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March 2024

The program's PANCE pass rate percentage was 85% or less for its 2022 cohort. The program submitted the required analysis of PANCE performance. The commission **accepted the report**. No further information requested.

September 2021

The program received an alert through the Program Management Portal that the number of students exceeded the maximum entering class size. The program submitted the required Exceeding Class Size report. The commission **accepted the report**. No further information requested.

<u>June 2021</u>

Program change: Change in program support (change in fiscal support). The commission **acknowledged the proposed change**. No further information requested.

June 2020

The commission acknowledged the report providing evidence of

• The proposed plan in response to COVID-19. No further information requested.

September 2019

Program change: Change in program support (change in fiscal resources). The commission **acknowledged the proposed change**. No further information requested.

The program received an alert through the Program Management Portal that the number of students exceeded the maximum entering class size. The program submitted the required Exceeding Class Size report. The commission **accepted the report**. No further information requested.

September 2017

The commission **accepted the report** addressing 4th edition

• **Standards C2.01c-d**, modified Self-Study Report (provided evidence of a self-study report that documents c) faculty evaluation of the curricular and administrative aspects of the program and d) modifications that occurred as a result of self-assessment). No further information requested.

January 2017

The commission accepted the report providing evidence of

• Updated SCPEs in the Portal. No further information requested.

<u>July 2016</u>

Accreditation-Continued; Next Comprehensive Evaluation: September 2026. Maximum class size: 35. Report due September 5, 2016

• Update supervised clinical practice experiences (SCPEs) in Program Management Portal. Due June 30, 2017 (*Standards*, 4th edition) -

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• **Standards C2.01c-d**, modified Self-Study Report (lacked evidence of a self-study report that documents c) faculty evaluation of the curricular and administrative aspects of the program and d) modifications that occurred as a result of self-assessment).

March 2015

Program Change: The commission **acknowledged the proposed change** in the admissions process, effective April 2015. No further information requested.

March 2014

Program Change: Change in graduation requirements (72 to 90 credits), effective with May 2015 graduation. The commission **acknowledged the proposed change.** No further information requested.

September 2012

Program Change: Change in maximum student capacity (70 to 95), effective May 2013. One year only, then back to 70 (May 2014). The commission **acknowledged the proposed change**. No further information requested.

September 2009

Accreditation-Continued; Next Comprehensive Evaluation: September 2016. Maximum Student Capacity: 70. The commission noted zero areas of noncompliance with the *Standards*.

September 2007

Program Change: Change in length of program (22 to 24 months), effective June 2008. The commission **acknowledged the proposed change**. Additional information (decision of graduate committee) requested by January 11, 2008.

<u>March 2006</u>

The commission **acknowledged the report** providing evidence of

• Data analysis from the first two years of master's class courses. No further information requested.

March 2005

The commission **acknowledged the report** addressing 2nd edition

- **Standard B3.1d** (provided evidence the program provides instruction in psychosomatic manifestations of illness and injury),
- **Standard B3.3d** (provided evidence the program provides instruction in the counseling of patients regarding emotional problems of daily living),
- **Standard B6.2e** (provided evidence the program documents that every student has clinical experiences in general surgery) and
- **Standards C2.2c-d, g** (provided evidence the self-study includes critical analysis of c) student failure rates in individual courses and rotations, d) student evaluations of individual didactic courses, clinical experiences, and faculty and student evaluations of individual didactic courses, clinical experiences, and faculty). No further information requested.

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March 2004

Accreditation-Continued; Next Comprehensive Evaluation: March 2009. Maximum Student Capacity: 70. Report due January 17, 2005 (*Standards*, 2nd edition) -

- **Standard B3.1d** (lacked evidence the program provides instruction in psychosomatic manifestations of illness and injury),
- **Standard B3.3d** (lacked evidence the program provides instruction in the counseling of patients regarding emotional problems of daily living),
- **Standard B6.2e** (lacked evidence the program documents that every student has clinical experiences in general surgery) and
- **Standards C2.2c-d, g** (lacked evidence the self-study includes critical analysis of c) student failure rates in individual courses and rotations, d) student evaluations of individual didactic courses, clinical experiences, and faculty and student evaluations of individual didactic courses, clinical experiences, and faculty).

Report due January 16, 2006

• Analysis of data from the first two years of master's class courses.

December 2001

Program Change: Change in credential awarded (certificate to master's), effective August 2003 (first class graduates in May 2005). The commission **acknowledged the proposed change**. No further information requested.

NOTE: The ARC-PA commission action information available begins in December 2001. Information from initial accreditation in 1974 by the American Medical Association Council on Medical Education and subsequent accrediting organizations is not available.