University of Pittsburgh | Chiropractic Program
School of Health and Rehabilitation Sciences

Doctor of Chiropractic Program
Academic Year 2025-2026

Student Handbook

This document is meant to be used as a supplement to the SHRS Graduate Student Handbook
https://www.shrs.pitt.edu/current-students/student-handbooks

Contents

Introduction

The Dean, Chair, Director, Associate Directors, Faculty, and Staff all join in welcoming you to the School of Health and Rehabilitation Sciences (SHRS), Department of Community Health Services and Rehabilitation Science (CHSRS), Doctor of Chiropractic Program (DCP) at the University of Pittsburgh. We are pleased that you have chosen SHRS as the academic environment in which to pursue your educational goals.

SHRS and Doctor of Chiropractic Policies and Procedures

This handbook was developed to inform you of the SHRS and Doctor of Chiropractic program policies, procedures, and information that may vary from general University of Pittsburgh policies. Therefore, we ask you to:

- Read the Student Code of Conduct thoroughly and familiarize yourself with its contents. www.studentaffairs.pitt.edu/wp-content/uploads/2017/10/2017_Code_of_Conduct_Clean.pdf
- Read the Academic Integrity Code thoroughly and familiarize yourself with its contents.

- Read the SHRS Graduate Student Handbook thoroughly and familiarize yourself with its contents and University/School policies. http://www.shrs.pitt.edu/current-students/student-handbooks
- Read the DOCTOR OF CHIROPRACTIC PROGRAM Handbook thoroughly and familiarize yourself with its contents.

About the School of Health and Rehabilitation Sciences (SHRS)

The mission of the School of Health and Rehabilitation Sciences (SHRS) is to advance the theoretical base of knowledge underlying the practice of health and rehabilitation disciplines and professions through research, teaching and professional service.

The SHRS faculty bases their teaching upon research studies, clinical service and participation in their respective professional associations. Faculty research and service typically occurs through multi-disciplinary collaboration in diverse health care and research environments. Consequently, SHRS students are exposed to state-of-the-art curricula, which are continually being reviewed.

Our students are educated and trained to question the basis of current practice, and to challenge prevailing models and assumptions. The entry-level curricula reflect the importance of effective team participation in an inter-disciplinary and rapidly changing environment. Emphasis is given to the student's development of analytical problem-solving skills and human relations skills required for

effective clinical and supervisory practice. The student is confronted with the transition between a professional commitment to providing high quality care and service, while recognizing the effects of competitive pressures and cost constraints upon the health care organization.

University of Pittsburgh Mission Statement

The University of Pittsburgh, founded in 1787, is one of the oldest institutions of higher education in the United States. As one of the nation's distinguished comprehensive universities, the resources of the University constitute an invaluable asset for the intellectual, economic, and social enrichment of Pennsylvania, while the international prestige of the University enhances the image of Pennsylvania throughout the world. The University's mission is to:

- Provide high-quality undergraduate programs in the arts and sciences and professional fields, with emphasis upon those of special benefit to the citizens of Pennsylvania;
- Offer superior graduate programs in the arts and sciences and the professions that respond to the needs of Pennsylvania, as well as to the broader needs of the nation and the world;
- Engage in research, artistic, and scholarly activities that advance learning through the extension of the frontiers of knowledge and creative endeavor;
- Cooperate with industrial and governmental institutions to transfer knowledge in science, technology, and health care;
- Offer continuing education programs adapted to the personal enrichment, professional upgrading, and career advancement interest and needs of adult Pennsylvanians; and
- Make available to local communities and public agencies the expertise of the University in ways that are consistent with the primary teaching and research functions and contribute to social, intellectual, and economic development in the Commonwealth, the nation, and the world.

The trustees, faculty, staff, students, and administration of the University are dedicated to accomplishing this mission to which they pledge their individual and collective efforts, determined that the University shall continue to be counted among the prominent institutions of higher education throughout the world.

This mission statement was approved by the University's Board of Trustees on February 16, 1995, and is unchanged to date.

University of Pittsburgh Notice of Non-Discrimination

The University of Pittsburgh, as an educational institution and as an employer, does not discriminate on the basis of disability, race, color, religion, national origin, ancestry, medical condition, genetic information, marital status, familial status, sex, age, sexual orientation, veteran status or gender

identity and expression in its programs and activities. http://www.diversity.pitt.edu/about/notice-non-discrimination

The University does not tolerate discrimination, harassment, or retaliation on these bases and takes steps to ensure that students, employees, and third parties are not subject to a hostile environment in University programs or activities.

The University responds promptly and equitably to allegations of discrimination, harassment, and retaliation. It promptly conducts investigations and takes appropriate action, including disciplinary action, against individuals found to have violated its policies, as well as provides appropriate remedies to complainants and the campus community. The University is committed to taking prompt action to end a hostile environment if one has been created, prevent its recurrence, and remedy the effects of any hostile environment on affected members of the campus community.

For complete details on the University's Nondiscrimination, Equal Opportunity, and Affirmative Action Policy (07-01-03) and Sexual Misconduct Policy (06-05-01), please Visit https://www.diversity.pitt.edu/civil-rights-title-ix-compliance/policies-procedures-and-practices.

Doctor of Chiropractic Program – Philosophy

We believe that chiropractic care is an integral part of any health care delivery system whose goals align with improving the patient's experience with care (quality, satisfaction) while improving population health in a cost-accountable fashion.

Our DOCTOR OF CHIROPRACTIC PROGRAM graduates are evidence-based professionals who are: (1) well-grounded in foundational sciences relevant to the field of chiropractic; (2) focused on the needs of patients; (3) appreciative of a team-based care approach and (4) accountable to key stakeholders.

Doctor of Chiropractic Program – Mission, Vision, and the Pitt DC 20

Mission Statement

The Mission of the University of Pittsburgh Doctor of Chiropractic Program is to produce and inspire empathetic, patient-centered healthcare professionals who will contribute to reducing the global burden of musculoskeletal conditions, primarily spine-related disorders. This is done by providing an innovative, evidence-based, and clinically robust education that prepares graduates to improve patient outcomes through collaboration as team members of interprofessional healthcare systems.

Vision Statement

The Vision of this program is to become the new model for 21st century chiropractic education in the United States, by combining academic rigor, clinical excellence and research productivity within an

integrated healthcare education and delivery system.

The PITT DC 20

The University of Pittsburgh Doctor of Chiropractic program is built upon the foundation of the Pitt DC 20. Graduates of this program will be exemplars of the following set of knowledge, skills, and abilities:

1. Practice with the highest levels of professionalism and ethical behavior.
2. Optimize the therapeutic alliance through patient-centered communication strategies.
3. Apply a biopsychosocial and Whole Person Health approach to patient evaluation, diagnosis, and management.
4. Apply phenotyping and classification in the clinical reasoning process.
5. Triage patient cases that require emergent or urgent referral and initiate prompt, appropriate action.
6. Order and interpret imaging and other diagnostic tests in accordance with evidence-based guidelines.
7. Value and collaborate in team-based, interprofessional education and clinical care.
8. Demonstrate excellence in the art and science of hands-on assessment and treatment.
9. Perform and interpret comprehensive and evidence-based physical, neurological, and orthopedic examinations.
10. Skillfully apply progression of forces in spinal and extraspinal joint and soft tissue mobilization/manipulation.
11. Prescribe and monitor individualized, goal-oriented rehabilitative exercises and recommend lifestyle modifications.
12. Use psychologically informed approaches to patient education and treatment.
13. Enhance shared decision making by integrating social determinants of health, patient life experience and preferences, health literacy, and cultural sensitivity with care planning.
14. Access, critically appraise, and apply research evidence to guide patient care decisions.
15. Implement continuous quality improvement strategies to optimize patient-centered outcomes and ensure accountability for value-based care.
16. Promote and support public health initiatives, strategies, measures, and guidelines developed through rigorous scientific methodologies.
17. Commit to lifelong learning and continuous professional development.
18. Support the ongoing scholarly development of the chiropractic profession.
19. Embrace the role of the chiropractor as a primary spine provider within the healthcare system.
20. Ethically integrate digital technology and artificial intelligence into clinical care to deliver safer, smarter, and more accessible care.

Academic and University Policies

Academic and Professional Conduct Requirements

Academic Probation

Graduate students who have completed at least one full semester of the DOCTOR OF CHIROPRACTIC PROGRAM and whose cumulative GPA falls below 3.0 will be placed on academic probation and will receive written notification of this status from the Dean's office. At this point it is the student's responsibility to meet with their advisor to identify and discuss existing academic challenges and to develop a learning plan that will guide the student's academic efforts.

In order to be removed from academic probation, the student will need to achieve a cumulative GPA of 3.0 within their next two terms of study. Failure to do so may subject the student to immediate dismissal from the program at the discretion of the Department Chair and Program Director.

Students who fail to demonstrate progress toward meeting graduation requirements (academic, clinical, comprehensive exams) in a timely manner may be placed on academic probation or recommended for dismissal from the program by the Department Chair and Program Director, in collaboration with the Associate Dean of Graduate Studies.

SHRS reserves the right to terminate a student at any time for academic or professional conduct reasons. Dismissal from the program is at the discretion of the SHRS Dean, notwithstanding the foregoing, in the event it is not mathematically possible for a student to remediate their cumulative program GPA within the next two terms of study, the student may be immediately dismissed.

A student may appeal their dismissal with the University of Pittsburgh Office of the Provost.
SHRS Academic Policy(s) are located on the school website at:
http://www.shrs.pitt.edu/current- students/academic-policies .

Code of Professional Conduct: Doctor of Chiropractic Students

The Doctor of Chiropractic program has set forth the following expectations for professional conduct: The student is expected to exhibit professional conduct consistent with the following: University of Pittsburgh Student Code of Conduct, the American Chiropractic Association Code of Ethics (located at Code of Ethics - ACA Today), the Doctor of Chiropractic program Student Code of Professional Conduct (outlined below), and the policy on classroom behavior as listed in each course syllabus.

Students in a professional program are expected to understand and demonstrate the following professional behaviors. These behaviors outline appropriate professional conduct that is required in the classroom, clinic, and during university, community, and national events. Violations of the expected behaviors may lead to the development of a Professional Behaviors Contract and/or the filing of a Conduct Referral against the student. Pending the outcome of the Conduct referral, the student may be recommended for dismissal from the program.

Accountability: Active acceptance of responsibility for the diverse roles, obligations, and actions of the student including self-regulation and other behaviors that positively influence patient outcomes, the profession and the health needs of society.

- The student must be able to fulfill commitments and be accountable for their actions and outcomes. The student is responsible for knowing and fulfilling the requirements of individual courses as outlined by the professor and/or instructor.
- The student must be punctual both in the classroom and clinic and make productive and efficient use of all available learning experiences in the classroom and clinic.
- The student adheres to code of ethics, standards of practice, and policies/procedures that govern conduct in the classroom and/or the clinic.
- The student must demonstrate problem-solving skills by identifying and defining problems, analyzing relevant data, developing and applying effective solutions, and assessing the results.

Altruism: The primary regard for or devotion to the interest of patients thus assuming the fiduciary responsibility of placing the needs of the patient ahead of the chiropractor's self-interest.

- The student will place the needs of the patient ahead of his/her own in the clinic.

Compassion & Caring: Compassion is the desire to identify with or sense something of another's experience; a precursor to caring. Caring is the concern, empathy, and consideration for the needs and values of others.

- The student must demonstrate effective interpersonal skills by the ability to interact effectively with faculty, fellow students, patients, families, colleagues, other healthcare professionals, and the community.
- The student must communicate effectively, both verbally and non-verbally, with others taking into consideration individual differences in learning styles, language, and cognitive abilities, etc.
- The student must understand the socio-cultural, economic, and psychological influences on the individual's life in their environment.
- The student must demonstrate teamwork by the ability to perform effectively as part of a

team both in the classroom and clinic by showing respect for others, putting the goals of the team and/or patient above individual needs, supporting other team members, remaining flexible and responsive to change, and using proper manners.

Excellence: Excellence is consistently using current knowledge and theory while understanding personal limits, integrating judgment and the patient challenging mediocrity, and working toward development of new knowledge.

- The student must demonstrate a commitment to learning.
- The student must have the ability to self-assess, identify their weaknesses, and seek out learning opportunities through self-direction.
- The student must demonstrate critical thinking by the ability to question logically; to identify, generate, and evaluate elements of logical argument; to recognize and differentiate facts, illusions, assumptions, and hidden assumptions; and to distinguish the relevant from the irrelevant.
- The student must internalize the importance of using multiple sources of evidence to support practice and professional decisions.

Integrity: Steadfast adherence to high ethical principles or professional standards; truthfulness, fairness, doing what you say you will do, and "speaking forth" about why you do what you do.

- The student must be honest and trustworthy academically and in the clinic with their patients and colleagues.
- The student will abide by the rules, regulations, and laws applicable to the profession.

Professional Duty: The commitment to meeting one's obligations to provide effective chiropractic services to individual patients, to serve the profession, and to positively influence the health of society. The student must represent the chiropractic profession appropriately through ethical and legal practice, promotion of the profession, respectful behavior, and professional appearance and demeanor and must adhere to the ACA Code of Ethics.

- The student must preserve the safety, security, and confidentiality of individuals in all professional contexts.
- Students are encouraged to become student members of the ACA and participate, as able in the Association's activities at either the local, state, or national level(s).

Social Responsibility: The promotion of mutual trust between the profession and the larger public that necessitates responding to societal needs for health and wellness.

- Students are encouraged to participate in community or school sponsored volunteerism to promote health and wellness.
- Students should understand current community wide, nationwide, and worldwide issues and

how they impact society's health and well-being and the delivery of chiropractic care.

Standards for Professional Communication and Conduct

Doctor of Chiropractic students are held to high standards of professional behavior and communication in all settings, including academic, clinical, and virtual environments. These expectations align with the University of Pittsburgh Student Code of Conduct and the Doctor of Chiropractic program's Professional Conduct guidelines. In addition to ethical and professional expectations outlined above, students are expected to demonstrate professionalism in all forms of communication.

A.1 Verbal and Interpersonal Communication

Professional conduct includes clarity, respect, active engagement, and responsiveness when speaking with faculty, peers, patients, or staff.

✅ **Acceptable Behaviors**

- Use clear and professional language, appropriate grammar, and accurate terminology.
- Communicate factual, respectful, and courteous information in all settings.
- Demonstrate strong listening skills, including asking questions when clarification is needed.
- Display appropriate non-verbal behaviors, including eye contact, posture, and limiting distractions (e.g., refraining from personal device use during meetings).
- Engage in dialogue that respects cultural, ethnic, and individual differences.

🚫 **Unacceptable Behaviors**

- Use of slang or informal, inappropriate, abusive or harassing language, or poor grammar in academic/professional contexts.
- Providing inaccurate information.
- Poor non-verbal behaviors such as lack of eye contact, slouching, or texting during lectures, labs, clinical encounters, and meetings.
- Disrespectful tone, jumping to conclusions, or failure to listen.
- Engaging in negative discourse about classmates, faculty, patients, or staff.

A.2 Written Communication

Email and other written communications represent the student and the profession. Professional tone and structure are required.

✅ **Acceptable Format and Content**

- Use your University of Pittsburgh email account; respond within 24 hours when appropriate.
- Include a clear subject line relevant to the purpose of the email.
- Use a formal greeting (e.g., "Dear Dr. Smith"), polite tone, and respectful language.
- Provide brief context and a focused message.
- Include a professional closing with your full name, course you are referencing (if appropriate), year of training (e.g., DC Year II), and contact information.

🚫 **Unacceptable Format and Content**

- Sending emails from a personal account.
- Vague, emotional, or demanding subject lines or message content.
- Informal greetings (e.g., “Hey”) or immediate requests without context.
- Overly emotional, disorganized, or ungrammatical writing.
- Omitting a closing or using unprofessional signoffs (e.g., “C-ya,” “Later”).

A.3 Zoom Communication and Remote Professionalism

Professional standards apply during remote and hybrid sessions, including lectures, meetings, and group work conducted over Zoom or similar platforms.

✅ **Acceptable Behaviors**

- Log in using full first and last name.
- Keep the camera on, showing your face for the duration of the session.
- Arrive on time and remain present for the full meeting.
- Use microphone and chat functions respectfully and only for course-relevant purposes.
- Maintain an appropriate appearance and posture as if you are attending in person.
- Avoid multitasking and other distractions.

🚫 **Unacceptable Behaviors**

- Logging in late, using a phone number or nickname as an ID.
- Turning off video without permission or using a photo instead of live feed.
- Using chat for non-academic commentary, personal conversations, or inappropriate remarks.
- Walking away during a session or visibly engaging in unrelated activities.
- Using profanity, slang, or casual language in a professional session.

A.4 Digital and Social Media Conduct

All online conduct, including social media activity, must comply with University and Program professionalism standards. This includes refraining from sharing confidential information, posting disrespectful or inflammatory content, or engaging in unprofessional discourse that reflects poorly on the individual, program, or University.

A.4.a Compliance and Confidentiality

✅ **Acceptable Behaviors**

- Clearly and truthfully list your current student status and other credentials/training on your profile.
- Use disclaimers to clarify that views are your own, not the school’s or other clinical site.
- Follow institutional social media policies.
- Ensure all posts are HIPAA- and FDA-compliant.
- Double-check images and videos for any protected health information (PHI) before posting.

- Get explicit, written consent before sharing patient stories, images, or testimonials.
- Post a clear statement when patient consent has been obtained.
- Monitor and moderate comments to prevent the sharing of PHI or inappropriate content.
- Apply a consistent, transparent comment policy aligned with legal and institutional guidelines.

🚫 **Unacceptable Behaviors**

- Implying credentials or board certification you don't possess.
- Sharing patient information, even in vague terms, without consent.
- Using live video, camera, or screen sharing in clinical areas where PHI could be exposed.
- Ignoring or bypassing the program's, University's, or clinical site's social media policies.
- Allowing comments that contain PHI, defamation, or inappropriate content to remain visible.
- Failing to address or remove problematic posts/comments.

A.4.b Professionalism

✅ **Acceptable Behaviors**

- Maintain respectful, professional boundaries with faculty, peers, patients, staff, and the public.
- Redirect any patient seeking advice to official communication channels (e.g., patient portals).
- Repost or share third-party content with context or disclaimers when needed.
- Treat every post as a professional statement—thoughtfully consider tone and content.
- Reflect before posting—ask whether it supports your professional values.
- Promote collegiality and respectful discourse among spine care and other professionals.

🚫 **Unacceptable Behaviors**

- Providing personalized medical advice through public platforms.
- Engaging in informal or overly familiar interactions with patients online.
- Implying product endorsements without proper disclosures.
- Using social media impulsively or emotionally (e.g., while angry or exhausted).
- Making slanderous or defamatory statements about colleagues or other providers.
- Using unprofessional language or tone.

A.4.c Security and Access

✅ **Acceptable Behaviors**

- Maintain separate accounts for personal and professional use.
- Use strong passwords and two-factor authentication.

🚫 **Unacceptable Behaviors**

- Sharing login credentials with others.
- Using a single account for both personal and professional content.
- Failing to protect access to accounts with appropriate security measures.

A.4.d Spine Care-Specific Behaviors

✅ **Acceptable Behaviors**

- Acknowledge and respect diverse professional roles within spine care.
- Use accurate, inclusive, and respectful terminology for spine conditions.
- Present treatment content (e.g., procedures, exercises) with professionalism and clinical relevance.
- Obtain proper consent and remove identifying features from patient images.
- Be transparent about compensation or endorsements in testimonial posts.
- Align shared content with clinical guidelines and peer-reviewed evidence.
- Cite sources and verify credibility before reposting or sharing.
- Monitor and update outdated or potentially misleading content.

🚫 **Unacceptable Behaviors**

- Mocking or disparaging different disciplines or treatment approaches in spine care.
- Using objectifying or sensational content (e.g., clickbait, provocative clothing, exaggerated edits).
- Sharing testimonials without disclosing compensation or incentives.
- Promoting treatments using exaggerated claims or emotionally charged language.
- Posting outdated, biased, or inaccurate content without citation.
- Reposting unverified content or failing to credit the original source.

Title IX Information

The Office of Civil Rights and Title IX is here to assist in responding to and addressing reports of harassment and discrimination. Our office oversees policies and processes to respond to bias incidents. We also provide education and training on the prevention and reduction of discrimination and harassment. Together we can work to maintain an educational and work environment that is free from unlawful harassment and discrimination. Incident reporting and response is a critical component of building that culture.

At this site students can make a report and also find resources and support services. Students can make a report directly to the Title IX office. It is also highly recommended that students inform the program director, who can support and provide information specific to the Doctor of Chiropractic Program.

Technical Standards Required for the Doctor of Chiropractic Program

The University of Pittsburgh Doctor of Chiropractic Program admits students who have the academic, technical, and physical qualifications for successful completion of the program and the future safe and ethical practice of chiropractic medicine. Chiropractic students must possess the necessary sensory, motor, communicative, and cognitive capabilities to accomplish these requirements in a reliable manner and become competent and safe practitioners.

Graduates of the University of Pittsburgh Doctor of Chiropractic program are expected to have a broad competence in the basic skills underlying the general practice of chiropractic. All graduates must be able to conduct an assessment of history, complete a physical examination, and synthesize the findings into a diagnosis and plan for evaluation and treatment. This must be accomplished independently without the aid of an intermediary.

Disability identification is voluntary and confidential. The University of Pittsburgh offers academic support accommodations for qualified, eligible students with disabilities. Please contact the Office of Disability Resources and Services at 412-648-7890 for information regarding eligibility requirements and deadlines that will ensure accommodation, which may require extended preparation time for the beginning of the semester.

The University of Pittsburgh Doctor of Chiropractic faculty have established the following technical and physical qualifications for admission to the Doctor of Chiropractic degree program:

Observation: Students in this program must have the ability to observe demonstrations and experiments in the basic sciences. Vision must be sufficient to identify histology, cytology, microbiology, and pathology of structures using a microscope. The candidate must be able to observe a patient accurately and to view all forms of diagnostic imaging.

Communication: Students must be able to speak, hear, and observe patients to elicit information, describe changes in mood, activity, and posture, and perceive nonverbal communication. Students must be able to communicate effectively and sensitively with faculty, staff, fellow students, and patients. Students must be able to communicate effectively and efficiently with all members of the health care team in both oral and written form.

Motor Coordination/Function: Because the practice of chiropractic centers around the delivery of manual therapies, the student must possess the strength, flexibility, endurance, and ability to stand, squat, lunge, and use all limbs in a coordinated fashion. Additionally, students must possess sufficient motor function to elicit patient information through palpation, auscultation, percussion, and other

diagnostic maneuvers.

Intellectual Abilities: Chiropractors are required to think critically and solve problems. Students must be skilled in measurement, calculation, reasoning, analysis, and synthesis. Students should possess the capacity to visualize and comprehend the three-dimensional and spatial relationships of structures.

Social and Behavioral Attributes: Students must have the emotional health to engage in the academic and clinical program, exercise good judgment, and complete all responsibilities required for the diagnosis and care of patients, including the development of mature, effective, and sensitive relationships with patients. Students must be able to tolerate physically demanding workloads and to function effectively in stressful situations. Students must be adaptable to changing environments, and capable of functioning in the face of the uncertainties inherent in clinical decision-making and patient care. Students must possess empathy, integrity, concern for others, strong interpersonal skills, interest, and motivation.

SHRS Social Media Policy

Social media is rapidly expanding, and new outlets are created every day. Professional organizations and ethical codes are often outdated given the rapid expansion of social media. It is essential that students and faculty remain aware and vigilant regarding the social media ethical challenges facing health professionals, patients, and students. Students are responsible for maintaining a professional social media presence related to any SHRS education activities. Some students may find it helpful to create separate professional and personal social media accounts.

We recommend that students consider the following prior to posting or transmitting on social media:

- Consider the audience and potential impact of your post prior to transmission.
- Assume anything that you post or transmit on social media can be viewed by the public.
- An electronic post or transmission is often traceable, without an opportunity for removal.
- Employers often search social media to learn more about you prior to interviews or offered employment.
- Patients often search social media to learn more about you. Proximity based apps and social media post new challenges to maintaining professional boundaries between health professionals and patients.

SHRS Students must:

- Respect the ethical standards of the profession in carrying out their academic assignments.
- Comply with HIPAA's social media rules.
- Read, review, and follow the social media policy of their practicum or clerkship placement.
- Comply with School and University academic integrity guidelines.

- Do not post or transmit any information or reference about their work with patients.
- Do not post clinical encounters, clinical experiences or information that pertains to working with patients.

Please note that boundaries on social media are no longer as simple as not 'friending' a patient, professor, or colleague on Facebook. For example, all contacts in your phone book can read your posts on Venmo without being friends on the app. It is difficult to predict the next ethical problem or boundary that will arise with social media. Therefore, please remain aware and consult with faculty or supervisors on these important issues. Faculty may have to act upon any material that does not comply with current academic integrity guidelines, professional ethical standards, or HIPAA policies.

If you have any questions, contact the Office of Student Services, Forbes Tower, at 412-383-6551.

Doctor of Chiropractic Program Academic Program & Regulations

DC Course Descriptions

FALL – Term 1

DC 3111 Spinal Anatomy (4 credits)

This is a foundational course for chiropractic students focusing on the regional anatomy of the thoracic, lumbopelvic, and cervical spine. Anatomical structures, function and relationships of the bones, joints, muscles, blood vessels and nerves in each region are examined in detail from both a gross and histological perspective, and as appropriate, developmental processes will be explored. Clinical correlations and applications, foundational anatomical concepts and terminology are introduced. Prosected cadavers enable observation and review of the anatomy.

DC 3112 Human Function and Metabolism (6 credits)

This is an integrated course covering the function and metabolism of the human body from molecules to cells to organs and organ systems. It incorporates principles and content from biochemistry, molecular biology and physiology in a continuous framework. The course begins with the nature of macro-molecules as the foundation of living structures, including their synthesis, function and degradation. This is followed by a detailed presentation of amino acids, proteins, enzymes, nucleic acids and carbohydrate and lipid metabolism. Next, the biology and microanatomy of cells and tissue types, their structure and function are discussed as a prelude to the study of homeostasis, homeostatic systems, and the function and physiology of tissue and organ systems. Throughout the course, clinical correlations and examples are included allowing for a deeper understanding and appreciation of the nature of molecular, biochemical and physiological regulation of function and metabolism in health and disease. The goal is to enable students to integrate basic science principles into their understanding of many common clinical conditions and presentations.

DC 3131 Introduction to Diagnostic Imaging (1 credit)

A variety of imaging modalities will be discussed, with a focus on the normal appearance of the spine and pelvis on conventional radiography. Conventional radiography is commonly used in chiropractic offices. Foundational understanding of the appropriate clinical use of diagnostic imaging and the fundamental process of how conventional radiographs are produced and interpreted for diagnosis. In addition to the normal radiographic appearance of skeletal structures, this course will also introduce an approach to evaluating imaging studies as well as basic mensuration procedures which are used to aid in the identification and diagnosis of prevalent spine related disorders. Radiography decision-making will be highlighted.

DC 3132 The Patient Interview (1 credit)
Highlighting the biopsychosocial model, this course will focus on the essential elements of the chief complaint, past, social, and family histories in order to form a rational differential diagnosis list. Additionally, the student will learn how taking a thorough history is essential to creating a patient problem list beyond their chief complaint as a holistic approach to health care. Students will become facile in motivational interviewing skills. The use of simulated patients will allow students to receive formative feedback as they develop this essential component of clinical reasoning.

DC 3151 Clinically Relevant Palpation (1 credit)
This course will teach the foundational examination skills of observation and palpation instructing the student in the identification of clinically relevant osseous landmarks and soft tissues of the spine and extremities. Additionally, palpatory techniques of the soft tissues that hold clinical relevance in prevalent conditions of the spine and extremities in chiropractic practice will be taught.

DC 3152 Introduction to the Chiropractic Profession and Primary Spine Care (2 credits)
This is an introductory course to the chiropractic profession. It covers the history of manipulative therapy from antiquity to the present, with an emphasis on the pre-history and history of the chiropractic profession. Also included are a general introduction to the profession and its practice, nationally and internationally; its educational, political and sociological context and relationship to the other health professions; the course includes a discussion of key historical figures in the development of the chiropractic profession, and factors influencing the continued development and evolution of the profession around the world. The course concludes with a discussion of the role of the chiropractor as a primary spine provider.

DC 3153 Evidence Based Practice I (2 credits)
This class will introduce the basic principles of evidence-based practice and promote information mastery by using subject specific databases. Student engagement will focus on translating patient health histories from Clinical Observation I into a clinical research (PICO) question while employing appropriate sources and research. Health literacy will be introduced to students through self-reflection of their role as future practitioners and members of the health care system.

DC 3154 Introduction to Clinical Reasoning (2 credits)
This course will introduce students to the clinical reasoning process, through discussions of actual case studies. This course illustrates the steps and logic used in the clinical and diagnostic reasoning process. Occasionally, standardized patients or actual patients may be present during a case conference.

DC 3171 Clinical Practicum I (1 credit)

Students begin their clinical education with a half-day per week of observation experience in one of the chiropractic clinical education facilities. This may be augmented with multidisciplinary observation within UPMC and the Pittsburgh VA. The goal of this experience is to become familiar with the nature of chiropractic practice. As a preparation for this experience, students will attain certification in HIPAA and CPR/AED.

SPRING – Term 2

DC 3115 Neuroscience (3 credits)

This course provides an in-depth study of the structure and function of the nervous system. It includes the role of the nervous system in regulating human health and homeostasis; the role of the nervous system in maintaining balance and posture, and the pathophysiology involved in disorders of gait, posture and balance; central and peripheral nervous system plasticity; the neurophysiology of pain and pain mechanisms; and essentials of physiological psychology.

DC 3116 Gross Anatomy (5 credits)

This course will be divided into both lectures and laboratories exploring, in detail, the gross anatomy of the human body. Small group facilitated discussions provide for the clinical correlation, context, and relevance of the structures being studied. Clinical examples will be used throughout the course enabling the student to integrate basic science information into a clinical context. Wherever possible, pathologic anatomy will be presented and discussed. The laboratories will include the use of dissected human cadavers and prosected specimens.

DC 3117 Clinical Microbiology and Immunology (2 credits)

This course has two major components. Clinical microbiology will be presented to cover bacteriology, mycology, and virology, including the major etiological agents responsible for global infectious diseases. The course focuses on key clinical topics such as common viral diseases, meningitis, streptococcal infections, pneumonia, diphtheria, tetanus, enteric infections, anaerobic infections, and tuberculosis. The goal is to provide future chiropractors with the knowledge to enhance their problem-solving diagnostic skills as well as to appreciate their role as health care team members in diagnosing and preventing infectious disease. The immunology section covers principles of immunology including the development of the immune system, immune system disorders, and the role of immunization in the prevention of infectious diseases. Students will explore the role of the chiropractic profession as advocates of the American public health system.

DC 3133 Diagnostic Imaging I (1 credit)

Identification of soft tissue structures of the head, neck, chest, abdomen, and pelvis seen on plain film radiography. Basic anatomy of these regions seen on computed tomography and magnetic resonance imaging is also studied. Opportunities to practice, self-quiz, and apply knowledge to accurately identify anatomical structures.

DC 3134 Principles of Differential Diagnosis (2 credits)
This course will introduce and reinforce the importance of differential diagnosis within the professional responsibilities of the chiropractor. Specifically, this course will place emphasis on the need for chiropractors to differentiate between plausible conditions of the neuromusculoskeletal system that are amenable to conservative care and diseases which may require co-management with or referral to other health care providers. Students will get hands on experience in differential diagnosis through the use of simulated patients.

DC 3155 Manual Therapy Psychomotor Skill Development (1 credit)
This laboratory course will promote the development of safe and effective psychomotor adjustive skills to prepare the student for adjusting classes. Instruction will focus on appropriate body mechanics through adjustive speed impulse drills and strength and endurance training of the core and shoulder. The use of adjustive tissue and joint pretension will be presented and force-sensing technology will be incorporated to provide immediate feedback in this and other skills.

DC 3156 Spinal and Tissue Biomechanics (2 credits)
This course will describe the functional anatomy, kinetics, and kinematics of the spine and pelvis. An introduction to gait biomechanics, mechanistic research, and treatment principles will be provided. Focusing on the biomechanical properties of muscles, nerves, and connective tissue, tissue injury and repair will be highlighted. Other topics in this course include stress-strain curves, length-tension relationships, hysteresis, types of loads and forces, and the response of various types of tissue. Additional emphasis is placed on prevalent conditions of the spine in chiropractic practice.

DC 3157 Soft Tissue Manipulation (1 credit)
Basic principles of assessing and treating the soft tissue structures of the body. Micro-lectures present evidence-based rationale, when available, for each of the treatments presented. Hands-on skills include trigger point therapy, instrument-assisted soft tissue manipulation, and muscle stretching techniques. Professional communication skills and management plans as they pertain to acute versus chronic conditions will be introduced.

DC 3158 Evidence Based Practice II (2 credits)
This course will continue the exploration of the science of health care with specific focus given to primary clinical and systematic reviews in the clinical realm of diagnosis . Students will demonstrate the ability to search for, select, critically appraise, interpret the results, and ultimately decide the value of primary and secondary diagnostic studies. Students will utilize accepted critical appraisal methods to identify and understand the strengths, limitations, biases, and results of primary data and higher-level designs.

DC 3172 Clinical Practicum II (1 credit)

Students continue their clinical education with a half-day per week of observation experience in one of the chiropractic clinical education facilities. This may be augmented with multidisciplinary observation within UPMC and the Pittsburgh VA. The goal of this experience is to become familiar with clinical reasoning in chiropractic practice. Students will be expected to continue to maintain a log of their clinical experiences throughout the 8 terms.

SUMMER – Term 3

DC 3118 Pathology (3 credits)

This course covers the general principles of pathology, including the nature of inflammation and healing, and the reaction of cells and tissues to injury, infection, radiation, metabolic disturbances and degeneration. The nature of neoplasms, hypersensitivity reactions, autoimmune disease and deficiency diseases will be covered, as well as organ and tissue-specific pathology. Emphasis will be given to conditions relevant to clinical chiropractic practice. Weekly small group facilitated discussions will provide for the clinical correlation, context, consequences, and relevance of the pathology and pathophysiology being studied.

DC 3135 Diagnostic Imaging II (1 credit)

This course will provide students with an in-depth understanding of the diagnostic imaging techniques used to assist diagnosis of thoracic and lumbopelvic spine disorders such as fractures, rib joint dysfunction, disc herniation, scoliosis, lumbar disc herniation with radiculopathy, central canal stenosis, and axial spondyloarthritis. Students will learn to interpret x-rays, MRIs, and CT scans, as well as understand the clinical implications of their findings. Through case studies and hands on practice/simulations, students will develop the skills necessary to effectively communicate imaging findings to patients and other health care professionals.

DC 3136 Clinical Pain Classification and Phenotyping (2 credits)

This course will provide students with a comprehensive understanding of the mechanisms underlying pain perception, modulation, and chronic pain conditions. Through lectures, case studies, and interactive discussions, students will explore the biopsychosocial model of pain, the role of central sensitization in chronic pain, and the impact of psychological and social factors on pain perception. Students will also learn the importance of evidence-based pain classification and treatment approaches for patients with various painful conditions, with a focus on interdisciplinary and collaborative care.

DC 3137 Medical Screening & Diagnosis: Chest and Abdomen (2 credits)

This course will introduce students to medical screening of the heart, lungs and abdomen in a general physical examination and to identify common pathologies. The lecture portion of this course will be

offered both synchronously and/or asynchronously and will explain the relevance of said screening in different clinical settings and instrumentation fundamentals. Using an interprofessional educational model, the lab portion of the course will allow students to become familiar with the use of the stethoscope to identify normal and abnormal heart sounds, prevalent respiratory pathologies, normal and abnormal sounds of the abdomen including the abdominal aorta. The abdominal palpatory examination will also be taught in the lab. When possible or as needed, simulators and simulations will be used.

DC 3159 Thoracic & Lumbopelvic Spine Related Disorders (3 credits)
This course provides the diagnostic and therapeutic knowledge necessary for the assessment and management of injuries, defects, or disorders of the thoracic spine and lumbopelvic spine including those which are associated with upper extremity symptoms. Discussion of mechanical, congenital, or traumatic and neuromusculoskeletal disorders affecting the thoracic spine as well as its adjacent soft tissues are emphasized. Topics will center on conservative management options and the current evidence basis for treatment effectiveness.

DC 3160 Examination of the Thoracic and Lumbopelvic Spine (2 credits)
This hands-on laboratory will focus on learning the physical examination skills necessary to evaluate and diagnose prevalent conditions of the lumbar spine and pelvis. Focus will be placed on learning both low- and high-index neurological examination procedures and high payoff, evidence-based orthopedic tests. Case simulations will be central to enhancing the student's ability to conduct a problem-focused examination with sound clinical reasoning.

DC 3161 Thoracic & Lumbopelvic Mobilization and Manipulation (2 credits)
This hands-on laboratory develops and applies the anatomical, biomechanical, and pathophysiologic basis for chiropractic adjustive therapy. Topics include adjustive technique terminology, thoracic adjusting mechanics, adjusting contraindications/complications, adjustive therapy decision analysis, adjustive treatment guidelines and safe application of chiropractic adjustments. Adjustive techniques include prone, supine, seated and standing procedures.

DC 3162 Rehabilitative Exercise: Thoracic & Lumbopelvic Spine (1 credit)
This hands-on laboratory provides evidence-based approaches related to active care of patients with prevalent thoracic spine related disorders. Supported by Thoracic Spine Related Disorders, this lab will focus on, among other topics, stretching, strengthening, restoration of ideal breathing mechanics and development of core stability, parascapular stabilization, thoracic mobility, postural correction, Schroth exercises, lumbar stabilization, and pelvic floor exercises.

DC 3163 Clinical Reasoning for the Primary Spine Provider I (1 credit)

This course will focus on using standardized patients to teach students the skills necessary for diagnosing and managing common disorders of the lumbar spine and pelvis. Through interactive case studies, students will learn to recognize and interpret clinical signs and symptoms, as well as order and interpret relevant diagnostic tests. Students will also develop treatment plans and management strategies for patients with conditions such as disc herniation with radiculopathy, central canal stenosis, and sacroiliac joint dysfunction.

DC 3164 Evidence Based Practice III (2 credits)

In this course, students will focus on critical appraisal of primary and pre-appraised studies pertaining to therapeutic effectiveness, namely randomized controlled trials, systematic reviews, and clinical guidelines. Additionally, students will learn how to critically appraise prognosis and harm studies. This course will place special emphasis on hands-on practice and the application of key critical appraisal concepts to ensure accurate interpretation of study outcomes. Students will utilize accepted critical appraisal methods to identify and understand the strengths, limitations, biases, and results of primary data and higher-level designs.

DC 3173 Clinical Practicum III and Comprehensive Clinical Examination I (2 credits)

Students continue their clinical education with a full day per week of observation experience in one of the chiropractic clinical education facilities. This may be augmented with multidisciplinary observation within UPMC and the Pittsburgh VA. The goal of this experience is to develop clinical reasoning skills through observation and occasional clinical assisting. Students will continue to maintain a log of their clinical experiences throughout the 8 terms. This course will conclude with the administration of a comprehensive clinical examination.

FALL – Term 4

DC 3331 Diagnostic Imaging III (1 credit)

This course will provide students with an in-depth understanding of the diagnostic imaging techniques used to assist diagnosis of prevalent disorders of the cervical spine such as disc herniation with radiculopathy, spondylosis with or without myelopathy. Students will learn to interpret x-rays, MRIs, and CT scans and understand the clinical implications of their findings. Through case studies and hands on practice/simulations, students will develop the skills necessary to effectively communicate imaging findings to patients and other health care professionals.

DC 3232 Clinical Laboratory Diagnosis (1 credit)

This course introduces clinical laboratory test interpretation, including hematology, blood chemistry, urinalysis, and serology. Students will learn the appropriate use of clinical laboratory tests that can be performed in the office as well as appropriate methods of specimen collection and handling. Students discuss the interpretation of clinical laboratory findings in selected clinical cases in a weekly seminar.

Emphasis is placed on relevancy to chiropractic practice and on clinical reasoning skills. Students will also be asked to select their own cases from the medical literature for small group discussions as part of the weekly activity.

DC 3233 Clinical Pharmacology (2 credits)
This course is a survey of general pharmacology and toxicology, with particular focus of medications frequently encountered in chiropractic practice, notably anti-inflammatories, analgesics, muscle relaxants, and antibiotics. Additionally, students will be given an overview of commonly prescribed antidepressants, antacids, biologics, and disease modifying anti-rheumatologic drugs. Current issues related to chiropractic and pharmacology (e.g. how chiropractic care can positively impact the opioid crisis) will be discussed.

DC 3234 Medical Screening & Diagnosis: Head and Neck (2 credits)
This course will introduce students to medical screening of the head and neck in a general physical examination and to identify common pathologies. The lecture portion of this course will be offered both synchronously and/or asynchronously and will explain the relevance of said screening in different clinical settings and instrumentation fundamentals. Using an interprofessional educational model, the lab portion of the course will allow students to become familiar with taking vital signs, and the use of the otoscope and ophthalmoscope to identify normal and common abnormal pathologies of ears, eyes, nose, and throat. The palpatory examination of the thyroid and parathyroid glands and the swallowing complex will be included. When possible or as needed, simulators and simulations will be used.

DC 3251 Cervical Spine Related Disorders (3 credits)
This course will provide the diagnostic and therapeutic knowledge necessary for the assessment and management of injuries, defects, or disorders of the cervical spine including those associated with upper extremity symptoms. Mechanical, congenital, or traumatic and neuromusculoskeletal disorders affecting the cervical spine as well as its adjacent soft tissues will be discussed. Topics will center on conservative management options and the current evidence basis for treatment effectiveness.

DC 3252 Examination of the Cervical Spine (2 credits)
Concordant with Cervical Spine Disorders, this hands-on laboratory will focus on learning the physical examination skills necessary to evaluate and diagnose prevalent conditions of the cervical spine. Focus will be placed on learning both low- and high-index neurological examination procedures, including the cranial nerve examination, and high payoff, evidence-based orthopedic tests. Case simulations will be central to enhancing the student's ability to conduct a problem-focused examination with sound clinical reasoning.

DC 3253 Cervical Mobilization and Manipulation (2 credits)

This hands-on laboratory develops and applies the anatomical, biomechanical, and pathophysiologic basis for chiropractic adjustive therapy. Topics include adjustive technique terminology, thoracic adjusting mechanics, adjusting contraindications/complications, adjustive therapy decision analysis, adjustive treatment guidelines and safe application of chiropractic adjustments. Adjustive techniques include prone, supine, seated and standing procedures.

DC 3254 Rehabilitative Exercise: Cervical Spine (1 credit)
This hands-on laboratory will introduce evidence-based approaches related to active care of patients with prevalent cervical spine disorders. Supported by Cervical Spine Related Disorders, this lab will focus on, among other topics, stretching, strengthening, McKenzie principles of classification and therapy, and neuromobilization.

DC 3255 Clinical Reasoning for the Primary Spine Provider II (1 credit)
This course will focus on using case simulations to teach students the skills necessary for diagnosing and managing common disorders of the cervical spine. Through interactive case studies, students will learn to recognize and interpret clinical signs and symptoms and order relevant diagnostic tests. Students will also develop treatment plans and management strategies for patients with conditions such as whiplash (sprain/strain), postural syndrome, disc herniation with radiculopathy, and cervical spondylosis with or without myelopathy.

DC 3256 Nutrition in Chiropractic Practice (2 credits)
This course covers the role of nutrition in the maintenance of health and the prevention and treatment of disease, as well as the role that nutritional supplementation and therapy may play in chiropractic practice. General principles of nutrition and nutrition therapy will be covered, including macronutrients and micronutrients, dietary assessment, and controversies in nutritional therapy. Weekly case-based discussions provide for integration of clinical, laboratory and dietary data in the management of patients with metabolic syndrome, chronic disorders, and degenerative disorders. The emphasis is on relevancy to chiropractic practice and the complementary role of nutritional therapy in chiropractic practice.

DC 3271 Clinical Practicum IV (2 credits)
Students continue their clinical education with a full day per week of experience in one of the chiropractic clinical education facilities. This will be augmented with multidisciplinary observation within UPMC and the Pittsburgh VA. The goal of this experience is to develop clinical reasoning skills through observation and participation in the history and examination of patients, as well as assisting with the treatment of patients. Students will continue to maintain a log of their clinical experiences throughout the 8 terms.

SPRING – Term 5

DC 3235 Clinical Neurology (3 credits)

The lecture portion of this course presents a survey of neurological diseases, focusing on those with lesions of the brain and spinal cord. Diseases will be categorized into cerebrovascular disorders, balance disorders, seizure disorders, sleep disorders, congenital disorders, infections, neoplasms, demyelinating diseases, progressive neurologic disorders, traumatic brain injury, and spinal cord injury. Emphasis will be placed on relevance to chiropractic practice and differential diagnostic skills. The laboratory portion of this course will focus on the advanced neurological examination. If possible, this course will correlate with Clinical Practicum V.

DC 3236 Diagnostic Imaging III: Extremities (1 credit)

This course will provide students with an in-depth understanding of the diagnostic imaging techniques used to assist diagnosis of prevalent disorders of the extremity joints. Students will learn to interpret x-rays, MRIs, MSK ultrasound, and CT scans and understand the clinical implications of their findings. Through case studies and hands on practice/simulations, students will develop the skills necessary to effectively communicate imaging findings to patients and other health care professionals.

DC 3257 Extremity Disorders (3 credits)

This course will provide the diagnostic and therapeutic knowledge necessary for the assessment and management of injuries or disorders of the extremities commonly seen in general chiropractic practice and sport settings. Discussion of mechanical, congenital, or traumatic neuromusculoskeletal disorders affecting the upper and lower extremity joints and soft tissues will be emphasized. Topics will center on conservative management options and the current evidence basis for treatment effectiveness.

DC 3258 Examination of the Extremities (2 credits)

This laboratory course involves the learning of the physical exam skills necessary for the evaluation and diagnosis of common neuromusculoskeletal disorders of the upper and lower extremities. The use of simulations will allow the student to create an evidence-based, problem-focused examination supported by sound clinical reasoning.

DC 3259 Extremity Mobilization and Manipulation (2 credits)

This laboratory will be devoted to the development of the psychomotor palpation and joint assessment skills necessary for effective mobilization and manipulation of the upper and lower extremity joints. Various evidence-based approaches to these interventions (e.g. Mulligan mobilization with movement, McKenzie diagnosis and therapy) will be demonstrated and taught.

DC 3260 Rehabilitative Exercise: Extremities (1 credit)

This hands-on laboratory will introduce evidence-based approaches related to active care of patients with prevalent extremity injuries. Supported by Extremity Disorders, this lab will focus on, among other topics, stretching, strengthening, McKenzie principles of classification and therapy, and neuromobilization.

DC 3261 Spinal Manipulation Review (2 credits)
This laboratory will reinforce the biomechanical assessment and spinal manipulation skills covered in previous mobilization and manipulation courses. The course is intended to refine the motor skills developed by students as they prepare to treat patients in the University of Pittsburgh DOCTOR OF CHIROPRACTIC PROGRAM clinical network.

DC 3262 Clinical Reasoning for the Primary Spine Provider III (1 credit)
This course will focus on using case simulations to teach students the skills necessary for diagnosing and managing common conditions of extremity joints. Through interactive case studies, students will learn to recognize and interpret clinical signs and symptoms and order relevant diagnostic tests. Students will also develop treatment plans and management strategies for patients with prevalent conditions such as shoulder impingement syndrome, lateral epicondylitis, carpal tunnel syndrome, femoroacetabular impingement, internal knee derangement, and ankle sprains.

DC 3272 Clinical Practicum V (2 credits)
Students continue their clinical education with a full day per week of experience in one of the chiropractic clinical education facilities. This will be augmented with multidisciplinary observation within UPMC and the Pittsburgh VA. The goal of this experience is to develop clinical reasoning skills through observation and participation in the history and examination of patients, as well as assisting with the treatment of patients. Students will continue to maintain a log of their clinical experiences throughout the 8 terms.

SUMMER – Term 6

DC 3237 Review of Systems and Interprofessional Collaboration (2 credits)
This course will provide students with a comprehensive understanding of the review of systems, a crucial component of the patient assessment process. Through case studies with or without simulations, students will learn how to systematically review each body system to identify potential signs and symptoms of disease. Emphasis will be placed on recognizing red flags for urgent medical conditions and interprofessional collaboration for further evaluation and treatment.

DC 3238 Emergency Care (2 credits)
This course is designed to provide students with the skill and knowledge to assess an emergency condition, prioritize and triage care in complex situations, and provide basic first aid to preserve life and prevent further injury prior to the arrival of emergency personnel. Conditions covered include

stroke, cardiac arrest, respiratory distress, acute trauma (including head and spinal injuries, and fractures), diabetic emergencies, seizures, poisoning, and emergency childbirth. Common chiropractic office situations requiring urgent or emergent care will also be discussed, such as nosebleed, seizures, fainting, and dizziness.

DC 3239 Public Health and Epidemiology (3 credits)
Students will be introduced to the principles and practice of public health and basic concepts in epidemiology, health policy, health promotion and disease prevention. Topics include the impact of culture on public health, global health and global transmission of infectious disease, population health, and the role of the chiropractor in the American public health system. Small group discussions supplement the weekly lecture presentation.

DC 3240 Cases in Diagnostic Imaging (1 credit)
A wide variety of clinical cases will be presented in weekly radiology rounds.

DC 3241 Special Populations (3 credits)
This class will provide an overview of evidence-based chiropractic diagnosis and management of prevalent conditions in the geriatric, pediatric, pregnant, athletic, and special needs patient populations. The geriatric portion of the course will focus on the normal physiologic changes associated with aging, the neuromusculoskeletal and psychiatric pathologies prevalent in this population, and relevant conservative management strategies. The pediatric portion of the course will focus on normal childhood growth and development, the well child examination, childhood immunization, and common childhood conditions that commonly present in chiropractic settings. Chiropractic management of the pre- and post-partum patient will be discussed focusing on the changes in treatment approach during different trimesters. The management of the athlete, including attending to the female triad, will be discussed in the context of being a team physician and/or a member of a sports health care team.

DC 3263 Special Topics in Manual Therapy I (1 credit)
Focusing on the cervical spine, thoracic spine, and upper extremities, this laboratory course will review the mobilization/manipulative procedures and chiropractic management of patients with various clinical presentations requiring modification of routine clinical approaches. Case scenarios are emphasized to assist with diagnosis and comprehensive management.

DC 3264 Advanced Topics in Rehabilitation (2 credits)
This laboratory will focus on assessment strategies and rehabilitation concepts fundamental to chiropractic patient management of the locomotor system. The student will learn to use various

assessment strategies to create an individualized treatment plan that addresses key features of common functional and structural neuromusculoskeletal disorders.

DC 3265 Taping and Bracing (1 credit)
This hands-on laboratory will provide the chiropractic student with the basic knowledge and skills to appropriately select and apply necessary support and protection with athletic/kinesiology tape, elastic wraps, and OTC braces when treating musculoskeletal injuries and other common conditions of the upper and lower extremities. When possible, instruction will be provided by those involved in the University of Pittsburgh athletic programs.

DC 3266 Evidence-Based Practice IV (2 credits)
This small group course will refine evidenced-based practice skills acquired throughout the program. Students will be asked to present research evidence directly pertinent to clinical topics arising from the Clinical Observation IV course. The focus will be interpretation and assessment of study results, and application to patient care, integrated with clinical experience and patient preference.

DC 3267 Physical Agents and Modalities (2 credits)
The student will be introduced to the range and scope of physiological therapeutics and modalities commonly used in chiropractic practice. The course consists of lectures and experiential sessions in which students become familiar with the various equipment used in practice. Topics include therapeutic heat and cold, hydrotherapy, electrotherapy, ultrasound, laser therapy, gait appliances and traction.

DC 3273 Pre-Clerkship and Comprehensive Clinical Examination II (2 credits)
Students will continue to develop and refine their clinical skills with a full day per week experience in one of the chiropractic clinical education facilities. Clinical students will gradually assume more professional responsibilities under the close supervision of licensed chiropractors. This will be augmented with multidisciplinary observation within UPMC and/or the Pittsburgh VA. Students will continue to maintain a log of their clinical experiences throughout the eight terms. This course will conclude with the administration of a comprehensive clinical examination.

FALL– Term 7

DC3331 Outcomes Accountability Capstone Project I (3 credits)
This course will allow students to present their clinical research projects to their peers as a culmination of the Evidence-Based Practice training in the program. This course will act as a potential bridge for those students who wish to pursue a career in research.

DC 3332 Case Studies Differential Diagnosis (3 credits)

Through case-based learning, this course will teach students to systematically evaluate patient signs and symptoms and diagnostic test results to generate a list of plausible diagnoses. . This course will reinforce how to efficiently use clinical reasoning and evidence-based guidelines to prioritize and confirm the most likely diagnosis. Emphasis will be placed on recognizing typical and atypical presentations of common neurological, musculoskeletal, or organic conditions as a final preparation for the final phase of chiropractic training before graduation.

DC 3351 Special Topics in Manual Therapy II (1 credit)
Focusing on the lumbopelvic spine and lower extremities, this laboratory course will review the mobilization/manipulative procedures and chiropractic management of patients with various clinical presentations requiring modification of routine clinical approaches. Case scenarios are emphasized to assist with diagnosis and comprehensive management.

DC 3352 Chiropractic Practice (3 credits)
This course introduces the student to the business aspects of operating a chiropractic practice. A variety of practice settings and contexts will be discussed. Topics include billing practices, payment systems, coding and documentation, professional and ethical practice promotion, communication skills, legal and regulatory aspects of chiropractic practice, professional liability insurance and risk management, financial planning, healthcare law and jurisprudence, the regulation of chiropractic practice across North America, the various rights/legal obligations of providers and their patients. The course concludes with a discussion of contemporary issues and controversies related to the legal regulation of health care practices, particularly chiropractic.

DC 3371 Clinical Clerkship I (6 credits)
Students, as clinical clerks, begin to co-manage patients and eventually assume responsibility for managing patients under direct supervision of a licensed chiropractor within a chiropractic practice setting. Students' clinical experiences will be monitored to ensure that each student is exposed to a wide variety of clinical cases and experiences. This will include multidisciplinary observation within UPMC and/or the Pittsburgh VA. Whenever possible, efforts will be made to provide inter-professional education and collaboration opportunities, particularly with other health care students at the University of Pittsburgh. Students will continue to maintain a log of their clinical experiences throughout the eight terms.

SPRING – Term 8

DC3333 Outcomes Accountability Capstone Project II (1 credit)
This course will allow students to complete their clinical research projects and submit a written summary that includes a description of the patients, compliance with data collection, adherence to

treatment guidelines, a summary of outcomes and a plan to improve the student's own performance. This course will act as a potential bridge for those students who wish to pursue a career in research.

DC 3372 Clinical Clerkship II and Comprehensive Clinical Examination III (9 credits)
The clinical clerk progressively achieves competence in the diagnosis and management of patients, under supervision, within the Pittsburgh VA hospital, VA-based community outpatient clinics or community-based private practice chiropractic clinics. The focus is the progressive achievement of responsibility for patient management and for continuing to refine diagnostic and therapeutic skills, and clinical reasoning skills. Students receive copious feedback from their supervisors and mentors and undertake regular formative assessment of their skills and knowledge. Pending application and approval by the Vice Chair of Clinical Affairs and state authorities, some or all the final clerkships may be located at an out-of-state clinical facility. At the conclusion of this semester, students will have achieved professional competency in all required components specified by the Council on Chiropractic Education. This course will conclude with the administration of a terminal comprehensive clinical examination.

Comprehensive Examinations

Students must successfully pass three comprehensive clinical examinations prior to graduation from the Doctor of Chiropractic Program. These examinations are held at the end of the first and second years of study, and at the end of the eighth semester. They consist of both written and practical portions and may involve standardized patients. These examinations are administered as part of DC3173, DC3273 and DC3372 courses. Students are tested on material representing cumulative, comprehensive and integrative content, as steps toward the demonstration of competency in the 31 required elements of the Council of Chiropractic Education. More detail about these examinations is provided in the three named courses above. These examinations are also preparation for the practical Part IV exam administered by the National Board of Chiropractic Examiners. Students must achieve a passing grade on these examinations in order to progress in the program and graduate. Students failing examinations may have an opportunity to remediate their grade, the process of which will be specific to the relevant course and/or examination and described within the course syllabus.

Requirements for Graduation

To be eligible to graduate with the Doctor of Chiropractic degree, the student must:

1. Successfully complete the DC plan of study.
2. Successfully pass the written and practical comprehensive examinations.
3. Successfully pass Parts 1, 2, and 3 of the National Board of Chiropractic Examiners examinations
4. Take Part 4 of the National Board of Chiropractic Examiners examination
5. Successfully complete the Outcomes Accountability Capstone Project during the terminal clinical educational experience.
6. Earn a minimum of a C or better in all graded courses.
7. Earn a Satisfactory or Honors in all non-graded courses.
8. Earn a minimum 3.0 cumulative grade point average at the time of graduation.
9. Adhere to the Code of Professional Conduct for DC Students.
10. Adhere to the Academic Integrity Code of the University of Pittsburgh.
11. Adhere to the Student Code of Conduct at the University of Pittsburgh.
12. Fulfill all financial obligations to the University of Pittsburgh.

Felony Conviction Notice

A prior criminal record may negatively impact your ability to fully participate in the University's Doctor of Chiropractic curriculum. Prior to participating in clinical rotations, students admitted to the program will be required to complete a criminal background check. Certain convictions may prevent students from entering clinical facilities, which may hinder a student's ability to successfully complete the program. In addition, certain criminal convictions may prevent a graduating student from being licensed. If applicable, we encourage you to check with the appropriate State licensing board(s) to determine whether your background may be a barrier to your completion of the program and future licensure. Additionally, the University may require an internal investigation to determine if the conviction would preclude the candidate from successfully completing the education requirements for graduation, including the clinical education requirements.

Eligibility to sit for the National Board of Chiropractic Examiners tests (NBCE)

Students will receive instructions from the program regarding the general process for registering for the four parts of the NBCE tests. Requirements to obtain licensure vary within each state, however in the vast majority of cases, successful passing of all four parts of the NBCE is required. Students will be responsible for ensuring that all required paperwork is obtained and completed. Please note that in order to become licensed, many states will inquire as to whether the applicant has been convicted of a misdemeanor, a felony, or a felonious or illegal act and if you have a record, you may not be able to become licensed to practice your profession after graduation.

The Doctor of Chiropractic degree, in and of itself, does not entitle the recipient to practice

chiropractic. Those who earn the degree must apply for a license to practice in the jurisdiction of their choice. Due to the various licensure requirements in each of the 50 U.S. states, as well as in other countries, it is strongly recommended that applicants contact the respective Board of Examiners regarding educational requirements in states and countries where they may consider practicing after graduation. In addition, most licensing boards require a criminal background check prior to licensure. Neither acceptance for admission into the program nor the subsequent earning of a Doctor of Chiropractic degree guarantees that a state or foreign country will grant a graduate a license to practice chiropractic. Each state and foreign country, through its legislative and administrative process, defines the standards of competency and scope of practice of chiropractic within its jurisdiction. Such standards may include, but are not limited to, the pre-chiropractic and chiropractic education of the applicant for licensure. State boards may accept or require passing of National Board examinations as part of their licensing procedure. Information on state and international licensing requirements is available from the Federation of Chiropractic Licensing Board website at: www.FCLB.org or individually from each state board licensing office.

Doctor of Chiropractic Program Grade Policies

A: Letter Grade Scale:

Point Scale	Grade	GPA	Graduate
90-100	A	4.00	Superior
80-89	B	3.00	Adequate
70-79	C	2.00	Minimal
60-69	D	1.00	Failure
<60	F	0.00	Failure

B: Grade Course Options:

LG – Letter Grade
H / S / U – Honors / Satisfactory / Unsatisfactory
S / N – Satisfactory / Audit
LG and H / S / U – Letter Grade and Honors / Satisfactory / Unsatisfactory
LG and S / N - Letter Grade and Satisfactory / Audit

When no grade option is indicated for a course by the program, letter grade is the only option.

C: No Quality Points:

G – Unfinished Course Work (extenuating personal circumstances)
H – Honors (exceptional) completion of course requirements
I – Incomplete (clinical work, or research work in individual guidance courses or seminars
N – Audit (noncredit)

R – Resignation (student resigned from the University for the term)
S – Satisfactory (satisfactory completion of course requirements)
U – Unsatisfactory (unsatisfactory completion of course requirements
W – Withdrawal
Z – Invalid Grade (invalid grade reported)
** - no grade (no grade reported)

D. Remediation Policy

Students failing examinations may have an opportunity to remediate their grade, the process of which will be specific to the relevant course and/or examination and described within the course syllabus.

Doctor of Chiropractic Program Attendance Policy

The Doctor of Chiropractic Program (DCP) emphasizes the importance of regular attendance for student success and professional development. This attendance policy is designed to ensure that students engage fully in the learning experience while acknowledging the need for flexibility in select circumstances.

Program Attendance Expectation:

1. ***All DCP students are <u>required</u> to <u>attend and engage</u> in all scheduled classes, laboratories, and clinical experiences.***

   This means being physically and mentally present in all learning experiences. This is inclusive of attending scheduled classes and events, participating in instructional activities, and having your camera on during synchronous online sessions/meetings. Activities such as texting, social media, completing other course assignments, non-course related discussions are prohibited during live sessions.

2. ***All DCP students are expected to attend at least 90% of course meetings, including excused absences (see below). If this expectation is not met, the student will drop a letter grade in the respective course.***

3. ***Punctuality: Students are expected to arrive at or prior to the scheduled start time of all scheduled activities. Late arrivals disrupt the learning environment and may negatively impact the student's understanding of the material. Recurrent tardiness may result in being placed on academic probation.***

Excused Absences:

Unforeseen events or circumstances may occur that cause a student to be absent from class. Absences greater than 2 consecutive school days will require communication with the Associate Director of Academic Affairs. Acceptable reasons for excused absences include:

- **Personal illness or family illness** (if responsible for primary care): A student may be excused due to illness, documented by an appropriate health care provider. Students MUST notify their instructor of their illness PRIOR to the start of class in order to be considered excused. Failure to do so will result in an unexcused absence.

- **Bereavement**: In the case of a family death/emergency, students must notify the instructor and Associate Director of Academic Affairs as soon as possible to ensure proper communication and academic arrangements can be made.
- **Natural Disaster or Catastrophic Events** (e.g. fire, flood, hurricane, etc.) In the case of a natural disaster or catastrophic event, students should notify the instructor and Associate Director of Academic Affairs as soon as possible to ensure proper communication and academic arrangements can be made.
- **Religious Observances**: Students are entitled to excused absences for religious observances. Notification to the affected lead instructor(s) and approval from the Associate Director of Academic Affairs is required in advance.
- **Military duty**: Students are entitled to excused absences for military duty and National Guard obligations. Notification to the affected lead instructor(s) and approval from the Associate Director of Academic Affairs is required in advance.
- **Extenuating Circumstances:** Certain circumstances may require make-up work and/or referral for remedial work in lieu of a grade change at the discretion of the Associate Director of Academic Affairs in consultation with the lead instructor of the respective course.

Make-up Work:

Students with excused absences are responsible for promptly contacting their respective instructors to discuss missed work and/or assignment deadlines. Faculty are NOT required to provide additional time or extended deadlines to students with an UNEXCUSED absence.

Unexcused Absences:

Unexcused absences are any absences that fail to meet one of the categories noted above for "excused" absences.

Excessive absences (excused or unexcused) are considered a breach of professional behavior and may result in a delay in program completion and/or disciplinary action through the program's professional conduct policy.

Faculty Advisors

The advisor's role is to help guide the student's progress through the Doctor of Chiropractic Program. The Faculty advisor will:

- Meet with the student after the start of each semester
- Assist the student in the following: engaging in student leadership roles, participating in extracurricular/service activities
- Meet with the student at regular intervals throughout the program and as needed to review academic progress; and discuss professional plans
- Meet with the student upon their notification of probationary status
- Assist the student with accessing academic/student-related/professional resources as needed
- Maintain a record of meetings with the student

DC Student Advisee Guide

The University of Pittsburgh Doctor of Chiropractic (DC) *DC Student Advisee Guide* was developed to support the Doctor of Chiropractic Program mission. The role of the faculty advisor is essential for fostering academic success, maintaining transparency and clear communication, and supporting a cohesive, collaborative, and professional culture among faculty, staff, and students. Active participation of the DC student is critical to the success of the advisor/advisee relationship and process. The following guide provides foundational roles, responsibilities and expectations that will help to maximize the benefit of the advisor/advisee relationship and process.

Student Advisee Responsibilities and Expectations:

- While faculty advisors are expected to make the initial outreach, it is the student's responsibility to attend the advising session. It is expected that students will engage in at least one face-to-face advising session per term. Any student on academic probation is **required** to attend the routine advising sessions at the cadence suggested by their advisor. Students are able to contact their advisor to schedule a session at any time.
- When a faculty advisor communicates with the student advisee to address a concern or to schedule an advising session, the student should respond promptly (within 48 hours) and professionally.
- The student should come to each advising session on time and with specific agenda/talking points, which may include but are not limited to academic or clinical performance, time management, health/wellness issues, academic/career goals, and personal concerns.
- The student should maintain ongoing communication with the advisor between advising sessions. If and when challenges arise that interfere with the student's ability to succeed in the Doctor of Chiropractic Program, the student should reach out to their advisor as soon as possible.
- The student should follow through with action items identified during any advising session, and work with the advisor to identify optimal mechanisms of support.
- Advising sessions are optimized when the student openly and honestly shares information relevant to performance and goals, takes ownership for professional development, and is open to suggestions and new approaches to problem solving.

In the event that a student's advisor is no longer able to serve in the advising role, a new faculty advisor will be identified and assigned. Any additional concerns that students recognize as requiring escalation should be relayed to the Doctor of Chiropractic Program Director.

DC Student Dress Code

In the interest of personal and patient safety, professionalism and consideration for others, this dress code policy outlines the basic requirements that students must follow during class, labs, clinical education activities, community engagement, guest speakers, site visits and special events. Different learning and teaching environments may require different attire. Exceptions to this policy may be made based on medical, religious, and cultural requirements. Cultural and religious attire is welcomed as long as it is safe and appropriate for the specific learning environment. All students are permitted to wear the clothing of their choice regardless of traditional gender norm conformity, provided that such clothing does not violate other aspects of this dress code.

Basic Standards of Dress and Grooming Required for all Educational Activities:

1. Maintain personal hygiene and be well-groomed:
    a. Hair, beards, and mustaches should be neat, clean, and kept in a way that does not interfere with students' abilities to complete learning activities, assessments or interventions
    b. Nails should be trimmed to a length that does not interfere with clinical and classroom hands-on activities
    c. Fragrance and jewelry should be minimized with patients' and co-workers' needs respected
2. Wear clean clothing, free of holes, tears, or other signs of wear beyond normal functionality
3. Dress modestly (no inappropriate skin exposure, no exposed undergarments)
4. Wear clean and appropriate footwear that meets expectations for the specific setting

Unacceptable Attire and Grooming for All Educational Activities:

1. Excessive fragrances or body odors
2. Clothing with language or images that can be construed, based on societal norms, to be offensive, obscene, profane, or contribute to a hostile learning and working environment
3. Headwear such as hats and hoods (except for medical, religious, or cultural purposes)
4. Unkempt or torn shoe wear or unsafe footwear

Dress Code Specific for the Gross Anatomy Lab:

1. Shoes with a closed heel and that cover the toes
2. Long pants or skirts (i.e. no shorts)
3. Gloves are required whenever handling human specimens or lab equipment
4. Clothing worn in the gross anatomy lab should not be worn in other classroom settings. Scrubs are recommended in the gross anatomy lab and should be changed before moving to the classroom
5. Alternatively, students are encouraged, but not required, to wear protective overclothes (e.g. lab coat or disposable gown) while working in the lab
6. The specific directions of the Gross Anatomy supervisor supersede this dress code and must be followed if provided to students

Dress Code Specific for the Practical Laboratory Activities:

There will be space for you to change clothes on campus, as this attire is not appropriate for all weather or comfort levels. Please communicate any personal or cultural preferences regarding clothing if they do not fall within these guidelines.

1. **Fitted T-Shirts or Tank Tops**
    a. Allows access to shoulder girdle, upper back, and neck
    b. Avoid oversized or thick fabrics that obscure landmarks
2. **Sports Bras (for those who wear them)**
    a. Racerback or open-back styles are ideal for palpating the back
    b. Can be layered under a loose shirt for modesty when not being palpated
3. **Stretchable Athletic Shorts**
    a. Allows access to pelvic landmarks, hip structures, and lower extremities
    b. Wear bike shorts or spandex underneath stretchable athletic shorts
4. **Layered Clothing**
    a. Students can wear a zip-up hoodie or button-down shirt over a tank top and remove it only when needed
    b. Promotes comfort and autonomy
5. **No Jeans or Restrictive Clothing**
    a. These limit access and restrict movement during partner palpation

Dress Code Specific for Professional and Clinical Education and for DCP Community Engagement Activities:

1. Wear clothing that does not interfere with movement required for patient care and safety
2. Clothing should be modest and cover chest, shoulders, torso, and hips in all functional positions
3. Avoid leggings, t shirts, jeans, and shorts
4. Appropriate closed-toed shoes. Shoes should be clean and functionally appropriate for the setting. Sneakers may be worn if clean and approved by the clinical site guidelines
5. The University of Pittsburgh photo ID badge must always be worn during clinical education experiences. Some facilities may require facility-specific ID badges
6. Specific dress code requirements will be provided by the various clinical sites. These may include, but not limited to business professional clothing (e.g. dress pants, button down shirt or blouse), business casual clothing (e.g. khaki's, polo shirts), scrubs, or white coats, depending on the policies and practices of the specific clinical site

Dress Code Specific for Special Events:

Business casual dress is required for these events. Business casual attire is broadly defined as a code of dress that blends traditional business wear with a more relaxed style that is still professional and appropriate for an office environment. Examples include:

- Button down shirts, blouses, sweaters
- Trousers or modest length skirts or dresses
- Suits and ties may or not be required depending on the specific event instructions
- White coats may be required in some cases

Students in violation of this policy may be subject to disciplinary action. The DC program may require specific attire for special events, and students will be notified of any adjustments.

Questions regarding appropriate attire may be directed to the Program Director/Course Faculty and setting-specific supervisor. The faculty members and clinical instructors reserve the right to prevent a student from attending any class or activity at any location if the student's attire violates the dress code policy.

DC Clinical Education

Introduction to Clinical Education

The Doctor of Chiropractic program will offer students several unique clinical training opportunities that are available only in an integrated education and clinical system such as the one that currently exists between the University of Pittsburgh, the University of Pittsburgh Medical Center (UPMC) health care system and the Veterans Administration Pittsburgh Healthcare System. Additional clinical partnerships are being developed with selected local chiropractic providers, and other health care systems in the state of Pennsylvania such as St. Luke's University Health Network and with Federally Qualified Health Centers (FQHCs). These organizations are also known as community health centers and provide a model of health care focused on specific, targeted populations in under-served communities. FQHCs emphasize a comprehensive approach to health care with integrated clinical services, often including chiropractic services.

The curriculum is designed to immerse students in patient-centered, evidence-based clinical training settings every term of the program. There will be a stepped approach to this clinical training, starting with observational rounds in the first year, followed by assisting with clinical tasks in the second year and finally with a full-time clerkship in the final semester of the program.

Phases of Experiential Learning

There are three (3) distinct phases of experiential learning. This progression doubles the amount of clinical experience required by the Council on Chiropractic Education accreditation standards.

Phase 1 (Clinical Practicum 1-2): Students begin with observational rotations spending one full day in a clinical setting every other week. These shadowing experiences will be distributed throughout a large network of community chiropractic offices as well as integrated chiropractic practices at UPMC and Pittsburgh VA system. Students will also rotate through several interprofessional environments such as community health centers, primary care clinics, specialty practices, and emergency departments. The goal of these early experiences is to introduce students to a variety of healthcare delivery models, to help them understand the roles and workflows of different professionals, to

reinforce and apply their classroom learning in authentic clinical settings, and to illustrate the principles of patient-centered, team-based care in real-world contexts.

Phase 2 (Clinical Practicum 3 – 6): Students shift to supervised, hands-on practice one day per week, concentrating on the management of spinal and extremity musculoskeletal conditions in both chiropractic clinics and interprofessional settings. Under direct preceptor oversight, they assume gradually increasing scope of activity as they take focused patient histories, perform targeted examinations, formulate differential diagnoses, and apply entry-level manual and rehabilitative techniques. These experiences not only reinforce and extend classroom learning but also aim to develop true clinical competency: the ability to integrate theory and practice, to exercise sound clinical reasoning, and to deliver safe, patient-centered care in collaborative health-care environments.

Phase 3 (Clerkship 1-2): In their final year students will build from part-time to full-time supervised clerkships in which they function as pre-licensed clinicians. Immersed in chiropractic environments, they manage a diverse caseload of real-world patients—conducting comprehensive histories and exams, formulating and executing treatment plans, and monitoring outcomes over time. Throughout these clerkships, students refine advanced diagnostic reasoning and manual and rehabilitative techniques, deepen their understanding of ethical and legal responsibilities, and collaborate closely with other healthcare professionals. By integrating in-depth clinical experience with ongoing faculty mentorship and reflective practice, our graduates emerge not only clinically proficient but also professionally confident and fully prepared for national board examinations and independent practice.

Financial Resources

Tuition

Making Payments

There are several options for making tuition payments. You may pay online through PittPAY by e-Check (free) or credit card (service fee applies). You may also mail check and money order payments along with the remittance form. Payments can be made in person at the Student Payment Center, but keep in mind that they do not accept credit card payments in person.

Pre-Pay

This free form plan permits you to reduce your student account balance prior to receiving the first e-Bill for a new term. You may send any amount you wish and make as many payments as you wish provided, they are received by the date established on the prepayment plan form.

Pay Online (PittPAY)

Payments made by e-Check are offered at no charge. While the University does not accept credit card payments directly, they have arranged for a third-party vendor to accept American Express, Discover Card and MasterCard when payment is made online through PittPAY. You will be charged a non-refundable service fee of 2.75% by the vendor for this service.

- Payment can be made by e-Check (electronic check) from an existing checking account, or by Discover, MasterCard, or American Express.
- Students can also authorize parents, guardians or other third-party payers to view their e-Bills and make payments online.
- Students assign the login ID and password and provide it to the authorized individual(s).
- Students access the account at https://my.pitt.edu. Once logged in, students can search for PittPAY in the top right-hand corner of the screen.
- Authorized Payers log in at http://payments.pitt.edu/ using the Login name and Password provided by their student
- Students and Authorized Payers can view and print a copy of the monthly e-Bill.
- Students and Authorized Payers can establish payment profiles for their convenience.
- Students will receive an e-mail at their official University of Pittsburgh e-mail account when eBills are available in Pitt PAY
- Authorized Payers will be notified at the e-mail address they provide in PittPAY.
- Students and Authorized Payers may elect to receive email confirmations of online payments made by the individual.

Existing Discover/MasterCard/AMEX regulations prohibit the University from making a refund to you in cash or by check when you made your payment by credit card and there is an adjustment made to the charges paid. When you pay by credit card and there is a reduction in the amount of the charges, we are required to credit the credit card account you used to make the payment. The vendor will not

refund any portion of the service fee when you are refunded.

Access and Payment of Tuition Bill

- Access your e-bill
    - Log onto my.pitt.edu → search for PittPay on the top right-hand side of the screen → click on Account Activity on the top → click on the appropriate term
- Pay your e-bill
    - Log onto my.pitt.edu → search for PittPay on the top right-hand side of the screen → click on Account Summary on the top → click on Make a Payment
    - Payments must be received by the due date to avoid the assessment of a late fee.

Drop Off

You may make your payment in person at G-9 Thackeray Hall, or you may drop your payment in the depository located outside the Student Payment Center on the Ground Floor of Thackeray Hall. Please do not include cash when using the depository.

If you have any further questions, you may contact the Student Payment Center via phone (412)624-7520 or e-mail payments@pitt.edu. The fax number is (412) 624-7544.

Fees

Course Fees

Some courses have fees associated with enrollment in the course. These courses are identified in the Schedule of Classes and Course Descriptions. The Schedule of Classes is online at: http://www.registrar.pitt.edu/courseclass.html

Mandatory Fees

The following fees are mandatory and are assessed to all DC students.

- Student Activity Fee
- Wellness Fee
- Computing and Network Services Fee
- Security and Transportation Fee
- Major fees (including CPR certification)
- Clinical education fees (including EXATT user fees)

Financial Aid

Contact Information:
University of Pittsburgh Financial Wellness Center
139 University Place, Thackeray Hall
Pittsburgh, PA 15260
https://financialaid.pitt.edu/
412-624-7488 (option 2)
finaid@pitt.edu

Eligibility of Pennsylvania Tuition Rates

Full Policy: http://payments.pitt.edu/pa-tuition-rate-eligibility/
Tuition rates for the University of Pittsburgh are based on whether the student is a permanent resident of the Commonwealth of Pennsylvania. A higher tuition rate is charged to nonresidents.

A student who has lived in the Commonwealth of Pennsylvania for 12 consecutive months immediately prior to enrollment at any college or university in the state may be eligible for reduced tuition rates. To qualify, the student must also be a citizen of the United States or have a U.S. immigrant/permanent resident visa.

Students under 21 years of age are presumed to have the same domicile as their parents. Copies of detailed "University of Pittsburgh Tuition Eligibility Guidelines" are available upon request in the Students Appeals Office, located in Thackeray Hall.

Any admitted student who does not automatically qualify may petition for reduced tuition rates and supply additional information to be reviewed by the Student Appeals Coordinator. To be effective for a particular term, petitions must be submitted within the first 30 calendar days of the term or 15 calendar days of the session.

Due dates will not be extended, and late payment or late registration fees will not be waived for any reasons related to the determination of eligibility for reduced tuition.

A student who changes their domicile from Pennsylvania to another state must promptly give written notice to the University. In addition, a student under 21 years of age must report a change in their parents' or legal guardians' address.

Scholarships

Scholarship Database

Students can access the PittFund$Me scholarship database to search for scholarships. Students will create a profile, and the database will display scholarship opportunities that are tailored to their profile.

How to access this:

- Log onto my.pitt.edu → search for PittFund$Me → access the dashboard to create your account

SHRS Information & Student Resources

New SHRS Fifth and Halket Building

The University of Pittsburgh is in the final stages of completing a new building at Fifth and Halket in the Oakland area, that will house a large number of SHRS academic programs: 8 sports science and nutrition programs, 5 communication science and disorders programs, 3 physician assistant studies programs, 3 health information management programs, a clinical mental health counseling program, and 4 community health services and rehabilitation science programs – including the Doctor of Chiropractic program. This building should be ready for occupancy beginning Spring term 2026; therefore, the first semester of the new Doctor of Chiropractic Program will be taught in two other facilities: the Box Office at Southside Works, and Bridgeside Point 1.

The Box Office at Southside Works ("The Box")

The "Box" is located in the Southside Works, opposite the Cheesecake Factory. It is a former theater that has been modified for use by the University of Pittsburgh and is primarily used by the Doctor of Physical Therapy Hybrid program during immersion weeks. It has two large lecture/laboratory spaces that are well equipped with treatment tables ideal for chiropractic laboratory instruction. The learning spaces also provide adequate room for all required equipment, students' personal belongings, as well as general study and social gathering area.

Department of Physical Therapy Facilities at Bridgeside Point 1

In addition to the instructional space at the Box, chiropractic students will utilize the anatomy laboratory located at Bridgeside Point 1, along Technology Drive in south Oakland, and occasionally will share space typically used by the Physical Therapy Department.

This facility is located just across the Hot Metal Bridge from the Box and within easy walking distance from the Box. The building is secure and requires a registered access badge to gain entrance to all spaces. The building is accessible 24 hours a day, 7 days a week, and has a security guard in the main lobby from 7 a.m. to 7 p.m., Monday-Friday.

The Anatomy Lab is located on the 3rd floor of BSP 1. DC students will be in the Anatomy lab during the first and second terms for the Anatomy lab portion of the course.

Health Sciences Library System

The Health Sciences Library System (HSLS) at the University of Pittsburgh comprises several libraries that support the educational, research, patient care, and service activities to the schools of the health sciences (Medicine, Dental Medicine, Pharmacy, Health and Rehabilitation Sciences, Nursing, and Public Health), as well as the hospitals of the UPMC. The HSLS includes Falk Library of the Health Sciences (home of the HSLS), the Libraries at UPMC Shadyside, and the Children's Hospital of Pittsburgh Libraries. HSLS Online is the gateway to extensive electronic resources for clinical and research needs. www.hsls.pitt.edu 412-648-8866

Parking and Transportation

http://www.pts.pitt.edu/parking/studentpermits.html (412-383-7555)

Bridgeside Point Parking

FALL TERM 2025 ONLY – Students may purchase access to BSP1 back lot parking for $60/month. It is a 10-minute walk to the BOX.

There is an indoor parking garage on Technology Drive across from Bridgeside Point II where the shuttle to main campus runs every 30 minutes. You can park and pay daily, or you can purchase a monthly parking lease. The lease is for this garage ONLY. If you wish to obtain a parking pass for this garage, please contact the Student Services Administrator.

South Side Works Parking

Parking is available near the Box at several public parking garages. Hourly and daily rates apply.

Parking on Campus

If you are on the main Pitt campus regularly, you can find hourly and daily rates at the University's OC, OH, PH, SN, and SO lots. Short-term metered parking is available at more than 115 meters in the BQ, LC, PS, RA, SN, SR, and SQ lots. The Oakland neighborhood is also home to several private and city-owned parking facilities. Use this list to guide you.

Public Transportation

All University of Pittsburgh Students, faculty, and staff may ride all Pittsburgh Regional Transit buses, trolleys, and inclines within Allegheny County.

If you're a University of Pittsburgh student, faculty or staff member who uses (PRT) Pittsburgh Regional Transit , you'll need to make the switch to the Ready2Ride app. **PRT will fully transition to the new mobile system on Aug. 1**, and tap-to-ride card access will no longer be available after that date. This mobile ticketing app allows riders to access and use transit passes directly from a smartphone.

Even if you're not a daily transit user, download and set up the app early. **It takes 24 hours for the system to update and grant access to your monthly pass**.

The app is now available for download through the App Store and Google Play.

More information can be found here. Need help? Contact Panther Central for support with app setup or troubleshooting.

Campus Shuttles

Shuttles are available for transport between main campus and BSP II. These usually operate Monday- Friday from 7 a.m. to 7 p.m. For the shuttle schedule see: http://www.pittshuttle.com/

Disability Resources & Services

The University has comprehensive resources available to DC students who have disabilities through its Disability Resources and Services (DRS). DRS provides equal opportunities and support services for academically qualified students with disabilities to ensure they are integrated as fully as possible into the University experience. Their services include providing assistive technology, specialized exam accommodations, interpreters and real-time captioning, assistance with transportation and specialized housing accommodations. DRS is located on the first floor of the William Pitt Union and can be contacted at 412-648-7890.

Students with disabilities who require special testing, accommodations, or other classroom modifications should notify, no later than the second week of the term, the Director of the Doctor of Chiropractic Program, their course instructors, and Disability Resources and Services (DRS). Student will be asked to provide documentation of their disability and any necessary accommodations as prescribed by DRS.

Veteran Services

Veterans and dependents of disabled or deceased veterans may be eligible for benefits according to federal administration guidelines. The University has an Office of Veterans Services located in Posvar Hall. For additional information on Veterans Education Benefits, visit www.gibill.va.gov

Student Health Services

http://www.studentaffairs.pitt.edu/shshome

Students in the University of Pittsburgh's Doctor of Chiropractic Program are prohibited from consulting or asking for medical advice from principal faculty, adjunct faculty, guest lecturers, or any person in that capacity. Students should seek out care from the Student Health Service (SHS) on the main campus. Counseling service details can also be found in your cohort Canvas shell.

The SHS is a primary care facility that features a health care clinic and pharmacy staffed by medical doctors, nurses, nurse practitioners, a pharmacist, and other health care professionals.

Each student in the Doctor of Chiropractic Program pays a student health fee each semester that gives them access to SHS, which also provides a comprehensive array of educational programs and preventative medicine, including women's health services. SHS is located in the Wellness Center in Nordenberg Hall at 119 University Place and the number is 412-383-1800. In an emergency, please call Pitt Police at 412-624-2121.

The Student Health Service is committed to:

- Health Care: servicing the health needs of the University of Pittsburgh students.
- Professionalism: Providing a professional and knowledgeable staff that is eager to help you in the event of an illness or other health related concern.
- Maintaining Confidentiality: Medical records are not released without the patient's permission.
- Advocating a Healthy Lifestyle: This philosophy will help to prevent many problems while allowing you to lead a fuller, richer and longer life.
- Providing Health Promoting Educational Aids: Counseling, literature, videotapes, films, courses, seminars, and workshops.

General Medicine Services covered by the Student Health Fee include:

- General Medicine
- Contraceptive Options
- Allergy Injections
- Routine Lab Work

Specialty Medical Services covered by the Student Health Fee include:

- Dermatology
- Gynecology
- Internal Medicine
- Orthopedics

Student Health Fee

If you have not paid the fee - no problem! Student Health Services provide medical services to all University of Pittsburgh students, regardless of Health Fee status. We only ask that the students be prepared to meet the following conditions:

- Monetary payment is accepted for all services provided by the Student Health Service.
- MasterCard, Visa, Discover, personal Checks, and cash are acceptable forms of payment. All charges for services provided must be paid for at the time of the visit.

Remember, the Health Fee can be purchased at the Student Health Service upon request.

Reasons to Purchase:

The Health Fee is primarily a once-per-term charge to the student. Its protection range spans the length of the school term for which it was purchased, from the official first day of classes to the official last day of classes.

The Fee was designed to provide students with virtually unlimited access to the majority of medical services available at the Student Health Service facility at little or no additional cost. At today's health care prices, you won't find a better bargain.

How to Purchase

The Student Health Fee is mandatory for all full-time residential students. The Health Fee will appear as a line item on your tuition invoice. Payment can be made at the Cashier's Office, Thackeray Hall, or at the Student Health Service Main Reception Desk. The Health Fee enables the Student Health Service to provide health promotion programs, education, and primary health care.

Coverage Limits

Payments for the following are not covered by the Student Services Health Fee:

- Physical Examinations: Physical Examinations are given for a separate established cost.
- Lab work, x-rays or immunizations associated with the physical examination.
- Pharmacy: Prescriptions filled by a registered pharmacist, and over-the-counter drugs are also available. While there is a charge for all items, prices are often lower than those in a commercial drug store. Many third-party payers are accepted.
- Referrals: The Student Health Service provides referrals to all medical specialties through UPMC.
- Payment for any services provided by any and all outsource facilities
- Payment for treatment/services received somewhere else.

Optional Health Insurance Policies/Plans

The Student Health Service is designed as your source of primary health care during your student years. There may, however, be a time when more extensive medical treatment or emergency care is needed, which is beyond our scope. Optional, third-party health insurance policies are available to all students to provide additional major medical benefits for these situations. These optional policies cover the medical services administered by other medical facilities only, and do not cover services provided by the Student Health Service.

UPMC Health Plan for Students

The University has joined with UPMC Health Plan, the insurance division of the world-class University of Pittsburgh Medical Center (UPMC) to offer comprehensive/affordable student health insurance.

- Health Plans and premium rates are available for a single student.
- Insurance may also be purchased for the spouse and children of a student; please call the number listed below for additional information.

We encourage you to consider UPMC Health Plan student health insurance as a means of protecting yourself against unexpected, unforeseen medical expenses that could temporarily or permanently interrupt your graduate career. For more information on how UPMC Health Plan's student insurance and health promotion programs can maintain you and/or your dependents current and future health, please call 1-877-381-3764 to speak with a program representative.

Liability Insurance

Students enrolled in Clinical Education activities must be covered by professional liability insurance, which is arranged through the University and the cost is included in tuition fees. Verification certificates are provided to the clinical sites upon request.

University Counseling Center

http://www.studentaffairs.pitt.edu/cchome

The University Counseling Center provides comprehensive and confidential personal and academic counseling to Pitt students free of charge. Staffed by psychologists, counselors, social workers, psychiatrists, and pre- doctoral interns, the counseling center provides personal and group counseling for a variety of conditions including ADHD/ADD, depression, drug and alcohol support, anxiety, grief, sexual abuse, and more. The counseling center has day and evening hours by appointment and is located in the Wellness Center in Nordenberg Hall. Please call 412-648-7930 for more information.

Comprehensive counseling and health services are available to students through the Student Health Center and the Counseling Center, both of which are conveniently located on the main campus.

Additional Information: https://www.shrs.pitt.edu/current-students/counseling-services

GuidanceResources®

COMPSYCH® GuidanceResources® Worldwide

Call Anytime for Confidential Assistance

Your Student Assistance Program (SAP) is a confidential counseling service to help address the personal issues you are facing. This service, staffed by experienced clinicians, is available by calling toll-free, 24 hours a day, seven days a week. Call any time with personal concerns, including:

- Relationships
- Major life changes
- Substance abuse
- Grief and loss
- Stress and anger
- Anxiety or depression

Calling in to your Student Assistance Program

How do I reach my Student Assistance Program?

To contact your Student Assistance Program, please dial **877.567.8327** and mention the school you attend.

What happens when a student calls the SAP?

When students call, they will speak with a GuidanceConsultant℠, a master's- or PhD-level counselor who will conduct a short needs assessment and offer guidance.

SHRS Impaired Student Policy

The School of Health and Rehabilitation Sciences (SHRS) has the responsibility to educate students to be responsible professionals prepared to provide quality services. Whether in the classroom, the clinical setting, or a research setting, students are expected to demonstrate professional behaviors aligned with respective Scopes of Practice, Codes of Ethics, and Technical Standards.

Safety is a critical component in the classroom, the clinical setting, and the research setting. The utmost responsibility of the University, the School, and the faculty is the protection and well-being of individuals in the classroom, the clinical setting, and in research, all of which supersede the educational needs of the student to participate in a degree program.

When a student's psychological and/or physical condition has impaired their ability to participate and perform in the classroom, clinical setting, and/or research, the student will be asked to leave the area. As discussed below, the student will be given the opportunity to hear the reasons for the removal, to discuss the incident with a representative from the school and participate in a treatment plan if appropriate. Any expenses incurred because of assessment, treatment, transportation, and monitoring are solely the responsibility of the student.

The existence of a health or personal problem for a student is NOT synonymous with impairment under this policy.

In addition to this policy, the University of Pittsburgh has developed resources to assist faculty and staff with distressed students. The Faculty and Staff Guide to Helping Distressed Students is available as well as this document from student affairs. When a partner site has a policy regarding fitness for duty, that policy will be followed in addition to the School of Health and Rehabilitation Sciences policy.

Purpose

This Policy is designed to:

- Identify and adequately address the needs of students with impairment
- Enhance awareness among faculty and students of the typical characteristics of an impaired student to identify students in need of help
- Protect patients from risks associated with care given by an impaired student
- Promote educational programs and other methods of primary prevention of impairment of all students
- Provide a mechanism for a fair, reasonable and confidential assessment of a student who is suspected of being impaired, including the development of a plan to address the student's

academic progress

- Take administrative actions as necessary

Definitions

For the purposes of this policy, impairment is defined as a physical or mental condition, substance abuse, chemical dependence or any other circumstances that interferes with the student's ability to engage safely in patient care or clinical practice.

Reporting Possible Impairment

a. Self-reporting - Any student who is concerned that they might be impaired or likely to become impaired should contact their respective Program Director to formulate a plan of action to secure appropriate assistance and resources.
b. Report by others - Any person (e.g., student, faculty, staff, clinical partner, or administrator) who has reasonable cause to suspect that the ability of a student to safely perform their clinical duties may be impaired shall, in good faith, report the student to the respective Program Director.
c. If a report is determined to be made in bad faith or malicious, the reporting party will be identified to the Dean and may be subject to action under applicable institutional policies and/or laws and regulations.

Process

a. When there is concern that a student is impaired, a faculty member may remove the student from the applicable area. The student shall be informed of temporary suspension from clinical practice. If warranted by the student's condition, the clinical instructor, campus security, or a representative from the school may accompany the student to the nearest healthcare facility for emergency treatment.
b. When there is concern that a student poses a risk of harm, an immediate referral will be made to an appropriate service provider. If the behavior has occurred in the classroom, clinic, or research setting, the student will be temporarily removed from that setting.
c. Faculty involved in the identification of a possible impaired student must initially meet with the student and/or person who is reporting the student.
d. A subsequent meeting(s) will occur between the student, faculty involved in the identification of the problem, and Program Director. The documented and observable evidence of impaired performance will be reviewed with the student, and the student will have an opportunity to provide an explanation.
e. One representative from the University community chosen by the student may accompany the student to any meeting but they may not stand in place of the student during the discussions. Such representative may not be legal counsel.
f. During the meeting(s) an individualized plan will be discussed and developed with the student

that considers the impact of the student's behavior on the safety of the environment. During the meetings(s) the student may be asked to sign an Authorization for the Disclosure of Protected Health Information and may submit relevant medical records from their treating physician. If the student agrees with the recommended plan, the student will proceed with implementation.

g. If agreed to, the student must seek and select a treatment provider when recommended by the Program Director in a timely manner (not more than 2 weeks). Costs of treatment will be the student's responsibility.

h. If the student has been referred for treatment, the student will be permitted to return to practice only on the specific recommendation of an appropriate treatment provider that the student is capable of safe and skilled performance in accordance with School or Programs Scopes of Practice, Codes of Ethics, and Technical Standards.
i. The student has the right to refuse this assessment, treatment, and further monitoring. In which chase the student may file an appeal [see link below].
j. The school may not permit a student to return to practice without certification from a recognized healthcare provider that he/she has completed treatment, is undergoing treatment, or does not need treatment, and is fit for duty.

Monitoring

The student successfully completing the treatment period will be monitored by the Program Director or faculty designee for progression in the degree program.

Leave of Absence and Re-entry

a. An impaired student will be allowed a leave-of-absence in accordance with the policy outlined in the SHRS Student Handbooks.
b. If the student requests a medical leave-of-absence, procedures for the leave and re-entry will be followed as outlined in the SHRS Student Handbooks.

Unresponsiveness to Intervention

If the student does not responsibly cooperate or respond to the plan created by the Program Director or faculty designee, the student may be required to take a leave of absence, be suspended, or be dismissed. Students can appeal this decision using the SHRS appeals process

Confidentiality

Confidentiality for every student is to be maintained throughout the process consistent with the University's FERPA Policy and Procedure.

File

All files will be kept by the student's respective department/program after the student graduates in accordance with university policy.

General Resources for Students

University	www.pitt.edu
SHRS	www.shrs.pitt.edu
Academic Calendar	http://www.registrar.pitt.edu/calendars
Academic Integrity	University SHRS
Career Center	http://www.studentaffairs.pitt.edu/cdpa/
Council on Chiropractic Education	https://www.cce-usa.org/
Disability Resources	https://www.diversity.pitt.edu/disability-access/disability-resources-and-services
DC Program	https://www.shrs.pitt.edu/dc
DC Admissions	https://www.shrs.pitt.edu/dc/admission
DC Technical Standards	https://www.shrs.pitt.edu/dc/admission

Exploring Pittsburgh	http://www.visitpittsburgh.com/ http://www.coolpgh.pitt.edu/
Financial Aid	https://oafa.pitt.edu/financialaid/applying-for-aid/graduate-school-instructions/
Grading	http://catalog.upp.pitt.edu/content.php?catoid=6&navoid=47#grading-policy-and-records
Graduate & Professional Student Government	http://www.gpsa.pitt.edu/
Graduate & Professional Studies Catalog	https://catalog.upp.pitt.edu/index.php
Health & Wellness	https://www.studentaffairs.pitt.edu/shs/
Health Sciences Portal	http://www.health.pitt.edu/
Libraries	Hillman Health Sciences University of Pittsburgh
Off-Campus Living in Pittsburgh	http://www.ocl.pitt.edu/
Office of the Registrar	http://www.registrar.pitt.edu/
Office of Veteran Services	http://www.veterans.pitt.edu/
SHRS Student Services	https://www.shrs.pitt.edu/current-students
Title IX	http://www.titleix.pitt.edu/
Travel Grants	http://www.shrs.pitt.edu/student.aspx?id=291

SHRS Contacts

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Jessica Maguire, Executive Director of Student Affairs
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Campus Map


University of Pittsburgh
Pittsburgh Campus Map 2007–08
SCHENLEY PARK
SCHENLEY BRIDGE
SCHENLEY PLAZA
CATHEDRAL OF LEARNING
SOUTH CRAIG STREET
SOUTH DITHRIDGE ST.
FIFTH AVENUE
FORBES AVENUE
BIGELOW BOULEVARD
BOUNDARY STREET
JONCAIRE STREET
BATES STREET
ATWOOD STREET
OAKLAND AVENUE
LOUISA STREET
MEYRAN AVE.
SEMPLE
McKEE PL.
COLTART AVE.
HALKET STREET
CHESTERFIELD ROAD
DARRAGH
TERRACE STREET
DESOTO STREET
N. BOUQUET STREET
S. BOUQUET STREET
THACKERAY ST.
O'HARA STREET
UNIVERSITY PLACE
UNIVERSITY DRIVE
PARKMAN AVE.
LYTTON AVENUE
TENNYSON AVE.
RUSKIN AVENUE
N. BELLEFIELD
S. BELLEFIELD AVE.
ALLEQUIPPA STREET
SUTHERLAND DRIVE
DUNSEITH STREET
ROBINSON STREET
ROBINSON STREET EXT.
BRACKENRIDGE
ATHLETIC FIELDS
MAGEE
CARNG
MELLI
BELLH
PBE
WEBSR
SPAUL
MELWD
CATHO
CHDEV
RAND
UTDC
FBCRG
LUC
JUC
HEINZ
LOGCB
STEPH
CL
FKART
POST
MERVS
HLMAN
WWPH
LAWRN
LAW
WPU
SOSAM
PAA
ALUM
HOLDY
UCTR
CLAPP
LANGY
CRAWF
RUSKN
MUSIC
IS
BAPST
CHVRN
EBERL
FALKS
PAHLL
VA
PANTH
SUTHD
FRAT
PCNTR
SCAIF
BSTWR
SALK
DSAC
FHOUS
COST
TREES
MONF
VICTO
LOTHP
FALKC
CHILD
PRESB
PUBHL
BENDM
FRICK
MDART
IROQU
FRTOW
PAVLN
OKFFD
WNKM
UPSBB
EURKA
FOBLD
CNBIO
CSMR
TDH
LRDC
SENSQ