# THE UNIVERSITY OF ARIZONA®

## New Academic Program Workflow Form

### General

### Proposed Name: Physician Assistant Program

Transaction Nbr: 0000000000137

Plan Type: Major

Academic Career: Professional

Degree Offered: Master of Physician Assistant Practice (MPAP)

Do you want to offer a minor? N

Anticipated 1st Admission Term: Fall 2024

### Details

Department(s):

### MDTC

DEPTMNT ID	DEPARTMENT NAME	HOST
0713	Medicine	Y

Campus(es):

### MAIN

LOCATION	DESCRIPTION
TUCSON	Tucson

#### Admission application terms for this plan: Spring: N Summer: N Fall: Y

### Plan admission types:

Freshman: N Transfer: N Readmit: N Graduate: N

Non Degree Certificate (UCRT only): Y

Other (For Community Campus specifics): N

Plan Taxonomy: 51.0912, Physician Assistant.

Program Length Type: Program Length Value: 0.00

Report as NSC Program:

SULA Special Program:

### **Print Option:**

Diploma: Y Master of Physician Assistant Practice (MPAP)

Transcript: Y Master of Physician Assistant Practice (MPAP)

### Conditions for Admission/Declaration for this Major:

A minimum of an earned bachelor¿s degree or higher degree from a U.S. regionally accredited institution or equivalent\*; all applicants must be U.S. citizens or permanent residents of the U.S.; submit both the Centralized Application Service for Physician Assistant (CASPA) and University of Arizona applications (GradAPP) by the XX deadline (CASPA verified no later than XX); overall and science GPA of 3.0 or higher (CASPA calculation); complete prerequisites from a U.S. regionally accredited institution to include:

- a. Sciences:
- i. General Biology or Human Biology
- ii. General Chemistry with lab
- iii. Microbiology with lab
- iv. Human Anatomy with lab
- v. Human Physiology
- b. Non-sciences:
- i. Medical Terminology
- ii. Intro/General Psych
- iii. Spanish (1 year of college Spanish or evidence of advanced standing by a U.
- S. regionally accredited institution)
- iv. Three letters of reference/recommendation (CASPA submission only)

### **Requirements for Accreditation:**

The Accreditation Commission on Education for the Physician Assistant, Inc. requires new programs to complete a rigorous process of an application, selfstudy, and ongoing site review throughout the first 3-4 years of program existence. The process starts with an application for provisional accreditation followed by a self-study, additional application, and site visit. If appropriate, the program is designated with provisional accreditation with continued monitoring. Programs complete a second site visit for provisional monitoring that is scheduled within the 6 months prior to graduation of the first cohort and then a final provisional site visit which occurs 18-24 months following the second visit. Programs are then eligible for a designation of continuing accreditation, which typically requires a 10-year cycle of review along with annual reports.

## **Program Comparisons**

### **University Appropriateness**

The UArizona Physician Assistant (AZPA) Program will provide scientific and clinical graduate level education to prepare PA students to practice medicine as part of an Interprofessional health care team. The 26-month program will prepare graduates to provide care for the medically underserved of southern Arizona with an emphasis on primary care, mental health, and indigenous and rural health. Students will complete basic sciences, clinical medicine, and medical Spanish courses, as well as curriculum focused on culture, population health, and health care systems, culminating in a Master of Physician Assistant Practice degree.

NBR	PROGRAM	DEGREE	#STDNTS	LOCATION	ACCRDT
1	Master of Physician Assistant	2MS	180	USC, Los Angeles, CA.	Y
2	Master of Physician Assistant	2MS	100	NAU, Phoenix, AZ	Y

### Arizona University System

### **Peer Comparison**

The University of Arizona Physician Assistant Program is similar to the Northern Arizona Physician Assistant Program in our focus for primary care and there are similarities in the size of the program, but the curriculum is somewhat different in that we are proposing a 26-month program that allows for three didactic semesters followed by one year of clinical rotations or clerkships. This has been created this way to provide a unique opportunity for the recruitment, retention, and graduation of educationally disadvantaged students who may not thrive as well in a 24-month program. The extra semester of didactic instruction allows for more learner support and remediation efforts to ensure all students have equal opportunities for success while taking away some of the inherent anxiety that comes with a 24-month program. In addition, our primary focus is on southern Arizona seeking to support medically underserved communities that lack access to primary care services. This includes rural and urban settings. Comparisons to the University of Southern California (USC) highlight similarities with the curriculum and mission, while allowing for a significant reduction in total costs that are seen at many private institutions including USC. Their program is also three semesters in length, but includes one year of clinical rotations and a final semester of didactic education. Our curriculum will not need the additional semester to achieve our program goals.

### **Faculty & Resources**

#### Faculty

Current Faculty:

INSTR ID	NAME	DEPT	RANK	DEGREE	FCLTY/%
22092503	Kevin Lohenry	0713	Professor	Doctor of	100.00

INSTR ID	NAME	DEPT	RANK	DEGREE	FCLTY/%
				Philosophy	

### Additional Faculty:

The program will be led by Dr. Lohenry, but additional leaders including a medical director (0.2 FTE); director of didactic education (1.0 FTE); and director of clinical education (1.0 FTE) will be hired in the second fiscal year. Additional instructional faculty will be hired in the third fiscal year just prior to the first accreditation site visit and the beginning of recruitment (3 1.0 FTE). In the fourth fiscal year two additional instructional faculty FTEs will be added.

Current Student & Faculty FTE

DEPARTMENT	UGRD HEAD COUNT	GRAD HEAD COUNT	FACULTY FTE
0713	0	0	1.00

Projected Student & Faculty FTE

	UGRD HEAD COUNT		GRAD HEAD COUNT			FACULTY FTE			
DEPT	YR 1	YR 2	YR 3	YR 1	YR 2	YR 3	YR 1	YR 2	YR 3
0704	0	0	0	30	64	72	5.00	7.00	8.00

### Library

Acquisitions Needed:

The program would be interested in adding content to the medical library that focuses on PA education. These resources include access to peer reviewed journals for our profession (Journal of the American Academy of Physician Assistants; Journal of Physician Assistant Education Association); specific PA textbooks in digital format (\*\*Ballweg R, Stolberg S, & Sullivan EM. Physician Assistant A Guide to Clinical Practice, 6th ed., Philadelphia: W.B. Saunders (2017). ISBN 9780323401128; Stern SC, Cifu AS, Altkorn D. eds. Symptom to Diagnosis: An Evidence-Based Guide,4e New York, NY:McGraw-Hill; 2020). The remainder of our textbooks would be in alignment with the College of Medicine.

### **Physical Facilities & Equipment**

**Existing Physical Facilities:** 

The PA program will be housed in the Health Sciences Innovation Building (HSIB). This 220,000 square foot building includes diverse classroom space including flipped classrooms that can house up to 150 students. The PA program will use and share space in the Interprofessional Clinical and Professional Skills (ICaPS) patient treatment rooms, and Arizona Simulation Technology and Education Center (ASTEC) space and other HSIB classroom space as needed. PA Faculty offices are already

available on the 9th floor of the HSIB.

Additional Facilities Required & Anticipated:

The PA program will require 1 dedicated lab space for delivering history and physical diagnosis training. The space must have equipment available to accommodate 50 students learning patient care together with hands on instruction. Students will need access to the lab after business hours and on weekends to practice for objective structured examinations throughout the 18 months of their didactic training.

#### **Other Support**

Other Support Currently Available:

The PA program has one administrative assistant currently being shared with two other developing programs.

Other Support Needed over the Next Three Years:

The PA Program will require additional administrative support including a program manager, clinical placement coordinator, and the administrative assistant as we get closer to classes beginning.

#### **Comments During Approval Process**

### 3/24/2022 12:33 PM

LOHENRY	
Comments	
Approved.	

### 3/24/2022 12:53 PM

ESANDMAR

Comments

Approved.



#### NEW ACADEMIC PROGRAM – MAJOR Preliminary Proposal Form

- I. Program Details
  - a. Name (and Degree Type) of Proposed Academic Program: Physician Assistant (PA) Program; Master of Physician Assistant Practice (MPAP)
    - i. Emphases (if applicable): Primary Care/Rural Health
  - b. Academic Unit(s)/College(s): Department of Internal Medicine/College of Medicine
  - c. Campus/Location(s): Tucson
  - d. First Admission Term (*i.e.*, Fall 2022): TBD (Fall 2024)
  - e. Primary Contact and Email: Kevin Lohenry, PhD, PA-C; lohenry@arizona.edu
  - Executive Summary: The University of Arizona (UArizona) Health Sciences strategy includes the goals of becoming a top 25 ranked university for health sciences, identifying, and addressing Arizona's health professional shortages, and providing culturally supportive educational opportunities and experiences for underrepresented minority students. The development of a Physician Assistant program at UArizona works towards all of these goals by promoting health sciences, increasing the local availability of qualified health professionals, and working closely with the office of Diversity, Equity, and Inclusion (DEI) to support, mentor, and encourage students from diverse backgrounds to be interested in and prepared to enter the program and the profession.
  - The only PA programs in Arizona are in the Phoenix metropolitan area and there is a shortage of primary care providers in all of the southern Arizona counties<sup>1</sup>. PAs play an important role in providing critical access to care and a program that is housed in southern Arizona and focused on building paths for communities in southern Arizona can play an important role in solving the health and mental health care shortages in these communities.
  - The UArizona Physician Assistant (AZPA) Program will provide scientific and clinical graduate level education to prepare PA students to practice medicine as part of an interprofessional health care team. The 28-month program will prepare graduates to provide care for the medically underserved of southern Arizona with an emphasis on primary care, mental health, and indigenous and rural health. Students will complete basic sciences, clinical medicine, and medical Spanish courses, as well as curriculum focused on culture, population health, and health care systems, culminating in a Master of Physician Assistant Practice degree.
  - According to the Health Professions Quick Facts 2021 data from the UArizona Pre-Health Professions Advising, there were 151 undergraduate students who applied to PA programs in the United States with 31% being accepted. There are also over 30,000 applicants nationally with the vast majority of programs coming in private institutions. The development of a PA program in southern Arizona may provide students in those communities with a viable alternative to reducing costs for attendance at private institutions thus impacting total student loan debt and specialty choice upon graduation.

• The UArizona Health Sciences provides an optimal training environment to promote interprofessional education. The current students in medicine, nursing, pharmacy, and public health will benefit from additional insights from members of other health care teams including AZPA and the new program will benefit from an established interprofessional environment.

1 HRSA. (2022). HRSA data portal. Retrieved at:

https://www.google.com/search?q=%E2%80%A2+HRSA+quarterly+report+asof+12%2F31%2F2021+estimates+653+primary+care&oq=%E2%80%A2%09HRSA+quarterly+report+as+of+12% 2F31%2F2021+estimates+653+primary+care&ags=chrome..69i57.707j0j15&sourceid=chrome&ie=UTF-8

- II. Brief Program Description: The University of Arizona (UArizona) Physician Assistant Program (AZPA) is designed to prepare students from diverse backgrounds to practice medicine as part of an interprofessional health care team. The 26-month program will provide students with graduate level courses and clinical experiential training to become highly competent health care providers with an emphasis on rural primary care medicine. Students will attend classes on campus and online throughout their didactic and clinical curriculum, while learning anatomy, physiology, immunology, clinical skills, clinical medicine, and physical diagnosis. The clinical phase of the curriculum will involve supervised outpatient and inpatient clinical training experiences in behavioral and mental health; emergency, family, and internal medicine; pediatrics; surgery; and women's health. Graduates will be highly prepared for the required Physician Assistant National Certification Examination immediately following graduation.
- III. Program Rationale: Establishing the Physician Assistant (PA) program in the College of Medicine Tucson (COM-T) complements and enhances existing educational offerings by creating an additional pathway into clinical healthcare careers for students who do not wish to pursue a traditional MD. The program focuses on expanding the health workforce for rural and underserved populations and addressing unmet primary and specialty care needs. It prioritizes attracting a diverse student body. These align with the College's mission of advancing health and wellness while embracing diversity in the pursuit of excellence through innovation. The PA program also aligns with the overarching mission of the University of Arizona to help address the health provider shortages across the state. Arizona physicians can supervise six PAs who are working at the same time though these requirements are likely to expand through the state legislative process. We will leverage our extensive on site interprofessional education and our community-based relationships to optimize clinical experiential learning and expose students to rural practice and care delivery. Training additional PAs in the state extends the physician impact and reach. UArizona is ideally suited to leverage partnerships across our five health sciences colleges and create new offerings to address unmet healthcare needs. To support the program the COM-T will share some courses with the PA program, and the UArizona Health Sciences will provide funding during the launch and ramp up phases.

IV. **Projected Enrollment for the First Three Years:** Note that for the full proposal, you will need to provide evidence to support the projection (through student/alumni surveys, enrollment in existing courses, peer programs, etc.) At this stage, a rough estimate is sufficient.

Year 1	Year 2	Year 3
30	64	72

- V. Evidence of Market Demand: According to U.S. News & World Report (2021), the Physician Assistant profession is ranked as the #2 best health care job and #3 best overall job<sup>1</sup>, and the WebAdMIT University Advisor Portal report demonstrated an applicant pool of 30,198 with 10,871 matriculating to the over 282 accredited programs in the United States (as cited in the University of Arizona Pre-Health Advising Health Professions Quick Facts<sup>2</sup>. In that same data, the mean number of applicants per program was 414 with 36% of applicants who were accepted into a program, and it also showed 151 unique applicants to PA programs in the United States from our Tucson campus. In that same year 31% of those students were accepted to a program. In comparison, there were 23,493 applicants to osteopathic medical schools and 14,180 to schools of pharmacy.
- VI. Similar Programs Offered at Arizona Public Universities: The Northern Arizona University Physician Assistant Program provides a 24-month educational program at their Phoenix campus.
- VII. Resources
  - a. Summarize new resources required to offer the program: The program will be adding faculty to deliver some of the content as well as staff to support the ongoing needs (admissions, curriculum, clinical site placement, student affairs) of the program. The program will require dedicated space for classroom and laboratory (clinical skills/physical examination) as well as existing space related to simulation and standardized patient practice and examinations.
  - b. Estimate total expected cost: Total expected costs over 3 years is projected at: Yr 1: \$1,500,808; Yr 2; \$2,071,148 expenses; and Yr 3: \$2,188,358 expenses.
  - c. Estimate total expected revenue of the program: Revenue is projected over 3 years at: Yr 1: \$1,510,357; Yr 2: \$2,434,722; and Yr 3: \$3,202,382
- VIII. **Required Signatures** (the following should be included in the notification memo to campus after ABOR approval):
  - a. Program Director/Main Proposer:
    - i. Signature: \_\_\_\_
    - ii. Name and Title: Kevin Lihenry, PhD, PA-C; Clinical Professor and Program Director
    - iii. Date: 2.24.2022
    - iv.

- b. Managing Unit/Department Head: Dog Gen M.D.
  - i. Signature: \_\_\_\_
  - ii. Name and Title: Daniel Derksen MD, AVP for Health Sciences
  - iii. Date: 02/25/2022
- c. College Dean/Associate Dean:
  - i. Signature:
  - ii. Name and Title: Michael M.I. Abecassis, MD, MBA, Dean, College of Medicine Tucson
  - iii. **Date:** 2/28/2022



To be used once the preliminary proposal has been approved.

I. MAJOR REQUIREMENTS— complete the table below by listing the major requirements, including required number of units, required core, electives, and any special requirements, including emphases\* (sub-plans), thesis, internships, etc. Note: information in this section must be consistent throughout the proposal documents (comparison charts, four-year plan, curricular/assessment map, etc.).

#### GRADUATE

Total units required to complete the degree	107
Pre-admissions expectations (i.e., academic training to be completed prior to admission)	<ul> <li>A minimum of an earned bachelor's degree or higher degree from a U.S. regionally accredited institution or equivalent*</li> </ul>
	<ul> <li>All applicants must be U.S. citizens or permanent residents of the U.S.</li> <li>Submit both the Centralized Application Service for Physician Assistant (CASPA) and University of Arizona applications (GradAPP) by the XX deadline (CASPA verified no later than XX)</li> <li>Overall and science GPA of 3.0 or higher (CASPA calculation)</li> <li>Complete prerequisites from a U.S. regionally accredited institution to include: <ul> <li>a. Sciences:</li> </ul> </li> </ul>
	<ul> <li>i. General Biology or Human Biology</li> <li>ii. General Chemistry with lab</li> <li>iii. Microbiology with lab</li> <li>iv. Human Anatomy with lab</li> <li>v. Human Physiology</li> </ul>
	<ul> <li>b. Non-sciences:</li> <li>i. Medical Terminology</li> <li>ii. Intro/General Psych</li> <li>iii. Spanish (1 year of college Spanish or evidence of advanced</li> </ul>
	<ul> <li>standing by a U.S. regionally accredited institution)</li> <li>Three letters of reference/recommendation (CASPA submission only)</li> </ul>
Major requirements. List all major requirements	• Fall 1 (All New) 20 total (required)
including core and electives. If applicable, list the	<ul> <li>AZPA 601 Foundations in Medicine I (3)</li> </ul>
emphasis requirements for each proposed	<ul> <li>AZPA 611 Clinical Medicine I (8)</li> </ul>
emphasis*. Courses listed must include course	<ul> <li>AZPA 621 Clinical Skills I (2)</li> </ul>
prefix, number, units, and title. Mark new	<ul> <li>AZPA 622 Clinical Skills I Lab (1)</li> </ul>



To be used once the preliminary proposal has been approved.

IZ <u>ONA</u>			
coursework (New). Include any limits/restrictions		0	AZPA 631 PAs in Health Care (1)
needed (house number limit, etc.). Provide		0	AZPA 641 Clinical Reasoning Workshop (1)
email(s)/letter(s) of support from home		0	AZPA 651 Evidence Based Medicine (1)
department head(s) for courses not owned by		0	AZPA 661 Medical Spanish (2)
your department.		0	AZPA 662 Medical Spanish I Workshop (1)
		0	AZPA 699 Independent Study (Optional) (1)
	•	Spring	2 (All New) 20 total (required)
		0	AZPA 602 Foundations in Medicine II (3)
		0	AZPA 612 Clinical Medicine II (8)
		0	AZPA 623 Clinical Skills II (2)
		0	AZPA 624 Clinical Skills II Lab (1)
		0	AZPA 632 Ethics and Professionalism (1)
		0	AZPA 642 Clinical Reasoning Workshop II (1)
		0	AZPA 652 Health, Justice, and Society (1)
		0	AZPA 663 Medical Spanish II (2)
		0	AZPA 664 Medical Spanish II Workshop (1)
		0	AZPA 699 Independent Study (Optional) (1)
	•	Summe	er 4 total (Optional)
		0	CMM 501 Human Gross Anatomy (4)
	•	Fall 3 (A	All New) 19 total (required)
		0	AZPA 603 Foundations in Medicine (3)
		0	AZPA 613 Clinical Medicine III (8)
		0	AZPA 625 Clinical Skills III (1)
		0	AZPA 626 Clinical Skills III Lab (1)
		0	AZPA 633 Health Systems (1)
		0	AZPA 643 Clinical Reasoning Workshop III (1)
		0	AZPA 653 Health, Justice, and Society II (1)
		0	AZPA 665 Medical Spanish III (2)
		0	AZPA 667 Medical Spanish III Workshop (1)
		0	AZPA 699 Independent Study (Optional) (1)
	•	Clinical	Curriculum (All New; Semesters 4 and 5) 48 total (required)
	1	0	AZPA 681 Emergency Medicine (6 credits)
		0	AZPA 682 Family Medicine (6)
		0	AZPA 683 Internal Medicine (6)



To be used once the preliminary proposal has been approved.

ZONA			
	<ul> <li>AZPA 685 Pediatrics (6)</li> </ul>		
	<ul> <li>AZPA 686 Surgery (6)</li> </ul>		
	<ul> <li>AZPA 687 Behavioral Medicine (3)</li> </ul>		
	<ul> <li>AZPA 688 Women's Health (6)</li> </ul>		
	o AZPA 689 Selective (6)		
	<ul> <li>AZPA 692 PA Directed Research (Capstone) (2)</li> </ul>		
	<ul> <li>AZPA 693 Transitions to Practice (1)</li> </ul>		
	<ul> <li>AZPA 699 Independent Study (Optional) (1)</li> </ul>		
Research methods, data analysis, and	Yes. Students are taught research methods, data analysis, and concepts of		
methodology requirements (Yes/No). If yes,	methodologic principles as part of the evidence-based medicine focus of their AZPA		
provide description.	651 course.		
Internship, practicum, applied course	Yes. Students must complete 7 required rotations and 1 elective rotation with		
requirements (Yes/No). If yes, provide description.	clinical preceptors across a variety of clinical specialties.		
Master thesis or dissertation required (Yes/No). If	Yes. Students complete a directed research master capstone project focused on		
yes, provide description.	community health. This includes a required needs assessment, subsequent		
	implementation of a project focused on the previously determined need(s), and		
	analysis of the impact. This is completed during the clinical phase of the curriculum		
	with a dedicated period for project completion.		
Additional requirements (provide description)	Students must successfully complete a summative examination that includes a		
	comprehensive written examination across their medical knowledge in addition to a		
	practical objective structured clinical examination (OSCE) with standardized patients		
	as actors portraying various disease states. Additional interstation examination		
	exercises are included to assess student proficiency in various clinical skills i.e.		
	interpreting an ECG and radiographs, suturing, etc. during AZPA 693		
Minor options (as relevant)	No required minor options		

\*Emphases are officially recognized sub-specializations within the discipline. <u>ABOR Policy 2-221 c. Academic Degree Programs</u> <u>Subspecializations</u> requires all undergraduate emphases within a major to share at least 40% curricular commonality across emphases (known as "major core"). Total units required for each emphasis must be equal. Proposed emphases having similar curriculum with other plans (within department, college, or university) may require completion of an additional comparison chart. Complete the table found in Appendix B to indicate if emphases should be printed on student transcripts and diplomas.

II. CURRENT COURSES—using the table below, list all existing courses included in the proposed major. You can find information to complete the table using the <u>UA course catalog</u> or <u>UAnalytics</u> (Catalog and Schedule Dashboard> "Printable Course Descriptions by Department" On Demand Report; right side of screen). If the courses listed belong to a department that is not a signed party to this implementation



To be used once the preliminary proposal has been approved.

request, upload the department head's permission to include the courses in the proposed program and information regarding accessibility to and frequency of offerings for the course(s). Upload letters of support/emails from department heads to the "Letter(s) of Support" field on the UAccess workflow form. Add or remove rows to the table, as needed.

Course prefix and number (include cross-listings)	Units	Title	Pre-requisites	Modes of delivery (online, in- person, hybrid)	Typically Offered (F, W, Sp, Su)	Dept signed party to proposal? (Yes/No)				
CMM 501	4	Human Gross Anatomy	Successful completion of all courses in Semester 1 and 2	In-person	M,T,W,Th,F	Yes				
NOTE: CMM502	NOTE: CMM501 will be an optional elective rotation for those seeking extra anatomy dissection									



V. NEW COURSES NEEDED – using the table below, list any new courses that must be created for the proposed program. If the specific course number is undetermined, please provide level (i.e., CHEM 4XX). Add rows as needed. Is a new prefix needed? If yes, see below table.

Course prefix and number (include cross- listings)	Units	Title	Pre-requisites: <sup>1</sup> all courses require enrollment in AZPA program <sup>2</sup> Succesfully complete first term <sup>3</sup> Successfully complete first two terms <sup>4</sup> Successfully complete didactic curriculum	Modes of delivery (online, in- person, hybrid)	Status*	Anticipated first term offered	Typically Offered (F, W, Sp, Su)	Dept signed party to proposal? (Yes/No)	Faculty members available to teach the courses
AZPA601	3	Foundations in Medicine I	1	ln- person; Hybrid	D	Fall 2024	F	Yes	TBD
AZPA611	8	Clinical Medicine I	1	In- person; Hybrid	D	Fall 2024	F	Yes	TBD
AZPA621	2	Clinical Skills I	1	ln- person; Hybrid	D	Fall 2024	F	Yes	TBD
AZPA622	1	Clinical Skills I Lab	1	ln- person; Hybrid	D	Fall 2024	F	Yes	TBD
AZPA631	1	PAs in Health Care	1	ln- person; Hybrid	D	Fall 2024	F	Yes	TBD
AZPA641	1	Clinical Reasoning I Workshop	1	ln- person; Hybrid	D	Fall 2024	F	Yes	TBD



To be used once the preliminary proposal has been approved.

OF ARIZON/ AZPA651	1	Evidence-Based	1	In-	D	Fall 2024	F	Yes	TBD
		Medicine		person;					
				Hybrid					
AZPA661	2	Medical Spanish I	1	In-	D	Fall 2024	F	Yes	TBD
				person;					
				Hybrid					
AZPA662	1	Medical Spanish I	1	In-	D	Fall 2024	F	Yes	TBD
		Workshop		person;					
				Hybrid					
AZPA602	3	Foundations in	2	In-	D	Spring 2025	Sp	Yes	TBD
		Medicine II		person;					
				Hybrid					
AZPA612	8	Clinical Medicine II	2	In-	D	Spring 2025	Sp	Yes	TBD
				person;					
				Hybrid					
AZPA623	2	Clinical Skills II	2	In-	D	Spring 2025	Sp	Yes	TBD
				person;					
				Hybrid					
AZPA624	1	Clinical Skills III Lab	2	In-	D	Spring 2025	Sp	Yes	TBD
				person;					
				Hybrid					
AZPA632	1	Ethics and	2	In-	D	Spring 2025	Sp	Yes	TBD
		Professionalism		person;					
				Hybrid					
AZPA642	1	Clinical Reasoning II	2	In-	D	Spring 2025	Sp	Yes	TBD
		Workshop		person;					
				Hybrid					
AZPA652	1	Health, Justice, and	2	In-	D	Spring 2025	Sp	Yes	TBD
		Society I		person;					
				Hybrid					
AZPA663	2	Medical Spanish II	2	In-	D	Spring 2025	Sp	Yes	TBD
				person;					
				Hybrid					



To be used once the preliminary proposal has been approved.

OF ARIZONA AZPA664	1	Medical Spanish III Workshop	2	In- person;	D	Spring 2025	Sp	Yes	TBD
AZPA603	3	Foundations in Medicine III	3	Hybrid In- person;	D	Fall 2025	F	Yes	TBD
AZPA613	8	Clinical Medicine III	3	Hybrid In- person; Hybrid	D	Fall 2025	F	Yes	TBD
AZPA625	1	Clinical Skills III	3	In- person; Hybrid	D	Fall 2025	F	Yes	TBD
AZPA626	1	Clinical Skills III Lab	3	In- person; Hybrid	D	Fall 2025	F	Yes	TBD
AZPA633	1	Health Systems	3	ln- person; Hybrid	D	Fall 2025	F	Yes	TBD
AZPA643	1	Clinical Reasoning III Workshop	3	ln- person; Hybrid	D	Fall 2025	F	Yes	TBD
AZPA653	1	Health, Justice, and Society II	3	ln- person; Hybrid	D	Fall 2025	F	Yes	TBD
AZPA665	2	Medical Spanish III	3	ln- person; Hybrid	D	Fall 2025	F	Yes	TBD
AZPA667	1	Medical Spanish III Workshop	3	ln- person; Hybrid	D	Fall 2025	F	Yes	TBD
AZPA681	6	Emergency Medicine	4	ln- person; Hybrid	D	Sp, S, F 2026	F,Sp, S	Yes	TBD



To be used once the preliminary proposal has been approved.

AZPA682	6	Family Medicine	4	In-	D	Sp, S, F	F,Sp, S	Yes	TBD
				person; Hybrid		2026			
AZPA683	6	Internal Medicine	4	In- person;	D	Sp, S, F 2026	F,Sp, S	Yes	TBD
				Hybrid		2020			
AZPA684	6	Pediatrics	4	ln- person; Hybrid	D	Sp, S, F 2026	F,Sp, S	Yes	TBD
AZPA685	6	Surgery	4	In- person; Hybrid	D	Sp, S, F 2026	F,Sp, S	Yes	TBD
AZPA686	6	Women's Health	4	ln- person; Hybrid	D	Sp, S, F 2026	F,Sp, S	Yes	TBD
AZPA687	6	Selective	4	ln- person; Hybrid	D	Sp, S, F 2026	F,Sp, S	Yes	TBD
AZPA688	3	Behavioral Medicine	4	ln- person; Hybrid	D	Sp, S, F 2026	F,Sp, S	Yes	TBD
AZPA692	2	PA Capstone	4	ln- person; Hybrid	D	Sp, S, F 2026	F,Sp, S	Yes	TBD
AZPA693	1	Transitions to Practice	4	ln- person; Hybrid	D	Sp, S, F 2026	F,Sp, S	Yes	TBD
*AZPA699	1	Independent Study	1	ln- person; Hybrid	D	Sp, S, F 2026	F,Sp, S	Yes	TBD

\*In development (D); submitted for approval (S); approved (A)



To be used once the preliminary proposal has been approved.

- a. Subject description for new prefix (if requested). Include your requested/preferred prefix, if any: AZPA
- VI. FACULTY INFORMATION- complete the table below. If UA Vitae link is not provided/available, add CVs to a Box folder and provide that link. UA Vitae profiles can be found in the <u>UA directory/phonebook</u>. NOTE: full proposals are distributed campus-wide, posted on committee agendas and should be considered "publicly visible". Contact <u>Office of Curricular Affairs</u> if you have concerns about CV information being "publicly visible".

Faculty Member	Involvement	UA Vitae link or Box folder link
James Proffitt, PhD	Course Director, CMM 501	TBD
Remainder of courses TBD		



To be used once the preliminary proposal has been approved.

VII. GRADUATION PLAN – provide a sample degree plan, based on your program that includes all requirements to graduate with this major and takes into consideration course offerings and sequencing. Undergraduate programs: please complete <u>Addendum D: 4-Year Plan for</u> <u>Degree Search</u>. Use generic title/placeholder for requirements with more than one course option (e.g., Upper Division Major Elective, Minor Course, Second Language, GE Tier 1, GE Tier 2).

Semester 1		Semester 2		Semester 3		Semester 4	Semester 4	
Course prefix and	Units							
number		number		number		number		
AZPA601	3	AZPA602	3	AZPA603	3	AZPA681	6	
AZPA611	8	AZPA612	8	AZPA613	8	AZPA682	6	
AZPA621	2	AZPA623	2	AZPA625	1	AZPA683	6	
AZPA622	1	AZPA624	1	AZPA626	1			
AZPA631	1	AZPA532	1	AZPA633	1			
AZPA641	1	AZPA542	1	AZPA643	1			
AZPA651	1	AZPA552	1	AZPA653	1			
AZPA661	2	AZPA663	2	AZPA665	2			
AZPA662	1	AZPA664	1	AZPA667	1			
Total	20	Total	20	Total	19	Total	18	

Semester 5		Semester 6		Semester 7		Semester 8	
Course prefix and number	Units						
AZPA684	6	AZPA686	6				
AZPA685	6	AZPA687	6				
		AZPA688	3				
		AZPA692	2				
		AZPA693	1				
Total	12	Total	18	Total		Total	



To be used once the preliminary proposal has been approved.

VIII. Curriculum Map and Assessment Map - Complete this table as a summary of your learning outcomes and assessment plan, using these examples as a model. If you need assistance completing this table and/or the Curriculum Map, please contact the Office of Instruction and Assessment. Attach your Curriculum Map here.

**Program**: Physician Assistant Program (UAPA)

**Learning Outcome #1**: **PCPK01**- Students will be able to recognize healthy versus ill patients in the context of the patients' lives and determine the stage of illness – acuate, at risk of illness (emerging), or chronic. Students will further demonstrate the ability to utilize up-to-date scientific evidence to inform clinical reasoning and clinical judgement.

**Concepts:** Distinguishing patient health presentations; disease stages interpretation across all ages; Critical analysis and defense of scientific evidence with respect to patient treatment.

**Competencies**: Recognize normal and abnormal health states; discern among acute, chronic, and emerging disease states; elicit and understand the stories of individual patients and apply the context of their lives (including environmental influences, cultural norms, socioeconomic factors, and belief) when determining healthy versus ill patients; develop meaningful, therapeutic relationships with patients and their families; and partner with patients to address issues of ongoing signs, symptoms, or health concerns that remain over time without clear diagnosis despite evaluation and treatment.

Assessment Methods: This outcome will be assessed in written examinations, team-based assessments; objective structured clinical examinations (OSCEs); student reflective assessments; and supervised clinical practice experiences culminating in a summative examination with a combination of written and practical examinations.

**Measures**: Instructor grading of exams; proctored critical thinking group sessions; individual and team-based readiness exams; and proctored grading of OSCEs with standardized patients; summative examination.

Learning Outcome #2: SPH01- Students will recognize and understand that the influences of the larger community may affect the health of patients and integrate knowledge of social determinants of health into care decisions.

**Concepts:** Distinguishing social determinants of health and how they influence the social determinants of health Impact of community on individual health

**Competencies**: Recognize the cultural norms, needs, influences, and socioeconomic, environmental, and other population-level determinants affecting the health of the individual and community being served; recognize the potential impacts of the community, biology, and genetics on patients and incorporate them into decisions of care; demonstrate accountability and responsibility for removing barriers to health; understand the role of structural disparities in causing illness; engage members of the health care team in the surveillance of community resources to sustain and improve health; engage the health care team in determining the adequacy of community resources; reflect on personal and professional limitations in providing care; exercise cultural humility; elicit and hear the story of the individual and apply the context of the individual's life (including environmental influences, culture, and disease) when determining healthy versus ill patients; understand the fundamental principles of epidemiology; recognize the value of the work of monitoring and reporting for quality improvement; and use appropriate literature to make evidence-based decisions on patient care.



To be used once the preliminary proposal has been approved.

Assessment Methods: This outcome will be assessed in written examinations, team-based assessments; objective structured clinical examinations (OSCEs); a community-based needs assessment project related to social determinants of health; and supervised clinical practice experiences culminating in a summative examination with a combination of written and practical examinations.

**Measures**: Instructor grading of exams; proctored critical thinking group sessions; individual and team-based readiness exams; a community-based needs assessment project; and proctored grading of OSCEs with standardized patients; summative examination.

Learning Outcome # 3 - HLCO1- Students will be able to effectively communicate with patients as partners who engage in shared decision-making and who communicate, interpret, and express themselves as individuals with unique personal, cultural, and social values.

**Concepts:** Communicate effectively (includes culturally appropriate communication approaches in specific patient scenarios); Communication impact and shared-decision making; Effective patient-provider communication.

**Competencies:** Establish meaningful, therapeutic relationships with patients and families that allow for a deeper connection and create space for exploration of the patients' needs and goals to deliver culturally competent care; interpret information received by patients to ensure their understanding of the information conveyed to them; recognize the need for and governing mandates that ensure patients have access to interpreters and appropriate resources when barriers to communication arise; demonstrate insight and understanding about emotions and human responses to emotions that allow one to develop and manage interpersonal interactions; communicate effectively with patients, families, and the public; provide effective, equitable, understandable, and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy, and other communication needs; and organize and communicate information with patients, families, community members, and health team members in a form that is understandable, avoiding discipline-specific terminology when possible, and checking to ensure understanding

Assessment Methods: This outcome will be assessed in written examinations, team-based assessments; objective structured clinical examinations (OSCEs); and supervised clinical practice experiences culminating in a summative examination with a combination of written and practical examinations.

**Measures:** Instructor grading of exams; proctored critical thinking group sessions; individual and team-based readiness exams; and proctored grading of OSCEs with standardized patients; summative examination.

Learning Outcome # 4: ICPL01- Students will be able to recognize that the patient is at the center of all health care goals and to partner with the patient to define the patient's health care goals.

Concepts: Physical examination procedures; Case scenarios; Person-centered patient education that encompasses their health care goals

**Competencies:** Articulate one's role and responsibilities to patients, families, communities, and other professionals; redirect the focus of the health care team to the needs of the patient; assure patients that they are being heard; ensure patients' needs are the focus over self and others; contribute to the creation, dissemination, application, and translation of new health care knowledge and practices; recognize when referrals are needed and make them to the appropriate health care provider; coordinate care; develop relationships and effectively communicate with physicians, other health professionals, and health care teams; use the full scope of knowledge, skills, and abilities of available health professionals to provide care that is safe, timely, efficient, effective, and equitable; use unique and complementary abilities of all members of the health care team to optimize health and patient care; engage diverse professionals who complement one's own professional expertise, as well as associated



To be used once the preliminary proposal has been approved.

resources, to develop strategies to meet specific health care needs of patients and populations; and describe how professionals in health and other fields can collaborate and integrate clinical care and public health interventions to optimize population health.

Assessment Methods: This outcome will be assessed in written examinations, interprofessional team-based assessments; objective structured clinical examinations (OSCEs); and supervised clinical practice experiences culminating in a summative examination with a combination of written and practical examinations.

**Measures:** Instructor grading of exams; proctored critical thinking group sessions; individual and team-based readiness exams; and proctored grading of OSCEs with standardized patients; summative examination

**Learning Outcome #5: PLHC01-** Students will be able to practice medicine in a beneficent manner, recognizing and adhering to standards of care while attuned to advancing social justice.

Concepts: Clinical medicine encounters that are respectful and attuned to social justice; Social awareness; Social injustice;

**Competencies:** Articulate standard of care practice; admit mistakes and errors; participate in difficult conversations with patients and colleagues; recognize one's limits and establish healthy boundaries to support healthy partnerships; demonstrate respect for the dignity and privacy of patients while maintaining confidentiality in the delivery of team-based care; demonstrate responsiveness to patient needs that supersedes self-interest; demonstrate accountability to patients, society, and the profession; and exhibit an understanding of the regulatory environment.

Assessment Methods: This outcome will be assessed in written examinations, interprofessional team-based assessments; objective structured clinical examinations (OSCEs); and supervised clinical practice experiences culminating in a summative examination with a combination of written and practical examinations.

**Measures:** Instructor grading of exams; proctored critical thinking group sessions; individual and team-based readiness exams; and proctored grading of OSCEs with standardized patients; summative examination

Learning Outcome #6: HCFS01- Students will be able to articulate the essential aspects of value-based health care and apply this understanding to the delivery of safe and quality care.

**Concepts:** U.S. health care system; Health care systems of other industrialized nations; National health care system advantages and disadvantages.

**Competencies:** Recognize that health care is a business; articulate individual providers' value-add to the health care team in terms of cost; and appreciate the value of the collaborative physician/PA relationship.

Assessment Methods: This outcome will be assessed in written examinations, interprofessional team-based assessments; objective structured clinical examinations (OSCEs); and supervised clinical practice experiences culminating in a summative examination with a combination of written and practical examinations.

**Measures:** Instructor grading of exams; proctored critical thinking group sessions; individual and team-based readiness exams; and proctored grading of OSCEs with standardized patients; summative examination

\*Abbreviations: PCPK= Patient-Centered Practice Knowledge; SPH=Society and Population Health; HLC=Health Literacy and Communication; ICPL= Interprofessional Collaborative Practice and Leadership; PLHC=Professional and Legal Aspects of Health Care; HCFS=Health Care Finance and Systems



To be used once the preliminary proposal has been approved.

IX. PROGRAM ASSESSMENT PLAN- using the table below, provide a schedule for program evaluation 1) while students are in the program and 2) after completion of the major.

Assessment Measure	Source(s) of Evidence	Data Collection Point(s)
Student Interest	Applicant pool; enrollment numbers	Applicant pool: ongoing; Enrollment
		numbers: Annually at matriculation
Student knowledge and learning across all	Course outcomes; examination data;	Course outcomes: each semester;
objectives	attrition rates; graduation rates	Examination data: each exam; Attrition
		rates: annually; Graduation rates; every 26-
		months
Administrative aspects of the program and	Leadership 360; faculty and student	Leadership 360: every 3 years; faculty
institutional resources	interviews; course evaluations; exit survey;	interviews: ongoing with annual faculty
	alumni surveys	survey on institutional resources; student
		interviews: ongoing; course evaluations:
		review of qualitative comments each
		semester and annually in combination; exit
		survey; annually once students' complete
		curriculum; alumni surveys: 1 year
		following commencement
Effectiveness of the didactic curriculum in	Course evaluations; attrition data; student	Course evaluations: each semester;
the first three semesters	utilization of learning resources; clinical	attrition rates: annually; student utilization
	preceptor surveys for student readiness on	of learning resources: ongoing and
	their initial clinical rotations; exit and	annually; clinical preceptor surveys for
	alumni surveys	student readiness: following first two
		rotations; exit survey: annually once
		students' complete curriculum; alumni
		surveys: 1 year following commencement
Effectiveness of the clinical curriculum	Rotation evaluations; clinical preceptor	End-of-rotations; periodic site visits (2 per
	evaluations of students; clinical site visits by	year/student)
	faculty; end of rotation examination performance on national benchmarks	
Dreparation of graduates to achieve		Summative examination occurs within 120
Preparation of graduates to achieve	Summative examinations; exit and alumni	
program defined competencies	surveys; PANCE national certification	days of commencement; exit surveys occur
	examination results	at graduation; alumni surveys occur 1 year



To be used once the preliminary proposal has been approved.

IZONA		
		following graduation; PANCE examination data is received when the graduating class has completed their individual examinations with a final report by January of the following year
PANCE performance	PANCE national certification examination outcomes	PANCE examination data is received when the graduating class has completed their individual examinations with a final report by January of the following year
Sufficiency and effectiveness of principal and instructional faculty and staff	Course evaluations; exit and alumni surveys; administrative evaluations	End of course surveys; exit surveys at graduation; alumni surveys occur 1 year following graduation; periodic administrative evaluations to assess faculty and staff concerns related to administrative and institutional resources
Content breadth and depth	Course outcomes; examination data; attrition rates; ongoing medical director review; and national benchmark examinations	End of course surveys; course director semester reports; end-of-rotation examination national benchmarks; graduate outcomes on the PANCE examination
Academic program review	Accreditation status; site visit citations	Three site visits in program development followed by reaccreditation via profession specific accreditation body every 10 years
After degree completion	Exit and alumni surveys	Exit and alumni surveys
Program satisfaction	Exit and alumni surveys	At graduation and 1 year after degree completion
Success in meeting program goals	Course evaluations; exit and alumni surveys; administrative evaluations; leadership 360; external accreditation reviews	End of course surveys; course director semester reports; End of course surveys; exit surveys at graduation; alumni surveys occur 1 year following graduation; periodic administrative evaluations to assess faculty and staff concerns related to administrative and institutional resources; national accreditation periodic reviews



#### X. ANTICIPATED STUDENT ENROLLMENT-complete the table below. What concrete evidence/data was used to arrive at the numbers?

5-YEAR PROJECTED ANNUAL ENROLLMENT								
	1 <sup>st</sup> Year	2 <sup>nd</sup> Year	3 <sup>rd</sup> Year	4 <sup>th</sup> Year	5 <sup>th</sup> Year			
Number of	30	61	69	76	79			
Students	Students							

Data/evidence used to determine projected enrollment numbers:

\*The anticipated student enrollment was determined by national attrition data with the Physician Assistant Education Association and from experience showing the vast majority of attrition occurs from didactic courses and not clinical ones. The expected recruitment enrollment will be 30 and increase by 4 students in each cohort until we reach 50 students. Projected annual enrollment demonstrates those numbers with an estimated 9% annual attrition (Physician Assistant Education Association. (2020). Program Report 35. Retrieved at: <u>https://paeaonline.org/wp-content/uploads/2020/11/program-report35-20201014.pdf).</u>

XI. ANTICIPATED DEGREES AWARDED- complete the table below, beginning with the first year in which degrees will be awarded. How did you arrive at these numbers? Take into consideration departmental retention rates. Use <u>National Center for Education Statistics College</u> <u>Navigator</u> to find program completion information of peer institutions offering the same or a similar program.

PROJECTED DEGREES AWARDED ANNUALLY								
	1 <sup>st</sup> Year	2 <sup>nd</sup> Year	3 <sup>rd</sup> Year	4 <sup>th</sup> Year	5 <sup>th</sup> Year			
Number of			27	58	65			
Degrees								

Data/evidence used to determine number of anticipated degrees awarded annually: The Physician Assistant Education Association's national attrition rate for 2019 was 9%<sup>1</sup>.

Physician Assistant Education Association. (2020). Program Report 35. Retrieved at: <u>https://paeaonline.org/wp-content/uploads/2020/11/program-report35-20201014.pdf</u>

XII. PROGRAM DEVELOPMENT TIMELINE- describe plans and timelines for 1) marketing the major and 2) student recruitment activities.



To be used once the preliminary proposal has been approved.

The program timeline will include approval from the Arizona Board of Regents; approval from the Western Association of Schools and Colleges; and approval from the Accreditation Review Commission on Education for the Physician Assistant, Inc., which is the specialized accreditation agency for the PA profession. It is anticipated that the last step will require a period of 2-3 years before the program is awarded Provisional Accreditation. The program participates in an accreditation site visit to determine eligibility and readiness to matriculate students. This typically occurs between 6-12 months prior to matriculation of students. Once Provisional Accreditation has been granted, the program may begin to enroll students while continuing to demonstrate compliance with the ARC-PA 5<sup>th</sup> Edition Standards through two additional accreditation site visits. These site visits occur while the students are enrolled and shortly after the first graduating class. The second visit typically is scheduled within the 6 months prior to graduation of the first cohort of students. The ARC-PA will grant continued Provisional Accreditation pending the final provisional accreditation site visit. The third and final site visit typically occurs 18-24 months following the second provisional review by the ARC-PA and if approved, is awarded a status of Continuing Accreditation. Marketing for the new program will initially be done through our website and with great care to avoid accreditation concerns. The marketing of the program will require language to demonstrate that the program is seeking provisional accreditation and must contain the following information: our ARC-PA applicant status as provided to us by the ARC-PA; that the program is not yet accredited; and the implications of non-accreditation by the ARC-PA. These three components must be readily available to everyone who requests information, applies, or plans to enroll in the program. Once the program receives the first initial provisional accreditation status, students may be enrolled in the program. Student recruitment activities will include outreach to pre-PA and pre-Health clubs at UArizona and other area community colleges that serve southern Arizona. Additional information sessions will be scheduled to highlight the vision of the program and ultimately the curriculum once approved by the aforementioned organizations and the UArizona Curriculum Committee.

IX. Program Fees and Differential Tuition (PFDT) Request – For implementation of fees, you must work with <u>University Fees</u>. The annual deadline is December 1. For any questions, please contact the <u>University Fees Program Manager</u>.

In-Process



To be used once the preliminary proposal has been approved.

#### Request to Establish New Academic Program in Arizona

Please complete all fields. Boxes may be expanded to accommodate longer responses. Clarifying field descriptions can be found below. Should you have any questions or concerns, please email Helen Baxendale, Director of Academic Affairs and Policy at helen.baxendale@azregents.edu

University: University of Arizona

Name of Proposed Academic Program: Master of Physician Assistant

#### Academic Department:

The name of the academic department or unit that will primarily administer the academic program. If the proposed program will be jointly administered across more than one department, please list the(se) additional department(s).

#### College of Medicine/Department of Medicine

#### Geographic Site:

The physical site (campus, extended campus, etc.) or modality where the academic program will be primarily delivered or administered.

#### Tucson, Arizona

#### Instructional Modality:

The primary modality of the academic program (i.e., immersion/in-person, online/ONLN campus, icourse, hybrid).

The program will utilize both in-person lecture, workshop, and lab-based components along with hybrid and flipped classroom techniques for some content. Students will conduct clinical clerkships/rotations during their final year to practically apply the didactic information taught in the first three semesters. These experiences will occur in health care settings (inpatient, outpatient, emergency room, surgery) in local Tucson health systems and other outpatient facilities in southern Arizona.

#### Total Credit Hours:

The number of credit hours required to complete the academic program. 107

#### Proposed Inception Term:

The term and year in which the program will be first delivered (i.e., Spring 2021; Fall 2022). Fall 2024 (Depending on accreditation review)



#### Brief Program Description:

A short outline of the content and skills that the proposed program will deliver. A brief description of how the program fits into the institutional mission of the university. If relevant, please provide succinct information about existing related or complementary academic programming.

The University of Arizona (UArizona) Health Sciences Physician Assistant Program (AZPA) is designed to prepare students from diverse backgrounds to practice medicine as part of an interprofessional health care team. The 26-month program will provide students with graduate level courses and clinical experiential training to become highly competent health care providers with an emphasis on rural primary care medicine. Students will attend classes on campus throughout their didactic and clinical curriculum, while learning anatomy, physiology, immunology, clinical skills, clinical medicine, and physical diagnosis. The clinical phase of the curriculum will involve supervised outpatient and inpatient clinical training experiences in behavioral and mental health; emergency, family, and internal medicine; pediatrics; surgery; and women's health. Graduates will be highly prepared for the required Physician Assistant National Certification Examination immediately following graduation.

#### Learning Outcomes and Assessment Plan:

Define the core concepts and competencies that the program will convey and stipulate how these key learning outcomes will be measured and assessed.

PCPK= Patient-Centered Practice Knowledge; SPH=Society and Population Health; HLC=Health Literacy and Communication; ICPL= Interprofessional Collaborative Practice and Leadership; PLHC=Professional and Legal Aspects of Health Care; HCFS=Health Care Finance and Systems.

Learning Outcome #1: PCPK01- Students will be able to recognize healthy versus ill patients in the context of the patients' lives and determine the stage of illness – acuate, at risk of illness (emerging), or chronic. Students will further demonstrate the ability to utilize up-to-date scientific evidence to inform clinical reasoning and clinical judgement.

#### Concepts:

Distinguishing patient health presentations; disease stages interpretation across all ages; Critical analysis and defense of scientific evidence with respect to patient treatment.

Competencies: Recognize normal and abnormal health states; discern among acute, chronic, and emerging disease states; elicit and understand the stories of individual patients and apply the context of their lives (including environmental influences, cultural norms, socioeconomic factors, and belief) when determining healthy versus ill patients; develop meaningful, therapeutic relationships with patients and their families; and partner with patients to address issues of ongoing signs, symptoms, or health concerns that remain over time without clear diagnosis despite evaluation and treatment.



To be used once the preliminary proposal has been approved.

Assessment Methods: This outcome will be assessed in written examinations, team-based assessments; objective structured clinical examinations (OSCEs); and supervised clinical practice experiences culminating in a summative examination with a combination of written and practical examinations.

Measures: Instructor grading of exams; proctored critical thinking group sessions; individual and team-based readiness exams; and proctored grading of OSCEs with standardized patients; summative examination.

Learning Outcome #2: SPH01- Students will recognize and understand that the influences of the larger community may affect the health of patients and integrate knowledge of social determinants of health into care decisions.

Concepts:

Distinguishing social determinants of health and how they influence the social determinants of health impact of community on individual health. Competencies: Recognize the cultural norms, needs, influences, and socioeconomic, environmental, and other population-level determinants affecting the health of the individual and community being served; recognize the potential impacts of the community, biology, and genetics on patients and incorporate them into decisions of care; demonstrate accountability and responsibility for removing barriers to health; understand the role of structural disparities in causing illness; engage members of the health care team in the surveillance of community resources to sustain and improve health; engage the health care team in determining the adequacy of community resources; reflect on personal and professional limitations in providing care; exercise cultural humility; elicit and hear the story of the individual and apply the context of the individual's life (including environmental influences, culture, and disease) when determining healthy versus ill patients; understand the fundamental principles of epidemiology; recognize the value of the work of monitoring and reporting for quality improvement; and use appropriate literature to make evidence-based decisions on patient care.

Assessment Methods: This outcome will be assessed in written examinations, team-based assessments; objective structured clinical examinations (OSCEs); a community-based needs assessment project related to social determinants of health; and supervised clinical practice experiences culminating in a summative examination with a combination of written and practical examinations.

Measures: Instructor grading of exams; proctored critical thinking group sessions; individual and team-based readiness exams; a communitybased needs assessment project; and proctored grading of OSCEs with standardized patients; summative examination.

Learning Outcome #3: HLCO1- Students will be able to effectively communicate with patients as partners who engage in shared decision-making and who communicate, interpret, and express themselves as individuals with unique personal, cultural, and social values. Concepts:

Communicate effectively (includes culturally appropriate communication approaches in specific patient scenarios); Communication impact and shared-decision making ; Effective patient-provider communication.

Competencies: Establish meaningful, therapeutic relationships with patients and families that allow for a deeper connection and create space for exploration of the patients' needs and goals to deliver culturally competent care; interpret information received by patients to ensure their understanding of the information conveyed to them; recognize the need for and governing mandates that ensure patients have access to interpreters and appropriate resources when barriers to communication arise; demonstrate insight and understanding about emotions and



To be used once the preliminary proposal has been approved.

human responses to emotions that allow one to develop and manage interpersonal interactions; communicate effectively with patients, families, and the public; provide effective, equitable, understandable, and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy, and other communication needs; and organize and communicate information with patients, families, community members, and health team members in a form that is understandable, avoiding discipline-specific terminology when possible, and checking to ensure understanding.

Assessment Methods: This outcome will be assessed in written examinations, team-based assessments; objective structured clinical examinations (OSCEs); and supervised clinical practice experiences culminating in a summative examination with a combination of written and practical examinations.

Measures: Instructor grading of exams; proctored critical thinking group sessions; individual and team-based readiness exams; and proctored grading of OSCEs with standardized patients; summative examination.

Learning Outcome #4: ICPL01- Students will be able to recognize that the patient is at the center of all health care goals and to partner with the patient to define the patient's health care goals.

Concepts:

Physical examination procedures; Case scenarios; Person-centered patient education that encompasses their health care goals.

Competencies: Articulate one's role and responsibilities to patients, families, communities, and other professionals; redirect the focus of the health care team to the needs of the patient; assure patients that they are being heard; ensure patients' needs are the focus over self and others; contribute to the creation, dissemination, application, and translation of new health care knowledge and practices; recognize when referrals are needed and make them to the appropriate health care provider; coordinate care; develop relationships and effectively communicate with physicians, other health professionals, and health care teams; use the full scope of knowledge, skills, and abilities of available health professionals to provide care that is safe, timely, efficient, effective, and equitable; use unique and complementary abilities of all members of the health care team to optimize health and patient care; engage diverse professionals who complement one's own professional expertise, as well as associated resources, to develop strategies to meet specific health care needs of patients and populations; and describe how professionals in health and other rields can collaborate and integrate clinical care and public health interventions to optimize population health.

Assessment Methods: This outcome will be assessed in written examinations, interprofessional team-based assessments; objective structured clinical examinations (OSCEs); and supervised clinical practice experiences culminating in a summative examination with a combination of written and practical examinations.

Measures: Instructor grading of exams; proctored critical thinking group sessions; individual and team-based readiness exams; and proctored grading of OSCEs with standardized patients; summative examination

Learning Outcome #5: PLHC01- Students will be able to practice medicine in a beneficent manner, recognizing and adhering to standards of care while attuned to advancing social justice.

Concepts: Clinical medicine encounters that are respectful and attuned to social justice; Social awareness; Social injustice;

Competencies: Articulate standard of care practice; admit mistakes and errors; participate in difficult conversations with patients and colleagues; recognize one's limits and establish healthy boundaries to support healthy partnerships; demonstrate respect for the dignity and privacy of



To be used once the preliminary proposal has been approved.

patients while maintaining confidentiality in the delivery of team-based care; demonstrate responsiveness to patient needs that supersedes selfinterest; demonstrate accountability to patients, society, and the profession; and exhibit an understanding of the regulatory environment. Advocate for advancing social justice initiatives that illustrate advancement for person-centered clinical practices.

Assessment Methods: This outcome will be assessed in written examinations, interprofessional team-based assessments; objective structured clinical examinations (OSCEs); and supervised clinical practice experiences culminating in a summative examination with a combination of written and practical examinations.

Measures: Instructor grading of exams; proctored critical thinking group sessions; individual and team-based readiness exams; and proctored grading of OSCEs with standardized patients; summative examination

Learning Outcome #6: HCFS01- Students will be able to articulate the essential aspects of value-based health care and apply this understanding to the delivery of safe and quality care.

Concepts:

U.S. health care system; Health care systems of other industrialized nations; National health care system advantages and disadvantages;

Competencies: Recognize that health care is a business; articulate individual providers' value-add to the health care team in terms of cost; and appreciate the value of the collaborative physician/PA relationship.

Assessment Methods: This outcome will be assessed in written examinations, interprofessional team-based assessments; objective structured clinical examinations (OSCEs); and supervised clinical practice experiences culminating in a summative examination with a combination of written and practical examinations.

Measures: Instructor grading of exams; proctored critical thinking group sessions; individual and team-based readiness exams; and proctored grading of OSCEs with standardized patients; summative examination

Projected Enrollment for the First Three Years:

Please provide anticipated enrollment numbers for each of the first three years of the proposed program

30, 64, 72

#### Evidence of Market Demand:

Please provide an estimate of the future state-wide and national demand for graduates of the proposed academic program. Please specify the source (e.g., Burning Glass; Jobs EQ; US Department of Labor) of workforce demand data and detail the assumptions that underpin these projections. If job market data is unavailable or not applicable, please explain why and elaborate another justification for the proposed program.

According to U.S. News & World Report (2021), the Physician Assistant profession is ranked as the #2 best health care job and #3 best overall job<sup>1</sup>, and the WebAdMIT University Advisor Portal report demonstrated an applicant pool of 30,198 with 10,871 matriculating to the over 282 accredited programs in the United States (as cited in the University of Arizona Pre-Health Advising Health Professions Quick Facts<sup>2</sup>. In that same data, the mean number of applicants per program was 414 with 36% of applicants who were accepted into a program, and it also showed 151 unique applicants to PA programs in the United States from our Tucson campus. In that same year 31% of those students were accepted to a program. In comparison, there were 23,493 applicants to osteopathic medical schools and 14,180 to schools of pharmacy.

Similar Programs Offered at Arizona Public Universities:



To be used once the preliminary proposal has been approved.

List existing programs at Arizona public universities that deliver similar concepts and competencies to the proposed new program.

The Northern Arizona University offers a 24-month PA program at their Phoenix Campus, but no other PA programs are housed in southern Arizona.

#### FOR CURRICULAR AFFAIRS USE ONLY

Objection(s) Raised by Another Arizona Public University? YES NO

Has another Arizona public university lodged a written objection to the proposed program with the proposing university and the Board of Regents within seven days of receiving notice of the proposed program?

#### If Yes, Response to Objections:

Please provide details of how the proposing university has addressed the objection. If the objection remains unresolved, please explain why it is in the best interests of the university system and the state that the Board override it.

#### New Resources Required? (i.e., faculty and administrative positions; infrastructure, etc.):

Please provide an estimate of the personnel and infrastructure requirements of the proposed new program and the corresponding costs. Please specify if the proposed program requires new resources (e.g., new faculty lines; a new laboratory; new teaching assistantships or scholarships) or whether resource needs may be met through the reassignment or extension of existing ones. If resource extension or reassignment will impact extant programs and/or operations, please make this clear.

This program will require dedicated faculty, staff, and infrastructure to achieve our goals in alignment with national accreditation standards. This includes access to clinical preceptors in various clinical specialties, access to clinical simulation, standardized patients, cadavers, and cadaveric labs, and other clinical skills training equipment and supplies.

Plan to Request Program Fee/Differentiated Tuition? YES NO

Estimated Amount: TBD

#### Program Fee Justification:

Note: The fee setting process requires additional steps and forms that need to be completed. Please work with your <u>University Fees</u> office to complete a fee request.

Specialized Accreditation? YES

S NO



To be used once the preliminary proposal has been approved.

#### Accreditor:

Accreditation Review Commission on Education for the Physician Assistant, Inc.

#### SOURCES

- Physician Assistant Education Association. (2018). Core competencies for new physician assistant graduates. Retrieved from <u>https://paeaonline.org/wp-</u> <u>content/uploads/2021/01/core\_competencies-new-pagraduates-092018.pdf</u>.
- 2. US News & World Report. (2022). Best jobs. Retrieved from https://money.usnews.com/careers/best-jobs/physicianassistant
- 3. University of Arizona Pre-Health Advising Health Professions Quick Facts 2021. Retrieved from <u>https://theacenter.arizona.edu/sites/default/files/Fact%20She</u> <u>et%20Grid%20All%20Health%20Professions%202021.pdf</u>

University of Arizona AMS **DEMO AREA** 

#### **Physician Assistant Program (UAPA)**

Courses and Activities Mapped to Physician Assistant Program (UAPA)

٢

			Outco	ome		
	Outcome 1: PCPK01 Students will be able to recognize healthy versus ill patients in the context of the patients' lives and determine the stage of illness - acuate, at risk of illness (emerging), or chronic. Students will further demonstrate the ability to utilize up- to-date scientific evidence to inform clinical reasoning and clinical judgement.	Outcome 2: SPH01 Students will recognize and understand that the larger community may affect the health of patients and integrate knowledge of social determinants of health into care decisions.	Outcome 3: HLCOI Students will be able to effectively communicate with patients as partners who engage in shared decision- making and who communicate, interpret, and express themselves as individuals with unique personal, cultural, and social values.	Outcome 4:ICPL01 Students will be able to recognize that the patient is at the center of all health care goals and to partner with the patient to define the patient's health care goals.	Outcome 5: PLHC01 Students will be able to practice medicine in a beneficent manner, recognizing and adhering to standards of care while attuned to advancing social justice.	Outcome 6: HCFS01 Students will be able to articulate the essential aspects of value- based health care and apply this understanding to the delivery of safe and quality care.
Courses and Learning Activities	1		1	<u> </u>	1	
AZPA 601 Foundations in Medicine I	I					
AZPA 611 Clinical Medicine I	I/A	I/A				
AZPA 621 Clinical Skills I		1	I/A	I/A		
AZPA 622 Clinical Skills I Lab		P/A	P/A	P/A	IPA	
AZPA 631 PAs in Health Care						I/A
AZPA 641 Clinical Reasoning I Workshop	P/A		P/A	IPA		I/A
AZPA 651 Evidence-Based Medicine						I/A
AZPA 661 Medical Spanish I		I/A	I/A			
AZPA 662 Medical Spanish I Workshop		ΙΡΑ	P/A			
AZPA 602 Foundations in Medicine II	I/A					
AZPA 612 Clinical Medicine II	I/A	I/A				
AZPA 623 Clinical Skills II		I	I/A	I/A	IPA	
AZPA 624 Clinical Skills III Lab		P/A	P/A	P/A		
AZPA 632 Ethics and Professionalism		IPA				
AZPA 642 Clinical Reasoning II Workshop	P/A		P/A	IPA		I/A
AZPA 652 Health, Justice, and Society I		I/A			I/A	
AZPA 663 Medical Spanish II		I/A	I/A			
AZPA 664 Medical Spanish III Workshop		IPA	P/A			
AZPA 603 Foundations in Medicine III	I/A					
AZPA 613 Clinical Medicine III	I/A	I/A				

3/4/22, 11:31 AM

Curriculum Map - Courses and Activities Mapped to Physician Assistant Program (UAPA)

AZPA 625 Clinical Skills III		I	I/A	I/A		
AZPA 626 Clinical Skills III Lab		P/A	P/A	P/A		
AZPA 633 Health Systems		I/A			IPA	IPA
AZPA 643 Clinical Reasoning III Workshop	P/A		P/A	IPA		I/A
AZPA 653 Health, Justice, and Society II		I/A			I/A	
AZPA 665 Medical Spanish III		I/A	I/A			
AZPA 667 Medical Spanish III Workshop		IPA	P/A			
AZPA 681 Emergency Medicine	IPA	IPA	IPA	ΙΡΑ	IPA	IPA
AZPA 682 Family Medicine	IPA	IPA	IPA	ΙΡΑ	IPA	IPA
AZPA 683 Internal Medicine	IPA	IPA	IPA	IPA	ΙΡΑ	IPA
AZPA 684 Pediatrics	IPA	IPA	IPA	IPA	ΙΡΑ	IPA
AZPA 685 Surgery	IPA	IPA	IPA	IPA	ΙΡΑ	IPA
AZPA 686 Women's Health	IPA	IPA	IPA	IPA	IPA	IPA
AZPA 687 Selective	IPA	IPA	IPA	IPA	IPA	IPA
AZPA 688 Behavioral Medicine	IPA	IPA	IPA	IPA	IPA	IPA
AZPA 692 PA Capstone		IPA			P/A	
Program Assessment Activities						
AZPA 693 Transition to Practice	A	А	А	A	A	А
Survey Exit and Alumni Survey (Indirect)	A	А	А	А	А	А
Legend : Intro	oduced	P Practice	d A	Assessed	I/P	Introduced/Prac

Last Modified: 03/04/2022 11:31:05 AM

Created with watermark

**Graduate Major Peer Comparison Chart**-select two peers for completing the comparison chart from (in order of priority) <u>ABOR</u>-<u>approved institutions</u>, <u>AAU members</u>, and/or other relevant institutions recognized in the field. The comparison chart will be used to identify typically required coursework, themes, and experiences for majors within the discipline. <u>The comparison programs are not</u> <u>required to have the same degree type and/or major name as the proposed UA program</u>. Information for the proposed UA program must be consistent throughout the proposal documents. Delete <u>EXAMPLE columns</u> once ready to submit/upload.

Program name, emphasis (sub- plan) name (if applicable), degree, and institution	<b>Proposed UA Program:</b> University of Arizona Physician Assistant Program (AZPA)	<b>Peer 1:</b> Keck School of Medicine Primary Care Physician Assistant Program at USC	<b>Peer 2:</b> Northern Arizona University Physician Assistant Program
Current # of enrolled students		60/class x 3	50 per class x 2

Major	The University of Arizona (UArizona)	https://keck.usc.edu/physician-assistant-	https://nau.edu/physician-assistant/#
Description.	Health Sciences Physician Assistant	program/about-physician-assistant-program	
Includes the	Program (AZPA) is designed to prepare		
purpose, nature,	students from diverse backgrounds to	The Primary Care Physician Assistant Program	The mission of the Northern Arizona
and highlights of	practice medicine as part of an	at USC is dedicated to the advancement of	University Physician Assistant Program is to
the curriculum,	interprofessional health care team. The	physician assistant education and emphasizes	recruit individuals of the highest possible
-	26-month program will provide	service to the medically underserved. The	quality from diverse backgrounds and life
faculty expertise,	students with graduate level courses	program is committed to preparing students	experiences to the profession.
emphases (sub-	and clinical experiential training to	from diverse backgrounds to positively	We will equip graduates with clinical and
plans; if any), etc.	become highly competent health care	transform the healthcare system. Students,	professional knowledge, skills, and abilities
	providers with an emphasis on rural	graduates, faculty, and staff are committed	to provide high-quality, compassionate
	primary care medicine. Students will	to doing this through collaboration,	medical care for the people of Arizona.
	attend classes on campus throughout	inclusivity, innovation, integrity, excellence,	To read more about our mission, visit <u>our</u>
	their didactic and clinical curriculum,	and joy.	program goals and successes page.
	while learning anatomy, physiology,		
	immunology, clinical skills, clinical	The Master of Physician Assistant Practice	Graduates will study in the state-of-the-
	medicine, and physical diagnosis. The	(MPAP), offered by the Primary Care	art <u>Phoenix Biomedical Campus</u> a 30-acre
	clinical phase of the curriculum will	Physician Assistant Program at the Keck	medical and bioscience campus in
	involve supervised outpatient and	School of Medicine of USC, trains students in	downtown Phoenix. The program operates
	inpatient clinical training experiences in	a range of medical, social and behavioral	in collaboration with the University of
	behavioral and mental health;	sciences required for competent clinical	Arizona – Phoenix College of Medicine.
	emergency, family, and internal	practice. Physician assistants are educated in	Our program offers:
	medicine; pediatrics; surgery; and	basic medical sciences and clinical disciplines,	<ul> <li>a master's degree in <u>Physician</u></li> </ul>
	women's health. Graduates will be	including human anatomy, physiology,	Assistant Studies (MPAS)
	highly prepared for the required	pharmacology and clinical laboratory	high quality didactic and <u>clinical</u>
	Physician Assistant National	medicine. Further, PA students are taught to	<u>experiences</u>
	Certification Examination immediately	hone the cognitive skills required for medical	<ul> <li>interdisciplinary medical education</li> </ul>
	following graduation.	decision-making.	value and affordability
		The 33-month graduate curriculum includes	Upon completion of the program, graduates
		integrated course work in the basic sciences,	will graduate with a Master of Physician
		•	Assistant Studies (MPAS).
		medicine, clinical skills, public health and epidemiology, health care administration,	Assistant studies (IMPAS).
		and psychosocial and behavioral sciences.	
		Students enter the program having	
		completed a Bachelor's degree as well as a	
		set of program prerequisites.	
		set of program prefequisites.	

Target careers Total units required to complete the degree	<ul> <li>Physician Assistants (PAs) work in outpatient and inpatient settings providing clinical care as part of an interprofessional team</li> <li>107</li> </ul>	<ul> <li>Physician Assistants (PAs) work in outpatient and inpatient settings providing clinical care as part of an interprofessional team</li> <li>93.0</li> </ul>	<ul> <li>Physician Assistants (PAs) work in outpatient and inpatient settings providing clinical care as part of an interprofessional team</li> <li>103</li> </ul>
Pre-admission expectations (i.e. academic training to be completed prior to admission)	<ul> <li>A minimum of an earned bachelor's degree or higher degree from a U.S. regionally accredited institution or equivalent*</li> <li>All applicants must be U.S. citizens or permanent residents of the U.S.</li> <li>Submit both the Centralized Application Service for Physician Assistant (CASPA) and University of Arizona applications by the XX deadline (CASPA verified no later than XX)</li> <li>Overall and science GPA of 3.0 or higher (CASPA calculation)</li> <li>Complete prerequisites from a U.S. regionally accredited institution to include:         <ul> <li>a. Sciences:</li> <li>i. General Biology or Human Biology</li> <li>General Chemistry with lab</li> </ul> </li> </ul>	<ul> <li>Science Prerequisites:</li> <li>Human anatomy with lab</li> <li>Human physiology</li> <li>Microbiology with lab.</li> <li>Non-science Prerequisites:</li> <li>Three semester units or 4 quarter units of each of the following: introduction/general psychology and statistics</li> <li>The Physician Assistant (PA) program is administered by the Keck School of Medicine of USC. The minimum standard for admission into the program is a United States bachelor's degree (in any discipline), or its equivalent from a regionally accredited institution, and completion of all program prerequisite coursework. Applicants are expected to have a minimum cumulative undergraduate grade point average of 3.0 (on a scale in which A = 4.0). It is expected that all science prerequisites be completed by the end of the fall semester, in the year prior to matriculation, with a minimum grade point average of 2.75. All prerequisite courses must be completed for a letter grade with at least a grade of C (2.0) earned.</li> </ul>	<ul> <li>Technical standards: <u>https://nau.edu/physician-assistant/technical-standards/</u></li> <li>1. Submit both CASPA and NAU applications by the September 1 deadline (CASPA verified no later than October 1)</li> <li>2. All applicants must be U.S. citizens or permanent residents of the U.S. (click for <u>DACA</u>)</li> <li>3. A minimum of an earned bachelor's or higher degree from a U.S. regionally accredited institution OR equivalent*</li> <li>4. Overall and science course GPA of 3.0 or higher (CASPA calculation)</li> <li>5. Complete prerequisite courses from a U.S. regionally accredited institution</li> <li>6. Minimum of 9 credits of science courses completed in the last 5 years</li> <li>7. A minimum of 500 hours of health care experience is required. Both volunteer and paid experiences are acceptable.</li> </ul>

	iii. Microbiology		8. Three letters of
	with lab		reference/recommendation.
	iv. Human		(CASPA submission only)
	Anatomy		*If the degree was earned outside the U.S.,
	with lab		applicants must:
	v. Human		1. Submit official transcripts in the
	Physiology		language of instruction and an
	b. Non-sciences:		official English translation
	i. Medical		evaluated by either WES or ECE to
	Terminology		the NAU Graduate College and to
	ii. Intro/General		CASPA no later than September 1.
	Psych		WES or ECE evaluation fees are the
	iii. Spanish (1		responsibility of the applicant.
	year of		2. Complete prerequisite courses from
	college		a U.S. regionally accredited
	Spanish or		institution.
	evidence of		3. Demonstrate English proficiency by
	advanced		submitting TOEFL scores with a
	standing by a		minimum score of 100 on the iBT
	U.S.		(internet-based testing) and a
	regionally		minimum of 26 on the speaking
	accredited		component.
	institution)		Download minimum requirements HERE
	Three letters of		
	reference/recommendation (CASPA		
	submission only)		
Major	AZPA 601 Foundations in Medicine I (3)	PCPA 503 Behavioral Sciences I (4)	PHA 500 Human Anatomy (5)
requirements.	AZPA 611 Clinical Medicine I (8)	PCPA 523 Clinical Skills I (4) PCPA 530 Basic	PHA 520 Foundations of Clinical Practice I (3)
List all major	AZPA 621 Clinical Skills I (2)	Medical Sciences (6)	PHA 530 History Taking and Physical
requirements	AZPA 622 Clinical Skills I Lab (1)	PCPA 543 Topics in Medicine I (4)	Examination (4)
including core	AZPA 631 PAs in Health Care (1)	PCPA 506 Behavioral Sciences II (4)	PHA 540 Ethics and Professionalism (2)
and electives. If	AZPA 641 Clinical Reasoning Workshop	PCPA 526 Clinical Skills II (6)	PHA 511 Human Physiology (2)
applicable, list	(1)	PCPA 546 Topics in Medicine II (6)	PHA 570 Diagnostic Medicine (3)
the emphasis	AZPA 651 Evidence Based Medicine (1)	PCPA 509 Behavioral Sciences III (4)	PHA 550 Pharmacology &
requirements.	AZPA 661 Medical Spanish (2)	PCPA 529 Clinical Skills III (6)	Pharmacotherapeutics I (3)
•	AZPA 662 Medical Spanish I Workshop	PCPA 549 Topics in Medicine III (6)	PHA 521 Foundations of Clinical Practice II
Courses listed		PCPA 561 Clinical Assignment I (3.5)	
must include	AZPA 699 Independent Study (1)	PCPA 562 Clinical Assignment II (3.5)	PHA 560 Clinical Decision Making I (3)

course prefix,	AZPA 602 Foundations in Medicine II (3)	PCPA 564a Clinical Assignment IV (3.5)	PHA 580 Clinical Disciplines I (3)
number, units,	AZPA 612 Clinical Medicine II (8)	PCPA 565a Clinical Assignment V (3.5)	PHA 512 Pathophysiology (3)
and title. Mark	AZPA 623 Clinical Skills II (3)	PCPA 564b Clinical Assignment IV (0)	PHA 551 Pharmacology &
new coursework	AZPA 624 Clinical Skills II Lab (1)	PCPA 565b Clinical Assignment V (0)	Pharmacotherapeutics II (3)
(New). Include	AZPA 632 Ethics and Professionalism (1)	PCPA 563 Clinical Assignment III (3.5)	PHA 522 Foundations of Clinical Practice III
	AZPA 642 Clinical Reasoning Workshop	PCPA 566 Clinical Assignment VI (3.5)	(6)
any limite (nestrictions	II (1)	PCPA 567 Clinical Assignment VII (3.5)	PHA 561 Clinical Decision Making II (2)
limits/restrictions	AZPA 652 Health, Justice, and Society	PCPA 568 Clinical Assignment VIII (3.5)	PHA 581 Clinical Disciplines II (3)
needed (house	(1)	PCPA 532 Clinical Skills IV (3)	PHA 590 Clinical Procedures and
number limit,	AZPA 662 Medical Spanish II (1)	PCPA 583 Advanced Topics in PA Studies:	Interventions (3)
etc.). Provide	AZPA 699 Independent Study (1)	Education (4)	PHA 698 Seminar (1)
email(s)/letter(s)	*CMM 501 Human Gross Anatomy (4)	PCPA 586 Advanced Topics in PA Studies:	PHA 689 PA Capstone (2)
of support from	AZPA 603 Foundations in Medicine (3)	Research (4_	PHA 631 Family Medicine (8)
home	AZPA 613 Clinical Medicine III (8)	PCPA 589 Advanced Topics in PA Studies:	PHA 632 Internal Medicine (8)
department	AZPA 625 Clinical Skills III (1)	Medical Care Organization (4)	PHA 634 Pediatrics (8)
head(s) for	AZPA 626 Clinical Skills III Lab (1)		PHA 613 Surgery (4)
courses not	AZPA 633 Health Systems (1)		PHA 615 Women's Health (4)
owned by your	AZPA 643 Clinical Reasoning Workshop		PHA 616 Mental Health (4)
department.	III (1)		PHA 617 Emergency Medicine (4)
acpartmenti	AZPA 653 Health, Justice, and Society II		PHA 620 Elective (4)
	(1) AZPA 663 Medical Spanish III (1)		
	AZPA 603 Medical Spanish III (1) AZPA 699 Independent Study (1)		
	AZPA 699 maependent study (1) AZPA 681 Emergency Medicine (6		
	credits)		
	AZPA 682 Family Medicine (6)		
	AZPA 683 Internal Medicine (6)		
	AZPA 685 Pediatrics (6)		
	AZPA 686 Surgery (6)		
	AZPA 687 Behavioral Medicine (3)		
	AZPA 688 Women's Health (6)		
	AZPA 689 Selective (6)		
	AZPA 692 PA Directed Research		
	(Capstone) (2)		
	AZPA 693 Transitions to Practice (1)		
	AZPA 699 Independent Study (1)		
	*All New Coursework with one		
	exception highlighted in bold		

Research methods, data analysis, and methodology requirements (Yes/No). If yes, provide description.	Yes. Students are taught research methods, data analysis, and concepts of methodologic principles as part of the evidence-based medicine focus of their AZPA 651 course.	Yes. Students are taught research methods, data analysis, and concepts of methodologic principles as part of several courses in the curriculum with increasing complexity to the discussions.	Yes. Students are taught research methods, data analysis, and concepts of methodologic principles as part of several courses in the curriculum including PHA 560 and 561.
Internship, practicum, applied course requirements (Yes/No). If yes, provide description.	Yes. Students must complete 7 required rotations and 1 elective rotation with clinical preceptors across a variety of clinical specialties.	Yes. Students must complete 8 required rotations and a senior longitudinal 12 week rotation in their 6 <sup>th</sup> and final semester with clinical preceptors across a variety of clinical specialties.	Yes. Students must complete 7 required rotations and 1 elective rotation with clinical preceptors across a variety of clinical specialties.
Master thesis or dissertation required (Yes/No). If yes, provide description.	Yes. Students complete a directed research master capstone project focused on community health. This includes a required needs assessment, subsequent implementation of a project focused on the previously determined need(s), and analysis of the impact. This is completed during the clinical phase of the curriculum with a dedicated period for project completion.	No. Students do not complete a master thesis or directed capstone project.	Yes. Students complete a directed research master capstone project that results in a poster or scholarly presentation. It is housed in PHA 689.
Additional requirements (provide description)	Students must successfully complete a summative examination that includes a comprehensive written examination across their medical knowledge in addition to a practical objective structured clinical examination (OSCE) with standardized patients as actors portraying various disease states. Additional interstation examination exercises are included to assess student	Students must successfully complete a summative examination that includes a comprehensive written examination across their medical knowledge in addition to a practical objective structured clinical examination (OSCE) with standardized patients as actors portraying various disease states. Additional interstation examination exercises are included to assess student proficiency in various clinical skills i.e.	Students must successfully complete a summative examination that includes a comprehensive written examination across their medical knowledge in addition to a practical objective structured clinical examination (OSCE) with standardized patients as actors portraying various disease states. Additional interstation examination exercises are included to assess student proficiency in various clinical skills i.e.

proficiency in various clinical skills i.e.	interpreting an ECG and radiographs,	interpreting an ECG and radiographs,
interpreting an ECG and radiographs,	suturing, etc.	suturing, etc.
suturing, etc. during AZPA 693		

\*Note: comparison of additional relevant programs may be requested.

# The University of Arizona®

BUDGET PROJECTION FORM

Name of Proposed Program or Unit: Physician Assistant Program				
	Projected			
Budget Contact Person: Pamela Ray	1st Year	2nd Year	3rd Year	
	2024- 2025	2025 - 2026	2026 - 2027	
METRICS				
Net increase in annual college enrollment UG	-	-	-	
Net increase in college SCH UG	-	-		
Net increase in annual college enrollment Grad	30	64	72	
Net increase in college SCH Grad	1,200	2,944	3,852	
Number of enrollments being charged a Program Fee				
New Sponsored Activity (MTDC)	-	30,000	40,000	
Number of Faculty FTE	5	7	8	
FUNDING SOURCES				
Continuing Sources				
UG RCM Revenue (net of cost allocation)	-	-	-	
Grad RCM Revenue (net of cost allocation)	415,529	935,755	1,237,382	
Program Fee RCM Revenue (net of cost allocation)	594,828	1,268,966	1,725,001	
F and A Revenues (net of cost allocations)	-	-	-	
UA Online Revenues	-	-	-	
Distance Learning Revenues	-	-	-	
Reallocation from existing College funds (State Funding)	-	-	-	
Other Items (Sponsored Projects)		30,000	40,000	
Total Continuing	\$ 1,010,357	\$ 2,234,722		
	. , ,	. , ,		
One-time Sources				
College fund balances	300,000			
Institutional Strategic Investment	-	-	-	
Gift Funding	200,000	200,000	200,000	
Other Items (attach description)				
Total One-time	\$ 500,000	\$ 200,000	\$ 200,000	
TOTAL SOURCES	\$ 1,510,357	\$ 2,434,722	\$ 3,202,383	
EXPENDITURE ITEMS				
Continuing Expenditures				
Faculty	834,442	1,114,356	1,266,535	
Other Personnel	231,060	235,681	240,395	
Employee Related Expense	330,306	418,511	467,148	
Graduate Assistantships				
Other Graduate Aid				
Operations (materials, supplies, phones, etc.)	55,000	102,600	114,280	
Additional Space Cost				
Other Items (attach description)				
Total Continuing	\$ 1,450,808	\$ 1,871,148	\$ 2,088,358	
One-time Expenditures				
Construction or Renovation				
Start-up Equipment	50,000	200,000	100,000	
Replace Equipment				
Library Resources				
Other Items (attach description)				
Total One-time	\$ 50,000	\$ 200,000	\$ 100,000	
TOTAL EXPENDITURES	\$ 1,500,808	\$ 2,071,148	\$ 2,188,358	
Not Draigstad Eiscal Effact	é 0.540	¢ 202 772	¢ 1011055	
Net Projected Fiscal Effect	\$ 9,549	\$ 363,573	\$ 1,014,026	



1501 N. Campbell Ave. P.O. Box 245044 Tucson, AZ 85724-5044 Tel | (520) 626-6084 Fax | (520) 626-2097 www.cmm.arizona.edu

Dear members of ABOR,

I am writing to register my support for the inclusion of CMM 501, Human Gross Anatomy, into the curriculum for the Physician Assistant (PA) program. The course is a clinically focused, graduate-level survey of the human body covering all organ systems.

Currently, the course serves graduate students at the College of Medicine, the pre-medical admissions pathway graduate program (P-MAP), and the certified nurse anesthetist (CRNA) doctoral program. The course has the capacity to include the inaugural class of the PA program (30 students), and room to grow as the program builds to its ultimate size at 50 students.

Thank you and feel free to contact me if you have any questions.

Sincerely,

Jamos Prist

James Proffitt, PhD jvproffitt@email.arizona.edu Assistant Professor, College of Medicine-Tucson Lead Faculty, CMM 501