

University of Nevada, Reno

Accreditation History

First accredited: March 2018

Next review: July 2033

Maximum class size: 24

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June 2025

Program Change: Increase maximum entering class size to 28 students. The commission **reviewed and more information requested** of the program's proposed change. Additional information (Analysis of student attrition, description of how the program will ensure sufficiency of faculty during the time that three cohorts are enrolled, and a table that verifies sufficiency of all SCPEs included on the curriculum schematic) due July 21, 2025.

March 2025

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.

Program Change: Increase maximum entering class size. The commission **did not approve** the program's proposed change. No further information requested.

June 2024

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

- Clarification of the discipline and board certification status for a single preceptor and clarification of the learning outcomes that inconsistently aligned with the preceptor evaluation tool that the program indicated was the assessment method for those learning outcomes.

No further information requested.

March 2024

The commission **reviewed and more information requested** of the report addressing 5th edition

- **Standard B3.06a** (lacked evidence supervised clinical practice experiences occur with physicians who are specialty board certified in their area of instruction)
- **Standard B4.01a** (provided evidence the program conducts frequent, objective and documented evaluations of student performance in meeting the program's learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components that align with what is expected and taught)
- **Standard B4.01b** (lacked evidence the program conducts frequent, objective and documented evaluations of student performance in meeting the program's learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components that allow the program to identify and address any student deficiencies in a timely manner)

Additional information (clarification of the discipline and board certification status for a single preceptor and clarification of the learning outcomes that inconsistently aligned with the preceptor evaluation tool that the program indicated was the assessment method for those learning outcomes) due February 1, 2024.

June 2023 (following Final Provisional review)

Accreditation-Continued; Program has demonstrated continued and sufficient compliance with the ARC-PA Standards after completion of the provisional review process. Next Comprehensive Evaluation: June 2023. The program is approved for a maximum class size of 24.

Report due October 1, 2023 (*Standards*, 5th edition):

- **Standard B3.06a** (lacked evidence supervised clinical practice experiences occur with physicians who are specialty board certified in their area of instruction)
- **Standard B4.01a** (lacked evidence the program conducts frequent, objective and documented evaluations of student performance in meeting the program's learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components that align with what is expected and taught)
- **Standard B4.01b** (lacked evidence the program conducts frequent, objective and documented evaluations of student performance in meeting the program's learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components that allow the program to identify and address any student deficiencies in a timely manner)

No report due (commission expects program to submit all reports and documents as required by the ARC-PA with the initial submission):

- **Standard E1.03** (lacked evidence the program submits reports or documents as required by the ARC-PA).

March 2022

The commission **accepted the report** providing evidence in support of conclusions and actions plans in analysis of PANCE performance. No further information requested.

September 2021

The program's PANCE pass rate percentage was 85% or less for its 2020 cohort. The program submitted the required analysis of PANCE performance. The commission **reviewed and more information requested** from the report. Additional information (evidence in support of conclusions and actions plans) due October 29, 2021.

September 2020 (following Provisional Monitoring review)

Accreditation-Provisional; Next Comprehensive Evaluation: September 2022 (Final Provisional). The program's maximum class size remains 24 for the third class.

No report due (*Standards*, 5th edition)

- **Standard C1.03** (lacked evidence at the time of the site visit that the program prepares a self-study report that accurately documents the results of ongoing program self-assessment; self-study report will be required for the final provisional accreditation site visit).

June 2020

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

- The proposed plan in response to COVID-19.

Additional information (institutional letter of support, more detail regarding how the program will ensure that all students meet program defined requirements for supervised clinical practice experiences, syllabi for elective experience and graduation date for class of 2020) due May 1, 2020.

September 2018

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

- **Standard A3.15a** (provided evidence the program publishes and makes readily available to enrolled and prospective students admission and enrollment practices that favor specified individuals or groups),
- **Standard A3.16** (provided evidence the program makes student admission decisions in accordance with clearly defined and published practices of the institution and program),
- **Standard A3.17f** (provided evidence the program defines, publishes and makes readily available to students upon admission policies and procedures for remediation and deceleration),
- **Standard B3.02** (provided evidence of methods to determine, after supervised clinical practice experiences [SCPEs], that all students are able to meet the program's learning outcomes) and
- **Standards B3.03a-d** (provided evidence of methods to determine, after SCPEs, that all students are able to meet the program's learning outcomes with patients seeking a) medical care across the life span, b) women's health, c) surgical management and d) behavioral and mental health conditions). No further information requested.

March 2018

Accreditation-Provisional; Next Comprehensive Evaluation: September 2020 (Provisional Monitoring). The program is approved for up to 24 students in the first class of students, 24 in the second class and 24 in the third class.

Report due June 1, 2018 (*Standards*, 4th edition) -

- **Standard A3.15a** (lacked evidence the program publishes and makes readily available to enrolled and prospective students admission and enrollment practices that favor specified individuals or groups),
- **Standard A3.16** (lacked evidence the program makes student admission decisions in accordance with clearly defined and published practices of the institution and program),
- **Standard A3.17f** (lacked evidence the program defines, publishes and makes readily available to students upon admission policies and procedures for remediation and deceleration),
- **Standard B3.02** (lacked evidence of methods to determine, after supervised clinical practice experiences [SCPEs], that all students are able to meet the program's learning outcomes) and
- **Standards B3.03a-d** (lacked evidence of methods to determine, after SCPEs, that all students are able to meet the program's learning outcomes with patients seeking a) medical care across the life span, b) women's health, c) surgical management and d) behavioral and mental health conditions).