COVER PAGE

INSTITUTION: Indiana State University
COLLEGE: College of Nursing, Health, and Human Services
DEPARTMENT: Athletic Training
DEGREE PROGRAM TITLE: Master of Science in Physician Assistant Studies
FORM OF RECOGNITION TO BE AWARDED/DEGREE CODE: Master of Science/MS
SUGGESTED CIP Code: 51.0912
LOCATION OF PROGRAM/CAMPUS CODE: Terre Haute, IN/ 00180700
PROJECTED DATE OF IMPLEMENTATION: Spring Semester 2011
DATE PROPOSAL WAS APPROVED BY INSTITUTIONAL BOARD OF TRUSTEES: December 18, 2009
SIGNATURE OF AUTHORIZING INSTITUTIONAL OFFICER
DATE
DATE RECEIVED BY COMMISSION FOR HIGHER EDUCATION
COMMISSION ACTION (DATE)

A. Abstract

Master of Science in Physician Assistant Studies Indiana State University, Terre Haute, Indiana Offered as a traditional campus based program

Objectives:

The mission of the Indiana State University Physician Assistant Program is to create a student-centered educational environment that engages individuals to become compassionate, competent physician assistants who possess the clinical skills to contribute positively to the dynamic health care needs of rural and underserved populations. This program is part of the initiatives for interprofessional education in conjunction with the Rural Health Innovation Collaborative (RHIC) for improved patient access and quality care for rural and underserved populations.

Clientele to be served:

The PA program will serve baccalaureate prepared students from a variety of backgrounds who may enroll directly after completion of their undergraduate degree or, as is often the case, after working in the health care fields for a variable length of time. Our goal is to find qualified Indiana residents for at least two-thirds of the available seats in the program. Regardless of age, gender or ethnicity, we intend to attract those persons wanting to serve their community as a provider of quality health care with an emphasis on evidence-based medicine and cultural competence. To that end we will make a concerted effort to attract and accept a diverse student body.

Curriculum:

The curriculum has been designed based on accreditation standards as published by the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA) and will require 93 graduate credit hours in a campus-based program over seven consecutive semesters. Course content includes didactic and clinical experience in advance concepts in bioscience; health promotion; applied research; assessment, diagnosis, and interventions for health disorders; ethical aspects of the role of the physician assistant. The prerequisites include a strong foundation in the biological sciences, namely chemistry, anatomy, physiology, microbiology and statistics. Experiential learning in the clinical environment is accomplished during eleven four week rotations of full-time clinical preceptorship in at least eight medical specialties. There is no option for advanced placement or for part-time study.

Employment opportunities:

Certified physician assistants (PA-C) find employment opportunities in a whole range of medical settings. Once certified, a PA is qualified to work in surgical subspecialties as well as just about every area of clinical medicine as well as in academia. PAs are employed wherever a physician might be employed. According to the Indiana Workforce Development's High-Wage High-Demand Occupations report for 2006-2016 there were 283 openings for PAs and a projected growth rate of 26.9%. The U.S. Bureau of Labor Statistics listed physician assistants among the fastest growing occupations for 2006 - 2016 in the *November 2007 Monthly Review*.

B. Program Description

1. Proposed Program and Its Objectives:

The mission of the Indiana State University Physician Assistant Program is to create a student-centered educational environment that engages individuals to become compassionate, competent physician assistants who possess the clinical skills to contribute positively to the dynamic health care needs of rural and underserved populations. At the completion of this program the PA graduate will be able to:

- 1) Practice compassionate primary care medicine sensitized to the particular health care needs of rural and underserved communities. (Primary Care Provider)
- 2) Apply the principles of evidence-based medicine and critical thinking in clinical decision making. (Critical Thinking)
- 3) Communicate effectively with patients, families and members of the interdisciplinary healthcare team. (Communication)
- 4) Partner with supervising physicians and other professional colleagues to provide competent patient-centered care across the lifespan. (Patient Care)
- 5) Utilize practice and systems-based analysis to insure patient safety and improve outcomes through continuous quality improvement. (Safety/Quality)
- 6) Respond to the complexities of the dynamic healthcare system by practicing in a costeffective and socially responsible manner. (Leadership)
- 7) Commit to high ethical standards responsive to the needs of the profession, the individual and to society. (Ethics/Community Leadership)

2. <u>Admission Requirements, Anticipated Student Clientele, and Student Financial Support</u>

- a. In addition to admission requirements for the College of Graduate and Professional Studies, the PA program requires students to:
 - 1) Possess a cumulative GPA of 3.0 on a 4.0 scale.
 - 2) Have earned a baccalaureate degree from a regionally accredited institution of higher learning.
 - 3) Or have earned a baccalaureate degree from institutions outside the United States and to have completed at least one year or 24 semester credits of additional coursework at a regionally accredited college or university in the United States prior to application.
 - 4) Have completed the Graduate Record Examination (GRE) within the past five years. Indiana State University school code is 1322.
 - 5) Have a minimum TOEFL score of 550, when the native language is not English.
 - 6) Submit three letters of recommendation.

- 7) Submit a personal statement explaining why she or he wants to become a physician assistant.
- 8) Demonstrate proficiency in medical terminology. This can be accomplished by:
 - 8.1 Being a licensed or certified provider of health care already.
 - 8.2 Having medical terminology coursework on your transcript.
 - 8.3 Evidence of completion of a self-study module.

The program will offer a self-study module as needed to be completed prior to matriculation.

- 9) To consider obtaining health care experience if one does not already have said experience. Indiana State University is offering PASS 500X to facilitate acquiring said experience prior to matriculation. This is not a requirement for application or admission.
- b. Prerequisite coursework is as follows, and must have been accomplished with a grade of C or better:
 - 1) At least five biological science courses of three semester credits each. Of these five courses, at least one must be in anatomy, one in physiology, and one in microbiology. Courses in human anatomy and human physiology are preferred to courses of a more general nature, and courses with labs are preferred. To fulfill the remaining biological science course prerequisite, we recommend courses such as cell biology, molecular biology, genetics, pharmacology, embryology, histology, or immunology. While none of the latter courses are required, they provide a good foundation for the study of medicine.
 - 2) At least two chemistry courses with labs of four semester credits each.
 - 3) At least one statistics course of at least two semester credits.
- c. The program is designed for full-time on-campus students either directly from undergraduate coursework or the somewhat older student who is choosing a second career path. According to the Physician Assistant Education Association (PAEA) 24th Annual Report for the 2007-2008 academic year, 26.7 years was the average age of first year PA students, 70% of whom were female.
- d. We will accept thirty students annually. This is the number of students we feel we can give quality instruction and excellent clinical preceptorship sites to. Facility space and instructional faculty availability is also a factor in setting the class size at thirty. Once we are able to utilize the centralized application service known as CASPA we anticipate having two to three times as many applicants as there are seats available. This is based on the fact that there were 2.75 applicants per available seat in the 75% of accredited PA programs that used CASPA in 2008.
- e. Student financial support will be available through institutional channels as for any graduate student. Additional institutional sources are expected through the American

Recovery and Reinvestment Act of 2009. Other sources we anticipate our students qualifying for and seeking include Health Resource and Service Administration (HRSA) Title VII funds, National Health Service Corps scholarships and loan repayment plans, and Area Health Education Center (AHEC) grants. We also anticipate some funding from the Rural Health Innovation Collaborative.

3. **Proposed curriculum**

- a. Master of Science in Physician Assistant Studies will require the successful completion of 93 semester credits. The first twelve months are didactic with a total of 51 semester credits followed by 12 months of experiential learning in clinical settings earning a total of 33 semester credits. The students return to campus for the final two months, or 9 credit hours, in preparation for transition into professional practice as a physician assistant.
- b. Sequence of courses is as follows, keeping in mind that the experiential learning rotations will not all match this sequence. Each student will move through the clinical rotations with an individualized schedule. Each rotation, course designations PASS 670 through 680 is four weeks in length. There will be two or three students per rotation every four weeks. All courses listed are required.

Spring I	Didactic year	credits
PASS 610	Bioscience	4
PASS 611	Physical Diagnosis	3
PASS 613	Clinical Science	3
PASS 617	Intro to PA Practice	2
HLTH 617	Health Behavior Theory	3
	Semester Total	15
	Running Total	15
Summer II	Didactic Year	credits
PASS 620	Clinical Medicine I	4
PASS 622	Specialty Care I	4
PASS 624	Pharmacotherapeutics I	3
PASS 626	Clinical Management I	4
	Semester Total	15
	Running Total	30
Fall III	Didactic Year	credits
PASS 630	Clinical Medicine II	4
PASS 632	Specialty Care II	3
PASS 634	Pharmacotherapeutics II	3
PASS 636	Clinical Management II	3
PASS 635	Applied Research	2
	Semester Total	15
	Running Total	45

Spring IV	Clinical Year	credits
PASS 643	Clinical Skills	3
PASS 670	Family Med Rotation	3
PASS 671	Emergency Med Rotation	3
PASS 672	General Surgery Rotation	3
	Semester Total	12
	Running Total	57
Summer V	Clinical Year	credits
PASS 655	Clinical Project	3
PASS 673	Women's Health Rotation	3
PASS 674	Internal Medicine Rotation	3
PASS 675	Geriatrics Rotation	3
	Semester Total	12
	Running Total	69
Fall VI	Clinical Year	aradita
PASS 676	Behavioral Med Rotation	credits
PASS 677		3
PASS 0//	Pediatrics Rotation	3
		2
PASS 678	Floating Rotation	3
	Elective Rotation I	3 3
PASS 678	Elective Rotation I Semester Total	3 3 12
PASS 678	Elective Rotation I	3 3
PASS 678 PASS 679	Elective Rotation I Semester Total Running Total	3 3 12 81
PASS 678 PASS 679 Spring VII	Elective Rotation I Semester Total Running Total Clinical/Didactic	3 3 12 81 credits
PASS 678 PASS 679 Spring VII PASS 680	Elective Rotation I Semester Total Running Total Clinical/Didactic Elective Rotation II	3 3 12 81 credits 3
PASS 678 PASS 679 Spring VII PASS 680 PASS 686	Elective Rotation I Semester Total Running Total Clinical/Didactic Elective Rotation II Clinical Management III	3 3 12 81 credits 3 4
PASS 678 PASS 679 Spring VII PASS 680	Elective Rotation I Semester Total Running Total Clinical/Didactic Elective Rotation II Clinical Management III PA Practice Transition	3 3 12 81 credits 3 4 5
PASS 678 PASS 679 Spring VII PASS 680 PASS 686	Elective Rotation I Semester Total Running Total Clinical/Didactic Elective Rotation II Clinical Management III PA Practice Transition Semester Total	3 3 12 81 credits 3 4
PASS 678 PASS 679 Spring VII PASS 680 PASS 686	Elective Rotation I Semester Total Running Total Clinical/Didactic Elective Rotation II Clinical Management III PA Practice Transition	3 3 12 81 credits 3 4 5

- c. There is one existing course, HLTH 617, Health Behavior Theory. This course has not been taught in the past three years. One course, PASS 635, Applied Research, has been designed so that it may be used by other health professional education programs offered at ISU such as the doctor in physical therapy and the advanced practice nursing programs. There is significant content overlap with the Advanced Practice Nursing curriculum and some overlap with the Doctor in Physical Therapy such that shared didactic instructional faculty and equipment is expected to be arranged over the next few years.
- d. The PA program contains 28 new courses. The program, including each course, has been approved through the policies as established by the College of Nursing, Health, and Human Services and Indiana State University. The program was approved by the

faculty committees of the College of Nursing, Health, and Human Services, Dean of the College, New Graduate Program Task Force, Graduate Council, Faculty Senate, Provost and Vice President of the University, and the Board of Trustees of Indiana State University.

e. All PA courses will be delivered by Indiana State University.

4. Form of Recognition

- a. Students who satisfactorily complete the requirements for this program will be awarded a Master of Science in Physician Assistant Studies.
- b. The suggested CIP code for the PA program is 51.0912.
- c. Master of Science in Physician Assistant Studies, Indiana State University College of Graduate and Professional Studies, Terre Haute.

5. Program Faculty and Administrators

a. PA faculty specialization

Name	Degree	Rank	Specialization	Appointment
ADMINI	STRATORS	I		
Richard Williams	Ph.D.,	Dean; Professor	Athletic Training Curriculum Leadership/Administration	Full-time
Marcia Miller	Ph.D.	Associate Dean Associate Professor	Nursing Assessment; Mental Health Leadership Curriculum	Full-time
Leamor Kahanov	Ph.D.,	Department Chair; Associate Professor	Athletic Training	Full-time
FACULT	Υ		L	
Randall Stevens	M.D.	Medical Director; Clinical Assistant Professor of Family Medicine	Addictions medicine; occupational health; family medicine	Part-time
Barbara Battista	B.S., PA-C	Program Coordinator; Assistant Professor	Pharmacology; Evidence-based practice; women's health; bioethics	Full-time
James Turner	M.D.	Clinical Assistant Professor of Family Medicine; Director, Lugar Center for Rural Health	Primary care; rural health; health systems collaborations	Part-time

Ron Leach	M.D.	Assistant Professor; Medical Director, Union Hospital	Emergency medicine; forensic medicine; pre-hospital care	Part-time
Tom Nesser	Ph.D.	Associate Professor	Exercise Physiology; muscle physiology; aging	Full-time
Lucy White	Ph.D.	Associate Professor	Pharmacology; Epidemiology	Full-Time

b. We have a part-time medical director, a full-time program director and are prepared to hire at least two full-time equivalent certified physician assistants for instructional faculty. The aforementioned group comprises the minimum core faculty for the program. The content area among this group will need to include all the major medical science areas, clinical medicine subspecialties, procedural skills, diagnostic imaging, bioethics, interpersonal communication and systems management.

6. Needed Learning Resources

- a. Available learning resources include the Cunningham Memorial Library with an extensive collection and array of services that has provided exceptional service to the Advanced Practice Nursing students for many years. The library is a federal government depository, receiving approximately 52% of the materials available from the GPO (Government Printing Office), including the National Institutes of Health. A wide assortment of online journal and database subscriptions in the health related fields are already in place. Students will be required to have PDAs or smart phones and a current subscription to MDConsult for textbooks and point-of-care access to clinical reference and patient education resources.
- b. Additional learning resources needed to offer high quality instruction and preparation for evidence-based primary care to a diverse population including rural and underserved groups includes a modern simulation lab; reasonable access to a cadaver lab, and consult subscription services for tele-medicine support. Tele-medicine and web-based consult services are rapidly evolving. For this reason, the particular service has not been determined but will be decided upon once the program is approved. The Rural Health Innovation Collaborative (RHIC), will be utilized for this process. Due to the added cost for this program a Professional Program fee of \$1,000 is charged once per semester during the program of study.

7. Other Program Strengths

a. Being situated in the College of Nursing, Health, and Human Services at Indiana State University gives this program a firm foundation in serving rural America. The College has a long tradition of preparing nurses and advanced practice nurses to meet the changing health care needs of the Wabash Valley and beyond. Indiana State University is a leader in collaboration as evidenced by its' active participation in RHIC, by the leadership offered by distinguished college faculty, and the facility sharing agreement with Indiana University School of Medicine-Terre Haute

b. Contractual agreements for clinical preceptorships, limited on-site training, shared instruction, and adjunct faculty positions will be arranged. With thirty students in eleven different rotations these clinical preceptorship site arrangements will be quite extensive. It is anticipated that our students will be placed all over central Indiana. Some students may choose to be placed farther away and as long as contractual arrangements can be agreed upon, we will not hesitate in doing so. At all times, whether near or far, the site will be chosen only if it can meet our standards for a quality learning environment in whatever field of medicine is necessary. These contracts will be handled through the College's Contract Coordinator.

C. Program Rationale

1. Institutional Factors

- a. Indiana State University is recognized for excellence in experiential learning and community engagement. The Commission's strategic planning document *Reaching Higher* has encouraged ISU to continue its' leadership in forming collaborations across public, business, and education sectors as well as providing professional programs. This PA program is consistent with both of these areas. The local community and health care business sector will be involved in most phases of the PA student's training. By choosing to encourage our students to focus on primary care with an emphasis on rural and underserved populations this program intends to meet critical needs in west central Indiana, in the Midwest, and in the numerous areas across these United States in need of competent, caring and qualified providers of primary health care.
- b. The planning process began in the summer of 2007 with a faculty committee proposing possible new degree programs. The new Dean of the College of Nursing, Health, and Human Services appointed a task force to explore three new programs during fall 2008. This task force included faculty and medical community representatives and completed its' work early in the spring semester of 2009. A Workforce Summit was conducted at Indiana State University on May 12, 2009, to determine the need for mid-range health care providers for the West Central Indiana area. Projected ratios indicated that west central Indiana currently has ratios and will continue to be lower (77.8%) in the number of health professionals per capita as compared to the state of Indiana (Zollinger, Kochhar, Alyea, & Ray, 2009, p. 4). Soon thereafter, and with the full support of the University administration a contractual agreement was obtained for PA program consultant services. The program curriculum, syllabi, admission requirements and this program proposal was developed by the faculty with the support of the content expert. The primary sources for the above mentioned documents were the Competencies for the Physician Assistant Profession published by the National Commission of Certification of Physician Assistants (NCCPA) and the Accreditation Standards for Physician Assistant Education, third edition, as published by the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA). There has also been collaboration from the onset of this process with a local not-for-profit community hospital and the RHIC, which serves to bring together health professions educators, clinical rotation providers, hospitals, and the civic community in a broad-

based coalition with the primary goal of improving health outcomes in rural central Indiana. The RHIC also intends to serve as a model for other collaboratives around the country as this nation strives to improve health outcomes across all segments of the population.

- c. Synergies between nursing, especially the family nurse practitioner program, as well as athletic training and physical therapy programs, and this physician assistant program may be virtually unlimited. As more graduate level professional training options are available at Indiana State, it is believed that the pre-professional undergraduate student pool will grow. The collaboration and sharing of faculty, infrastructure, and resources currently in place through the Rural Health Innovation Collaborative (RHIC) are evidence of one such synergy. This level of cooperation has the potential to benefit not only the educational programs involved but also more importantly the communities served by the programs, students, and graduates.
- d. Indiana State University has the capacity to grow enrollment with the endorsement of the Indiana Commission on Higher Education, which has identified a goal of expanding health career training in the state. Opening a PA program in the Wabash Valley also fits the well documented need for more primary care providers willing to serve in rural and underserved areas of our country.

2. Student Demand

- a. Enrollment projections are based on the national rate of applications to PA programs. The Central Application Service for Physician Assistants (CASPA) is utilized by 75% of accredited PA programs and reported 2.75 applicants per available seat for the 2008 cycle. Indiana State is seeking provisional accreditation for thirty students annually and has every reason to believe that there will be highly qualified applicants to fill these seats. Our students will be new additions to the total enrollment on campus. As the PA program becomes well known it is expected to attract more students into the pre-professional majors as they anticipate applying to the PA program. Very few of the program's courses will be available to non-PA students and therefore it is not expected to provide electives for majors in other programs.
- b. As shown in Table 1, we expect to grow from generating 450 credit hours in year one to 2790 credit hours annually in year three and every year thereafter. This will be accomplished through the enrollment of thirty new-to-campus majors annually. We projected thirty graduates annually. It is realistic to anticipate that one to two students may stop-out or drop-out of the program of study. If a student maintains a good academic standing, a student may be re-instated into the following cohort. The charter class will complete the program in two and a half years including summer terms.

3. Transferability

There is no option for advanced placement or transfer of credit into this program. All professional coursework must be obtained at Indiana State University.

4. Access to Graduate and Professional Programs

Not applicable.

5. <u>Demand and Employment Factors</u>

- a. Geographic Region to Be Served. After successful completion of the national certifying exam our graduates will be qualified to seek state licensure as health care providers throughout the United States. It is our intention to attract and train those persons desiring to serve in rural and underserved segments of our population. The Indiana PA Practice Act requires physician co-signature of every clinical encounter within 24 hours. This has at times been an impediment to the full utilization of physician assistants in underserved areas of our state. As the legislative climate for physician assistants in Indiana improves, we have every reason to hope that a good number of our graduates will stay in central Indiana.
- b. **Review of Literature.** The U.S. Bureau of Labor Statistics estimates that the number of physician assistant jobs will increase by 26.9% between 2006 and 2016 (as contrasted with general job growth of 7 to 13%). According to the *Indiana Workforce Development's High-Wage High-Demand Occupations report for 2006-2016* there were 283 openings for PAs and a projected growth rate of 26.9%. The AAPA ranked Indiana 49th out of 51 states (including D.C.) for PAs per capita in clinical practice in 2008.
- c. **Potential Employers.** Critical access hospitals, community health centers and federally qualified rural health clinics are clamoring for more PAs in Indiana and across the nation. Veterans Affairs, Public Health Service, all branches of the military as well as most hospital and physician groups employ PAs. HRSA grantees report almost 6,000 clinical vacancies in the January, 2009 edition of *Inside HRSA*.
- d. **Independent Needs Analysis.** An independent analysis of supply and demand was not conducted. Please see information in Section b above.
- e. **Program Experience.** Physician Assistant programs are expanding across the entire United States. The profession in general and the accrediting body in particular holds educational programs to high standards as is evidenced by the high retention rate and high first time pass rates for the *Physician Assistant National Certifying Exam* (*PANCE*). There are currently two accredited PA programs in Indiana, one of which is on probation at this time. There is at least one other program being developed in Central Indiana.
- f. **Expert Opinion.** As cited earlier, the U.S. Bureau of Labor Statistics estimates that the number of physician assistant employment opportunities will increase by 26.9% from 2006 to 2016. As our population ages and we become more cost-efficient in the delivery of health care most, if not all, analysts are forecasting an increasing need for primary care providers well beyond 2016.

6. Regional, State, and National Factors

- a. There are two PA programs in Indiana. Butler's program is geographically the closest although not similar in that it is a continuous B.S-M.S program at a private institution in a large metropolitan area. St. Francis University in Fort Wayne also provides a program and is approximately two hundred miles away. This program is currently on probation. The two public universities with PA programs within our region that are not Hoosier programs are: Southern Illinois University in Carbondale and the University of Kentucky in Lexington, both of which are approximately two hundred miles away. There is one private PA program at Kettering Medical College in Kettering, Ohio, just south of Dayton. This program is also about two hundred miles away from Terre Haute. The PA profession is growing rapidly and even with a gradual increase in capacity of our nation's medical schools there continues to be broad agreement that we are facing a shortage of primary care providers over the next ten to fifteen years.
- **b.** The curriculum was developed with the *Accreditation Standards for Physician Assistant Education*, published by the ARC-PA, as a primary resource. Equally important to the formulation of this program's curriculum has been the *Competencies for the Physician Assistant Profession* published by the NCCPA. The *Standards* set minimum requirements for accredited programs and are stated in such a way as to give much room for programs to accomplish particular goals and approaches to the education of competent physician assistants. Neither the length of the program nor the total credit hours are stipulated by the accrediting body. What is clear from the *Standards* is a requirement for the breadth of content and a sufficient exposure during the clinical year to persons seeking health care in a wide range of settings and across all ages and both genders.

The *Standards* mandate certain faculty requirements, among them being at least a medical director that should be a physician, a program director that should be a certified physician assistant and at least two full time certified physician assistants as part of the core faculty. The program is expected to have sufficient faculty and staff to meet the educational needs of the students.

Indiana requires PAs to be certified in order to be eligible for a license to practice in the state. This is true of all fifty states. In order to sit for the national certifying exam administered by the NCCPA the PA graduate must have earned a degree from a program accredited by the ARC-PA. Indiana State has a provisional accreditation site visit scheduled for mid-June, 2010 and will be on the ARC-PA agenda for a provisional accreditation decision in September, 2010. The *Standards* state that we must matriculate our charter class within one year of being granted provisional accreditation.

D. Program Implementation and Evaluation Implementation

The PA program will be marketed through the university website, career fairs in central Indiana, the regional AHEC office, the local medical community, newsletters, alumni

publications and brochures for current baccalaureate students at ISU. The college website will be updated to provide information on the program. Once provisionally accredited, we will begin using the centralized application service, CASPA, which will also be a vehicle to market the program. We anticipate that our first students will be admitted and start the program spring semester of 2011. Thirty students will be admitted annually.

Evaluation

The design of this PA program was constructed based on the following evaluation criteria: 1) quality and efficiency; 2) appropriateness of the program offering; 3) availability of similar programs; 4) personal and social utility; 5) student demand; 6) student access; 7) flexibility of program design; 8) market demand; 9) inter-institutional and inter-departmental cooperation; 10) flexibility of providing instruction.

1) Quality and efficiency

The PA program evaluation procedures include: course evaluation, faculty evaluations, preceptor evaluation of student, student evaluation of clinical and preceptor experiences, student evaluation of learning resources, support, advising, exit surveys, student satisfaction, employment rates, employer surveys, and alumni surveys. Student attrition, deceleration and remediation rates as well as graduation rates are compiled and analyzed annually. Graduate performance on the PANCE will also be monitored. Also included are faculty attrition rates. All these evaluation procedures are necessary to provide extensive ongoing evaluation that express competency achievement and areas of recommended changes.

The methods of program evaluation described above will be fully delineated in the Descriptive Report as required for Provisional Accreditation by the ARC-PA. A component of ongoing accreditation will be the Self-Study Report where the data compiled in these various indicators will be analyzed and acted upon for continuing quality improvement.

2) Appropriateness of program offering to institution's identity and mission This PA program is in concert with the identity and mission of the university as evidenced by the following excerpts taken from ISU's own strategic development planning and cited in *Reaching Higher: Strategic Directions for Indiana*, "...recognized for excellence in experiential learning and engagement..." and also, "...selected master's and doctoral programs primarily in professional areas". The PA program requires students to be involved in a primary health care setting. The clinical project and the clinical rotations actively involve the students with their communities through meaningful service. Graduates of this PA program will join the ranks of health care

3) Availability of similar programs

professionals.

There are currently two accredited PA programs in Indiana, neither of which is in a public institution. Butler University's program is dissimilar to this program in at least three distinct ways. First, that it is a mixed B.S/M.S. program with the option of

accepting outside students directly into the M.S. phase. Secondly, it is situated in a large metropolitan area. And, thirdly, it is in a private institution which can be a financial barrier to many residents of our state. The University of St. Francis in Fort Wayne is the other program. It was placed on probation by the ARC-PA in March, 2008 and continues so with a decision on final status expected no later than March, 2010.

The AAPA ranked Indiana 49th out of 51 states (including D.C.) for the PA per capita rate in 2008. Admittedly, Indiana has been slow in adopting the full use of PAs in clinical medicine. We now have legislation in place that is more welcoming of the physician-PA partnership and are seeing an increasing role for PAs across the state, most especially in rural and underserved segments of the population.

4) Personal and social utility

Earning a master of science in physician assistant studies will qualify one to sit for the PANCE and thus become certified and eligible for a license to practice as a PA in any state in the union. The social utility will be the increase in the number of medical providers that can offer cost-efficient, high quality primary care in a whole range of settings. Our graduates will be sensitized to the particular needs of rural and underserved populations.

5) Student demand

Student demand is expected to be high in part due to the growth rate of the PA profession which in turn is related to the health professions shortage plaguing our nation. Additionally, being the only public institution offering a PA program in Indiana will be an additional incentive for students to choose our excellent program.

6) Student access

This is a full-time on campus program. Students will need to meet technical standards as published in the college of graduate and professional studies catalog. The PA program will publish additional technical standards.

7) Flexibility of program design

The PA program is not particularly flexible in that it is a cohort style seven consecutive semester program requiring a full-time course of studies. By its' very nature the curriculum is quite intense. One area of flexibility is that this program is ideally suited to the nontraditional, or second career, student while at the same time is appropriate for those students who may have just recently completed a baccalaureate degree.

8) Market demand

As stated earlier in this document according to CASPA, the centralized application service for accredited PA programs, there were 2.75 unique applicants for every available seat in a PA program in the 2008-2009 cycle. As previously mentioned, Indiana has relatively few PAs per capita and thus has significant unmet need for PAs across the state. The PA profession is currently listed in several of the regions in the *Indiana Workforce Development's High-Wage*, *High-Demand report for 2006-2016*.

9) Inter-institutional and inter-departmental cooperation

The PA program is a new discipline being introduced to the Indiana State University campus. As such, we have had few opportunities as of yet to pursue such cooperation. There are areas of potential cooperation with the Advanced Practice Nursing department. It is fully expected that instructional faculty will be shared within these two disciplines though no actual delineation of such responsibilities has been worked out. The Post-Professional Graduate Athletic Training Education Program is another area of expected cooperation.

10) Flexibility of providing instruction

Instruction will be predominantly face-to-face in this on campus program. However, with the ongoing enhancement of web-based resources we fully expect to offer some modules from distant programs. Additionally, numerous medical schools and research facilities offer video modules for selected topics or procedures that will be integrated into our instructional offerings. Simulation labs will be utilized during the didactic phase. On-site clinical preceptorships, on-campus workshops and seminars from community based organizations such as MATEC, the Midwest Aids Training and Education Center, and skills labs scheduled throughout the didactic phase will give ample opportunity for experiential learning both during the didactic and clinical phases of this curriculum. Community engagement through the use of local medical providers as guest lecturers as well as clinical rotations in various medical offices and inpatient facilities throughout central Indiana will enhance the students' involvement in the community. Some clinical preceptorships may be arranged at a distance and would thus require distance format for summative evaluations. Every effort is made to provide content for the visual, auditory, and kinetic learner though high quality content delivery and coordinated clinical partnerships with preceptors.

E. Tabular Information

- 1. Table 1: Enrollment and Completion Data—see page 16
 Thirty students will be admitted per cohort. It has been anticipated that 20 students will be in-state and 10 students will be out-of state. There is a tuition differential for out-of-state students.
- 2. Table 2A and 2B: Cost and Revenue Data—see pages 17 and 18

 There will be four initial faculty requests which will include a part-time Medical Director, a Program Director, a Clinical Coordinator, and a nine month faculty person. Two support staff will be shared with the Department. Faculty and staff benefits are not reflected in the projections. Cost of library resources will be shared with other departments within the College. There will be a professional program fee once per semester of \$1,000 per student. This fee will be used for consumable products, learning resources, equipment, adjunct faculty as needed, research, and faculty resources.
- 3. Table 3: New Program Proposal Summary—see page 19 Indiana State University is willing to support this program during the planning year prior to student enrollment and during the initial years when there will be a financial loss to the institution.

Table 1: Program Enrollments and Completions Annual Totals by Fiscal Year (Use SIS Definitions)

Campus: Indiana State University Program: Physician Assistant Studies

Date: November 20, 2009

	Total Year 1	Total Year 2	Total Year 3 FY 2013-	Total Year 4 FY 2014-	Total Year 5 FY 2015-
	FY 2011-2012	FY 2012-2013	2014	2015	2016
A. PROGRAM CREDIT HOURS GENERATED					
1. Existing Courses	90	450	1710	2790	2790
2. New Courses	360	1260	1080	0	0
TOTAL	450	1710	2790	2790	2790
B. FULL-TIME EQUIVALENTS (FTE's)					
1. FTE's generated by Full-Time Students	30	60	90	90	90
2. FTE's generated by Part-Time Students	0	0	0	0	0
TOTAL	30	60	90	90	90
3. On-campus Transfer FTE's	0	0	0	0	0
4. New-to-Campus FTE's	30	60	90	90	90
C. PROGRAM MAJORS (HEADCOUNT)					
1. Full-time students	30	60	90	90	90
2. Part-time students	0	0	0	0	0
TOTAL	30	60	90	90	90
3. On-campus Transfers	0	0	0	0	0
4. New-to-campus Majors	30	60	90	90	90
5. In State	20	40	60	60	60
6. Out-of-State	10	20	30	30	30
D. PROGRAM COMPLETIONS	0	0	30	30	30

Table 2A
Total Direct Program costs and Sources of Program Revenues

Campus: <u>Indiana State University</u> Program: <u>Physician Assistant Studies</u>

Date: November 20, 2009

		Total Year 1 FY 2011-2012 FTE Cost		Total Year 2 FY 2012-2013 FTE Cost		Total Year 3 FY 2013-2014 FTE Cost		Total Year 4 FY 2014-2015 FTE Cost		Total Year 5 FY 2015-2016 FTE Cost	
A. TOTAL DIRECT PROGRAM	COSTS		_								
1. Existing Departmental Fac	ulty Resources	0	\$0	0	\$0	0	\$0_	0	\$0	0	\$0
2. Other Existing Resources			\$0_		\$0		\$0		\$0		\$0
3. Incremental Resources (Se	ee Table 2B)	\$67	70,500	<u>\$</u>	580,500		\$630,500	_	\$680,500		\$630,500
TOTAL		\$67	70,500	\$	580,500	_	\$630,500	_	\$680,500		\$630,500
		Total Y	ear 1	Total	Year 2	Tota	al Year 3	Tota	al Year 4	To	tal Year 5
B. SOURCES OF PROGRAM R	EVENUES	FY 2011-	-2012	FY 20	12-2013	FY 2	013-2014	FY 2	014-2015	FY	2015-2016
1. Reallocation		\$0	<u> </u>		\$0		\$0		\$0		\$0
2. New-to-campus Student F	ees	\$202,	800	\$77	0,600	\$1,2	257,400	\$1,	257,400	\$1	1,257,400
3. Other (non-state)		\$30,0	000	\$12	0,000	\$2	10,000	\$2	10,000	\$	2210,000
4. New State Appropriations:	:										
	a. Enrollment change funding	0			0		0		0		0
	b. Other State Funds	0			0		0		0		0
TOTAL		\$23	32,800	_\$	890,600	_\$	1,467,400	<u> </u>	51,467,400	-	\$1,467,400

Table 2B
Total Direct Program costs and Sources of Program Revenues

Campus: Indiana State University
Program: Physican Assistant Studies
Date: November 20, 2009

Date: November 20, 2009										
	T	otal Year 1	To	otal Year 2	To	tal Year 3	To	otal Year 4	To	tal Year 5
	FY	2011-2012	FY 2012-2013		FY :	FY 2013-2014		FY 2014-2015		2015-2016
	FTE	Cost	FTE	Cost	FTE	Cost	FTE	Cost	FTE	Cost
1. PERSONAL SERVICES										
a. Faculty	4	\$424,500	4	\$424,500	5	\$469,500	5	\$469,500	5	\$469,500
b. Support Staff	2	\$48,000	2	\$48,000	2	\$48,000	2	\$48,000	2	\$48,000
c. Graduate Teaching Assistants	0	\$0	0	\$0	0	\$0	0	\$0	0	\$0
TOTAL	6	\$472,500	6	\$472,500	7	\$517,500	7	\$517,500	7	\$517,500
2. SUPPLIES AND EQUIPMENT										
a. General Supplies/Equipment		\$20,000		\$5,000		\$5,000		\$20,000		\$5,000
b. Recruiting		\$0		\$0		\$0		\$0		\$0
c. Travel		\$18,000		\$8,000		\$8,000		\$8,000		\$8,000
d. Library/Acquisitions		\$10,000		\$5,000	\$10,000			\$5,000	\$10,000	
TOTAL		\$48,000		\$18,000	\$23,000		\$33,000		\$23,000	
3. EQUIPMENT										
a. New Equipment Necessary for Program	\$	150,000		\$80,000		80,000		\$80,000		80,000
b. Routine Replacement		\$0		\$10,000	\$	10,000		\$50,000	\$	10,000
TOTAL	\$	150,000		\$90,000	\$	90,000	\$	130,000	<u> </u>	90,000
4. FACILITIES										
5. STUDENT ASSISTANCE										
a. Graduate Fee Scholarships		\$0		\$0	-	\$0		\$0	-	\$0
b. Fellowships		\$0		\$0		\$0		\$0		\$0
TOTAL		\$0		\$0		\$0		\$0		\$0
SUM OF ALL INCREMENTAL DIRECT COSTS	\$	670,500	\$	580,500	\$6	530,500	\$	680,500	\$	630,500
	·			10						

Table 3 New Program Proposal Summary Date: November 20, 2009

1. Prepared by Institution: Indiana State University

Institution Location: Terre Haute, IN Program: Physician Assistant Studies

Proposed CIP Code: 51.0912					
	Total Year 1	Total Year 2	Total Year 3	Total Year 4	Total Year 5
	FY 2011-2012	FY 2012-2013	FY 2013-2014	FY 2014-2015	FY 2015-2016
Enrollment Projections (Headcount)					
Full-Time	30	60	90	90	90
Part-Time	0	0	0	0	0
TOTAL	30	60	90	90	90
Enrollment Projections (FTE)					
Full-Time	30	60	90	90	90
Part-Time	0	0	0	0	0
TOTAL	30	60	90	90	90
Degree Completion Projections	0	0	30	30	30
New State Funds Requested (Actual)	\$0	\$0	\$0	\$0	\$0
New State Funds Requested (Increases)	\$0	\$0	\$0	\$0	\$0
II. Prepared by CHE					
New State Funds to be considered for recommendation (Actual)					
	\$	\$	\$	\$	\$
New State Funds to be considered for recommendation (Increases)	\$	Ċ	\$	\$	\$
	<u> </u>	<u>\$</u> 19	<u> </u>	- >	<u> </u>

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APPENDICES

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Appendix A: Program of Study

Indiana State University Master of Science in Physician Assistant Studies Program of Study

	•		U	•			O V	•
Year 1								
	SUMMER SESSION			FALL SEMESTER			SPRING SEMESTER	
Number	Course Title C	redits	Number	Course Title	Credits	Number	Course Title	Credits
						PASS 610	Bioscience	4
						PASS 611	Physical Diagnosis	3
						PASS 613	Clinical Science	3
						PASS 617	Intro to PA Practice	2
						HLTH 617	Health Behavior Theory	3
	Term Total	0		Term T			Term Tot	
				Running T	Total 0		Running To	tal 15
Year 2								
	SUMMER SESSION			FALL SEMESTER			SPRING SEMESTER	
Number	Course Title C	redits	Number	Course Title	Credits	Number	Course Title	Credits
PASS 620	Clinical Medicine I	4	PASS 630	Clinical Medicine II	4	PASS 643	Clinical Skills	3
PASS 622	Specialty Care I	4	PASS 632	Specialty Care II	3	PASS 670	Family Medicine Rotation	
PASS 624	Pharmacotherapeutics I	3	PASS 634	Pharmacotherapeutics II	3	PASS 671	Emergency Medicine Rota	ation 3
PASS 626	Clinical Management I	4	PASS 636	Clinical Management II	3	PASS 672	General Surgery Rotation	3
			PASS 635	Applied Research	2			
	Total Terr			Total Te			Total Te	
	Running Tota	1 30		Running To	otal 45		Running To	otal 57
Year 3								
	SUMMER SESSION			FALL SEMESTER			SPRING SEMESTER	
Number		redits	Number	Course Title	Credits	Number	Course Title	Credits
PASS 673	Women's Health Rotation	3	PASS 676	Behavioral Medicine Rotation	3	PASS 680	Elective Rotation II	3
PASS 674	Internal Medicine Rotation	3	PASS 677	Pediatrics Rotation	3	PASS 686	Clinical Management III	4
PASS 675	Geriatrics Rotation	3	PASS 678	Floating Rotation	3	PASS 687	PA Practice Transition	5
PASS 655	Clinical Project	3	PASS 679	Elective Rotation I	3			
	T. 4-1 T	10		T-4-1 T	12		TP.4.1 TP.	12
	Total Term			Total Te			Total Te	
	Running Tota	1 09		Running To	tai 8 1	Didentis C	Running To	uai 93
							redit Hour Total 60	
						Clinical Cr	redit Hour Total 33	

Appendix B: Physician Assistant Competencies

PHYSICIAN ASSISTANT COMPETENCIES Vers. 3.5 (3/22/05)

As published by the American Academy of Physician Assistants (AAPA)

The PA profession defines the specific knowledge, skills, and attitudes required and provides educational experiences as needed in order for physician assistants to acquire and demonstrate these competencies.

MEDICAL KNOWLEDGE Medical knowledge includes an understanding of pathophysiology, patient presentation, differential diagnosis, patient management, surgical principles, health promotion and disease prevention. Physician assistants must demonstrate core knowledge about established and evolving biomedical and clinical sciences and the application of this knowledge to patient care in their area of practice. In addition, physician assistants are expected to demonstrate an investigatory and analytic thinking approach to clinical situations. Physician assistants are expected to:

- understand etiologies, risk factors, underlying pathologic process, and epidemiology for medical conditions
- identify signs and symptoms of medical conditions
- select and interpret appropriate diagnostic or lab studies
- manage general medical and surgical conditions to include understanding the indications, contraindications, side effects, interactions and adverse reactions of pharmacologic agents and other relevant treatment modalities
- identify the appropriate site of care for presenting conditions, including identifying emergent cases and those requiring referral or admission
- identify appropriate interventions for prevention of conditions
- identify the appropriate methods to detect conditions in an asymptomatic individual
- differentiate between the normal and the abnormal in anatomic, physiological, laboratory findings and other diagnostic data
- appropriately use history and physical findings and diagnostic studies to formulate a differential diagnosis
- provide appropriate care to patients with chronic conditions

INTERPERSONAL & COMMUNICATION SKILLS Interpersonal and communication skills encompass verbal, nonverbal and written exchange of information. Physician assistants must demonstrate interpersonal and communication skills that result in effective information exchange with patients, their patients' families, physicians, professional associates, and the health care system. Physician assistants are expected to:

- create and sustain a therapeutic and ethically sound relationship with patients
- use effective listening, nonverbal, explanatory, questioning, and writing skills to elicit and provide information
- appropriately adapt communication style and messages to the context of the individual patient interaction
- work effectively with physicians and other health care professionals as a member or leader of a health care team or other professional group

- apply an understanding of human behavior
- demonstrate emotional resilience and stability, adaptability, flexibility and tolerance of ambiguity and anxiety
- accurately and adequately document and record information regarding the care process for medical, legal, quality and financial purposes

PATIENT CARE Patient care includes age-appropriate assessment, evaluation and management. Physician assistants must demonstrate care that is effective, patient-centered, timely, efficient and equitable for the treatment of health problems and the promotion of wellness. Physician assistants are expected to:

- work effectively with physicians and other health care professionals to provide patient-centered care
- demonstrate caring and respectful behaviors when interacting with patients and their families
- gather essential and accurate information about their patients
- make informed decisions about diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence, and clinical judgment
- develop and carry out patient management plans
- counsel and educate patients and their families
- competently perform medical and surgical procedures considered essential in the area of practice
- provide health care services and education aimed at preventing health problems or maintaining health

PROFESSIONALISM Professionalism is the expression of positive values and ideals as care is delivered. Foremost, it involves prioritizing the interests of those being served above one's own. Physician assistants must know their professional and personal limitations. Professionalism also requires that PAs practice without impairment from substance abuse, cognitive deficiency or mental illness. Physician assistants must demonstrate a high level of responsibility, ethical practice, sensitivity to a diverse patient population and adherence to legal and regulatory requirements. Physician assistants are expected to demonstrate:

- understanding of legal and regulatory requirements, as well as the appropriate role of the physician assistant
- professional relationships with physician supervisors and other health care providers
- respect, compassion, and integrity
- responsiveness to the needs of patients and society
- accountability to patients, society, and the profession
- commitment to excellence and on-going professional development
- commitment to ethical principles pertaining to provision or withholding of clinical care, confidentiality of patient information, informed consent, and business practices
- sensitivity and responsiveness to patients' culture, age, gender, and disabilities
- self-reflection, critical curiosity and initiative

PRACTICE-BASED LEARNING AND IMPROVEMENT Practice-based learning and improvement includes the processes through which clinicians engage in critical analysis of their own practice experience, medical literature and other information resources for the purpose of self-improvement. Physician assistants must be able to assess, evaluate and improve their patient care practices. Physician assistants are expected to:

- analyze practice experience and perform practice-based improvement activities using a systematic methodology in concert with other members of the health care delivery team
- locate, appraise, and integrate evidence from scientific studies related to their patients' health problems
- obtain and apply information about their own population of patients and the larger population from which their patients are drawn
- apply knowledge of study designs and statistical methods to the appraisal of clinical studies and other information on diagnostic and therapeutic effectiveness
- apply information technology to manage information, access on-line medical information, and support their own education
- facilitate the learning of students and/or other health care professionals
- recognize and appropriately address gender, cultural, cognitive, emotional and other biases; gaps in medical knowledge; and physical limitations in themselves and others

SYSTEMS-BASED PRACTICE Systems-based practice encompasses the societal, organizational and economic environments in which health care is delivered. Physician assistants must demonstrate an awareness of and responsiveness to the larger system of health care to provide patient care that is of optimal value. PAs should work to improve the larger health care system of which their practices are a part. Physician assistants are expected to:

- use information technology to support patient care decisions and patient education
- effectively interact with different types of medical practice and delivery systems
- understand the funding sources and payment systems that provide coverage for patient care
- practice cost-effective health care and resource allocation that does not compromise quality of care
- advocate for quality patient care and assist patients in dealing with system complexities
- partner with supervising physicians, health care managers and other health care providers to assess, coordinate, and improve the delivery of health care and patient outcomes
- accept responsibility for promoting a safe environment for patient care and recognizing and correcting systems-based factors that negatively impact patient care
- apply medical information and clinical data systems to provide more effective, efficient patient care
- use the systems responsible for the appropriate payment of services

Appendix C: Letters of Support



INDIANA UNIVERSITY

SCHOOL OF MEDICINE-TERRE HAUTE On the campus of Indiana State University

November 19, 2009

Dean Richard "Biff" Williams, Ph.D., ATC
College of Nursing, Health and Human Services
Nursing Building Room 328
Indiana State University
Terre Haute, IN, 47809

Dear Dr. Williams,

I am writing this letter to lend strong support to your effort in developing a Physician Assistant program and a doctorate program in Physical Therapy at Indiana State University.

At a time, when the shortage of qualified health care practitioners is worsening nationally and in the state of Indiana, there is a strong need to recruit more students into the health care fields. The proposed programs by Indiana State University are timely. As the delivery of health care evolves further in the 21st century, inter-professional education will become more important in training competent health care delivery teams for our state. I look forward to our institutions working together toward that goal. Medical students training together with Physician Assistant students and Physical Therapy students can only result in better communication and better teamwork among health care practitioners. This is an unmatched opportunity to improve the future of health care delivery and to reduce the shortage of health care practitioners for our state. I strongly support the development of the proposed programs and look forward to the difference they will make in health education in Indiana.

Best wishes,

Taihung Duong, Ph. D.

Assistant Dean and Director

Juonglachund



ADMINISTRATION
1606 North Seventh Street

Terre Haute, IN 47804-2780 (812) 238-7000

August 4, 2009

RECEIVED
Dean's Office
AUG 1 0 2009

College of Nursing, Health and Human Services

Dr. Richard Williams
Indiana State University CNHHS
Nursing Bldg Rm 412
749 Chestnut St.
Terre Haute, IN 47809

Dear Dr Williams:

I am extremely pleased to learn of the interest Indiana State University (ISU) has in establishing a Physician Assistant Program. This has generated a significant level of support at Union Hospital.

Health care delivery is certainly in the midst of significant change. As you know, Physician Assistants are well trained to be actively involved in providing high quality, cost efficient, outcome oriented primary care in partnership with physicians across a wide range of medical settings. We have found their training and skills to be very applicable from Emergency Care to in the Primary Care office.

On behalf of Union Hospital, I want to express my support and encouragement to you and ISU in the development of the Physician Assistant Program. I am absolutely convinced that it is consistent with the Primary Care needs challenging all of us.

If I can be of assistance please let me know.

Sincerely,

UNION HOSPITAL, INC.

David R. Doerr President & CEO

DRD/ssg

A PARTNER IN THE UNION HOSPITAL HEALTH GROUP



September 10, 2009

Dr. Richard B. Williams
Dean, College of Nursing, Health and Human Services
Indiana State University
Nursing Building room 412
749 Chestnut Street
Terre Haute, IN 47809

RECEIVED

Dean's Office

SEP 1 4 2009

College of Nursing, Health and Human Services

Dear Dr. Williams:

The Indiana Rural Health Association (IRHA) is pleased to learn of the interest Indiana State University has in establishing Physician Assistant and Physical Therapy programs in the very near future. The needs assessments conducted by IRHA of our nearly 1,500 members indicate that these are vital programs you are proposing.

Many communities, especially the rural areas, do not have enough health professionals to keep their residents healthy. Some people in rural communities have no health care services whatsoever. Physical Therapists and Physician Assistants are two of the most in-demand health care professions in Indiana, and there are extreme shortages of these health professionals in the state, region, and nation. By offering new programs in these areas, we will better be able to address the shortages in these two needed professions. We are pleased that you are working diligently in preparing these curricula to also address the healthcare workforce shortages in rural areas. With the Indiana University School of Medicine-Terre Haute having the only rural curriculum in the state and its involvement, along with Indiana State University's involvement, in the Rural Health Innovation Collaborative, it makes good sense that Indiana State University would be the training ground for Physical Therapists and Physician Assistants, thereby helping to reduce the shortage of these health professionals in the rural communities.

On behalf of the Indiana Rural Health Association, we express our support and encouragement to you and ISU in the development of the Physician Assistant and Physical Therapy programs. We are convinced that by offering these programs, you will help us decrease health care worker shortages in the state, region and nation.

Sincerely,

Don Kelso

Executive Director

Tina Elliot

Assistant Director



August 3, 2009

Dr. Richard "Biff" Williams Indiana State University CNHHS Nursing Bldg. Room 412 749 Chestnut Street Terre Haute, IN 47809 RECEIVED
Dean's Office
AUG 1 I 2009

College of Nursing, Health and Human Services

Dear Dr. Williams:

I would like to offer my support toward the development of a Masters in Physician Assistant Studies at Indiana State University.

Throughout my career I have had the opportunity to work with physicians' assistants on many different venues and have found them to be an intricate part of our healthcare system.

We are facing a shortage of healthcare professionals throughout the nation, particularly in our rural and underserved areas, and I believe physicians' assistants would help meet that need.

If we at the Lugar Center may be of service in any way as you begin the development of this professional program, please don't hesitate to call.

Cordially,

JAT/jes

Medical Director

PH: 812/238-7479 | FX: 812/238-7439 | 1433 N 6 1/2 STREET, TERRE HAUTE, IN 47807 | www.LugarCenter.org

A Division of Union Hospital

West Central Indiana Area Health Education Center

Louise A. Anderson, M.S.N., R.N., Interim Director

Landsbaum Center for Health Education 1433 North 6¹/₂ Street Terre Haute, Indiana 47807-1037 812-237-4365 812-237-9688 812-237-2926 (fax)



August 10, 2009

Dr. Richard "Biff" Williams Indiana State University CNHHS Nursing Bldg Room 412 749 Chestnut St. Terre Haute, IN 47809

Dear Dr. Williams,

RECEIVED
Dean's Office
AUG 1 2 2009

College of Nursing, Health and Human Services

I write in support of the development and implementation of a Master's in Physician Assistant Studies at Indiana State University. AHEC is in the process of conducting a health care workforce needs assessment in Indiana with an emphasis on West Central Indiana. As part of the assessment, 61% of participants at a recent Health Summit indicated there was a shortage of physician assistants in our 11-county AHEC region. Data from the 2007 Health Resource and Services Administration (HRSA) Area Resource File show 705 physician assistants (PA) practicing in Indiana (11.1 per 100,000 population). West Central Indiana had 22 PAs (6.4 per 100,000). Key informant interviews are currently being conducted; although the data has not been analyzed, several of the respondents have indicated the need for more physician assistants.

The Kaiser Family Foundation provides data for numbers and rate of physician assistants per population for each state as of December 31, 2008. While the national rate of PAs was 24 per 100,000 population, Indiana's rate was 10. The remaining federal Region V states had the following rates: Illinois, 15; Michigan, 30; Minnesota, 24; Ohio, 17; and Wisconsin, 28. Indiana's southern neighboring state, Kentucky, had a rate of 20 PAs per 100,000 population.

Midlevel practitioners, such as advanced practice nurses and physicians assistants, have proven to increase access to care for many patients and provide high quality, cost efficient and outcome oriented care in partnership with physicians. Data indicate that Indiana has far fewer PAs per 100,000 population than other Midwestern States. As Hoosiers age and the numbers of persons seeking care for chronic disease increases, their health status could benefit by increasing the number of PAs in Indiana and neighboring states.

Sincerely,

Louise A. Anderson, MSN, RN

Interim Director

visit our Web site at www.indstate.edu/wciahec



Indiana Hospital Association

1 American Square • Suite 1900

Indianapolis, Indiana 46282-0004

317/633-4870 • 317/633-4875 fax

www.ihaconnect.org

September 30, 2009

Dr. Richard B. Williams
Dean, College of Nursing, Health and Human Services
Indiana State University
Nursing Building room 412
749 Chestnut Street
Terre Haute, IN 47809

Dear Dr. Williams:

Please accept this as a letter of support for Indiana State University establishing a Physician Assistant and Physical Therapy program.

As you know there are extreme shortages in Physical Therapists and Physician Assistants in the state, region, and the nation. By offering new programs in these areas we will better be able to address the shortages in these two needed professions. We are pleased that you are working diligently in preparing these curricula to also address the healthcare workforce shortages in rural areas. Your involvement in the Rural Health Innovation Collaborative is impressive and exciting. We appreciate this entity committing itself to decrease the health care shortages in our state.

On behalf of the Indiana Hospital Association I want to express my support and encouragement to you and ISU in the development of the Physician Assistant and Physical Therapy Program. I am convinced that by offering these programs you will help us in decreasing health care worker shortages in the state, region and nation.

Sincerely,

Douglas J. Leonard

President



Family Medicine Residency

August 10, 2009

Dr. Richard "Biff" Williams Indiana State University CNHHS Nursing Bldg. Room 412 749 Chestnut Street Terre Haute, IN 47809

RE: Indiana State University Proposal for a Physician Assistant Program

Dear Dr. Williams:

I am writing to support your proposal for a new physician assistant program at Indiana State University.

As healthcare reform takes place, the need for physician assistants will accelerate and a program at Indiana State University will go a long way in producing these much needed providers of healthcare.

Randy S. Stevens, M.D.

Medical Director

Union Hospital Center for Occupational Health

RS:jes

JAMES R. BUECHLER, M.D. Faculty Physician MELODY J. DRAKE, M.D. Faculty Physician ERIC D. BEACHY, M.D. Associate Director & Medical Director Clay City Center for Family Medicine PAUL L. DALUGA, M.D.
Director

JAMES A. TURNER. D.O.
Director, Lugar Center for Flural Health

KARLA C. ZODY, M.D.

Associate Director

THURMAN V. ALVEY, III, D.O. Associate Director JOSEPH R. BIGGS, Ph.D. Behavioral Science Coordinator From: Ronald Leach [mailto:rleach@uhhg.org]
Sent: Friday, August 07, 2009 11:12 AM

To: Biff Williams **Cc:** Barbara Battista **Subject:** PA program

Dr. Richard "Biff" Williams

Indiana State University CNHHS

Nursing Bldg Rm 412

749 Chestnut St.

Terre Haute, IN 47809

Dr. Richard "Biff" Williams;

This letter is in support of developing a program to produce PAs locally in the Wabash Valley to provide a much needed service. I am a long-standing member of the local medical community having lived and/or worked here at Union Hospital since November of 1977. During my tenure I have had the pleasure and privilege of working with several PAs in various roles throughout the community.

I currently serve as medical director for Union Hospital and also work as an emergency physician in the Union Hospital ER. I am also one of four State Medical Directors for EmCare, an emergency department management firm that currently staffs 18 emergency departments around the state with physicians, nurse practitioners and PAs. We currently employ several nurse practitioners as well as PAs to assist us in the ER. Currently we are constantly in search of adequate numbers of well-trained nurse practitioners and PAs throughout the state to staff the various departments. Currently there is a shortage of both nurse practitioners and PAs throughout the state. The shortage of PAs is more severe than that of nurse practitioners thanks in much part to the development of a local nurse practitioner program here at ISU.

We have been very pleased with the quality of nurse practitioners that have graduated from the ISU program and have participated in their training as well as benefitted from having them available to employ in numerous emergency departments around the state. We would love to have ISU develop a program for PAs locally that we could assist in the educational process as well as have a readily available source of PAs to serve the community and this state for years to come. I currently have 2 of my children enrolled at ISU and have been pleased with their educational training and opportunities. We hope to expand the role of our PAs and NPs when we move into the new facility after January of the coming year. To do so successfully requires an adequate supply of well trained and educated NPs and PAs. It is a constant battle trying to find

an adequate number of such people in the community. Currently to the best of my knowledge there is only one source of training for PAs within the Indiana and that is at Butler University in Indianapolis. The number of graduates from that program does not adequately address the shortage that we experience across the state.

There are many other job opportunities for PAs throughout the local community as well as the state other than the emergency department. I have seen them successfully employed by orthopedic surgeons, neurosurgeons and other surgical specialties both in the office as well as in the hospital. I have also seen them successfully employed in primary care offices to expand services to areas that are otherwise under served providing a much needed service locally that the patient would otherwise have to travel great distances and frequently are unable to do so.

I would like to close by encouraging you to continue to pursue and develop a local training program for PAs. I offer my services as well as the services of our ER and local ER physician's, nurse practitioner's and physician assistants to assist your program in their training in any way that you see fit. Please feel free to contact me at your convenience to answer any questions that you may have.

Respectfully submitted;

Ronald E. Leach, M.D., F.A.C.E.P.

Ronald E. Leach, M.D. Medical Director Union Hospital Health Group 1606 North Seventh St. Terre Haute, IN 47804 Tel: 812 238 7604

Fax: 812 238 7113 E-Mail: <u>Rleach@uhhg.org</u>



November 23, 2009

Indiana State University
Attn: Richard "Biff" Williams
Professor and Dean
College of Nursing, Health, and Human Services
Nursing Building, Room 412
749 Chestnut Street
Terre Haute, Indiana 47809

Dear Mr. Williams:

Thank you for the opportunity to review the proposed curriculum for the Master of Science in Physician Assistant Studies program that is being planned at Indiana State University. The courses that are planned seem very complete. I concur that your idea of combining clinical medicine with pharmacotherapeutics and clinical management will give the students an integrated learning opportunity. I found the Clinical Management III course an interesting way of putting all of the program, didactic and clinical, together in preparation for practice.

I shared my concerns with Ms. Battista regarding the Clinical year. The ARC-PA Accreditation Standards for Physician Assistant Education, 3rd edition, refers to Supervised Clinical Practice in the B7 section. The Standards refer to "medical care across the lifespan". The current plan is to have rotations in the specialty areas of Pediatrics, Women's Health, Internal Medicine and Geriatrics to meet these requirements. It has been our programs experience that finding specific rotations in these areas is difficult. As such, we require 12 weeks of Family Practice and 12 weeks of Adult Primary Care. The students are required to log all patient encounters and it is the responsibility of the Outcomes Coordinator to confirm that each student is obtaining exposure to patients "across the lifespan".

The ARC-PA Standards are vague in the amount of time each student must spend in each area during their Clinical year. The clinical curriculum at Des Moines University consists of 48 weeks broken down into 4 weeks surgery, 4 week psychiatry, 4 weeks emergency medicine, 12 weeks family practice and 12 weeks adult primary care. This allows for 2 weeks of vacation and 2 weeks of travel time.

3200 Grand Avenue

Des Moines, Iowa 50312-4198

Indiana State University Attn: Richard "Biff" Williams November 23, 2009

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In reviewing your proposed curriculum I counted 36 weeks plus a Pediatric and Floating Rotation that did not have specific time frames. As the Standards do not specify the amount of weeks required for the Clinical portion you may not need to alter your current plan.

I hope your program is successful. Please let me know if I can be of further service.

Respectfully,

Jo Kelly, MPAS, PA-C

PA Program Director Des Moines University

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Appendix E: Faculty Qualifications Indiana State University College of Nursing, Health, and Human Services Master of Science in Physician Assistant Studies Faculty Qualification Information

Name:	Office Phone: 812-237-3683
Richard B. Williams Ph.D., ATC Dean, College of Nursing, Health and Human Services	Email: Biff.williams@indstate.edu
Degrees / School:	Research Interest:
BS Weber State University 1994	Athletic Training Education
MS Indiana State University 1995	
PhD New Mexico State University 1998	Administration
	Injury Prevention
	Evidence-Based Practice

Professional Activities:

- 1. Professor, Indiana State University -Dean of the College
- 2. Indiana Area Health Education Center Advisory Board
- 3. Member, National Athletic Trainers' Association

Presentations and Publications (Selected):

Williams R.B., Duong P.T., Buechler, J. (2010). Achieving Results for the Future through Interdisciplinary Health Education. National Rural Health Association's 33rdd Annual Conference. May 20, 2010. Sayannah Georgia.

Miller, K, Knight KL, **Williams R.B.**, (2008). Athletic Trainers' Perceptions of Pickle Juice's Effects on Exercise Associated Muscle Cramps. Athletic Therapy Today. 13, (5), 31-34.

Finn, K.J., Dolgener, F., **Williams, R.B.,** (2004). Ingestion of carbohydrates following certification weighin did not benefit college wrestlers. <u>Journal of Strength and Conditioning Research</u>. 18 (2), 328-333.

Williams, R.B., Hadfield, O.D., (2003). Attributes of Curriculum Athletic Training Programs Related to the Passing Rate of First Time Certification Examinees. <u>Journal of Allied Health</u>, 32, (4), 240-245.

Williams, R.B., Hudson, M.B., & Evans, T.A. (2003). Recognition and prevention of injuries in sport rock climbing. Journal of Physical Education, Recreation, and Dance. 74 (9), 29-32.

Williams, R.B. (2001). Recognition of Movement Injuries in Children. JOPHERD, 72 (6), 29-31, 37.

Relevant teaching experience:	Clinical Practice:
Teach Evidence-Based Practice/Athletic Training	Certified Athletic Trainer
Teach Administration	

Name: Marcia Ann Miller Executive Director for Nursing Associate Dean for Academics	Office Phone: 812-237-8997 Email: Marcia.Miller@indstate.edu
Degrees / School: Ph.D. Leadership in Higher Education	Research Interest: Curriculum Nursing Education Psychiatric Nursing Distance Education

- 4. Member of the Educational Sub-committee for the Indiana State Board of Nursing
- 5. Member of Indiana Deans and Directors
- 6. Member of Sigma Theta Tau International
- 7. Member of the Indiana State Nurses Association
- 8. Member of National League for Nursing

Presentations and Publications

Othello Syndrome (in press)

Miller, M. (2008). Psychiatric nursing. Indianapolis, IN: The College Network.

T
Clinical Practice:
None at this time

Name: Leamor Kahanov, EdD, LAT, ATC Associate Professor, Indiana State University	Office Phone: 812-237-4554 Email: Leamor.kahanov@indstate.edu
Degrees / School: EdD University of San Francisco MS University of Arizona BS Indiana University Certification: Certified Athletic Trainer CPR Profession Rescuer Instructor	Research Interest:PolicyAdministration/LeadershipInjury Case Studies

Professional Activities:

- 9. Chair, Athletic Training Department, Indiana State University.
- 10. Chair, Task Force on Medication in Athletic Training, National Athletic Trainers' Association.
- 11. Board Member Reviewer: Commission on Accreditation of Athletic Training Education
- 12. Member: Post-Professional Education Committee, National Athletic Trainers' Association
- 13. Chair, Research & Professional Development Committee, Far West Athletic Trainer Association. Grant Reviewer, January 2003 2009

Publications

- Daly, T., **Kahanov**, **L.** (Accepted, Pending Publication Date). Pulmonary Emboli in a female gymnast. *Journal of Athletic Training*
- Lobesack, A., **Kahanov, L.,** Massucci, M., Roberts J. (Accepted, Pending Publication Date). Parenting and work issues among Division I female athletic trainers. *Journal of Athletic Training*.
- Myer, G., Ford, K., Divine, J., Wall, E., **Kahanov, L.,** Hewett, T. (2009). Longitudinal Assessment of Noncontact anterior cruciate ligament injury risk factors during maturation in a female athlete: A case report. *Journal of Athletic Training*, 44(1)101-109.
- Martin, M., Myer, G., Kreiswirth, E., **Kahanov**, **L**. (2009). Research Engagement: A Model for Athletic Training Education. *Journal of Athletic Training*.
- Coleman, E., **Kahanov**, **L**., (2008). Latissimus Dorsi Tear in a Collegiate Baseball Player: A Case Report. *NATA News*. July. 44-46.
- Kahanov, L. Lamarre, W. (2008). Athletic Training Hiring Criteria. NATA News. May, 15-17.
- Tabila, E., **Kahanov, L.** (2008). Grip Lock: A Unique Mechanism of Injury in Gymnastics. *Athletic Therapy Today*. 13(6)7-10.
- **Kahanov, L.** (2007). Kinesio Taping: An Overview of Use with Athletes: Part II. *Athletic Therapy Today*, *14*(4)17-18.

Clinical Practice:

Head Athletic Trainer, San Francisco State University 1993-1998.

Substitute Head Athletic Trainer, Skyline College, Pacific CA, Feb 5th, 2007, Feb 17-21, 2003, present **Medical Staff/Athletic Trainer**, Rocky Mountain Athletic

Conference: Regional Wrestling Championships, San Francisco State University, San Francisco CA, Feb. 28-March 1, 2003.

Name:	Office Phone: 812-478-4101
Randall L. Stevens, M.D.	- • • • • • • • • • • • • • • • • • • •
Medical Director, Union Hospital Occupational	Email: fprls@uhhg.org
Health	
Degrees / School: M.D. Indiana University School of Medicine B.S. PA program, Duke University B.A. Indiana State University Certification and Licensure: Board Certified American Family Medicine, AAFP Board Certified Addiction Medicine, ASAM Certified Medical Review Officer, AAMRO Licensed physician in Indiana	Research Interest: Clinical simulations Correctional medicine Opiate dependency in pregnancy Inter-professional training and practice
D . C 1 A . 4' '4'	L

Professional Activities:

- 1. Medical Director, Union Hospital Occupational Health
- 2. Clinical Assistant Professor of Family Medicine, Indiana University School of Medicine in Terre Haute
- 3. Medical Staff, Hamilton Mental Health Center
- 4. Volunteer physician and assistant medical director, St. Ann free clinic
- 5. ISMA Physician Assistance Committee Chairperson

Presentations and Publications:

- 1. "A comparison of maternal and neonatal outcomes in buprenorphine and methadone treatment in opiate dependent pregnancies" submitted for publication 2009
- 2. "Clinical simulations as part of first year medical physiology education" submitted for publication 2009
- 3. Expert witness re: Suicide in Jail 2006
- 4. "Methamphetamine" presentation to Union Hospital Resident and Staff Physicians 2004
- 5. "Rural training program" presentation to annual ACGME conference 2000

Relevant teaching experience:	Clinical Practice:
IUSM in TH: physician/patient and physical	Union Hospital Occupational
diagnosis. Preceptor coordination for rural training	Health and Family Medicine;
track	Hamilton Center

Barbara Battista, B.S., P.AC. Medical Provider Family Medicine Residency, Union Hospital, Terre Haute, IN Degrees / School: B.S. Butler University School of Pharmacy A.A.S. Malcolm X/Cook County Hospital PA program Certification and Licensure: NCCPA certified continuously since September, 1996 Licensed PA-C in Indiana Inactive license as a Pharmacist in Indiana Email: barbara.battista@indstate.edu Research Interest: • Evidence-based medicine • Cultural competency • Pharmacotherapeutics • Healthcare delivery systems reform	Name:	Office Phone: 812-237-4295
 B.S. Butler University School of Pharmacy A.A.S. Malcolm X/Cook County Hospital PA program Certification and Licensure: NCCPA certified continuously since September, 1996 Licensed PA-C in Indiana Evidence-based medicine Cultural competency Pharmacotherapeutics Healthcare delivery systems reform 	Medical Provider Family Medicine Residency, Union	Email: barbara.battista@indstate.edu
	B.S. Butler University School of Pharmacy A.A.S. Malcolm X/Cook County Hospital PA program Certification and Licensure: NCCPA certified continuously since September, 1996 Licensed PA-C in Indiana	 Evidence-based medicine Cultural competency Pharmacotherapeutics Healthcare delivery systems

Professional Activities:

- 1. Indiana Academy of Physician Assistants, president-elect as of January, 2010
- 2. Volunteer medical provider, St. Ann's free clinic, Nov, 2002 to Nov, 2007
- 3. Medical provider, Intercambio Cultural Maya, Yucatan, Mexico, winter trips, 2006-2008
- 4. Medical provider, Vigo County Jail, Terre Haute, IN 2007-2009
- 5. Hoosier for a Commonsense Health Plan, active member and advocate. 2004 to present

Presentations and Publications:

- 1. Medical Care and Poverty, UCM luncheon series, Terre Haute, IN, October 2009
- 2. STDs: guidelines and perspectives, MS-2 presentation, UH Family Medicine Residency, Terre Haute, IN, 2008
- 3. Human Sexuality, workshop for religious formation personnel, IRF at CTU, Chicago, IL. 2004-2006
- 4. Prenatal Care Guidelines from the USA, Chicago Medical Mission, Santa Cruz, Bolivia, October, 2000

Relevant teaching experience:	Clinical Practice:
ATTR 435 Pharmacology for Athletic Trainers	Union Hospital Family Medicine
Clinical faculty, Maternal health specialization, Union	Center, primary care provider
Hospital Family Medicine Residency	

Name: James A Turner, D.O. Medical Director, Richard G Lugar Center for Rural Health	Office Phone: 812-238-7479 Email: jturner@uhhg.org
Degrees / School: D.O. Chicago College of Osteopathic Medicine B.S. in Biology, University of Illinois Certification and Licensure: American Board of Family Medicine, 1989 to present American Society of Addiction Medicine, Certified Addiction Specialist, 1993 to present Licensed physician in Illinois and Indiana	Research Interest: Addictions medicine Attracting and retaining rural primary care providers Health systems improvements Sports medicine

Professional Activities:

- 1. Medical Director, Richard G Lugar Center for Rural Health, 2006 to present
- 2. Medical Director, Athletic Training program, Indiana State University, 2009 to present
- 3. Deputy Commissioner of Health, Vigo County, IN, 2003 to present
- 4. Medical Director, St. Ann Free Clinic, Terre Haute, IN, 1998 to present
- 5. Co-founder and volunteer physician, Lighthouse Mission medical clinic
- 6. Government Affairs Council, Illinois State Medical Society, 1991-1998

Publications and Presentations:

- 1. The Great Influenza: 1918 H1N1, an historical review. UH medical education series
- 2. MRSA. UH medical education series and community presentation through the Lugar Center
- 3. Rx narcotic abuse in athletes. Currently being researched

Relevant teaching experience: Assistant Professor of Family Medicine, Indiana University and University of Illinois Schools of Medicine, 1992 to present	Clinical Practice: Family Practice, Cork Medical Center, Marshall, IL

Name:	Office Phone: 812-238-7604
Ronald E. Leach, M.D., F.A.C.E.P., F.A.A.F.P.,	
B.C.F.E., A.B.F.M.	Email: rleach@uhhg.org
Medical Director Union Hospital Health Group	
Degrees / School:	Research Interest:
M.D. University of Miami School of Medicine	Emergency medicine
B.A. University of the Pacific	Pre-hospital care
	Forensic medicine
Certification and Licensure:	
Family Practice Residency, IU School of Medicine	
American Board of Emergency Medicine	
Fellow of American College of Emergency Physicians	
American Academy of Family Practice	
Board Certified Forensic Examiner	
American Board of Forensic Examiners	
Licensed physician in Indiana and Illinois	
Professional Activities:	
1. Medical Director of Vigo County Paramedic program	n, responsible for medical education
and training of EMT-As and Paramedics.	•
2. Associate Instructor, Indiana University School of M	Medicine in Terre Haute
2 Emagra State Medical Director from January 2004	o present
3. Emcare State Medical Director from January, 2004 t	
	o present
4. Union Hospital Medical Director from April, 2005 to	
4. Union Hospital Medical Director from April, 2005 to	

Clinical Practice:

Physician

Union Hospital Emergency Medicine

Relevant teaching experience:

Vigo County Paramedic program medical education and

ongoing training for EMT-As and Paramedics

Name	:	Office Phone: 812-237-2901
Assoc	as W. Nesser iate Professor tment of Physical Education	Email: Tom.Nesser@indstate.edu
Degre	ees / School:	Research Interest:
Ph.D.	Kinesiology	Human Performance
	University of Minnesota, Minneapolis, MN	
MS	Exercise Science	 Childhood Obesity
	University of Nebraska at Omaha, Omaha,	
NE		
BA	Sports Science	
	St. Olaf College, Muncie, MN	

Professional Activities:

Member of the National Strength and Conditioning Association

Member of American College of Sports Medicine

Presentations and Publications

Okado, T., K.C. Huxel, and **Nesser, T.W.** Relationship between core stability, functional movement, and performance. *Journal of Strength and Conditioning Research*. in print.

Nesser, T.W. and W.L. Lee. The relationship between core stability and performance in Division I female soccer players. *Journal of Exercise Physiology online*. 12(2):21-28. 2009.

Nesser, T.W., K.C. Huxel, J.L. Tincher, and T. Okado, The relationship between core stability and performance in strength and power athletes. *Journal of Strength and Conditioning Research*. 22(6). 2008.

Nesser, T.W. The glycemic advantage. *NSCA Performance Training Journal*. 6(6):17-19. 2007.

Nesser, T.W. Recovery Nutrition. Slide Presentation (50 minute) at the Indiana NSCA Annual State Clinic. Carmel, IN. 2008.

Relevant teaching experience:	Clinical Practice:
Anaerobic and Aerobic Training Methods	None at this time
Resistance Training Methods	
Physiology of Exercise	
Foundations of Conditioning	
Organization and Administration of Fitness	
Programs	
Lifespan Fitness	

Name:	Office Phone: 812-237-3486
Loretta Lucille White	
Associate Professor	Email: Lucy.White@indstate.edu
Advanced Practice Nursing	
Degrees / School:	Research Interest:
Post Masters University Southern Indiana	 Caring/Uncaring Behavior
Evansville, IN	
DNS Indiana University	 Advanced Nursing Practice
Indianapolis, IN	
MSN Indiana State University	Emergency Nursing
Terre Haute, Indiana	
BSN Indiana State University	
Terre Haute, Indiana	
ADN Indiana State University	
Terre Haute, Indiana	

Professional Activities:

Member of the Society of Advanced Practice Nurses

Member of Sigma Theta Tau International

Member of National League for Nursing

Presentations and Publications

White, L.L. (2006). Preparing for clinical: Just in time. *Nurse Educator 31*(2), 57-60. *Assessment & Skills Update for Nurses Returning to the Workplace: Insertion of Intravenous Line and Practice* (Nov 16, 2004). Landsbaum Center for Health Education. *Contemporary Ethics Issues in Health Care, Research, and Practice: Case Studies and Ethical Issues in Nursing, in Psychiatry, and in Research* (Apr, 2005). Landsbaum Center for Health Education.

Relevant teaching experience:	Clinical Practice:
Nursing graduate courses: Pharmacology for Family	None at this time
Nurse Practitioners; Family Nurse Practitioner Role I;	
Evidence Based Practice	
Nursing undergraduate courses: Pharmacology;	
Medical/Surgical Nursing; Nursing Research	