an approved LOA is considered to have withdrawn on the day that the student began the approved LOA. The reclassification of the LOA to withdrawn requires the federal Return of Title IV funds calculation (see the Federal Aid Refund Calculations section), which may result in the student owing PNWU tuition, other charges, and/or living costs no longer covered by previously disbursed financial aid. The grace period for Title IV Loan borrowers may be exhausted based on the revised withdrawal date.

Withdrawal from School

Students who discontinue their education at PNWU for any reason are required to complete a written request to withdraw. Failure to complete the request to withdraw will result in a hold on all academic records and replacement charges incurred for any PNWU property not returned within ten business days.

A student choosing to withdraw from the University automatically waives the right to an appeal of any disciplinary action or dismissal decision previously made by the Student Progress Committee and/or the dean. Guaranteed re-admission, based on withdrawal reason, may be voided upon failure to provide documentation in a timely manner. The dean will make the final decision to grant a request and will notify the student of the decision in writing.

• **Medical Withdrawal--** Granted to students who have a medically documented reason acceptable to the University. Students may apply for readmission. The Admissions Committee will review and make a recommendation to the dean who will make the final decision and, if accepted, the dean or their designee will determine class placement in the event of acceptance.

- Advanced Study Withdrawal--Granted to students who generally complete the first two years
 and wish to leave PNWU to pursue educational opportunities, such as PhD programs and/or
 research fellowships. Advanced study withdrawal will be granted by the dean for a maximum
 of one year with renewal. Readmission is guaranteed, provided the student:
 - 1. Has remained in compliance with PNWU's codes of academic and behavioral conduct while on leave.
 - 2. Makes satisfactory academic progress at the sponsoring institution.
 - 3. Meets the minimum technical standards for admission.
 - 4. Submits to a criminal background check (CBC) and drug screen. Applicants for an advanced study withdrawal will be required to supply appropriate documentation as determined by the University. Students seeking advanced study withdrawal should initially meet with the appropriate dean to discuss the request.
- **Military Withdrawal--**Granted to students whose military reserve obligations may necessitate a period of absence from the academic program when they are called to extended active duty. Readmission is guaranteed pending proof of compliance with minimal technical standards and the codes of academic and behavioral conduct and submitting to a CBC and drug screen.
- **Personal Withdrawal--**Granted to students who wish to voluntarily leave PNWU for personal reasons. Students withdrawing from PNWU must apply for readmission.

Students withdrawing from the University will receive a grade of withdrawal (W) for all ungraded, registered courses.

Tuition Refunds

The request for a tuition refund requires an approved withdrawal from the University. No part of the tuition charges will be refunded to a student who withdraws for any reason after the third week from the first day of the academic term. All requests must be received before the close of business on Friday of the third week; proration is determined based on the date received.

The tuition refund shall be prorated as follows:

- 75 percent during the first week
- 50 percent during the second week
- 25 percent during the third week

Federal Aid Refund Calculations

PNWU will determine the earned and unearned portions of federal financial aid as of the date the student ceased attendance based on the amount of time the student spent in attendance. Up through the 60 percent point in each term a pro-rata schedule is used to determine the amount of federal financial aid funds the student earned at the time of withdrawal. Any unearned funds must be returned to the U.S. Department of Education.

The official date of the withdrawal is the date that Student Affairs receives the student's written request or the last date of attendance, whichever comes first. The percentage of time completed in the enrollment period is determined by dividing the number of days in the enrollment period into the number of days attended. If 60 percent of the term has been completed, there is no return of Title IV funds.

Readmission

Students withdrawing from PNWU, regardless of the reason, must apply for readmission. To apply for readmission, the applicant must submit a letter to Enrollment Services at least three months in advance of the time the applicant wishes to re-enroll. The letter must include reasons for withdrawal from school, status/activities involved with since withdrawal, and reasons to be considered for readmission. The applicant for readmission may also include any supportive documentation they feel the Admissions Committee should consider.

The Admissions Committee will consider the letter of application for readmission and may ask for letters of reference, medical documentation, etc., and review the student's credentials on file with Enrollment Services. The Admissions Committee has the right to conduct interviews, secure documentation, evaluate past grades/performance, etc. Since the reason each applicant leaves is unique, the information required by the Admissions Committee may vary. The Admissions Committee makes a recommendation to the dean. The dean or dean's designee will establish placement and academic conditions, which will include academic probation, for students readmitted.

Military Readmission

Any student whose absence from Pacific Northwest University of Health Sciences (PNWU) is necessitated by reason of service in the US Armed Forces, National Guard or other military reserve component shall be entitled to re-admission upon meeting any eligibility and re-admission requirements.

A student shall be permitted to withdraw from one or more courses without a failing grade, incomplete or other negative annotation or alteration of grade point average, or be given an incomplete and be permitted to complete the course upon release from active duty, or continue and complete the course for full credit with any absences due to service treated as excused.

Eligibility

This policy applies only to US Military veterans seeking re-admission to the program which they previously attended; it does not apply to individuals seeking admission to a different school at PNWU. A student is eligible for re-admission under this provision if, during the leave, the student performed or will perform voluntary or involuntary active duty service in the US Armed Forces, including active duty for training and National Guard or Reserve service under federal authority, for a period of more than 30 consecutive days, and received a discharge other than dishonorable or bad conduct, or performed or will perform voluntary or involuntary duty with the national guard or any other military reserve component under state authority for a period exceeding 30 days or is ordered to federal active military service. In general, the cumulative length of absence and all previous absences for military service (service time only) must not exceed five years.

Requirement of Notice

A student planning to take a leave for military service must give advance written or verbal notice of military service to the dean or dean's designee, unless such notice is precluded by military necessity. To be readmitted, notice (written or verbal) of intent to re-enroll must be given to the dean or dean's designee no later than three years after the completion of the period of service. If recovering from a service-related injury or illness, the school must be notified no later than two years after recovery.

A student who does not submit a timely notification of intent or provide an attestation within the designated time limits may not be eligible for the benefits outlined herein.

Readmission Requirements

The school must allow the student to re-enroll in the next class or classes in the same program, with the same enrollment status, number of credits, and academic standing as when they were last in attendance at PNWU. The student may also request a later date of admission or, if unusual circumstances require it, the institution may admit the student at a later date. If the school determines that the student is not prepared to resume the program where they left off, the school must make reasonable efforts at no extra cost to the student to enable the student to resume and complete the program. Such reasonable efforts include, but are not limited to, providing a refresher course and allowing the student to retake a pretest, as long as the student does not place an undue hardship on the school. If reasonable efforts are unsuccessful or the school determines that there are no reasonable efforts that the school can take, the school is not required to readmit the student. In evaluating re-admission, PNWU will comply with the requirements of any more beneficial Washington State Law. Upon re-admission the dean of the appropriate college will evaluate readiness to resume the education program.

If the program to which the student was admitted is no longer offered, the student must be admitted to the program that is most similar, unless the student requests or agrees to admission to a different program.

The re-applicant must provide proof of compliance with minimal technical standards, the codes of academic and behavioral conduct, criminal background check, and drug screen.

For the first academic year in which the student returns, they must be readmitted with the same tuition and fees charges the student was or would have been assessed for the academic year when the student left, unless there are sufficient veterans' educational benefits or other service member education benefits to pay the increased amount of tuition and fees. For subsequent academic years, the student may be charged the same tuition and fees as other students in the program.

Service for thirty days or less

A student who is a member of the Washington National Guard or any other military reserve or guard component who is ordered for a period of 30 days or less to either active or inactive state or federal service and as a result of that service, or follow-up medical treatment for injury incurred during that service, misses any class, test, examination, laboratory, or class day on which a written or oral assignment is due, or other event upon which a course grade or evaluation is based, is entitled to make up the class, test, examination, laboratory, presentation, or event without prejudice to the final course grade or evaluation. The makeup must be scheduled after the member's return from service and after a reasonable time for the student to prepare for the test, examination, laboratory, presentation, or event.

Class sessions a student misses due to performance of state or federal active or inactive military service must be counted as excused absences and may not be used in any way to adversely impact the student's grade or standing in class.

If the faculty member teaching the course determines that the student has completed sufficient work and has demonstrated sufficient progress toward meeting course requirements to justify the grade without making up the class, test, examination, presentation, or other event, the grade may be awarded

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without the makeup, but the missed class, test, examination, laboratory, class day, presentation, or other event must not be used in any way to adversely impact the student's grade or standing in the class.

Complaints of Accreditation Standards

Any individual may file a complaint regarding an accreditation standard, eligibility, requirement, procedure, or policy. The complaint must be a written explanation of dissatisfaction or disagreement with an action, decision, or omission within the control or responsibility of PNWU relative to accreditation standards, eligibility requirements, procedure, or policy.

Should the accrediting agency find the student complaint related to accreditation valid, PNWU will abide by the procedures set forth by the accrediting agency to rectify the noncompliance to the accreditation standard(s). PNWU will maintain records of the receipt, adjudication, and resolution of such complaints.

At no time will any adverse action be allowed against the person(s) for filing a complaint.

Complaints Regarding Program Integrity

A student may file a complaint alleging a violation of consumer protection laws, licensure of postsecondary institutions, quality of education or other state or accreditation requirements. The complaint must be a written explanation of dissatisfaction or disagreement with an action, decision, or omission within the control or responsibility of PNWU relative to program integrity.

At no time will any adverse action be allowed against the student(s) for filing a complaint.





The Annual Campus Safety and Security Report and the Emergency Operations Plan (EOP) may be found on the <u>Campus Security webpage</u> or Campus Security in Butler-Haney Hall.

Advising Campus Community About Sex Offenders

PNWU advises the campus community on where to obtain law enforcement agency information concerning registered sex offenders.

The <u>Campus Sex Crimes Prevention Act</u> (CSCPA) of 2000 is a federal law that provides for the tracking of convicted sex offenders enrolled at, or employed at, institutions of higher education.

Animals on Campus

Animals are allowed on the PNWU campus as long as they are on a leash, not a threat to other people, and do not bother or distract others. Owners must pick up after their animal(s). Other than service animals, the University retains the right to ask owners to remove their animal(s) at any time. If an animal behaves in a way that poses a direct threat to the health or safety of others, has a history of such behavior, or is not under the control of the handler, that animal may be required to leave campus.

Animals are only allowed inside campus building as service animals with service and vaccination tags for the disabled, conditions related to the <u>Americans with Disabilities Act (ADA)</u> where reasonable accommodations can be made, for academic research, or as specifically approved and under conditions approved by the president or designee.

All other animals inside campus buildings must have documentation approved and submitted to Human Resources prior to building entry.

Campus community members are encouraged to report any animals that misbehave or handlers who mistreat their animals.

Campus Closure

In the event that inclement weather or an emergency situation presents a risk to PNWU faculty, staff, students, visitors, and/or facilities, the president or designee will determine the appropriate campus response. Closing of the campus is a procedure that will differ depending on the timing of the decision to close and the expected length and severity of the weather or emergency situation. The essential factor in the decision is the safety of the PNWU faculty, staff, students, visitors, and facilities.

The Emergency Operations Team will assess the need for campus closure. Only the president or designee may authorize the closure of campus, or segment of campus. In the event of a campus closure, the PNWU community will be notified via the Emergency Notification System.

In the event of extreme weather conditions, notice of school closure will be made over local radio and television stations. If inclement weather prevents students from attending school on a day that PNWU is open, students are responsible for making up any work or exams missed.

Campus Law Enforcement Authority

Limited campus law enforcement authority is granted to PNWU Campus Security. As such, PNWU security personnel act as agents for the University itself. PNWU security personnel do not have arrest powers; all criminal incidents are referred to local law enforcement, that being the Yakima County Sheriff's Office, who has jurisdiction on and adjacent to the PNWU campus. PNWU is also able to draw on the resources of the Yakima Police Department and the Washington State Patrol when necessary or appropriate.

PNWU Campus Security is granted authority to:

- monitor and record, via local law enforcement agencies, any criminal activity involving a PNWU student conducting business or acting through a recognized student club or organization offcampus
- review and enforce orders of protection, "no-contact" orders, restraining orders, or similar lawful orders issued by any court or by the University. Violations shall be reported to local law enforcement
- require students and employees to comply with directives of campus security, law enforcement agencies, and any other University officials
- ask persons for identification and to determine whether individuals have lawful business at PNWU campus sites
- enforce University policy, rules, and regulations as well as local, state, and federal laws, and report criminal violations to the proper authorities

Crime victims and witnesses are strongly encouraged to immediately report all criminal activity to the appropriate law enforcement agencies and PNWU security personnel. Prompt reporting will assure timely warning notices of campus crime and assist in full disclosure of crime statistics.

Disclosure of Crime Statistics

PNWU annually collects, reports, and discloses crime statistics per the Clery Act as revised and effective July 1, 2015. These crimes are those that occur on or within the University's Clery geography and that are reported to local police agencies or to campus security authority. These statistics must be reported to the Department of Education and be included in the <u>Annual Security Report</u> for the three most recent calendar years.

Each year, an email notification is made to all enrolled students and employees that includes an electronic link to access the Annual Security Report. Copies of the report may also be obtained from PNWU Campus Security and Human Resources.

Firearms and Dangerous Weapons on Campus

PNWU prohibits possession or use of any firearm, explosive (including fireworks), dangerous chemical or other dangerous weapons or instrumentalities on campus. Exception is for authorized University purposes and if prior written approval has been obtained from the director of security, the University president or designee.

Any firearm or dangerous weapon on campus, without written approval, may be confiscated.

Security Awareness Crime Prevention Programs

The University will make campus security and personal safety programs and campaigns available on a regular basis and at a minimum annually. Campus security programs and campaigns are designed to educate regarding campus security in general and how to prevent domestic violence, dating violence, sexual assault, and stalking.

Security and Access of Campus Facilities

Pacific Northwest University of Health Sciences facilities are locked; access is restricted to authorized students and employees. PNWU issues proximity access cards that allow students and employees to enter authorized areas 24 hours a day. During an extended closure, only authorized personnel will be granted access to campus property and facilities.

Campus facilities may have different hours of accessibility; in such cases, these areas will be secured and accessed by appropriate persons in accordance with operating schedules as developed by the department responsible for that facility.

Timely Warning and Emergency Notification

PNWU will inform members of the campus about crimes and emergencies that have occurred or may impact or represent a threat to the campus community. PNWU will follow its emergency notification procedures as outlined in the Emergency Operations Plan.

Parking

PNWU shall provide parking as a courtesy for employees, students, and visitors on campus. General parking spaces are open for all vehicles with any type of valid PNWU parking permit. PNWU shall not be responsible for any theft, vandalism, or other damage occurring while a vehicle is parked on campus.

Employees and students shall report all vehicle accidents to Campus Security regardless of the severity.

FINANCIAL AID



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Enrollment Services is the primary agent to provide counseling and assistance to students with the necessary forms to obtain loans, scholarships, grants, and other forms of financial aid.

It is the student's primary responsibility to secure educational financing. This means that such things as supplying personal documentation, supplying family documentation, and ensuring that a student qualifies for loans by having a favorable credit report are the student's obligations. All documents requested by Enrollment Services must be received before financial aid will be processed. All disbursements will be made via direct deposit.

Health professions education is expensive. During schooling, most students are required to live at a modest level. The primary obligation for financing education lies with the student and the student's parents/spouse. The federal and private agencies that make funds available for borrowing do so with the understanding that a student must sacrifice in order to achieve their degree.

Students accepted by PNWU and requiring financial aid must file the <u>Free Application for Federal Student Aid (FAFSA)</u> to assess aid eligibility. The needs analysis system set by the federal government ensures equity of treatment among all applicants. The University uses this needs analysis system to determine the amount of need-based financial assistance, loan amounts, and scholarship awards for which a student is eligible.

Financial aid as awarded or borrowed under the federal or private programs cannot exceed the PNWU estimated <u>cost of attendance</u>. Funding is available for a student's direct and indirect educational costs while they receive an education, but the student must be frugal and a good money manager. Students must carefully monitor their budgets.

Loans

As a rule, most people believe it is easier to borrow money for educational expenses. As a health care student, certain special <u>loan programs</u> may be available, the primary sources being the Stafford Loan Programs and the Graduate PLUS loan program. A student may not be eligible for the full amount based on their federal needs analysis, the PNWU estimated cost of attendance, or prior student loan indebtedness. The amount a student can borrow is based on the cost of their education and potential personal contributions, not on the student's desire for capital.

The Federal Direct Unsubsidized Stafford Loan and Federal Direct Graduate PLUS Loan accrue interest from disbursement date. Borrowers must consider the repayment implications and avoid excessive borrowing. PNWU has a federally mandated obligation to keep a student's indebtedness to a minimum. A student may request counseling through Enrollment Services while in school about the nature of his or her debt and the projected payment schedule. Group sessions will be provided at least once each academic year.

Borrowing money from these programs is a privilege, not a right; regulations controlling these programs change periodically. A loan is not a gift or grant; it must be repaid. Student loans are only to be used for related educational expenses and personal living expenses.

Default is the failure of a borrower to make an installment payment when due or to meet other terms of the promissory note. If this happens, it is reasonable to conclude that the borrower no longer intends to honor the obligation to repay. Defaulted loans are reported to national credit agencies, thus affecting credit ratings and future ability to borrow money. Over-borrowing can cause defaulting on a student loan. This is why educational debt management is essential. PNWU encourages students to learn some basic budgeting techniques, how to cut costs, and how to live with less. If a student's loan goes into default, the University, the organization that holds the loan, the state, and the federal government may all take action to recover the money. The federal government and the loan agencies may deny a school's participation in the student loan programs or charge a school or its students a higher origination fee if the school's default rate is too high. The University will withhold the transcript of any individual if that individual is in arrears or in default under any loan or loan program, when such arrears or default adversely affects the University in any way.

For Washington State residents seeking information and resources about student loan repayment or seeking to submit a complaint relating to your student loans or student loan servicer, please visit www.wsac.wa.gov/loan-advocacy or contact the Student Loan Advocate at loanadvocate@wsac.wa.gov.

Scholarships and Grants

Enrollment Services will provide students with information on <u>scholarship notices</u> that are sent to the office. It is the student's responsibility to notify Enrollment Services of any scholarship or grant awards received.

Standards for Satisfactory Academic Progress

Federal law requires that all students receiving financial assistance from Title IV and Title VII funds maintain <u>satisfactory academic progress</u>. PNWU policy follows the qualitative (grade-based) academic standards that apply to all students and in addition, a required quantitative (time-related) standard.

While on warning or probation, the student may receive financial aid for one enrollment period. At the end of that period, the student must be in good standing or financial aid eligibility will be denied.

Enrollment Services will notify students who are ineligible for continued assistance and will provide them with information regarding their academic status.

Drug Conviction

A student is ineligible to receive Title IV, HEA program funds, if the student has been convicted of an offense under any federal or state law involving the possession or sale of illegal drugs for conduct that occurred during a period of enrollment for which the student was receiving Title IV, HEA program funds. However, the student may regain eligibility if the student successfully completes a drug rehabilitation program after the student's most recent drug conviction. The student regains eligibility on the date the student successfully completes the program. The student should work closely with Enrollment Services to determine eligibility.

Code of Conduct - Related to Financial Aid and Accounting

- 1. The University bans revenue-sharing arrangements with any lender. This is defined as any arrangement between a school and a lender that results in the lender paying a fee or other benefit, including a share of the profits, to the school, its officer, employees or agents, as a result of the school recommending the lender to its students or families of those students.
- 2. The University bans employees of the financial aid office receiving gifts from any lender, guaranty agency or loan servicer. This excludes:
 - a. Brochures or training material related to default aversion or financial literacy.
 - b. Food, training or informational materials as part of training as long as that training contributes to the professional development of those individuals attending the training.
 - c. Favorable terms and benefits to the student employed by the institution as long as those same terms are provided to all students at the institution.
 - d. Entrance and exit counseling as long as the institution's staff are in control and they do not promote the services of a specific lender.
 - e. Philanthropic contributions from a lender, guaranty agency, or servicer unrelated to education loans.
 - f. State education, grants, scholarships, or financial aid funds administered by or on behalf of the State.
- 3. The University bans contracting arrangements whereby any employee of the school's financial aid office may not accept any fee, payment or financial benefit as compensation for any type of consulting arrangement or contract to provide services to or on behalf of a lender relating to education loans.
- 4. The University prohibits steering borrowers to particular lenders or delaying loan certifications. This includes assigning any first-time borrower's loan to a particular lender as part of their award packaging or other methods.
- 5. The University prohibits offers of funds for private loans. Schools may not request or accept such offers. This includes any offer of funds for loans to students at the institution, including funds for an opportunity pool loan, in exchange for providing concessions or promises to the lender for a specific number of loans, or inclusion on a preferred lender list.
- 6. The University bans staffing assistance from a lender. Schools may not request or accept any assistance with call center staffing or financial aid office staffing. This excludes:
 - a. Professional development training for financial aid administrators.
 - b. Providing educational counseling materials, financial literacy materials, or debt management materials to borrowers, provided that such materials disclose to borrowers the identification of any lender that assisted in preparing or providing such materials.
 - c. Staffing services on a short-term, nonrecurring basis to assist the school with financial aid-related functions during emergencies, including State-declared or federally-declared natural disasters, and other localized disasters and emergencies identified by the Secretary.
- 7. The University bans advisory board compensation. Employees of the institution may not receive anything of value from a lender, guarantor, or group in exchange for serving in this capacity. They may, however, accept reimbursement for reasonable expenses incurred while serving in this capacity.





The <u>PNWU Library</u> provides comprehensive resources and services to support student education and research. Available resources include health sciences databases, print and electronic books and journals, and audiovisual materials. Library staff members provide reference service, in-depth research assistance, group and individual instruction in online searching of PubMed and other databases, and interlibrary loan. Interlibrary loan and document delivery are free to PNWU students, faculty, and staff.

The library is located next to the Grand Foyer in Butler-Haney Hall and is available seven days a week during staffed hours. The library also provides 24-hour quiet study space in its reading room. Wireless connectivity is available for laptop computers and other Wi-Fi devices. The library also has public computer workstations for accessing its catalog and other resources.

For more information on library resources, services, and policies, please see <u>library.pnwu.edu</u>, or contact the library staff.

Phone: 509.249.7745 Email: <u>library@pnwu.edu</u>

Copyright Policy

It is the policy of Pacific Northwest University of Health Sciences that all students comply with US Copyright Law as it relates to the use of copyright-protected works in the classroom and library at PNWU.

Summary of Civil and Criminal Penalties for Violation of Federal Copyright Laws

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 (<u>Title 17 of the United States Code</u>). 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 constitutes an infringement. Penalties for copyright infringement include 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, 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. For more information, please see the website of the <u>US Copyright Office</u>, especially their <u>FAQ's</u>.

All students are required to read and abide by the PNWU Copyright Policy.

Students who violate the PNWU Copyright Policy will be subject to disciplinary action, up to and including expulsion from the University.



Technology Services partners with students, faculty, staff, and Board of Trustees in the areas of technology infrastructure and support, instructional design, and information security to provide innovative services that are integral to the delivery of the curriculum and to fulfill the University's mission and vision.

Students' main interaction with Technology Services is via the Help Desk, which is operated Monday-Friday, 7:30am to 5:30pm and is located in Butler-Haney Hall 105. Students may stop in, call 509-249-7777, or email help@pnwu.edu.

Technology Services provides support for student printing, classroom audiovisual needs, and institutional software and services like network access, Moodle, and Panopto. Technology Services can provide limited support and consulting for students' personal computing devices. Support for ExamSoft/Examplify and ProgressIQ is provided through the Assessment Office.

Laptops

Students are required to have a laptop that meets the <u>minimum hardware and software requirements</u>. Laptop purchases are the responsibility of each student, financial aid is available for the purchase once during the student's program.

Privacy Screens

Students are required to have a privacy screen for their iPad or laptop during assessments. The privacy screen must meet the minimum requirements. Privacy screen purchases are the responsibility of each student, financial aid is available for the purchase once during the student's program.

Acceptable Use of University Electronic Communications, Equipment, Supplies, and Assets

Students are provided access to technology resources to support their studies and University-sanctioned activities. University-issued email accounts are the official means of University communications. Resources may not be used in a manner that violates the law, for private commercial activities that are not approved by the University, for personal private gain, or for political campaigning and similar activities that are inconsistent with the University's mission.



Tuition is due and payable in full at registration unless special arrangements have been made with Enrollment Services.

Any students using U.S. Department of Veterans Affairs (VA) Post 9/11 G.I. Bill® (Ch. 33) or Vocational Rehabilitation and Employment (Ch. 31) benefits, with payment to the University pending from the VA, the University will not:

- Prevent the student's enrollment;
- Assess a late penalty fee to;
- Require student secure alternative or additional funding;
- Deny their access to any resources (access to classes, libraries, or other institutional facilities) available to other students who have satisfied their tuition and fee bills to the institution.

However, to qualify for this provision, such students will be required to:

- Produce the Certificate of Eligibility by the first day of term;
- Provide a written request to be certified;
- Provide additional information needed to properly certify their enrollment

All tuition and fees are subject to change annually. The PNWU Board of Trustees reserves the right to change the schedule of tuition and fees without advance notice, to make such changes applicable to present as well as future students, and to establish additional fees or charges for special services whenever, in their opinion, such actions are deemed advisable.

No course will be credited toward promotion, graduation, or subsequent credit if a student has not paid the required tuition, including any additional tuition incurred by repeating any portion of the academic program.

Books and Supplies

PNWU includes the cost of books and supplies required for the curriculum as part of tuition based on the following:

• Arrangements with the publishers or other entities make the required items available in a format not available or accessible to the student from a source not authorized by PNWU.

OR

- Required supplies are purchased at or below competitive market rates, and provided to the students by the seventh day of the payment period.
- PNWU provides a way for a student to obtain those supplies by the seventh day of a payment period by;
 - Disbursing Title IV, HEA program funds for which the student is eligible up to ten days prior to the payment period; and
 - A Title IV, HEA credit balance is paid directly to the student as soon as possible, usually within five business days.
- Students may opt-out of the way supplies are provided by PNWU by signing the Program Cost Opt-Out Request form. Students acknowledge responsibility of obtaining the items and the failure to do so may impact their academic success.
 - o Student obtained equipment may be reviewed by the Department Chair or their designee to ensure equipment standards are met.

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Replacement of PNWU provided equipment; supplies, or books are at the expense of the student.

Fees

Application Fee

A nonrefundable application fee is payable upon submission of a supplemental application for admission.

College of Osteopathic Medicine application fee of \$85

Acceptance Fee

A nonrefundable acceptance fee is payable after a student has been offer admission to PNWU. Payment is credited toward tuition upon matriculation.

College of Osteopathic Medicine acceptance fee of \$1,000

Criminal Background Check Fee

A criminal background check (CBC) is required prior to matriculation and prior to beginning off campus clinical courses. The cost of the CBC is established by the company contracted by PNWU to provide this service. Instructions for the criminal background check will be delivered via email.

Diploma Replacement Fee

The fee for each additional or replacement diploma is \$25.00.

Diploma Electronic Fee

The fee to receive or send an electronic diploma is \$25.00.

Drug Screening Fee

A random drug screening may be required prior to matriculation and whenever it is requested of a current student. The cost of the drug screen is established by the company providing the service.

End of Rotation Retest Fee

A student who has failed the required end of clinical course examination (COMAT) must remediate by retaking the examination, at their own expense of a \$40 retest fee.

Library Fee

Students are required to pay for any overdue, lost, or damaged materials from the PNWU Library collection or from interlibrary loan. Fees are variable according to the infraction. See the <u>Library fines</u> web page for details.

NSF Fee

A fee of \$25 is charged for returned checks, rejected ACH payments, etc.

Transcript Fee

A fee of \$10.00 is charged for each requested transcript, not to exceed \$30.00 for same recipient.

Tuition Late Fee

Registration obligates students for payment of all tuition. If tuition is not paid by the due date, students will be assessed a \$50 late fee and be liable for any other reasonable collection costs and charges.

Students with unpaid University charges may not proceed or register for classes and may be discharged from PNWU. Books, supplies and grades will be held until payment is received. Books, supplies and grades will be held until payment is received.



COLLEGE OF OSTEOPATHIC MEDICINE (COM)



Osteopathic Medicine

The United States' fully licensed osteopathic physicians (DO) practice the entire scope of modern medicine, bringing a patient-centered, holistic, hands-on approach to diagnosing and treating illness and injury. Osteopathic physicians may choose any specialty, prescribe drugs, perform surgeries, and practice medicine anywhere in the United States. DOs bring the additional benefits of osteopathic manipulative techniques to diagnose and treat patients. DOs work in partnership with patients to help them achieve a high level of wellness by focusing on health education, injury and disease prevention.

History

Osteopathic medicine is a distinctive form of medical care founded on the philosophy that all body systems are interrelated and dependent upon one another for good health. This philosophy was developed in 1874 by Dr. Andrew Taylor Still, who pioneered the concept of wellness and recognized the importance of treating illness within the context of the whole body.

Andrew Taylor Still was born in Virginia in 1828, the son of a Methodist minister and physician. At an early age, Still decided to follow in his father's footsteps as a physician. After studying medicine and serving an apprenticeship under his father, Still became a licensed M.D. in the state of Missouri. Later, in the early 1860s, he completed additional coursework at the College of Physicians and Surgeons in Kansas City, Missouri. He went on to serve as a surgeon in the Union Army during the Civil War.

After the Civil War and following the death of three of his children from meningitis in 1864, Still concluded that the orthodox medical practices of his day were frequently ineffective and sometimes harmful. He devoted the next ten years of his life to studying the human body and finding better ways to treat disease.

His research and clinical observations led him to believe that the musculoskeletal system played a vital role in health and disease and that the body contained all of the elements needed to maintain health, if properly stimulated. Still believed that by correcting problems in the body's structure through the use of manual techniques now known as osteopathic manipulative treatment, the body's ability to function and to heal itself could be greatly improved. He also promoted the idea of preventive medicine and endorsed the philosophy that physicians should focus on treating the whole patient, rather than just the disease.

These beliefs formed the basis of a new medical approach-osteopathic medicine. Based on this philosophy, Dr. Still opened the first school of osteopathic medicine in Kirksville, Missouri in 1892.

Philosophy

Osteopathic medicine is a separate and distinct branch of medical practice that is based on a set of philosophical principles and stresses a comprehensive approach to the maintenance of health. Osteopathic medical education is unique in its emphasis on the neuromusculoskeletal system and its utility in the diagnosis and treatment of disease. It is the unobstructed, interrelationship of all the body's systems by which health is maintained and by which disease is prevented. Osteopathic medicine makes use of the following principles that assist the osteopathic physician to look for health, and not simply

treat a disease state:

- a. The human body is a dynamic unit of function.
- b. The human organism is self-regulating and self-healing.
- c. Structure (anatomy) and function (physiology) are reciprocally interrelated.
- d. The function of the musculoskeletal system goes beyond support and may be vital in the diagnosis and treatment of disease.

The Osteopathic Physician's Oath

I do hereby affirm my loyalty to the profession I am about to enter. I will be mindful always of my great responsibility to preserve the health and the life of my patients, to retain their confidence and respect both as a physician and a friend who will guard their secrets with scrupulous honor and fidelity, to perform faithfully my professional duties, to employ only those recognized methods of treatment consistent with good judgment, and with my skill and ability, keeping in mind always nature's laws and the body's inherent capacity for recovery.

I will be ever vigilant in aiding the general welfare of the community, sustaining its laws and institutions, not engaging in those practices which will in any way bring shame or discredit upon myself or my profession. I will give no drugs for deadly purposes to any person, though it be asked of me. I will endeavor to work in accord with my colleagues in a spirit of progressive cooperation, and never by word or by act cast imputations upon them or their rightful practices.

I will look with respect and esteem upon all those who have taught me my art. To my college I will be loyal and strive always for its best interests and for the interests of the students who will come after me. I will be ever alert to further the application of basic biologic truths to the healing arts and to develop the principles of osteopathy which were first enunciated by Andrew Taylor Still.

PNWU-COM Mission, Program Goals, and Objectives

Mission

Pacific Northwest University of Health Sciences College of Osteopathic Medicine educates and trains students to become osteopathic physicians that provide research-driven quality care to communities of the Northwest, particularly rural and medically underserved populations.

Program Goals and Objectives

- A. Teaching Goal: Provide a learner-centered curriculum that prepares students for graduate medical education and osteopathic clinical service primarily in rural and medically underserved areas of the Northwest. In order to achieve this goal, PNWU-COM has set the following program objectives:
 - 1. Provide medical practice learning and training experiences in rural, medically underserved, and Northwest locations.
 - 2. Educate students to be culturally competent, caring physicians using a learner-centered curriculum model based on the National Board of Osteopathic Medical Examiners Fundamental Osteopathic Medical Competency Domains.
 - 3. Continually appraise and improve the educational program through analysis of student learning outcomes and curriculum assessment.

- 4. Recruit outstanding faculty and provide opportunities for faculty to develop in their areas of expertise.
- B. Research Goal: Contribute to the advancement of knowledge through research and scholarly activities. In order to achieve this goal, PNWU-COM has set the following program objectives:
 - 1. Recruit inquiry-minded faculty and students.
 - 2. Encourage participation in scholarly activity and a vibrant research agenda that addresses the health care issues impacting the communities we serve (especially in the fields of basic biomedical sciences, clinical medicine, and osteopathic principles and practice).
 - 3. Provide financial resources to support scholarly activity and research capacity development.
 - 4. Translate research about health care into clinical practice to increase access, improve quality, and reduce costs (especially within osteopathic clinical practice).
- C. Service Goal: Collaborate with communities for the betterment of the health, education, and well-being of those communities. In order to achieve this goal, PNWU-COM has set the following program objectives:
 - 1. Support and participate in community service and public health initiatives and programs, particularly those that provide opportunity for osteopathic clinical services.
 - 2. Allocate time and expertise of faculty, staff, and administration to ensure an efficient and effective level of service.
 - 3. Participate in local, state, regional, national, and international professional organizations.
- D. Graduate Medical Education (GME) Training Goal: Facilitate development of GME opportunities in rural and medically underserved communities, particularly in the Northwest. In order to achieve this goal, PNWU-COM has set the following program objectives:
 - 1. Develop GME training (residencies, subspecialty residencies, and fellowships) to provide a seat for every PNWU graduate.
 - 2. Emphasize residencies in generalist medicine so that the proportion of generalist residencies selected by graduates exceeds the national average.
 - 3. Promote rural residencies so that the proportion of residencies selected by graduates exceeds the proportion rural residencies available.
- E. Student Achievement Goal: Academically prepare students for graduate medical education (GME). In order to achieve this goal, PNWU-COM has set the following program objectives:
 - 1. The PNWU mean score for first-time takers on each COMLEX exam is at or above the national mean.
 - 2. The PNWU first-time pass rate on every level of the COMLEX USA exam is at or above the national pass rate.
 - 3. Train students in entrustable professional activities (EPA) and core competencies.

Professionalism

Professionalism is the basis of medicine's contract with society. It demands placing the interests of patients above those of the health care professional, setting and maintaining standards of competence and integrity, and providing expert advice to society on matters of health. The principles and responsibilities of medical professionalism must be clearly understood by both the profession and society. A set of professional responsibilities includes, but is not limited to a commitment to:

- Clinical competence
- Honesty with patients

- Patient confidentiality
- Maintaining appropriate relations with patients
- Improving quality of and access to care
- A just distribution of finite resources
- Scientific knowledge
- Maintaining trust by managing conflicts of interest
- Hygiene, cleanliness, avoidance of wearing fragrance, appropriate attire

Members of a health care profession should be respectful of one another and participate in the processes of self-regulation, including remediation and discipline of members who have failed to meet professional standards. The profession should also define and organize the educational and standard-setting process for current and future members. Health care professionals have both individual and collective obligations to participate in these processes. These obligations include engaging in internal assessment and accepting external scrutiny of all aspects of professional performance (i.e. professional promise).

Students who do not adhere to this policy may face corrective action.



ADMISSIONS

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PNWU seeks to admit students compatible with the University mission and who have the prerequisite knowledge, skills, and abilities to assure a reasonable probability of success. Enrollment Services acts as the primary agent for applicants and has an admissions process that responds to applicant and University needs.

Application Requirements

The minimum age to matriculate at PNWU-COM is 18 years of age and the applicant must be a US Citizen or permanent resident. Application to PNWU-COM is made by submitting a primary application through the American Association of Colleges of Osteopathic Medicine Application System (AACOMAS). Applicants must designate PNWU-COM on the primary application in order for PNWU to receive the application.

An invitation to complete a supplemental application may be sent to the applicant after the primary application has been reviewed.

The PNWU-COM Admissions Committee will review files only after all of the following materials have been received.

- 1. A completed AACOMAS application
- 2. An official <u>Medical College Admissions Test (MCAT)</u> score. Applicants must take the exam and have the official scores sent to ACCOMAS. MCAT test scores are valid for 3 years from the original test date. The test must be taken no later than January 31 of the year medical school starts.
- 3. A completed PNWU supplemental application, including a nonrefundable supplemental application fee of \$85 made payable to PNWU
- 4. A letter of recommendation from each of the following sources, which must be written within two years prior to making application:
 - a. A physician (preferably a D.O. who is a member of the AOA);
 - b. A science faculty member who is familiar with the applicant's undergraduate academic work; and
 - c. A pre-medical source (a pre-medical advisor or committee).

Non-traditional students who have taken time off between undergraduate and post graduate studies may use professors in their graduate program to meet the science faculty recommendation requirement. Similarly, individuals serving in the military may use a supervisor, such as, a commanding officer to meet the pre-medical source requirement.

The PNWU-COM Admissions Committee will consider applications from all qualified individuals; however, in order to meet the mission of the College of Osteopathic Medicine, preference is given to applicants from Alaska, Idaho, Montana, Oregon, Washington, and rural and/or medically underserved areas of the country. Applicants to the College are considered on their intellectual ability, scholastic achievement, commitment, and suitability to succeed in the study of osteopathic medicine. The College follows the non-discrimination policy and the requirements of federal and state law including Title IX. The College does not discriminate against applicants based on socio-economic background.

Review and Notification

The major criteria for rating applicants are academic excellence, commitment to osteopathic primary care, commitment to practice medicine in an underserved area, and personal characteristics. Academic excellence is measured by assessing results of the MCAT and academic performance. The degree of difficulty of the program that the applicant studied is also considered. No interview is involved in this assessment

After the initial assessment, selected applicants are invited to visit the campus for a formal personal interview. After the interview, the Admissions Committee reviews the applicant files and make recommendations to the dean. Applicants are notified as soon as final admission decisions are made.

An acceptance fee is required from successful applicants.

- Those accepted on or after October 15 will have until December 14 (or 30 days after receiving an offer of admission, whichever date is later);
- those accepted on or after December 15 will have 30 days;
- those accepted on or after January 15 will have 14 days; and
- those accepted on or after June 15 may be asked for an immediate deposit.

PNWU is a private institution and encourages applications from qualified students who are interested in pursuing a career in osteopathic medicine. Qualified applicants from Alaska, Idaho, Montana, Oregon, and Washington, and rural and/or medically underserved areas of the country will be given preference for admission to PNWU.

Note: Intentional misrepresentation or omission of information relative to scholastic records or test records will subject the student to dismissal. The University reserves the right to deny admission to any applicant for any reason it deems sufficient.

Recommending a Student for Admission

Persons wishing to recommend a student for admission should write to the Admission Committee on behalf of the applicant. This letter will be given full consideration when the applicant's file is evaluated.

Admission Requirements

Acceptance is conditional until all required documentation is received and completed to PNWU's satisfaction. Final, official transcripts from all previously attended institutions must be on file prior to matriculation.

PNWU-COM does not usually defer admission, requests submitted to the Admission Committee will be reviewed and a recommendation made to the dean.

The <u>requirements for admission</u> are in this section and PNWU.edu.

- A baccalaureate, masters, or doctoral degree from a regionally accredited college or university.
- Satisfactory completion of the following college courses, including laboratory work, must be passed (grade of C or above is recommended) and taken for credit at a regionally accredited college or university.
 - English Composition and Literature | 6 Semester Hours
 - o General Chemistry | 8 Semester Hours
 - o Organic Chemistry | 8 Semester Hours
 - » (4 hours of which can be Biochemistry)
 - Physics | 8 Semester Hours
 - o Biological Sciences | 12 Semester Hours
- The ability to use a personal or network computer (PC) is an important skill that will assist students with PNWU course work. It is strongly recommended that each entering student have a good working knowledge of common PC use and applications. PNWU utilizes the latest in Microsoft Office® and Windows® applications. See the minimum laptop requirements on PNWU.edu
- A cleared criminal background check
- A cleared drug screening, if randomly selected
- Documentation of required immunizations
- Documentation of health care coverage/insurance
- Final official transcripts are required from each college or university ever attended. The transcript must come directly from the college or university. Foreign transcripts must be evaluated for US equivalence by an approved evaluation service.
- Financial aid counseling sessions and/or modules
- Matriculation forms and surveys; such as ID badge forms, parking permit forms, etc.
- Complete annual on-line training modules; such as HIPAA, hazardous materials, blood borne pathogens, and research training
- Complete pre-orientation modules
- Required to attend a new student orientation and white coat ceremony.

Minimal Technical Standards for Admission

It is the policy of PNWU that no student shall be excluded from participating in, be denied the benefits of, or be subjected to discrimination in any program or activity sponsored by the University because of marital status, age, sex, gender, sexual orientation, race, ethnicity, color, creed, religion, disabilities, national origin, or other characteristic protected by law.

With or without a reasonable accommodation, applicants and students must meet certain minimal technical standards that identify reasonable expectations of osteopathic medical students and physicians in performing common functions. PNWU does not discriminate against, and will provide reasonable accommodations to disabled applicants or students who are otherwise qualified. Requests for accommodations need to be in writing to Student Affairs as early as possible.

A candidate for the DO degree must have multiple abilities and skills, including observation, communication, motor, conceptual, integrative and quantitative, behavioral and social. A candidate must be able to perform in a reasonably independent manner. PNWU will attempt to develop creative ways of opening medical school admissions and education to qualified individuals with disabilities.

The minimum technical standards for admission are outlined in the accompanying chart. Candidates with disabilities must meet the standards with, or without, a reasonable accommodation. The following considerations are applicable to candidates with impairments that interfere with their ability to meet the standards.

Observation

The candidate must be able to acquire a level of required information as represented through demonstrations and experiences in the basic sciences. This includes but is not limited to information conveyed through physiologic and pharmacological demonstrations in animals, as well as microbiologic cultures and microscopic images of microorganisms and tissues in normal and pathologic states. A candidate must be able to observe a patient accurately, at a distance and close at hand; acquire information from written documents; and see information presented in images on paper, film, slide, or video. A candidate must be able to interpret x-ray and other graphic images and digital or analog representations of physiologic phenomenon (such as ECGs). Observing and acquiring information from these sources usually requires functional visual, auditory, and somatic sensation, enhanced by other sensory modalities.

When a candidate's ability to observe or acquire information through these sensory modalities is compromised, the candidate must demonstrate proficiency using reasonable alternative means/abilities to acquire and use the essential information.

Communication

The candidate must be able to communicate effectively, efficiently, and sensitively with patients and their families and with all members of the health care team.

Motor

Candidates and students should have sufficient motor functions, with or without reasonable accommodation, to execute movements that are required to provide general care and emergency treatment to patients. Candidates should be able to perform palpation, percussion, auscultation and other diagnostic maneuvers; basic laboratory tests; and diagnostic procedures. Examples: cardiopulmonary resuscitation, administering intravenous medication, applying pressure to stop bleeding, opening of obstructed airways, suturing of simple wounds, and performing simple obstetrical maneuvers. Such actions require coordination of both gross and fine muscular movements; equilibrium; and functional use of the senses of touch and vision, with or without assistive aids.

Sensory

Osteopathic treatment requires exceptional sensory skills or techniques. Individuals who are otherwise qualified but who have significant tactile sensory or proprioceptive disabilities (such as, for example, individuals with significant previous burns, sensory motor deficits, cicatrix formation, and many malformations of the upper extremities) will be required to demonstrate the ability to achieve necessary medical results, with or without assistive aids.

Strength and Mobility

Osteopathic treatment often requires upright posture with sufficient lower extremity and body strength and some degree of mobility is required for emergency codes and CPR. Individuals with significant limitations in these areas will be required to demonstrate the ability to achieve necessary medical

results, with or without assistive aids.

Intellectual, Conceptual, Integrative, and Quantitative Abilities

The candidate must be able to measure, calculate, reason, analyze, and synthesize in a timely fashion. In addition, the candidate should be able to comprehend three-dimensional (3D) relationships and understand the spatial relationships of structure.

Behavioral and Social Attributes

Candidates must possess sufficient emotional health required to fully use their intellectual abilities, to responsibly attend to the diagnosis and care of a patient, and to develop mature, sensitive, and effective relationships with patients.

Candidates and students must be able to tolerate physically taxing workloads and to function effectively under stress. They must be able to adapt to changing environments, to display flexibility, and to learn to function in the face of uncertainties inherent in the clinical problems of patients.

Compassion, integrity, concern for others, interpersonal skills, interest, and motivation are all personal qualities that will be assessed during the admissions and educational processes.

Examples

Observation	Sufficient uncorrected or	Locate and identify dissected nerves
Observation	l l	2. Evaluate posture, locomotion and movement in a
	color perception to:	clinical setting
	· · ·	3. Identify landmarks on tympanic membranes
	macroscopically as small	4. Identify materials correctly to be used in
	as 0.2 mm;	laboratories
	B. Observe motion and to observe and evaluate the	5. Locate, identify and describe foreign bodies, blood vessels, sutures and skin lesions
	human gait at 20 feet; C. See an object from a	6. Observe audiovisual materials on projection or overhead screens during lectures
	background of other	7. Read printed materials on handouts and tests
		8. Locate sections on a slide
	D. See the difference in objects	9. Identify micro-photographic images projected on a screen
	1 -	10. View a class room visual aid, including motion pictures, at 20 feet
		11. Observe and evaluate the human gait at 20 feet
		12. Discriminate body height and depth differences of 2mm and identify anatomic landmarks for
		symmetry and postural differences visually
		13. Differentiate small bacterial colonies from artifacts on agar plates
		14. Appreciate fine structures in pathology and other images presented in class and in the textbook.
	Sufficient uncorrected or	Recognize stained bacteria microscopically
	, , , , , , , , , , , , , , , , , , ,	2. Observe, manipulate and accurately identify
	color perception to resolve	microbiologic cultures
	objects microscopically	3. Identify normal and pathologic cells and tissues

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Communication	Possess fluent formal and	1.	
	colloquial oral English skills		professor or attending physician
		2.	Understand oral lectures, ask questions and
			understand answers
		3.	Explain procedures and discuss results with
			professors and fellow students
		4.	Explain medical conditions to patients, attending
			physicians and fellow students
		5.	Explain procedures and discuss test results on
			prescribed treatments with patients, attending
			physicians and fellow students
		6	Direct and coordinate activities of nurses, students,
		0.	assistants, specialists, therapists and other
			members of the health care team as approved and
			directed by the attending physician
		7	Understand laboratory safety and emergency
		١.	situation instructions
		_	
	Capable of legible handwriting	1.	
	in English	2.	Participate in small group discussions with
			laboratory partners
	Capable of reading English		Prepare classroom reports
	effectively	4.	Prepare accurate and legible documentation of
			patient history, physical exam, assessment and
	Able to perceive and convey		treatment plan
	sentiments nonverbally and	5.	Recognize, understand and respond appropriately
	effectively with patients and all		to spoken or nonverbal communication of distress
	members health care team		or discomfort
		6.	Understand typed and hand-written lecture and
		•	laboratory handouts and electronic communications
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Motor	Possess equilibrium and coordination of gross and fine muscular movements	3.4.5.	Possess sufficient strength and mobility to provide general care and emergency treatment to patients including CPR, administration of intravenous medication, the application of pressure to stop bleeding, the opening of obstructed airways, the suturing of simple wounds and the performance of simple obstetrical maneuvers Coordinate fine movement of fingertips, palms, and wrists as in elevation of the cranium Manipulate writing instruments and write legibly, completing SOAP* notes, documenting in patient charts and writing prescriptions * Subjective, Objective, Assessment, Plan Stand with limited opportunity for gross movement for a minimum of 2 hours at a time, as necessary for particular medical procedures, such as performance of obstetrical delivery, assistance of surgical delivery, and assistance of surgical procedure Use a computer keyboard and mouse
	Possess sufficient visual- motor coordination permitting delicate manipulations of specimens, instruments, and equipment	 2. 3. 5. 6. 	Participate in laboratory exercises using microscopes, microbiological cultures and dissection instruments Dissect arteries, vessels and nerves of the brachial plexus Manipulate laboratory materials including reagents and pipettes Suture simple wounds Obtain culture specimens including cerebrospinal fluid as part of a lumbar puncture procedure Perform joint injections
Sensory	Possess accurate sense of touch and temperature discrimination	4.5.6.	Palpate the musculoskeletal system Perform history and physical examination procedures specific to an individual Perform a bimanual pelvic exam and palpate for ovarian disease Participate in laboratory exercises accurately using and adjusting microscopes, glass slides, inoculating loops, pipettes, microbiological cultures and reagents Palpate distances in depth, elevation and width of body structures within 2 mm of difference Perform intravenous insertion and venipuncture on both basic and difficult models and patients Palpate texture differences, hydration states, fine muscle tension differences, changes in moisture and temperature

	Functional use of hearing Functional use of vision	 The ability to use a stethoscope, recognizing the sound of patient conditions accurately such as a Grade 5 systolic murmur Understand laboratory experience and classroom demonstration with minimal instruction Understand a speaker in a darkened room Recognize structures and patient conditions accurately Interpret laboratory and classroom demonstrations accurately with minimal instruction
Strength and Mobility	Upright posture, endurance, strength, flexibility, stability and mobility adequate to safely guide, enhance and resist movement of another person, and to perform physical exams Sufficient equilibrium, upright posture, mobility and endurance to attend and participate in lectures, examinations and laboratory exercises and patient contact for extended periods of time	Maintain equilibrium and control movement of self and of a patient in and changing between sitting, standing, prone, lateral recumbent and supine positions while performing neuromuscular diagnosis and osteopathic manipulative treatment 1. Tolerate the sitting position long enough to hear a lecture, typically 50 minutes 2. Tolerate the sitting position long enough to take a written examination, 45 minutes to 3 hours 3. Visit patients in clinic and hospital settings including Emergency Room rounds 4. Assist in transfer and osteopathic manipulation of persons weighing 90 kg or more 5. Participate in laboratory exercises lasting as long as 3 hours, requiring frequent movement around the room 6. Attend mandatory classroom events for as long as 2 hours moving, sitting or standing within the room as necessary to participate in problem-based learning groups
Intellectual, Conceptual, Integrative and Quantitative	Apply knowledge, skills and values learned from course work and life experiences to new situations Visualize and recall three dimensional relationships	 Perform a history and physical, then develop an appropriate differential diagnosis, assessment and treatment plan Assess and evaluate cases presented in class and on examinations Interpret x-ray and diagnostic imaging studies

	To receive, decode, interpret, recall, reproduce and apply information in the cognitive, psychomotor, and affective domains of learning to perceive relationships, solve problems, evaluate work, gauge progress and demonstrate understanding of course material	2.	Perform osteopathic or medical evaluation of patient posture and movement including analysis of physiological, biomechanical, behavioral, and environmental factors in a timely manner, consistent with acceptable clinical norms Comprehend oral and written presentations of material and communicate that understanding upon examination in a timely manner, occasionally demonstrating a grasp of the information within the same class period as presented
	Process multifunctional data and sensory input requiring cognitive recall and motor skills rapidly and initiate critical actions	2.	Successfully complete objective (true/false, multiple choice, matching, case study) biomedical science exams designed to assess whether students can apply knowledge learned to new situations Successfully perform problem solving exercises in the laboratory including the identification of unknowns Interact in group discussions and present and explain answers to worksheets Evaluation of emergency situations including apnea, code management, bleeding and severe trauma, requiring rapid responses such as intubation and medication Diagnose pelvic dysfunction
Behavioral, Professional and Social	Function efficiently in the face of uncertainties inherent in the clinical problems of patients Demonstrate compassion, integrity and concern for others	 1. 2. 	Recognize emergency situations and take appropriate actions Study with, supervise and treat people with diverse values, ethnic backgrounds, social mores, economic stability and personal preferences Complete exams and other time sensitive
	Manage priorities successfully, including competing demands and multiple tasks under time constraints	 3. 4. 	assessments and requirements, including patient care, as scheduled Attend mandatory classes, laboratory sessions and educational programs Maintain passing grades and performance evaluations in extracurricular activities and obligations with academic endeavors Promptly complete all class work and lab responsibilities Promptly complete all responsibilities attendant to the diagnosis and care of patients

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Possess the emotional health required for full use of intellectual abilities Exhibit appropriate behavior, judgment and ethical standards Develop mature and cooperative relationships with all members of the health care team including patients, peers, and faculty and staff members Demonstrate the compassion, integrity, and ability to work effectively with patients and colleagues	 3. 4. 5. 7. 	Active participation with and contribution to didactic and medical learning situations including laboratory team and problem based learning exercises Interact through appropriate electronic, telephone, written and oral communication with faculty, classmates and all members of the health care team Project an image of professionalism, including appearance, dress and confidence Work independently on all projects and examinations assessed individually Maintain alertness and concentration during preceptor and patient encounters and during each class room period (about 50 minutes) Interact professionally, ethically and confidentially with patients Observe instructor, peer, patient and health care team behavioral and environmental factors Control temper and never perpetrate harassment
Adapt successfully to changing environments	1.	Maintain attention, actively participate and meaningfully contribute to dialog and practical applications in the classroom, small group exercises, laboratory activities and in patient care Plan appropriately for various possible patient care outcomes
Possess constructive, positive and mature interpersonal skills, interest and motivation	1. 2.	Accept criticism and respond with appropriate modification of behavior Timely and adequately respond to personal or academic struggles; seek assistance, practice planning and avoid procrastination
Touch and be touched, requiring exposure of nonsexual body parts for examination and application of treatment modalities, regardless of age, gender, nationality, religion, race or body size		Permit for self and demonstrate on others abdominal, cardiac and neurologic examination Permit for self and demonstrate on others osteopathic manipulation including discernment of tissue texture changes, motion testing of spinal segments and evaluation of extremities and head region
integrity, and ability to work effectively with patients and colleagues Adapt successfully to changing environments Possess constructive, positive and mature interpersonal skills, interest and motivation Touch and be touched, requiring exposure of nonsexual body parts for examination and application of treatment modalities, regardless of age, gender, nationality, religion,	7. 8. 1. 2. 2.	Interact professionally, ethically and confidentially with patients Observe instructor, peer, patient and health care team behavioral and environmental factors Control temper and never perpetrate harassment Maintain attention, actively participate and meaningfully contribute to dialog and practica applications in the classroom, small group exercises laboratory activities and in patient care Plan appropriately for various possible patient care outcomes Accept criticism and respond with appropriate modification of behavior Timely and adequately respond to personal or academic struggles; seek assistance, practice planning and avoid procrastination Permit for self and demonstrate on others abdominal cardiac and neurologic examination Permit for self and demonstrate on others osteopathic manipulation including discernment of tissue texture changes, motion testing of spinal segments and evaluation of extremities and head



Academic Skill Development

Academic skill development is available for any student who would like help improving study strategies or test-taking skills. Assistance is available in several areas including; identification of learning preferences, becoming active learners, note-taking, memorization techniques, using resource materials, studying for tests, reducing test anxiety, effectively using a tutor, and studying in small groups. The Learning Skills Specialist will oversee delivery of many of these services, which may be provided by the Learning Skills Specialist, faculty, or students. Throughout the year, a variety of seminars/workshops may be offered to students.

Tutoring and Recitation

PNWU provides tutorial services for students who desire additional educational assistance. Priority for these services is given to students who have been identified as requiring such educational assistance. PNWU encourages students to establish informal study groups and/or find study partners. The Learning Skills Specialist coordinates a formal tutoring and recitation program. With assistance and recommendations from the faculty, peer tutors and recitation leaders are identified and made available to students who need help. The tutoring program provides the student with the opportunity to be assigned a near-peer or peer tutor at no cost. Students may contact the Learning Skills Specialist to apply for tutoring services.

Academic Advisement

Each student is assigned a faculty advisor through the Learning Skills Specialist. The faculty advisor will be a faculty member whose responsibilities are to monitor the progress of student advisees, to help advisees locate academic resources, and to be available for any personal or academic support needed by the advisees. The student is responsible for contacting their faculty advisor on an agreed upon timeline. Students are also encouraged to identify a clinical faculty mentor to provide input for residency planning.

Regional Site Placement

PNWU third- and fourth-year curriculum delivery occurs through the regional sites located in a five state target area of: Alaska, Idaho, Montana, Oregon, and Washington. Students will be assigned to a regional site through the site selection process. Regional site placement procedures are designed to support the mission of PNWU-COM, thus meeting the health care workforce needs of the rural and medically underserved in the Northwest.

In the admission process, preference is given to students from within the Northwest region, rural, or medically underserved areas. It is the goal of regional site placement to return students to areas within the Northwest region where they have significant ties as much as possible. In this process, students from outside the Northwest region may be placed in regional sites that strengthen PNWU-COM's program rather than areas of their preference.

Conference Attendance and Advocacy

Conference Attendance

Conference attendance should promote academic development and should not interfere with academic progress. Students on academic alert, warning or probation or who have professional conduct violations may be denied the privilege to attend. First year students who are approved to attend conferences will be eligible in the spring semester.

Advocacy

Washington state DO Day on the Hill

PNWU and the Student Osteopathic Medical Association (SOMA) in partnership with Washington Osteopathic Medical Association (WOMA) supports attendance at the annual DO Day in Olympia, WA.

AACOM DO Day on the Hill

PNWU and the Student Osteopathic Medical Association (SOMA) supports attendance at the AACOM DO Day on the Hill in Washington, DC each spring. AACOM works closely with SOMA, and the Edu to Med students at PNWU to provide training on current health policy issues prior to the event.

PNWU promotes all students learning to be advocates for our profession. Becoming aware of Health Policy Issues, concerns and functions is important to develop skills for advocating.

Grades

Grading System:

PNWU uses a Pass (P)/Fail (F) grading system; no quality points per hour are awarded on the student transcript. Student may appeal a grade using the grade appeal process detailed in the Student Handbook.

P= Pass

P*= Pass with Honors

F= Fail

I= Incomplete (changes to a fail one year from the date assigned if not completed)

IP= In Progress

W= Withdrawn

WP= Withdrawn, Passing

WF= Withdrawn, Fail

AU= Audit

For Examinations:

Determination of a passing score will be based on the mean minus one standard deviation from the mean, with a minimum score of 65 percent. If the mean minus one standard deviation from the mean is greater than 70 percent, 70 percent will be set as the passing score. If the mean minus one standard deviation from the mean is lower than 65 percent, 65 percent will be set as the passing score.

For Courses:

Grades will be determined based on the contribution of the scores for all examinations and other assessments divided by the total of all points associated with those assessments. Consideration will

be given for contributions to the final grade by inclusion of quizzes and other assignments as per the course syllabus.

Student's percentage grades will be used for purposes of ranking, not reported on the transcript. Ranking is determined at the end of the second academic year. Incomplete course grades may be made up under the supervision of the associate dean for preclinical education; however, no grade above 70 percent will be granted. Under extenuating circumstances beyond the student's control, incomplete grades may be made up with 70 percent or better. Such exceptions would be considered upon the recommendation of the Student Progress Committee.

Students must remediate all failures/incompletes prior to beginning the next successive academic year. The student is not in good academic standing until the failures/incompletes are successfully remediated in a timely manner determined by the Student Progress Committee. See the section on Remediation for details about the remediation process and how remediated grades will be noted on the student's transcript.

The course director will submit a final course grade report within five business days after the final course assessment for preclinical courses. The course grade report will include the pass or fail. Students may access an unofficial transcript and grade report on-line at any time through PowerCAMPUS Self-Service.

For clinical courses, failure to complete logs, evaluations, and rotation exams within 60 days of the last day of the rotation will result in an academic standing of alert, and a grade of incomplete will be given. At the end of the academic year, rotations that remain incomplete will be given a grade of fail (F). Rotations ending within 60 days of the end of the academic year will have the full 60 days to complete logs, evaluations, and rotation exams. Students will be withdrawn from rotations until all grades are remediated and documentation is current.

Grading policies for each individual course will be provided within the course syllabus, including course description, learning outcomes and objectives.

The results of examinations and reports concerning attendance, conduct, and potential professional attributes are submitted to the Student Progress Committee by Student Affairs. The Committee determines the student's eligibility for promotion and graduation.

Honors

Honors will be designated for the top 15 percent, as of July 1 after the third year, based on core rotation exams and clinical performance.

Academic Progress

Satisfactory academic progress, measured at the end of each academic year, occurs when the student is passing all required courses, completes 67 percent of their cumulative attempted credits, is on track to complete their degree within 150 percent of their four-year program, and has passed required board exams. A student who is not making academic progress is not eligible for federal Title IV student

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financial aid.

A student failing to meet one or more of the standards of progress during the academic year will be placed on Warning. While on Warning, the student may receive financial aid. At the end of spring term, the student must be in good standing or may appeal to be placed on a probation status.

Course withdrawals and repeats are allowed as part of a probation status and count as attempted credits. All periods of the student's enrollment count when assessing progress. Failure of a single course by more than ten percentage points below the course final passing percent, or failure of two courses in a single academic year will result in an automatic dismissal without the opportunity for remediation. No student may advance a year at PNWU with a failing or incomplete grade in any required course. No student may advance to clinical rotations until passing COMLEX-USA Level 1.

Students may access their grade report from the PowerCAMPUS Self-Service system at the close of each academic term. Their Academic Standing status will be reported on the grade report. The student will receive a letter of Academic Standing if placed on Alert, Warning, or Probation status. Probation and dismissal letters will become part of the permanent academic record.

1. Alert:

All Students: occurs automatically when a student's mid-term grade is failing or mid-course grade is failing for a course that is eight weeks or longer.

Third- and Fourth-Year Students: occurs upon failure of a Comprehensive Osteopathic Medical Achievement Test (COMAT) exam, or failure to complete assignments from COM. Also occurs upon failure to complete logs, evaluations, and rotation exams within 60 days of the last day of the rotation.

2. Warning:

occurs automatically at the end of fall term when a student does not meet academic progress, or fails a course that ends before the end of term, or fails the first attempt of any level of board exam. The Student Progress Committee may also assign warning to a student who has not maintained professional and/or ethical conduct.

3. Probation:

the Student Progress Committee may assign to a student who has successfully appealed to be reinstated after not achieving academic progress at the end of the academic year, or has not maintained professional and/or ethical conduct.

A student on Warning or Probation status may not participate in PNWU-sponsored extracurricular events or organizations, is not eligible for PNWU sanctioned travel, is not permitted to be listed on any active research study, and may not run for or hold the position of executive, class, or club officer. At the discretion of the Student Progress Committee, warning or probation status may include additional restrictions from activities the Committee deems detrimental to academic performance.

The imposed academic standing will be in effect until the student is in good academic standing. Good academic standing is regained by successful remediation of the failed standard of progress.

Academic Alert and Warning shall have no effect on a student's financial aid and will not appear on the

transcript. Probation status may affect a student's eligibility for financial aid and will not appear on the transcript. Please refer to the Financial Aid policies for more information.

Appeal

The student will have the opportunity to present to the Student Progress Committee any mitigating circumstances which directly contributed to the poor academic performance. The appeal must explain why the student failed to make satisfactory progress and what has changed in the situation that will allow them to make satisfactory progress during the next term. The student must appear in person or via video conferencing to make a personal statement and answer any questions by the committee.

If the Student Progress Committee determines the student should be able to meet the academic progress standards by the end of the subsequent term the student will be placed on probation. If the determination is that the student will require more than one term to meet academic progress standards the student will be placed on probation and an adjusted academic plan developed. The student will be reviewed at the end of each term to determine if meeting academic progress standards.

Students who wish to appeal a dismissal decision based on extenuating circumstances must submit a detailed letter to the dean within five business days after receiving the dismissal notice. The decision of the dean is final.

Remediation

Remediation of a single failed non-clinical course will occur following the spring term according to the University calendar. Remediation of a single failed clinical course will be to repeat the clinical course. Failure of a course remediation will result in an automatic dismissal. Remediation of a failed board exam will occur under the direction of the board preparation coordinator and a repeat of the board exam. Failure of a board exam remediation may result in dismissal.

Student Misconduct

If an individual has violated PNWU policy regarding professional and/or ethical conduct, a complaint should be filed with the chairperson of the Student Progress Committee. The complaint should be filed within 30 calendar days of the incident. The Committee will review the complaint and may schedule a meeting with the student and complainant(s).

If a meeting is warranted, a Notice to Appear before the Student Progress Committee will be delivered or sent to the student. The failure of addressee to accept mail or maintain a deliverable address with Student Affairs may result in immediate disciplinary action.

Student Progress Committee meetings with students are private and confidential including, but not limited to, the names of participants, proceedings, discussion, minutes, and findings. The following are prohibited in all Student Progress Committee meetings unless otherwise authorized in writing by the dean and Student Progress Committee chairperson: 1) electronic recording of the meeting, except for official minutes; 2) legal counsel; and 3) uninvited individuals.

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In the meeting(s) the student will be given reasonable opportunity to address the allegation(s) against him/her. The Committee will review all submitted documents and may interview all persons reported as having knowledge of the incident. The Committee may have more than one meeting with the student in order to address the concerns of the Committee and give the student an opportunity to fully respond to the questions and allegations.

The Student Progress Committee will make a recommendation of no action, warning, probation, or dismissal to the appropriate associate dean who will notify the student of the final decision. The student may appeal the decision to the dean if the student does not believe due process was properly followed, or if new and contributing information is relevant that has not been presented. The Dean's Office must be notified in writing of the intent to appeal within five business days of receipt of notice of disciplinary action.

PNWU-COM Educational Objectives

The PNWU-COM Educational Objectives within the osteopathic medical education curriculum are guided by the <u>National Board of Osteopathic Medical Examiners</u> (NBOME, 2011) Fundamental Osteopathic Medical Competency Domains. The required courses of the osteopathic medical education program explicitly address the following domains:

1. Osteopathic Principles & Practice and Osteopathic Manipulative Treatment

Osteopathic principles and practice: a concept of health care supported by expanding scientific knowledge that embraces the concept of the unity of the living organism's structure (anatomy) and function (physiology).

Osteopathic philosophy emphasizes the following principles: (1) The human being is a dynamic unit of function; (2) The body possesses self-regulatory mechanisms that are self-healing in nature; (3) Structure and function are interrelated at all levels; and (4) Rational treatment is based on these principles (Glossary of Osteopathic Terminology, 2009).

Osteopathic manipulative treatment (OMT): the therapeutic application of manually guided forces by an osteopathic physician to improve physiologic function and/or support homeostasis that has been altered by somatic dysfunction. OMT employs a variety of techniques (Glossary of Osteopathic Terminology, 2009).

Somatic dysfunction: impaired or altered function of related components of the somatic (body framework) system: skeletal, arthrodial and myofascial structures, and their related vascular, lymphatic, and neural elements. Somatic dysfunction is treatable using osteopathic manipulative treatment (Glossary of Osteopathic Terminology, 2009).

2. Patient Care

Patient care is the development, maintenance, and conclusion of a therapeutic physician-patient relationship in a manner that has the best interest of the patient in mind. This involves determining and monitoring the nature of a patient's concern or complaint; appropriately incorporating osteopathic principles and practice and osteopathic manipulative treatment (OMT); and implementing effective, evidence-based, and mutually agreed upon diagnostic and patient care plans, including appropriate patient education and follow-up. In the service of the highest quality of patient care, promotion of

wellness, and prevention of disease, the osteopathic physician must be able to appropriately lead a health care team and foster effective communication between health care professionals.

3. Application of Knowledge for Medical Practice

The application of knowledge for medical practice is the understanding and application of osteopathic, biomedical, clinical, epidemiologic, biomechanical, social, and behavioral sciences in the context of patient-centered care. This also includes critical-thinking skills required for safe and effective medical practice, including the cognitive skills of understanding, comprehension, application, analysis, synthesis, and evaluation.

4. Practice-Based Learning and Improvement in Medicine

Practice-based learning and improvement is the continuous evaluation of osteopathic clinical practice, utilizing evidence-based medicine approaches to develop best practices that will result in optimal patient care outcomes.

5. Interpersonal and Communication Skills in the Practice of Medicine

Interpersonal and communication skills for medical practice consist of incorporating knowledge, behaviors, and attitudes required: (1) to determine the nature of a patient's concern or complaint; (2) to develop, maintain, and conclude the therapeutic relationship; and (3) to facilitate patient education and implementation of negotiated diagnostic and care plans. These skills include active listening involving verbal and nonverbal behaviors and effective documentation and synthesis of clinical findings and impressions in written and electronic format. This set of knowledge, skills, and attitudes extends to the medical interview and to communication with the patient, family members, or caregivers, physician colleagues, and other members of the interprofessional collaborative team. Essential for osteopathic medical practice is that the approach be holistic, comprehensive, and patient-centered, contributing to an understanding of the patient's perspective and facilitating trust and a therapeutic physician-patient relationship.

6. Professionalism in the Practice of Medicine

Medical professionalism is a duty to consistently demonstrate behaviors that uphold the highest moral and ethical standards in the conduct of medical education, training, research, and practice. This includes a commitment to continuous learning and the exhibition of personal and social accountability.

7. Systems-Based Practice in Medicine

Systems-based practice is an approach incorporating awareness of and responsiveness to the larger context and systems of health care. In addition, it is the ability to effectively identify and integrate system resources to provide medical care that is of optimal value to individuals and to society at large.

PNWU-COM Educational Outcomes

Each of the PNWU-COM educational objectives includes a set of discrete educational outcomes defined in course syllabi and measured through a variety of comprehensive assessment strategies which include: objective examinations in courses, written assignments, student portfolios, clinical skills demonstrations (standardized patients, Objective Structured Clinical Examination [OSCE], simulations), national standardized tests (Comprehensive Osteopathic Medical Self-Assessment Examination

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[COMSAE], Comprehensive Osteopathic Medical Achievement Tests [COMAT], Comprehensive Osteopathic Medical Licensing Examination [COMLEX]), small-group case studies, preceptor evaluations, and individual case presentations. The set of discrete PNWU-COM educational outcomes within course syllabi are guided by overarching NBOME domain outcomes and listed below.

Upon graduation from PNWU-COM, students will be able to:

1. Osteopathic Principles & Practice (OPP) and Osteopathic Manipulative Treatment (OMT)

Demonstrate knowledge of osteopathic principles and practice, and demonstrate and apply knowledge of somatic dysfunction diagnosis and Osteopathic Manipulative Treatment in the clinical setting.

2. Patient Care

Provide patient-centered care that is culturally responsive, compassionate, and appropriate for the effective treatment of illness and promotion of health.

3. Application of Knowledge for Medical Practice

Demonstrate an understanding and application of the evolving osteopathic, biomedical, clinical, epidemiological, biomechanical, and cognitive (e.g. epidemiological and social-behavioral) sciences to optimize patient care.

4. Practice-Based Learning and Improvement in Medicine

Demonstrate the ability to continuously evaluate patient care practices, scientific evidence, and personal beliefs and biases as they relate to improving the care of patients and optimizing patient outcomes.

5. Interpersonal and Communication Skills in the Practice of Medicine:

Demonstrate the ability to consistently interact respectfully, empathetically, and professionally with patients, families, allied health care providers, staff, and colleagues, to optimize patient outcomes.

6. Professionalism in the Practice of Medicine

Demonstrate a commitment to the highest standards of professional responsibilities and adhere to ethical principles and cultural responsiveness to diverse beliefs and customs.

7. Systems-Based Practice in Medicine

Effectively utilize available health care system resources to provide optimal health care to the individual patient and local and global communities.

Credit Hour Definition

The credit hour formulas used for determining credit hours at PNWU adheres to the definition of a credit hour as defined by the U.S. Department of Education and as provided in the glossary of the <u>American Osteopathic Association Commission on Osteopathic College Accreditation</u> (AOA COCA) COM Accreditation Standards and Procedures Manual.

Preclinical courses the credit hours are determined by the following methods:

Each contact hour of lecture, presentation, or hour designated to complete an on-line presentation has

an expected out of classroom study time of two hours. Therefore one credit hour equals 15 contact hours.

Teaching Laboratory contact hours differ in credit as they do not require the number of hours of preparation outside of classroom activity. Credit hours for laboratory are considered a one to one anticipated time in laboratory to time outside of laboratory to prepare. Therefore one credit hour is assigned to each 30 hours of laboratory time.

Anatomy course laboratory sessions, early clinical experiences (ECE), simulation laboratory experiences, clinical laboratory experiences, or OMM Lab receive a one to one anticipated time in laboratory to time outside of laboratory to prepare. Therefore one credit hour is assigned to each 30 hours of such time.

Credit hours for Clinical Rotations are determined as follows:

Four credit hours are awarded for the approximate 160 to 180 contact hours students spend on each four week clinical rotation (or internship, externship, international experience or clinical research experience). The contact hours awarded on a clinical rotation are estimated to have a one to one ratio as preparation for the student is usually spent on the rotation or in completing the required on-line curriculum.

Doctor of Osteopathic Medicine Degree Requirements

The curriculum of medical school differs from that found in other graduate programs in that the curriculum progressively builds. This requires the student to complete certain courses in order or progression to comprehend the foundation on which the clinical curriculum builds. Academic progress requires the student complete each academic year in the progression offered.

Course	Course #	Credits
First-Year Courses		
Gross Anatomy & Basic Neuroanatomy	ANAT 505	4.5
Gross Anatomy & Basic Neuroanatomy	ANAT 506	5.5
Art of Clinical Practice I	FM 501	6.0
Art of Clinical Practice II	FM 502	6.0
Osteopathic Principles & Practice I	OPP 501	3.0
Osteopathic Principles & Practice I	OPP 502	3.0
Fundamentals of Pharmacology	PHARM 599	3.0
Scientific Foundations of Medicine	BIOMED 501	9.0
Musculoskeletal & Integumentary System	CLIN 504	6.0
Cardiovascular System	CLIN 510	7.0
Respiratory System	CLIN 512	6.0
Total First-Year Credits	59.0	
Second-Year Courses		
Art of Clinical Practice III	FM 601	6.0
Art of Clinical Practice IV	FM 602	6.0

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OMS2 Objective Structured Clinical	FM 603	0.25
Examination (OSCE)		
Osteopathic Principles & Practice II	OPP 601	2.5
Osteopathic Principles & Practice II	OPP 602	2.5
Board Exam Preparation	CLIN 604	2.5
Renal System	CLIN 616	6.0
Genitourinary/Reproductive System	CLIN 603	7.5
Behavioral Medicine	CLIN 618	3.0
Hematology/Oncology/Infectious Disease	CLIN 625	6.5
Gastrointestinal System	CLIN 627	6.5
Nervous System	CLIN 628	7.0
Endocrine System	CLIN 629	4.5
Total Second-Year Credits		60.75
Total First- & Second-Year Credits		119.75
Third- & Fourth-Year Courses		
Behavioral Medicine	BEHSC 701	4.0
Clinical Skills III	CLIN 701	0.5
Emergency Medicine	EM 701	4.0
Family Medicine	FM 701	6.0
Internal Medicine	IM 701	6.0
Women's Health	OBGYN 701	6.0
Osteopathic Principles & Practice	OPP 701	4.0
Pediatrics-Neonate	PED 701	6.0
Surgery	SURG 701	6.0
Primary Care Core (select from)	BEHSC 705 EM 703 FM 702 IM 702 OBGYN 702 OPP 703 PED 702 SURG 702 (2 week maximum) SURG 713 (2 week maximum)	6.0
Electives - Internal Medicine		4.0
Electives - Surgery		4.0
Electives - Unrestricted		28.0
Total Third- & Fourth-Year Credits	84.5	
Total Degree Credits	204.25	

Graduation Requirements

A student who has fulfilled all the academic requirements within 150 percent of their four-year program, except where an exception is required by law, will be granted the degree of Doctor of Osteopathic Medicine provided the student:

- Has complied with all the curricular, legal, and financial requirements of the University
- Attends, in person, the commencement ceremony
- Has met requirements for graduation that include passage of COMLEX-USA Level 1, 2CE, and 2PE
- Is at least 21 years of age
- Has demonstrated the ethical, personal, and professional qualities deemed necessary for the successful, continued study and practice of osteopathic medicine
- Can meet the minimum technical standards
- Has demonstrated suitability for the practice of medicine as evidenced by the assumption of responsibility for patient care and integrity in the conduct of clinical activities
- Has obtained approval from the Student Progress Committee, faculty, dean, president, and Board of Trustees of PNWU
- Is free from any outstanding medical debts to the University's affiliated hospitals or clinics
- Has attended and completed required exit sessions as determined by PNWU i.e. loan counseling, etc.

Requirements for Practice

Each recipient of the DO degree must fulfill the requirements of the state licensing board of the state in which the physician chooses to practice. These requirements vary widely and are regulated by the laws of each state. Refer to the Federation of State Medical Boards website for details.



COURSE INFORMATION

Note: Rotations with the same discipline and number may be combined in order to meet the required rotation. The numbers in parenthesis following the course title indicate the course credits.

ADV 501, Professional Development and Certifications I (.5)

This course encompasses activities that lie outside the traditional curriculum, but are required components for first-year DO students to accomplish. The course encompasses personal and professional development by giving students instruction in reflective practice and maintenance of a professional portfolio. Interprofessional and professional integrity activities designed to give students authentic work-related experiences are included in this course as well.

ADV 601, Professional Development and Certifications II (.5)

This course encompasses activities that lie outside the traditional curriculum, but are required components for second-year DO students to accomplish. The course encompasses personal and professional development by giving students instruction in reflective practice and maintenance of a professional portfolio. Interprofessional and professional integrity activities designed to give students authentic work-related experiences are included in this course as well.

ADV 701, Professional Development and Certifications III (.5)

This course encompasses activities that lie outside the traditional curriculum, but are required components for third-year DO students to accomplish. The course encompasses personal and professional development by giving students instruction in reflective practice and maintenance of a professional portfolio. Interprofessional and professional integrity activities designed to give students authentic work-related experiences are included in this course as well.

ADV 801, Professional Development and Certifications IV (.5)

This course encompasses activities that lie outside the traditional curriculum, but are required components for fourth-year DO students to accomplish. The course encompasses personal and professional development by giving students instruction in reflective practice and maintenance of a professional portfolio. Interprofessional and professional integrity activities designed to give students authentic work-related experiences are included in this course as well.

ANAT 505/506, Gross Anatomy & Basic Neuroanatomy (4.5/5.5)

This combined lecture and laboratory course introduces students to the normal macroscopic structure of the human body, including the brain and spinal cord. A regional approach is taken, whereby all structures within a body region are studied together, with an emphasis on functionally and clinically relevant anatomy and neuroanatomy. In laboratory, students collaborate in small groups to complete a thorough cadaveric dissection, including dissection of the brain and spinal cord. Normal radiologic anatomy is integrated into each regional topic.

ANAT 601, Anatomy Research (6 - 8)

The purpose of this course is to provide the student with an introduction to basic biomedical research methods with hands-on participation in a novel research project under the guidance of a research scientist. The student will learn how to: 1) search and evaluate the scientific literature for relevant information, 2) design a small research project, 3) perform various biomedical research techniques, 4) complete the planned studies, 5) prepare a final report on these studies, and 6) give an oral presentation of this research at PNWU. This is 6 - 8-week elective course offered during the summer to students who have a strong academic record after the 1st, 2nd, or 3rd year at PNWU. The number of students

allowed to enroll each summer will vary. An announcement detailing the application process for this course will be sent out to students at least one month prior to the application deadline.

ANAT 799, Anatomy Student Scholars (6 or 18)

The purpose of this course is to provide the student with increased learning opportunities in the medical anatomical sciences of gross anatomy, developmental anatomy, histology, and neuroscience, while at the same time providing the student with opportunities to develop solid teaching skills in these disciplines, and to perform medical research.

BEHSC 701, Behavioral Medicine (2 - 4)

The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This rotation is designed for students to learn and practice skills necessary for working with patients in a mental health setting. Rapport-building skills and mental health patients are emphasized. Students should develop an awareness of the effects of biological, developmental, sociological, ethnic, and economic background on the presenting problems of patients. Students are expected to establish professional working relationships with members of the multidisciplinary mental health treatment team. Students will develop the ability to communicate effectively with other professionals, support an atmosphere of collegiality, and expand both their medical education as well as personal growth.

BEHSC 702, Substance Abuse (2 - 4)

Substance Abuse is a subspecialty elective in the area of behavioral medicine. In today's cultural setting, it is becoming increasingly important for practitioners to possess the clinical knowledge, skills and behavior necessary for the management of patients adversely affected by alcohol and other drugs, and to understand the specific issues related to HIV infection and cross cultural or gender differences.

BEHSC 703, Behavioral Medicine Elective (2 - 4)

A subspecialty elective in the area of behavioral medicine. This course may be repeated with different preceptors to obtain additional clinical exposure.

BEHSC 705, Behavioral Medicine (2 - 6)

A behavioral medicine primary care core rotation. Each student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. The rotation is designed for students to learn and practice skills necessary for working with patients in a mental health setting. Rapport-building skills with mental health patients are emphasized. Students should develop an awareness of the effects of biological, developmental, sociological, ethnic, and economic background on the presenting problems of patients.

BIOMED 501, Scientific Foundations of Medicine (9)

This 12-week, first-year course provides students with the scientific foundation they will use throughout the rest of the curriculum. Students will learn the structure and function of the human body's most basic constituents and the roles these components play in normal body function and pathological processes. Major elements of the course include key concepts in molecular biology, biochemistry, embryology, genetics, histology, immunology, microbiology, neuroscience, nutrition and physiology with a special emphasis on integration, regulation and pathophysiology. The course also introduces students to concepts in pathology, laboratory and bio-molecular methods, and clinical case scenarios. Content is presented via lecture, lab, faculty directed study, and interactive learning sessions.

CLIN 504, Musculoskeletal & Integumentary System (6)

This course is an integrated, multidisciplinary study of the musculoskeletal and integumentary systems in health and disease. Emphasis is on pharmacology, pathology, nutrition, and microbiology as related to the diagnosis and clinical management of musculoskeletal and integumentary disorders.

CLIN 510, Cardiovascular System (7)

The Cardiovascular System course is provided as a requirement of the first-year curriculum at PNWU. The course presents a multidimensional approach to understanding normal cardiovascular function and the prevention, presentation, diagnosis (including EKG interpretation), and treatment of the most common clinical entities in cardiovascular disease.

CLIN 512, Respiratory System (6)

The teaching program of this course has been designed to encompass the overall goals of the institution in assisting the students to acquire competency in clinical problems related to the respiratory system. This course is part of the year-one curriculum.

CLIN 513, Directed Study (.5 - 6)

The Directed Study course is administered by the appropriate Associate Dean on a case by case basis.

CLIN 603, Genitourinary/Reproductive System (7.5)

The Genitourinary/Reproductive System course is comprised of formal didactic lectures in a lecture hall setting, interactive learning sessions, and clinical skills laboratory. The interactive sessions will require preparation of the assigned material prior to class to fully participate in the session.

CLIN 604, Board Exam Preparation (2.5)

This course will introduce students to the basic processes involved with registering and preparing for COMLEX-USA Level 1. Activities include live question-and-answer information sessions, web-based support and direction, practice tests, instructional sessions on board review calendar building and study strategies, and completion of a COMSAE. Lists and access to board resources are provided as well as question banks.

CLIN 616, Renal System (6.0)

This required second-year course integrates histology, physiology, pathology, medicine, and the pharmacology related to renal diseases. The objective is to prepare the student to present a differential diagnosis and an appropriate diagnostic and therapeutic plan for patients with acute or chronic diseases of the urinary system.

CLIN 618, Behavioral Medicine (3)

The Behavioral Medicine course is provided as a requirement of the second year curriculum at PNWU. The course presents a multidimensional approach to the understanding of the most common clinical entities in psychiatry and behavioral medicine. Additional topics are signs, symptoms, diagnosis, treatment and the biopsychosocial aspects of behavioral medicine. Several of these sections are conducted in work format, allowing maximum participation and interaction of students and faculty.

CLIN 625, Hematology/Oncology/Infectious Disease (6.5)

This course is designed to assist students in acquiring knowledge and competency in both the basic and clinical sciences, in disorders of red and white blood cells, hemostasis and oncology, and basics of

infectious disease including HIV. The faculty will emphasize pathology, pharmacology, internal medicine, immunology, clinical manifestations, diagnosis, differential diagnosis, and treatment components in the forms of lectures, directed self-study, and clinical integration learning sessions (CILs).

CLIN 627, Gastrointestinal System (6.5)

This multidisciplinary course is designed to assist students in acquiring knowledge and competency in disorders of the gastrointestinal system, pancreas, liver and biliary tract. The student will examine the basic biology and diseases of the digestive system. The course utilizes a comprehensive teaching approach to presenting the common and/or significant clinical problems and disorders of the gastrointestinal system. The faculty will emphasize pathophysiology, clinical manifestations, diagnosis, differential diagnosis, and treatment of these gastrointestinal disorders. Instruction will include lectures, faculty-directed self-study, clinical integration learning sessions (CILs), and virtual microscopy labs.

CLIN 628, Nervous System (7)

The Nervous System course is provided as a requirement of the second year curriculum. The course presents a multidimensional approach to the understanding of the most common clinical disorders of the nervous system. Additional topics are physical examination principles of nervous disorders. Attention will be given to diagnosis, pathophysiology, treatment and outcome measurement. Several of these sections are conducted in workshops/laboratories format, allowing maximum participation and interaction of students and faculty.

CLIN 629, Endocrine System (4.5)

This course is an integrated, multidisciplinary study of the endocrine system in health and disease. Emphasis is on pharmacology, pathology, nutrition, and microbiology as related to the diagnosis and clinical management of endocrine disorders. The course presents a multidimensional approach to the understanding of the most common clinical entities in endocrine disease. The course presents the pathophysiology, pharmaceutical or surgical treatments, and adult and pediatric presentations of endocrine diseases. A central format of the course is the presentation of clinical correlations. This format consists of presentation of clinical cases that range from the prototypical to the atypical. Students are given study questions to guide their study on critical components of the diagnosis or treatment of the clinical correlation cases.

CLIN 701, Clinical Skills III (.5)

This course will enhance the students skills in obtaining a history, developing a rapport and bedside manner, physical diagnosis, integration of OMM, critical thinking, development of differential diagnoses and soap note writing skills. This will be done in the style of the COMLEX-USA Level 2PE standardized patient encounters as delineated by the orientation guide provided by COMLEX-USA.

CLIN 702, Introduction to Clinical Clerkships (1)

The Introduction to Clinical Clerkships is a one-week course during the first week of third-year at the Mount Vernon regional training site. Students will be provided with a multidimensional, multidiscipline approach to the expected clinical and professional behaviors that will assist the student to transition from a didactic setting to a clinical venue that involves administrative staff, nursing staff, medical residents, and physician attendings in a healthcare organization.

ELEC 702, Individualized Elective Rotation (2 - 4)

An elective rotation in an area not currently being offered as a regular rotation selection. The student

will be assigned to a physician trainer or a group of physician trainers who are practicing physician in the specialty. The goals and objectives of the course must be defined and approved by the Associate Dean of Clinical Education or their designee. This is typically used for unrestricted elective rotations. This course may be repeated with different preceptors to obtain additional clinical exposure.

ELEC 703, Global Health (2 - 8)

The rotation provides broad exposure to both public health and direct clinical experiences in a variety of settings, both within the US and abroad. This course may be repeated with different preceptors to obtain additional clinical exposure.

ELEC 704. Bioethics (2 - 4)

The purpose of this Bioethics & Primary Care course is to provide the student with exposure to bioethics in contemporary medicine. To accomplish this, the rotation will allow students to examine the secularity of modern medicine, the structures of modern bioethical frameworks, and the theological and philosophical arguments used to support bioethical positions. Students will examine the complex cultural, medical, ethical, and philosophical issues integral to bioethics and primary care.

EM 701, Emergency Medicine (4)

An emergency medicine core rotation is required. The student will be assigned to a physician trainer or a group of emergency medicine trainers who are practicing in their specialty. Exposure to patients in the clinical setting the student will learn interview and documentation skills. The student may be given the opportunity to participate in procedures as the physician trainer determines their readiness.

EM 702, Emergency Medicine Elective (2 – 4)

Emergency Medicine is a fourth year elective two to four-week rotation. The student will be assigned to a physician trainer or a group of emergency medicine trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

EM 703, Emergency Medicine (2 - 6)

An emergency medicine primary care core rotation. The student will be assigned to a physician trainer or a group of emergency medicine trainers who are practicing in their specialty. Exposure to patients in the clinical setting the student will earn interview and documentation skills. The student may be given the opportunity to participate in procedures as the physician trainer determines the student's readiness.

FM 501/502, Art of Clinical Practice I & II (6, 6)

The course provides students the knowledge and skills to perform a proper history and physical examination, as well as effective SOAP note documentation and Oral Case Presentations. The student will be assessed on the knowledge related to these goals and the practical skills related to: (1) Interviewing and history taking, (2) Performing the physical examination, (3) Demonstrating professional/ethical behavior, (4) Making clinical judgments, and (5) Clinical communication (e.g. SOAP note writing and Oral Presentation). Clinical diagnostic reasoning and medical decision-making will be emphasized in team-based learning sessions moderated by a clinical faculty member, as well as standardized patient (SP) encounters, simulation scenarios (SIM), and community-based early clinical encounters (ECE), inter-professional education (IPE), and interprofessional collaborative practice (ICP).

Further, the purpose of this course is to empower the students with the basic understanding of how

sociocultural patterns of behaviors, personalities, developmental disabilities, ethics, and communication will affect patient care and clinical decision making. Curriculum goals regarding lifelong learning, professionalism, self-care, ethics, and social and community contexts of care will also be addressed. Other topics include biological correlates of behavior; learning and behavioral change; lifespan development; communication and interaction; group processes; family and community sociocultural patterns of behavior; and developmental disabilities. This course includes a review of behavioral risk factors, disease study design, and biostatistics to facilitate recognition of evidence-based medicine and appropriate patient-oriented/problem-based articles that are applicable to clinical practice.

FM 601/602, Art of Clinical Practice III & IV (6, 6)

The Art of Clinical Practice III and IV courses are designed to teach students the skills of a practicing osteopathic physician. The course prepares students with the clinical reasoning and skills necessary for patient care as outlined in AACOM's Entrustable Professional Activities (EPAs), including: gathering a history and performing a physical examination; prioritizing a differential diagnosis following a clinical encounter; recommending and interpreting common diagnostic and screening tests; entering and discussing orders and prescriptions; documenting a clinical encounter in the patient record; providing an oral presentation of a clinical encounter; forming clinical questions and retrieving evidence to advance patient care; giving or receiving a patient handover to transition care responsibility; collaborating as a member of an interprofessional team; recognizing a patient requiring urgent or emergent care and initiating evaluation and management; obtaining informed consent for tests and/or procedures; performing general procedures of a physician; and identifying system failures and contributing to a culture of safety and improvement.

FM 603, OMS2 Objective Structured Clinical Examination (OSCE) (.25)

The Second Year OSCE course is an Objective Structured Clinical Examination (OSCE) that is a summative assessment of students' clinical skills learned over the course of their medical education up to the point of the assessment. This OSCE is designed to assess students' readiness for entering clinical rotations based on their performance in obtaining a history, performing a physical exam, documenting a clinical encounter, verbally presenting a clinical encounter, and doing all of these with sound clinical reasoning, humanism, and professionalism.

FM 701/702, Family Medicine (2 - 6)

A family medicine core rotation is required. Each student will be assigned to specific rotations in family medicine. The rotations in family medicine will expand the student's ability to integrate information obtained from the medical history, physical examination, osteopathic structural examination and appropriate diagnostic modalities into definitive diagnoses.

FM 703, Hospice-Palliative Care (2 - 4)

Palliative Care is available as a subspecialty elective in the area of family medicine or internal medicine. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in specialty. This rotation provides exposure to treatment and care of end of life patients. *Cross-listed with IM 714*. This course may be repeated with different preceptors to obtain additional clinical exposure.

FM 704, Family Medicine Elective (2 - 4)

A two to four-week Family Medicine elective rotation. The student will be assigned to a physician trainer or a group of trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

FM 705, Sports Medicine (2 - 4)

Sports Medicine is available as a subspecialty elective in family medicine. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

FM 706, Military Medicine (2 - 4)

The purpose of this two- to six-week rotation is to provide the student with exposure to experiences related to military medical officer obligations in peacetime, leadership/discipline, disasters, stabilization/field exercises, triage, and combat medical environments. To accomplish this, the rotation provides broad exposure to professionalism and ethical issues in the military environment as well as in the medical field and where appropriate exposure to medical problems related to military members as well as their families can occur. To achieve rotation objectives, the student is expected to apply the concepts of diagnosis and management for all phases of patient care and, if relevant, develop a working knowledge of both inpatient and outpatient treatment modalities as related to military medical care in both peacetime and the combat environment. This course may be repeated with different preceptors to obtain additional clinical exposure.

FM 801, Family Medicine Sub-Internship (2 - 4)

Students will serve as interns for family medicine services associated with residency programs under the supervision of family medicine residents and attending physicians. Students will be able to perform an initial assessment of patients under consideration for admission to the family medicine service. Students will be able to implement diagnostic and therapeutic plans taking into account evidence-based information and patient preferences. Based on their demonstrated knowledge in osteopathic medicine, skills and attitudes, students will be able to participate on an inpatient family medicine team with an advanced degree of independence and responsibility in preparation for their first year of residency. Students will learn to provide osteopathic patient-centered inpatient care and document that care appropriately. Students will be able to provide continuity of care to a limited number of patients who they care for in both the hospital and the ambulatory setting. This course may be repeated with different preceptors to obtain additional clinical exposure.

IM 701/702, Internal Medicine (2 - 6)

An internal medicine core rotation is required. The specialty of internal medicine consists of the diagnosis, treatment, and prevention of all diseases of the body (excluding surgery and obstetrics) with emphasis on the internal organs. The program goal for the student in internal medicine is to develop the skills of thorough history taking and physical examination with the subsequent ability to develop a differential diagnosis. These skills will be developed and critiqued by bedside teaching and by a variety of academic lectures. Emphasis will also be placed on the effective utilization of hospital services and the development of post-hospitalization treatment plans. This rotation may include hospitalist programs affiliated with core sites.

IM 703, Allergy & Immunology (2 - 4)

The study and management of allergy and immunology is available as a subspecialty elective in the area of internal medicine. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

IM 704, Cardiovascular Disease (2 - 4)

The study and management of cardiovascular disease is available as a subspecialty elective in the area of internal medicine. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

IM 705, Dermatology (2 - 4)

Dermatology is available as a subspecialty elective in the area of internal medicine. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

IM 706, Endocrinology (2 - 4)

Endocrinology is available as a subspecialty elective in the area of internal medicine. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

IM 707, Wound Care (2 - 4)

The purpose of this rotation is to provide the student with an overview of the clinical specialty. This rotation is not intended to transform the student into a specialist, but rather it is to provide the clinical clerk a survey of the specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

IM 708, Gastroenterology (2 - 4)

Gastroenterology is a subspecialty elective rotation in the area of internal medicine. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

IM 709, Geriatrics (2 - 4)

Geriatrics is available as an elective in internal medicine. An osteopathic physician must recognize the special needs of the geriatric patient. As aging is a normal physiological process, so the care of the geriatric patient is the normal extension of the physician's responsibility. Therefore, exposure to the geriatric patient should be an integral part of the experience of the student, particularly in the longitudinal care experience and the internal medicine rotations. Training should take place at all the training sites, the hospital, nursing home, the patient's home, a geriatric assessment unit, or any other site appropriate for the care of the geriatric patient. This course may be repeated with different preceptors to obtain additional clinical exposure.

IM 710, Hematology/Oncology (2 - 4)

Hematology/Oncology is available as a subspecialty elective in the area of internal medicine. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

IM 711, Infectious Disease (2 - 4)

The study and management of infectious disease is available as a subspecialty elective in the area of internal medicine. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

IM 712, Nephrology (2 - 4)

Nephrology is available as a subspecialty elective in the area of internal medicine. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

IM 713, Neurology (2 - 4)

Neurology is a subspecialty elective in the area of internal medicine. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. The purpose of the rotation is to develop decision-making cognitive skills and apply didactic material in a clinical setting. Upon completion of this rotation, the student should have improved basic skills in physical diagnosis, gained familiarity and ancillary diagnostic procedures, determined indications for appropriate laboratory and diagnostic tests, and assisted in the management of neurologic problems. This course may be repeated with different preceptors to obtain additional clinical exposure.

IM 714, Hospice-Palliative Care (2 - 4)

Palliative Care is available as a subspecialty elective in the area of family medicine or internal medicine. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in specialty. This rotation provides exposure to treatment and care of end of life patients. Cross-listed with FM 714. This course may be repeated with different preceptors to obtain additional clinical exposure.

IM 715, Pulmonary (2 - 4)

The study and management of pulmonary disorders is available as a subspecialty elective rotation in the area of internal medicine. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

IM 716, Intensive Care (2 - 4)

The intensive care rotation is meant to give the student a more in-depth experience in a hospital intensive care unit. The student will work as part of an intensive care team. To accomplish this, the rotation provides broad exposure to both chronic and acute problems, experience in appropriate consultation, outpatient diagnostic testing, patient education and other procedures. To achieve rotation objectives, the student is expected to apply the concepts of diagnosis and management for all phases of care and, if relevant, develop a working knowledge of both inpatient and outpatient treatment modalities as applicable to discharge planning. Throughout the rotation, students will assume as much responsibility for patient care as is commensurate with their preparedness. This course may be repeated with different preceptors to obtain additional clinical exposure.

IM 717, Rheumatology/Immunology (2 - 4)

Rheumatology/Immunology is available as a subspecialty elective rotation in internal medicine. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

IM 719, Internal Medicine Elective (2 - 4)

A two- or four-week Internal Medicine elective rotation. The student will be assigned to a physician trainer or a group of trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

IM 727, Physical Medicine & Rehabilitation (2 - 4)

Physical Medicine & Rehabilitation is available as a subspecialty elective in the area of internal medicine. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

IM 801, Internal Medicine Sub-Internship (2 - 4)

The purpose of this two to four-week experience is to provide the student with exposure to commonly encountered cases in Internal Medicine Sub-Internship. To accomplish this, the rotation provides broad exposure to both chronic and acute problems, experience in appropriate consultation, outpatient diagnostic testing, patient education and other procedures. To achieve rotation objectives, the student is expected to apply the concepts of diagnosis and management for all phases of outpatient care. If relevant, develop a working knowledge of both inpatient and outpatient treatment modalities. Throughout the rotation, students will assume as much responsibility for patient care as is commensurate with their preparedness. This course may be repeated with different preceptors to obtain additional clinical exposure.

OBGYN 701/702, Women's Health (2 - 6)

A required core curriculum rotation, the goal of the Women's Health rotation is to acquaint the student with the field of female reproductive medicine and the broad-based issues surrounding women's health. The student will be expected to demonstrate a basic knowledge of the social, physiological, and physical factors that make women unique. The student is expected to be able to identify the normal course of female maturation and development, including menarche, pregnancy, and menopause.

OBGYN 703, Women's Health Elective (2 - 4)

A two or four-week Women's Health elective rotation. The student will be assigned to a physician trainer or a group of trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

OBGYN 801, Women's Health Sub-Internship (2 - 4)

The obstetrical gynecological sub-internship is meant to give the student who is interested in OB/GYN a more in-depth experience in the field of obstetrics and gynecology. Instruction for students will allow them responsibility and experience in caring for patients with obstetrical and gynecological problems. This instruction, experience and responsibility allows the development of judgment in clinical skills in utilizing and interpreting laboratory and diagnostic studies, and to rationally manage uncomplicated obstetrical and gynecologic patients. Instruction enhances the medical knowledge of the student in clinical physiology and pathology of obstetrical and gynecologic conditions. This instruction will include the natural history, prevalence, manifestations, differential diagnosis, and the rational therapeutics and management of the condition. Preventive and rehabilitative features for each condition are emphasized. The student will enhance their osteopathic patient care and management skills by learning the following: history taking, physical examination, diagnostic procedures, problem identification and formulation. recording of data, problem solving skills, and appropriate patient-physician and patient family relationships. In addition instruction will provide responsibility and experience for students, in patient education and health maintenance, specifically in the areas of marriage counseling, sex education, and family planning. This course may be repeated with different preceptors to obtain additional clinical exposure.

OPP 501/502, Osteopathic Principles & Practice I (3/3)

Osteopathic Principles and Practice I is a course comprised of formal didactic instruction (cognitive component) and clinical skills training (CST, psychomotor component), including Osteopathic Manipulative Treatment (OMT, psychomotor component), conducted in a large teaching laboratory setting. Skills and knowledge are taught and examined in a cumulative and comprehensive manner. The course will familiarize students with the history of osteopathy, the philosophical basis of the profession, and the anatomical and physiological foundation of osteopathic medicine in the treatment of somatic dysfunction relative to disease processes. Students will be taught how to palpate both male and female anatomy with the goal of diagnosing somatic dysfunction of soft tissues, bones, and joints, how to understand the biomechanics of the various components of the neuromusculoskeletal system, as well as how to manage their treatment using a variety of models. Students will be taught how to integrate osteopathic principles with clinical medicine in a wide variety of specialties, including family medicine, pediatrics, internal medicine, gynecology/obstetrics, and general surgery.

OPP 601/602, Osteopathic Principles & Practice II (2.5/2.5)

Osteopathic Principles and Practice II is a continuation of OPP I that builds upon the first-year knowledge base, while challenging students to apply their training using a more complex clinically related paradigm during year two. Osteopathic Principles and Practice II is a course comprised of formal didactic instruction (cognitive component) and clinical skills training (CST, psychomotor component), including Osteopathic Manipulation Treatment (OMT, psychomotor component) conducted in a large teaching laboratory setting. Skills and knowledge are taught and examined in a cumulative and comprehensive manner. The course will continue to familiarize students with the philosophical basis of the profession, as well as the anatomical and physiological foundation of osteopathic medicine in the treatment of somatic dysfunction relative to disease processes. Students will be taught how to properly palpate both male and female anatomy with the goal of diagnosing somatic dysfunction of soft tissues, bones, and joints, how to understand the biomechanics of the various components of the neuromusculoskeletal system, as well as how to manage their treatment using a variety of models. Students will be taught how to integrate osteopathic principles and practice (OPP) with clinical medicine in a wide variety of specialties, including family medicine, pediatrics, internal medicine, gynecology/obstetrics, an general surgery.

OPP 701, Osteopathic Principles & Practice (4)

A four-week required core rotation. Osteopathic education must play a key role in the curriculum. Training should be provided in both the inpatient and ambulatory care settings, where possible. In developing a format to teach these principles, it will be stressed that osteopathic care does not imply specific manipulative techniques for specific problems. Rather, this format should enable the student to integrate the osteopathic philosophy into daily patient care. The philosophy is centered on the concept of the body unity, the interrelationship of structure and function, and the body's inherent neuropsychoimmunological healing capacity. The approach of holistic medicine is one that will be emphasized throughout the extern program. Students may participate in one of three tracks, which include a two to four-week clinic rotation, four weeks with OPP faculty at PNWU, or longitudinal instruction throughout the third year.

OPP 702, Osteopathic Principles & Practice Elective (2 - 4)

A two to four-week elective rotation required. Osteopathic education must play a key role in the curriculum. Training should be provided in both the inpatient and ambulatory care settings, where possible. In developing a format to teach these principles, it will be stressed that osteopathic care does

not imply specific manipulative techniques for specific problems. Rather, this format should enable the student to integrate the osteopathic philosophy into daily patient care. The philosophy is centered on the concept of the body unity, the interrelationship of structure and function and the body's inherent neuropsychoimmunological healing capacity. The approach of holistic medicine is one that will be emphasized throughout the extern program. This course may be repeated with different preceptors to obtain additional clinical exposure.

OPP 703, Osteopathic Manipulative Medicine (2 – 6)

An osteopathic manipulative medicine primary care core rotation. The student will be assigned to a physician trainer or a group of trainers who are practicing in their specialty. The student will experience the day to day activities of clinicians as they assist in the care of their patients. Exposure to patients in the clinic setting will give the student opportunity to practice interview, examination, documentation and presentation skills. These activities help develop student's clinical reasoning and provide opportunities to learn necessary professional activities. The student may be afforded by the preceptor the opportunity to participate in procedures as the preceptor determines the student's readiness. The curriculum for this rotation is based on nationally recognized recommendations from the Osteopathic Practices and Principles Department and Educational Council on Osteopathic Principles.

OPP 799, Osteopathic Principles & Practice III (6 or 18)

The goal of this course is to instruct medical students in an advanced understanding of Osteopathic Principles and Practices necessary for integration into clinical practice as they are prepared to be teaching assistants for first-, second-, and third-year osteopathic medical students. Emphasis will be placed on development of didactic and laboratory teaching skills to assist in preparation of first- and second-year students to become competent clinical practitioners in the context of osteopathic primary care.

PED 701/702, Pediatrics (2 - 6)

A pediatric core rotation is required. The goal of the pediatric rotation is to initiate the student into the field of working with infants, children, and adolescents. It is expected that the student become familiar with the diagnosis and treatment of common pediatric diseases and disorders. The student is expected to assist in the management of the pediatric patient under close supervision by the attending physician. The student's responsibility in assisting with a particular pediatric case will depend on the individual's experience and ability.

PED 703, Adolescent Medicine (2 - 4)

Adolescent medicine is available as a subspecialty elective in the area of pediatrics. The student will be assigned to a trainer or a group of physician trainers who are practicing physician in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

PED 704, Pediatrics Elective (2 - 4)

An elective rotation in the area of pediatrics. The student will be assigned to a physician trainer or a group of physician trainers who are practicing physician in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

PED 705, Neonatology (2 - 4)

Neonatology is available as a subspecialty elective in the area of pediatrics. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course

may be repeated with different preceptors to obtain additional clinical exposure.

PED 707, Newborn Elective (2 - 4)

The purpose of this experience is to provide the student with exposure to the development of the newborn from the perspective of a physician and parent. This rotation is not intended to transform the student into a pediatrician, but rather it is to provide the clinical clerk a survey of neonate development. In this ambulatory rotation, the student is encouraged to apply concepts of diagnosis and management to infants. In addition, the student will gain knowledge about normal growth and development of the pediatric patient. The student will be required to submit a daily log of infant development and a paper, agreed upon by the Chair of Pediatrics and the student.

PED 801, Pediatrics Sub-Internship (2 - 4)

Students will serve as interns for pediatrics associated with residency programs under the supervision of residents and attending physicians. Students will be able to perform an initial assessment of pediatric patients under consideration for admission. Students will be able to implement diagnostic and therapeutic plans taking into account evidence-based information appropriate for pediatric patients. Based on their demonstrated knowledge in osteopathic medicine, skills, and attitudes, students will be able to participate on the pediatrics team with an advanced degree of independence and responsibility in preparation for their first year of residency. Students will learn to provide osteopathic patient-centered inpatient care and document that care appropriately. Students will be able to provide continuity of care to a limited number of pediatric patients who they care for in both the hospital and the ambulatory setting. This course may be repeated with different preceptors to obtain additional clinical exposure.

PHARM 599, Fundamentals of Pharmacology (3)

This lecture course introduces the basic principles for rational and effective drug therapy.

RSRCH 601, Research/Scholarly Activity Elective (2 or 6)

Students who are accepted to this course first will discuss possible research/scholarly activity topic areas with the faculty. The student then will search and evaluate the biomedical and scientific literature as they formulate the details of their project. After planning the project with the guidance of the faculty member, the student will perform the research, receiving instruction in appropriate scientific techniques by the faculty, where appropriate. As the project nears its end, the student will compile the literature review, research design, and results and conclusions into a final report. This final report will serve as the foundation for a formal oral presentation of the project given to students and faculty at PNWU during the term following the student's research experience. Students are encouraged to submit project abstracts for regional and national presentations.

RSRCH 701, Research (2 or 6)

The purpose of this research elective rotation is to provide students the opportunity to experience research as it relates to medicine. Research topics are discussed with faculty of record with a clearly defined plan for the student to follow. Students then will search and evaluate the research literature as they formulate the details of their scientific study. After planning the research with the guidance of the research scientist or physician, the student will perform the research, receiving instruction in appropriate research methods by the faculty. As the project nears its end, the student will compile the literature review, research design, and results and conclusions into a final report. The length of this rotation can be varied to meet individual student preferences, and can be from 2-6 weeks in duration. Students are expected to commit 40 hours per week in the laboratory or office setting or conducting

literature review for successful completion of this rotation.

SURG 701, Surgery (2 - 6)

A surgery core rotation is required. Surgery rotation(s) provide the student with adequate exposure to a variety of surgical procedures and to increase understanding of the pre- and post-operative needs of the surgical patient. The learning experience will be provided in the OR suite and at the patient's bedside. The attending surgeon will be responsible for providing instruction in a variety of different surgical techniques and for providing other pertinent information regarding the care of their particular patients. This rotation is open to all surgical specialties available at the core site.

SURG 702, Radiology (2)

The radiology clerkship is scheduled with a preceptor who is an expert in the field. The course is used to gain the foundation of knowledge required of osteopathic physicians who will be ordering diagnostic imaging as part of their practice. This primary care core elective will introduce students to the radiology reading room, various imaging modalities, and basic image-guided diagnostic and therapeutic procedures. The student may be given the opportunity to participate in procedures as the preceptor determines their readiness. The curriculum for this rotation is based on the nationally recognized curriculum from the Alliance of Medical Student Educators in Radiology.

SURG 703, Anesthesiology (2 - 4)

Anesthesiology clinical rotation is available as a surgical subspecialty elective. The student will be assigned to a physician trainer or group of physician trainers who are practicing in their specialty. The purpose of this is to familiarize the student to various methods of anesthesia and the skills associated with this specialty. Upon completion of this rotation, the student would have improved basic skills in peripheral venous catheterization and venipuncture. The student should be exposed to various central line catheterizations, intubation, and anesthesia management, including pharmacologic agents used in anesthesia. This course may be repeated with different preceptors to obtain additional clinical exposure.

SURG 704, Ophthalmology (2 - 4)

Ophthalmology is available as a subspecialty elective in the area of surgery. Students will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

SURG 705, Orthopedics (2 - 4)

Orthopedics is available as a subspecialty elective in the area of surgery. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

SURG 706, Otorhinolaryngology (2 - 4)

Otorhinolaryngology is available as an elective in the area of surgery. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

SURG 707, Radiology (2 - 4)

Radiology is available as an elective. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

SURG 708, Urology (2 - 4)

Urology is available as a subspecialty elective in the area of surgery. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

SURG 709, Pathology (2 - 4)

Pathology is available as an elective in surgery. The goal of the rotation will be to study the use and limitations of clinical laboratory data for the diagnosis and treatment of disease. All divisions or combinations of the laboratory may be included. Students will observe and assist in the handling of surgical and biopsy specimens and the performance of frozen sections. They will also attend and participate in other teaching activities of the department at the discretion of the preceptor.

SURG 710, Trauma Surgery & Surgical Critical Care (2 - 4)

The rotation provides the student with exposure to commonly encountered cases in trauma surgery and critical care. To accomplish this, the rotation provides broad exposure to both chronic and acute problems, experience in appropriate consultation, outpatient diagnostic testing, patient education and other procedures. This course may be repeated with different preceptors to obtain additional clinical exposure.

SURG 711, Surgical Selective (2 - 4)

Surgical Selective is available as a subspecialty elective in the area of surgery. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

SURG 712, Surgical Elective (2 - 4)

Surgical Elective is available as an elective in the area of surgery. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

SURG 713, Surgery (2)

A surgery primary care core rotation. The student will be assigned to a physician trainer or a group of trainers who are practicing in their specialty. Surgery rotation provides the student with adequate exposure to a variety of surgical procedures and to increase the understanding of the pre- and post-operative needs of the surgical patient. The learning experience will be provided in the OR suite and at the patient's bedside. The attending surgeon will be responsible for providing instruction in a variety of different surgical techniques and for providing other pertinent information regarding the care of their particular patients.

SURG 715, Cardio-Thoracic Surgery (2 - 4)

Cardio-Thoracic Surgery is available as a subspecialty elective rotation in surgery. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

SURG 719, Podiatry (2 - 4)

Podiatry is available as a subspecialty elective in the area of surgery. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

SURG 801, Surgery Sub-Internship (2 - 4)

The surgical sub-internship in surgery is meant to give the student who is interested in surgery a more in depth experience in surgery. The student will take on the responsibilities of a first year resident. In this capacity, they will see consults in the emergency room and on the floor, manage patients that have been admitted to the service, and assist in the operating room. This rotation introduces the student to general surgical principles including pre-op evaluation, intra-op decision making and post-op care. Students will deal with surgical illness, surgical critical care and non-operative care of the critically ill. Students should become "experts on the abdomen." This course may be repeated with different preceptors to obtain additional clinical exposure.



Administration of the University

Michael Lawler, PhD, MSW, President, PhD conferred at University of California Davis
The President of Pacific Northwest University of Health Sciences is the Chief Executive Officer and has
final responsibility for the administration of the University. The President reports directly to the Board
of Trustees.

Edward Bilsky, PhD, Provost/Chief Academic Officer, PhD conferred at University of Arizona The University Provost and Chief Academic Officer reports to the President and is responsible for effective academic administration in alignment with the mission of PNWU.

Frank D. Alvarez, MPH, Chief Operations Officer, MPH conferred at University of California Berkeley The Chief Operations Officer reports to the President and is responsible for the effective and efficient management and administration of the University's non-academic operations.

Ann Hittle, CPA, Chief Financial Officer, BS conferred at Washington State University The Chief Financial Officer reports to the President and is responsible for developing and overseeing all finance functions of the University.

Michele Erickson, CFRE, Chief Development Officer, BS conferred at Oregon State University The Chief Development Officer reports to the President and is responsible for providing leadership in funds development programs to ensure the University fulfills its mission and goals. This includes regional resource development, fundraising activities, donor recognition and retention, events, governmental affairs, corporate and foundation grant writing, strategic planning, and volunteer development.

Jameson Watkins, MLIS, Chief Information Officer, MLIS conferred at Emporia State University The Chief Information Officer reports to the President and oversees all University information technology.

Dean O'Driscoll, MA, Chief Communications Officer, MA conferred at Southern Utah University The Chief Communications Officer reports to the President and is responsible for developing and guiding the strategy for all communication, website and public relations messages and marketing collateral to consistently articulate and brand the University.

Erin Murphy, MS, Chief Human Resources Officer, MS conferred at Johns Hopkins University The Chief Human Resources Officer reports to the President and advises the executive team on all human capital related matters helping to ensure that the University has the talent, processes/systems, and commitment necessary to grow and meet the mission.

Administration of the College of Osteopathic Medicine

Dr. Thomas Scandalis, Dean, DO conferred at New York Institute of Technology The Dean is the chief academic, budgetary, and personnel officer of the College of Osteopathic Medicine. The Dean reports to the Provost. It is the duty of the Dean to establish the academic program as it relates to the mission of the College.

Dr. Robert Sorrells, Associate Dean for Preclinical Education, PhD conferred at University of Georgia The Associate Dean for Preclinical Education is responsible for leading and supporting the faculty and

academic staff in the delivery of instruction that meets the goals for academic excellence in the College of Osteopathic Medicine (COM) in years one and two. In addition, the Associate Dean contributes to the development of sound academic policies and procedures that support the academic goals.

Dr. Emily Oestreich, Assistant Dean for Preclinical Education, PhD conferred at University of Rochester The Assistant Dean for Preclinical Education is responsible for assisting the Associate Dean for Preclinical Education in managing the personnel and administrative operations of the Office of Preclinical Education with a primary focus on providing curricular leadership and direction as Chair of the College of Osteopathic Medicine (COM) Curriculum Committee.

Dr. Stephen Laird, Associate Dean for Student Affairs, DO conferred at University of North Texas Health Science Center

The Associate Dean oversees extracurricular activities, including but not limited to, clubs, chapters, volunteers, service, student wellness and mental health. Residency applications and career counseling are also managed by Student Affairs.

Dr. Anita Showalter, Associate Dean for Clinical Education, DO conferred at Ohio University The Associate Dean is responsible for the administration of clinical rotations including oversight of adjunct clinical faculty, curriculum development, delivery and evaluation.

Dr. Marc Cote, Assistant Dean for Clinical Education, DO conferred at Kansas City University of Medicine and Biosciences

The Assistant Dean for Clinical Education is responsible to assist the Associate Dean for Clinical Education in managing the personnel and administrative operations of Clinical Education and operations of the geographically dispersed COM clinical system.

Dr. Elizabeth McMurtry, Assistant Dean for Clinical Education and Faculty Development, DO conferred at Des Moines University

The Assistant Dean for Clinical Education is responsible to assist the Associate Dean for Clinical Education in managing the personnel and administrative operations of the Office of Clinical Education and operations of the geographically dispersed COM clinical campus system. A primary focus for the assistant dean will be providing faculty development needs for the clinical rotation sites and clinical campus system.

Dr. Russell Maier, Associate Dean for Graduate Medical Education

MD conferred at University of Washington

The Associate Dean is responsible for ensuring successful training experiences for residents by providing a supportive working environment and resources to prepare students for the next step in their careers.

The Regional Assistant Deans have instructional responsibilities in their areas of expertise.

Faculty

Name	Degree Held	Conferring Institution	Title
Daniel Allen	DO	A.T. Still University of Health Sciences Kirksville College of Osteopathic Medicine	Regional Liaison Idaho & Assistant Professor
Frederica Amity	PhD	Oregon State University	Learning Skills Specialist & Assistant Professor
<u>Aaron Anderson</u>	DO	Philadelphia College of Osteopathic Medicine	Adjunct Assistant Professor, Family Medicine
Erin Anderson	DO	Philadelphia College of Osteopathic Medicine	Assistant Professor, Family Medicine
Nancy Balash	DPT	Arizona School of Health Sciences	Assistant Professor, Anatomy
Mark Baldwin	DO	Kansas City University of Medicine & Biosciences College of Osteopathic Medicine	Chair of Clinical Medicine, Chief Internal Medicine & Professor
Ruth Bishop	DO, MPH	University of New England College of Osteopathic Medicine	Assistant Professor, Family Medicine
Albert Brady	MD	University of California	Associate Professor, Clinical Medicine
Kathaleen Briggs-Early	PhD, RDN, CDE	Washington State University	Associate Professor, Biochemistry & Nutrition
Daniel Brzusek	DO, MS	Philadelphia College of Osteopathic Medicine	Regional Liaison Bellevue & Assistant Professor
Marc Cote	DO	Kansas City University of Medicine & Biosciences College of Osteopathic Medicine	Assistant Dean for Clinical Education & Professor
Stephen Dechter	DO	Western University of Health Sciences College of Osteopathic Medicine of the Pacific	Regional Liaison Tri Cities & Assistant Professor
<u>Jessica Di Nizio</u>	DO	New York Institute of Technology College of Osteopathic Medicine	Assistant Professor, Family Medicine
Thomas Eglin	MD	Emory University	Regional Assistant Dean Yakima & Assistant Professor
William Elliott	MD, PhD	University of Chicago	Chair of Biomedical Sciences & Professor
<u>Kevin Foley</u>	MD	University of Chicago Pritzker School of Medicine	Assistant Professor, Family Medicine

| University Personnel

Thomas Gole	DO	Ohio University Heritage College of Osteopathic Medicine	Assistant Professor, Family Medicine
<u>Orestes Gutierrez</u>	DO	Philadelphia College of Osteopathic Medicine	Regional Assistant Dean Portland & Assistant Professor
Byron Haney	MD	Indiana University School of Medicine	Assistant Professor, Family Medicine
Ann Hanley	DO	Pacific Northwest University of Health Sciences	Regional Assistant Dean Fairbanks & Assistant Professor
William Hatch	DHEd, PAC	A.T. Still University of Health Sciences	Adjunct Assistant Professor, Family Medicine
<u>Marjorie Henderson</u>	MD	University of Washington	Adjunct Assistant Professor, Family Medicine
Erin Hepner	DNP, MPH, ARNP, FNP-C	Gonzaga University	Associate Professor, Family Medicine
<u>David Johnson</u>	DO	Kansas City University of Medicine & Biosciences College of Osteopathic Medicine	Assistant Professor, OPP
<u>Guy Jones</u>	MD	Rutgers University New Jersey Medical School	Regional Assistant Dean Tri-Cities & Assistant Professor
Wade Justice	MD	University of Arizona	Assistant Professor, Clinical Medicine
<u>James Keene</u>	DO, PhD	Des Moines University College of Osteopathic Medicine	Associate Professor, OPP
Kevin Kropp	DO, FACOFP	Midwestern University Arizona College of Osteopathic Medicine	Regional Assistant Dean Kalispell & Associate Professor
Stephen Laird	DO	University of North Texas Health Science Center College of Osteopathic Medicine	Associate Dean for Student Affairs & Professor
Katheryn Lauer	MD	Emory University	Assistant Professor, Family Medicine
<u>Melissa Lemp</u>	DO	Kansas City University of Medicine & Biosciences College of Osteopathic Medicine	Chair of Pediatrics & Assistant Professor
Stephen Litchfield	DO	Kansas City University of Medicine & Biosciences College of Osteopathic Medicine	Assistant Professor, OPP
Janelle Mapes	PhD	University of Illinois at Urbana-Champaign	Assistant Professor, Anatomy

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<u>Troy Markus</u>	DO	Midwestern University Chicago College of Osteopathic Medicine	Regional Assistant Dean Mt. Vernon & Assistant Professor
<u>Charles Martin</u>	DPT	Des Moines University	Assistant Professor, Anatomy
Crystal Martin	DO	Nova Southeastern University	Assistant Professor, OPP
Phil Mattocks	PhD	University of Washington	Associate Professor, Physiology
Thomas Miller	DO, MPH	Michigan State University College of Osteopathic Medicine	Assistant Professor, Family Medicine
Keith Monosky	PhD	George Washington University	Executive Director of IPE & Assistant Professor, Family Medicine
John Moore	DO	Nova Southeastern University	Chair of Family Medicine & Assistant Professor
Anne Musser	DO, FACOFP	Kansas City University of Medicine & Biosciences College of Osteopathic Medicine	Regional Assistant Dean Anchorage & Assistant Professor
Jeffrey Novack	PhD	University of Washington	Associate Professor, Biomedical Sciences
Emily Oestreich	PhD	University of Rochester	Assistant Dean for Preclinical Education & Associate Professor
Thuy Van Pham	MD	University Tennessee Health Science Center	Regional Assistant Dean Puyallup & Assistant Professor
Brenda Polite	MD	Loma Linda University School of Medicine	Regional Assistant Dean Centralia & Assistant Professor
Randy Poncher	MD	University of Illinois College of Medicine	Regional Assistant Dean Spokane & Associate Professor
Kirsten Prewitt	DO	Des Moines University College of Osteopathic Medicine	Regional Assistant Dean Billings & Assistant Professor
Mirna Ramos-Diaz	MD, MA, FAAP	University of Miami School of Medicine	Director of Roots to Wings Transformative Co-Mentor Program & Assistant Professor, Family Medicine
<u>Julie</u> Randolph-Habecker	PhD	Ohio State University	Associate Professor, Pathology
<u>Diana Rhodes</u>	DVM, PhD	Purdue University	Chair of Anatomy & Professor
James Rhodes	PhD	Harvard University	Associate Professor, Histology

| University Personnel

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Joseph Salinas	MD	New Jersey School of Medicine	Assistant Professor, Internal Medicine
Thomas Scandalis	DO	New York Institute of Technology College of Osteopathic Medicine	Dean for College of Osteopathic Medicine, Chief of Dermatology & Professor, Clinical Medicine
Michael Scott	DO, MPH	A.T. Still University of Health Sciences Kirksville College of Osteopathic Medicine	Assistant Professor, Clinical Medicine
<u>Dan Selski</u>	PhD	University of Rochester	Assistant Professor, Anatomy
Douglas Shearer	MD, PhD	St. George's University	Chief of Pathology & Associate Professor
Anita Showalter	DO	Ohio University Heritage College of Osteopathic Medicine	Associate Dean for Clinical Education & Professor, Women's Health
Robert Sorrells	PhD	University of Georgia	Associate Dean for Preclinical Education & Associate Professor, Anatomy
Joseph Stengel	DO	Arizona College of Osteopathic Medicine	Regional Assistant Dean Olympia & Assistant Professor
Mathias Stroemel	DO	Oklahoma State University College of Osteopathic Medicine	Regional Assistant Dean Walla Walla & Assistant Professor
Kimberly Taylor	PhD	Janus Pannonius University	Chief of Microbiology & Associate Professor
Mark Taylor	PhD	Purdue University	Co-director of MAMS Program & Professor
Anne Teerink	DO	A.T. Still University of Health Sciences Kirksville College of Osteopathic Medicine	Assistant Professor, Family Medicine
Duane Teerink	DO	A.T. Still University of Health Sciences Kirksville College of Osteopathic Medicine	Assistant Professor, Family Medicine
<u>Joel Thome</u>	PharmD	University of Washington	Assistant Professor, Pharmacology

Kristi Trickett	DO	Pacific Northwest University of Health Sciences	Adjunct Assistant Professor, Family Medicine
Ronald Walser	DPT	Franklin Pierce University	Assistant Professor, Anatomy
J. Warren Wiley	DO, FACOFP	Kansas City University of Medicine & Biosciences College of Osteopathic Medicine	Regional Assistant Dean Blackfoot & Assistant Professor
<u>Lei Ye</u>	PhD	Utah State University	Director of Academic Technology & Assistant Professor
Rourke Yeakley	MD, MHA	Tufts University School of Medicine	Regional Assistant Dean Boise & Assistant Professor
John Zambito	DO	New York Institute of Technology College of Osteopathic Medicine	Adjunct Assistant Professor, Family Medicine

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Edward Bilsky, PhD • Provost and Chief Academic Officer

Thomas A. Scandalis, DO • College of Osteopathic Medicine Chief Academic Officer and Dean

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