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<tr>
<th>College of Medicine Policies &amp; Procedures</th>
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Absence Policy Medical Students

<table>
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<td>Absence Policy – Medical Students</td>
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<tr>
<td>Responsible Entity</td>
<td>COM Undergraduate Medical Education</td>
</tr>
<tr>
<td>Policy Owner</td>
<td>COM Planning and Evaluation Committees and Clinical Science Planning and Evaluation Committee</td>
</tr>
</tbody>
</table>

I. Policy Statement

This policy outlines allowable absences during both preclerkship and clinical courses for medical students as well as the process by which absences are requested, approved, and tracked.

II. Scope

College of Medicine students in the MD degree program are expected to comply with this policy.

III. Approval Authority
The Planning and Evaluation Committees for the preclerkship phase and Clinical Science Planning and Evaluation Committee for the clinical phase will oversee periodic updates to this policy. The Undergraduate Curriculum Committee has full and final authority for policy approval.

IV. Purpose of This Policy

Student attendance (both physically and mentally) is expected at all times deemed appropriate by course directors, clerkship directors, and supervising physicians. Educational experiences (e.g., classes, small groups, rounds, conferences, clinics, presentations, etc.) are not considered “optional” unless clearly stated. Students should strive to minimize absences. When a student must miss a required activity, the following guidelines are used. The Dean’s office centrally tracks absences and students who have frequent absences will be asked to meet with the Office of Student Affairs.

V. Who Should Be Knowledgeable about This Policy

COM students, residents, fellows, faculty, course directors, course coordinators.

VI. The Policy

YEARS 1 and 2

Emergency (Unplanned) Excused Absences:
For an emergency excused absence, the student must contact either the Curricular Dean 2-2906 or (hot link) hazenmad@musc.edu, Student Affairs Dean 2-1672 or (hotlink) haneymk@musc.edu to obtain approval in addition to completing the COM Absence Request Form in E*Value on the first day of the student’s return to classes.

Students may be granted emergency excused absences under the following circumstances:

- Death or serious illness of a close family member (i.e., grandparents, parents, spouse, children, siblings).
- Personal medical conditions. A doctor's excuse is needed if the student is away for 2 days or longer.

Planned Excused Absences:

For a planned excused absence, the student must request permission to be absent by completing the COM Absence Request Form in E*Value at least one week in advance of the start of the Block in which the
absence would occur. The student must be in good academic standing at the time of the request. Completion of the COM Absence Request Form may require supporting documentation which is uploaded to the form.

This form will be routed to the appropriate Preclerkship Faculty Director and will be considered in consultation with Theme Leaders. Submission of this request does not automatically guarantee approval. Your leave request is not approved until you receive email confirmation from the Preclerkship Faculty Director.

Planned excused absences are **not permitted on the first and last day of any Block, or during examination days**, except under unusual circumstances which may be discussed with the Preclerkship Faculty Director. Students may be granted planned excused absences under the following circumstances and/or conditions:

- The student is making an academic presentation at a regional or national conference.
- Significant life events that involve a close family member, such as wedding or graduation.
- Jury Duty
- Personal medical conditions. A doctor's excuse is needed if the student is away for 2 days or longer.

Time away from class must be minimal and, preferably no more than 2 days.

**Policy Regarding Examination Absences:**

All students are to take examinations on the scheduled dates. Missing an examination will result in a grade of "0" (zero), unless exceptional circumstances justify that the student may take the examination on a different date. The Senior Associate Dean for Medical Education and/or Associate Deans for Curriculum will make the decision concerning examination retaking or makeup for students. Any requests for permission to take an exam at a time other than on the regularly scheduled date based on health reasons, a death in the family or other significant problems must be made in writing with appropriate supporting documentation.

**YEARS 3 AND 4**

**Emergency (Unplanned) Excused Absences:**

In case of an emergency, the student must contact the course/clerkship director and coordinator as soon as possible in addition to completing the COM Absence Request Form in E*Value on the first day of the student's return to rotation. Students may be granted emergency excused absences under the following circumstances:

- Death or serious illness of a close family member (i.e., grandparents, parents, spouse, children, siblings).
*Personal medical conditions. A doctor’s excuse is needed if the student is away for 2 days or longer.

**Planned Excused Absences:**

For a planned excused absence, the student must first complete the COM Absence Request Form in E*Value at least **6 weeks in advance** to obtain initial approval. Completion of the Absence Request Form may require supporting documentation which is uploaded to the form. This form will be routed to the appropriate course/clerkship coordinator. Submission of this request does not automatically guarantee approval. Your leave request is not approved until you receive email confirmation from the Course Director/ Course Coordinator. Due to the number of courses in the Departments of Medicine and Surgery, absences will be approved centrally by the Clerkship Director(s).

Planned excused absences are **not permitted on specific first and last days of a required clerkship or course** due to orientation and exam scheduling. Extenuating circumstances may be discussed with the course director. Students may be granted planned excused absences under the following circumstances:

- The student is making an academic presentation at a regional or national conference.
- Significant life events occur that involve a close family member, such as wedding or graduation.
- Jury Duty
- USMLE Examination
- Residency Interview
- Personal medical conditions
- Post-match residency-related activities (ex. housing search)

The maximum number of patient care days a student may miss varies by type of rotation and is outlined below. Students are encouraged to schedule residency interviews during protected time during 4th year. Any additional days for interviews may be approved during 4th year courses at the discretion of the course director.

<table>
<thead>
<tr>
<th>Rotation Type</th>
<th># Absent Patient Care Days Permitted (maximum)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Required Clerkship</td>
<td>2 days</td>
</tr>
<tr>
<td>2 week selective</td>
<td>1 day</td>
</tr>
<tr>
<td>Required externship in 4th year</td>
<td>2 days</td>
</tr>
<tr>
<td>4 week elective in 4th year</td>
<td>4 days</td>
</tr>
</tbody>
</table>
Procedures for Make-Up of Clinical Education Time:

Any missed time (emergency absence, planned excused absence, or unexcused absence) must be made up with additional clinical work/didactics at the discretion of the course director. Make up of rotation time should minimally disrupt the educational experience. The dates for the make-up of rotation time are at the discretion of the course director.

When a student is approved to miss more than 4 days of patient care during any rotation, a make-up plan is required. The plan must be approved by the course director and must be submitted to the course coordinator using the COM Absence Request Form to allow central tracking. Due to the number of courses in the Departments of Medicine and Surgery, plans for make-up of clinical time will be approved centrally by the Clerkship Director(s).

<table>
<thead>
<tr>
<th># Days Missed</th>
<th>Requirements for Make-Up of Clinical Education Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>( \leq 4 ) days</td>
<td>Make-up time may be required for any missed clinical time at the discretion of the course director.</td>
</tr>
<tr>
<td>( \geq 5 ) days</td>
<td>Make-up plan is required and must be approved by the course or clerkship director and submitted to the course coordinator on the COM Absence Request Form.</td>
</tr>
</tbody>
</table>

The student’s transcript will reflect a designation of “incomplete” until the approved make-up work is completed. All course work must be complete in order to graduate.

### VII. Special situations

Audits will occur in the case of excessive absences.

### VIII. Sanctions for Non-compliance
In the case of an unexcused absence, Year Directors, Theme Leaders, or Course Directors will submit a physicianship form to the Office of Student Affairs.

IX. Related Information

N/A

X. Communication Plan

Students enrolled in COM courses will be educated about this policy at their orientation to the preclerkship and clinical years as well as any time a substantial update occurs. All faculty are asked to review key policies related to education on an annual basis. Course directors will be notified annually via email to review the policy and more often if substantial changes are adopted.

XI. Definitions

N/A

XII. Review Cycle

Every 2 years or sooner if indicated by program changes.

XIII. Approval History

List original approval date and subsequent review dates

<table>
<thead>
<tr>
<th>Approval Authority</th>
<th>Date Approved</th>
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</thead>
<tbody>
<tr>
<td>Undergraduate Curriculum Committee</td>
<td>July 20, 2012</td>
</tr>
</tbody>
</table>
XIV. Approval Signature

Donna Kern, MD (Signature)  
Date: April 6, 2018  
Senior Associate Dean for Medical Education  
Title
Office of Assessment and Evaluation Student Academic Assessment Transfer Policy

Background
Primary responsibility for evaluating student academic assessments (i.e. grades and standardized exams) rest with the Office of Assessment and Evaluation. The tools used to measure and calculate each student academic records are clearly outlined in block, clerkship, course syllabi, and national examination standards.

Purpose
This policy is designed to outline the due process to provide the Office of Assessment and Evaluation with all student academic assessments from years 1-4 and national standardized exams.

Procedure
1. All grades and exam scores must be sent either electronically or hand delivered to the Office of Assessment and Evaluation within 4 to 6 weeks of when the theme leaders, year curriculum coordinators (preclinical years 1 and 2), clinical core directors acting for the chair of the relevant academic department (clinical years 3 and 4), or Office of Student Affairs receive the student academic assessments.
2. If the decision of the theme leader, clinical core director, course director, or Office of Student Affairs does not result in submitting these records on time to the Office of Assessment and Evaluation then this will be reported to the EDAS Council.

Approved by the UCC on 6/15/12
Academic Evaluation Conflict of Interest Policy

In order to maintain appropriate professional and ethical boundaries, faculty members and preceptors who provide patient care, psychological services, advocacy, or have any relationship with the student that involves knowledge of sensitive or confidential information, are prohibited from assessing, evaluating or grading students in an academic capacity, including writing the Medical Student Performance Evaluation (MSPE). This includes personal relationships such as familial, marital, etc.

*Approved by the UCC on 4/27/12*

Print This Page
COM Admissions Transfer Policy

The College of Medicine accepts transfer applications only from students in good standing at United States LCME-accredited medical schools. Acceptance is limited to students who have completed the second year and not yet started the third year, without any breaks. Students must have completed all preclinical coursework and passed Step 1 of the USMLE licensing exam. Opportunities for transfer are rare and are only approved by the Senior Associate Dean for Medical Education and the Associate Dean for Admissions.

Transfer applications are only accepted if transfer positions are available. Please call the Office of Admissions at 843-792-3283 between April 15 and May 15 of the year of desired transfer to determine whether or not any transfer positions are available. Transfer applications are not accepted if it has been determined by the Deans that there are no transfer positions available for that year.
Alcohol Policy for College of Medicine Student Events and Activities

BACKGROUND:

The College of Medicine is committed to the support and development of physicians. Caring for and promoting student wellness is a point of emphasis at MUSC. Recent local and national student surveys presented alarming data about the extent of alcohol consumption and abuse during medical school. In response to this information, in 2009, the Office of Education and Student Life in the MUSC Provost’s Office formed an Alcohol Advisory Group (AAG) with membership from all colleges. The goal of the group was to analyze alcohol consumption by students and to conduct educational experiences to promote health and wellness. During this process, the College of Medicine examined its own practices and policies regarding student alcohol use. Careful consideration was given to the fact that moderate consumption of alcohol is a socially accepted norm but excessive alcohol consumption is not. It is an individual decision whether one decides to drink responsibly but having MUSC provide resources for the alcohol is not the message the College of Medicine intends to convey. The College of Medicine has a duty both, medically and professionally, to promote health and wellness.

POLICY:

The state of South Carolina supports the MUSC College of Medicine for the purpose training medical professionals to promote health. It appears inconsistent to spend funds on substances that might impair health. The decision has been made to no longer fund/reimburse alcohol purchases for Student Council groups or organizations or College of Medicine student activities effective January 1, 2011. Alcohol is not banned from such events but the College of Medicine will not pay for or reimburse for alcohol purchases nor approve of open bars to College of Medicine sponsored events (cash bars will be allowed). Activities that do have alcohol present at the functions must still ensure the organizers of the event have completed required university alcohol awareness training and submit an alcohol request form through the College of Medicine. Final approval must be signed off on by the COM Office of Student Affairs prior to the event. These forms can be found in the Dean’s Office.
Compliance Requirements

As a medical student, you will be introduced early in your education to some of the professional compliance requirements of physicians. These include, but are not limited to:

Occupational Safety and Health Act (OSHA). OSHA training is mandated by federal law and addresses management of issues related to bloodborne pathogens, fire and life safety, hazard communication and personal protective equipment. Additionally, you will be fitted for a TB mask/N95 respirator to have available and wear during appropriate clinical encounters. You will be expected to complete OSHA training on line each year. Please go to http://www.carc.musc.edu/training/modules/osha/ to complete this training. Your login will be your NetID/MNA.

Health Insurance Portability and Accountability Act (HIPAA). This federal law mandates a standard for privacy and security of protected health information as well as the standardizing of some of the electronic transactions within the health care industry. You will be expected to complete OSHA training on line each year.

Student Drug and Alcohol free campus. This training is mandated by our university accrediting body. It focuses on ways to keep our students healthy and from having problems with drugs or alcohol.

These training sessions are required annually and must be completed in a timely fashion.

Evaluations. As a part of their ongoing professional education, physicians must constructively critique their educational experiences. From the very beginning of medical school, you will be asked to complete evaluations on all of your courses and learning experiences so that we can continue to improve these experiences for you.

Physicians are expected to act in a professional manner at all times. As a physician in training, you should as well. We will further facilitate your professional development through seminars and coursework related to professional issues, cultural competency in health care, and working with people of diverse backgrounds. See the section on Professionalism http://www.musc.edu/com/hndbk/professionalism.htm for further information.
Evaluations

Course Evaluations Policy

Evaluation Policy

Approved by UCC on 8.19.16

Through the effective use of evaluations, MUSC is able to transform constructive student feedback into potential means for improvement. Throughout your educational and medical careers, you will complete many evaluations and many evaluations will be completed about you. Evaluations are a very important aspect of your education.

E*Value

MUSC uses a web-based program called E*Value to administer evaluations. The College of Medicine’s Office of Assessment and Evaluation (OAE) oversees the COM E*Value program. E*Value is completely anonymous, meaning that the information you provide on any evaluation is de-identified to all MUSC personnel. Data can only be viewed in aggregate form and as well as separate data on evaluation compliance. The MUSC confidentiality statement states that the only time MUSC is allowed to contact E*Value to find out the identity of a student evaluator is if a threatening remark is made. It is imperative to understand the confidentiality statement MUSC to utilize E*Value as a resource for providing constructive feedback. Please reference the confidentiality statement in its entirety here.

To use E*Value for completing evaluations, you can log on to www.evaluate.musc.edu with your MUSC Net ID and Password. Also whenever an evaluation is assigned to you, you will receive an email message that the E*Value system sends to your MUSC email account with a link directly to that evaluation. This link will automatically log you into the E*Value program and take you to your evaluation queue.

Year 1 & 2 Evaluation Policy

In your first two years of medical school, you will complete mandatory evaluations about blocks, themes, small group preceptors, peers, and faculty lecturers. The email notifications for evaluations will occur at the conclusion of an educational block or semester. You will have a 7-day period to complete these evaluations. It is highly recommended to complete evaluations promptly as to retain as much pertinent information about
your experiences. Once all evaluations are completed, the evaluation data is reviewed by OAE, course/theme leaders and primary faculty teachers in the first and second years as well as the students who are selected as curriculum representatives. Curriculum representatives create a report on the evaluation data which is disseminated to the entire class so that your class is aware how the courses were overall evaluated and what potential improvements have been made based on your feedback. At MUSC, the completion of these evaluations is mandatory. Failure to complete and submit evaluations in the 1 week period will render you ineligible for block honors for that block. If you do not complete all pending evaluations before the end of the semester as your professional obligation, a Physicianship Evaluation Form will be submitted to the Assistant and Associate Deans for the Office of Student Affairs.

**Year 3 & 4 Evaluation Policy**

In your 3rd and 4th year of medical school, you will complete mandatory evaluations about rotations, residents, fellows, preceptors, peers, and faculty lecturers. The email notifications for evaluations will occur one week before the conclusion of an educational rotation. You will have a 14-day period to complete these evaluations. It is highly recommended to complete evaluations promptly as to retain as much pertinent information about your experiences. Once all evaluations are completed, the evaluation data is reviewed by the OAE, rotation directors, coordinators, and primary faculty teachers. Curriculum representatives create a report on the evaluation data which is disseminated to the entire class so that your class is aware how the courses were overall evaluated and what potential improvements have been made based on your feedback. At MUSC, the completion of these evaluations is mandatory. If you do not complete and submit evaluations in the 2 week period you will not be able to access your Clinical Performance Evaluations or comments about your performance. If you do not complete all pending evaluations before the end of the semester as your professional obligation, a Physicianship Evaluation Form will be submitted to the Assistant and Associate Deans for the Office of Student Affairs.

**Reporting of Data Collected**

In all years, Course Directors as well as the Office of Assessment and Evaluation monitor evaluation completion compliance. The Office of Assessment and Evaluation summarizes, reviews, and discusses the evaluation data incorporated into a Continuous Quality Improvement model, to make improvements in all the courses during all four years. This office also produces an annual report that summarizes its findings. This report is used by the College of Medicine Undergraduate Curriculum Committee in its role to oversee the entire curriculum. In order for the evaluation data to be most productive, it is necessary to know how to communicate effectively when completing evaluations. Please remember to be descriptive and clear in your feedback. Everyone has valid and worthwhile feedback and should contribute honest critiques in a productive and useful manner. If you have any questions regarding evaluations, please contact the Office of Assessment and Evaluation. Please remember your feedback is very important to us. Thank you in advance for viable improvements you will make to our curriculum.
Curriculum Syllabus Materials Agreement

The COM syllabus and related materials are intended for the use of students registered and enrolled in the curriculum of the College of Medicine of the Medical University of South Carolina and the faculty affiliated with the curriculum of the College of Medicine of this University.

The text and other materials in individual lectures are considered the intellectual property of the designated faculty authors and presenters of those lectures.

Use of cell phones or other camera devices to capture projected curriculum content is strictly prohibited.

Copyrighted images and other materials in these lectures are used with permissions from the owners of copyrights and the publishers, or they are used under provisions of Fair Use Statutes.

No part of this syllabus may be reproduced, shared, transmitted, or sold to other persons not so enrolled, registered, or officially affiliated, in any form or by any means, including as photocopies, optical scans, or other electronic copies, as email attachment, or as electronic transfer file, or incorporated and utilized in any information storage and retrieval system without express written permission from the designated faculty authors. Permissions may be granted only by those designated authors for the individual lectures only, singly and specifically, and not for the syllabus as a whole.

Copyright violations are illegal, may be considered a breach in professionalism and will be reported to the Dean’s Office.

I acknowledge and agree to the terms of this use agreement,

______________________________  ______________________
Signature                      Date

______________________________
Printed Name

Print This Page
Dress Code

Students must remember that this is a professional school, and as such, it is expected that students display an appropriate level of judgment with regard to personal hygiene, grooming and dress. At no time will the following items of clothing, or clothing style, be acceptable for College of Medicine students on campus.

- Wearing hats, caps or other head wear in the building*
- Wearing sunglasses in the building*
- Fish-net (stockings/hosiery) and other see-through clothing
- Crop tops and other bare midriff tops including spaghetti strap blouses
- Short shorts
- Athletic-type, wide-armhole tank tops that expose chest, back or midsection
- Any clothing with holes and cuts (i.e. jeans, shirts, tops, etc.)
- Bare feet, thongs, or flip flops (i.e. beach shoes)
- Suggestive, revealing or tight fitting clothing, or clothing with inappropriate pictures or slogans
- Pants worn below the waistline and/or dragging the floor
- Wrinkled, dirty or unsafe attire
- Extreme personal presentation of any type (e.g. body piercing, hair style, tattoos)

*Wearing these items for medical or religious reasons is acceptable.
COM Medical Student Education (Duty) Hours Policy

Student wellness, lifelong learning practice habits, and patient safety are important issues in medical student education at MUSC. Medical students need to learn healthy and appropriate strategies for managing potentially long duty hours. In addition, adequate sleep is key to memory consolidation and a healthy learning environment. The ACGME has established limits on the work hours of interns and residents to help prevent stress, burnout, injury and medical errors. A medical student policy was developed in alignment with ACGME standards for resident duty hours and the recommendations of the Institute of Medicine (IOM).

Education hours are defined as “prescribed education activities/events, including but not limited to patient care, seminars, lectures, rounds, labs, small group activities, etc.” Education hours do not include individual study time, individual preparation for planned activities, time spent in additional elective or extracurricular activities (e.g., longitudinal electives) or self-directed learning activities.

Policy for Student Education Hours

Years 1 and 2

- In years 1 and 2, scheduled student education hours should not exceed more than an average of 40 hours per week over each block in order to allow time for independent student study and preparation.

Years 3 and 4

- The maximum number of hours that a student may be engaged in education activities in one week is 80 hours, averaged over 4 weeks (roughly equal to 13 hours per day for a student working 6 days in one week).
- The maximum on-call shift length is 30 hours. This prolonged duty period will be utilized in prescribed settings in the clinical years in order to provide sound educational value through patient continuity and attendance in hand-offs and rounds. Planned duty periods up to but not exceeding 30 hours occur in the following designated clinical settings:
  - **Third Year**
    - Internal Medicine Clerkship, Charleston and Anderson: 4 calls over six weeks
Surgery Clerkship, Charleston and Anderson: up to 4 calls over six weeks
- Obstetrics and Gynecology Clerkship, Charleston: 1 call over six weeks
- Obstetrics and Gynecology Clerkship, Anderson: 4 calls over six weeks
- Family Medicine, a distributed rural clerkship, has variable call requirements by site but remains within the guidelines outline above.

Fourth Year
- CCU Externship (4 weeks): 4 calls
- MICU Externship (4 weeks): call each Monday and Thursday night
- Maternal Fetal Medicine Externship (4 weeks): 1 call
- Call rooms will be provided when the rotation requires overnight call.
- Students on occasion, and of their own initiative, may remain beyond their scheduled period of duty to continue to provide care to a single patient (e.g., required continuity, academic importance, or humanistic needs of a patient or family) or, for example, to take advantage of a procedural training opportunity, but should still adhere to the weekly hour maximum. When students utilize this work hours exception they should notify the course director in writing and count the additional hours toward their weekly maximum.
- The maximum frequency of in-hospital call is every third night.
- The minimum time off between scheduled shifts is 8 hours.
- The maximum frequency of in-hospital night shifts is 6 night shifts sequentially.
- As a minimum, a student must have the following time off duty: 1 day (24 hours) per week averaged over 4 weeks.
- The student must keep track of their hours and notify their superiors when they are reaching the end of their shift. In addition, students must keep track of their hours per week and notify their course director if they are in danger of working more than the maximum hours.
- Course directors are responsible for periodically checking with students to make sure they are not breaking the education hours policy.

Students are made aware and reminded of the education hour's policy at orientation to each academic year. The portion of the policy relevant to each academic year is included in each syllabus and posted online for reference.

Compliance

In the case of clerkships and clinical courses, where hospital team members facilitate the violation of the Student Education Hours guidelines, students may make a direct report to the clerkship/course director or make a direct report to the Associate Dean for Students Affairs or designee. If a student reports the violation directly to the course or clerkship director, the course or clerkship director is required to report the violation to the Office of Student Affairs (OSA) and to investigate the situation, attempt to remedy it, and report the outcome to the OSA. In the clinical years, education hours are monitored in the student evaluations of each clinical course through E*Value. Students report their adherence to each item in the education hours policy. Education hours violations are documented after each rotation by the coordinator and sent directly to each clerkship director and to the Manager for Clinical Coordination, Credentialing and Compliance for Medical Students, who collects data on the frequency and nature of
education hour violations. This data is shared with the Office of Student Affairs. The Associate Deans for Student Affairs are responsible for contacting each department regarding violations, establishing an improvement plan and reporting compliance to the Clinical Sciences Planning and Evaluation Committee and the UCC twice a year.

*Adopted by UCC January, 2012; Revision approved on December 16, 2016*
# Election Day Attendance Policy

<table>
<thead>
<tr>
<th>Policy Identification Number</th>
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</thead>
<tbody>
<tr>
<td><strong>Policy Title</strong></td>
<td>Election Day Attendance Policy</td>
</tr>
<tr>
<td><strong>Classification</strong></td>
<td>• University</td>
</tr>
<tr>
<td><strong>Approval Authority</strong></td>
<td>Undergraduate Curriculum Committee</td>
</tr>
<tr>
<td><strong>Responsible Entity</strong></td>
<td>College of Medicine</td>
</tr>
<tr>
<td><strong>Policy Owner</strong></td>
<td>Undergraduate Curriculum Committee</td>
</tr>
</tbody>
</table>

## I. Policy Statement

The College of Medicine Undergraduate Curriculum Committee has discussed the adverse impact of the Presidential Election Day Holiday on the student academic schedule. The committee also appreciates all students' right to vote in a Presidential Election.

## II. Scope

Students enrolled in courses of the College of Medicine's MD Degree Program.
The purpose of the policy is to outline the accommodations the College of Medicine will allow in order to enhance students’ opportunity to vote in a Presidential Election.

The student attendance policy for Presidential Election Days is as follows:

Students will be granted time at the beginning or end of the work day to accommodate voting.

The Office of Student Affairs will forward to all students the link to the SC Election Commission. This site provides information onAbsentee Voting and an online application form to request an Absentee Ballot. We encourage all students to participate in in the elections. During non-presidential elections there is no dedicated time off from academic activities.

http://scvotes.org/

N/A
VIII. Sanctions for Non-compliance

N/A

IX. Related Information

A. References, citations

B. Other

C. Appendices

X. Communication Plan

Students will receive annual notification via MyQuest modules with attestation required.

Faculty will receive annual notification via MyQuest modules.

XI. Definitions

N/A

XII. Review Cycle
Indicate the review cycle for the policy (must be 5 years or sooner)

XIII. Approval History

Policy will be reviewed at least every 2 years.

<table>
<thead>
<tr>
<th>Approval Authority</th>
<th>Date Approved</th>
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<tr>
<td>Undergraduate Curriculum Committee</td>
<td>2012</td>
</tr>
<tr>
<td>Undergraduate Curriculum Committee</td>
<td>July 15, 2016</td>
</tr>
<tr>
<td>Undergraduate Curriculum Committee</td>
<td>July 7, 2017</td>
</tr>
<tr>
<td>EDAS Council</td>
<td>September 5, 2018</td>
</tr>
</tbody>
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XIV. Approval Signature

Donna Kern, MD (Signature) Date September 5, 2018

Senior Associate Dean for Medical Education, Chair EDAS Council

Title
### I. Policy Statement

Both the Association of American Medical Colleges and multidisciplinary Alliance for Clinical Education have recognized the important role that meaningful medical student participation in the Electronic Health Record (EHR) plays in developing core competencies necessary for patient care.[1, 2] The EHR should be included as part of medical students’ educational experience from the beginning of their training with attention to adequate preparation through the preclerkship curriculum and incorporation of institutional compliance guidelines in the clinical years.

### II. Scope
This policy is intended to provide guidance to MUSC College of Medicine Faculty, Fellows, Residents and Medical Students regarding appropriate access and use for students at various levels in the MD Degree training. It does not supersede other enterprise regulatory policies. (ex. MUSC Acceptable Use of Computing and Telecommunications Resources Policy: http://academicdepartments.musc.edu/ocio/policies/cup.pdf)

### III. Approval Authority

The final governing committee which is responsible for approving the policy is the Undergraduate Curriculum Committee. The Clinical Sciences Planning and Evaluation Committee will periodically review the policy for updates. Endorsement of the policy will be sought from the Health Informatics Management Committee as well as Legal and Institutional Compliance representatives.

### IV. Purpose of This Policy

This policy outlines the levels of EHR access by training year, expectations for medical student use of the EHR, and expectations for faculty, residents, and educators who are working with medical students in the EHR.

### V. Who Should Be Knowledgeable about This Policy

MUSC College of Medicine Faculty, Fellows, Residents, Students, and Educators

Institutional Compliance

Health Informatics Management Committee

### VI. The Policy

#### A. General EHR Access and Privileges for Undergraduate Medical Students

This section outlines the specific functions that medical students are allowed to perform in the EHR during both inpatient and outpatient care by their year of training.
**Preclerkship Students**

At this level, students have “view only” access. They log in under an ambulatory context in order to view the EHR. Students can use available lists based on service team or unit to pull up a hospital encounter for a patient. They can also search for inpatients in the upper right search box on the “patient lists” screen. Once in the hospital encounter, the students have a summary tab to the left. On the summary screen, print groups are available for vital signs, current medications, and “IP Patient History” which includes past medical, surgical, family, and social history.

**Clinical Students**

At this level, students have defined access to entering and editing information.

All student note types automatically populate a “medical student” header that indicates the note is for educational purposes. Student documentation that is “pended” (unsigned by the student) or signed by the student, but not addended and authenticated by a licensed provider, is not a part of the legal medical record.

Access and use vary between the inpatient and ambulatory setting and are outlined below.

**Inpatient Setting:**

Medical students will have access to the following note types in the inpatient setting:

- Medical Student (cannot be addended or signed by residents or attendings)
- Progress Note
- Consult Note
- H&P
- Code Documentation
- Death Note
- Death Summary
- Discharge Summary
- Seclusion and Restraint Treatment Plan
- Transfer Summary
- Trauma
- Treatment Plan

Within the inpatient context, students can perform the following functions:
- Pend, sign, or cancel a note. Pended notes are only visible to the author. Pended noted in the inpatient context are automatically deleted at patient discharge.
- Enter “smart text” or note templates within their specified note types
- View “shared” notes. Students may not create, edit, or sign “shared” notes with the exception of discharge summaries.
- Place “pended” orders that are seen by/sent to an authorizing provider but not seen by nursing staff until signed by an MD
- Edit and print the handoff
- In the Emergency Department, students can edit and print the after visit summary (“AVS”).
- Access to the ADT (admit, discharge, transfer) navigator
- “Share” a discharge summary in progress for signature by a resident and attending as it represents a continuing story about a patient’s hospitalization.

**Ambulatory Setting:**

CMS regulations allow the following student functions generally in the ambulatory electronic health record. However, our current MUSC EHR build allows the following functions in the General Internal Medicine Ambulatory setting with plans for future expansion.

Medical students will have access to the following note types in the General Internal Medicine ambulatory setting:

- Medical Student Note (cannot be addended or signed by residents or attendings)
- Progress Note

Within the ambulatory visit navigator, students can perform the following functions:

- Enter vital signs
- Enter chief complaint/reason for visit
- Enter history
- Enter allergies
- Review medication reconciliation with patients
- Enter a “medical student” or “progress” note type according to instruction of supervising MD

- Pend, sign or cancel a note. Pended notes are only visible to the author. Students must remove or complete their ambulatory notes before leaving for the day as to avoid preventing closure of the encounter by the teaching physician.
- Enter problems on the problem list under the supervision of MD
- Add visit diagnosis
- Pend (not sign) orders for medications, tests, etc.
- Enter patient instructions and follow up instructions
- Access the outpatient daily clinic schedules and filter these down to a provider level. As long as the student is logged into the correct outpatient clinic context, they can click the “schedule” button at the top and then look at the entire clinic’s schedule or just one provider’s schedule for that day. This allows the student to select and open the charts of the patients they will see in clinic without having to manually search for the patient.
- Preview and print the AVS. The AVS should not be printed until documentation is reviewed by the supervising MD and the patient is ready to leave as the patient takes home the AVS (After Visit Summary) to document medications, labs, plans, etc. regarding their care.

All students, years one through four, have “view only” access in the Haiku and Canto applications.

A. Expectations for Students, Residents, Faculty, and Educators

This section outlines educational, ethical, and compliance standards that are expected by multiple parties involved in student use of the EHR.

Students in the Clinical Years

- Will only document under their personal network credentials (username and password).
- Will not copy and paste from another person’s note.
- Notes should be entered in the EHR. If a student has occasion to enter medical information into another system for educational purposes, only MUSC approved systems (ex. Box) may be used in order to ensure the privacy of patient information.
- The use of templates will be decided by individual clerkships and departments. The use of no template or approved templates is intended to facilitate documentation efficiency while promoting development of fundamental documentation skills and clinical reasoning.
- Will seek feedback on their notes from resident and attending physicians.

Residents/Attendings
Will only document under their personal network credentials (username and password).
Will ask students to enter their notes only in the EHR (not word processing programs, google docs, etc.) in order to ensure the privacy of patient information.
Will follow compliance guidelines when editing student documentation for billing. Student documentation must always be edited to reflect the personal collection or verification of history and physical exam as well as medical decision-making of the resident and/or attending.
Should remove the “medical student” header when they addend and sign medical student documentation.
Should always add an attestation when using student documentation to reflect the resident or attending’s involvement. Attestations can be added by the resident and attending in succession.
Do not have co-sign requirements for any note type available to medical students.
May edit and sign a discharge summary shared by a medical student.
Are encouraged to provide feedback to students on their documentation.

Educators

Clerkships will provide students with orientation materials related to expectations around documentation in the EHR and approved templates at the beginning of each clerkship rotation.

VII. Special situations

MUSC COM students who are working in other EHR systems (ex. on rural or community clinical rotations) should abide by any access and use guidelines for that system, which may differ from our MUSC access levels. The general expectations outlined in section VI.B would still apply in outside settings as well.

VIII. Sanctions for Non-compliance

If a student is found to be noncompliant with this policy, a physicianship form will be completed and submitted to the Dean’s Office. This may result in review by the professionalism committee. For residents and faculty members who are not compliant with this policy, notification will be provided to their program directors or department chairs. Additional sanctions may be applied if the noncompliance also represents an infraction of institutional policy or local, state, or federal laws.

IX. Related Information

A. References, citations


B. Appendices

Appendix A. Quick Reference Summary Chart

X. Communication Plan

- Incorporate a summary chart to disseminate with the policy. This may serve as a “quick reference” for educators and clinicians.
- Incorporate the policy into Epic curricula for new students, residents, and physicians.
- Include the policy as an announcement in the Dean’s Weekly Update.
- Request that clinical department chairs or educational representatives highlight the new policy within their department (at faculty meetings, etc.).
- Request that the Chief Medical Information Officer and the CEO, MUSC Health/VP for Health Affairs include the policy in the Clinical Connections Newsletter.
- Work with the Senior Associate Dean for Graduate Medical Education and the GME office to educate residents about the policy.
- Include the policy in each clerkship syllabus so students are repeatedly made aware of what they are able to do in the EHR.
- Email policy to students and/or require that students complete an attestation in Moodle or MyQuest.

Policy located at: College of Medicine Policies and Procedures

XI. Definitions

N/A

XVI. Review Cycle
Policy will be reviewed every 2 years.

**XVI. Approval History**

List original approval date and subsequent review dates

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<th>Date Approved</th>
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<td>July 20, 2018</td>
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<tr>
<td>College of Medicine Clinical Sciences Planning and Evaluation Committee</td>
<td>July 11, 2018</td>
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<tr>
<td>College of Medicine Undergraduate Curriculum Committee</td>
<td>May 5, 2017</td>
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<td>Health Informatics Management Committee, Legal and Institutional Compliance</td>
<td>February 16, 2017</td>
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<td>January 11, 2017</td>
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<td>COM Committee on Student Access and Use in the EHR</td>
<td>December 9, 2016</td>
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XVII. Approval Signature

Donna Kern, MD

Senior Associate Dean for Medical Education, College of Medicine

Title

July 20, 2018

Date

Print This Page
Examinations

The written examinations consist of multiple choice question from all courses offered during the semester; some essay questions for a particular course may also be included.

Questions from the courses are intermingled. Prior to each exam, students are informed about the general distribution of the questions. Unless instructed differently prior to an exam, students are permitted to bring only hand-held, non-programmable calculators to the examination. These devices, however, may only be used for computation. They may not be used as a source of preloaded information or data, such as formulas, graphs or normal values.

During exams, students are not permitted to have any other electronic devices (cell phones, blackberries, handheld computers, cameras, etc), “hoodie” style sweatshirts, baseball caps, flip-flops, notes, formula cards, backpacks or any other materials with them. Possession of any of these in the exam room will constitute a violation of the Honor Code.

In addition to the integrated, interdisciplinary written exams, students have clinical skills exams and course-based lab exams scheduled during the exam weeks. Some material may be tested through our learning system, Moodle.

In the first year fall semester 1 practice, not for credit, integrated, interdisciplinary written examination will be administered to students so that they may learn what this examination format is like prior to the real experience. This practice examination will be offered only once during the year as a learning experience for students. They will also have quizzes throughout the year to help guide their studying.

Under the Americans with Disabilities Act, students who require separate testing accommodations, based on clinically diagnosed learning or physical disabilities, for examinations are asked to contact Myra Haney, Assistant Dean of Student Academics and Support, at the beginning of the academic year. You can reach her at 792-1672.
The College has adopted an integrated, interdisciplinary format for student examinations. In the pre-clinical years, each block of academic content will be evaluated by a written examination which engages the student to think deeply about the subject material that has been taught over the block. Few of the questions are strict recall/memorization-types and many of the new questions for the integrated examination will encompass concepts taught across multiple thematic areas. Most of the time there is a multiple choice component, and a practical exam component. The written examinations are offered at the end of specific examination periods during which no other formal course activity is permitted.

**Exam Review Policy**
*(Passed in March 2012 at Undergraduate Curriculum Committee, effective AY12-13)*

In years 1 and 2 students receive a mastery report following each Block examination. The individualized report provides performance data for the entire block and individual theme content. The report also provides performance data for specific disciplines and content topics. Students are encouraged to contact theme leaders and instructors for individual guidance in areas of deficiency after review of the mastery report. Exam questions from Block Exams are not released for student review.

*Print This Page*
The following technical standards are a prerequisite for admission to, progress within, and graduation from the MUSC College of Medicine (COM):

- Intellectual capacity
- Physical ability
- Emotional stability
- Interpersonal sensitivity
- Communication skills

Students must meet minimal technical standards for COM admission, progress during the period of studies, and for graduation, with or without reasonable accommodations.

Difficulty meeting academic standards, professionalism standards, or both is suggestive of deficiency in one or more of the required technical standards. Deficiency in one or more technical standard may also be due to the presence of a specific educational, mental health, or medical diagnosis. Deficiency in one or more technical standard is not assumed to represent a permanent circumstance.

All students experiencing difficulties related to academic standards, professionalism standards, or both are encouraged to meet with either the Associate or Assistant Dean for Student Affairs as early as possible prior to an academic failure or professionalism sanction. The goal of meeting with a Student Affairs Dean is to assist the student in developing an informal (voluntary) remediation plan to support adequate academic and professional performance.

All students experiencing difficulties related to academic standards, professionalism standards, or any other interfering issues (e.g., medical issues, psychological issues, other issues of a personal nature) will be referred to the Counseling and Psychological Services Center (CAPS) and the Center for Academic Excellence (CAE) for further evaluation and recommendation of appropriate professional services based upon these evaluations.

This initial contact with Student Affairs, CAPS, and CAE is considered to be voluntary and private. In addition, any recommendations made by the Associate or Assistant Deans for Student Affairs, CAPS, or CAE professionals are considered advisory (following recommendations is voluntary). Further, communication
between Student Affairs, CAPS, and CAE professionals will be based upon explicit permission (written informed consent) being granted by the student for this communication to occur.

■ Any interruption of studies for 3 months or longer, will require an official leave of absence. Any time a leave of absence from studies is taken, a Fitness for Duty (FFD) evaluation and review must occur.

■ A Fitness for Duty (FFD) evaluation can also be required at other times on the recommendation of either the Associate or Assistant Dean for Student Affairs based on reasonable concern that a student is impaired in terms of one or more of the technical standards required for admission, progress, and graduation from the MUSC COM.

■ FFD evaluations are conducted by qualified professionals trained to address educational, medical, and psychological issues of potential relevance to student academic and professional performance. Content specific FFD evaluations will occur in the following areas: educational issues (CAE); psychological issues (CAPS); and medical issues (Student Health Services). Students may request permission to have all or part of their FFD evaluation completed by qualified professionals outside of the MUSC system. Alternate professional choices must be approved in advance by the Associate or Assistant Dean for Student Affairs. The student is responsible for the cost of FFD evaluations completed outside of the MUSC system. FFD evaluations completed within the MUSC system (CAE, CAPS, Student Health Services) will not require a charge beyond previously paid student fees.

■ All completed FFD evaluations will be reviewed by the COM Progress Committee for a determination to be made regarding the existence of any deficient technical standards. Decisions regarding deficient technical standards are administrative findings and express the considered opinion of the Progress Committee that specific barriers to adequate academic or professional performance exist. Deficiency in one or more technical standard is required as a basis to grant a leave of absence.

■ The FFD evaluation and review is a two-part process with part one occurring at the time a leave is granted and part two occurring no later than 30 days prior to requested resumption of studies.

■ The FFD evaluation and review provides a formal assessment of technical competencies (intellectual capacity, physical ability, emotional stability, interpersonal sensitivity, and communication skills). When leave is granted, the student will be notified by the chairperson of the Progress Committee of noted technical standard deficiencies and will require the student to meet with the Associate or Assistant Dean for Student Affairs to develop a specific remedial plan.

■ Exit remedial plans must be finalized within 30 days of the start date for the granted leave of absence. The final remedial plan must be reviewed and approved by the Associate Dean for Student Affairs as well as the chairperson of the Progress Committee. Students are required to adhere to the terms of the remediation plan.

■ Re-entrance FFD evaluation and review must occur no later than 30 days prior to the planned resumption of academic studies. The Progress Committee may make several decisions with regard to re-entrance FFD reviews:

  • Re-entrance approved (with or without conditions)
• Leave of absence continued (with conditions)

• Dismissal

Recommendation for re-entrance approval will be based on the judgment that:

• The student adhered to their remediation plan

• The student currently meets required technical standards (with or without conditions)

Recommendation for re-entrance denial (either continuation of leave or dismissal) will be based on the judgment that:

• The student did not adhere to one or more aspect of their remediation plan

• The student does not meet one or more technical standard

The Progress Committee has the authority to grant the conditional resumption of COM studies with specific additional requirements (e.g., tutoring, psychological counseling, etc.) targeted at assisting a student in achieving and/or maintaining the technical standards required for admission to, progress within, and graduation from the MUSC COM. The student may be placed on academic and/or professional probation.

COM FFD evaluation and review policy is designed to support and assist students in achieving their academic and professional potential. The policy is intended to promote growth and development, not to punish students.
Grading and Assessment Policy- Clinical Years

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I. Policy Statement

This policy provides information to students, faculty, and course directors regarding criteria for failure and honors in clinical courses as well as procedures for remediation following a failure.

II. Scope

Students enrolled in clinical courses of the College of Medicine’s MD Degree Program.

III. Approval Authority
IV. Purpose of This Policy

This policy outlines the following for students, faculty, and course directors:

- Grading and assessment criteria for both failure and honors in clinical courses of both the third and fourth year of the MD Degree program.
- Procedures for remediation following a failure.
- Conditions under which a student’s remediation will be disclosed on the Medical Student Performance Evaluation (MSPE).
- Program standards for provision of formative feedback, summative feedback, narrative feedback, and grade timeliness in the assessment of medical students.
- Conditions under which a student’s remediation will be disclosed on the Medical Student Performance Evaluation (MSPE).

V. Who Should Be Knowledgeable about This Policy

College of Medicine students

College of Medicine Faculty and Course Directors

College of Medicine Undergraduate Medical Education Deans and Support Staff

VI. The Policy

A. 3rd Year Course Failure

Each 3rd year course sets criteria for failure, pass, and honors for the course prior to the start of each academic year. These criteria will be made available to students at the beginning of each course in written form. All clinical faculty and rotations will assess the clinical performance of students using the standardized COM Clinical Performance Evaluation (CPE).

A student will fail a course if any one of the following conditions is met:

- A Clinical Performance Evaluation noting the following deficiencies regarding a student:
  1. Does Not Meet Expectations for EPA Performance
     - A majority of evaluations have ≥ 2 ratings of “does not meet expectations”
     - ≥ 3 ratings of “does not meet expectations” in a course that issues only one evaluation
  2. Major Concerns noted in Professionalism or Communication
A majority of evaluations note “major concerns”
- At least 1 evaluation notes a major professionalism concern that is deemed egregious

3. Does Not Meet Expectations for **Overall Performance**
- A majority of evaluations have ≥ 2 ratings of “does not meet expectations”

4. At the discretion of the course director, a student may fail the clinical performance evaluation when fewer than the majority of evaluations note **significant** concerns in EPA Performance, Overall Performance and/or Professionalism/Communication and are supported with narrative feedback from evaluator(s).

- A *remediated written exam* grade below the Hofstee cutpoint as determined by the NBME national office for each discipline.
- A failing grade on any secondary component of the grade.
- Additionally, a student is *eligible for failure* at the discretion of the course director for unprofessional behavior. A professionalism form must be completed and submitted to the COM Dean’s office.

**What if a student fails some component of the grade?**

If a student fails the **clinical component** of the grade, the student fails the course.

If a student fails the **written examination**, the student will receive a grade of “Incomplete” (IN) and will have the opportunity to remediate that exam. The student will not be eligible to receive honors for the written exam or for the course as a whole regardless of the score obtained on the remediated exam. A note will be made in the Medical Student Performance Evaluation (MSPE) of the need to remediate the exam. If the written examination is failed a second time, the student fails the course.

If a student fails a **secondary component** of the grade (i.e., OSCE) the student will receive a grade of “Incomplete” (IN) and will have the opportunity to remediate that portion of the grade. The student will not be eligible to receive honors for the secondary component or for the course as a whole regardless of the score obtained on the remediated element. A note will be made in the MSPE of the need to remediate that component. If the secondary component is failed a second time, the student fails the course.

If a student fails either the written exam or another secondary component of the course that requires remediation, the second attempt must occur prior to advancing to fourth year or within 6 months, whichever occurs sooner. If remediation is not achieved in this time frame, the student will fail the course. Exceptions will be considered for extenuating circumstances (ex. the first available time for testing falls in the next academic year or the timing of the failure affects preparation for another major requirement).

If a student fails a course by any of the established criteria, they will be placed on academic probation and must repeat the course. The Medical Student Performance Evaluation (MSPE) will reflect the academic probation and the academic transcript will reflect the failure and repeating of the course. In cases where adverse actions are rendered following the release of the MSPE, the Dean’s Office will amend the MSPE and will notify the student’s program director and provide details regarding the incident that warranted the adverse action.
B. 3rd Year Clerkship Honors

A student in 3rd year will be eligible for clinical honors if they achieve a CPE Overall Performance score of 2.60 or higher (3 out of 5 “exceeds expectations” on average) and have:

- No ratings of “does not meet expectations” on EPA Performance or Overall Performance
- No ratings of “major concerns” for Professionalism or Communication

The criteria for the designation of Clerkship (“overall”) honors will be determined by each clerkship and approved by the appropriate academic committees. Each clerkship will publish honors criteria prior to the start of the academic year and will make this information available to students at the beginning of the clerkship in written form. NOTE: Scores are not rounded for the purpose of determining Honors. Selectives are not eligible for honors.

C. Clinical Competency Exam 3 (CCX3)

The CCX3 is the comprehensive clinical competence exam for the MD degree program. The minimum criteria for passing and honors are established annually by the CCX Committee and the Associate Dean for Curriculum, Clinical Sciences. Students must achieve a passing score in order to receive the MD degree. Students must achieve a passing score on CCX3 prior to taking the USMLE Step 2 Clinical Skills (CS) exam. If a student fails CCX3, a clinical skills mentor will be assigned to the student to assist in addressing areas that contributed to failure on the exam. The student must retake and pass the exam within 6 months. Failure to retake the exam during this time frame will result in a physicianship form. Students who do not pass the exam by the 2nd attempt will be referred to the Progress Committee for review; students who do not pass the exam by the 3rd attempt meet criteria for dismissal. CCX3 performance is reported in the Medical Student Performance Evaluation (MSPE) as competency with honors, competency, or competency with remediation; “remediation pending for the Clinical Competency Exam” is reported if a student has not successfully remediated CCX3 at the time the MSPE is released.

D. 4th Year Course Failure

Each 4th-year course sets criteria for failure, pass, and honors for the course prior to the start of each academic year. These criteria will be made available to students at the beginning of each course in written form. All clinical faculty and rotations will assess the clinical performance of students using the standardized COM Clinical Performance Evaluation (CPE).

A student will fail a course if any one of the following conditions is met:
A Clinical Performance Evaluation noting the following deficiencies regarding a student:

1. Does Not Meet Expectations for EPA Performance
   - A majority of evaluations have ≥ 2 ratings of “does not meet expectations” or ≥ 3 ratings of “building competence”
   - ≥ 2 ratings of “does not meet expectations” or ≥ 4 ratings of “building competence” in a course that issues only one evaluation.

2. Major Concerns noted in Professionalism or Communication
   - A majority of evaluations note “major concerns”
   - At least 1 evaluation notes a major professionalism concern that is deemed egregious

3. Does Not Meet Expectations for Overall Performance
   - A majority of evaluations have ≥ 2 ratings of “does not meet expectations”

4. At the discretion of the course director, a student may fail the clinical performance evaluation when fewer than the majority of evaluations note significant concerns in EPA Performance, Overall Performance and/or Professionalism or Communication and are supported with narrative feedback from evaluator(s).

- A failing grade on any secondary component of the grade.

- Additionally, a student is eligible for failure at the discretion of the course director for unprofessional behavior. A professionalism form must be completed and submitted to the COM Dean's office.

What if a student fails some component of the grade?

If a student fails the clinical component of the grade, the student fails the course and will therefore be placed on academic probation and must repeat the course. If the student fails an Advanced Medicine Elective course, the student must repeat an Advanced Medicine Elective course. If the student fails an externship or elective course, the student must repeat an externship or elective course, respectively, as specified by the Associate Dean for Curriculum, Clinical Sciences.

If a student fails a secondary component of the grade (i.e., OSCE) the student will receive a grade of “Incomplete” (IN) and will have the opportunity to remediate that portion of the grade. The student will not receive honors for the course as a whole regardless of their performance on the remediated portion of the grade. If the secondary component is failed a second time, the student fails the course.

If a student fails a secondary component of the course that requires remediation, the second attempt must occur prior to graduation or within 6 months, whichever occurs sooner. If remediation is not achieved in this time frame, the student will fail the course and will therefore be placed on academic probation and must
repeat the course.

E. 4th Year Course Honors

A student in 4th year will be eligible for clinical honors if they achieve an Overall Performance score of 2.80 or higher (4 out of 5 “exceeds expectations” on average) and have:

- No ratings of “does not meet expectations” on EPA Performance or Overall Performance
- No ratings of “major concerns” for Professionalism or Communication

Note: Scores are not rounded for the purpose of determining Honors.

F. Clinical Course Assessment Standards

1. Provision of Feedback

In accordance with LCME standards, the directors of all courses in our medical education program must design and implement a system of fair and timely formative and summative assessment of medical student achievement in each course.

Midpoint Formative Feedback

Each course lasting 4 weeks or more will offer purposeful opportunities for formative feedback regarding clinical performance and achievement of requirements (i.e., patient diagnosis log) at the mid-point of the rotation. Midpoint feedback should include each of the following elements:

1) An assessment of the student’s performance

2) Confirmation of an adequate learning environment (conducive to learning, demonstrates professionalism, safe.)

3) Confirmation of adherence to education hours policy

4) Review of diagnosis and procedure logs
When midpoint feedback identifies that a student is performing poorly or at risk of failure, the following actions are necessary:

1. The faculty evaluator or course director must inform the student of the deficiencies and instruct the student on how to demonstrate remediation of the deficient skills or behaviors.
2. The course director or coordinator must notify the Associate Dean for Curriculum, Clinical Sciences in the Dean’s Office.

Summative Feedback

Each course will provide students with summative feedback regarding their performance in the course in order to help students identify strengths and weaknesses and improve knowledge, attitudes, and skills as they progress throughout their clinical training. The criteria used to derive the course grade will be made available to students at the beginning of each course in written form. All clinical faculty and rotations will assess the clinical performance of students using the standardized COM Clinical Performance Evaluation (CPE).

Narrative Feedback

Each course must provide students with a narrative summary of their individual performance in the course. This narrative may include both comments intended for formative feedback and comments intended as a summative description. Summative comments from clerkships will be submitted to the COM Dean’s office for inclusion in the Medical Student Performance Evaluation. Evaluations that have insufficient narrative feedback may be returned to the evaluator or course director with a request for additional feedback.

2. Timeliness

To ensure the timeliness with which medical students are informed about their final performance in courses, final grades will be available within 40 calendar days (not business days) of the end of a course or exam.

3. Disclosing Remediation

Any failure of the clinical component of the grade or a secondary component such as the written examination or OSCE must be reported to the COM Dean’s office by the corresponding course. In addition, the failure
and/or remediation of either a written examination or an OSCE must be disclosed in the narrative description of the student’s performance for the clerkship or required rotation. (e.g., “The student passed the examination on the second attempt with a very solid performance.”)

VII. Special situations N/A

VIII. Sanctions for Non-compliance N/A

IX. Related Information

A. References, citations

B. Other

C. Appendices

X. Communication Plan

Students enrolled in clinical courses will be educated about this policy at their orientation to the clinical years as well as any time a substantial update occurs. All faculty are asked to review key policies related to education on an annual basis. Course directors will be notified annually via email to review the policy and more often if substantial changes are adopted.

XI. Definitions

For the purpose of our CPE, “majority” is defined as over half of the evaluations. For example, if there are 3 total evaluations, a student would fail if 2 or more of those evaluations met criteria for failure.

Summative Feedback: feedback derived from assessments used to evaluate knowledge and skill acquisition at the conclusion of an instructional period, typically high stakes.

Formative Feedback: feedback provided with the intention of helping students identify strengths and areas where continued improvement is necessary.
XVI. Review Cycle

Policy will be reviewed at least every 2 years.

XVI. Approval History

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XVII. Approval Signature
I. Policy Statement

This policy outlines the responsibility and expectations for medical student supervising and teaching during clinical education activities.

II. Scope

This policy applies to students enrolled in the College of Medicine MD Degree program.

III. Approval Authority
The final governing committee which is responsible for approving the policy is the Undergraduate Curriculum Committee. The Clinical Sciences Planning and Evaluation Committee will periodically review the policy for updates.

IV. Purpose of This Policy

Medical students are learners and are not licensed to provide patient care. At all times the supervising attending physician retains medical and legal responsibility for the patient’s care and is ultimately responsible for the evaluation and management of the patient. While some of the day-to-day supervision of medical students may be delegated to house staff, the supervising attending physician retains full responsibility for the supervision of the medical students assigned to the clinical rotation.

While engaged in clinical rotations or clinical activities associated with prescribed course work, medical students should be incorporated into and accepted as an integral part of the team, permitted to participate in team care of the patient, and expected to demonstrate individual ownership of patient care responsibilities.

V. Who Should Be Knowledgeable about This Policy

College of Medicine Students

College of Medicine Residents, Staff, and Faculty

VI. The Policy

To facilitate the education of medical students, supervising attending physicians and/or resident physicians should do the following:

· Provide opportunities for students to demonstrate responsibility and ownership for patient care responsibilities:

  o Take patient histories, perform complete and/or focused physical examinations and enter findings in the medical record of the patient with the approval of the patient’s supervising attending physician and under the supervision of the attending physician or designated house staff. Students may write the patient’s H&P or daily note, enter orders, and coordinate care in a fashion commensurate with their training level. The findings entered in the medical record of the patient by the student may be utilized by licensed physicians with proper editing and attestation but cannot be used in lieu of any required medical staff and/or house staff
documentation. Students must clearly sign all entries in the medical record, along with the designation that they are medical students. Student notes do not require signature by the supervising attending physician or designated house staff unless they are used for billing.

- Be encouraged to write their own admission orders for education purposes even if the orders will not be entered as the official patient documentation.

- Be assigned and directed to provide additional patient care services under the direct in-person supervision of the attending physician or designated house staff. In addition, specific approved procedures identified in course curricula may be performed by students under the appropriate level of supervision by the attending physician or authorized house staff. Documentation of supervision is required. In all such patient care contacts, the patient shall be made aware that the individual providing the care and/or performing the procedure is a student.

- Be encouraged to review focused topics related to patients on the service and report information back to the team to demonstrate self-directed, clinical learning and application of knowledge to the care of patients.

- Provide students with regular feedback, both positive and constructive. The clerkship or course director should be notified immediately if serious academic or professional gaps in student performance exist. Students should also be encouraged to perform self-assessment and report to the attending physician and resident identified areas for improvement along with a plan for improvement. Students should be encouraged to contact the attending and/or the clerkship or course director with problems or concerns in clinical, administrative, professional or educational matters. Students may also directly contact the Associate Dean for Curriculum-Clinical Sciences.

- Set a model example of professionalism and collegiality, and demonstrate the attributes becoming of a professional (altruistic, dutiful, knowledgeable, and skillful) and those prescribed in the MUSC Code of Conduct (integrity, trustworthiness, respect, etc.) Individual courses/course directors will provide specific guidance to students to explain the student’s level of responsibility and the scope of approved activities and procedures expected or permitted on rotation. This information will be shared with all teaching faculty, residents and staff annually.

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**VII. Special situations**

NA

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**VIII. Sanctions for Non-compliance**
Any violations of this policy will trigger investigation and possible elimination of clinical sites or instructors that do not ensure appropriate levels of supervision and teaching for medical students.

IX. Related Information

NA

X. Communication Plan

Medical students, faculty, fellows, and residents are notified of this policy through required annual online modules.

XI. Definitions

NA

XII. Review Cycle

Reviewed every 2 years.

XIII. Approval History

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### XIV. Approval Signature

August 17, 2018

Donna Kern, MD

Senior Associate Dean for Medical Education, College of Medicine
Library Room Usage Policy

Subject: Use of Small Group Rooms (101, 106, 108, 110 and 120) in the Colbert Education Center and Library Building

Purpose: In response to recent conflicts among students related to the use of the small group study rooms on the first floor of the Colbert Education Center and Library (ECL), the following policy is established. These guidelines are seen as a temporary measure until the SGA has the opportunity to formulate a process governing student use of the ECL facility, to include development of a mechanism whereby students may reserve the small group study rooms on-line.

Policy:

1. Students using the ECL facility are required to interact with others in a manner that demonstrates adherence to the highest standards of professionalism, collegiality and fairness.
2. As these are designated as group study rooms, (#s 101, 106, 108, 110 and 120) they are restricted to use by two or more students. Students studying alone should find more suitable space within the ECL.
3. Students may not leave personal belongings in the small classrooms overnight or for longer than one hour unattended. Kitchen appliances (coffee makers, heating coils, etc.) may not be used. Students are expressly forbidden from sleeping in the rooms overnight.
4. It is recommended that students limit their use of a room to eight hours per day. As part of professional conduct, please recognize that the use of these rooms is a privilege designed to benefit all students. Please use common sense in ensuring that the use of these rooms is distributed equitably.
5. Violations to this policy will be reported to the students’ deans and sanctions may be applied.
Needlestick Policy

Needlestick / Blood Contamination Protocol

See http://academicdepartments.musc.edu/esl/studenthealth/blood-borne.html

1. Treatment of Exposure
   The site should be decontaminated as soon as safety permits. Open wounds should be washed first with soap and water, then irrigated with sterile saline if available. Splashes to eyes and mucous membranes should be flushed extensively with water 5-10 minutes. There is no evidence that use of antiseptics, caustic agents (bleach) or expressing blood from the wound reduces the risk of infection. The inflammation they cause may potentially facilitate entry of the virus.

2. Report the Exposure
   Students need to report the exposure immediately to their supervisor, and not wait until the end of a procedure. The most knowledgeable person is the charge nurse of that location (OR, ward, clinic). Then call to report:

   At MUSC:
   - Mon-Fri. days-call student health @ 2-3664
   - After hours-call MUSC page operator @ 2-2123 for Blood Bourne Pathogen Exposures to students.

   They should see to it that (1) Student Health is notified and (2) Blood is collected on the source patient and sent to the lab for testing. When the infectious status of the source blood is unknown, rapid HIV testing will be performed, and the results paged to Student Health within one hour. If no one seems to know what to do at your location, call Student Health (792-3664) during the day, or after hours have the MUSC operator (792-2123) page the physician covering Blood Borne Pathogen Exposures for students.
At other Clinical Sites: When a student is exposed while at an off-campus site, the exposure should be reported immediately to their supervisor, to the doctor or head nurse in an office or clinical setting or if in a hospital, to the charge nurse in an OR, ward or clinic. They should see to it that their policy on exposures is followed. The student should call Student Health (792-3664) during the day, or after hours have the MUSC operator (792-2123) page the physician covering Blood Borne Pathogen Exposures for students.

3. **Risk Assessment**
   After reporting the exposure to the appropriate person, students should immediately report to or, if away from Campus, call Student Health during normal clinic hours (8:00 am – 4:30 pm) on weekdays. After hours, the physician on call for students will be paged by the House Service Coordinator, head nurse or supervisor, or by the student. The physician on call for the students will talk with the student to assess the nature and risk of the exposure, and follow up on the lab results of the source patient.

4. **Counseling**
   Once the nature and risk of the exposure has been assessed, the student will be counseled on their risk of infection, and when appropriate, offer antiviral prophylaxis and/or baseline laboratory testing. Post Exposure Prophylaxis (PEP) with antiviral drugs should be initiated ideally within one hour when the source is a know HIV (+) or when the Rapid HIV test is (+). The risks and benefits of this therapy will be discussed with the student.

5. **Follow Up**
   After this initial assessment, students are to follow up 2-3 days later to receive the results of the remainder of the source’s lab (hepatitis B antigen, hepatitis C Ab, HIV ELISA) and any baseline lab testing done on the student. Any additional questions or follow up can be addressed at this time.
A medical school has primary responsibility for ensuring an environment that nurtures the professional development of future physicians and for effectively assessing the professionalism competency of the learners. In addition to acquiring foundational scientific knowledge, students must attain competency in professionalism. The College of Medicine Institutional Learning Objectives (ILOs) clearly define these expectations for the MD degree program. Effort is made to foster students’ professional growth and development throughout their enrollment. The college maintains a process for identifying and addressing unprofessional behavior.

### 2. Scope
3. Approval Authority

College of Medicine EDAS Council

4. Purpose of This Policy

This policy describes the professionalism competencies in the MD degree program, and establishes the procedures for reporting, tracking and addressing unprofessional behavior.

5. Who Should Be Knowledgeable about This Policy

College of Medicine Students

College of Medicine Teaching Faculty and Administrators

6. The Policy

College of Medicine Competencies and Institutional Learning Objectives (ILOs) for Professionalism and Personal and Professional Development

Professionalism: Students must demonstrate a commitment to professional and personal excellence in all settings, including adherence to ethical principles and sensitivity to a diverse patient population.

PR 1 Demonstrate honesty, integrity, respect, and compassion in all interactions with patients, peers, faculty, staff, and other health care professionals in all settings.

PR 2 Demonstrate ethical, patient–centered decision–making, informed consent, and respect for autonomy and confidentiality of patient information in all settings (i.e., clinical, academic, electronic or web–based.)

PR 3 Demonstrate sensitivity and responsiveness to the personhood of the patient inclusive of culture, race, ethnicity, spirituality, gender, sexual orientation, age, physical characteristics,
medical condition, disabilities, socioeconomic status, family–context and other aspects of personal and health beliefs, practices and decisions.

PR 4 Demonstrate accountability for academic, patient care and professional responsibilities including concern for societal needs.

PR 5 Demonstrate responsiveness to patient needs that supersedes self–interest.

**Personal and Professional Development:** Students must demonstrate the qualities required to sustain lifelong personal and professional growth.

PD 1 Acknowledge personal limitations and mistakes openly and honestly, seek and respond to feedback in a positive way, and demonstrate flexibility and maturity in adjusting one's behavior.

PD 2 Demonstrate strategies for analyzing, identifying and improving personal deficiencies in knowledge and skills by setting learning and improvement goals.

PD 3 Demonstrate a commitment to personal health and well–being, and recognize and address personal attributes, attitudes, and behaviors that may adversely influence one’s effectiveness as a physician.

PD 4 Define professional impairment and describe the role and responsibility of health care professionals in addressing impairment and unprofessional behavior in colleagues and in the profession.

PD 5 Use self–awareness and assessment data of one's knowledge, skills and attributes to identify appropriate career options.

PD 6 Recognize that ambiguity is part of clinical health care and respond by utilizing appropriate resources in dealing with uncertainty.

**Students’ Professional Behavior**

As professionalism is fundamental to the practice of medicine, medical students are expected to demonstrate exceptional professionalism and exhibit the highest standards of moral and ethical behavior at all times, in all settings and in all interactions.

**Examples of Concerns**

The following examples illustrate, but are not limited to, these types of unprofessional behavior that should be documented and reported:

- Disrespectful or inappropriate verbal or written communication.
- Disrespectful behavior toward students, faculty, staff, or patients.
- Absent without approval, misses deadlines, or is late for mandatory activities, for clinical duties, or submitting assignments.
- Falsifying medical documentation.
- Inappropriate use of cell phone and/or social media.
- Does not function adequately as a part of the health care team or as a part of their small group.
- Insensitive to the needs, feelings, and wishes of others.
- Defensive in the face of constructive criticism or resists making changes in their professional behavior.
- Engages in inappropriate relationships with patients, teachers, residents, or faculty, thereby disrupting the learning environment.
- Engages in disruptive behavior in the learning environment.
- Illegal behavior including, but not limited to, violation of patient confidentiality laws.

**Procedure for the Documentation, Tracking, and Reporting of Unprofessional Conduct**

To foster students’ professional growth and encourage high standards of professional behavior among students, the College of Medicine has adopted a feedback system to inform a student when his or her behavior has been deemed unprofessional. An incident that raises significant concerns about a medical student’s behavior should be documented using the Physicianship Evaluation Form, E*Value Concern Card, or an E*Value Learning Environment Card. An email notification may be submitted to the Associate Deans for Student Affairs as well. Any of these methods are appropriate to document unprofessional conduct.

E*Value Concern Card and an E*Value Learning Environment Card may be submitted anonymously by College of Medicine faculty, residents, staff, or students.

The **Physicianship Evaluation Form** is intended to provide students and faculty a formal opportunity to discuss perceived transgressions of professional behavior on the part of the student. Physicianship forms may be generated by administrators, faculty, residents, or staff. The form is not intended to be punitive, but rather to encourage self-assessment and improvement where needed to ensure positive professional growth.

*Preclinical Studies Physicianship Form*  
*Clinical Studies Physicianship Form*

The Associate Deans for Student Affairs monitor the system, review all submissions, and take appropriate steps to address any concerns. Any submission that documents unprofessional conduct indicates that a student may need assistance and mentoring in developing their skills as a medical professional. It is expected that the reporting system will be used in good faith and will not be utilized to resolve personal disputes.

**Tracking and Reporting**

- In cases of professionalism infractions, a physicianship form, an E*Value Concern Card, an E*Value Learning Environment Card, or an email notification will be issued to the Office of Student Affairs with a summary of the incident(s). The student will be notified when a report of unprofessional conduct is filed; the student may be required to meet with the Associate Dean for Student Affairs.
- Failure to respond to and meet with the Office of Student Affairs in a timely manner constitutes an additional professionalism infraction.
- If a student receives three physicianship forms, and/or an E*Value Concern cards, and/or an E*Value Learning Environment Card, or note(s) of concern, the student will be referred to the Progress Committee.
If an incident is determined to be egregious, the Office of Student Affairs should be informed immediately; at which point an Associate Dean for Student Affairs will meet with the student and/or conduct a review of the incident. The severity of the infraction will be determined by the Associate Dean and may result in immediate referral to the Progress Committee.

See COM Progress, Promotion, and Probation Policy for additional information about the progress committee review process.

**Referral for Unprofessional Behavior**

When a pattern of concern about a student’s professional behavior is determined, either documented by the Physicianship Evaluation Form or through other communication to the Dean’s Office, the student will be referred to the Progress Committee (*See the Student Progress, Promotion, Probation Policy*). If the unprofessional behavior constitutes a breach of the MUSC Honor Code, the issue will be referred to the MUSC/COM Honor Council (*See MUSC Honor Code*). Some breaches of professionalism can result in separate referral to these entities for separate concerns.

### 7. Special situations  
N/A

### 8. Sanctions for Non-compliance

As detailed in the policy, failure to meet the College of Medicine Professionalism standards can result in adverse actions and dismissal from the degree program.

### 9. Related Information

#### A. Reference, citations

COM Student Progress, Promotion, Probation Policy

MUSC Honor Code
B. Other

Enrolled students should contact the College of Medicine Associate Deans for Student Affairs for specific questions related to this policy.

C. Appendices

10. Communication Plan

The College of Medicine will publish the revised policy online in the College of Medicine education policies which is linked to the university bulletin. The policy is also included an online module that students are required to read and attest to each year.

11. Definitions

12. Review Cycle

Every two years at a minimum.

13. Approval History

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14. Approval Signature

Donna Kern, MD

July 25, 2018
Date

Senior Associate Dean for Medical Education, College of Medicine
Title

Donna Kern, MD

July 25, 2018
Date

Senior Associate Dean for Medical Education, College of Medicine
Title
Radiation Safety Policy

Radiation Safety Policy for Medical Students

All medical students (MUSC and visiting students) must comply with the Radiation Safety Film Badge Usage and Return Policy included in the Medical University Radiation Safety Policy Manual.

The purpose of this Policy is to reinforce the mandate that all medical students entering areas subject to ionizing radiation will have radiation dosimetry badges properly affixed or not be able to enter those areas. This Policy is consistent with the MUSC Medical Center mandate titled “Wearing of Dosimetry Badges (C-174A).” Failure to comply with the mandate will result in corrective measures up to and including dismissal for habitual offenders or those unwilling to comply. Compliance is seen as a safety and professionalism issue. Before entering clinical rotations, students are required to receive radiation safety training.

It is the responsibility of any student working outside of the curriculum (e.g. research project, summer or volunteer experience) to ensure appropriate education and compliance with the above policy.

Print This Page
A. Medical students entering areas subject to ionizing radiation will have affixed radiation badges or will not be able to enter those clinical areas. This includes any clinical site (MUSC, affiliated site, or on an away rotation). Students entering clinical sites will all receive full education on radiation safety through CATTS training and complete necessary consent and paperwork.

B. The radiation safety badges will be dispersed prior to the start of a rotation at the request of the rotation coordinator or director. The badges will be dispersed by the Dean’s Office. Failure to return the badges will result in a replacement fee (students will sign an acknowledgement of this when signing them out).

C. The clinical manager of each clinical area which requires badges will conduct routine observations to ensure badges are worn as required.

D. Operators of radiation generating machines or room supervisors are accountable for ensuring that all medical students who enter areas exposed to ionizing radiation have dosimetry badges properly affixed. A time-out will be conducted by the operator or room supervisor to verify that all individuals in the area are wearing badges and other safety devices.

E. The operator or room supervisor must direct anyone not wearing a badge to immediately leave the area and not return until a badge is properly placed.

F. Operators, managers, or room supervisors are required to report violations to the MUSC Radiation Safety Officer (RSO). The RSO will notify the College of Medicine of violations. These student violations will be tracked by the Dean’s Office.

G. If the offender is an MUSC student, he/she will be reported to the College of Medicine Dean’s Office. A physicianship form will be completed as this is seen as a professionalism violation. In addition, the student will be required to meet with the RSO and complete the CATTS module on radiation safety again.
H. If the offender is a visiting student, he/she will be reported to his/her place of higher education for corrective action. In addition, the student will be required to meet with the RSO and complete the CATTs module on radiation safety again.

I. The College of Medicine will track individual and aggregate data on compliance and report unsafe exposures. This information will be reviewed on an annual basis by the Education, Diversity, Admissions, and Student Affairs (EDAS) group.

J. The Radiation Safety Officer will monitor the overall exposure and notify the College of Medicine Dean’s Office of any unsafe exposures (for any of the medical students) in a timely manner.
The Medical Student Performance Evaluation (MSPE) is a comprehensive assessment of performance of medical students and is considered an official document. To ensure confidentiality and integrity in the transmission, the College of Medicine Dean’s Office will not release MSPE(s) to students or graduates. The MSPE letter will be released on behalf of the student to appropriate individual(s) or organizations. All persons must submit a written request for his/her MSPE letter to be released. The request may be sent via email or fax with the following information:

- Name (include full name, with any previous names used while enrolled.)
- Graduation Year
- Mailing Address(es) of Fellowship/Residency Program
- Email address of the person who is to receive the letter

Requests will be expedited within 2 weeks after request is received. Specific handling instructions must be included in the initial request. For example, if a student is applying to fellowship programs through ERAS, they may need to have their AAMC ID number placed on the document. All requests will be processed in the order received.
## Severe Weather

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<td>Responsible Entity</td>
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<td>Policy Owner</td>
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### I. Policy Statement

This policy outlines procedures in the case of a severe weather event.

### II. Scope

This applies to College of Medicine students.

### III. Approval Authority
The Preclerkship Planning and Evaluation Committee for the Preclerkship phase and Clinical Science Planning and Evaluation Committee for the clinical phase will oversee periodic updates to this policy. The Undergraduate Curriculum Committee has full and final authority for policy approval.

IV. Purpose of This Policy

To provide guidance on attendance during and following a severe weather event.

V. Who Should Be Knowledgeable about This Policy

COM students, residents, fellows, faculty, course directors, course coordinators

VI. The Policy

Once the Provost has cancelled classes due to severe weather, ALL students must leave campus. This includes students in clinical rotations, laboratories and classes.

Although announcements will be made, students can call 792-6872 (MUSC Info line) whenever additional information regarding class cancellations is required.

If evacuating, Preclerkship students should take study materials and electronic devices necessary to access online resources that may be provided to substitute for lectures or other activities. Students should also remember to take necessary clinical items such as stethoscope and white coat when evacuating. All returns will follow official University notice to resume classes.

VII. Special situations

Cancellation of activities due to severe weather may require adjustment in scheduling following evacuation. Preclerkship scheduling changes will be made to ensure that all curricular learning objectives are satisfied through appropriate class lectures and other activities which may, if necessary, include weekends or previously designated breaks. Clinical clerkship study days may be utilized to complete required clinical experiences as the day(s) off can be used for studying.
Students who are on away rotations should follow the guidance provided by their host institution.

AnMed clinical students will follow guidance of their Campus Dean and Student Affairs.

**VIII. Sanctions for Non-compliance**

**IX. Related Information**

A. References, citations

   COM handbook
   http://academicdepartments.musc.edu/com/hndbk/policies/weather.htm

B. Other

C. Appendices

**X. Communication Plan**

Students enrolled in COM will be educated about this policy at their orientation to the Preclerkship and Clinical Phases and at additional information sessions following any substantial update of the policy. All faculty are asked to review key policies related to education on an annual basis. Course directors will be notified annually via email to review the policy and more often if substantial changes are adopted.

**XI. Definitions**

**XII. Review Cycle**
Every 2 years.

XIII. Approval History

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XIV. Approval Signature

Donna Kern, MD

Senior Associate Dean for Medical Education, College of Medicine
The College of Medicine and the Office of Enrollment Management of MUSC make every effort to ensure that all information remains confidential in accordance with the Family Educational Rights and Privacy Act. Documentation contained in a student record is confidential, with transfer of such information within the school permissible only for legitimate academic purposes. The Office of Enrollment Management is responsible for maintenance of all official academic records of students.

The policy regarding creation and maintenance of student academic records is based upon practices recommended by the American Association of American Collegiate Registrar's and Admissions Officers. The College of Medicine maintains a separate file on each student during their enrollment. The student file may contain, but is not limited to the AMCAS application, admission documentation, letters of correspondence concerning the student, narrative summaries rendered by the faculty concerning the student's academic work, letters indicating actions of the Progress Committee, and other correspondence relating to the student's education at MUSC.

A student, by means of verbal or written request to the Associate/Assistant Dean for Student Affairs in College of Medicine Dean’s Office, may examine his or her student academic records. These records shall be made available for review by the student as promptly as possible, but no longer than one week following a request. The academic records shall be examined, under observation of College of Medicine Dean’s Office designated personnel, and shall not be altered, destroyed, or removed from the office.

Any review of information in the file by the faculty members and administrative officers, other than by those persons responsible for keeping the academic records, senior associate dean for medical education, or associate/assistant deans for student affairs, requires the dated signature of the faculty member or administrative official on a form kept within the records and the reason for review.

The student will be notified of the transfer of any information within the student file to persons or institutions other than those associated with or affiliated with the College of Medicine. Such information may be transferred only:

- By reason of a valid subpoena or judicial order of a court;
- To federal or state educational agencies, providing the agency requests the information in writing and specifies the purpose for acquiring the information;
· To organizations responsible for the accreditation of MUSC College of Medicine;

· Upon written request of the student to persons he or she designates (e.g., educational institutions, hospitals, and licensing boards, etc.)

· Letters of evaluation (or transcripts) of medical students, based upon information in the student file, will be prepared by the senior associate dean for medical education or the associate/assistant dean for student affairs upon the receipt of a written request from the student identifying the persons, institutions, hospitals, or licensing boards to which the letters (or transcripts) are to be sent.

The academic records of students shall be kept under the name used for admission to the MUSC College of Medicine, unless the student properly files a change-of-name form with supporting legal documentation with the Office of Enrollment Management.

Name changes are not processed in the student information system once a student has officially graduated from the college. All requests for replacement/duplicate diplomas should be directed to the Office of Enrollment Management.
Within the College of Medicine (COM) Student Handbook, a range of College specific policies and procedures are listed. COM students may review their Student Handbook for information on issues ranging from “A” (absence policies) through “V” (Visiting Medical Student Policy). COM specific complaint procedures exist for key areas and include:

- Education (Duty) Hours
- Grade Grievance Policy
- Honor Code
- Learning Environment and Medical Student Mistreatment Policy
- Professionalism
- Standards of Conduct
- Student Input/Feedback About the Curriculum

COM students are encouraged to contact their Office of Student Affairs for assistance in finding, understanding, and following COM policies and procedures concerning student complaints.

Some COM student complaints may pertain to university-wide services such as student programs, counseling and psychological services (CAPS), student health, educational technology, wellness center, enrollment management, library services, student accounting, etc. Issues concerning university-wide services are to be directed to the Associate Provost for Educational Affairs and Student Life. COM students with complaints regarding university-wide services are welcome to contact their Office of Student Affairs for support and guidance in finding, understanding, and following the specific procedure concerning university-wide complaints.

The following procedure applies to student complaints related to the College of Medicine for which there is not an existing policy.

For additional information regarding specific MUSC policies and types of complaints, including Gender Equity, ADA, FERPA, Standards of Conduct for Treatment of Students, etc., visit the MUSC Student Complaint Procedures website.
Complainants’ Rights

1. A complaint will be treated with appropriate confidentiality and in a timely manner.

2. A complainant has the right to withdraw the complaint in writing at any point in the process.

3. A complainant may file a written complaint without fear of retaliation. If the complaint is filed without basis or with the intent to harm a member of the MUSC community, disciplinary action may be taken.

4. The procedure will be applied consistently to students across colleges/units, including distance-learning students.

Student Complaint Resolution Process

The College of Medicine complaint resolution includes the following three stages:

- Stage 1: Informal Complaint Resolution
- Stage 2: Formal Complaint Resolution
- Stage 3: Resolution Appeal

Stage 1: Informal Complaint Resolution

1. The student is encouraged to address his/her concerns at the earliest possible time and on an informal basis.

Stage 2: Formal Complaint Resolution

1. The complainant completes the MUSC Complaint Form according to the instructions on the form and submits the form to the Assistant Dean for Student Affairs.

2. The Assistant Dean for Student Affairs forwards the complaint to the EDAS Council (consisting of Assistant and Associate Deans for Education, Diversity, Admissions, and Student Affairs).

3. The EDAS Council reviews the complaint and gathers additional information as needed. The Council makes a decision and communicates their recommendation, in writing, to the Associate Dean for Student Affairs. The Associate Dean for Student Affairs communicates the final decision, in writing, to the student.
Stage 3: Appeal

1. If the complainant is dissatisfied with the decision, he/she may appeal the decision to the Dean. The Dean reviews the committee’s decision, gathers additional information as needed, and communicates, in writing, his/her decision to the student. The decision of the Dean is final.

2. If the complaint believes that due process was not followed, he/she has the option of submitting a written appeal to the Provost. In the written appeal, the student must identify how due process was not followed. The complainant must provide the college with a copy of the written appeal to the Provost. The Provost’s finding will be communicated in writing to the student and to the Dean.

Notification of Student Complaint Procedures

1. The College of Medicine Complaint Procedure is well-publicized on the COM website and in *The Bulletin*.

2. There are additional internal and external offices, organizations, and accrediting bodies to which students may submit a complaint. For additional information, refer to the MUSC Student Complaint Procedure website [http://academicdepartments.musc.edu/esl/bulletin/bulletin_policies/scc/](http://academicdepartments.musc.edu/esl/bulletin/bulletin_policies/scc/) or contact the Associate Provost for Educational Affairs.

3. A single complaint can be filed with only one unit/college/service (i.e., a student cannot file the same complaint with the COM and University-services).

4. Before filing a complaint at the state or accrediting agency level, the class complainant is generally expected to exhaust all internal complaint avenues.

Documentation

1. The Assistant Dean for Student Affairs will maintain a log of complaints (Appendix B) which will be submitted annually and reviewed with the Educational Advisory Committee.

2. Documentation related to the complaint is maintained for 10 years in accordance with South Carolina Retention Schedule.

Contact information for the Assistant Dean for Student Affairs

**MUSC College of Medicine Dean's Office**

Myra Haney Singleton, M.Ed.

Assistant Dean for Student Affairs

College of Medicine Dean’s Office
Medical University of South Carolina
96 Jonathan Lucas St.-Suite 601
Charleston, SC 29425
843-792 1184-office
843-792-4262-fax

Helpful websites:

**Student Complaint Procedures**
http://academicdepartments.musc.edu/esl/bulletin/bulletin_policies/scc/

**Complaint Procedure for University-wide Services Provided to Students**
(http://academicdepartments.musc.edu/esl/academics/complaint_resolution/)

**Other concerns (existing policies/procedures)**
http://academicdepartments.musc.edu/esl/bulletin/bulletin_policies/scc/otherconcerns.htm

**Formal Complaint Form**
http://academicdepartments.musc.edu/esl/academics/complaint_resolution/complaint_form_fill.pdf
The College of Medicine is committed to ensuring a safe learning environment that promotes maximal student development. In order for students to reach their full potential our students must be able to learn in a healthy and safe community. The College of Medicine recognizes that students may have pre-existing medical issues (including psychiatric), or develop such issues in their course of study at MUSC, that could threaten their own well being and the well being of others, as well as impair their ability to perform at the high level necessary to be a medical student or, eventually, a physician.

The College of Medicine Dean’s Office supports health and recovery. Students are encouraged to pay attention to necessary self care activities such as sleep, eating and exercise. Preventative self care activities can go a long way to ensuring wellness. When problems do develop, we may encourage students to use several on campus resources to address medical issues such as Student Health or the Counseling and Psychological Services Center. They are free to use outside providers as well. The COM Dean’s Office is always available to work with a student in a confidential manner to ensure they are aware of the services that can help them get or remain well. Seeking help voluntarily in these circumstances is strongly encouraged. In fact, being a good physician involves seeking appropriate help when needed.

When illness or significant personal hardship prevents a student from meeting the requirements of his or her course of study, it is the policy of the College of Medicine to assist the student. In some cases this may mean entering into a voluntary leave of absence (LOA) from the College of Medicine for the purpose of focusing on those matters requiring attention. In circumstances where a student poses a threat to self or others or significantly disrupts the educational life of the community, the College of Medicine may impose an involuntary leave of absence. Prior to re-matriculation, the College of Medicine Dean’s Office will work with the student to establish readiness to resume academic work and to provide support where possible in order to optimize the likelihood of a successful return to University life.
The College of Medicine may place a student on involuntary leave of absence or require conditions for continued attendance when, as a result of an apparent medical or psychological condition, if one of the following transpires:

a. The student threatens the safety of him/herself or others.
b. The student causes or threatens to cause significant property damage.
c. The student significantly disrupts the educational or extracurricular activities of the University community.
d. The student demonstrates evidence of significant impairment and is unable to make an independent determination that a voluntary leave is needed.
e. The student has returned from voluntary leave, demonstrates continued evidence of significant impairment, and has not complied with the treatment plan submitted at the time of readmission.
f. The student acts unprofessional or has significant academic problems (such as failing courses or clerkships) secondary to the illness demonstrating its interference with the student’s ability to function as a medical student.

When a student exhibits any of the behaviors described above, he or she will be contacted by the College of Medicine Dean’s Office. The Senior Associate Dean for Medical Education, the Associate Dean for Students, or Progress Committee in consultation with appropriate medical, psychological, or academic resources, may place a student on involuntary leave of absence or place conditions on the student’s continued enrollment.

Students seeking readmission to the College of Medicine following involuntary leave must follow the same procedure as delineated for students returning following voluntary leave. If a student is placed on involuntary leave, the Dean’s Office designee in consultation with appropriate campus resources will make a determination regarding the length of the leave and describe the conditions under which the student may seek to return from leave. A hold will be placed on the student’s registration by the Dean’s Office until the student has been granted readmission.

Under certain circumstances involving the safety of the student or the University community, the Dean’s Office will mandate that the student undergo a psychological or medical assessment with open lines of communication to allow a determination of readiness to return.

In some cases, medical issues (not limited to but including psychiatric conditions) may so adversely affect the student that severe academic or professionalism problems develop. The student will first meet with either the Associate Dean of Students, Senior Associate Dean of Medical Education or designee. This meeting will occur in conjunction with the Director of Academics & Student Support. In order to protect the student, community, and patients students may additionally be placed on a required behavioral monitoring contract in addition to a leave of absence as described above. In some cases these problems are not severe or easily remediable. In others (possibly due to the nature of the illness), the situation may be
The Behavioral Monitoring plans may include but are not limited to:

1) Mandated treatment at Counseling and Psychological Services or outside provider
2) Required random drug and alcohol screening
3) Other required treatments as stipulated by clinicians caring for the student
4) Fitness for duty forensic evaluation
5) Open communication with providers to the extent an appropriate decision for readiness or not to return to school can be determined (Efforts will be made to minimize knowledge of confidential matters not related to the above)

All records concerning involuntary leaves of absence and behavioral monitoring contracts will be kept in the Dean’s Office and considered confidential. The student’s record will indicate “Leave of Absence” (LOA).

Several considerations will determine whether the student will be fit to return to school. These considerations could include but are not limited to: reports from treating physicians, interviews with Dean’s Office staff, and a fitness for duty evaluation. Often open lines of communication with all parties help make that determination. While all attempts will be made to ensure a student’s return to school if possible, the Dean’s Office also recognizes that even under the best circumstances some students may not become well enough to safely and professionally continue in medical school and thus may be dismissed.

For additional issues specifically related to substance use, abuse, or dependence please the College of Medicine Substance Abuse Policy.

The College of Medicine respects the right to confidentiality of recovering students and will assist them to continue their education and employment. However, MUSC also respects the rights of patients and others and seeks to protect them from the harm that impaired students may cause. Hence, impaired (medical, psychiatric, or substance dependent) students who fail to cooperate with appropriate treatment programs or are too ill to continue on in their studies are subject to disciplinary actions up to and including dismissal as deemed appropriate by the Dean of the College of Medicine with input from the Progress Committee and/or the Associate Dean for Students.
College of Medicine Student Laptop Use Policy

It is the student’s responsibility to maintain their laptop in good working order for use during instructional activities and exams. Any damage and associated repairs, loss, or operating problems that may occur will be the sole responsibility of the student. Students must have their laptop repaired as needed at their own expense, or secure another unit that meets minimum hardware and software requirements. Please see the College of Medicine Laptop standards for more information.

Students should purchase laptops only from reputable vendors with good warranty programs and a proven record of quality service. We recommend that students strongly consider purchasing extended warranty and service plans.

Laptops are required for exams and must be in good working order to take the exam.

There are a limited number of backup computers that are available for major computer malfunctions/emergency situations on the day of the exam; these computers are available only in extreme circumstances. **There is no guarantee that a student who forgets their laptop on the day of the exam will be provided with a backup computer; therefore a student who reports to the exam without their laptop may not be able to take the exam.**

Students who repeatedly (2 or more times) forget their laptops or have non-functioning laptops will be referred to the professionalism committee.

*Updated June 18, 2014*
The College of Medicine has a single standard for promotion and graduation of all
students enrolled in the MD degree program. The College of Medicine Progress Committee reviews the academic and professional progress of all medical students as defined by this progress policy, the Professionalism Standards Policy, and the Technical Standards for Admission, Retention and Graduation.

II. Scope

This policy applies to all College of Medicine students in the MD Degree Program.

III. Approval Authority

The College of Medicine EDAS (Education, Diversity, Admissions and Student Affairs) Council is responsible for approving the policy.

IV. Purpose of This Policy

Students must meet the qualitative and quantitative standards defined below to qualify for Satisfactory Academic Progress (SAP). The policy outlines these standards, the role of the Progress Committee in reviewing progress, and the conditions that constitute the following: unsatisfactory academic progress, academic probation, professionalism probation, and dismissal. The policy also outlines the Student Appeal Process and elements of due process.

V. Who Should Be Knowledgeable about This Policy

College of Medicine Students in the MD Program

College of Medicine Progress Committee and Progress Appeals Committee

Teaching Faculty and Administrators in the College of Medicine

VI. The Policy
Qualitative Progress Standards

Preclerkship Phase Year 1 FLEX curriculum students must successfully complete the following:

- Pass all Curriculum Blocks
- Pass the longitudinal Clinical Skills Course each semester
- Complete all Academic and Professional Responsibilities
- Pass United States Medical Licensing Examination (USMLE) Step 1

Preclerkship Phase Year 2 Integrated Curriculum (2018-2019) students must successfully complete the following (unchanged from previous Progress Policy):

- Pass all Curricular Themes
- Complete all Academic and Professional Responsibilities
- Pass United States Medical Licensing Examination (USMLE) Step 1

Clinical Phase - Year 3 - 4 students must successfully complete the following:

- Pass all clinical rotations and courses, including clerkship OSCEs and knowledge-based exams (i.e., National Board of Medical Education (NBME) subject exams).
- Complete all Academic and Professional Responsibilities
- Pass the Clinical Competency Exam 3 (CCX3)
- Pass USMLE Step 2CK and USMLE Step 2CS

Quantitative Progress Standards

- The maximum period for the completion of the MD degree is 6 years from matriculation.
- The maximum period for completion of the Preclerkship phase is 3 years from matriculation, inclusive of taking and passing USMLE Step 1.
- The maximum time frame for completion of the Clinical Phase is 3 years inclusive of taking and passing USMLE Step 2CK and Step 2CS.
- If a student in good academic standing is approved by the College of Medicine Associate Deans for Student Affairs to take a leave of absence for personal and/or medical reasons, up to a maximum of one year of leave time is not counted in the 6-year timeframe.

Good Academic Standing for each student is confirmed by the College of Medicine
Dean's Office. Students are not in good academic standing if they have any of the following: failing averages in preclerkship block grades (year 1) or theme averages (year 2), clinical skills course, incomplete or failing grades in clinical rotations, clinical knowledge-based exams or clinical skills exams, a designation of academic or professionalism probation. Students who are not in good standing may be restricted from privileges available to students who are in good standing.

**Progress Committee Review**

At the end of each academic semester, the progress committee approves for continuation all students in good academic and professional standing. In cases where an adverse action may be recommended, the student is invited to meet with the Progress Committee to discuss the circumstances that warranted concern.

**Specific Circumstances That Warrant a Review by the Progress Committee**

**FLEX Curriculum (Year 1)**

- A student who fails a block or blocks must pass an Assurance of Competency Exam (ACE) before the beginning of the next semester. If the student passes the ACE, then he/she may be required to meet with the Associate Dean for Student Affairs to develop an **academic monitoring contract**. If the student fails the ACE, the student is eligible for dismissal and will be referred to the Progress Committee.
- If the student does not pass the Clinical Skills Course the student is eligible for dismissal and will be referred to the Progress Committee.
- If the student exhibits a pattern of unprofessional behavior or an egregious example of unprofessional behavior, the student will be referred to the Progress Committee.

**Integrated Curriculum (Year 2)**  
*The following progress policy is unchanged from the previous Progress Policy for Year 2 students.*

- A student who fails a theme or themes in the fall semester must remediate (if eligible) before the beginning of the spring semester. If a student fails a theme or themes in the spring semester, the student must remediate (if eligible) and complete all elements of the CCX2 and Board Preparation Course before taking USMLE Step 1.
- If the student successfully remediates the themes or themes, then he/she must
meet with the Associate or Assistant Dean for Student Affairs and is required to develop an academic enhancement plan.

- If the student is ineligible for remediation or the remediation is unsuccessful, the student is eligible for dismissal and will be referred to the Progress Committee.

United States Medical Licensing Examinations (USMLE)

Students must adhere to the USMLE regulations regarding the maximum number of attempts within one year (see www.usmle.org). Students are expected to review the Federation of State Medical Boards State – Specific Requirements for Initial Medical Licensure to understand the implications of failed board examination attempts (http://www.fsmb.org/licensure/usmle-step-3/state_specific).

USMLE, Step 1

A student must pass all preclerkship blocks and complete all elements of the CCX2 and Board Preparation Course before taking Step 1 of the USMLE.

All preclerkship students must sit for the USMLE Step 1 before beginning clinical rotations.

If a student does not pass Step 1 on the first attempt:

- The student may choose to complete the rotation in progress, and will receive credit for the course if all required elements of the course are successfully completed.
- The student may not begin any additional third year rotations until Step 1 is passed. The student will be registered for an Independent Study Course during this time.
- The student is required to meet with the Associate or Assistant Dean for Student Affairs and is required to create an academic monitoring contract.
- The student must complete a second attempt for Step 1 within 6 months of the first attempt. Failure to do so will result in review by the Progress Committee.

If the student does not pass USMLE Step 1 on the second attempt:

- The student will be placed on academic probation and will remain on academic probation until a passing score is achieved.
- The student will be registered for the Independent Study Course.
- Once a passing score is received, the student will be eligible to begin scheduled rotations.
Students who do not pass USMLE Step 1 by the third attempt and within 3 years from matriculation meet criteria for dismissal and will be referred to the Progress Committee.

Clinical Years

A student who receives a grade of No Pass (NP) or Incomplete (IN) for a clinical course will be required to meet with the College of Medicine Associate Dean for Student Affairs and develop an academic monitoring contract. A student who receives a grade of No Pass (NP) will be required to repeat the clinical course and will be placed on academic probation. Probationary status is removed once the failed clinical course is successfully repeated.

Should a student receive a second Incomplete (IN) before clearing the first, the student must immediately withdraw from the current clinical rotation and satisfactorily remove both IN grades before progressing. A student who receives a second grade of No Pass (NP) in the clinical phase meets criteria for dismissal and will be referred to the Progress Committee. Year 3 students must remediate all year 3 course work prior to starting year 4 coursework.

Clinical Competency Exam in Year 3 (CCX3)

The CCX3 is the comprehensive clinical competence exam for the MD degree program. Students must achieve a passing score in order to receive the MD degree. Students must achieve a passing score on CCX3 prior to taking the USMLE Step 2 Clinical Skills (CS) exam. If a student fails the CCX3, a clinical skills mentor will be assigned to the student to assist in addressing areas that contributed to failure on the exam. The student must retake and pass the exam within 6 months. Failure to retake the exam during this time frame will result in a physicianship form. Students who do not pass the exam by the 2nd attempt will be referred to the Progress Committee for review; students who do not pass the exam by the 3rd attempt meet criteria for dismissal.

USMLE, Step 2 CK (Clinical Knowledge)
Successful completion of USMLE Step 1 is required before a student can take Step 2 CK. Students must take USMLE Step 2 CK prior to November 1 of the fourth year. Failure to take the exam by the deadline will result in notification of the Progress Committee. A passing score for Step 2CK is required for graduation; a student will not receive the MD degree until the exam has been passed. If a student matches to a residency position but will not have verification of passing Step 2CK in order to start residency by July 1, the College of Medicine Dean’s Office must notify the residency program of the circumstances.

If a student does not pass Step 2CK on first attempt:

- The student is required to meet with the Associate Dean for Student Affairs and develop an academic monitoring contract.
- The student must complete a second attempt for Step 2CK within 6 months of the first attempt. Failure to do so will result in review by the Progress Committee.

If a student does not pass Step 2CK on the second attempt, the student will be placed on academic probation and will remain on academic probation until a passing score is received. If a student does not pass Step 2CK on third attempt, the student meets criteria for dismissal and will be referred to the Progress Committee. The maximum time frame for completion of the Clinical Phase is 3 years inclusive of passing USMLE Step 2CK.

USMLE, Step 2CS (Clinical Skills)

Students must pass or successfully remediate the CCX3 prior to taking the USMLE Step 2 Clinical Skills (CS) exam.

Students must take USMLE Step 2CS prior to November 1 of the fourth year. Failure to take the exam by the deadline will result in notification of the Progress Committee. A passing score on Step 2CS is required for graduation; the student will not receive the MD degree until the exam has been passed. If a student matches to a residency position but will not have verification of passing Step 2CS in order to start residency by July 1, the College of Medicine Dean’s Office must notify the residency program of the circumstances.

If a student does not pass Step 2CS on first attempt:

- The student is required to meet with the Associate Dean for Student Affairs and develop an academic plan.
- The student must complete a second attempt for Step 2CS within 6 months of the first attempt. Failure to do so will result in review by the Progress Committee.
If a student does not pass Step 2CS on the second attempt, the student will be placed on academic probation. If a student does not pass Step 2CS on the third attempt, the student meets criteria for dismissal and will be referred to the Progress Committee. The maximum time frame for completion of the Clinical Phase is 3 years inclusive of passing USMLE Step 2CS.

If a student fails both the USMLE Step 2CK and Step 2CS on the first attempt, the student is referred to the Progress Committee for review and determination of suitability for continuing in the program.

Extended Academic Study and Leave

Students who wish to request additional time to complete degree requirements are referred to the Extended Academic Study Policy. The College of Medicine Dean’s office considers multiple variables in the approval process. If approved, a formal agreement for extended academic study will be clearly outlined. At the end of each semester, students who do not complete the requirements of the agreement for an extended study meet criteria for dismissal and will be referred to the Progress Committee.

Academic Monitoring Contract

An academic monitoring contract is designed for students who demonstrate significant academic difficulty. A student will be required to meet with an Associate/Assistant Dean for Student Affairs to develop a plan for improvement; the Progress Committee may also include specific requirements in the contract. While engaged in an academic monitoring contract, students may be required to limit co-curricular/extra-curricular roles and commitments until demonstrating improvement. Full, robust compliance with the terms of the contract is expected; failure to meet the contract requirements will be considered by the Progress Committee in determination of adverse actions.

Probation

Academic Probation

A student will be placed on academic probation when the Progress Committee identifies significant academic problems or failure to progress in a timely
fashion. Conditions for probation include but are not limited to the following:

- Preclerkship curriculum students who are approved to repeat a semester will be placed on probation until they successfully complete the repeated semester.
- Failing grade for a clerkship or any other clinical course.
- Failure to pass USMLE Step 1, Step 2CK, Step2 CS on the second attempt.
- Failure to pass CCX3 on the third attempt.

The student will be informed of the probationary status in writing. If demonstrable improvement does not occur during the academic probation period, the student meets criteria for dismissal. In the preclerkship phase, probationary status is removed after the student has demonstrated passing academic performance. In the clinical years, probationary status is removed once the failed clinical course is successfully repeated or the failed examination is passed.

Each student on academic probation is required to meet with the Associate Dean for Student Affairs to develop an Academic Monitoring Contract. Full, robust compliance with the terms of the contract is mandatory for continuation in medical school. Failure to adhere to the contract meets criteria for dismissal from medical school.

**Professionalism Probation**

A student will be placed on professionalism probation by the Progress Committee if the student demonstrates a pattern of unprofessional behavior or one particularly egregious example of unprofessional behavior. The student will be informed in writing of the probationary status. Each student on professionalism probation is required to meet with the Associate Dean for Student Affairs to develop a Behavioral Monitoring Contract. Full, robust compliance with the terms of the contract is mandatory for continuation in medical school. Failure to adhere to the contract meets criteria for dismissal from medical school.

**Academic Probation and Professionalism Probation**

While on probation, a student must attend all required classes and activities unless the absence is approved in advance by the course instructor or the Dean’s Office, or the absence is due to a bona fide emergency. A physician must document the student’s absence from a major exam in the event of illness. Students on probation will not be permitted to complete rotations at other institutions during 4th year; students on probation will not be permitted to hold an elected office in student organizations nor represent the college at meetings. The student may not participate in activities that would entail absences from required courses.
Student Appeal Process

In cases where the Progress Committee delivers an adverse action (e.g., academic or professionalism probation, dismissal), the student has the right to appeal this decision. Student appeals are heard by the separate Progress Appeals Committee. To avoid a potential conflict of interest, none of the members from the Progress Committee may serve on the Progress Appeals Committee.

All appeals to the Progress Appeals Committee must be requested in writing to the Office of Student Affairs no later than 7 calendar days following receipt of notice of the initial recommendation of the adverse action.

While the student is offered the opportunity to appeal all recommended adverse actions, the student can also choose at any point to waive their right to appeal. In addition, all appeals are completed in a timely manner with a goal of no longer than 30 days from the initial letter of intent to appeal until the completion of all appeal procedures. Unsuccessful appeals before the Progress Appeals Committee may be appealed directly to the Dean. Appeals to the Dean must be requested in writing no later than 7 calendar days following receipt of notice of the decision of the Progress Appeals Committee. All decisions rendered by the Dean are considered final.

Due Process

Confidentiality is an essential element of due process; Progress Committee members and Progress Appeals Committee members sign confidentiality statements and are reminded at meetings that the committee discussions are confidential.

The student will be informed in writing of the reason for the request to appear before the Progress Committee for academic or professionalism issues. Notification will occur within three weeks of the reporting date and at least two working days before the issue is presented to the Progress Committee. The student will have prior access to and notice of the report of unprofessional behavior and/or academic concerns to be presented to committee.

The student has the option of being excused from any assignments or examinations for a period of up to 24 hours prior to the progress committee meeting. Students should direct all questions about process to Student Affairs in the COM Dean’s Office.

The student may appeal the decision of the Progress Committee before a Progress
Appeals Committee and subsequently before the Dean of the College of Medicine (see Student Appeal Process).

During the committee review, it is the sole responsibility of the student to interact with the committee. Each student has the right to be accompanied by one support person (e.g. faculty member, family member). The support person is not permitted to represent the student. The support person may not address the committee or pose questions. The support person may actively support and advise the student, but shall have no interaction with members of the committee.

Reasonable efforts will be made to select a date that permits the student and support person to attend the meeting of the Progress Committee and the Progress Appeals Committee. A student may decline to meet with the committee. If a student does not respond to requests to appear before the committee, a certified letter will be sent to the student to ensure that notification was received. After certified notification, failure of the student to be present in the committee meeting will not delay the meeting and the committee may proceed with the review of the case and judgement including potentially adverse actions. Absence of the support person will not delay the committee meeting.

At the discretion of the Dean or her/his designee, the student may be removed from classes and clinical work during a Progress Committee review if there is a clear concern for a negative impact on patient care or the learning environment. The Dean or her/his designee may also grant permission to continue classes and clinical work after a final decision has been reached if notified in writing that the case is being appealed. Under no circumstances may a student graduate until the case and all appeals have been resolved.

The student has the right to expedient resolution of the matter, and every effort should be made to resolve the review in a timely manner. However, due to the nature of MUSC’s environment and faculty member’s patient care responsibilities, unavoidable delays may occur in scheduling committee meetings. Such delays do not take precedence over the process itself and are not grounds for dismissal of concerns.

In the event a student should withdraw from school after a report is made but before the Progress Committee meets to review the issue, the concern will be permanently noted in the student’s file in pending review status. Should a student reapply to any College of Medicine program, the issue must be resolved prior to approval for readmission.
Adverse Actions and the Medical Student Performance Evaluation (MSPE)

If the College of Medicine Progress Committee renders an adverse action (e.g. academic probation, professionalism probation), the Medical Student Performance Evaluation (MSPE) must disclose adverse action(s). The MSPE must also include documentation of approved leaves of absence for personal, medical, academic, or administrative reasons. In cases where adverse actions are rendered following the release of the MSPE, the Dean’s Office will amend the MSPE and will re-upload within the ERAS system. In cases where adverse actions are rendered following a residency position match, the Dean’s office will notify the student’s program director and provide details regarding the incident that warranted the adverse action.

Confirmation of Graduates

The Progress Committee approves students to receive the MD degree and submits this approval to the Dean of the College of Medicine. Near the completion of their studies, students are reviewed by the Progress Committee. The Progress Committee awards the MD degree to students who have completed the degree requirements and who are judged by the Progress Committee to have demonstrated evidence of academic and professionalism competency fit for a career in medicine. Students must resolve all academic deficiencies and professionalism infractions in order to be awarded the MD degree.

Dual Degree Students

In the event that the student is enrolled in a dual degree program (i.e., MSTP), the progress and professionalism of the student will be reviewed by the MSTP Progress Committee comprised of faculty members from the College of Medicine and the College of Graduate Studies.

VII. Special situations

N/A

VIII. Sanctions for Non-compliance

The policy addresses sanctions in detail.
IX. Related Information

See the College of Medicine policies related to progress and professionalism.
http://academicdepartments.musc.edu/com/hndbk/policies/

Professionalism Standards Policy

Technical Standards for Admission, Retention and Graduation
Grading and Assessment Policy- Clinical Years
Grading and Assessment Policy – Preclerkship Curriculum
Graduation Requirements Policy
Extended Academic Study Policy

X. Communication Plan

The policy is communicated to the College of Medicine students in the orientation to incoming students. It is also included in the COM policy module that all students and teaching faculty must review annually. When the language of the policy is revised, an email update is sent to faculty and to students. The primary website for the College of Medicine has a policy page for education policies related to the MD degree program and links to this policy are be provided. The university bulletin contains this policy and is available on the university website.

XI. Definitions  N/A

XII. Review Cycle

This policy is reviewed by EDAS Council every three years at a minimum with input from the Progress Committee and the Undergraduate Curriculum Committee. Policy
changes are made effective on July 1 of the academic year.

XIII. Approval History

<table>
<thead>
<tr>
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<th>Date Approved</th>
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<td>November 20, 2015</td>
</tr>
<tr>
<td>EDAS Council</td>
<td>June 20, 2018</td>
</tr>
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XIV. Approval Signature

Date: June 20, 2018

Donna Kern, MD (signature)

Senior Associate Dean for Medical Education, College of Medicine

Title
College of Medicine Student Religious Observance Policy

The Medical University of South Carolina does not discriminate on the basis of race, color, national origin, religion or sex. MUSC adheres to all state and federal laws pertaining to religious discrimination and accommodation.

The College of Medicine will support religious accommodations if they do not impose an undue hardship on the educational process, its patients, the institution, or other individuals. The College of Medicine recognizes that students come from many religious faiths and practices. The observance of religious holidays and practices is important and should be accommodated whenever possible. However, first priority is always given to education, patient care and religious leave/observances cannot be guaranteed.

For those individuals who observe religious practices that, at times, may conflict with mandatory learning experiences, it is imperative patient care not be compromised. For a planned excused absence for religious observances, the student is required to notify the Assistant/Associate Dean for Student Affairs and the Clinical Rotation Coordinator at least one month prior to the absence.

Planned excused absences are not permitted during orientation activities or pre-clinical or clinical examinations. Exceptions may be made for extenuating circumstances and will be reviewed by the Office of Student Affairs.
Technical Standards for Admission, Retention and Graduation

1. Policy Statement

Applicants to the College of Medicine at the Medical University of South Carolina are selected for admission based on their academic, personal, and extracurricular attributes. Applicants must also have the intellectual, physical and emotional capabilities to meet the requirements of the curriculum and of a successful medical career. Final acceptance and matriculation into the College of Medicine is contingent upon the applicant’s ability to satisfy the Technical Standards with or without accommodations.

2. Scope

Applicants to the MD Degree program; College of Medicine students, teaching faculty and administrators.
3. Approval Authority

College of Medicine EDAS Council

4. Purpose of This Policy

This policy describes the technical standards in detail and explains the rationale for a minimum standards requirement for students seeking the MD degree. The policy clearly states that final acceptance and matriculation into the College of Medicine is contingent upon the applicant’s ability to satisfy the technical standards with or without reasonable accommodations.

5. Who Should Be Knowledgeable about This Policy

College of Medicine Students and Applicants
College of Medicine Teaching Faculty and Administrators

6. The Policy

The curriculum of the MD degree program has been designed to provide a general professional education leading to the MD degree and to prepare students to enter graduate medical training in a wide variety of medical specialties and subspecialties. All candidates for admission to the program, and all students enrolled in the program, should possess sufficient intellectual capacity, physical ability, emotional stability, interpersonal sensitivity, and communication skills to acquire and apply the scientific knowledge, interpersonal and technical competencies, professional attitudes, and clinical abilities required to pursue any pathway to graduate medical education and to enter into the independent practice of medicine. All candidates should also be aware that the academic and clinical responsibilities of medical students require their presence at variable times during day and evening hours, any day of the week.

The MUSC College of Medicine will consider for admission and/or continuation any applicant who meets its academic and nonacademic criteria and who demonstrates the ability to perform skills and meet the standards listed in this document, with or without reasonable accommodations, consistent with the Americans with Disabilities Act and Section 504 of the Rehabilitation Act. The MUSC College of Medicine believes that all applicants must possess the intellectual, physical and emotional capabilities necessary to undertake the
curriculum, in its entirety, in a reasonably independent manner without having to rely on the assistance of others or intermediaries, and that all applicants must be able to achieve the levels of competence required by the faculty. All applicants for admission, both those with and without disabilities, are expected to be competitive with others in the applicant pool in academic, personal and extracurricular attributes. The institutional policy is to make admissions decisions on the basis of each applicant's qualifications to contribute to the MUSC College of Medicine’s educational mission. For purposes of this document and unless otherwise defined, the term “candidate” means applicants for admission to medical school as well as enrolled medical students who are candidates for promotion and graduation.

All candidates for admission must fulfill the minimum requirements for admission and all candidates for the MD degree must complete the required courses and clerkships as indicated in the College of Medicine Bulletin. Attendance is considered an essential part of the curriculum and, where applicable, is required.

The following technical standards specify the attributes considered essential for completing medical school training and for enabling each graduate to enter residency and clinical practice. These standards, along with the academic standards established by the faculty, describe the essential functions that applicants must consistently demonstrate to meet the requirements of a general medical education, and are pre-requisites for entrance, continuation, promotion, and graduation.

All candidates for admission and all candidates for the MD degree should possess abilities and skills in the five functional areas described below, and must have the physical and emotional stamina and capacity to function in a competent manner, and consistent with these standards, in the classroom, clinical and laboratory settings, including settings that may involve heavy workloads, long hours and stressful situations:

1. Observation: A candidate must be able to obtain a medical history and perform physical and mental examinations with a wide variety of patients. Candidates must be able to observe patients accurately, both close at hand and at distance. Observation requires the functional use of the sense of vision, hearing, and other sensory modalities. A candidate must be able to conduct tests and perform laboratory work, observe demonstrations, collect data, and participate in basic sciences, including, but not limited to physiologic and pharmacologic demonstrations in humans, microbiologic cultures and microscopic studies of microorganisms and tissues in normal and pathologic states. Candidates should be able to learn and perform basic laboratory studies and read electrocardiograms and radiologic images.

2. Communication: A candidate must be able to establish appropriate relationships with a wide range of faculty members, professional colleagues, and patients. Candidates should possess the personal qualities of integrity, empathy, concern for the welfare of others, interest and motivation. Candidates should also possess the ability to work as an effective member of a health care team. A candidate must be able to speak, to hear, to read, to write, and to observe patients in order to elicit information, to describe changes in mood, activity,
posture and behavior, and to perceive nonverbal communications. Candidates should be able to communicate effectively and efficiently in the English language in oral and written form with all members of the health care team.

3. Motor: A candidate must be mobile with or without assistive devices within the clinical environment. Candidates must have sufficient exteroceptive sense (touch, pain, and temperature), proprioceptive sense (position, pressure, movement, stereognosis, and vibratory), and motor function to carry out the requirements of the physical examination. Candidates should have sufficient motor function to elicit information from patients by palpation, auscultation, percussion and other diagnostic operations. Candidates should be able to use effectively, in a coordinated manner, those standard instruments necessary for a physical examination (e.g., stethoscope, otoscope, sphygmomanometer, ophthalmoscope, and reflex hammer). Candidates should be able to execute motor movements required to provide general and emergency treatment to patients, including cardiopulmonary resuscitation, the administration of intravenous medication, the application of pressure to stop bleeding, the opening of obstructed airways, the suturing of simple wounds, and the performance of simple obstetrical maneuvers; such actions require coordination of both fine and gross muscular movements, equilibrium, and functional use of the senses of touch and vision. Candidates should be able to perform a complete physical exam of patients, including a genitourinary exam.

4. Intellectual: Conceptual, Integrative and Quantitative Abilities: Candidates should be able to ultimately make logical diagnostic and therapeutic judgments. A candidate must have the ability to make measurements, calculate and reason; analyze, integrate and synthesize data; and to problem-solve. Candidates should be able to comprehend three-dimensional relationships and to understand the spatial relationships of structures. Candidates should be able to integrate rapidly, consistently, and accurately all data received by whatever sense(s) employed.

5. Behavior and Social Attributes: Candidates must possess the emotional health required for the full use of their intellectual abilities; the exercise of good judgment; the prompt completion of all responsibilities associated with the diagnosis and care of patients; and the development of mature, sensitive, and effective relationships with patients, patients’ families, and professional colleagues. A candidate must have the ability to tolerate physically taxing workloads and to function effectively under stress. Candidates must be able to adapt to changing environments, be flexible, and to function in the face of ambiguities inherent in the clinical situation. Candidates must demonstrate their willingness to care for a diverse patient population with a wide range of backgrounds and characteristics.

In addition to the abilities and skills set forth above, candidates must possess the general physical health necessary for performing the duties of a medical student and physician in training without endangering the lives of patients and/or colleagues with whom the student might have contact. Candidates whose performance is impaired by use of alcohol or other substances are not suitable candidates for admission, continuation, promotion or graduation.

Technological compensation can be made in certain of these areas, but a candidate should be able to perform in a reasonably independent manner. The use of a trained intermediary, a person trained to perform
essential skills on behalf of the candidate, or a person used such that a candidate’s judgment must be mediated by someone else’s power of selection and observation, is not permitted.

**Process for Assessing Compliance with the Technical Standards Prior to Matriculation**

Applicants are required to attest at the time they accept an offer to matriculate that they meet the Medical University of South Carolina College of Medicine’s Technical Standards, and thereafter must attest on an annual basis that they continue to meet the Standards. These Standards are not intended to deter any student who might be able to complete the requirements of the curriculum with reasonable accommodations. Applicants with a disability who wish to request reasonable accommodations must submit their request to the University ADA Coordinator who will consult with College of Medicine Technical Standards Committee. For additional information about the College of Medicine’s process for assessing an applicant’s compliance with the Technical Standards, the University’s 504/ADA Coordinator should be contacted.

___ I have read and understand the Technical Standards for Admission, Retention, and Graduation and am able to meet all requirements.

____________________________  ______________________________
Signature     Date

___ ___ I have read and understand the Technical Standards for Admission, Retention, and Graduation and am not able to meet all requirements without accommodations. I understand that I must contact the University’s 504/ADA Coordinator to review the process for requesting accommodations prior to July 1st before the start of the next academic year to request accommodations. MUSC Disability–Related Accommodation Policy: [http://academicdepartments.musc.edu/vpfa/dei/ada/index.htm](http://academicdepartments.musc.edu/vpfa/dei/ada/index.htm)

____________________________  ______________________________
Signature     Date

**Procedure for Assessing an Applicant’s Compliance with Technical Standards**
1. All applicants will be evaluated using the same standards and criteria of the admissions policy of the College of Medicine. Final acceptance and matriculation into the College of Medicine is contingent upon the applicant’s ability to satisfy the Technical Standards with or without accommodations.

2. Before matriculation, applicants are required to state whether they believe that they can meet or cannot meet the Technical Standards.

3. In the case of a matriculant who requests accommodations, the University ADA Coordinator will consult with the College of Medicine Technical Standards Committee and the Associate Dean of Student Affairs, to assess the applicant’s ability to meet the technical standards with reasonable accommodations.

4. The committee may seek input from specific teaching faculty and course directors regarding an accommodation and the impact of the accommodations on educational assessments and outcomes, and demonstration of student’s ability to meet the education standards.

5. The committee in collaboration with the University’s 504/ADA Coordinator may communicate with the appropriate course directors, facilities managers, etc., concerning the feasibility of any needed accommodation. The committee will review the information received from all parties to determine if the request for accommodations or modifications is reasonable.

6. If the committee determines that an applicant does not or cannot meet the technical standards, with or without reasonable accommodations, the applicant will not be permitted to matriculate.

Procedure for Assessing a Matriculated Student’s Ability to Continue to Satisfy Technical Standards

1. Medical students in the College of Medicine at MUSC must continue to meet the technical standards throughout their enrollment. A student who develops or manifests an inability to meet the technical standards after matriculation may be identified to the Office of Student Affairs through a variety of sources, e.g., self-reporting, a report of accident or illness, faculty observations, poor academic performance, unprofessional behavior.

2. If accommodations are requested, the matter will be referred to the University’s 504/ADA Coordinator to review the process for determining disability and requesting accommodation. Accommodations requests follow the procedure described in the previous section.

3. If a student can no longer meet the technical standards, with or without reasonable accommodations, the student is eligible for dismissal and is referred to the COM Progress Committee.

Appeals

Appeal of decisions regarding accommodations should be directed to the University’s ADA Coordinator. See the MUSC Disability-Related Accommodation Policy: http://academicdepartments.musc.edu/vpfa/dei/ada/index.htm
Failure to meet the College of Medicine Technical Standards, with or without reasonable accommodations, will result in an applicant being denied admission to the program, and will result in a student’s dismissal from the program.

9. Related Information

A. Reference, citations

MUSC Disability–Related Accommodation Policy:
http://academicdepartments.musc.edu/vpfa/dei/ada/index.htm

B. Other

Enrolled students should contact the College of Medicine Associate Dean for Student Affairs and Student Wellness for specific questions related to the Technical Standards.

C. Appendices

10. Communication Plan
The College of Medicine will publish the revised policy online in the College of Medicine education policies which is linked to the university bulletin. The policy is also included an online module that students are required to read and attest to each year.

11. Definitions

See the MUSC Disability–Related Accommodation Policy for definitions related to disability and accommodations: http://academicdepartments.musc.edu/vpfa/dei/ada/index.htm

12. Review Cycle

Every two years at a minimum.

13. Approval History

<table>
<thead>
<tr>
<th>Approval Authority</th>
<th>Date Approved</th>
</tr>
</thead>
<tbody>
<tr>
<td>EDAS Council</td>
<td>July 25, 2018</td>
</tr>
<tr>
<td>EDAS Council</td>
<td>May 6, 2016</td>
</tr>
<tr>
<td>COM Technical Standards Committee</td>
<td>May 6, 2016</td>
</tr>
</tbody>
</table>

14. Approval Signature

[Signature]
FLEX Grading and Assessment Policy Preclerkship Phase

I. Policy Statement

Student grades are reported to the registrar at the end of each semester. Preclerkship students receive four (4) grades each semester: 3 Block grades and 1 Longitudinal Clinical Skills grade. Grades will be recorded as H, HP, P, or NP. Students receive a formative, longitudinal assessment of acquired skills in the domains of Communication Skills (CS), Professionalism (PR) and Professional Development (PD) at the end of each semester.

II. Scope

Students enrolled in the preclerkship curriculum in the College of Medicine’s MD Degree Program.
Undergraduate Curriculum Committee

IV. Purpose of This Policy

The purpose of the policy is to delineate how grades are determined for preclerkship students.

V. Who Should Be Knowledgeable about This Policy

College of Medicine students
College of Medicine Faculty and Course Directors
College of Medicine Undergraduate Medical Education Deans and Support Staff

The Policy

The Honors/High Pass/Pass/No Pass System: Student grades are reported to the registrar at the end of each semester. Preclerkship students receive a grade for each curriculum block. Grades are recorded as H, HP, P, or NP in the semester in which the block occurs.

Block Grades are awarded based on the following criteria (see Table 1).
<table>
<thead>
<tr>
<th>Grade</th>
<th>Block Assessments, Quizzes and Practical Exams*</th>
<th>Additional Assessment Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Honors</td>
<td>≥ 90%</td>
<td>90% or higher on each of the 4 content themes.</td>
</tr>
<tr>
<td>(H)</td>
<td></td>
<td>Successful completion of all assignments by the deadline.</td>
</tr>
<tr>
<td>High Pass</td>
<td>≥ 85%</td>
<td>85% or higher on each of the 4 content themes.</td>
</tr>
<tr>
<td>(HP)</td>
<td></td>
<td>Successful completion of all assignments by the deadline.</td>
</tr>
<tr>
<td>Pass</td>
<td>≥ 70%</td>
<td>70% or higher on each of the 4 content themes prior to or after successful ACE**.</td>
</tr>
<tr>
<td>(P)</td>
<td></td>
<td>Successful completion of all assignments by the end of the block.</td>
</tr>
<tr>
<td>Incomplete</td>
<td>NA</td>
<td>&lt;70% on one or more content themes within the block.</td>
</tr>
<tr>
<td>(INC)</td>
<td></td>
<td>Failure to successfully complete any assignment by the end of the block.</td>
</tr>
<tr>
<td>No Pass</td>
<td>NA</td>
<td>Failure to successfully establish competency (70%) by ACE in one or more content areas within the block.</td>
</tr>
<tr>
<td>(NP)</td>
<td></td>
<td>Failure to successfully complete any assignment by the end of the ACE period.</td>
</tr>
</tbody>
</table>

* Scores are not rounded for determination of H/HP/P/NP.

** ACE (Assurance of Competency Exam) provides a period of study prior to the start of the next semester. Requires student to score 70% to demonstrate competency in theme-specific content areas within the block for conversion INC to Pass.
**Block Assessments:** Within and at the close of each block, students take fully integrated objective exams. Questions from subject matter of each of the themes are co-mingled and, in some cases, clustered under a single clinical scenario. The interim and end-of-block exams are designed to reflect USMLE Step I exam structure. (Formative self-assessment quizzes are provided during each block. The quizzes allow students to become familiar with the type and format of questions found on the Block Exams.)

Theme-specific content scores are established by combining points earned in block assessments, pre and post activity quizzes, and practical exams within each block. The theme-specific scores are used to demonstrate competency within each theme and to determine block Honors, High Pass, Pass, or need to participate in ACE.

**Demonstration of Competency for each Block through ACE:**

- If the overall average score for any theme-specific content area within the block is <70%, the student will receive **Incomplete (INC)** for that block until resolution through ACE prior to the start of the following semester.

- Students must demonstrate competency in each block by completing **Assurance of Competency Exams (ACE)** in the knowledge portion of the theme-specific content areas in order to pass the block and progress to the next academic semester. Each theme-specific **ACE** examines content from each of the blocks in which the student scored below 70%. In order to pass a block, a student must demonstrate competency by achieving a minimum score of 70% in each required **ACE**. Failure to achieve a minimum score of 70% in each ACE will result in a final Block grade of NP (No Pass) and the student will not progress to the next academic semester.

- Students who are repeating a semester are not eligible for ACE in the semester they are repeating.

**Longitudinal Assessment of Clinical Skills and grade assignment:**

Competency of clinical skills must be demonstrated longitudinally throughout the semester to include the domains of history taking, communication skills with patients, communication and teamwork with peers and healthcare professionals, oral presentations, clinical reasoning, physical examination, physical diagnosis, medical documentation, and professionalism. Not all domains will be assessed each semester. These domains are assessed within the following Fundamentals of Patient Care activities: small group activities, OSCEs, Teaching Rounds, Senior Mentor, Partner Visits and PICO assignments. Students will receive interim narrative feedback throughout the semester and a mid-point. Students who receive a “No Pass” for any domain will receive a grade of No Pass for the Clinical Skills course, with the following exception of first
semester. If a student receives a single No Pass in the Fall I semester in any one of the following domains, History Taking, Physical Exam, or Communication Skills, the student will receive an Incomplete (IN) and must remediate and demonstrate competency within a period of time defined by the course directors. Should the student fail to demonstrate competency by the end of the defined period, the IN will be converted to a No Pass for the course and will be referred to the College of Medicine Progress Committee. A student who receives a No Pass for the course will not progress to the next academic semester.

The Clinical Skills Grade is awarded based on the following criteria (see Table 2 and Table 3).

<table>
<thead>
<tr>
<th>Table 2: Clinical Skills Overall Grade</th>
<th>Necessary Component Grades</th>
</tr>
</thead>
<tbody>
<tr>
<td>Honors (H)</td>
<td>Pass in Evidence Based Practice, Applied Clinical Activities, and Medical Documentation (SG) Domains</td>
</tr>
<tr>
<td></td>
<td>Honors in all other Domains within the semester</td>
</tr>
<tr>
<td>High Pass (HP)</td>
<td>Pass in Evidence Based Practice, Applied Clinical Activities, and Medical Documentation (SG) Domains</td>
</tr>
<tr>
<td></td>
<td>High Pass in all other Domains within the semester</td>
</tr>
<tr>
<td>Pass (P)</td>
<td>Pass in all Domains within the semester</td>
</tr>
<tr>
<td>No Pass (NP)</td>
<td>No Pass for any domain within the semester</td>
</tr>
<tr>
<td>Incomplete (IN) (First semester only)</td>
<td>In the first semester, students receiving a No Pass in History Taking, Physical Exam, or Communication Skills will receive an Incomplete until they remediate and demonstrate competency within a period of time defined by the course directors. Failure to demonstrate competency by the end of the defined period will result in a report of NP for the course and the student will be referred to the COM Progress Committee.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Table 3: Domains*</th>
<th>Assessment setting</th>
<th>NP</th>
<th>P</th>
<th>HP</th>
<th>H</th>
</tr>
</thead>
<tbody>
<tr>
<td>History Taking</td>
<td>Small Group and OSCE</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Patient Communication Skills</td>
<td>Small Group and OSCE</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Team Communication Skills</td>
<td>Small Group</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Physical Exam</td>
<td>OSCE</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Longitudinal Assessment of Professionalism, Professional Development and Communication Skills – a formative assessment.

Students must demonstrate progress in meeting the expected standards for Interpersonal and Communication Skills, Professionalism and Personal and Professional Development as articulated in the ILOs (Institutional Learning Objectives) for each of these learning domains. Student assessment in these domains will occur in theme-specific and integrated learning activities in each block. These assessments along with student reports (Physicianship forms, Concern Cards, Learning Environment cards, Praise Cards and E*value participation) will be used to provide formative feedback at interim periods and at the end of each semester. A final assessment will be available for inclusion in the MSPE. The assessments will be shared with the COM Progress Committee when necessary.

****E*Value Evaluation of the Blocks and Educators: Students will be given the opportunity to evaluate the overall blocks, theme specific content/activities and the teachers within each block using the on-line E*Value system. The Dean’s Office will notify all students via email when these required evaluations become available. E*Value evaluations and comments are anonymous, but the software used in the course and faculty evaluation administration permits us to know which students have completed the evaluations. It is the professional responsibility of all students to complete assigned E*Value Evaluations. Failure to meet this and other professional responsibilities may result in a Physicianship form.
VI. Special situations

N/A

VII. Sanctions for Non-compliance

N/A

VIII. Related Information

N/A

IX. Communication Plan

Students enrolled in FLEX preclerkship courses will be educated about this policy at their orientation to each semester, following the first block exam, and any time a substantial update occurs. All faculty are asked to review key policies related to education on an annual basis. Course directors will be notified annually via email to review the policy and more often if substantial changes are adopted.

X. Definitions

N/A

XI. Review Cycle

Policy will be reviewed at least every 2 years.

XII. Approval History
List original approval date and subsequent review dates

<table>
<thead>
<tr>
<th>Approval Authority</th>
<th>Date Approved</th>
</tr>
</thead>
<tbody>
<tr>
<td>Undergraduate Curriculum Committee</td>
<td>2012</td>
</tr>
<tr>
<td>Joint Planning and Evaluation Committee</td>
<td>June 21, 2017</td>
</tr>
<tr>
<td>Undergraduate Curriculum Committee</td>
<td>June 22, 2017</td>
</tr>
<tr>
<td>Preclerkship Planning and Evaluation Committee</td>
<td>February 28, 2018 and July 18, 2018</td>
</tr>
<tr>
<td>Undergraduate Curriculum Committee</td>
<td>July 20, 2018</td>
</tr>
</tbody>
</table>

XIII. Approval Signature

July 20, 2018
Donna Kern, MD
Senior Associate Dean for Medical Education, College of Medicine
Date
Title
Pre-Clinical Grading Policy

I. Policy Statement

Student grades are reported to the registrar at the end of each semester. Preclinical students receive a semester grade for each of the four themes and the grade will be recorded as H, P, or NP.

II. Scope

Students enrolled in courses of the College of Medicine’s MD Degree Program.

III. Approval Authority
IV. Purpose of This Policy

The purpose of the policy is to delineate how grades are determined for preclinical students.

V. Who Should Be Knowledgeable about This Policy

College of Medicine students
College of Medicine Faculty and Course Directors
College of Medicine Undergraduate Medical Education Deans and Support Staff

VI. The Policy

The Honors/Pass/No Pass System: Student grades are reported to the registrar at the end of each semester. Preclinical students receive a semester grade for each of the four themes and the grade will be recorded as H, P, or NP. Grades are achieved as follows:

<table>
<thead>
<tr>
<th>Grade</th>
<th>% Correct of Scored Block and Practical Exams*</th>
<th>Additional Assessment Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>H</td>
<td>≥ 90%**</td>
<td>Meets the criteria for honors for small group assessments, assignments and clinical skills exams; meets all professional and/or academic responsibilities.</td>
</tr>
<tr>
<td>P</td>
<td>&lt;90 – 70%***</td>
<td>Meets the criteria for passing for small group assessments, assignments and clinical skills exams; meets all professional and/or academic responsibilities.</td>
</tr>
<tr>
<td></td>
<td>&lt;70 – 60 +</td>
<td></td>
</tr>
<tr>
<td>NP</td>
<td>Failure to demonstrate competency by scoring at least 70% on all required Assurance of Competency Exams (ACE)</td>
<td></td>
</tr>
<tr>
<td>----</td>
<td>--------------------------------------------------------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>NP</td>
<td>&lt;60% Ineligible for ACE</td>
<td></td>
</tr>
</tbody>
</table>

Fails to pass small group assessments, assignments or clinical skills exams. Fails to meet professional and/or academic responsibilities (regardless of the objective score on evaluations.)

* Scores are not rounded for determination of H/P/NP.

** Following determination of passing, points earned in other graded theme-specific components are combined with points from block and practical exams to determine the final theme grade (i.e., pass vs. honors).

*** Minimum passing score of 70% must be achieved by points earned in block exams and practical exams.

**Block exams:** At the close of each block, students take a fully integrated objective exam. Questions from subject matter of each of the themes are co-mingled and, in some cases, clustered under a single clinical scenario. The block exam is designed to reflect USMLE Step I exam structure. (Practice quizzes are provided during each block. The quizzes allow students to become familiar with the type and format of questions found on the Block Exam.) Graded responses on the block exam are sorted to provide theme grades which are reported as a raw score and % score. Block exam scores that meet the threshold required to demonstrate competency are combined with scores from additional theme-specific graded activities to provide the final 4 theme scores for the semester.

**Demonstration of Competency**

At the end of each semester students receive a score for each of the longitudinal themes.

- If the overall average score derived from block and/or practical exams for a theme is <60%, the student will not be eligible to demonstrate further competency by Assurance of Competency Exam (ACE), and will receive a final theme grade of NP (No Pass). The student will not progress to the next academic semester.
If the overall average score derived from block and/or practical exams for a theme is <70% but ≥ 60%, the student must demonstrate competency by completing Assurance of Competency Exams (ACE) in the knowledge portion of the theme(s) in order to pass the theme and progress to the next academic semester. Each theme-specific ACE examines content from each of the blocks in which the student scored below 70%. In order to pass a theme, a student must demonstrate competency by achieving a minimum score of 70% in each required ACE. Failure to achieve a minimum score of 70% in each ACE will result in a final theme grade of NP (No Pass) and the student will not progress to the next academic semester.

Competency of clinical skills must be demonstrated longitudinally throughout the semester; failure to attain competency through improvement of skills by the end of the semester will result in failure of the Fundamentals of Care Theme.

**Honors Designation in Blocks:** Students may achieve Honors Designation in each of the twelve preclinical blocks by the following achievement:

- Overall average ≥ 90% on all combined, graded subject matter in the block
- 100% completion of all academic and professional obligations required of the deadline
- 100% completion of theme and faculty evaluation in E*Value.

A record of Block Honor Designations does not appear on the academic transcript, but will be maintained in the Dean’s Office for inclusion in scholarship and/or research applications, consideration of AOA designation or other honors, and for documentation within the Dean’s letter (MSPE) which is an important component of each student’s residency application packet.

**E*Value Evaluation of the Blocks and Themes:** Students will be given the opportunity to evaluate the overall blocks, themes and the teachers within each theme using the on-line E*Value system. The Dean’s Office will notify all students via email when these required evaluations become available. E*Value evaluations and comments are anonymous, but the software used in the course and faculty evaluation administration permits us to know which students have completed the evaluations. Students who do not complete the theme and faculty evaluations cannot be considered for Block Honors Designation.

**VII. Special situations**

N/A

**VIII. Sanctions for Non-compliance**

N/A
IX. Related Information

A. References, citations

B. Other

C. Appendices

X. Communication Plan

Students enrolled in preclinical courses will be educated about this policy at their orientation to each semester, following the first block exam, and any time a substantial update occurs. All faculty are asked to review key policies related to education on an annual basis. Course directors will be notified annually via email to review the policy and more often if substantial changes are adopted.

XI. Definitions

N/A

XII. Review Cycle

Policy will be reviewed at least every 2 years.
XIII. Approval History

List original approval date and subsequent review dates

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<td>June 22, 2017</td>
</tr>
</tbody>
</table>

XIV. Approval Signature

Donna Kern, MD (Signature)  
Date: June 22, 2017

Senior Associate Dean for Medical Education, Chair EDAS Council

Title
Grade Grievance Policy

I. Policy Statement

Primary responsibility for assigning grades rests with the theme leaders (Year 1 and 2) and the clinical clerkship directors (Year 3 and 4). The specific activities to be performed, the levels of expected performance, and the tools used to measure that performance are clearly outlined in block, clerkship and course syllabi.

II. Scope

Students enrolled in courses of the College of Medicine’s MD Degree Program.

III. Approval Authority
Undergraduate Curriculum Committee

IV. Purpose of This Policy

This policy is designed to outline the due process provided to a medical student who takes exception to the grade or assessment received during course work in the MD program at MUSC.

V. Who Should Be Knowledgeable about This Policy

College of Medicine students
College of Medicine Faculty and Course Directors
College of Medicine Undergraduate Medical Education Deans and Support Staff

VI. The Policy

Students are encouraged to first meet with the theme leader or the clinical clerkship director to discuss the concern regarding the grade. If after discussion, the student wishes to initiate the grade grievance process, the following steps must be taken:

1. The student must submit the formal grievance in writing to the theme director or the clinical clerkship director within 30 days of release of the grade that is being disputed. The theme director or the clinical clerkship director will respond in writing to the student’s grievance to indicate their decision.

2. If the decision of the theme leader or clinical clerkship director does not result in a resolution that is satisfactory to the student, the student may appeal to the Planning and Evaluation Committee (Year 1 and 2) or Clinical Sciences Planning and Evaluation Committee (Year 3 or 4) associated with the preclinical theme or clinical courses respectively. The formal grievance must be submitted in writing to the chair of the committee within 7 days of the theme or the clinical clerkship director’s decision.

3. If the decision of the committee does not result in resolution that is satisfactory to the student, the student may make a final appeal to the Associate Dean for Curriculum, Basic Sciences and the Associate Dean for Curriculum, Clinical Sciences. The formal grievance must be submitted in writing to either associate dean within 7 days of the committee’s decision. The joint decision by the Associate Deans for Curriculum is considered final.

Due Process
The student will be given:

- proper notice of the meeting location and time,
- meaningful opportunity to present their grievance before the committee or the associate deans, (students may also choose not to appear), and
- opportunity for review by unbiased individuals who do not have a conflict of interest.

In the event of potential conflict of interest, individual committee members already familiar with the case will recuse themselves from the deliberation and determination of outcome. Should one Associate Dean for Curriculum require recusal, the Senior Associate Dean for Medical Education will appoint a senior level educator to assist in the deliberation and determination of outcome at the final level of the grievance.

**VII. Special situations**

N/A

**VIII. Sanctions for Non-compliance**

N/A

**IX. Related Information**

A. References, citations

B. Other

C. Appendices
X. Communication Plan

Students will receive annual notification via MyQuest modules with attestation required.

Faculty will receive annual notification via MyQuest modules.

XI. Definitions

N/A

XII. Review Cycle

Policy will be reviewed at least every 2 years.

XIII. Approval History

List original approval date and subsequent review dates

<table>
<thead>
<tr>
<th>Approval Authority</th>
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<td>2012</td>
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XVII. Approval Signature
Donna Kern, MD (Signature)                      Date: June 16, 2017

Senior Associate Dean for Medical Education, Chair EDAS Council

Title
PRIVACY POLICY
Of Individually Identifiable Health Information

The Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule provides a Federal law to protect privacy and confidentiality by preventing a release of an individual’s (patient’s) individually identifiable health information (i.e., information in a medical record).

The Medical University of South Carolina (MUSC), The Medical University Hospital Authority (MUHA), University Medical Associates (UMA), and Carolina Family Care (CFC) supports and rigorously abides by all Federal and State laws and regulations for the protection of the privacy of individually identifiable health information. Each MUSC student must realize the necessity to maintain the privacy of a patient’s individually identifiable health information.

As a Medical University, all students viewing individually identifiable health information must complete HIPAA Privacy Rule training. Typically, this Privacy Rule training must be completed by the end of the student’s first semester. Individual colleges will provide additional information to the student on the completion of this training.

MUSC students may view individually identifiable health information for treatment purposes. In other words, MUSC students must be involved in the care of the patient to view a patient’s individually identifiable health information (i.e., the contents of a medical record).

In order to access a patient’s individually identifiable health information when the student is NOT involved in the patient’s treatment, the student must obtain permission from a member of the faculty of the student’s college. For example, if a MUSC student learns about a particular case of interest and this student is NOT involved in the care of the patient, the MUSC student will need permission to view the individually identifiable health information for “educational purposes”. Unless the faculty member is physically present when the student accesses the individually identifiable health information (i.e., the medical record), permission should be granted via written documentation (for example, an e-mail).
Individually identifiable health information may be stored in a variety of formats including paper, electronic (computers), video, audio, and photographs. Regardless of the format, all individually identifiable health information must be protected.

MUSC students can follow basic Do’s and Don’ts to protect a patient’s privacy. All of these are just a common sense approach to protect the privacy of individually identifiable health information.

The Do’s:

- Do ask yourself, “Do I need to look at this patient’s health information to provide treatment to the patient?” before looking at the record.
- Do keep a patient’s room door closed when providing care or discussing health information;
- Do speak softly when discussing health information while others are present;
- Do follow proper procedures when disposing of a patient’s health information;
- Do log off computer systems when you are finished accessing health information;
- Do report any privacy violations to your college or the privacy officer.

The Don’ts:

- Don’t talk about a patient’s health information in public places;
- Don’t choose a computer password that can be easily guessed, such as your last name;
- Don’t share your computer password with anyone;
- Don’t let faxes or other printed papers with a patient’s health information lie around unattended;
- Don’t walk away from open medical records;
- Don’t leave phone messages about a patient’s health information with anyone but the person you are trying to reach;
- Don’t leave messages containing a patient’s health information on an answering machine; and
- Don’t give out a patient’s medical condition or location without making sure the patient has agreed to be listed in the facility directory.

In addition, each MUSC student must realize that mental health, HIV/AIDS, sexual assault, and alcohol/drug abuse records are protected by additional Federal and State laws. Therefore, these types of individually identifiable health information must be protected with greater care.
You have already received information about and signed the College of Medicine Honor Code.

You can find the University Honor Code at:


As a reminder, the Honor Code applies to all course assignments, written examinations and clinical skills examinations unless course directors specifically direct students to work in groups or share information with each other.
International Electives Policy and Procedure

Policy

International electives include any educational activity that takes place outside of the fifty federated states of the United States.

Students may not apply to participate in an elective rotation that occurs in a country, territory or region that (1) is listed on the US Department of State list for travel warnings or alerts, (2) is located in a geographic area that is deemed politically unstable or (3) poses risk of harm to the student or threatens the health of the student. The initial approval of an elective may be revoked at any time prior to or during a rotation if circumstances in that region or practice setting change.

The College of Medicine is not responsible for any costs associated with the travel or the rotation experience, including but not limited by costs incurred for travel or travel delays, immunizations, additional background checks, etc.

Students must complete an Application for International Independent Study. An application must meet the College of Medicine academic and student safety requirements and receive approval for course credit by the COM Selectives and Electives Committee and the Associate Dean for Curriculum – Clinical Sciences.

The College of Medicine will recognize for credit no more than one approved 4-week international elective.

Procedure

The procedure for arranging extramural international electives is as follows:

The student must contact a physician/faculty member at the hosting institution and their Office of Student Affairs, or a similar designated office responsible for managing electives. The student must obtain an application from the hosting institution to arrange for the program. The student must also obtain a letter from the preceptor, at the institution where the elective is planned, detailing the following: description of the elective, educational activities and objectives, method of assessment, confirmation of dates for the program offering, confirmation of the faculty member’s appointment/licensure, and the preceptor’s agreement to sponsor and supervise the student for the experience.

An Application for International Independent Study must be completed and submitted to the COM Dean’s
Office Manager for Clinical Coordination, Credentialing and Compliance for Medical Students at least 3 months before the rotation dates. In addition, the student may be required to complete an application or submit documentation to the host institution. The applicant should contact Student Health at least three months in advance for any immunizations or travel medicine consultation for international electives.

Approved by UCC in January 2012; revised and approved in December 2012.
AAMC Statement on the Learning Environment

We believe that the learning environment for medical education shapes the patient care environment. The highest quality of safe and effective care for patients and the highest quality of effective and appropriate education are rooted in human dignity. We embrace our responsibility to create, support, and facilitate the learning environment shared by our patients, learners, and teachers. In this environment, our patients witness, experience, and expect a pervasive sense of respect, collegiality, kindness, and cooperation among health care team members. This includes all professionals, administrators, staff, and beginning and advanced learners from all health professions. This includes research as well as patient care environments. We affirm our responsibility to create, support, and facilitate a learning environment that fosters resilience in all participants. It is our responsibility to create an atmosphere in which our learners and teachers are willing to engage with learning processes that can be inherently uncomfortable and challenging. We affirm our commitment to shaping a culture of teaching and learning that is rooted in respect for all. Fostering resilience, excellence, compassion, and integrity allows us to create patient care, research, and learning environments that are built upon constructive collaboration, mutual respect, and human dignity.

Learning Environment & Medical Student Mistreatment Policy

Purpose:

The Learning Environment & Medical Student Mistreatment Policy (1) outlines expectations for specific behaviors that establish an appropriate learning environment and mitigate the risk of student mistreatment; (2) defines unprofessional behavior and student mistreatment; and, (3) specifies grievance reporting procedures for breaches in the professional learning environment and incidents of student mistreatment.

Policy:

Maintaining a safe and healthy learning environment requires that the faculty, administration, residents, fellows, healthcare professionals, staff, and students treat each other with the respect due colleagues. All educators should realize that students, residents and fellows depend on them for evaluations and references, which can advance or impede their career development. Educators must take care to judiciously exercise this power and to maintain fairness of treatment, avoiding exploitation or the perception of mistreatment and exploitation. The quality of medical education rests not only in the excellence of the content and the skills that
are taught, but also in the example provided to students, residents and fellows of humane physicians and educators who respect their professional colleagues at all career levels, their patients, and one another. An appropriate student learning environment should foster professional growth, support academic achievement, and encourage the attainment of educational goals. Accordingly, MUSC’s learning environment should serve as a model of professionalism and collegiality and be characterized by professional attributes (i.e., altruism, duty, knowledge, and skill). All members of MUSC including faculty, staff and learners annually attest to the MUSC Code of Conduct and should demonstrate the values prescribed therein, which include integrity, trustworthiness, impartiality, respect, stewardship, confidentiality and compliance with laws and policies. Breaches in professional behavior and mistreatment of students threaten the learning environment and the institutional culture of professionalism and will not be tolerated. (Link to MUSC Code of Conduct)

Examples of Student Mistreatment

Student mistreatment is defined as behavior by any faculty or staff member that is discriminatory, unfair, arbitrary, or capricious in nature, behavior inconsistent with the values presented in the MUSC Discrimination Policy, or unreasonably interferes with the learning process. When assessing behavior that might represent mistreatment, students are expected to consider the conditions, circumstances, and environment surrounding such behavior.

Examples of student mistreatment include, but are not limited to the following:

- Verbally abusing, belittling, or humiliating a student
- Intentionally singling out a student for arbitrary treatment that could be perceived as punitive
- Excluding students without cause from reasonable learning opportunities
- Assigning duties as punishment rather than education
- Pressuring students to exceed established restrictions on work hours
- Exploiting students in any manner, e.g., performing personal errands
- Directing students to perform an unreasonable number of “routine hospital procedures”, i.e., “scut” on patients not assigned to them or where performing them interferes with a student’s attendance at educational activities, e.g., rounds, classes
- Pressuring a student to perform medical procedures for which the student is insufficiently trained, i.e., putting a student in a role that compromises the care of patients
- Threatening a lower or failing grade/evaluation to a student for inappropriate reasons
- Committing an act of physical abuse or violence of any kind, e.g., throwing objects, aggressive violation of personal space
- Making unwelcome sexual comments, jokes, or taunting remarks about a person’s protected status as
defined in the MUSC Nondiscrimination Policy Statement.

- Being treated in an unfair, offensive, or discriminatory manner based on gender, ethnicity, or sexual orientation

No Retaliation Policy

The MUSC Code of Conduct strictly forbids discrimination or retaliation against any MUSC members who reports in good faith any instances of conduct that do not comply or appear not to comply with Federal or State laws and regulations or MUSC policies and procedures. At MUSC each member has the right to remain anonymous, as allowed by law, and to use confidential mechanisms provided by MUSC to disclose non-compliant activity without fear of retaliation of such reports. Retaliation can result in employment termination or academic dismissal. Individuals who believe they are experiencing retaliation are strongly encouraged to contact the Senior Associate Dean for Medical Education, the Associate or Assistant Dean for Student Affairs, the Associate Dean for Curriculum in the Basic Sciences, or the Associate Dean for Curriculum in the Clinical Sciences so that the situation can be addressed immediately.

Procedures

A. Distribution of Policy to learners, house staff, nurses, faculty, and administration.

This policy will be presented annually

(1) To all medical students in their respective academic orientations held in years 1-4.

(2) To all interns in their orientation

(3) To all housestaff, nurses, faculty and administration in an annual email from the COM Office of Student Affairs.

B. Reporting Concerns of Possible Mistreatment

Medical students who experience possible mistreatment or observe other students experiencing possible mistreatment are encouraged to report the incident if the matter cannot be resolved directly with the offending party. Suggested options for reporting are listed below:

Options for Reporting

1. Email or speak directly with any of the following people:
   - theme or course director
   - the Associate Dean for Curriculum in the Basic Sciences or the Associate Dean for Curriculum in the Clinical Sciences
   - the Associate and/or Assistant Deans for Student Affairs
   - the Senior Associate Dean for Medical Education
2. Submit a named or anonymous report via the E*value “On the Fly” evaluation system. These evaluations are flagged and shared with the College of Medicine Dean’s Office through the Office of Student Affairs. [http://academicdepartments.musc.edu/evaluate/](http://academicdepartments.musc.edu/evaluate/)

3. Submit an anonymous report through the MUSC compliance hotline at 1-800-296-0269 (Toll-free, available 24 hours, 7 days a week). [http://academicdepartments.musc.edu/uco/reporting.htm](http://academicdepartments.musc.edu/uco/reporting.htm)

Medical Students requesting complete anonymity should be made aware that doing so may interfere with the College of Medicine’s ability to investigate the concern and their ability to receive information about the follow-up investigation.

Medical Students may also choose to pursue claims of unlawful discrimination or harassment in compliance with the University’s Anti-Harassment Policy: “The Medical University of South Carolina is an equal employment opportunity employer and does not tolerate any form of harassment or intimidation based upon sex, race, color, age, religion, national origin, disability or any other factor. Inquiries or complaints may be addressed to the Director for the Office of Equal Employment Opportunity/Affirmative Action at (843)792-1568.

Further information may be found at [http://academicdepartments.musc.edu/eeo/index.htm](http://academicdepartments.musc.edu/eeo/index.htm)

In the case of possible gender discrimination or sexual harassment, students have the additional option of contacting the MUSC Office of Gender Equity. This office addresses issues that involve students, residents, or faculty as either the complainant or the subject of a complaint. Inquiries or complaints may be addressed to either the College of Medicine designated officer (Jennifer Nall, BS, Assistant Dean for Academic Affairs, 792 7254 or directly to the Office of Gender Equity (792 8066). Further information may be found at [http://academicdepartments.musc.edu/genderequity/index.htm](http://academicdepartments.musc.edu/genderequity/index.htm).

C. Responding to Concerns of Mistreatment

Every effort is made to respond to concerns of mistreatment in a timely and professional manner to minimize the risk of harm including retaliation. All complaints will be fully investigated and measures will be taken to reach an appropriate resolution. Except in cases of an anonymous complaint, students will be provided with clear and timely feedback concerning the status and resolution of their complaint.

The Office of Student Affairs will provide a de-identified annual written notice of reported concerns of mistreatment towards medical students (with corresponding dates indicated on the report) to the Senior Associate Dean for Medical Education. The Senior Associate Dean will review and present this annual report for discussion and comment with a governing committee of COM Deans (EDAS committee, consisting of Associate and Assistant Deans in the following areas: Education, Diversity, Admissions, and Student Affairs). Aggregate and de-identified data on reports of mistreatment of medical students will be created by the Office of Student Affairs and shared with the Undergraduate Curriculum Committee at least quarterly.

Print This Page
Transportation Policy

I. Policy Statement

This policy outlines transportation requirements for students who are scheduled for educational activities at local or distant community-based sites.

II. Scope

This policy applied to students enrolled in the College of Medicine MD Degree program.

III. Approval Authority
The final governing committee which is responsible for approving the policy is the EDAS Council (Education, Diversity, Admissions, Student Affairs).

**IV. Purpose of This Policy**

This policy clarifies student responsibility for transportation to educational activities.

**V. Who Should Be Knowledgeable about This Policy**

College of Medicine Students

College of Medicine Faculty and Course Directors

**VI. The Policy**

Students may be assigned to local or distant community-based sites at various times throughout the four year curriculum. The third year Family Medicine Rural Clerkship is a required rural experience. Students are responsible for their own transportation.

**VII. Special situations**

NA

**VIII. Sanctions for Non-compliance**

Failure to secure transportation may result in delays in your training or inability to complete the requirements...
IX. Related Information

NA

X. Communication Plan

Students will be informed of the policy during medical school orientation.

The policy can be found here: http://academicdepartments.musc.edu/com/hndbk/policies/transportation.htm

XI. Definitions

NA

XII. Review Cycle

Policy will be reviewed at least every 2 years.

XIII. Approval History

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<td>October 2012</td>
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<td>EDAS Council</td>
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XIV. Approval Signature

Donna Kern, MD (Signature)                                      Date: August 30, 2017

Senior Associate Dean for Medical Education, Chair EDAS Council

Title
# COM Visiting Learner Policy

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## I. Policy Statement

The College of Medicine is responsible for enacting policies that ensure sufficient clinical education resources, including preceptor teaching time, patient census and case mix, and learning space, for students enrolled in the MD Degree. In addition, the college works collaboratively to accommodate learners from other MUSC health professions programs when ample resources are available. In accordance with LCME accreditation standards (Element 5.4, 5.5, 5.10), the College of Medicine monitors and restricts the number of learners who may be accepted for learning opportunities in the clinical space.

## II. Scope

This policy provides guidance to MUSC College of Medicine faculty and administrators who may receive
requests from students, programs, or entities outside of the MUSC College of Medicine to accept learners for shadowing, research, or clinical rotation experiences. This policy addresses high school and undergraduate observers, visiting US medical students, visiting international medical students, visiting students from other health professions, and visiting faculty.

III. Approval Authority

This policy is revised and approved by the MUSC College of Medicine EDAS Council.

IV. Purpose of This Policy

This policy is intended to ensure sufficient clinical learning resources for students in the MD degree program, and to ensure that where sufficient resources exist, those opportunities are protected for students enrolled in degree programs at the Medical University of South Carolina.

V. Who Should Be Knowledgeable about This Policy

MUSC College of Medicine Faculty, Fellows, Residents, Students, and Educators

VI. The Policy

High School and Undergraduate Student Observers

Students who wish to shadow in the hospital or ambulatory setting are allowed to rotate for a maximum of three days total under the close supervision of a physician (MD). Students are not allowed to participate in procedures or have any direct patient contact. All requests for shadowing must be approved by the sponsoring department and/or physician and must follow all credentialing processes set forth by Hospital Human Resources. The College of Medicine Dean’s Office is not responsible for the credentialing of these students.

Students who wish to observe for a period longer than three days will not be considered unless an established agreement exists between the College of Medicine and the student’s home institution or they are participating in an established College of Medicine program. All agreements must be approved by the Associate Dean for Curriculum, Clinical Sciences.
In any case, students are not permitted to observe in environments where clinical education resources and space are more constrained (i.e. Intensive Care Units, the Department of Emergency Medicine, the Department of Obstetrics & Gynecology, and in the operating rooms).

The Senior Associate Dean for Research and the Associate Provost for Research must approve all students who wish to participate in or observe basic science or clinical research.

Visiting US Medical Students:

All applications from visiting students must be submitted using the AAMC’s Visiting Student Learning Opportunities Application Service (V-SLO). Application and other fees will apply. All applications are reviewed by the department to which the student applies. Clinical departments are encouraged to accept visiting U.S. medical students ONLY with the clear understanding that having additional students on wards or in clinic, in the academic setting, and in teaching activities should not impede or adversely affect the training of MUSC medical students.

Visiting students must meet all of the following criteria:

- Must be enrolled full time in medical school with LCME or COCA accreditation
- Must have successfully completed the basic core clerkships (Internal Medicine, OB/GYN, Pediatrics, Surgery, Psychiatry, and Family Medicine) and be in at least the (equivalent of) 4th year of training
- May only apply for established electives and externships (i.e., cannot have separately designed clinical rotations or experiences).

The COM Dean’s Office will consult with individual departments to determine when and how many medical students may be accepted for electives. Departments should be mindful of the effect of additional learners in clinical rotations and should adjust/decrease the number of visiting students they accept for rotations accordingly. All approvals are at the discretion of the department and College of Medicine Dean’s Office.

Medical students from MUSC may also apply to other LCME-accredited medical schools and teaching hospitals for away rotations using V-SLO.

The contact for all visiting medical student rotations is the Director of Clinical Curriculum and Visiting
Visiting Students from Other Health Professions:

MUSC students from other health professions will only be assigned to work with MD preceptors if there is capacity and this does not diminish the quality of the precepting and patient care experience for students enrolled in the MD degree program. MUSC students have priority for clinical education space in our health system and therefore non-MUSC students from other health professions will NOT be assigned to work with MD preceptors.

Visiting International Medical Students:

MUSC College of Medicine does not accept visiting international students for clinical rotations.

Visiting Faculty

All visiting faculty members (US and international) requesting a clinical experience must be cleared through the respective department in the College of Medicine. Departments who invite faculty to visit and attend clinic for the purpose of educating residents, teaching faculty a new procedure, etc. do not require Dean’s Office approval. These invitations are made solely at the discretion of the Chair. The sponsoring department is responsible for following the appropriate hospital policies and procedures for obtaining approval for the visiting faculty member to have access to clinical settings.

If the visiting faculty member wishes to participate as a “learner” on an existing clinical rotation, Dean’s Office approval will be required and prorated tuition may apply.

The Senior Associate Dean for Research and the Associate Provost for Research must approve all visiting faculty who wish to participate in or observe basic science or clinical research.

VII. Special situations  NA

VIII. Sanctions for Non-compliance

In cases where the policy is violated, the College of Medicine Dean’s Office will contact the accepting department and, if applicable the faculty member, to educate them about the policy. The chair of the department will receive a letter regarding the non-compliance, and training will be mandated for the
department education coordinator to ensure that a breach does not recur. A second violation will be reported to the Dean who will contact the chair of the department to determine corrective action.

IX. Related Information  NA

X. Communication Plan

This policy will be posted on the MUSC education policy website for access by faculty, students, and potential visiting students. The policy is shared annually with department coordinators and as part of new student coordinator training within the College of Medicine. The policy is included in the annual policy review computer module that is required of all College of Medicine faculty.

XI. Definitions  NA

XII. Review Cycle

The policy will be reviewed every two years by the EDAS Council.

XIII. Approval History

List original approval date and subsequent review dates

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XIV. Approval Signature

Donna Kern, MD (Signature)

June 6, 2018

Senior Associate Dean for Medical Education, Chair EDAS Council

Title
The following links (PDF files) provide information regarding policies and procedures, and forms to complete, related to ADA concerns, used at the Medical University of South Carolina.

**Policies and Procedures**

- Disability Related Accommodation Policy and Procedure
- Student Disability Grievance Procedure

**Accommodation Form**

- Request Accommodations Form
Disability-Related Accommodation Policy

Commitment to Students with Disabilities

The Medical University of South Carolina (“MUSC” or the “University”) is committed to ensuring that no otherwise qualified individual with a disability is excluded from participation in, denied the benefits of, or subjected to discrimination in University programs or activities due to his or her disability. The university is fully committed to complying with all requirements of the Americans with Disabilities Act of 1990 and its amendments (the “ADA”) and the Rehabilitation Act of 1973 (“Section 504”) and to providing equal educational opportunities to otherwise qualified students with disabilities. Disability support services are available to otherwise qualified students with disabilities to ensure equal access to the University’s programs and services. Services may include making academic and/or non-academic accommodations for students.

Types of Accommodation Available

Academic accommodations are related to learning and evaluation in an academic program or particular class. Examples include but are not limited to extended time for tests, note taking support, using a computer to type an essay test, or using an interpreter in class. Non-academic accommodations relate to university activities, jobs, facilities, and services that are not otherwise considered academic. Examples are removal of physical barriers, use of a service animal, use of an interpreter, or other modifications for participation in University activities and services such as University meetings and judicial proceedings.

Decisions regarding accommodations are made on a case-by-case basis. There is no standard accommodation for any particular disability.

Who Qualifies for Disability-Related Accommodation?

Subject to the procedure outlined below, an otherwise qualified student (meaning a student who meets the academic and technical standards required for admission or participation in the University’s education programs and activities) with a disability may be eligible for accommodation. As defined in the ADA and Section 504, a student has a disability if he or she has a physical or mental impairment which substantially limits one or more major life activities or has a record of such an impairment.

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1 The term “accommodation” is used throughout this document as synonymous with the modification of policies, practices, and procedures; the provision of auxiliary aids and services; academic adjustments; and modifications to the environment intended to remove barriers to equivalent access.
Prohibition Against Retaliation

The University strictly prohibits retaliation for requesting disability accommodation and/or for submitting a disability-related grievance or participating in a grievance investigation. Retaliation includes threats, intimidation, reprisals, and adverse actions.

Any student who believes he or she has been retaliated against for requesting a disability accommodation, submitting a grievance, and/or participating in a grievance investigation should notify the Dean of the student’s College. The Dean will promptly investigate the allegation of retaliation, notify the student in writing of the Dean’s determination, and take appropriate remedial and/or disciplinary action.

Alteration of Essential Course or Program Requirements

In instances where the requested accommodation may alter an essential course or program requirement (a full list of which can be accessed here) the University’s determination regarding the request will be made by a group of University employees who are trained, knowledgeable, and experienced in the area of study in question through a careful, thoughtful, and rational review of the academic program and its requirements, taking into account possible alternatives for the essential requirement, as well as whether the essential requirement in question can be modified for a specific student with a disability.

University 504/ADA Coordinator

The University has designated an Equal Employment Opportunity and Affirmative Action Coordinator, (the “Coordinator”) to coordinate its efforts to comply with Section 504 and the ADA and to oversee the University’s consideration and implementation of disability-related accommodations. The following is the Coordinator’s contact information:

Dr. Willette Burnham-Williams, Chief Diversity Officer & Title IX Coordinator
Equal Employment Opportunity & Affirmative Action
Department of Diversity, Equity, and Inclusion
Medical University of South Carolina
173 Ashley Avenue, MSC 502
Basic Science Building Room 104
Charleston, South Carolina 29425-5020
843-792-1072
burnham@musc.edu
**Procedure for Students Requesting Disability-Related Accommodation**

Step 1:

Schedule a meeting with the Coordinator, whose contact information is provided above, to discuss your accommodation request.\(^2\)

Step 2:

Bring to the meeting with the Coordinator a **filled out** copy of the University’s Disability Support Services [Request for Accommodation form](#) and any documentation (for example, education records or diagnoses from medical providers) that you believe is relevant to your disability and/or accommodation request—especially any documentation that describes the impact of the disability on you and how the requested accommodation(s) would address that impact.

*Because each person’s situation is unique and documentation requirements vary by situation, the University’s Coordinator will talk to you about documentation requirements during the initial meeting. No student should delay meeting with the Coordinator out of concern for not having the appropriate paperwork.*

Step 3:

If the Coordinator determines that you are an otherwise qualified student with a disability, and thus eligible for accommodation, the Coordinator will engage in an interactive process with you and, as necessary, relevant University officials (e.g., course instructors, admissions staff, etc.) and others to determine the appropriate accommodation(s).

Step 4:

If your request for accommodation is approved, the Coordinator will generate a Letter of Accommodation, which documents the accommodation(s) you have been granted. **You are responsible for promptly collecting this letter and presenting it to faculty.**

If your request is not approved, the Coordinator will notify you in writing of the decision and related reasoning.

Grievance Procedure / Appeal of Disability Accommodation-Related Decisions

You may appeal a denial of an accommodation request by following the process set forth in the [University’s Student Disability Grievance Procedure](#). (In addition to providing for appeals of disability accommodation denials and related issues, the University’s Student

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2 If the Coordinator determines that an in person meeting is not necessary (as the Coordinator might do, for example, if you already have met in person with the Coordinator to discuss accommodations) or not feasible (for example, because of your current location or because of a semester break), the Coordinator will assist you with submitting the necessary information electronically.
Disability Grievance Procedure may be used by any student currently enrolled at the University who believes he or she has been discriminated against or harassed on the basis of disability by a University employee (e.g., administrator, faculty, staff, adjunct faculty, or other agent of the University); University student; or, in certain circumstances, by a visitor to the University.

Modification of Existing Accommodations

If you believe that already-approved accommodations require modification, please contact the University’s Coordinator to discuss the desired modification.
Student Disability Grievance Procedure

The Medical University of South Carolina ("MUSC" or the "University") is committed to ensuring that no otherwise qualified individual with a disability is excluded from participation in, subjected to discrimination in connection with, or denied the benefits of any University programs or activities due to his or her disability. The University will take steps to prevent the recurrence of any discrimination and to correct discriminatory effects on the complainant and others, if appropriate.

The University has adopted this internal Grievance Procedure to provide for the prompt and equitable resolution of student complaints alleging any action prohibited by Section 504 of the Rehabilitation Act of 1973 ("Section 504") or Titles II or III of the Americans with Disabilities Act (the "ADA") or otherwise alleging disability-related discrimination or harassment. Section 504 prohibits discrimination on the basis of disability in any program or activity receiving Federal financial assistance, Title II of the ADA prohibits discrimination on the basis of disability by public entities, and Title III of the ADA prohibits discrimination on the basis of disability by private entities (including universities) that provide places of public accommodation. These laws and accompanying regulations may be examined in the office of the Equal Employment Opportunity and Affirmative Action Program Manager, who the University has designated to coordinate its efforts to comply with Section 504 and the ADA (the "Coordinator"). The following is the Coordinator’s contact information:

Dr. Willette Burnham-Williams, Chief Diversity Officer & Title IX Coordinator
Equal Employment Opportunity & Affirmative Action
Department of Diversity, Equity, and Inclusion
Medical University of South Carolina
173 Ashley Avenue, MSC 502
Basic Science Building Room 104
Charleston, South Carolina 29425-5020
843-792-1072
burnham@musc.edu

Who May Grieve?

Any student currently enrolled at the University who believes he or she has been discriminated against or harassed on the basis of disability (the “Grievant”) by a University employee (e.g., administrator, faculty, staff, adjunct faculty, or other agent of the University); University student; or, in certain circumstances, by a visitor to the University, may use this process to file a grievance.
Medical University of South Carolina  
Student Disability Grievance Procedure

What May Be Grieved?

An action or decision may be grieved if it involves alleged discrimination or harassment by a University employee; University student; or, in certain circumstances, by a visitor to the University against a student on the basis of that student’s disability. Such actions may include, but are not limited to, denial of accommodations or lack of physical access to University facilities or programs.

Confidentiality and Prohibition Against Retaliation

The University will treat all information submitted in connection with a grievance as confidential. Subject to FERPA and other applicable privacy laws, however, the University official investigating the grievance will inform individuals with a legitimate need to have knowledge of the grievance and may provide them related information as necessary to allow the University official to conduct a meaningful and thorough investigation. The University official investigating the grievance will inform all involved parties of the need to maintain the confidentiality of such information.

The University prohibits retaliation for submitting a grievance or participating in a grievance investigation. Retaliation includes threats, intimidation, reprisals, and adverse actions. The University official investigating the grievance will advise all involved parties of this strict prohibition against retaliation.

Any student who believes he or she has been retaliated against for submitting a grievance or participating in a grievance investigation should notify the Dean of the student’s College. The Dean will promptly investigate the allegation of retaliation, notify the student in writing of the Dean’s determination, and take appropriate remedial and/or disciplinary action.

Informal Grievance Procedure

The Informal Grievance Procedure is designed to facilitate a satisfactory resolution of the grievance in an informal manner. The Grievant has the option to forego the Informal Grievance Procedure and move immediately to the Formal Grievance Procedure.

A Grievant initiates the Informal Grievance Procedure by contacting the Coordinator. If the Coordinator is the subject of the grievance, the Grievant initiates the Informal Grievance Procedure by contacting the University’s Chief Diversity Officer, Dr. Willette Burnham-Williams, who will assign an administrator (the “Assigned Administrator”) in lieu of the Coordinator. The Grievant may contact the appropriate official by e-mail, phone, or in person. To initiate the Informal Grievance Procedure, a Grievant is not required to submit
the grievance in writing, but the Grievant may be asked to do so or to submit other
evidence, if necessary to facilitate a satisfactory resolution.

The Coordinator/Assigned Administrator will attempt to expeditiously facilitate a
satisfactory resolution. The Coordinator/Assigned Administrator may meet in person with
the Grievant, confer with the individual(s) against whom the grievance is filed, attempt to
arrange a meeting between the Grievant and the individual(s), or take any other steps the
Coordinator/Assigned Administrator believes will be useful in promoting resolution.

Within 21 calendar days after the Grievant initially contacts the Coordinator or Dr.
Burnham-Williams regarding the grievance, the Coordinator/Assigned Administrator will
provide written notification to the Grievant and, as appropriate, the individual(s) against
whom the grievance is filed of the outcome of the Informal Grievance Procedure.

Formal Grievance Procedure

If the Grievant is not satisfied with the resolution reached using the Informal Grievance
Procedure, or if the Grievant chooses not to use the Informal Grievance Procedure, the
Grievant may initiate the Formal Grievance Procedure by submitting a written complaint to
the Coordinator. If the Coordinator is the subject of the grievance, the Grievant initiates the
Formal Grievance Procedure by contacting the University’s Chief Diversity Officer, Dr.
Willette Burnham-Williams, who will designate an Assigned Administrator in lieu of the
Coordinator. A Grievant who chooses to initiate the Formal Grievance Procedure after
participating in the Informal Grievance Procedure must do so within 14 calendar days of
receipt of the Coordinator’s/Assigned Administrator’s written notification of the outcome
of the Informal Grievance Procedure. The Grievant’s written complaint must:

- be dated;
- state the problem or action alleged to be discriminatory and the date of the alleged
  action;
- state how the action is discriminatory (or how the decision is unreasonable if it is a
denial of a requested accommodation);
- name the individual(s) against whom the grievance is filed;
- include a recommendation for resolution; and
- be signed by the Grievant.

Within seven calendar days of receiving the written complaint, the Coordinator/Assigned
Administrator will provide written notification of receipt of the complaint to the Grievant
and to the individual(s) against whom the grievance is filed. The Coordinator/Assigned
Administrator will also conduct a thorough and impartial investigation of the complaint,
affording all relevant persons an opportunity to present witnesses and submit evidence
regarding the allegations. Within 30 days of receipt of the written complaint, the

Medical University of South Carolina
Student Disability Grievance Procedure
Coordinator/Assigned Administrator will provide the Grievant and the individual(s) against whom the complaint is filed a written decision regarding the grievance. The decision will include, if applicable, an explanation of remedies, which may include the imposition of disciplinary sanctions and/or referral to an individual's supervisor or another administrator for the determination and imposition of disciplinary sanctions.

**Appeal**

The Grievant or the individual(s) against whom the grievance is filed may appeal within 14 calendar days of receiving the Coordinator's/Assigned Administrator's written decision and/or any associated disciplinary sanctions by writing to the University's Chief Diversity Officer, Dr. Willette Burnham-Williams. The written appeal must clearly set forth the grounds for the appeal and must include all supporting evidence. Generally, Dr. Burnham-Williams will limit her review of the Coordinator's/Assigned Administrator's decision to determining whether the Coordinator/Assigned Administrator considered the proper facts and whether there were any procedural irregularities. Within 21 days of receipt of the appeal, Dr. Burnham-Williams will provide the Grievant and the individual(s) against whom the complaint is filed a written decision regarding the appeal. The decision of Dr. Burnham-Williams is final, and the University will disregard any subsequent appeals (in any form) to any University representative, including the University President.

**Adjustment of Deadlines**

The Coordinator, Assigned Administrator, or Dr. Burnham-Williams may change the above deadlines for legitimate reasons, such as semester or summer breaks. Likewise, if the application of time deadlines creates a hardship due to the urgency of the matter or the proximity of an event, the Coordinator, Assigned Administrator, or Dr. Burnham-Williams, at the request of the Grievant, will determine if an expedited procedure can be created. The Coordinator, Assigned Administrator, or Dr. Burnham-Williams will provide the parties to the grievance written notification of any deadline adjustments.

**Interim Measures**

If necessary while any grievance investigation is ongoing, the University will take interim measures to stop discrimination and prevent its recurrence and to correct discriminatory effects on the complainant and others. Such interim measures may include, but are not limited to, limiting interaction between the parties, arranging for the provision of temporary accommodations, or staying a course grade.

**Confidentiality of Records**

Once the University has made its final decision regarding the grievance, the records related to the grievance will be confidentially maintained by the Coordinator for three years.
Disability Accommodations

The University will make arrangements to ensure that students with disabilities are provided appropriate accommodations as needed to participate in this Grievance Procedure. Requests for accommodations must be made to the Coordinator or, if the Coordinator is the subject of the grievance, to Dr. Burnham-Williams. Accommodations may include, but are not limited to, providing interpreters, providing recordings of materials, and assuring a barrier-free location for the proceedings.

External Complaints

The availability and use of this Grievance Procedure does not prevent a student from filing a complaint of discrimination with external agencies such as the U.S. Department of Education, Office for Civil Rights.
Disability Support Services

Request for Accommodation

Date ___________________________________ College/Program __________________________________

Student ________________________________ Age _____ SSN/Student ID ___________________________

Address _______________________________ City _______________________ State ____ Zip ___________

Phone ______________________________ E-Mail Address ________________________________________

Type of disability:
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

Describe how your disability impacts you and your participation in MUSC’s program and activities:
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
What accommodation(s) are you requesting?
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

Describe how you believe the requested accommodation(s) will help you be successful at MUSC:
________________________________________________________________________________________
________________________________________________________________________________________

1Please see the University’s Disability-Related Student Accommodation Policy and Procedure for instructions regarding submission of this form to the University 504/ADA Coordinator.
Please describe any past experience you have had with using the requested accommodation(s):

__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________

I am registering with Disability Support Services as a student with a disability as defined by the Americans with Disabilities Act and Section 504. Despite my disability, I know that I am responsible for following school rules and the MUSC Code of Student Conduct. I am also aware that I must still meet the minimum/technical standards as set forth by my program with or without accommodations. I am also aware that I need to meet with my instructor(s) to discuss my accommodation(s).

__________________________________________________________________________________________

Student Signature     Date
Clinical Dress Code

<table>
<thead>
<tr>
<th>Policy Identification Number</th>
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<tr>
<td>Policy Title</td>
<td>Dress Code – Clinical Students</td>
</tr>
<tr>
<td>Classification</td>
<td>University</td>
</tr>
<tr>
<td>Approval Authority</td>
<td>Undergraduate Curriculum Committee</td>
</tr>
<tr>
<td>Responsible Entity</td>
<td>College of Medicine-Undergraduate Medical Education</td>
</tr>
<tr>
<td>Policy Owner</td>
<td>Clinical Sciences Planning and Evaluation Committee</td>
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I. Policy Statement

This policy outlines expectations for professional dress for students during the clinical phase of their education.

II. Scope

This policy applies to students enrolled in the College of Medicine MD Degree program.

III. Approval Authority
The final governing committee which is responsible for approving the policy is the Undergraduate Curriculum Committee. The Clinical Sciences Planning and Evaluation Committee will periodically review the policy for updates.

**IV. Purpose of This Policy**

This policy clarifies professional expectations regarding dress and grooming during the clinical phase of their education.

**V. Who Should Be Knowledgeable about This Policy**

College of Medicine Students

College of Medicine Residents, Staff, and Faculty

**VI. The Policy**

Clinical students are expected to present themselves in a way that projects respect and professionalism at all times. This includes well-groomed hairstyles, as well as professional jewelry and makeup.

- Recommended acceptable attire (business casual) includes collared shirts, slacks, skirts, blouses, sweaters, and dresses. All clothing should be professional.
- Shoes should be closed toe.
- Except when scrubs are necessary or permitted by the attending, business casual attire is required in all clinical settings as well as educational settings, to include lectures and OSCEs.
- An optimal level of personal hygiene should be maintained at all times, to include neat and trimmed facial hair.
- Perfume and cologne are prohibited.
- Student ID badges should be visible at all times.
- White coats should be clean and pressed.

- Operating room (OR) scrubs should not be worn outside of the OR area without a clean lab coat or appropriate cover-up over them.
- OR scrubs should not be worn outside of the hospital building at any time.
VII. Special situations

NA

VIII. Sanctions for Non-compliance

Failure to comply with the dress code policy will result in a physicianship form.

IX. Related Information

NA

X. Communication Plan

Students will be informed of the policy during orientation to the clinical phase of their education.

The policy can be found here:

http://academicdepartments.musc.edu/com/hndbk/policies/dress-code/dresscode.htm

XI. Definitions

NA

XII. Review Cycle

Reviewed every 2 years.

XIII. Approval History
<table>
<thead>
<tr>
<th>Approval Authority</th>
<th>Date Approved</th>
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<tr>
<td>CSPEC</td>
<td>July 14, 2017</td>
</tr>
<tr>
<td>Undergraduate Curriculum Committee</td>
<td>August 4, 2017</td>
</tr>
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</table>

**XIV. Approval Signature**

Donna Kern, MD (Signature)  Date: August 4, 2017

Senior Associate Dean for Medical Education

Title
Contact Us

For general university or hospital information, call 843-792-2300. Or, choose from the following listings:

Schedule an Appointment
The MUSC Health Connection telephone line is answered by specially trained Referral Management Specialists within our Patient Access Center. Please call 843-792-1414 from 7:30 a.m. to 5 p.m. Monday through Friday.

Ask-a-Pharmacist
Submit your medication-related question to an MUSC Health pharmacist.

Contact a Patient at the Medical Center
You can call the hospital operator at 843-792-2300.

Request an Ethics Consultation
If you have questions about the care of your loved one, use our Ethics Consultation Service.

Email a Question About MUSC Health MyChart
If you have a question about using the MUSC Health MyChart tool to communicate with your physician and review information such as your test results, send us an email.

MUSC Patient & Family Liaison
If you are an MUSC Health patient who wants to provide feedback on our services, our Patient & Family Liaison program has multiple ways for you to connect.

**Contact MEDULINE**

If you are a physician who would like to consult with an MUSC Health provider or refer a patient, call 843-792-2200 or 800-922-5250.

**Billing Questions or Payments**

Contact our Billing Department at 843-792-2311. Or review our billing FAQs if you have a question about an MUSC Health bill.

**Media Contacts**

Contact information for members of the media.

**Contact Our Webmaster**

If you have comments or questions about this Website.

**Confidential Hotline** — to report any activity reasonably believed to be in violation of any law, regulation, or any MUSC policy call our Confidential Hotline.
College of Medicine
Clinical Studies Physicianship Form

Name________________________________________________________ Year of Study __________________________

Rotation _______________________________________ Name of Faculty/ Resident/ Staff_________________________

Directions for completing the Clinical Studies Physicianship Form. An incident that raises significant concerns about a third-
year or fourth-year medical student’s professionalism should be documented using this Physicianship Evaluation Form. The
domain in question should be checked in the box or boxes provided below. Comments from the faculty/resident/staff which
may be derived from formal evaluation forms or from personal conversations with peers or supervisors, should be written in
the space provided or in a separate document.

This information is being provided by:   Faculty       Resident   Staff

Fulfillment of patient care responsibilities
☐ The student needs frequent reminders to complete assignments, such as writing progress notes and following up on patient tests
and consults.
☐ Team members feel they cannot rely upon the student to perform assigned tasks in a thorough manner.
☐ The student has failed to follow policy related to use of the EHR.
☐ HIPAA violation

Timeliness and attendance
☐ The student is frequently late to clinical activities or leaves early, except for required didactic sessions.
☐ The student does not attend required activities.

Self-improvement
☐ The student is defensive and resists accepting constructive criticism.
☐ The student fails to make changes suggested by feedback from residents and faculty.
☐ The student fails to recognize inadequacies in his/her own performance.

Functioning as a respectful and helpful team member
☐ The student is disrespectful and/or inappropriate in oral or written communications.
☐ The student is disrespectful to team members, including other healthcare professionals involved in his/her patient’s care.
☐ The student is frequently absent or difficult to find during day to day clinical activities.
☐ The student does not willingly accept new patients or perform daily tasks that may help team members with patient care.
☐ The student does not demonstrate respect for diversity of race, gender, religion, sexual orientation, age, disability.

Honesty and integrity
☐ The student misrepresents or falsifies clinical information on rounds, in conferences, or in documentation.
☐ The student misrepresents or falsifies his/her own actions in clinical activities.

Professional relationships with patients and families
☐ The student has engaged in a romantic or otherwise inappropriate relationship with a patient and/or patient’s family member.
☐ The student fails to show empathy and/or respect with patients and families.
☐ The student fails to act in the patient’s best interest or in accordance with patient/family wishes.

Other specific behaviors not included above
☐ The student engaged in actions that could have been detrimental to patient care.
☐ The student has come to work impaired and unfit to fulfill responsibilities.
☐ The student resists or has failed to submit required documentation for clinical training.
☐ The student does not adhere to expectations regarding professional attire.
☐ The student spends time on rounds in activities unrelated to clinical discussions (e.g. texting, e-mailing, etc.).
☐ The student exhibits inappropriate use of social media.
☐ Other

Narrative comments related to the incident (required):

Student comments (optional):

This evaluation was discussed with the student on _______________ (date)

_________________________________________________              _____________________
Student Signature      Date

_________________________________________________   ____________________
Faculty/Resident/Staff Signature     Date
College of Medicine
Preclinical Studies Physicianship Form

Name______________________________________________________ Year of Study ______________________

Theme _______________________________________________ Faculty/Staff ___________________________

Directions for completing the Preclinical Studies Physicianship Form. An incident that raises significant concerns about a first-year or second-year medical student’s professionalism should be documented using this Physicianship Evaluation Form. The domain in question should be checked in the box or boxes provided below. Comments from the faculty or staff, which may be derived from formal evaluation forms or from personal conversations with peers or supervisors, should be written in the space provided or in a separate document.

This information is being provided by Faculty Staff

Reliability and responsibility
☐ The student fails to fulfill responsibilities in a reliable or timely manner.
☐ The student is frequently late to learning activities or leaves early without approval.
☐ The student has failed to attend a mandatory learning activity.
☐ The student has failed to submit required documentation for clinical training.
☐ HIPAA violation

Self-improvement and adaptability
☐ The student is defensive and resists accepting constructive criticism.
☐ The student fails to make changes suggested by feedback from educators.
☐ The student fails to recognize inadequacies in his/her own performance.
☐ The student fails to contribute to an atmosphere conducive to learning.

Relationships with students, faculty, staff, and patients
☐ The student is disrespectful and/or inappropriate in oral or written communications.
☐ The student has difficulty establishing rapport with patients, students, and faculty.
☐ The student is disrespectful to team members, including other healthcare professionals.
☐ The student does not demonstrate respect for diversity of race, gender, religion, sexual orientation, age, and/or disability.
☐ The student has difficulty establishing and maintaining appropriate boundaries in learning situations.
☐ The student fails to demonstrate honesty.
☐ The student misrepresents or falsifies information related to learning activities.

Other specific behaviors not included above
☐ The student engaged in actions that could have been detrimental to patient care.
☐ The student has come to learning experiences impaired and unfit to fulfill responsibilities.
☐ The student does not adhere to expectations regarding professional attire.
☐ The student spends time during class engaging in activities unrelated to small group of class discussions (e.g. social media, texting, e-mailing, etc.).
☐ The student exhibits inappropriate use of social media.
☐ Other ______________________________________________________________________________

Narrative Comments related to the incident (required):

Student comments (optional):

This evaluation was discussed with the student on ________________ (date)

_________________________________________                             _____________________
Student Signature      Date

_________________________________________________   ____________________
Faculty/ Staff Signature      Date