INDIVIDUAL STUDENT ASSESSMENT PLAN

6H-65D ARMY
B-300-0031 Phase 1 NAVY
B-300-0032 Phase 2 NAVY
J50QA42GI-01AA Phase 1 AIR FORCE
J50QB42GI-02AA Phase 2 AIR FORCE
200655 COAST GUARD

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INDIVIDUAL STUDENT ASSESSMENT PLAN (ISAP)
Interservice Physician Assistant Program (IPAP)

I. PREFACE. This program is designed to fill the needs of the uniformed services by providing highly qualified entry-level physician assistants (PAs). This assessment plan establishes policies, assigns responsibilities, and prescribes procedures for the execution of the Interservice Physician Assistant Program (IPAP). The policies, procedures, and responsibilities prescribed herein shall apply to student members of all military branches participating in this education program.

II. PROGRAM DESCRIPTION.

A. Purpose. The purpose of the IPAP is to provide the uniformed services with highly competent, compassionate physician assistants who model integrity, strive for leadership excellence, and are committed to lifelong learning.

B. Scope.

1. The IPAP is a 29-month, federally-funded graduate program, consolidated via the Interservice Training Review Organization (ITRO) in 1996. The IPAP is a two-phased program. Phase 1 is 64 weeks in length (66 total to include leave/holidays) and is conducted at the Graduate School, Health Readiness Center of Excellence (HRCoE), Army Medical Department Center & School (AMEDDC&S), Fort Sam Houston, Joint Base San Antonio. Successful completion of all academic and non-academic requirements for Phase 1 culminates in the award of a Bachelor of Science (BS) degree from the affiliated university. Phase 2 is 55 weeks in length (57 total to include leave/holidays) and is conducted at designated Army, Navy, and Air Force medical treatment/training facilities (MTFs). Successful completion of all academic and non-academic requirements for Phase 2 culminates in the award of a master's degree from the affiliated university. All students must be commissioned/commissionable to be awarded an academic degree.

2. The IPAP is dedicated to educating and developing qualified students as PAs. In order to accomplish this, the program's curriculum and standards must be in compliance with civilian regulatory agencies as well as the policies and regulations of the participating military branches. The Council on Occupational Education accredits the AMEDDC&S HRCoE. The Accreditation Review Commission on Education for the Physician Assistant, Inc. (ARC-PA) accredits the IPAP.

3. The entire 29-month program of instruction is designed to meet the needs of the Army, Navy, Air Force, and Coast Guard; preparing graduates who meet uniformed services credentialing standards and are ready for clinical practice upon program completion and national certification. The competency-based curriculum supports the PA Competencies and the PA National Certification Examination (PANCE) blueprint administered by the National Commission on Certification of Physician Assistants (NCCPA). Please see Appendix B – IPAP Course Title & Credits.

4. The program philosophy is based upon a cohort model. All students take a common core curriculum and share a consistent course load throughout the 29-month program. Students may not be transferred into the IPAP with advanced standing status.
C. Prerequisites. The Interservice Physician Assistant Program Course, (6H-65D) prerequisites are listed in the Army Training Requirements and Resources System (ATRRS) located at www.atrrs.army.mil.

1. To enter the program, an individual must:
   a. Be a uniformed service member
   b. Have completed a minimum of 60 transferable college credits from an accredited educational institution(s), and accepted by the affiliated university
   c. Be screened by the affiliated university, and selected via a service-specific selection board

2. Starting with Class 2-19 (convening January 2019), all incoming students must meet the program-defined minimum standard of 60 college credits, SAT within five years, minimum overall GPA of 2.5, minimum sciences GPA of 3.0, minimum of 40 hours of PA shadowing, BLS provider card, and all sciences completed within ten years.

D. Service Obligation. Service obligations are outlined in service-specific recruitment/accession or training regulations. These regulations include: Army Regulation (AR) 614-200, Enlisted Assignments and Utilization Management; AR 601-20, The Interservice Physician Assistant Training Program and AR 351-3, Professional Education and Training Programs of The Army Medical Department, for the Active Component; National Guard Regulation (NGR) 351-1, Individual Military Education and Training, for the Army National Guard; AR 135-200, Active Duty For Missions, Projects, and Training For Reserve Component Soldiers, for the United States Army Reserves; Office of the Chief Naval Operations Instruction (OPNAVINST) 6110.1 series, Physical Readiness Program, for the Navy; Air Force Instruction (AFI) 36-2107, Active Duty Service Commitments for the Air Force (AF) and COMDTINST 1524.1 series, Coast Guard Advanced Education Program. See Appendix A for referenced publications.

III. PROGRAM REQUIREMENTS

A. Academic Standards. Students will be evaluated on the ability to pass critical program objectives and standards. This includes demonstration of acceptable interpersonal skills, appropriate peer, patient, and professional interactions, and the ethical behaviors expected of a health care provider and military officer. Phase 1 accomplishment is evaluated through the use of written, oral, and practical (performance) examinations, to include writing assignments. Student academic progress will be constantly evaluated throughout each semester. In Phase 2, the ability to meet critical objectives is demonstrated to site coordinators and clinical preceptors who evaluate student competence through the use of both written, practical (performance) examinations, and direct observation of patient encounters.

All students are required to earn passing scores for each component of the Directed Studies course; including the master’s project, oral and written presentations, professional attributes, and summative Objective Standardized Clinical Exam (OSCE). Additionally, all Phase 2 students are required to comply with established standards for patient and procedure logging.
1. In Phase 1, academic success is defined as achievement of a minimum grade of 75% in each course AND an overall test point average (TPA) of 80% in each semester.

2. In Phase 2, academic success is defined as achievement of a minimum grade of 75%:
   (a) On each rotation examination.
   (b) On each rotation clinical preceptor evaluation.
   (c) On all components of the Directed Studies course.

B. Nonacademic Standards

1. Standards of Conduct. As a military member, students will be held to the highest standards of behavior. Proper personal appearance, respectful behavior, and subordination to those in authority will be maintained at all times. Actions such as substance abuse, disruptive behavior in or out of class, and other actions that display the military service in an unfavorable light will be viewed as unacceptable performance. Students engaging in these actions/behaviors will be subject to elimination from the program through the service-specific chain of command, and may result in actions under the Uniform Code of Military Justice (UCMJ). Each student will review this ISAP, and will sign & date a statement signifying they have read, understood, and will comply with the document (Appendix D, Student Acknowledgement Form).

2. Physical Training. Physical fitness and weight control standards are essential to the mission of the uniformed services. All students are expected to actively participate in physical training and are provided ample time to do so. Students must maintain their service-specific height and weight standards during the 29-month program. All students must pass service-specific physical fitness examinations in order to successfully remain in the program. Physical fitness exam scores will not be used to determine course grades. Students who do not adhere to physical fitness and weight control standards may be referred for processing IAW service-specific regulations. See Appendix E for service-specific regulations.

   a. Should a student enter the IPAP with a medical condition restricting him or her from full participation in the program or become so restricted, the Program Director may recommend, to the Graduate School Dean, that the student be relieved, recycled, or permitted a new start. A medical condition will not be a barrier to the continuation of education unless it is (1) deemed an excessive constraint to the student or his or her colleagues or; (2) the student will miss 25% or more of the scheduled class meetings in one or more courses.

   b. Pregnancy will not be a barrier to continuation of training unless (a) medically deemed as a barrier or (b) the student will miss 25% or more of the scheduled class meetings in one or more courses. Should a student enter the program while pregnant, or should she become pregnant during the program, her service chain of command and a credentialed provider will counsel her. If the credentialed provider or Program Director determines the pregnancy will negatively impact the student's ability to successfully complete the program, a recommendation for relief/recycle/new start will be initiated.
c. All students must be medically qualified to serve as a commissioned officer and certified physician assistant (PA-C).

IV. PURPOSES OF EVALUATION
A. To measure the degree to which the student has achieved stated course objectives.

B. To provide students with feedback on academic progress, achievement, and competency development.

C. To rank-order students.

D. To support decisions for counseling, probation, and relief procedures.

E. To ensure that each student is capable of fulfilling the duties of a military officer and demonstrates the fundamentals of professional ethics.

F. To provide the Program Director feedback on the effectiveness of instruction and instructional materials.

G. To provide data for ongoing program self-assessment and accreditation compliance.

H. To ensure that each student has successfully met all academic and non-academic requirements for program advancement and completion.

I. To provide measurable outcome criteria for granting a certificate of completion from the AMEDDC&S HRCoE, and for granting the BS and master's degrees from the affiliated university upon successful completion of Phase 1 and 2 respectively.

V. POLICIES/PROCEDURES

A. Examination/Evaluation Procedures.

1. Phase 1 Didactic Evaluation. Students are evaluated for didactic knowledge and skills using a variety of methods which may include examinations (oral and written, performance/practical), quizzes, papers, oral presentations, projects, group activities, and class participation. Written examinations will normally be administered via the Blackboard learning management system.

2. Phase 2 Clinical Evaluation. Students are evaluated for didactic knowledge, clinical knowledge, and skills using a variety of methods which may include examinations (oral and written, performance/practical), quizzes, papers, oral presentations, projects, group activities, clinical rounds, patient & procedure logging, and clinical preceptor evaluations. Clinical rotation written examinations will normally be administered via the Blackboard learning management system. Clinical preceptor evaluations will normally be administered via the MyEvaluations.com clinical management system.

B. Reteach/Retest.

1. Phase 1. Students who fail a hands-on performance examination such as Physical Exams practical, Whole Man, Clinical Correlations, or Objective Standardized Clinical
Examination (OSCE) must seek counseling and remediation, followed by a retest. One retest is allowed for each performance examination. Students who fail a written exam must also seek counseling and remediation, but are not offered the opportunity for a retest.

2. Phase 2. Students who fail the hands-on Summative OSCE must seek counseling and remediation, followed by one additional opportunity to retest and pass the Summative OSCE. Students who fail a clinical rotation exam must seek counseling and remediation, followed one retest opportunity to retake another version of that clinical rotation examination.

C. Student Counseling.

1. Assignment of counselors. In Phase 1, each student will be assigned a principal faculty member as Academic Counselor. In Phase 2, the Phase 2 Site Clinical Coordinator will serve as Academic Counselor.

2. Counseling sessions. Counseling gives the student regular time throughout the program to review academic progress. It affords frequent opportunities for counselors to affect the academic and professional development of students. Students may request counseling with program faculty at any time.

   a. Routine counseling. Counseling sessions are conducted upon arrival and will continue at least monthly throughout Phase 1, and NLT the close of each rotation in Phase 2. The student’s progress is discussed, summarized in writing on the routine counseling form, and presented to the student. The student is provided the opportunity to take an active part in self-evaluation and express his/her views in writing on the counseling form.

   b. Threshold counseling. Students may receive counseling in addition to routine monthly counseling. Students on probation status must seek counseling a minimum of twice monthly.

      (1) Students may have various issues (physical, mental health, family, financial, etc.) impacting their performance at any time during the course. The student may seek the guidance of their Academic Counselor, Class Advisor, Senior Service Representative, and/or Program Director as needed.

      (2) Students must seek counseling after each examination failure and for any semester TPA less than 80 percent. Any student failing an examination is required to make an appointment for counseling with the course instructor within 24 - 48 hours of completing the examination. The student must also make an appointment with their Academic Counselor after they have seen the course instructor.

3. Counseling session documentation.

   a. Each counseling session must be documented, dated, signed by the faculty member, and signed by the counselee along with a statement such as, “I have been counseled on this date”, or “I concur/non-concur with this counseling statement.” The student signs the counseling form to indicate that he/she was counseled and did review the written statements, even if the student does not concur with this written evaluation.
b. All unscheduled counseling must be documented in the counseling record and should be countersigned by the student within 24 hours. This provides proof that the student is aware of any negative or positive information on record about him/her.

4. Additional counselors. Community Behavioral Health and Stress Management counselors are available to the students. Legal assistance officers are also available.

D. Grading.

1. In Phase 1, grades are recorded as numerical grades and computed as the average of the written examination scores within a course. The minimum passing grade on each singular examination is 75%. You must obtain at least 75% to pass each course. Successful completion of all performance examinations is defined as achieving a minimum score of 75%. One retest is allowed for each performance examination (such as Physical Exams, Whole Man, or OSCE), with a maximum grade of 75% awarded on a performance retest. Failure to meet this standard will result in the student being referred to the Performance Review Board (PRB). The master's project paper will be graded on a numerical scale, with a minimum grade of 75% needed to pass. One revision will be accepted for a re-grade, with a maximum grade of 75% awarded on a re-graded paper. A re-grade failure will be referred to the PRB.

2. In Phase 2, you must score at least 75% on the written examination given at the end of each rotation and at least 75% on the clinical preceptor evaluations submitted by the preceptors at the end of each rotation. The score on the clinical preceptor evaluation will count as 75% of the final rotation grade, and the score on the written examination will count as the remaining 25%. Exceptions:

a. Elective Rotation. There is no written examination, so the clinical preceptor evaluation accounts for 100% of the rotation grade.

b. Directed Studies. Students must earn a passing grade of at least 75% in each component in order to pass the course. The course grade is computed as follows:

- Investigational Research/Review Paper = 30%
- Objective Standardized Clinical Exam (OSCE) = 30%
- Defense of the above cited Investigational Research/Review paper = 10%
- Disease of current military significance presentation = 10%
- Disease or medical topic of personal interest presentation = 10%
- Professional Attributes = 10%

3. Percentage grades are rounded to the lowest whole number. Numerical grades will then be converted to letter grades based on the following grading system:

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<tr>
<th>GRADE</th>
<th>PERCENTAGE EQUIVALENT</th>
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<tbody>
<tr>
<td>A+</td>
<td>97-100</td>
</tr>
<tr>
<td>A</td>
<td>90-96</td>
</tr>
<tr>
<td>B+</td>
<td>87-89</td>
</tr>
<tr>
<td>B</td>
<td>80-86</td>
</tr>
<tr>
<td>C+</td>
<td>78-79</td>
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</table>
E. Probation

1. Purpose of probation. Probation is a positive action intended to help students recognize weaknesses and correct them through increased attention and remediation of identified deficiencies. Probation also serves as a period of increased student performance documentation for the benefit of the student and faculty. In order to decrease demands during probation and to enhance your opportunity to succeed in satisfactory program completion, students will be relieved from all administrative and leadership duties (i.e., class/squad leader).

2. Procedures for probation. The student is notified of probationary status verbally and by written documentation in the student academic record. Documentation will include the category of probation (academic vs. nonacademic), reason(s) probation was initiated (i.e., failure to meet specific objectives), the anticipated duration of the probation, and suggestions for improving academic or nonacademic performance. The student acknowledges by signing the counseling statement. Documentation of probation is maintained in the student's academic record for two years following his/her successful completion of the IPAP. After that time, all counseling/probation records are destroyed. Counseling/probation records of students who do not successfully complete the IPAP are kept indefinitely.

3. Students on probation are ineligible for any favorable actions such as academic awards or honors.

   a. Phase 1. Student academic progress will be reviewed on or about the 8th, 12th, and 16th weeks of each semester. Students failing to maintain a minimum 80% semester cumulative TPA will be placed on academic probation. Students will remain on academic probation until reevaluation at the next performance review board.

   b. Phase 2. Students will be placed on academic probation when the end-of-rotation examination grade is less than 75%, or if the clinical preceptor evaluation grade is less than 75%. Students will remain on academic probation until they successfully pass the rotation re-test, and the following rotation examination & clinical preceptor evaluation.

5. Nonacademic Probation. Criteria:
   a. Any student who displays personal behaviors which interfere with the conduct of the class/rotation, fails to meet the prescribed standards of behavior, constitutes a habitual disciplinary problem, or in any way demonstrates unsuitability for the PA profession, may be considered for nonacademic probation. These cases will be referred to the appropriate Senior Service Representative (SSR) and Program Director. Students placed on nonacademic probation will remain on nonacademic probation at the discretion of the Program Director.

   b. Readiness. This applies to students failing to maintain body weight and physical fitness standards IAW service-specific guidelines. Affected students will remain on nonacademic probation until such time as service-specific standards are met. SSRs will initiate actions, with status updates provided to Program Director.
USE OF PROBATION DOES NOT REPLACE NOR PRECLUDE FURTHER ACTION UNDER THE UCMJ.

F. Academic Standing. A student is considered to be in good academic standing when any of the following criteria applies:

1. Phase 1. Student has an average of ≥75% in each course. Student has a semester cumulative TPA of ≥ 80%. Student has failed no examinations.

2. Phase 2. Student has achieved a minimum of 75% on all rotation examinations and clinical preceptor evaluations. Student has failed no examinations.

G. Student Relief/Recycle. Students may be relieved from this program for academic and/or nonacademic reasons. Depending on the reason for relief from the program, a student may receive a negative service evaluation. Relief measures will be recommended to the Dean, Graduate School, when a student fails to maintain the standards of performance as outlined in this ISAP. Relief may be processed for a combination on academic and/or nonacademic reasons. The AMEDDC&S & FSH Regulation 351-12 and ITRO MOA provide guidance.

1. Academic Relief.

   a. Phase 1. Academic success in Phase 1 is predicated upon three principles; Successful completion of each course of instruction with a minimum of 75%, maintenance of a cumulative semester average of at least 80%, and successful completion all performance examinations and paper requirements.

      (1) On or about the 8th, 12th, and 16th weeks of each semester, a PRB will convene to review the performance status and counseling folder for each student with a semester cumulative TPA below 80%. For each student whose case is reviewed, the PRB will make a recommendation for relief recycle, or retain to the Program Director.

      (2) If a student fails to achieve an end of course grade of at least 75%, the student will be referred to the PRB for review. The PRB recommendation for relief or recycle will be forwarded to the Program Director.

   b. Phase 2. Academic success in Phase 2 is based on the following principles; Successful completion of each clinical rotation with a combined grade of at least 75% and a combined grade of at least 75% in the Directed Studies course.

      (1) A student scoring less than 75% on any end-of-rotation examination will be placed on probation and given one opportunity to retest. If the student passes the retest, a score of 75% is assigned, and the student progresses to the next rotation. If student fails the retest, he/she will meet a Phase 2 PRB for consideration of relief or recycle. Student failing two end-of-rotation exams will meet a Phase 2 PRB for consideration of relief or recycle.

      (2) A student scoring less than 75% on the clinical preceptor evaluation will be placed on academic probation and will meet a Phase 2 PRB for consideration for relief or recycle. If student is allowed to continue in the program, he/she will repeat the failed rotation. The maximum grade on a repeated rotation will be 75%. If the time spent on the repeated rotation exceeds 14 days, the student must be considered for relief or recycle.
c. Students may either accept the Program Director's recommendation, appeal the decision to the Dean, Graduate School, or elect to request resignation from the program.

2. Nonacademic Relief (Phase 1 & 2).

a. Nonacademic relief procedures are to be initiated by your Class Advisor, Program Director, or Component Commander in Phase 1 IAW service-specific rules, regulations, and/or standards. In Phase 2, nonacademic relief procedures are to be initiated by the Phase 2 Site Clinical Coordinator, Phase 2 Site Medical Director, or Phase 2 Component Commander. Nonacademic reasons for relief may include, but are not limited to the following:

(1) Violation of the IPAP Academic Honor Code (see Appendix C).

(2) Inappropriate Conduct. Students will conduct themselves as military officers/officer candidates at all times, on & off duty. Proper personal appearance and hygiene, respectful behavior, and deference to those in authority will be maintained while students are in the program. Actions that portray the military in an unfavorable light will be viewed as unacceptable behavior.

(3) Dishonesty. Possible relief for academic dishonesty applies not only to the student guilty of such behavior, but also to students who knowingly observe or tolerate such behavior without reporting it to a faculty member or Program Director.

(4) Unauthorized absence from an assigned place of duty and training.

(5) Repeated tardiness or repeated absences from class and or examinations.

(6) Use of obscene, profane, or abusive language.

(7) Disruptive behavior.

(8) Substance abuse.

(9) Fraternization.

(10) Sexual harassment.

(11) Failure to maintain established service-specific physical fitness and weight standards.

(12) Behavior unbecoming a health care professional.

(13) Failure to comply with established standards for patient, procedure, and rotation hours logging.

b. Nonacademic situations that may interfere with your education and training may be categorized as either disciplinary or non-disciplinary.
(1) If disciplinary in nature, your service-specific command will investigate and notify the Program Director. If your command determines that there is no evidence of misconduct, you may continue in the program. If you have been determined to have engaged in misconduct, your command will pursue either non-judicial or UCMJ action. Your command will either disenroll you from the program or allow you to continue in the program.

(2) If non-disciplinary in nature, your service-specific command will investigate and notify the Program Director. If your command determines that your situation is resolvable, you may be recommended for retention with your class. If your command determines that your situation is not resolvable within a reasonable period of time, you may be disenrolled.

(3) In Phase 2, in collaboration with the program Phase 2 site coordinator, military treatment facility (MTF) Education Department / command may suspend Phase 2 training within the facility resulting in a hold status and referring the student back to the AMEDDC&S HRCOE program director for determination of continuance in the program IAW AMEDDC&S HRCOE Regulation 351-12. While in a hold status, you will be released to the chain of command for accountability during the period of consideration of further proceedings.

USE OF NONACADEMIC RELIEF/RECYCLE DOES NOT REPLACE NOR PRECLUDE FURTHER ACTION UNDER UCMJ.

3. Voluntary Resignation/Withdrawal. A student may request voluntary resignation from the program. This request must be in writing and submitted to the Program Director, via the appropriate SSR. The Program Director may accept such a request to avoid unnecessary administrative delay, and will expedite routing to the Dean, Graduate School for approval.

4. Recycle. The program recognizes that some students may suffer from a sudden illness or other serious and unforeseen event or set of circumstances which adversely affects his/her academic performance. These mitigating circumstances may include medical matters or events directly affecting someone other than the student, such as a member of the immediate family.

   a. Program Recycle. This is evaluated on a case-by-case basis. There must be documented, verifiable evidence of mitigating circumstances.

   b. Students will be afforded no more than one program recycle opportunity.

VI SPECIAL RECOGNITION FOR STUDENTS

A. Academic Awards

   1. Honor Graduate. Class ranking is calculated on the basis of total earned academic points at the end of phase 1, with the top 10% of students being considered for academic honors. One Distinguished Honor Graduate may be designated from within this cohort, with the remainder (of this top 10%) receiving Honor Graduate designation.

   2. Honor Society. Students with a minimum TPA of 90% at the end of Phase 1 may be considered for Pi Alpha nomination. This is the PA honor society (administered by the Physician Assistant Education Association); existing for the promotion and recognition of significant academic achievement, leadership, research, research, community/professional service, and the encouragement of a high standard of character and conduct among PA students and graduates. The program is limited to selecting a maximum of 15% students for induction per cohort.
3. Students are ineligible for special recognition if they have received disciplinary action or counseling for improper behavior/personal conduct. Students who have been recycled are ineligible for academic honors. The program does not bestow academic awards upon conclusion of Phase 2.

B. Nonacademic Awards. Nonacademic awards may be bestowed by individual service branches separate from program activities (such as Closing Ceremony).

VII. ELIGIBILITY FOR DIPLOMAS/CERTIFICATES OF COMPLETION
A. Letter grades will be calculated and reported to the affiliated university. Grades for courses attempted by students who are relieved, recycled, or resigned will be reported as withdrew passing, withdrew incomplete, or withdrew failing at the time of the student’s change of status, in accordance with the affiliated university’s policy.

B. A BS degree from the affiliated university will be awarded upon successful completion of all academic and nonacademic requirements of Phase 1. An AMEDDC&S HRCOE certificate of completion, and a master’s degree from the affiliated university will be awarded upon successful completion of all academic and nonacademic requirements of Phase 2. Students must be medically qualified, commissioned/commissionable, and have met all service branch requirements in order to be recommended for the certificate of completion and master’s degree. Students who do not complete all requirements for program graduation will not be certified as eligible to sit for the national certification examination (PANCE).

VIII. PROCEDURES FOR STUDENTS TO OBTAIN DOCUMENTATION OF ACADEMIC COMPLETION. Academic transcripts are available from the affiliated university. Program graduates must contact the affiliated university’s registrar office and pay any applicable transcript fees. The AMEDDC&S does not provide transcripts.

IX. ACADEMIC EVALUATION REPORTS. Student performance and behavior will be noted on the appropriate service-specific evaluation form, and will become a part of each service member’s permanent record. Army students will receive a DA Form 1059, Service School Academic Evaluation Report, at the end of Phase 1 and again at the end of Phase 2. Navy students, at the end of each phase, will be given NAVPERS 1070/613, Administrative Remarks and a “Non-observed” enlisted evaluation report NAVPERS 1616/26, Evaluation Report & Counseling Record. Air Force students will receive AF Form 475, Education/Training Report at the end of Phase 1 and AF Form 494, Academic/Clinical Evaluation Report, at the end of Phase 2. Coast Guard students will receive a CG-3307 form, for both enlisted and officers with further remarks noted on the officer’s DUINS OER comment sections if needed with the 3307 attached.

X. PROGRAM SELF-ASSESSMENT. The IPAP has a robust and systematic process of ongoing self-assessment to review the quality and effectiveness of educational practices, policies, and outcomes. Graduate School students are expected to actively engage in program self-assessment at every opportunity. This includes timely completion of course & faculty critiques, Phase 1 and 2 Exit Interviews, and clinical preceptor & rotation evaluations. This also includes active participation in Phase 2 site accreditation inspections, climate assessments, and ARC-PA accreditation site visits. Student feedback is vital to the IPAP mission, accreditation maintenance, and the continued pursuit of academic excellence.
## References

**Army**

- **AMEDDC&S Form 1218-W**: DMS Phase 2 Questionnaire for Interservice Physician Assistant Program (IPAP) End of Phase 2 (Web Survey Only)
- **AMEDDC&S Form 1228-W**: DMS Phase 2 Questionnaire for IPAP End of Rotation Student Critique (Web Survey Only)
- **AMEDDC&S & FSH Reg. 351-12**: Schools, Enrollment, Relief, New/Start/Recycle, Administrative Disposition, and Counseling of Student Personnel
- **AR 135-200**: Active Duty for Missions, Projects and Training for Reserve Component Soldiers
- **AR 351-3**: Professional Education and Training Programs of the Army Medical Department
- **AR 614-200**: Enlisted Assignments and Utilization Management
- **AR 601-20**: The Interservice Physician Assistant Training Program
- **DA Form 1059**: Service School Academic Evaluation Report (AER)

**National Guard**

- **NGR 351-1**: Individual Military Education and Training

**Navy**

- **OPNAVINST 6110.1 (OPNAVINST) 6110.1**: Physical Readiness Program
- **NAVPERS 1070/613**: Administrative Remarks
- **NAVPERS 1616/26**: Evaluation Report and Counseling Record
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<th><strong>Air Force</strong></th>
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<tbody>
<tr>
<td>AF Form 475</td>
<td>Education/Training Report</td>
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<td>AF Form 494</td>
<td>Academic/Clinical Evaluation Report</td>
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<td>AFI 36-2107</td>
<td>Active Duty Service Commitments</td>
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<tr>
<td>COMDTINST 1524.1 series</td>
<td>Coast Guard Advanced Education Program</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Department of Defense</strong></th>
<th></th>
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<tbody>
<tr>
<td>Interservice Training Review Organization MOA</td>
<td>ITRO MOA</td>
</tr>
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</table>
University of Nebraska Medical Center  
School of Allied Health Professions  
Interservice Physician Assistant Program (IPAP)  
Curriculum (Effective for Spring 2016 and after)  

**PHASE I. Freshman Semester**

<table>
<thead>
<tr>
<th>Course #</th>
<th>Course Title</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>IPAP 500</td>
<td>Anatomy and Physiology I</td>
<td>7</td>
</tr>
<tr>
<td>IPAP 502</td>
<td>Biochemistry</td>
<td>3</td>
</tr>
<tr>
<td>IPAP 503</td>
<td>Microbiology</td>
<td>5</td>
</tr>
<tr>
<td>IPAP 504</td>
<td>Clinical Laboratory</td>
<td>4</td>
</tr>
<tr>
<td>IPAP 506</td>
<td>Med / Law Ethics</td>
<td>2</td>
</tr>
<tr>
<td>IPAP 608</td>
<td>Research Evaluation</td>
<td>2</td>
</tr>
</tbody>
</table>

**TOTAL SEMESTER HOURS for FRESHMAN SEMESTER**  
23

**PHASE I. Sophomore Semester**

<table>
<thead>
<tr>
<th>Course #</th>
<th>Course Title</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>IPAP 501</td>
<td>Anatomy and Physiology II</td>
<td>7</td>
</tr>
<tr>
<td>IPAP 505</td>
<td>Pathology</td>
<td>3</td>
</tr>
<tr>
<td>IPAP 602</td>
<td>Pharmacology I</td>
<td>3</td>
</tr>
<tr>
<td>IPAP 603</td>
<td>Radiology</td>
<td>2</td>
</tr>
<tr>
<td>IPAP 604</td>
<td>Psychiatry</td>
<td>3</td>
</tr>
<tr>
<td>IPAP 606</td>
<td>EKG</td>
<td>2</td>
</tr>
<tr>
<td>IPAP 609</td>
<td>Gastroenterology</td>
<td>2</td>
</tr>
<tr>
<td>IPAP 623</td>
<td>Military Public Health / Dental</td>
<td>2</td>
</tr>
<tr>
<td>IPAP 631</td>
<td>Patient Evaluation I</td>
<td>3</td>
</tr>
</tbody>
</table>

**TOTAL SEMESTER HOURS for SOPHOMORE SEMESTER**  
27

**PHASE I. Junior Semester**

<table>
<thead>
<tr>
<th>Course #</th>
<th>Course Title</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>IPAP 605</td>
<td>Orthopedics</td>
<td>4</td>
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<tr>
<td>IPAP 607</td>
<td>Pulmonary</td>
<td>2</td>
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<tr>
<td>IPAP 610</td>
<td>Cardiology</td>
<td>4</td>
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<tr>
<td>IPAP 611</td>
<td>Endocrinology</td>
<td>2</td>
</tr>
<tr>
<td>IPAP 612</td>
<td>Clinical Correlations I</td>
<td>1</td>
</tr>
<tr>
<td>IPAP 614</td>
<td>Pediatrics</td>
<td>3</td>
</tr>
<tr>
<td>IPAP 620</td>
<td>Neurology</td>
<td>2</td>
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<tr>
<td>IPAP 630</td>
<td>Pharmacology II</td>
<td>4</td>
</tr>
<tr>
<td>IPAP 632</td>
<td>Patient Evaluation II</td>
<td>2</td>
</tr>
</tbody>
</table>

**TOTAL SEMESTER HOURS for JUNIOR SEMESTER**  
24

B-1
PHASE I. Senior Semester

<table>
<thead>
<tr>
<th>Course</th>
<th>Title</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>IPAP 600</td>
<td>Hematology/Oncology</td>
<td>1</td>
</tr>
<tr>
<td>IPAP 613</td>
<td>Clinical Correlations II</td>
<td>1</td>
</tr>
<tr>
<td>IPAP 615</td>
<td>Surgery</td>
<td>4</td>
</tr>
<tr>
<td>IPAP 616</td>
<td>Dermatology</td>
<td>2</td>
</tr>
<tr>
<td>IPAP 617</td>
<td>Obstetrics/Gynecology</td>
<td>3</td>
</tr>
<tr>
<td>IPAP 618</td>
<td>Emergency Medicine</td>
<td>5</td>
</tr>
<tr>
<td>IPAP 619</td>
<td>Infectious Diseases</td>
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<tr>
<td>IPAP 622</td>
<td>Genitourinary</td>
<td>2</td>
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<tr>
<td>IPAP 624</td>
<td>PA Professional Issues</td>
<td>1</td>
</tr>
<tr>
<td>IPAP 628</td>
<td>Otolaryngology/Ophthalmology</td>
<td>2</td>
</tr>
<tr>
<td>IPAP 629</td>
<td>Gerontology/Rheumatology</td>
<td>2</td>
</tr>
</tbody>
</table>

TOTAL SEMESTER HOURS for SENIOR SEMESTER 26

PHASE II. Academic Year

<table>
<thead>
<tr>
<th>Course</th>
<th>Title</th>
<th>Hours</th>
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</thead>
<tbody>
<tr>
<td>IPAP 700</td>
<td>Surgery Rotation</td>
<td>5</td>
</tr>
<tr>
<td>IPAP 701</td>
<td>Dermatology Rotation</td>
<td>4</td>
</tr>
<tr>
<td>IPAP 702</td>
<td>Obstetrics/Gynecology Rotation</td>
<td>4</td>
</tr>
<tr>
<td>IPAP 703</td>
<td>Orthopedics Rotation</td>
<td>6</td>
</tr>
<tr>
<td>IPAP 704</td>
<td>Psychiatry Rotation</td>
<td>3</td>
</tr>
<tr>
<td>IPAP 705</td>
<td>Internal Medicine Rotation</td>
<td>6</td>
</tr>
<tr>
<td>IPAP 706</td>
<td>ENT/Allergy Rotation</td>
<td>4</td>
</tr>
<tr>
<td>IPAP 707</td>
<td>Pediatrics Rotation</td>
<td>5</td>
</tr>
<tr>
<td>IPAP 708</td>
<td>Ophthalmology Rotation</td>
<td>2</td>
</tr>
<tr>
<td>IPAP 709</td>
<td>Emergency Medicine Rotation</td>
<td>3</td>
</tr>
<tr>
<td>IPAP 710</td>
<td>Family Practice/Outpatient Medicine Rotation</td>
<td>4</td>
</tr>
<tr>
<td>IPAP 711</td>
<td>Clinical Elective Rotation</td>
<td>4</td>
</tr>
<tr>
<td>IPAP 712</td>
<td>Directed Study</td>
<td>2</td>
</tr>
</tbody>
</table>

TOTAL SEMESTER HOURS for ACADEMIC YEAR 52
TOTAL SEMESTER HOURS for IPAP 152

Note: Students will be registered for Phase II over three terms during the final academic year based on a typical rotation schedule. Final grades for all students will be due at the completion of all coursework.

Students who are relieved during the final academic year will have their registration changed to reflect only the specific coursework started with final grades available (including W, WP, and WF).
Interservice Physician Assistant Program (IPAP)

Academic Honor Code (AHC)

“A cadet will not lie, cheat, steal, or tolerate those who do.”
United States Military Academy

“Midshipmen are persons of integrity: They stand for that which is right. They tell the truth and ensure that the full truth is known. They do not lie. They embrace fairness in all actions. They ensure that work submitted as their own is their own, and that assistance received from any source is authorized and properly documented. They do not cheat.”
United States Naval Academy

“We will not lie, steal or cheat, nor tolerate among us anyone who does.”
United States Air Force Academy

“Cadets do not lie, cheat, steal, or attempt to deceive.”
United States Coast Guard Academy
Academic Honor Code

1. **Purpose:** To establish an Academic Honor Code (AHC) for the Interservice Physician Assistant Program (IPAP), Graduate School, Health Readiness Center of Excellence, AMEDDC&S, JBSA, Fort Sam Houston, Texas. To publish policy, procedures, and guidelines governing its implementation and enforcement.

2. **Applicability:** This instruction is applicable to all faculty, staff, and students assigned to the IPAP.

3. **Policy:** All personnel assigned to the IPAP, and its detachments (to include all Phase 2 sites) are expected to exhibit honesty and integrity in all aspects of their military and personal lives, and especially in their academic pursuits. Academic integrity is a commitment, even in the face of adversity, to five fundamental values: honesty, trust, fairness, respect, and responsibility. From these values, flow principles of behavior that enable academic communities to translate ideals into action. All are expected to acquaint themselves with, and make use of, all procedures established for doing research, writing reports, completing homework assignments, performing laboratory and clinical assignments, and taking examinations. Failure to act in accordance with such procedures will be considered academic dishonesty. Acts of academic dishonesty are legal, moral and intellectual offenses against the academic community and will be handled as disciplinary problems in accordance with the Individual Student Assessment Plan (ISAP).

4. **AHC Principles:**

   a. The AHC is based on the five fundamental values of honesty, trust, fairness, respect, and responsibility:

   (1) An academic community of integrity advances the quest for truth and knowledge by requiring intellectual and personal honesty in learning, teaching, research, and service.

   (2) An academic community of integrity fosters a climate of mutual trust, encourages the free exchange of ideas, and enables all to reach their highest potential.

   (3) An academic community of integrity establishes clear standards, practices, and procedures and expects fairness in the interactions of student, faculty, and administrators.

   (4) An academic community of integrity recognizes the participatory nature of the learning process and honors and respects a wide range of opinions and ideas.

   (5) An academic community of integrity upholds personal accountability and depends upon action in the face of wrongdoing. 1

   b. Integrity is an essential part of any true educational experience. This includes integrity on the part of the faculty members as well as integrity on the part of students. The AHC requires each to student accept his or her role as a member of the academic community and to execute that role with self-confidence, determination, hard work, and a desire to excel. Students will not violate nor permit other students to violate the provisions of this AHC.
c. The AHC is the standard of student conduct while assigned to the IPAP. The AHC exists in conjunction with, and in parallel to, the Uniform Code of Military Justice (UCMJ). Therefore, all conduct and performance must be acceptable within the parameters set forth by both of these documents.

d. The AHC supports leadership development. It affords the student an opportunity to make conscious decisions regarding its application and to accept the consequences of his or her decisions.

5. **Definitions:** For the purpose of the AHC, the following definitions are applicable.

   a. **Academic Activity -** Any activity undertaken during the course of instruction to instruct, review, provide practice, or assess performance or knowledge within a given subject area. Academic activity includes, but is not limited to: lectures, review sessions, quizzes, examinations, homework, projects, laboratory assignments, tutorials, remediation's, simulated or actual clinical performance, oral reports/presentations, and other such assigned activities.

   b. **Improper Assistance -** Help, either given or received, on any academic activity in a manner not otherwise prescribed/authorized by the assigned instructor.

   c. **Cheating -** Knowingly using unauthorized assistance in any academic activity.

   d. **Plagiarism -** The act of stealing and/or passing off the ideas or words of another, whether published or unpublished, as one's own.

   e. **Irregular Behavior -** Student conduct during any evaluation, to include examinations, quizzes, laboratory assignments and observed physical examination performance, that causes the instructor, evaluator or proctor to suspect that the student's performance is being (or attempting to be) augmented from any source external to the student's own accumulated fund of knowledge.

6. **Prohibited Acts:** All forms of cheating, plagiarism, improper giving/receiving assistance, and irregular behavior are expressly prohibited under the AHC and may be punishable under the UCMJ. Prohibited acts include but are not limited to:

   a. The use of notes, texts, issued materials, handouts, or electronic devices (including but not limited to: cellular telephones, calculators, tablets, computers and/or listening devices) during examinations, quizzes or any testing exercises, unless specifically authorized by the instructor.

   b. Any visualization of or attempt to visualize another student's test or answer key.

   c. Any attempt to enable another student's visualization of any other student's test or answer key during an examination.

   d. Knowingly permitting another student to copy any student's answers from an examination paper (or computer screen), writing assignments, speech or briefing materials.

   e. The act of providing or accepting (to include the visualization or possession of) unauthorized assistance or materials such as research papers, study guides, prior tests (or parts thereof), review session notes and course information prepared or provided by students outside the current class. This includes any materials possessed by a recycled student (authorized material for that student only) that was obtained or prepared in a prior class (semester).
f. The act of giving or receiving improper assistance such as, but not limited to, copying answers from another’s examination.

g. Using previously written research papers, briefings, or other types of student work normally assigned by the program, provided by former students of the program.

h. Collaboration and/or plagiarism on lab assignments, clinical performance, workbooks, special projects, “take home” quizzes or any other type of graded or mandatory assignments unless specifically authorized by the instructor for that particular assignment.

i. Beginning a “timed” assignment, whether examination, quiz, laboratory assignment or other academic activity, prior to being told to begin the activity.

j. Continuing to work on a “timed” assignment, exam, quiz, lab assignment or other academic activity, after being told that time has expired.

k. Giving or receiving any type of communication during an academic activity unless expressly permitted by the assigned instructor.

l. Submitting previous or subsequent work for a given academic activity under the false premise of having accomplished that work during the designated timeframe for that academic activity.

m. Disclosing or soliciting disclosure of any information regarding examination questions or answers prior to, during, or subsequent to an examination or other graded activity. This specifically includes the prohibition of disclosing any examination content to subsequent class members or solicitation of any examination content from preceding class members.

n. Any behavior that undermines or threatens the integrity of an IPAP assessment processes regardless of whether it occurs before, during, or after a particular academic activity.

7. **Enforcement:**

   a. Responsibility for enforcing the AHC rests with the IPAP faculty, as well as the student community.

   b. In the event a student is suspected of violating the AHC, the following procedure will be followed:

     (1) Whenever possible, the activity will be immediately terminated by the faculty member. The student(s) involved will be informed of the suspected infraction of the AHC. Any supporting evidence will be confiscated and turned over to the Program Director. If a student observes any act in violation of the AHC, he/she will immediately notify the faculty member in the classroom, Class Advisor, Senior Service Representative, and/or Academic Counselor.

     (2) All faculty and students are obligated to report suspected violations of the AHC. A written statement concerning the occurrence will be completed by the faculty member involved and forwarded to the Program Director as soon as practical.

     (3) The Program Director will evaluate the report and conduct an interview with the reporting party, the student(s) involved, the assigned faculty member, and any other applicable parties. The Program Director may determine the student’s disposition as any of the following: (a) dismissal of the suspected incident, (b) recommendation (to Graduate School Dean) for relief from the program, (c) placement on program probation, (d) referral to that student’s Service command for possible disciplinary action.
8. **Action**: The Program Director will ensure all students are thoroughly briefed on the AHC during Orientation Week. All students will acknowledge receipt of this briefing by signing the Acknowledgement of ISAP and AHC Briefing form. This form will be retained as a permanent part of the student’s academic record.

---

IPAP Student Acknowledgement of ISAP and AHC Briefing

I have received an oral briefing on the Individual Student Assessment Plan, to include the Academic Honor Code. I hereby acknowledge awareness and understanding of the ISAP, and will comply as written. I understand that I am expected to exhibit honesty and integrity in all of my academic pursuits. I am aware of where to locate the ISAP for further reference.

Furthermore, I am expected to acquaint myself with and make use of all established procedures for conducting research, writing reports, taking examinations, and engaging in other academic activities. My failure to act in accordance with such procedures will be considered academic dishonesty and will be handled as a disciplinary issue in accordance with the ISAP.

Initial Counseling

Date: __________________________

Print Student name

Print Briefer name

Student Signature

Briefer Signature

2nd Semester Counseling

Date: __________________________

Student Signature

Print Counselor name

Counselor Signature

3rd Semester Counseling

Date: __________________________

Student Signature

Print Counselor name

Counselor Signature

4th Semester Counseling

Date: __________________________

Student Signature

Print Counselor name

Counselor Signature

**This form to be maintained in student academic record**
Service-Specific Regulations Regarding Fitness Standards

1. ARMY
   a. Physical fitness and weight control standards are essential to the mission of the Army. As stipulated in AMEDDC&S & FSH Reg 351-12, Army 6H-65D students are required to pass the semi-annual Army Physical Fitness Test(s) IAW Army Physical Readiness Training (FM 7-22), Standards of Medical Fitness (AR 40-501), and meet height and weight standards IAW the Army Weight Control Program (AR 600-9). The results are documented on the student's Service School Academic Evaluation Report (AER) in Phase 1 and Phase 2. Failure to meet standards will result in a "Failed to meet course standards" rating on the AER.
   
   b. Military students failing to meet physical fitness or weight control standards prior to graduation are counseled and processed IAW the regulations listed in (the above paragraph). Failure MAY disqualify the student from successful completion of the program and/or receiving the diploma and/or assigned AOC/skill identifier.

2. NAVY
   a. Navy officers must demonstrate a commitment to physical health and readiness at all times. Throughout training, Navy officer candidates must maintain fitness standards prescribed in OPNAVINST 6110.1j and NAVADMIN 178-15. Physical Readiness Test (PRT) results will be documented on annual student rank specific evaluations.
   
   b. Navy officer candidates failing to meet fitness or body composition analysis prior to graduation will be counseled and placed on non-academic probation until completion of the program. Failure to meet standards may be cause for immediate dismissal from the IPAP program, non-issuance of a diploma, and/or cancellation/alteration of follow-on orders.
   
   c. Recommendation for dismissal will be determined on a case by case basis.

3. AIR FORCE
   a. It is every Airman’s responsibility to maintain the physical fitness standards set forth in AFI 36-2905, Fitness Program.
Being physically fit allows Airmen to properly support the Air Force mission. Fitness evaluations are recorded in the Air Force Fitness Management System (AFFMS II) throughout an Airmen’s career. Student fitness programs will be managed by the supporting Air Force training command.

b. Failure to maintain fitness standards may result in, but not limited to, disciplinary action; removal from training; denial of assignment, graduation and/or commission.

4. COAST GUARD

a. Physical fitness is an important factor in mission readiness and an essential component of total wellness, and should be strongly encouraged at all levels. Coast Guard fitness standards, as stipulated by the CG Health Promotion Manual - COMDTINST M6200.1C and Coast Guard Weight and Body Fat Standards Program Manual, COMDTINST M1020.8 (series). All active duty CG students are required to weigh-in on a semi-annual basis during the months of April and October and recorded in the Semi-Annual Weigh-in worksheet. Members exceeding both their Maximum Allowable Weight (MAW) and body fat percentage will be placed on probation, during which they must lose their excess weight or body fat. Students will also require completion of a CG-6049 to assess an individual’s fitness level as part of the Coast Guard Weight and Body Fat Standards and Health and Fitness Programs.

b. Commanding officers or Officers in charge may waive fitness enhancing activity and PFP requirements for CG students if they determine course requirements fulfill the fitness enhancing activity requirement, or if fitness-enhancing activity cannot be reasonably accommodated in the training schedule.

c. Failure to maintain standards MAY disqualify the student from successful completion of the program and/or receiving the diploma.
APPENDIX F
IPAP ACADEMIC PERFORMANCE REVIEW PROCESS
PHASE 1

Continue training

No

Course average < 75%

Probation/remediation (service notification)

Continue training

No

Mid-semester program average < 80%

Probation (service notification)

No

End of semester program average < 80

No

Continue training

End of course average < 75%

Performance Review¹
Board (Recommend relief/recycle)

Program Director ¹

Retain

No

Recycle

No

Relief

Yes

Student accepts
decision

Yes

Student removed from class & recycled to next convening class

Student appeals to Course Director/GS Dean¹

Next page

Student accepts decision

Yes

Student disenrolled

NOTE ¹: Specific services CC/CO/OIC will be kept informed at all decision points. Final decision regarding the students will be accomplished with approval of the individual's service CC/CO/OIC.
NOTE ¹: Specific services CC/CO/OIC will be kept informed at all decision points. Final decision regarding the students will be accomplished with approval of the individual's service CC/CO/OIC.

NOTE: Officer Students, who do not accept the decision, have a right to appeal the decision to the Commanding General.
APPENDIX G
IPAP ACADEMIC PERFORMANCE REVIEW PROCESS PHASE 2

Student fails required # tests/practical exercises
Forms initiated for academic relief/recycle

Notify and counsel student

Phase 2 Site Clinical coordinator interviews
student and makes recommendation

Performance Review Board/Committee held
(by Phase 2 site) – makes recommendation

IPAP Phase 2 Coordinator or IPAP executive
staff member to be present on telephone
conference

Program Director
Retain/Recycle/Relief

Retain

Yes

Student returns to class on probation

Recycle

Yes

Student accepts decision

No

Student appeals decision to GS
Dean/CC/CO/OIC
Respective Service

Relief

Yes

Student accepts decision

No

Student disenrolled

GS Dean/CC/CO/OIC
Respective Service
upholds decision

Student retained, recycled or relieved

NOTE 1: Program Director and specific services CC/CO/OIC will be kept informed at all
decision points. Final decision regarding the student will be accomplished with approval of the
individual's service CC/CO/OIC.
APPENDIX H
IPAP NON-ACADEMIC REVIEW PROCESS
PHASE 1 and PHASE 2

Action initiated by appropriate authority

Type of Action

Disciplinary

Continue training

NO

Service specific review (Program Director notified)

Action

Non-judicial punishment

Uniform Code of Military Justice

Disenroll

NO

YES

Disenroll

STOP

Non-Disciplinary

Service specific review (Program Director notified)

Resolvable

NO

YES

Disenroll

Continue training

Recycle

Retain

STOP

NOTE 1: Phase 1 - Class Advisor, Program Director, or Component Commander.
Phase 2 – Phase 2 Site Clinical Coordinator, P2 Site Medical Director, or Phase 2 Component Commander.

H-1
MEMORANDUM FOR RECORD

SUBJECT: Correction of POI weeks in ISAP for IPAP Phase 1

1. This memo is to make a correction to the Interservice Physician Assistant Program ISAP POI Phase 1 weeks from 67 to 66 weeks.

2. Point of contact is the undersigned or Mr. Mike Kroger at 210-221-8004, or 210-808-2907.

For

RON W. PERRY
CDR, USN, MSC
Director, Interservice Physician Assistant Program