PLNU forward

Department of Physician Assistant Education

Master of Science in Medicine

3 units

MSM 6106 FUNDAMENTALS OF NEPHROLOGY AND GENITOURINARY DISEASE

SUMMER 2024

Office location: 204 **Office hours:** TBA		**Instructor title and name:** TBD **Guest lecturers:**
Final Exam and OSCEs:		**Phone:**
Meeting location: Balboa Campus, Classroom 154, Clinical Skills Lab 223		**Email:**
Week 1: **Meeting days and times:**	**Week 2:** **Meeting days and times:**	**Week 3:** **Meeting days and times: 6**

PLNU Mission

To Teach ~ To Shape ~ To Send

Point Loma Nazarene University exists to provide higher education in a vital Christian community where minds are engaged and challenged, character is modeled and formed, and service is an expression of faith. Being of Wesleyan heritage, we strive to be a learning community where grace is foundational, truth is pursued, and holiness is a way of life.

COURSE DESCRIPTION

This course covers the epidemiology, etiology, risk factors, pathogenesis, pathophysiology, complications, and differential diagnoses of commonly encountered renal system diseases and disorders through symptoms-based and systems-based approaches. This course also covers diseases and disorders specific to the male patient, and in-depth instruction in fluid, acid-base, and electrolyte disorders. Management of patients with these diseases and disorders across the life span from initial presentation through follow-up for acute, chronic, and emergent cases will be covered, as will referral when necessary, preventive medicine, and patient education.

COURSE GOALS

This goal of this course is to provide the appropriate basic science background essential to the understanding of and diagnosis of disease patterns related to the renal and urologic systems, including electrolyte and acid-base disorders. It will provide the student with the skills and knowledge necessary for the diagnosis and management of common renal and urologic disorders, including men's health.

PROGRAM LEARNING OUTCOMES

The content in this course will contribute to the student's proficiency in this/these area(s):

1. Gather a history and perform a physical examination. (MK, IC, PC, PR)
2. Prioritize a differential diagnosis following a clinical encounter. (MK, PC, PB, PR, SB)
3. Recommend and interpret common diagnostic and screening tests. (MK, IC, PC, PR, PB, SB)
4. Enter and discuss orders and prescriptions. (MK, IC, PC, PR, PB, SB)
5. Document a clinical encounter in the patient record. (MK, IC, PC, PR)
6. Provide an oral presentation of a clinical encounter. (MK, IC, PC, PB, PR)
7. Form clinical questions and retrieve evidence to advance patient care. (MK, PC, PR, PB, SB)
8. Give or receive a patient handover to transition care responsibility. (MK, PC, PR, IC, PB)
9. Collaborate as a member of an inter-professional team. MK, IC, PC, PR, PB, SB
10. Recognize a patient requiring urgent or emergent care and initiate evaluation and management. (MK, IC, PC, PR, PB, SB)
11. Obtain informed consent for tests and/or procedures. MK, IC, PC, PR, PB
12. Perform general procedures of a physician assistant. MK, IC, PC, PR, PB, SB

Initials indicate PA core competency required to meet the PLO.

PA Core Competencies:

MK = Medical Knowledge	IC = Interpersonal Skills & Communication	PC = Patient Care
PR = Professionalism	PB = Practice-based Learning	SB = Systems-based Practice

COURSE LEARNING OUTCOMES

Successful completion of this course requires demonstration of the skills and knowledge outlined here at, minimally, the COMPETENT level.

1. Obtain a history and perform a focused physical examination relevant to renal and urologic symptoms. (PC2; MK1; IC1; IC7; PR1; PR3; PR5)
2. Prioritize a differential diagnosis based on the history and physical findings in a patient with a renal and/or urologic complaint. (PC2, PC4, MK2, MK3, MK4, PB1, IC2, PR8)
3. Recommend common diagnostic and screening tests, pharmacotherapeutics, and management based on their applicability to the differential diagnosis. (PC4, PC5, PC7, PC9, MK1, MK4, PB9, SB3)
4. Document a clinical encounter including history, physical examination, lab and/or imaging results and a differential diagnoses in the patient record. ((PC4, PC6, IC1, IC2, IC5, PR4, SB1)

5. Provide an oral presentation of a clinical encounter for a renal and/or urologic complaint including discussion of the pathology, laboratory and/or imaging results and justification of the proposed management plan. (PC2; PC6; IC1; IC2; PB1; PR1; PR3)
6. Form clinical questions and retrieve evidence to advance patient care. (PC5, PC7, MK3, MK4, PB1, PB3, PB6, PB7, PB8, PB9
7. Recognize a patient requiring urgent or emergent care for a renal and/or urologic condition or the patient in whom the manifestation of systemic disease is renal and/or urologic and initiate evaluation and management. (PC1, PC2, PC3, PC4, PC5, PC6, IC6, PR1, PR5)

INSTRUCTIONAL OBJECTIVES

Upon completion of the **ANATOMY AND PHYSIOLOGY** section of the course, the student will be able to:

1. Discuss the major epithelial transport mechanisms of various segments of the nephron and indicate what areas are targets of commonly prescribed diuretics. Comprehension, B2.02a, B2.02b, B2.02d
2. Discuss the physiology of water balance and osmolality of body fluids, including the feedback regulation of antidiuretic hormone (ADH) and ADH effects on the kidney and urine osmolality. Comprehension, B2.02b
3. Discuss the role of the kidneys in regulation of body fluids, proteins, and electrolytes. Comprehension, B2.02b
4. Relate the significance of measuring BUN, creatinine, BUN/creatinine ratio, and creatinine clearance to clinical diagnosis. Application, B2.02b
5. Explain the physiology of sodium, potassium, hydrogen ion, and water excretion and determine various causes of hyponatremia, hypernatremia, hypokalemia, and hyperkalemia. Analysis, B2.02b
6. Analyze and interpret components of a urinalysis. Analysis, B2.02b
7. Estimate and determine normal creatinine clearance and glomerular filtration rates (GFR) for various populations. Evaluation, B2.02b

Upon completion of the **PATHOPHYSIOLOGY** section of the course, the student will be able to:

1. Explain the causes and consequences of over secretion and under secretion of testosterone for a) prepubertal and b) postpubescent males. Comprehension, B2.02c
2. Understand aging- related changes in the hypothalamus-pituitary-gonadal axis that lead to puberty, reproductive maturity, and reproductive senescence (andropause). Comprehension, B2.02c
3. Discuss evaluation, staging, and management of chronic kidney disease (CKD). Comprehension, B2.02c
4. Discuss the clinical significance of proteinuria, and provide examples of diseases/disorders that may be indicated by proteinuria. Application, B2.02c
5. Contrast pre-renal causes of altered kidney function, post-renal disorders, and intrinsic renal diseases. Analysis, B2.02c
6. Analyze and interpret components of an abnormal urinalysis. Analysis, B2.02c
7. Estimate and determine creatinine clearance and glomerular filtration rates (GFR) in patients with chronic kidney disease (CKD). Evaluation, B2.02c

Upon completion of the **PHYSICAL DIAGNOSIS** section of this course, the student will be able to:

1. Demonstrate a focused medical history in the screening of or evaluation of suspected renal or genitourinary disease. Application, B2.07a
2. Perform complete and focused physical exam of the kidneys and genitourinary tract. Application, B2.07b
3. Explain the significance of positive and negative findings in the renal and genitourinary examinations. Analysis, B2.07b, B2.07c

Upon completion of the **CLINICAL MEDICINE** section of the course, the student will be able to: B2.03

1. Identify common risk factors in renal and genitourinary disease and discuss their management. Knowledge, B2.07e
2. Properly interpret a urinalysis, common renal function tests and define normal vs abnormal values. Application, B2.07d
3. Differentiate the evaluation and treatment approach in acute, chronic and emergent renal and urologic disease. Analysis, B2.08b
4. List commonly employed modalities aimed at prevention of renal and genitourinary disease. Knowledge, B2.08b
5. Given a patient across all age groups, with any of the following signs or symptoms: interview and elicit a comprehensive, relevant medical history, B2.07a perform a complete and focused physical examination and identify the physical findings, B2.07b generate a complete list of differential diagnoses prioritizing them appropriately, B2.07c recommend an appropriate work-up, order and interpret diagnostic studies, B2.07d propose patient management including acute and chronic care plans, B2.07e provide patient education and referral. B2.07f, Evaluate
    a. Anuria
    b. Oliguria
    c. Glycosuria
    d. Dysuria
    e. Hematuria
    f. Polyuria
    g. Proteinuria
    h. Frequency
    i. Urgency
    j. Pyuria
    k. Nocturia
    l. Ketonuria
    m. Generalized edema
    n. Hypertension
    o. Incontinence
    p. Retention

    q. Phenylketonuria
6. Given a patient across all age groups, with any of the following genitourinary conditions: interview and elicit a comprehensive, relevant medical history, [B2.07a] perform a complete and focused physical examination and identify the physical findings, [B2.07b] generate a complete list of differential diagnoses prioritizing them appropriately, [B2.07c] recommend an appropriate work-up, order and interpret diagnostic studies, [B2.07d] propose patient management including acute and chronic care plans, [B2.07e] provide patient education and referral. [B2.07f, Evaluate]
    a. Benign prostatic hyperplasia
    b. Bladder prolapse
    c. Congenital abnormalities
        i. Hypospadias
        ii. Epispadias
    d. Cryptorchidism
    e. Erectile dysfunction
        i. Peyronie's Disease
    f. Scrotal mass
        i. Hydrocele
        ii. varicocele
        iii. Epididymal cyst/Spermatocele
    g. Renal mass
    h. Incontinence
    i. Nephro/urolithiasis
    j. Paraphimosis/phimosis
    k. Testicular torsion
    l. Priapism
    m. Urinary retention
    n. Overactive bladder
    o. Underactive bladder
    p. Testicular trauma
        i. Hematoma
        ii. Rupture
    q. Penile trauma
        i. Penile fracture
    r. Urethral prolapse
    s. Urethral stricture
    t. Vesicoureteral reflux
7. Given a patient across all age groups, with any of the following genitourinary infectious and/or inflammatory conditions: interview and elicit a comprehensive, relevant medical history, [B2.07a] perform a complete and focused physical examination and identify the physical findings, [B2.07b] generate a complete list of differential diagnoses prioritizing them appropriately, [B2.07c] recommend an appropriate work-up, order and interpret diagnostic studies, [B2.07d] propose

patient management including acute and chronic care plans, [B2.07e] provide patient education and referral. [B2.07f, Evaluate]

a. Cystitis
b. Epididymitis
c. Fournier's gangrene
d. Orchitis
e. Prostatitis
f. Pyelonephritis
g. Urethritis

8. Given a patient across all age groups, with any of the following genitourinary neoplastic diseases: interview and elicit a comprehensive, relevant medical history, [B2.07a] perform a complete and focused physical examination and identify the physical findings, [B2.07b] generate a complete list of differential diagnoses prioritizing them appropriately, [B2.07c] recommend an appropriate work-up, order and interpret diagnostic studies, [B2.07d] propose patient management including acute and chronic care plans, [B2.07e] provide patient education and referral. [B2.07f, Evaluate]
    a. Bladder carcinoma
    b. Penile carcinoma
    c. Prostate carcinoma
    d. Renal cell carcinoma
    e. Testicular carcinoma
    f. Wilms tumor
9. Given a patient across all age groups, with any of the following renal diseases: interview and elicit a comprehensive, relevant medical history, [B2.07a] perform a complete and focused physical examination and identify the physical findings, [B2.07b] generate a complete list of differential diagnoses prioritizing them appropriately, [B2.07c] recommend an appropriate work-up, order and interpret diagnostic studies, [B2.07d] propose patient management including acute and chronic care plans, [B2.07e] provide patient education and referral. [B2.07f, Evaluate]
    a. Acute renal failure
    b. Chronic kidney disease
    c. Glomerulonephritis
    d. Hydronephrosis
    e. Nephrotic syndrome
    f. Nephritic Syndrome
    g. Polycystic kidney disease
    h. Renal vascular disease
    i. Diabetic nephropathy
    j. End-stage renal disease
    k. Horseshoe kidney
10. Given a patient across all age groups, with any of the following fluid and electrolyte disorders: interview and elicit a comprehensive, relevant medical history, [B2.07a] perform a complete and focused physical examination and identify the physical findings, [B2.07b] generate a complete list of differential diagnoses prioritizing them appropriately, [B2.07c] recommend an appropriate work-up,

order and interpret diagnostic studies, [B2.07d] propose patient management including acute and chronic care plans, [B2.07e] provide patient education and referral. [B2.07f, Evaluate]

a. Dehydration
b. Hypervolemia
c. Hypovolemia
d. Hyperkalemia
e. Hypokalemia
f. Hypernatremia
g. Hyponatremia
h. Hypercalcemia
i. hypocalcemia
j. Acid/Base Disorders
    i. High Anion Gap Metabolic Acidosis: Pathogenesis

11. Discuss common genitourinary disorders presenting in children and in the elderly, their varying presentations and propose a management plan including consideration of co-morbidities and polypharmacy. [Application, B2.02d, B2.07e, B2.08a]
12. Working with the appropriate health care professional, develop an appropriate patient education plan as needed. [Application, B2.07f]
13. Working with the appropriate health care professional, recommend an appropriate patient referral plan as needed. [Application, B2.07f]
14. Working with the appropriate health care professional recommend a suitable rehabilitation plan as needed. [Application, B2.08b]
15. Working with the appropriate health care professional recommend a suitable prevention program as needed. [Application, B2.08b]
16. Working with the appropriate health care professional, recommend an appropriate palliative care plan for a patient facing end-of-life decisions. [Application, B2.08e]
17. Differentiate the evaluation and treatment approach in acute, chronic and emergent genitourinary disease. [Analysis, B2.07e, B2.08b]
18. Identify the patient requiring emergent intervention for an acute genitourinary disorder. [Evaluation, B2.08b]
19. Demonstrate skills in problem solving and medical decision-making through community learning group case discussions and activities. [Application, B2.05]
20. Demonstrate supportive counseling skills when delivering bad news to a patient. [Application, B2.12c]

SKILLS OBJECTIVES

Upon completion of this course, the student will demonstrate competence in:

1. Eliciting a history. [Application, B2.07a]
2. Performing complete and focused physical exam of the kidneys and genitourinary tract. [Application, B2.07b]
3. Performing and properly interpreting a urinalysis, common renal function tests and define normal vs abnormal values. [Application, B2.09]

4. Properly inserting a bladder catheter using sterile technique. Application, B2.09

Note: Superscipts identify the Bloom's Taxonomy level for each objective.

UNIT INSTRUCTION

UNIT	HOURS	LECTURES	LABS
Unit I	1	ORIENTATION **PATHOPHYSIOLOGY**	
	3	**PHYSICAL DIAGNOSIS**	**Patient History** **Physical Exam**
UNIT I EXAM			
Unit II	41	**CLINICAL MEDICINE** Signs and Symptoms	**Patient History** **Physical Exam** **Urinalysis** **Renal Function Tests** **Bladder Catheters**
UNIT II EXAM			

REQUIRED TEXTS AND RECOMMENDED STUDY RESOURCES

Note: Texts prefaced with double asterisks are provided in Access Medicine.

**Pathophysiology of Disease: An Introduction to Clinical Medicine, 8e by Gary D. Hammer (Author), Stephen J. McPhee (Author) McGraw-Hill.
ISBN-13: 978-1-260-02650-4
ISBN-10: 0071806008

**Harrison's Principles of Internal Medicine 20/E (Vol.1 & Vol.2) 20th Edition by Dennis L. Kasper, Anthony S. Fauci, Stephen Hauser, Dan Longo, J. Larry Jameson, Joseph Loscalzo
ISBN-13: 978-1259644030
ISBN-10: 0071802150

**Current Medical Diagnosis and Treatment 2021, 60e
Author: Maxine A. Papadakis, Stephen J. Mcphee, Eds. & Michael Rabow, Assoc Ed
Publisher: McGraw-Hill
ISBN: 978-1260469868

**Current Diagnosis and Treatment: Nephrology and Hypertension 2017, 2e.
Author: Lerma E.V., & Rosner M.H., & Perazella M.A.(Eds.)
Publisher: McGraw-Hill
ISBN: 978-1259861055

**Vander's Renal Physiology, 9e (2018)
Author: Douglas C. Eaton, John P. Pooler
Publisher: McGraw-Hill
ISBN: 978-1260019377

**Infectious Diseases: A Clinical Short Course, 4e. Frederick S. Southwick. McGraw Hill
ISBN-13: 978-1-260-14365-2

Bates' Guide to Physical Examination and History Taking, 13th Edition by Lynn S. Bickley. LLW, (2022)
ISBN-13: 978-1496398178
ISBN-10: 1496398173

**DeGowin's Diagnostic Examination, 11e Richard F. LeBlond, Donald D. Brown, Manish Suneja, Joseph F. Szot. McGraw-Hill Education / Medical; 11th edition (2020).
ISBN-10: 0071814477
ISBN-13: 978-1260134872

**Tintinalli's Emergency Medicine: A Comprehensive Study Guide, Ninth Edition (Emergency Medicine (Tintinalli)) 9th Edition
by Judith Tintinalli (Author), J. Stapczynski (Author), O. John Ma (Author), David Cline (Author), Rita Cydulka (Author), Garth Meckler (Author)
ISBN-13: 978-1260019933
ISBN-10: 0071484809

Essential Clinical Procedures: 4th Edition by Richard Dehn & David P. Asprey.
(2021) Elsevier Health Sciences
(ISBN-13: 978-0323624671
ISBN-10: 1455707813

Rapid Interpretation of EKG's, 6th Edition by Dale Dubin. Cover Publishing Company; 6 edition (October 15, 2000).
ISBN-10: 0912912065
ISBN-13: 978-0912912066
071484809

Acid-Base, Fluids, and Electrolytes Made Ridiculously Simple 3rd Edition
by Richard A. Preston (Author). MedMaster Inc; 3rd edition (2018).
ISBN-10: 0940780984
ISBN-13: 978-1935660293

Recommended: (not available in Access Medicine)

Cecil Essentials of Medicine: Edition 10
Edward J Wing, Fred J. Schiffman
Elsevier Health Sciences, (2022)
ISBN-13: 978-0323722711
ISBN-10: 143771899X

Textbook of Physical Diagnosis: History and Examination With STUDENT CONSULT Online Access, 8e (Textbook of Physical Diagnosis (Swartz)) 8th Edition by Mark H. Swartz MD FACP (Author). Saunders; 8th edition, (2021)
ISBN-13: 978-0323672924
ISBN-10: 0323221483

Date	Topic	Reading/Assignment
Tuesday June 4th 1-5pm Taera Felkins, PA-C	A&P, BMP, Volume, Basic Lytes, UA Lab, UTIs	
Wednesday June 5th 1-5pm Joey McAdams, PA-C	GU/Nephro Fundamentals, Pathophys, Male GU Exam Lecture Overview of course, syllabus, quiz games, group urolithiasis presentation Quiz 1	
Thursday June 6th 1-5pm Joey McAdams, PA-C	Non-Obstructive LUTS, Obstructive LUTS, Upper & Lower UT Obstruction (inci hydro, foley, stents, PCN review), GU procedures Quiz 2	
Friday June 7th, 8am-12pm 1-5pm Joey McAdams, PA-C	MUTA Lab Men's Health Day 1 (ED & Peyronies, T Deficiency & Andro pause, Male Factor Infertility Topics, Benign + Acute Penile Pathos, Penile Cancer)	

Monday June 10th 8-12am 1-3pm Joey McAdams, PA-C	Men's Health Day 2 (Benign Scrotal Pathos, Acute Scrotal Pathos, Testicular Cancer) Quiz 3 Male PE Lab (MUTA Review)	
Tuesday June 11th 1-5pm Joey McAdams, PA-C	Onc Day (Prostate Ca + PSA and DRE Controversies, Bladder and Urothelial Ca, Renal Masses + Renal Ca + Wilms Tumor) Quiz 4	
Wednesday June 12th 1-5pm Joey McAdams, PA-C	AKI & CKD Day (AKI pt 1, AKI pt 2, AKD & how AKD can become CKD, Common Disease A/W Intrarenal AKIs, CKD & Associated Chronic Diseases, Phos + Ca) Quiz 5	
Thursday June 13th 1-5pm	Foley Lab	
Friday June 14th 8am-12pm 1-5pm Joey McAdams, PA-C	MUTA Lab Lytes Day (Hypo/HyperK+, Hypo/Hyper Ca++, Hypo & HyperNa+ & Volume: Nephro Perspective) Quiz 6	
Monday June 17th 8-11:30am Joey McAdams, PA-C Jeanne Nassar, PA-C	Urolithiasis Day Nephro: Acid/Base, GN, Nephrotic & Nephritic Syndromes, DM Nephropathy PCKD	
Tuesday June 18th 1-5pm Jeanne Nassar, PA-C	Nephro: ESRD + Dialysis Transplant	

Wednesday March 14th 1-5pm Joey McAdams, PA-C	Review Day Quiz 7	
Friday June 21st		Case Study H&P Due
Monday June 24th 8am-5pm	Final Exam and PC OSCE	

LEARNING MODALITIES

Modalities include lectures, on-line pre-lecture activities, reading assignments, community learning activities, and clinical skills labs. The class schedule and assignments can be found in Canvas.

ATTENDANCE AND PARTICIPATION POLICY

Regular and punctual attendance at all classes is considered essential to optimum academic achievement. However, we recognize that as adults you have other life responsibilities and challenges that may interfere. Ultimately you are responsible for your education and your ability to demonstrate mastery of the course and program objectives.

1. You MUST attend:
   - PE and clinical skills labs appropriately dressed and with all necessary equipment
   - examinations on the date and time for which they are schedule
   - Community learning group
2. We expect
   - active participation in all class activities.
   - completion of all class preparatory assignments prior to commencement of class.
   - respect for the class, peers and faculty.
   - on-time arrival for all classes, laboratories, learning groups or any scheduled activities. Routine tardiness demonstrates a lack of professionalism and will not be tolerated

INCOMPLETES AND LATE ASSIGNMENTS

All assignments are to be submitted/turned in by the beginning of the class session when they are due—including assignments posted in Canvas. Failure to meet the deadline will result in a loss of 10% each day the assignment is not turned in to the requesting faculty member. Incompletes will only be assigned under extremely unusual circumstances. Students failing an examination or practicum must complete the designated remediation (See REMEDIATION below) within the assigned time.

FINAL EXAMINATION POLICY

Successful completion of this class requires taking the final examinations (written and practical) **on their respective scheduled days**. No requests for early examinations or alternative days will be approved.

ASSESSMENT AND GRADING

Student course grades are calculated using all assessment tools utilized during the course. These include quizzes, written examinations, written assignments, practicums, and evaluation of skills.

Learning community groups will be utilized to provide case-based instruction. A clinical case will be presented to each group by the group mentor. Students are expected to utilize knowledge acquired from prior readings and lectures, as well as self/group directed learning to work up the case, develop a working diagnosis, a differential diagnosis and a therapeutic regimen which will include a follow-up plan and patient education. Effective interpersonal communication, clinical reasoning and problem solving abilities, professional behavior and teamwork are paramount to success and development as clinicians. Cases will be issued no more frequently than every other week. There will be 2 cases in this module. Students will receive a collective grade for this exercise.

Learning community group performance expectations include; demonstrating effective interpersonal communication, clinical reasoning and problem solving abilities, professional behavior and teamwork skills. Application, B2.05, B4.03b, B4.03c, B4.03e

ACTIVITY	% OF GRADE
Learning Community	5%
Case Study H&P	5%
Written Examinations	50%
Skills OSCE	15%
Patient-centered OSCE	25%

Grading will be in keeping with Point Loma Nazarene University policy for graduate programs and grading will be as follows:

A=93-100	C=73-76
A-=92-90	C-=70-72
B+=87-89	D+=67-69
B=83-86	D=63-66
B-=80-82	D-=60-62
C+=77-79	F=0-59

REMEDIATION

Remediation is the process by which both the student and the program are assured that performance indicating a deficiency in knowledge or skills is subsequently demonstrated to be satisfactory. This may include a re-test over missed material, a skills demonstration or a review of missed material with completion of corrected answers. It is important to note that this is content remediation, not grade remediation and no grade will be changed based on these activities.

Within 48 hours of the posting of a grade of <70%, the student MUST contact the course director to discuss the student's performance and create a remediation plan. Unless otherwise directed by the course director, remediation activities must be completed within 5 days.

PLNU COPYRIGHT POLICY

Point Loma Nazarene University, as a non-profit educational institution, is entitled by law to use materials protected by the US Copyright Act for classroom education. Any use of those materials outside the class may violate the law.

PLNU ACADEMIC HONESTY POLICY

Students should demonstrate academic honesty by doing original work and by giving appropriate credit to the ideas of others. Academic dishonesty is the act of presenting information, ideas, and/or concepts as one's own when in reality they are the results of another person's creativity and effort. A faculty member who believes a situation involving academic dishonesty has been detected may assign a failing grade for that assignment or examination, or, depending on the seriousness of the offense, for the course. Faculty should follow and students may appeal using the procedure in the university Catalog. See the Academic Honesty Policy in the Graduate and Professional Studies Catalog for definitions of kinds of academic dishonesty and for further policy information.

PLNU ACADEMIC ACCOMMODATIONS POLICY

While all students are expected to meet the minimum standards for completion of this course as established by the instructor, students with disabilities may require academic adjustments, modifications or auxiliary aids/services. At Point Loma Nazarene University (PLNU), these students are requested to register with the Disability Resource Center (DRC), located in the Bond Academic Center. (DRC@pointloma.edu or 619-849-2486). The DRC's policies and procedures for assisting such students in the development of an appropriate academic adjustment plan (AP) allows PLNU to comply with Section 504 of the Rehabilitation Act and the Americans with Disabilities Act. Section 504 (a) prohibits discrimination against students with special needs and guarantees all qualified students equal access to and benefits of PLNU programs and activities. After the student files the required documentation, the DRC, in conjunction with the student, will develop an AP to meet that student's specific learning needs. The DRC will thereafter email the student's AP to all faculty who teach courses in which the student is enrolled each semester. The AP must be implemented in all such courses.

If students do not wish to avail themselves of some or all of the elements of their AP in a particular course, it is the responsibility of those students to notify their professor in that course. PLNU highly recommends that DRC students speak with their professors during the first two weeks of each semester about the applicability of their AP in that particular course and/or if they do not desire to take advantage of some or all of the elements of their AP in that course.

This syllabus is subject to change. Students are encouraged to check course messages and emails in order to remain current.

ARC-PA standards (5th edition) addressed in this course: B2.02(a)(b)(c)(d), B2.03, B2.05, B2.07, B2.08, B2.09, B2.12(c), B2.18, B4.03(b)(c)(e)