<table>
<thead>
<tr>
<th>Semester</th>
<th>Course#</th>
<th>Course Title</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Fall</td>
<td>PHYA4111</td>
<td>Professionalism I</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>PHYA4120</td>
<td>Integrated Anatomy &amp; Physiology I</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>PHYA4139</td>
<td>Microbiology &amp; Immunology</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>PHYA4140</td>
<td>Introduction to Scientific Inquiry</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>PHYA4180</td>
<td>Biochemistry</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>PHYA4260</td>
<td>Medical Ethics</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>PHYA4161</td>
<td>Cell Biology &amp; Histology</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>PHYA4162</td>
<td>Genetics</td>
<td>2</td>
</tr>
<tr>
<td>2. Spring</td>
<td>DXMS4155</td>
<td>Introduction to Sectional Abdominal Sonography</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>PHYA4221</td>
<td>Integrated Anatomy &amp; Physiology II</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>PHYA4229</td>
<td>Fundamentals of Pathology</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>PHYA4230</td>
<td>Human Promotion Throughout the Lifespan</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>PHYA4250</td>
<td>Electrocardiography</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>PHYA4270</td>
<td>Systems Neuroscience</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>PHYA4299</td>
<td>Clinical Laboratory</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>PHYA4141</td>
<td>Applied Clinical Research</td>
<td>1</td>
</tr>
<tr>
<td>3. Summer</td>
<td>PHYA4080</td>
<td>Applied Clinical Research</td>
<td>3</td>
</tr>
<tr>
<td>4. Fall</td>
<td>PHYA5151</td>
<td>Introduction to Medicine, Head and Neck, Dermatology and Endocrinology</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>PHYA5152</td>
<td>Cardiology, Pulmonology and Peripheral Vascular Medicine</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>PHYA5153</td>
<td>Gastroenterology and Urology</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>PHYA5154</td>
<td>Neurology, Orthopedics, and Rheumatology</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>PHYA5155</td>
<td>Infectious Disease, Hematology, and Oncology</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>PHYA5156</td>
<td>Medical Interview</td>
<td>4</td>
</tr>
<tr>
<td>5. Spring</td>
<td>PHYA5239</td>
<td>Introduction to Clinical Clerkships</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>PHYA5249</td>
<td>Physician Assistant Clinical Clerkship I</td>
<td>12</td>
</tr>
<tr>
<td></td>
<td>PHYA5266</td>
<td>Pediatrics, Women's Health, Behavioral Health, &amp; Sexual Health</td>
<td>6</td>
</tr>
<tr>
<td>6. Summer</td>
<td>PHYA5349</td>
<td>Physician Assistant Clinical Clerkship II</td>
<td>8</td>
</tr>
<tr>
<td>7. Fall</td>
<td>PHYA6139</td>
<td>Physician Assistant Clinical Clerkship III</td>
<td>12</td>
</tr>
<tr>
<td>8. Spring</td>
<td>PHYA6212</td>
<td>Professionalism II</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>PHYA6239</td>
<td>Physician Assistant Clinical Clerkship IV</td>
<td>12</td>
</tr>
<tr>
<td>9. Comp.</td>
<td>Summative</td>
<td>Summative Comprehensive Examination Required</td>
<td></td>
</tr>
</tbody>
</table>
Consult School and program policy regarding specific requirements.

Student Name (printed): __________________________

Signature: ______________________________

I agree to complete these courses for graduation.

Please return signed copy to: **Office of Enrollment Services, 65 Bergen street, Room #149, Newark, NJ 07107-3001**

Office use only: Term: __________________________

Student Disclaimer: The database of course description is updated continuously throughout the year. It may be different than your "requirements for the graduation" (RG) form you signed at the time of admissions for which you are held accountable. Please use this site as a reference source and your RG as your official contract.