SCHOOL OF MEDICINE & DENTISTRY
UNIVERSITY of ROCHESTER MEDICAL CENTER

University of Rochester
School of Medicine and Dentistry

Student Handbook and Policies

Updated: January 18, 2024

INTRODUCTION

This official student handbook has been compiled to inform students about institutional policies as well as to identify many services and resources that may be of value during their training at Rochester.

The policies and guidelines of the School are dynamic – constantly being improved through the efforts of students, faculty, and administration. We publish the official handbook in a web-based format and send students periodic updates. All policies are subject to improvement and revision at any time.

We hope students find these materials to be useful. Should students have any comments, concerns, or questions, they should contact their Advisory Dean or any staff member in the Student Services Center.

Sincerely,

David R. Lambert, M.D.
Senior Associate Dean for Medical Student Education

Table of Contents

INTRODUCTION 2

I. ADMISSIONS 8

FALSIFICATION OF ADMISSIONS INFORMATION 8
Academic, Behavioral and Professionalism Expectations of Accepted Candidates: 8
VERIFICATION OF ELIGIBLITY FOR MATRICULATION 8
Verification of Backgrounds of Matriculates: 8
Optional Background Checks: 9
Review Committee: 9
Verification of Matriculates' Identity, Citizenship/Immigration Status and State of Residency: 9
Verification of Academic Credentials - Receipt of Final Transcript: 10
USE OF LEGAL NAME POLICY 11

II. ACADEMIC POLICIES, GUIDELINES AND PROCEDURES 11

ABSENCES ACADEMIC RESPONSIBILITIES 11
ABSENCES FROM COURSES 11
ABSENCES FROM CLERKSHIPS 12
NOTIFICATION WHEN STUDENTS HAVE MEDICAL EMERGENCIES 15
ACADEMIC PERFORMANCE AFFECTED OR CAUSED BY A DISABILITY 15
INFORMATION TECHNOLOGY ACCEPTABLE USE POLICY 15
COMPUTING AND ELECTRONIC COMMUNICATIONS POLICY 18
ASSESSMENT POLICY 24
COURSES 24
CLERKSHIPS AND ACTING INTERNSHIPS 24
REDUCING DISTRACTION IN THE TEST ENVIRONMENT POLICY 24
MID-COURSE AND MID-CLERKSHIP FEEDBACK POLICY 25
Narrative Assessment Policy 25
Policy Requiring Participation of Non-faculty in Programs to Teach and Assess Medical Students 26
Policy on Medical Student Supervision and the Delegation of Responsibility to Medical Students 26
DOUBLE HELIX CURRICULUM—TRANSLATIONS AND TRANSITIONS: GRADES 27
COURSES AND ELECTIVES 27
REEXAMINATION AND REMEDIATION POLICY FOR KNOWLEDGE-BASED EXAMINATIONS IN PHASE 1 AND PHASE 2 COURSES 28
CLERKSHIP AND ACTING INTERNSHIP 29
GRADE APPEALS POLICY: 33
Course Grade/Remediation Appeal 34
Clerkship, Elective, and Acting Internship Grade/Remediation Appeal 34
Remediation 35
Course and Clerkship Director Responsibilities: 36
GRADUATION REQUIREMENTS 38
Academic Schedule: 38
Completion of Required Experiences in Year of Planned Graduation: 39
Medical Student Promotions and Review Board (MSPRB) Additional Mandated Academic Requirements for Graduation: 40
Deferring Diploma Due to Outstanding Requirements: 40
Implications for Participating in Commencement: 40
Clerkship Site Assignment Requests: 40
ELECTIVES 41
Extramural Electives: 41
International Clinical Electives: 42
Reading Electives: 42
Approval Process for Students Engaging in Non-credit Bearing Electives 43
DROP/ADD POLICY 44
COURSEWORK AT OTHER U OF R SCHOOLS 44

ASSESSMENT DATA 44
Student Confidentiality: 44
Sharing Feedback about Faculty: 44
Student Participation in the Evaluation of Faculty and Curriculum: 45
AAMC Student Questionnaires: 45
Follow-up on Incomplete Student Evaluations: 46
Evaluations and Educational Experiences with Family Members: 46
Avoiding the Appearance of Bias in Evaluations Due to Prior Relationships 46
FINANCIAL AID 47
Financial Aid Eligibility: 47
Loss of Financial Aid Eligibility: 48
Notification of Change in Eligibility 48
Appeals to Reinstate Financial Aid Eligibility: 48
Financial Aid Probation: 48
Academic Research Track (ART): 48
Distinction in Community Health: 49
Distinction in Research: 51
MEDICAL STUDENT PERFORMANCE EVALUATION (MSPE) 52
Deadline for Including Clerkship and Acting Internship Evaluations in the MSPE 52
Author of MSPE 53
Request for Review of the Advisory Dean Prepared MSPE 53
ALPHA OMEGA ALPHA HONOR SOCIETY 54
GOLD HUMANISM HONOR SOCIETY 55
MEDICAL SCIENTIST TRAINING PROGRAM (MSTP) STUDENTS 55
MD/PhD Program Performance Expectations: 55
MD/PhD Program Requirements: 56
Scientific Reasoning in Medicine (SRM) 56
Longitudinal Clinical Experience for MSTP Students: 56
OPTING OUT OF EDUCATIONAL EXPERIENCES DUE TO CONSCIENTIOUS OBJECTIONS 57
Procedures for Advising the School about Conscientious Objections: 58
Annual Deadlines for Requesting Accommodations for Conscientious Objections: 58
Appeals Process: 58
PROFESSIONAL LIABILITY INSURANCE FOR MEDICAL STUDENTS 58
RELIGIOUS OBSERVANCE 59
Deadlines for Requesting Accommodations for Religious Observance: 59
Appeals Process: 59
REVIEW OF STUDENT STATUS AND DUE PROCESS PROCEDURE 60
Medical Student Promotions and Review Board (MSPRB) 60
MSPRB Procedures: 61
MSPRB Review of Academic Performance Issues: 62
MSPRB Review of USMLE Performance: 62
Appeals Processes: 62
Medical Student Promotions and Review Board Voting Members: 64
Procedures to Avoid the Impact of Conflicts of Interest: 64
SELF DISCLOSURE IN THE COURSE OF LEARNING 65
SMALL GROUP ASSIGNMENTS 65
STUDENT LEAVES AND WITHDRAWAL 65
Fellowship Approval Process for Students in Good Academic Standing: 65
Leave of Absence (LOA): 66
Temporary Academic Pause (TAP): 66
Procedure for Requesting a Temporary Academic Pause: 67
Approval Process for Other Leaves: 67
Medical Leaves: 68
Withdrawal: 68
TRANSPORTATION REQUIREMENT 68
UNITED STATES MEDICAL LICENSING EXAM (USMLE) 68
Students and Graduates: 68
University of Rochester USMLE STEP 1 Policy: 69
Independent Preparation for Licensure (IND999): 70
University of Rochester USMLE STEP 2 CK Policy: 71

DOCUMENTATION REQUESTS 72

III. ADDITIONAL INFORMATION AND POLICIES 73

EMERGENCY RESPONSE PROCEDURES 73
NOTIFICATION AND ROLE IF THERE IS A BIOLOGICAL EVENT 74
MEDICAL STUDENT RESPONSIBILITIES AT THE HOSPITAL POINT OF DISTRIBUTION (HPOD) CLINIC: 74
NOTIFICATION FOR NATURAL OR OTHER DISASTERS 74
PANDEMIC EMERGENCY PREPAREDNESS PLANS 75
INTERNATIONAL STUDENT EXPERIENCES 75
PRIVACY AND ACCESS TO ACADEMIC RECORDS 76
Faculty and Administration Access to Medical Student's Academic Records 76
Annual Notice to Students: 76
SOLOMON AMENDMENT AND THE RELEASE OF PERSONAL INFORMATION 76
STUDENT ID NUMBERS 77
USE OF VIDEO AND AUDIO EQUIPMENT IN EDUCATIONAL SETTINGS 78
VIDEO, AUDIO AND RECORDING EQUIPMENT IN OTHER EDUCATIONAL SETTINGS 78

IV. COMMUNITY SERVICE, RESEARCH, INTERNATIONAL MEDICINE 79

OFFICE OF MEDICAL STUDENT AND ENRICHMENT PROGRAMS (OMSEP) 79
COMMUNITY OUTREACH: STUDENTS OF ROCHESTER OUTREACH (SRO) 79
STUDENT RESEARCH 80
INTERNATIONAL MEDICINE PROGRAMS 81
International Clinical Electives: 82
URSMD HAS RECIPROCAL EXCHANGE AGREEMENTS FOR MEDICAL STUDENT CLINICAL ELECTIVES WITH SEVEN INTERNATIONAL INSTITUTIONS, THROUGH OMSEP: 82

V. COMPLIANCE AND REGULATORY POLICIES 83

ADMINISTRATIVE SUSPENSIONS 83
ANNUAL ATTESTATION 83
TECHNICAL STANDARDS 83
Technical Standards Policy: 83
URSMD Technical Standards (for matriculating students beginning with the Class of 2026) 84
URSMD Technical Standards (for the Class of 2023, 2024 and 2025) 86
CONFLICT OF INTEREST, TITLE IX AND GUIDELINES TO PREVENT THE MISTREATMENT OF STUDENTS ATTESTATION 87
MEDICAL STUDENT BASIC LIFE SUPPORT (CPR) CERTIFICATION 87
ELECTRONIC MEDICAL RECORDS (EPIC) 87
Electronic Medical Record Documentation Policy for Medical Students: 87
THE HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA) - MANDATORY SESSIONS 88
POLICY ON THE IMPLICATIONS OF INFECTIOUS AND/OR ENVIRONMENTAL DISEASE OR DISABILITY ON MEDICAL STUDENT EDUCATION ACTIVITIES 89
INFECTION PREVENTION GUIDELINES FOR UNIVERSITY OF ROCHESTER MEDICAL STUDENTS 89
Needle Sticks, Cuts and Blood/Body Fluid Exposure: 90
Other Infectious Diseases: 91
NYS MANDATORY INFECTION CONTROL & BARRIER PRECAUTIONS TRAINING FOR HEALTH PROVIDERS 91
NYS Comprehensive Infection Control Course 92
MANDATORY URMC ANNUAL IN-SERVICE EDUCATION COMPETENCY EXAM 92
MEDICAL STUDENT IMPAIRMENT POLICY 92
Impairment Related to the Use of Alcohol or Drugs: 93
Impairment Unrelated to Alcohol or Drugs: 94
Implications of Infectious and/or Environmental Disease or Disability: 95
NEW YORK STATE CHILD ABUSE REGISTRY 95
PROTECTED HEALTH INFORMATION (PHI) 95
REQUIREMENTS 97
New York State Department of Health: 97
University of Rochester Medical Center: 97
University of Rochester School of Medicine and Dentistry: 97
University Health Service (UHS): 97
URMC POLICY OF CONFIDENTIALITY 98
GRADUATE HOUSING 99

INTEGRITY HOTLINE *99*
VOTER REGISTRATION AND HIGHER EDUCATION ACT *99*

VI. OFFICES FOR MEDICAL EDUCATION 101

Admissions Office: *101*
Advisory Deans: *101*
Bursar's Office: *101*
Office of Medical Student Enrichment Program: *101*
Office of Curriculum and Assessment (OCA): *101*
Financial Aid Office: *102*
Offices for Graduate Studies: *102*
MSTP Admissions and Administration: *102*
Registrar's Office: *102*
Student Affairs Office: *102*
Student Services Center (SSC): *103*
FACILITIES FOR STUDENTS *103*
Lockers: *103*
Mailboxes and E-Mail: *103*
On-Call Room: *103*
Student Lounge (Room G-7647): *104*
STUDENT COMPUTING *104*

VII. STUDENT CONDUCT AND RESPONSIBILITIES 104

ALCOHOL USE ON SCHOOL PROPERTY *104*
BEHAVIOR AND PROFESSIONALISM *104*
Standards and Policies: *104*
Procedures: *105*
Honor Board Recommendations: *106*
INTIMATE RELATIONS *106*
POLICY ON INDUSTRY INTERACTIONS *108*
MEDICAL STUDENT HONOR CODE *109*
Definition and Purpose *109*
The Honor Code *109*
Expectations of Medical Students: *110*
Honor Board Composition *112*
Honor Board Members: *117*
PLAGIARISM *119*
REPORTING DISRUPTIVE EVENTS AT STRONG MEMORIAL HOSPITAL (SMH) *119*
VISITOR ATTENDANCE POLICY *120*

VIII. GUIDELINES FOR THE POLICIES, PROCEDURES AND REPORTING MECHANISM FOR THE MISTREATMENT OF MEDICAL STUDENTS 120

POLICIES FOR AN OPTIMAL LEARNING ENVIRONMENT 120

POLICY AGAINST DISCRIMINATION AND HARASSMENT (PADH) 125

MECHANISMS TO REPORT DISCRIMINATION, HARRASSMENT AND DISCRIMINATION OF A NON-STUDENT 126

MECHANISM TO FILE CONCERNS OF HARRASSMENT& DISCRIMINATION AGAINST A MEDICAL STUDENT 127

POLICY ON MEDICAL STUDENT WORK HOURS DURING PHASE 1 AND PHASE 2 129

POLICY ON MEDICAL STUDENT WORK HOURS DURING CLINICAL YEARS 130

IX. TUITION, DEFINITIONS AND RELATED POLICIES 130

TUITION AND FEES *130*
BILLING SCHEDULE AND ONLINE BILLING *131*
Assessment of Tuition and Fees: *131*
Student Financial Account: *131*
Past due accounts: *131*
Late Charge: *132*
Credit and Payments: *132*

Anticipated Credits in Lieu of Payment *132*
SMD STUDENT REFUNDS *133*
Accessing UR Student for Refunds: *133*
1098T Forms *133*
TUITION, REGISTRATION STATUSES, DEFINITIONS AND FEES *133*
Student Fellowship: *133*
Extended Time Fee (ETF): *134*
Official Leave of Absence (LOA): *135*
Broken or Lost Fees: *135*
Health Insurance: *135*
Mandatory Health Fee: *136*
Pagers: *136*
TUITION AND FEE REFUND POLICIES FOR STUDENTS WHO WITHDRAW, INITIATE AN OFFICIAL LEAVE OF ABSENCE, ARE MANDATED TO TAKE A LEAVE OF ABSENCE, OR ARE DISMISSED: *137*
Withdraw/Leave of Absence/Inactive Status Prior to the First Day of Classes *137*
Withdraw/Leave of Absence/Inactive Status (including Dismissal) On or After the First Day of Classes *137*
Student Fee Adjustments: *138*
Date of Separation: *138*
Students Receiving Title IV Federal Aid *138*
Short-Term Emergency Loans *138*
FEDERAL REGULATIONS CONCERNING PRIVACY AND CONFIDENTIALITY *139*

X. SUPPORT SERVICES 139

ADVISORY DEAN PROGRAM *139*
Review of Request to Change Advisory Deans: *140*
ACCOMMODATIONS *140*
Accommodations for Students with Disabilities: *140*
Procedures for Requesting ADA Accommodations: *141*
Appeals Process for ADA Accommodations *141*
Formal Process – Section 504/ADA Grievance Procedure: *142*
Other Medical School Accommodations for Temporary Health Issues/Concerns (non-ADA): *142*
Appeals Process for Accommodations for Temporary Health Issues/Concerns (non-ADA): *142*
Anticipated Absences for Health Care: *143*
ASSISTANCE FOR PREGNANT MEDICAL STUDENTS *143*
MEDICAL STUDENT REPRODUCTIVE PROTECTION POLICY *143*
Advising the School about Opting out of Training: *144*
Appeals Process: *144*
ACADEMIC SUPPORT SERVICES *145*
Peer Tutors: *145*
Study Skills Assistance: *145*
CHAPLAIN'S OFFICE *145*
UNIVERSITY COUNSELING CENTER (UCC) *146*
UNIVERSITY HEALTH SERVICE (UHS) *147*

I. ADMISSIONS

FALSIFICATION OF ADMISSIONS INFORMATION

A student who intentionally provides false or misleading information on an application to the School, but who is enrolled before that is discovered, is subject to discipline, up to and including dismissal from the School. The Medical Student Promotions and Review Board (MSPRB) shall decide what action is warranted. If the information is learned through a report of the American Medical College Admissions Service (AMCAS), and the student responded to or disputed that report under AMCAS' procedure, the student shall not be entitled to a hearing or appeal of any decision by MSPRB based on that report. Likewise, if the student had the opportunity, but failed to respond or dispute the AMCAS report under AMCAS procedure, he or she will have waived the right to a hearing or appeal at the University. If, however, the University learns, from a source other than AMCAS, that the student included false or misleading information on his or her application, the student shall have the same hearing and appeal rights following an adverse action. (see MSPRB Appeals)

Academic, Behavioral and Professionalism Expectations of Accepted Candidates:

The University of Rochester School of Medicine and Dentistry requires a candidate who accepts an offer of admission to complete the coursework and degree listed on the admissions application with a comparable level of academic performance and rigor. In addition, the medical school's standards of conduct and professionalism extend to each candidate who accepts Rochester's offer of admission. The behavioral and professionalism expectations described in the Medical Student Honor Code are shared during the admissions process and again in the offer letter. Consequently, the school retains the option to withdraw an offer of admission to a previously admitted individual due to failure to meet the academic requirements/standards and/or for behavioral and professionalism concerns that are inconsistent with the school's academic standards, standards of conduct, and Honor Code.

VERIFICATION OF ELIGIBLITY FOR MATRICULATION

Verification of Backgrounds of Matriculates:

Candidates who complete the application process for admission to the University of Rochester School of Medicine and Dentistry all sign a statement on the supplemental application that states, "I certify that the information in my application is accurate, complete and honestly presented. I also certify that any information submitted on my behalf, including letters of recommendation, is authentic."

As a part of the institutional commitment to protect the public and the patients who entrust Rochester students with their health care, the school will verify via an Association of American Medical Colleges (AAMC) facilitated process that the students who accept Rochester's Offer of Admission:

- Do not have a sex offender status
- Do not appear in a criminal search
- Do not have aliases

In addition to protecting the public and patients, the school is taking an additional step to verify applicant attestations regarding their identity and the reporting of fraudulent information. As is noted and agreed upon by the signing of the supplemental application, **any inaccurate information, misleading information or omission will be cause for the rescission of any offer of admission, or for discipline, dismissal, or revocation of degree if discovered at a later date.**

The school will coordinate additional required background check(s) (for example regarding child abuse) for educational experiences with children and other vulnerable populations.

Optional Background Checks:
Some URSMD students planning away electives may be asked by the host institution to submit updated criminal background check verification forms as a part of the application process for electives at other schools. Since there are more schools requiring background checks for enrolled and visiting students, the URSMD has put in place a plan to assist students in completing this process. Students will be billed the cost of this additional background check.

Students who anticipate needing a background check should contact the OMSEP Administrative Assistant. Upon receipt of the completed and signed release form, the Bursar's Office will charge the non-refundable service fee to the student's account.

It is important to understand that the URSMD will also review and use the background checks it receives for its own purposes. URSMD's discovery of any inaccurate, misleading or incomplete information in an application for admission, or its discovery of information that post-dates the student's application and is unacceptable to URSMD in its sole discretion, will be cause for a review of student status by the MSPRB, which could lead to disciplinary action, including but not limited to dismissal or revocation of the MD degree if discovered at a later date.

URSMD will send the original or a copy of the background check report to the other school(s) of medicine to which the student is applying to participate in away electives. URSMD is not responsible for any actions taken by any other school(s) to which the background check reports are submitted.
Please note: It generally takes two weeks to complete the background checks.

Review Committee:
A committee will review cases when adverse results are discovered from the background check, NYS Child Abuse Registry or the annual attestation that there has been a change in criminal background, arrest history and sex offender status.

Review Committee:

- Deirdre Flynn, JD, Senior Counsel for Litigation and Risk Management
- The Associate Dean for Admissions.
- Flavia Nobay, MD, Associate Dean for Student Affairs

With the exception of adverse results due to inaccurate information, misleading information and/or omissions (which will be grounds for an automatic Review Committee **rescission** of an offer of admission) students will have the right to appeal Review Committee dismissal recommendations to the Medical Student Promotions and Review Board (MSPRB), whose decision will be final.

Verification of Matriculates' Identity, Citizenship/Immigration Status and State of Residency:
Consistent with policies established by the U.S. Departments of Justice and Education and the Association of American Medical Colleges, the University of Rochester School of Medicine and Dentistry requires all matriculating students to verify their: (1) identity (2) United States citizenship or immigration status and (3) state of residency. Therefore, student must bring the following documentation to registration week:

Original (copies will not be accepted) and valid (not expired) documents that demonstrate identity, citizenship and residency, as outlined below.

1. **Documents that Establish Identity**, one of the following:
    a. State-issued driver's license (or State Identification Card) *with a photograph*
    b. Government issued Passport;
    c. United States Military Card *with a photograph*;
    d. Certificate of United States Citizenship;
    e. Certificate of Naturalization; or
    f. Alien Registration Card issued by United States Immigration to verify Permanent Residency.
2. **Documents that Establish Citizenship**, one of the following:
    a. Government issued Passport;
    b. Certificate of United States Citizenship;
    c. Certificate of Naturalization;
    d. Birth Certificate issued by a state, county, or municipal authority, bearing a seal or similar certification;
    e. Alien Registration Card issued by United States Immigration to verify Permanent Residency.
3. **Documents that Establish State Residency**, one of the following:
    a. State-issued driver's license (or State Identification Card) *with a photograph*
    b. State-issued registration certificate for a motor vehicle owned by the student; or
    c. State-issued voter registration card.

Students who fail to provide original and valid documentation as outlined above may not be permitted to register. Students will have until 3:00 p.m. of the final registration day to provide acceptable documentation.

If there are compelling reasons why a student cannot secure the matriculation documents by end of the last day of registration (prior to the first day of Phase 1 orientation), the student can formally request and may be granted an extension to submit the outstanding information and be given a provisional registration status. The request must be made in writing to the Associate Dean for Student Affairs and received before 3:00 pm EST on the Friday before the first day of orientation. Students who have outstanding matriculation requirements (transcripts, identity documents, etc.) will face an **Administrative Suspension.** In addition to being **charged a $100 fee**, there will be an administrative hold on their financial aid and no funds will be released until they are fully compliant with the matriculation requirements. If the missing information is not submitted by the extended deadline, the student will be denied the right to matriculate for that academic year.

For those students who are not US citizens, it is the student's responsibility to notify the SMD Registrar's Office of any updates or changes to citizenship or immigration status. Students must bring their new passport, permanent resident card, visa, or other immigration documentation to the SMD Registrar's Office for review and photocopying. Students cannot submit copies.

Verification of Academic Credentials - Receipt of Final Transcript:

The Medical School must receive an official transcript of each matriculating student's complete academic record before the student will be permitted to register. Exceptions are made only for those students who have completed required courses the **summer** before their matriculation. They will be permitted to register upon documenting the satisfactory completion of requirements via grade reports or unofficial copies of their transcripts. The official transcripts **must** be in the possession of the Registrar's Office no later than **January 1** to continue as a matriculated medical student. If not

received by that date, the student will be placed on a mandatory leave of absence until the end of the semester.

USE OF LEGAL NAME POLICY

All medical students will be required to use their **LEGAL NAME** on all official school documents and records, except as outlined below. A student's legal name is based on the verification of identification documents presented during registration. The institution will only amend a student's legal name based on legal change of name documentation.

If a student provides a preferred first name (preferred), the medical school will:

- Include it on course rosters, along with the student's legal first and last name [lastname, Firstname (Preferred)]
- Use it in the student's email address [preferred_lastname@urmc.rochester.edu]
- Use it in the Student Desk Reference used by faculty and students [Preferred Lastname]
- Use it on the student's name pin* worn on their white coat [Preferred Lastname]

* The identification badge issued by the medical center will include legal name only
The school reserves the right to exclude preferred first names that have inappropriate content.

II. ACADEMIC POLICIES, GUIDELINES AND PROCEDURES

ABSENCES ACADEMIC RESPONSIBILITIES

It is the student's responsibility to keep the faculty, course/clerkship directors, clinical team in clerkships and electives, their Advisory Dean, and the Associate Dean for Student Affairs informed about any anticipated absences from classes, clinical or other scheduled academic responsibilities. All absences (anticipated and emergency) must be reported by the student to the course/clerkship/elective director by email with the student's Advisory Dean included, and the Associate Dean for Student Affairs. Absences from required activities including Advisory Deans lunch meetings will be tracked by the school to identify patterns, which may indicate students, are in need of additional assistance and guidance.

In the event of any personal or family emergencies that result in students being absent from academic experiences, students are required to contact their Advisory Dean as soon as possible.

In some circumstances, absences may disrupt the continuity of patient care education experience and require makeup time that is greater than the time absent. Notation of absences not related to healthcare will be noted in narrative comments in the course or clerkship evaluation.

ABSENCES FROM COURSES

Attendance at whole class lectures is strongly encouraged, some specific all-class/large group activities may be required at the discretion of the course director. Students should consult the syllabus or ask the course director if they have questions. Attendance at small group sessions including but not limited to Problem Based Learning, Team Based Learning, skills sessions or at any exercise involving patients is required. Students must be present for the entire session. The overall grading for the courses may be based, in part, on attendance. Students who anticipate missing any required activities must contact the course director, their Advisory Dean, and the Associate Dean for Student Affairs, via URMC email, as soon as possible, and request to be absent from the course, required activity, or clerkship. This request must include the date of the absence and reason for the request. The course director will make the decision regarding the absence request. In some

instances, students may be required to make up the session or course work missed. The makeup activity is at the discretion of the course director and may be different from the original activity to ensure that the objectives have been met.

Students who anticipate absences from classes, clinical or other scheduled academic responsibilities for planned, short-term or continuity health care, must contact their Advisory Deans and the Associate Dean for Student Affairs. Students do not need to disclose the nature of their needs. Without requesting or revealing a student's diagnosis or health care needs, the Advisory Dean/ Associate Dean for Student Affairs will advise the course or clerkship director(s) about the student's excused absence. Students may be required to make up missed academic experiences.

If the nature and/or frequency of the release time in effect requires or results in a student not participating in required educational experiences, the MSPRB will be convened to evaluate the reasonableness of the requested release time and if granting such will substantially alter the depth and integrity of the educational requirements for University of Rochester medical students.

Students enrolled in courses, including special, reading or research electives, are expected to complete the coursework during the scheduled week(s). An Incomplete grade should only be given where there is a compelling reason, as defined by the Incomplete grade definition. Fourth year students should plan their residency interviewing for open slots in their schedule; they should not plan out of town or virtual interviews while taking a clerkship, required and/or elective clinical rotation.

ABSENCES FROM CLINICAL EXPERIENCES

Students on clerkships, required and elective clinical rotations **do not routinely** receive any time off from scheduled activities. Full attendance during all aspects of clerkships, required and elective clinical rotations is expected as part of fulfilling professional role obligations regarding educational and patient care responsibilities. Students should consult the syllabus or ask the clerkship/acting internship or elective director if they have questions about specific requirements/activities. The overall grading for the experience may be based, in part, on attendance.

Each required experience is scheduled by the prescribed number of weeks. These experiences are to be completed on a full-time basis within the timeframe appearing on the student's schedule. The requirements for the clinical program cannot be scheduled in overlapping dates including extramural electives. Students enrolled in courses, including special, reading or research electives, are expected to complete the coursework during the scheduled week(s).

Fourth year students should plan their residency interviewing for open slots in their schedule; they should not plan out of town or virtual interviews while taking a clerkship, required and/or elective clinical rotation.

ABSENCES FROM CLERKSHIPS

It is the student's responsibility to keep the clerkship directors, their Advisory Dean, and the Associate Dean for Student Affairs informed about all absences (anticipated or emergency) from classes, clinical or other scheduled academic responsibilities. Absences from required activities including Advisory Deans lunch meetings during Phase 3 will be tracked by the school to identify patterns, which may indicate students who are in need of additional assistance and guidance. (Effective: February 1, 2020)

Students who anticipate missing any required activities for personal or professional (nonhealthcare/emergency related) reasons must contact the clerkship director, their Advisory Dean, and the Associate Dean for Student Affairs, via URMC email, with as much notice as possible, and request to be absent from the required activity or clerkship. This request must include the date(s) of the absence and reason for the request.

Time up to two days away from each rotation (no more than one day away for rotations shorter than four weeks) may be granted by the clerkship director for **advanced professional and/or personal circumstances** when arranged with sufficient notice (see *Clerkship Absence Request Table* below for contacts). It is expected that the student making such a request will do so as much in advance as practical. In some instances, students may be required to make up the session or course work missed and this must be discussed with the clerkship director. The makeup activity is at the discretion of the clerkship director and may be different from the original activity to ensure that the objectives have been met. In some circumstances, absences may disrupt the continuity of patient care education experience and require makeup time that is greater than the time absent. Notation of absences not related to health reasons and/or emergencies may be noted in narrative comments in the course or clerkship evaluation. Longer time away will not be granted except under extraordinary circumstances and at the discretion of the clerkship director.

NOTE: This means that fourth year students should plan their residency interviewing for open slots in their schedule and they should not plan out of town or virtual interviews while fulfilling academic requirements.

In the case of **unexpected absences for urgent reasons** (e.g., unexpected health concerns, personal/family emergencies, crisis), the student must make every effort to notify the clerkship director, their Advisory Dean, and the Associate Dean for Student Affairs of their absence. Upon return to the clinical rotation, the student must notify the contacts above of their exact return date and must discuss the circumstances of the absence with the clerkship director, at which time any remediation of the absence will be determined based on the situation.

Students who anticipate absences from classes, clinical or other scheduled academic responsibilities **for planned, short-term or continuity health care**, must contact their Advisory Deans and the Associate Dean for Student Affairs. Students do not need to disclose the nature of their needs. Without requesting or revealing a student's diagnosis or health care needs, the Advisory Dean/Associate Dean for Student Affairs will advise the course or clerkship director(s) about the student's excused absence. Students may be required to make up missed academic experiences.

If the nature and/or frequency of the release time in effect requires or results in a student not participating in required educational experiences, the MSPRB will be convened to evaluate the reasonableness of the requested release time and if granting such will substantially alter the depth and integrity of the educational requirements for University of Rochester medical students.

Each required clerkship experience is scheduled by the prescribed number of weeks. These experiences are to be completed on a full-time basis within the timeframe appearing on the student's schedule. The requirements for the clinical program cannot be scheduled in overlapping dates including extramural electives.

Students enrolled in clerkships are expected to complete the coursework during the scheduled week(s). An Incomplete grade should only be given where there is a compelling reason, as defined by the Incomplete grade definition. Fourth year students should plan their residency interviewing for open slots in their schedule; they should not plan out of town or virtual interviews while taking a clerkship, required and/or elective clinical rotation.

Phase 4 clinical course directors recognize that some required courses may need to be taken during residency interview season and want to support students' future careers. Students should keep in mind that there are often events around scheduled interviews either the night before or after interviews that may impact clinical work. Course directors have agreed that if students need to do an interview during a clinical rotation, the time will need to be made up and must still meet the other requirements above.

Clerkship Absence Request Table

The reasons for absences will never be shared with the clinical team for any type of absence
The clerkship coordinator will be made aware of absences for scheduling purposes

Type of Absence	Pre-Approval Required	Examples	Number of days allowed	Contact for request	Decision maker	Remediation Required
Emergency (No advanced notice needed)	No	Unexpected Health issues, personal/family emergencies/crisis	Situationally Dependent	To: Clerkship Director Associate Dean for Student Affairs Advisory Dean	Clerkship Director	Situationally Dependent
Personal (4-wk advanced notice)	Yes	(Expected) Weddings, graduations, tournaments, planned personal health maintenance	Max up to 2 days per clerkship greater than 4 weeks with permission ***2 days includes personal and professional combined**	To: Clerkship Director CC: Clerkship Coordinator Associate Dean for Student Affairs Advisory Dean Michelle Knotowitcz	Clerkship Director	To be negotiated with Clerkship Director
Professional (4-wk advanced notice)	Yes	Conferences, board exams, (not including interviews)	Max up to 2 days per clerkship greater than 4 weeks with permission ***2 days includes personal and professional combined**	To: Clerkship Director CC: Clerkship Coordinator Associate Dean for Student Affairs Advisory Dean Michelle Knotowitcz	Clerkship Director	To be negotiated with Clerkship Director

**If a student misses more than 2 days of a clerkship in total (for personal, professional, and/or emergency reasons) they will be required to make up missed time.*

Approved by the Curriculum Steering Committee July 20, 2021
Revision Approved by the Curriculum Steering Committee March 21, 2023

NOTIFICATION WHEN STUDENTS HAVE MEDICAL EMERGENCIES

University Health Service (UHS) may, if given consent by the student, notify the Associate Dean for Student Affairs or the Senior Associate Dean for Medical Student Education when a student is admitted to a hospital or has a medical or mental health emergency. The student will determine what information if any will be shared with the school. The medical school will also alert UHS when a student is in route to or admitted to a medical facility.

ACADEMIC PERFORMANCE AFFECTED OR CAUSED BY A DISABILITY

If a student claims that his/her/their academic performance has been affected or caused by a disability, he or she must provide documentation from an appropriately licensed diagnostician and/or medical professional of the disability to the Associate Dean for Student Affairs. Such documentation must also include suggested accommodations for the student. This information may be shared with the MSPRB and if not satisfied with the quality of the evaluation, the qualifications of the evaluator, or if other questions/concerns arise, the MSPRB may require another professional evaluation of the student by a professional of its choosing, at the University's expense. MSPRB, in consultation with the Associate Dean for Student Affairs will consider accommodations suggested by the student or any person evaluating the student and will decide which, if any, are reasonable and may be made. In all cases, MSPRB may suspend the academic or clinical activities of a student it deems may be a danger to him or herself or others.

If the student him/herself puts his/her/their medical or psychiatric condition at issue, he/she/they must release his/her/their medical records or a summary attestation by a licensed provider to the MSPRB to support this claim, or it cannot be considered. The MSPRB may choose to have the records reviewed by providers at the University Health System (UHS) and/or the University Counseling Center (UCC) and request they provide an assessment.

INFORMATION TECHNOLOGY ACCEPTABLE USE POLICY

Scope

This policy details specific requirements for the use of all computing and network resources at the University of Rochester, including electronic and hardcopy data, information, and information assets. Information resources and technology at the University of Rochester support the educational, patient care, instructional, research, and administrative activities of the University, and the use of these resources is a privilege that is extended to members of the University of Rochester community. As a user of these services and facilities, you have access to valuable University resources, to legally restricted and/or confidential information, and to internal and external networks. Consequently, it is important for you to behave in a responsible, ethical, and legally compliant manner.

In general, acceptable use means ensuring that the information resources and technology of the University are used for their intended purposes while respecting the rights of other computer users, the integrity of the physical facilities, the confidentiality of data, information, and information assets, and all pertinent license and contractual agreements. If an individual is found to be in violation of the Acceptable Use Policy, the University may take disciplinary action, including restriction of and possible loss of network privileges or more serious consequences, up to and including suspension, termination, or expulsion from the University. Individuals may also be subject to federal, state, and local laws governing many interactions that occur on the University's networks and on the Internet. These policies and laws are subject to change as state and federal laws evolve.

Purpose
This policy applies to all users of computing resources owned or managed by the University of Rochester. Individuals covered by the policy include, but not limited to, University faculty and visiting faculty, physicians, staff, students, alumni, contractors, volunteers, guests or agents of the administration, and external individuals and organizations accessing network services via the University's computing facilities.
Computing resources include all University-owned, licensed, or managed hardware and software, data, information, information assets, University assigned user accounts, and use of the University network via a physical or wireless connection (including RESNET), regardless of the ownership of the computer or device connected to the network.

These policies apply to technology whether administered in individual departments and divisions or by central administrative departments. They apply to personally owned computers and devices connected by wire or wireless to the University network, and to off-site computers that connect remotely to the University's network services.

Requirements
In making acceptable use of resources, individuals covered by this policy must:

- Use resources only for authorized purposes.
- Protect their User IDs, digital / electronic signatures, other authentication and authorization mechanisms, and systems, from unauthorized use. Each individual is responsible for all accesses to University information resources and technology by their User IDs, digital/electronic signatures, and other authentication and authorization mechanisms, and for any activity originating from their systems.
- Access only information to which they have been given authorized access or that is publicly available.
- Protect electronic and hardcopy data, information, and information assets classified as High-Risk or Moderate-Risk (i.e., "confidential"), in compliance with the Data Security Classification policy, published University security and other policies, and applicable Federal, State, and Local laws.
- Use only legal versions of copyrighted software in compliance with vendor license requirements.
- Be considerate in the use of shared resources. Refrain from monopolizing systems, overloading networks with excessive data, degrading services, or wasting computer time, connection time, disk space, printer paper, manuals, or other resources.
- Restrict personal use of the University's information resources and technology to incidental, intermittent and minor use that is consistent with applicable law and University Policy.
- Include only material germane to University matters in University, school, or departmental electronic communications, such as e-mail, Websites, blogs, etc. *** Personal web sites, chat rooms, web logs (also known as blogs) and other forms of publicly available electronic communications hosted on or linked from University information resources and technology must comply with this Acceptable Use Policy and prominently include the following disclaimer: "The views, opinions and material expressed here are those of the author and have not been reviewed or approved by the University of Rochester."*
- Store confidential data only in University approved secured locations.

- Transmit / transport confidential data, information, and information assets only via University approved secured mechanisms.
- Use Bring Your Own Device (BYOD) in only University approved means.
- Revise passwords and other authentication and authorization mechanisms suspected of compromise.
- Report identified or suspected security incidents to the Information Security Office or Information Technology (IT) Support/Help Desk.

In making acceptable use of resources, individuals covered by this policy must not:

- Gain access to or use another person's system, files, or data without permission (note that permission from an individual user may not be sufficient – some systems may require additional authority).
- Reveal a password or other authentication and authorization means to any other individual, even those claiming to be an IT support technician (over the phone or in person).
- Use computer programs to decode passwords or access-control information.
- Attempt to circumvent or subvert system or network security measures.
- Engage in any activity that is intended to harm systems or any information stored thereon, including creating or propagating malware, such as viruses, worms, or "Trojan horse" programs; disrupting services; damaging files; or making unauthorized modifications to University data.
- Make or use illegal copies of copyrighted software, store such copies on University systems, or transmit them over University networks.
- Use e-mail, social networking sites or tools,or messaging services in violation of laws or regulations or to harass or intimidate another person, for example, by broadcasting unsolicited messages, by repeatedly sending unwanted mail, or by using someone else's name or User ID. Waste shared computing or network resources, for example, by intentionally placing a program in an endless loop, printing excessive amounts of paper, or by sending chain letters or unsolicited mass mailings.
- Use the University's systems or networks for commercial purposes; for example, by selling access to your User ID or by performing work for profit with University resources in a manner not authorized by the University.
- State or imply that they speak on behalf of the University or use University trademarks and logos without authorization to do so.
- Violate any applicable laws and regulations or University policies and procedures that govern the use of IT resources.
- Transmit commercial or personal advertisements, solicitations, endorsements, or promotions unrelated to the business of the University.
- Use "auto-forward" rules to send business e-mail to a non-University e-mail account if the e-mail contains any legally restricted, and/or confidential information.
- Send or receive legally restricted and/or confidential information via the Internet without making reasonable accommodations for the security of such information.

- Modify, without proper authorization, any of the University's information resources and technology, including the work products of others.
- Store confidential data on local drives, flash drives, or other portable or external media.

Above is from:
https://tech.rochester.edu/policies/acceptable-use-policy/#:~:text=In%20general%2C%20acceptable%20use%20means,and%20information%20assets%2C%20and%20all

COMPUTING AND ELECTRONIC COMMUNICATIONS POLICY

Scope
Faculty, Staff, and Students at the University of Rochester School of Medicine and Dentistry.

The University of Rochester Computer System includes: computers, communications networks, computer accounts, web pages, network access, central computing and telecommunications facilities, and related services. The Computer Systems at the University of Rochester School of Medicine and Dentistry are maintained by Miner Library Computing Center (585-275-6865) and the Information Systems Division (585-275-3200).

Policy Statement
This policy governs the use of computers, networks, and related services at the University of Rochester School of Medicine and Dentistry and Medical Center.

Users of these resources are responsible for reading and understanding this policy. Computers and networks can provide access to resources on and off campus, as well as the ability to communicate with other users worldwide. Such access is a privilege and requires individual users to act responsibly. In addition to complying with all relevant laws, regulations, contractual obligations, University users must comply with all policies and procedures to protect the integrity/safety of the networks, computers, and related services and to respect the rights of others. .

The University reserves the right to deny, limit, revoke, or restrict computing privileges and access to the Computer System at ISD's discretion. In addition, alleged violations of this policy or violation of other University policies in the course of using the Computer System may result in an immediate loss of computing privileges and may also result in the referral of the matter to the University Judicial System or other appropriate authority.

All messages, data files and programs stored in or transmitted via the University's Computer System ("Electronic Communications") are University of Rochester records. The University will not, without user permission, monitor, review or otherwise access Personal Communications sent or received (e.g., email), created or stored on Information Technology Resources, except pursuant to the Access Procedures set forth in Section II of the University IT Policy, which permits access when determined reasonable by a senior administrative officer or for Information Technology Management.

Reporting Violations
It is the responsibility of all users of the Computer System to notify the Information Systems Division (ISD) about violations of laws and University policies in connection with the use of the Computer System, as well as about potential loopholes in the security of the Computer System. The user community is expected to cooperate with ISD and Miner in operation of the Computer Systems, as well

as in the investigation of Computer System misuse or abuse. Any concerns, complaints, or reports of misconduct with regard to the Computer System should be reported to Miner Library Computing Center (585-275-6865) or Student Services (585-275-7245).

Computer Accounts
Computer accounts are issued to University faculty, staff, and students, and other individuals at the discretion of ISD, for University purposes. These accounts must not be used for commercial purposes.

Every computer account issued by the University is the responsibility of the person in whose name it is issued. Passwords are intended to help prevent unauthorized access and may **not** be shared. That individual must keep the account secure from unauthorized access by keeping the password secret, by changing the password often, and by reporting to ISD when anyone else is using the account without permission. The contents of all accounts are subject to access and disclosure by the University as set forth in this policy.

Electronic Communications
University of Rochester has established email as a primary vehicle for official communication with students. Emergency notifications, educational dialog, research and general business correspondence are all consistently enhanced in institutions of higher learning where email policies exist and are supported by procedures, practice and culture.

An official email address is established and assigned by Miner Library for each registered student.

Students are expected to maintain their accounts and check their email daily so that new mail will be properly received and read. A student's failure to receive and read University communications delivered to his/her/their official email address in a timely manner does not absolve that student from knowing and complying with the content of such communications.

While the automatic forwarding of emails from URMC email servers is **not** allowed, students are free to manually redirect email from their URMC email address to another address (e.g. @gmail.com, @aol.com), but they do so at their own risk. The University is not responsible for the handling of email by other service providers. Having email redirected does not absolve students from knowing and complying with the content of the communication sent to their official University email address.

Improper Use of the Computer System
This policy exists in conjunction with other University, School of Medicine and Dentistry, and regulatory policies. The policy is not in lieu of, nor does it replace or supersede existing University, School of Medicine and Dentistry, and/or regulatory policies and procedures. In addition, the Medical Student Promotions and Review Board (MSPRB) retains the right to review professionalism, behavioral and other student cases resulting from the improper use of the computer system directly,
(independent of the Honor Code process) where health and safety concerns exist and in instances, determined by the MSPRB, to be egregious violations of the Medical School's professionalism standards.

Prohibited Behavior
Storing, transmitting or printing any of the following types of Electronic Communications on the Computer System is prohibited:

- Any material that contains electronic protected health information (ePHI). Any unauthorized access or transmission of ePHI is a direct violation of HIPAA Security. You are expected to

read and abide by the HIPAA regulations outlined at http://intranet.urmc-sh.rochester.edu/policy/HIPAA/index.asp.

- Material that infringes upon the rights of another person;
- Material that is obscene; material that consists of any advertisements for commercial enterprises;
- Material or behaviors that violate the University of Rochester Code of Student Conduct or other University policies; or,
- Material that may injure someone else and/or lead to a lawsuit or criminal charges.

Harassment
Harassing others by sending annoying, abusive, profane, threatening, defamatory or offensive messages is prohibited. Some examples include: repeated unnecessary messages; obscene, threatening, sexually, ethnically, racially, or religiously offensive messages; continuing to send messages after a request to stop; and procedures that hinder a computer session.

Destruction, Sabotage
Intentionally destroying anything stored on the Computer System, including anything stored in primary or random access memory is prohibited. Deliberately performing any act that will seriously impact the operation of the Computer System. This includes, but is not limited to, tampering with components of a local area network (LAN) or the high-speed backbone network, otherwise blocking communication lines, or interfering with the operational readiness of a computer or peripheral.

Evasive Techniques
Attempts to avoid detection of improper or illegal behavior by encrypting electronic messages and computer files are prohibited.

Unauthorized Use/Access
Using the Computer System to gain or attempt to gain unauthorized access to remote computers is prohibited. Other prohibited behaviors include: actions that give simulated sign off messages, public announcements, or other fraudulent system responses; possessing or changing system control information (e.g., program status, protection codes, and accounting information), especially when used to defraud others, obtain passwords, gain access to and/or copy other user's electronic communications, or otherwise interfere with or destroy the work of other users.

E-Mail Forgery
Forging e-mail, including concealment of the sender's identity, is prohibited.

Theft/Unauthorized Use of Data
Data created and maintained by the University, or acquired from outside sources, are vital assets of the University and may be subject to a variety of use restrictions. Theft of or unauthorized access to data is prohibited.

Program Theft
Unless specifically authorized, copying computer program(s) from the Computer System is prohibited.

Viruses, etc.
Running or installing on the Computer System, or giving to another, a program that could result in the eventual damage to a file or the Computer System, and/or the reproduction of itself, is prohibited. This prohibition includes, but is not limited to, the classes of programs known as computer viruses, Trojan horses, and worms.

Security
Attempting to circumvent data protection schemes or uncover security loopholes is prohibited.

Wasting Resources
Performing acts that are wasteful of computing resources or that unfairly monopolize resources to the exclusion of others is prohibited. These acts include, but are not limited to: sending mass mailings or chain letters; creating unnecessary multiple jobs or processes; generating unnecessary or excessive output or printing; or, creating unnecessary network traffic.

Accessing User Accounts
Attempting to access or monitor another user's electronic communications is prohibited. Accessing, reading, copying, changing, disclosing, or deleting another user's messages, files or software without permission of the owner is prohibited.

Recreational Use
Recreational use of the Computer System that interferes with the ability of other users to complete their work is prohibited. In particular, if you are using a machine in a Public Computer Lab for recreational purposes, and others are waiting to use a machine for academic purposes, you are expected to give up your seat.

Public Computer Labs
Public Computer Labs are part of the Computer System operated by ISD or Miner Library and are a shared University resource available on a first-come, first-served basis. A valid University ID card is required to use the Labs. Food and beverages are prohibited in the Labs. Labs may be reserved for exclusive use by a class or group; schedules are posted on each Lab's door and published electronically to various new groups every week. Some Labs are provided by departments other than ISD or Miner Library; contact those departments for their additional usage guidelines.

Mail Distribution Lists
Mail Distribution Lists (often called LISTSERV lists) facilitate E-mail discussions on specified topics. University of Rochester faculty, staff, and students may request to sign up for list maintenance and membership, and have the discretion to control list content. List owners should not add subscribers to their list without the knowledge and consent of the subscriber to be added.

The University does not monitor the content of Mail Distribution List e-mail, except as otherwise provided in this policy, and is not responsible for the content of such messages. However, the University may terminate lists that consume excessive resources or are no longer relevant to the purposes of the University. In addition, the University may take action where lists violate this computing policy or other University policies. Posting of material unrelated to a list's usual content may be prohibited in the discretion of the list's owner. Posting unrelated material to multiple lists ("spamming") will be grounds for account revocation and other disciplinary action.

General e-mail announcements to the University community are limited to those messages that concern University business and are deemed to be of the greatest interest to the most recipients.

Cloud Storage
The University has a Business Authorization Agreement (BAA) only with Box.com. Box.com is provided to you free of change and with unlimited storage. Students with Box.com accounts may store data containing PHI\PII within their URMC managed user Box.com accounts. Students are **NOT** permitted

to store protected data on any other cloud storage services such as iCloud, iCloud Drive, Dropbox, Google Drive, etc. Students who have iPads and\or iPhones are responsible for ensuring that no protected data is inadvertently backed up to iCloud as part of their regular device backup settings, as well as students who have Android phones and tablets that back up to Google Drive.

Backup Copies
Data on the Computer System are subject to back up at the discretion of the University.

Deleting Electronic Communications
Users of the Computer System should be aware that electronic Communications are not necessarily erased from the Computer System when the user "deletes" the file or message. Deleting an Electronic Communication causes the Computer System to "forget" where the message or file is stored on the Computer System. In addition, Electronic Communication may continue to be stored on a backup copy long after it is "deleted" by the user. As a result, deleted messages often can be retrieved or recovered after they have been deleted.

Computer Law
Under Article 156 of the New York State Penal Code, criminal sanctions are imposed for offenses involving computers, software, and computer data. The offenses include unauthorized use of the computer, computer trespass, computer tampering, and unlawful duplication or possession of computer related material. Improper or unauthorized access to, or release or manipulation of, any student record in such form is included in such offenses.

All computers, software, data, business records, and student records of the University in any form, including electronic or paper, belong to the institution. Any person committing an offense with respect to them may be subject personally to criminal sanctions and other liability. Federal laws may also apply to some circumstances.

Copyright Infringement
The Copyright Laws of the United States prohibit unauthorized copying. Violators may be subject to criminal prosecution and/or be liable for monetary damages.
In general, you may not copy, download, install or use software on the Computer System without acquiring a license from the publisher. (For example, you may not copy it from a friend or other source.) Furthermore, you may not copy the University's software, unless such copying is specifically permitted by the license agreement.

The ability to download documents from the Internet, and to attach files to E-mail messages, increases the opportunity for and risk of copyright infringement. A user can be liable for the unauthorized copying and distribution of copyrighted material through the use of download programs and E-mail. Accordingly, you may not copy and/or distribute any materials of a third party (including software, database files, documentation, articles, graphics files, audio or video files) unless you have the written permission of the copyright holder to do so. Any questions regarding copying or downloading should be directed to ISD or Miner Library’s Helpdesk.

Medical Student iPad Devices
Medical Students receive an iPad during their orientation week. This device is expected to be used for study, however they are a personal device. Students are responsible for damage to, or theft of, the device. Students are expected to bring their iPad with them to classes and small group sessions. iPad use falls within the Computing and Electronic Communications Policy.

Mobile Device Management (MDM)
Starting with the Class of 2025, SMD will be using Mobile Device Management (MDM) to support the configuration and maintenance of student iPad devices. MDM enrollment is a requirement for the duration of the MD program. Upon completion of the program, student iPad devices will be removed from MDM.

Some of the MDM features SMD will use include:

- Configuring email
- Reducing manual steps involved in iPad setup during distribution
- Pushing out paid apps without requiring students to purchase them
- Pushing out free apps required for the MD program

Apple sets important security rules for their devices. When an iPad is managed by an MDM:

- Even if an administrator wants it, no management tool is allowed to access the camera or microphone of any Apple device.
- IT administrators have no access to browsing history.
- MDM does not provide the ability to copy an individual's files.
- MDM will not empower administrators to log in or write to a text file to an student's iPad.
- While MDM admins may locate a lost device, the individual user gets a notification that this has happened.
- The MDM will not allow for continuous device tracking, as this is explicitly against Apple's privacy and security guidelines.

Zoom Professionalism & Etiquette
When attending a course or meeting via Zoom, students are expected to present themselves in the best light possible as a student at the University of Rochester School of Medicine and Dentistry by following these tips on Zoom professionalism and etiquette.

- Always be on time to Zoom courses/meetings.
- Make sure that the surrounding space is quiet, clean, and has an appropriate background. If this is not possible please use a virtual background.
- Ensure the space has appropriate lighting to allow the student to be seen clearly.
- Dress appropriately (No pajamas of other clothing that would not be worn to school). Sit up and look into the camera when using video. Envision sitting in a class with other students.
- Always make sure the video is on when attending all Zoom courses/meetings.
- Some students may be using their iPad to both participate in the course and to write course notes. Using the iPad for both activities turns off the iPad camera. Using one device to participate in the Zoom session and another to take notes is ideal. This allows for the course instructors to see each student and to respond to any non-verbals that might indicate confusion or questions about course content. If students are not able to or don't have access to two devices this is understood by the school and will not be considered a professionalism issue.
- Background noise is distracting. When not sharing, devices should be muted.
- Pay attention to the video, microphone, and screen sharing settings to avoid any embarrassing mistakes. Take care of "private things" before or after the meeting or during breaks.
- Always keep comments in the chat appropriate.
- Don't multi-task. Be present.

ASSESSMENT POLICY

Courses

Students must pass both tutorials/small groups (quality of participation in PBLs/labs/conferences) and exams (numerical scores) to pass courses.

If a student begins but does not finish an exam (including but not limited to written, standardized patient, laboratory practical) due to any student related circumstances (including illness), the exam is graded at the point that it is stopped, regardless of disability, regardless of accommodations.

Students receive and are assigned grade of Pass, Pass Marginal, Fail or Incomplete within six weeks of the end of each course.

Students must pass all courses and summative assessments to advance to the next phase. Advancement is determined by the Medical Student Promotions and Review Board.

Clerkships and Acting Internships

Clerkship grades will be determined from both individual evaluations of the student (narrative and numeric information) and objective examinations.

Acting Internships grades will be determined from individual evaluations of the student (narrative and numeric information) and may include objective examinations.

If a student begins but does not finish an exam (including but not limited to written, standardized patient, laboratory practical) due to any student related circumstances (including illness), the exam is graded at the point that it is stopped, regardless of disability, regardless of accommodations.

Students receive and are assigned grade of Honors, High Pass, Pass, Pass Marginal, Fail, TBD, or Incomplete within six weeks of the end of each clerkship.

Students must pass all clerkships and summative assessments to advance to the next phase. Students must pass acting internships to graduate. Advancement and graduation are determined by the Medical Student Promotions and Review Board.

Approved by the Curriculum Steering Committee on June 22, 2021.

Reducing Distraction in the Test Environment Policy

To reduce distractions in the test environment, students should arrive at least 15 minutes before the published start time of assessments and exams to facilitate having everyone settled before the exam begins. Students arriving after the published start time will only be allowed access at the discretion of the test administrator. Students who arrive late and are allowed access to the examination must complete the examination in the timeframe designated and will not be given additional or extended time because of their late start (For example, for a two-hour exam that begins at 8:00 am, a student arriving at 8:30 will have 90 minutes to complete the exam). Please note there is **not** an obligation to offer makeup exams for students denied access due to late arrival.

With the exception of students with approved accommodations, no food or drink will be allowed in the testing locations during exams.

Approved by the Curriculum Steering Committee on July 20, 2021

Mid-course and Mid-clerkship Feedback Policy

Mid-course Feedback

For courses of four weeks duration or longer, students must receive formative feedback on their performance. Formative feedback may be in the form of practice questions, formative quizzes, or verbal feedback from laboratory, problem based learning or small group leaders.

Mid-clerkship Feedback

One-on-one formative feedback on strengths and areas for improvement must be given to each student at least once during each clerkship by the clerkship director or their designee. The goal is to ensure that students have an opportunity to address areas in need of attention and are better prepared when they move to the next clerkship having received formative feedback on performance during the current clerkship.

The receipt of mid-clerkship feedback must be documented by the student in MedHub and by the clerkship director in MedSIS. Monitored of the successful completion of mid-clerkship feedback is done by both the clerkship director and centrally by the Office of Curriculum and Assessment. Reports on mid-clerkship feedback are reviewed by the appropriate Instruction Committee and the Curriculum Steering Committee twice annually.

Approved by the Curriculum Steering Committee on June 22, 2021.

Narrative Assessment Policy

A narrative assessment of students for formative and/or summative purposes will occur in all medical school courses where their length and structure allow for a narrative assessment. The school requires a narrative summary for all courses of four weeks of length or longer. The course narrative summary is entered into MedSIS.

All core medical school clerkships, electives, and acting internships will have a narrative component in the final grade report.

The completion of narrative assessments will be monitored by the Office of Curriculum and Assessment and shared with the appropriate Instruction Committee and the Curriculum Steering Committee twice each academic year.

Approved by the Curriculum Steering Committee on June 22, 2021.

Policy Requiring Participation of Non-faculty in Programs to Teach and Assess Medical Students

All graduate students, medical students, residents, and other individuals who are not faculty are required to participate in an orientation program or in a teacher development program where they will gain knowledge and skills in the teaching and/or assessment of medical students. Orientation programs can be conducted by the course or clerkship director to focus on individual skills in the instruction of the objectives of the course or clerkship as well as the assessment of student achievement of these objectives. Examples of formal programs include but are not limited to Residents as Teachers programs and department or residency program based instruction.

Monitoring of resident participation in formal programs to teach and assess medical students is the responsibility of the individual course or clerkship director with information sent to the Office of Curriculum and Assessment which is responsible for central oversight.

Approved by the Curriculum Steering Committee on March 22, 2022

Policy on Medical Student Supervision and the Delegation of Responsibility to Medical Students

The University of Rochester School of Medicine and Dentistry values the role of learners in the provision of excellent clinical care. We also embrace the educational principle of graded responsibility to maximally support learners in their development of clinical expertise. In fulfilling the essential responsibility we have to our patients, we must ensure that medical students receive appropriate supervision for all of the care they provide during their training. Appropriate supervision is also critical to performing assessments of the learner and providing meaningful feedback.

URSMD medical students must be appropriately supervised when participating in required or elective clinical activities. Medical students may not provide care in an unsupervised fashion.

Primary supervisors must have a faculty appointment. Secondary supervisors in the teaching and assessment role may include residents, fellows and licensed health care professionals supervising an activity within their scope of expertise or practice.

Students may be supervised at one of two broad levels as determined by the supervisor:

- Direct observation: the supervisor is present with the student and the patient
- Immediately available Indirect Supervision: the supervisor, while not in the presence of the student and/or patient, is immediately available to the learner and/or at the site of care to provide direct supervision

Determination of appropriate level of supervision is made by the supervisor, based on many factors, including:

- Level of training of the student
- Education objectives of the course, clerkship, acting internship, or elective
- Previous experience and skill of the student with the clinical activity and setting
- Familiarity of the supervisor with the abilities of the student
- Acuity of activity and level of risk to patient

Students may not perform procedures without direct supervision.

Students must be directly observed by a primary or secondary supervisor while performing an intimate exam which is within the supervisor's scope of expertise or practice. Intimate exams include genitourinary, rectal, and breast exams.

Procedure for assuring adherence:

The supervisor reviews and independently verifies all student findings, assessments, and care plans, and documents this review.

It is the primary supervisor's role to ensure that any secondary supervisors who are engaged in clinical teaching and/or supervising any student are acting within their scope of practice.

The director of the course, clerkship, acting internship, or elective is responsible for communicating policies and procedures related to supervision to faculty and students participating in their curriculum, for monitoring compliance with the policies and procedures, and for reporting any deviations from the policy to the medical school.

Students with concerns about level of responsibility or supervision are encouraged to discuss this with either the course, clerkship, acting internship, or elective director, the Associate Dean for Student Affairs, their Advisory Dean, or the Senior Associate Dean for Medical Student Education. Students can also utilize existing patient safety reporting systems to report concerns.

Approved by the Curriculum Steering Committee on March 22, 2022.

DOUBLE HELIX CURRICULUM—TRANSLATIONS AND TRANSITIONS: GRADES

COURSES AND ELECTIVES

Phase 1, Phase 2, 3rd, and 4th Year Courses
Courses are graded: Pass/Pass Marginal/Fail/Incomplete/Withdraw/Withdraw Failing. Students who perform in the top 10% of their class by criteria determined by the course director(s) and outlined in the syllabus will have a designation of "Letter of Achievement." This is not noted on the official transcript nor in the Medical Student Performance Evaluation (MSPE) but is made available to the Alpha Omega Alpha Honor Society selection committee.

All grades must be submitted within six weeks of the end of the course.

Third and Fourth Year Electives
Electives are graded: Pass/Pass Marginal/Fail/Incomplete/Withdraw/Withdraw Failing

The following grade definitions will be used for courses and electives:

Pass (P) - Fully satisfactory performance

Pass Marginal (Pm) - Must be remediated to a fully satisfactory Pass. A Pass Marginal can only be remediated to a grade of Pass. The Pass Marginal grade is for internal tracking purposes. A

remediated Pm grade will be reflected on the transcript of an enrolled student or a graduate as a Pass (P)**.**

Exceptions

- Pm grades that have **not** been remediated **before** a student withdraws, is dismissed or status as a medical student ends, will be reflected on the transcript and in the permanent record as grades of **Incomplete (I)**
- When preparing the enrollment history of a student who has withdrawn, been dismissed or whose status has ended, the school will report Pm grades of remediated courses. The transcript will retain the remediated grade(s) of **Pass.**

Withdraw (W) - Students who start a course and withdraw before completing the course, will be assigned a grade of W on their transcripts. Students will NOT receive partial credit for the weeks completed.

Withdraw-Failing (WF) – When a student has been enrolled for at least 50% of a course and elects to withdraw with a failing performance, a grade of WF should be assigned. If and when the course is retaken and completed, the student will be assigned the grade earned in the retaken course. The transcript will have the WF grade as well as the grade assigned in the retaken course. For example: 2014 Human Structure and Function Grade WF; 2015 Human Structure and Function Grade P**.**

Fail (F) –A Double Helix Curriculum course grade of "Fail" (F) **cannot** be remediated. The course must be repeated. The transcript will record the grade of “Fail” under the academic year when the course was taken. Successful completion of a failed course will be noted by a “Pass” on the transcript under the academic year when the course was re-taken. Pass is the highest grade that can be assigned.

Incomplete (I) - The faculty retains the option to assign grades of incomplete for students who are doing satisfactory work and who cannot complete the course requirements in the appropriate timeframe for compelling reasons. Compelling reasons include circumstances beyond the student’s control (health, an excused absence, personal emergency, etc.). After the course requirements are fulfilled, only the final grade will appear on the transcript.

NOTE: Students must receive passing (Pass) grades in all courses before being promoted to the next level. Students who retake courses must achieve fully satisfactory grades (Pass) or face dismissal recommendations by the MSPRB. A Pass marginal grade is not a fully satisfactory grade. Students may repeat a course, clerkship, or a year only once. If a student fails to earn fully passing grades (Pass) in a re-taken course, clerkship, or entire year, the student will be dismissed from the school by the MSPRB.

REEXAMINATION AND REMEDIATION POLICY FOR KNOWLEDGE-BASED EXAMINATIONS IN PHASE 1 AND PHASE 2 COURSES

Purpose:

The purpose of this policy is to establish a standardized set of guidelines and procedures for students who are required to remediate an examination in Phase 1 and 2 courses. The policy aims to ensure that students who marginally pass or fail have an equitable opportunity to remediate their knowledge assessment to meet the required academic standards for promotion.

This policy does not apply to the Primary Care Clerkship (PCC), which follows the remediation processes of medical school clerkships.

Eligibility for Examination Remediation:

Students who marginally pass or fail a course examination, a block of a course, or receive a final grade of Pass Marginal in a course based upon the standard for passing as outlined in the course syllabus may be eligible for examination remediation at the discretion of the course director. A final grade of fail in a course cannot be remediated and the course must be repeated.

Remediation Process:

Examination remediation will involve a closed book, proctored exam. The reexamination will include questions from the course question bank or new questions that cover similar content of the original exam. The number of questions in the remediation examination should be at least 75% of the length of the original examination. The time to complete the remediation exam should be no less than 75% of the time allocated for the original exam. The criteria for passing (percent correct) should be the same as the original examination.

Students will have one opportunity to remediate a failed examination. If remediation is failed, the student will fail the course.

Timing and Scheduling:

Students may take an examination remediation no sooner than one week after the marginal passed/failed exam. Per school policy, students cannot remediate an exam/course/clerkship while they are enrolled in a course/clerkship, however students can remediate deficiencies in Phase 2 during Transition to Licensure. For Phase 1, the timing of course remediation activities is at the discretion of the course director(s), but must be successfully completed before July 15.

For all Phase 2 students, the timing of course remediation activities is at the discretion of the course director(s), but must be successfully completed before May 31st or 7 calendar days (whichever is earlier) before first day of Phase 3. This applies to all students including students who are pursuing a student fellowship or the PhD portion of the MD/PhD program.

Inability to successfully remediate by these deadlines will prevent the student from advancing to the next Phase of the curriculum, entering a student fellowship, or progressing into the PhD portion of the MD/PhD program.

Grading:

Course directors will establish the criteria for determining successful completion of remediation, including minimum passing scores and corresponding grades.

Approved by the Curriculum Steering Committee on August 29, 2023

CLERKSHIP AND ACTING INTERNSHIP

Clerkships and Acting Internship

Clerkships and Acting Internships are graded: Honors, High Pass, Pass, Pass Marginal, Fail, Incomplete, Withdraw, Withdraw Failing, To Be Determined (for clerkships only).

All Acting Internships must be four consecutive weeks. Acting Internships will be graded on the five-point scale grades for all Acting Internships taken. If the student chooses to complete more than one

Acting Internship, the first will be counted as the Acting Internship required for graduation. The second will be counted toward elective credit.

The following grade definitions will be used for Clerkships and Acting Internships:

Honors: Student demonstrates the skills to meet all clerkship or acting internship learning objectives and competencies, exceeding them in all or almost all areas, including consistently demonstrating the IICARE values. Students demonstrate independence and excellence in self-directed learning and improvement. Areas for growth are acknowledged and recognized by the student with a plan to improve and utilize appropriate resources. (Approximately 33% of students in a clerkship will be assigned this grade, acting internship grading distributions vary.)

High Pass: Student demonstrates the skills to meet all clerkship or acting internship learning objectives and competencies, exceeding them in several areas, including consistently demonstrating the IICARE values. Student demonstrates excellence in self-directed learning and improvement. Most areas for growth are acknowledged and recognized by the student, and they may benefit from guidance in managing a plan to improve and/or utilizing appropriate resources. (Approximately 33% of students in a clerkship will be assigned this grade, acting grading distributions vary.)

Pass: Student demonstrates the skills to meet all clerkship or acting internship learning objectives and competencies, and may even exceed them in some areas, including consistently demonstrating the IICARE values. Student demonstrates adequate skills in self-directed learning and improvement. Student has demonstrated growth with one or more important areas that need further work and may need consistent guidance to identify other areas, manage a plan to improve, and/or utilize appropriate resources. (Approximately 33% of students in a clerkship will be assigned this grade, acting internship grading distributions vary.)

Pass Marginal: Student is not able to meet all clerkship or acting internship expectations requiring remedial work (to be determined by the relevant grading committee) before a Pass grade for the clerkship can be awarded. A Pass marginal (Pm) can only be remediated to a grade of Pass, and must be remediated for promotion to Phase 4 per policy. The Pass Marginal grade is for internal tracking purposes. Pass marginal grades will not appear on the final transcript.

Exceptions

- Pm grades that have not been remediated before a student withdraws, is dismissed, or status as a medical student ends, will be reflected on the transcript and in the permanent record as grades of Incomplete (I)
- When preparing the enrollment history of a student who has withdrawn, been dismissed, or whose status has ended, the school will report Pm grades of remediated courses. The transcript will retain the remediated grade(s) of Pass.

The remediation weeks for a Pass Marginal (Pm) clerkship grade **cannot** count as elective time. In addition, credit-bearing Acting Internships **cannot** be used for remediation of Pm clerkship grades. The remediation can only count for the clerkship.

Withdraw (W): Students who start core experiences or electives and withdraw before completing the courses will be assigned grades of **W** on their transcripts. Students will **NOT** receive partial credit for the weeks completed.

Withdraw Failing (WF): When a student has been enrolled for at least **50%** of a clerkship and elects to withdraw with a failing performance, a grade of WF will be assigned. When the clerkship is retaken and completed, the student will be assigned **the grade earned** in the retaken clerkship. The transcript will have the WF grade as well as the grade assigned in the retaken clerkship. For example:

2020 Adult Inpatient Clerkship: Medicine Block AI –**WF**
2021 Adult Inpatient Clerkship: Medicine Block AI –**HP**

Fail: Very significant deficiencies, requiring that the student repeat the entire clerkship. A course grade of "Fail" (F) **cannot** be remediated. The course must be repeated. The transcript will record the grade of "Fail" under the academic year when the course was taken. Successful completion of a failed course will be noted by a "Pass" on the transcript under the academic year when the course was re-taken. Pass is the highest grade that can be assigned. (In a typical year, 0-2% of students will achieve this grade.)

Incomplete: Used at the discretion of the clerkship director, usually when a student who has otherwise done passing or better work has been unable to fulfill all course requirements in the appropriate timeframe for compelling reasons. Compelling reasons include circumstances beyond the student's control (health, an excused absence, personal emergency, etc.). After the course requirements are fulfilled, only the final grade will appear on the transcript. A grade of Incomplete (I) is **not** to be used for students who fail the NBME subject exam, need to re-take it, and have an otherwise satisfactory clerkship performance.

To Be Determined (TBD): Clerkship grades of "***To Be Determined"*** **(TBD)** will be recorded for students who have fully satisfactory clerkship performance (Honors, High Pass, or Pass) but who fail the NBME subject exam. Students with assigned grades of TBD will have one attempt to retake and pass the subject exam and still earn a grade of Honors, High Pass, or Pass. Consequences of failing a second attempt at an NBME subject exam will be discussed by the clerkship director with the student and will follow other policies in place.

TBD is an **internal** grade that will not be a part of the permanent record and will be changed to a final grade of Honors, High Pass, or Pass if the NBME subject exam is passed on the second attempt.

NOTE: Students must receive passing (Pass) grades in all clerkships before being promoted to the next level. Students who retake courses must achieve fully satisfactory grades (Pass) or face dismissal recommendations by the MSPRB. A Pass marginal grade is not a fully satisfactory grade. Students may repeat a course, clerkship, or a year only once. If a student fails to earn fully passing grades (Pass) in any re-taken course, clerkship, or entire year, the student will be dismissed from the school by the MSPRB.

Approved by the Curriculum Steering Committee on July 20, 2021
Revisions Approved by the Curriculum Steering Committee on March 21, 2023

Clerkship Grading Policy

Clerkship Grading Committee

All URSMD required clerkships (emergency medicine, family medicine, internal medicine, neurology, obstetrics/gynecology, pediatrics, primary care, psychiatry, surgery) are required to have a clerkship grading committee, chaired by the clerkship director. The grading committee will provide students with timely assessment of their clinical performance to drive active

learning and achievement of clinical competencies, and; provide a fair and consistent assessment process within and across clerkship blocks.

Grading Committee Composition
The clerkship director is responsible for convening a clerkship grading committee that will include no fewer than 5 faculty members in total – including the clerkship leadership (e.g., clerkship director/assistant director). At least three of the five individuals must have an MD or DO degree. The clerkship grading committee membership will be consistent for the duration of the academic year.

De-identification of Assessment Data
The clerkship grading committee will review de-identified student assessment data (e.g., name, pronoun) to collectively derive a grade for clerkship students.

NBME Subject Exam
Performance on the clerkship's chosen NBME subject examination will count as 20% of the final clerkship grade. The minimum passing score for the NBME Subject exam is a score at or above the 4th percentile nationally for all clerkship students taking the exam during the academic quarter in which the clerkship block falls.

Final Grade Submission
The clerkship grading committee will convene and assign grades in a timely manner to ensure that grades are provided to students in a 6-week timeframe. A narrative summary is required for all clerkships and it is the responsibility of the clerkship director to ensure completion of and to sign off on the narrative summary.

Grade Distribution
Clerkship grades are assigned by each clerkship grading committee with a goal for the final grade distribution in each discipline in an academic year to be as follows: 33% Honors, 33% High Pass, 33% Pass.

Approved by the Curriculum Steering Committee on June 22, 2021.

Administrative Professionalism
Beginning with the 2023-24 academic year, all required clerkships in Phase 3 and Phase 4 will have 5% of the grade determined by Administrative Professionalism. The areas under Administrative Professionalism will have common components, be defined by each clerkship with approval by the Third and Fourth Year Instruction Committee.

Approved by the Curriculum Steering Committee on March 21, 2023

Acting Internship Grading Policy

Acting Internship Grading
All URSMD required Acting Internship experiences are required to have a grades determined by the acting internship director with input from two other faculty members chosen by the director. They will provide students with timely assessment of their clinical performance to drive active learning and achievement of clinical competencies, and; provide a fair and consistent assessment process within and across blocks.

De-identification of Assessment Data
De-identified student assessment data (e.g., name, pronoun) will be used to collectively derive a grade for acting Internship students.

Final Grade Submission
The acting internship director will ensure grades are provided to students in a 6-week timeframe. A narrative summary is required and it is the responsibility of the acting internship director to ensure completion of and to sign off on the narrative summary.

Grade Distribution
There are no suggested guidelines for acting internship grade distributions.

Approved by the Curriculum Steering Committee on June 22, 2021

Clerkship Subject Examination Failure Policy

Upon failing the first time, the student must meet with a school designated learning specialist and retake the clerkship subject exam within three months. Upon failing a second time, the student must work with the clerkship director and school designated learning specialist to develop and implement a study plan, take a two week "pause" from their clinical rotations to study, and re-take the exam. The two week "pause" is at the end of the current course, clerkship, or elective. The two week period is non-credit bearing. Upon failing a third time, the student may be required repeat the entire clerkship.

Approved by the Curriculum Steering Committee on June 22, 2021

Final Grade Submission Policy:

The Liaison Committee on Medical Education (LCME) and the medical school require that final grades for all courses must be submitted within six weeks of the course ending. Final grades for all clerkships including narrative comments must be submitted within six weeks after the end of the clerkship.

If a student's grade cannot be entered by the deadline because all requirements have not been completed by the end of a clerkship, a grade of **Incomplete** is entered in MedSIS with an explanation noted in the comments section. The final grades for all electives must be submitted within four weeks of the elective ending.

The completion of grade submission within the six week time frame will be monitored by the Office of Curriculum and Assessment and shared with the appropriate Instruction Committee and the Curriculum Steering Committee twice each academic year.

Approved by the Curriculum Steering Committee on June 22, 2021.

GRADE APPEALS POLICY:

Course Grade/Remediation Appeal:

1. A student wishing to appeal a final course grade or remediation requirement must contact the course director(s) in writing (email is sufficient) within fourteen (14) days of the posting of the final course grade. The correspondence must indicate the intent to appeal and provide a statement indicating the reason(s) for the appeal. The student must also request a meeting with the course director(s) to discuss the reasons for their appeal. The student may provide performance information that was not previously available to the course director(s) and grading committee where applicable for consideration. This information must be provided with the initial documentation of intent to appeal.
2. The first appeal is reviewed by the course director(s) and other course faculty where applicable that made the initial grade determination. The appeal decision is provided to the student by the course director(s).
3. If, after review of the appeal decision is shared by the course director, the student wishes to further appeal the grade decision and/or remediation requirement, the student must notify the course director(s) within three (3) business days who then notifies the Associate Dean for Student Affairs. The Associate Dean for Student Affairs will notify the chair of the appropriate Instruction Committee.
4. The chair of the appropriate Instruction Committee will appoint an Ad Hoc Grading Committee consisting of three members of the current Instruction Committee, two of whom are current course directors. The ad hoc committee will be given the student's written appeal. The course director will provide the ad hoc committee a written justification for the assigned grade/required remediation along with information used to determine the initial grade. To avoid conflicts of interest, the course director will not discuss, be present at nor participate in this process. The decision of the ad hoc committee is final. The ad hoc committee's decision is forwarded to the Associate Dean for Student Affairs who notifies the student.

Clerkship, Elective, and Acting Internship Grade/Remediation Appeal

1. A student wishing to appeal a final grade or remediation requirement in a clerkship, elective, or acting internship must contact the director in writing (email is sufficient) within fourteen (14) days of the posting of the final clerkship grade. The correspondence must indicate the intent to appeal and provide a statement indicating the reason(s) for the appeal. The student must also request a meeting with the director to discuss the reasons for their appeal.
2. The student may provide performance information that was not previously available to the director(s) and grading committee where applicable for consideration. The information must be provided with the initial documentation of intent to appeal.
3. For clerkships, the first appeal is reviewed by the clerkship grading committee that made the initial grade determination. All information reviewed by the grading committee is de-identified. The appeal decision is provided to the student by the clerkship director. For electives and acting internships, the appeal is to the director who reviews the de-identified appeal with two physician faculty involved in that educational experience.
4. If, after review of the appeal decision made by the clerkship grading committee or elective, acting internship group, the student wishes to further appeal the grade decision and/or remediation requirement, the student must notify the director within three (3) business days. The director then notifies the Associate Dean for Student Affairs. The Associate Dean for Student Affairs will then notify the chair of the appropriate Instruction Committee.
5. For each appeal, the chair of the appropriate Instruction Committee will appoint an Ad Hoc Grading Committee consisting of three members of the current Instruction Committee, at least two of whom are current clerkship directors and one can be the committee chair. The

clerkship, elective, acting internship director submits to the Associate Dean for Student Affairs all primary evaluation information, initial grade summary and a summary of the consideration and decision following the first appeal. All of this information is de-identified. The student submits their appeal to the Associate Dean for Student Affairs who de-identifies the appeal. All information is sent by the Associate Dean for Student Affairs to the ad hoc grade appeal committee.

6. The ad hoc committee meets and reviews all of the information. To avoid conflicts of interest, the director will not discuss, be present at nor participate in this process.
7. The decision of the ad hoc committee is final. The ad hoc committee's decision is forwarded to the Associate Dean for Student Affairs for student notification.

Approved by the Curriculum Steering Committee on June 22, 2021

Global Assessments

The Phase 1 Assessment (end of Phase 1), Phase 2 Assessment (end of Phase 2) and the Phase 3 Assessment (end of Phase 3) provide formative feedback on relative strengths and weaknesses. Performance is not used as part of any grade determination, Alpha Omega Alpha selection, nor as part of the Medical Student Performance Evaluation grouping.

Remediation

The most rigorous approach to learning the material in major courses and clerkships is to take the course/ clerkship itself. Remediation of all but a very focused deficiency is not in the best interest of the student who fails the course/clerkship. Therefore, a grade of "fail" in a course/ clerkship cannot be remediated. The course/ clerkship must be repeated.

A grade of "Pass Marginal" must be remediated. **Note**: No credit is given for remediation work; therefore, the remediation weeks for a Pass Marginal (Pm) clerkship grade **cannot** count as elective time. In addition, credit-bearing acting internships **cannot** be used for remediation of Pm clerkship grades. The Remediation can only count for the clerkship. The course/ clerkship director will develop a remediation plan for consideration and approval by the MSPRB. Unsuccessful completion of remediation work will result in a final grade of Fail. Remediated clerkship time will be noted on the transcript as "Completed" and the remediated course/clerkship grade will be noted on the transcript with the original course/clerkship.

Scheduling and Completing Remedial Work

When, for any reason, a student is unable to complete course work on time, including the taking of an examination, remedial work should be scheduled so that its performance, including preparation for any remedial examinations, **does not interfere with the ongoing academic work of the semester in question**. As a result, the remedial work should ordinarily not be scheduled until the end of the semester. Remediation after 1st year course work should be completed no later than July 15 prior to beginning 2nd year course work. In order for 2nd year students to begin 3rd year on time, students are required to complete all remediation by **May 31st or 1 week (7 calendar days)** before 3rd year begins (whichever is earlier).

Completion of Academic Deficiencies:

Students cannot be promoted or begin course work for the next year until all academic deficiencies have been satisfied. All letters from the course/ clerkship directors and the Associate Dean for Student Affairs advising students about failed course work or deficiencies that require remediation include a deadline for removing the deficiency.

Course and Clerkship Director Responsibilities:

- Within the grading policies set by the Curriculum Steering Committee, the assignment of grades to students is the authority and responsibility of course and clerkship directors. Stipulating how grades in individual courses should be remediated is also the responsibility of course and clerkship directors. It is the responsibility of each course/clerkship director to communicate with students about their exam and course performance. The course/clerkship directors are also responsible for communicating with students and the Registrar, in a timely fashion, regarding marginal or failing grades. The Registrar will refer all such grades to the Associate Dean for Student Affairs who will forward the information to the MSPRB. The grading system to be applied is the responsibility of the Curriculum Steering Committee

- Course/clerkship directors may determine that a student meets most course requirements, but is slightly deficient in one or more areas, and that this deficiency may be remediated in a short time. In that instance, a grade of Pass Marginal (Pm) may be given. A grade of Pass Marginal must be remediated, does not appear on the final transcript once remediated, and can only be remediated to a grade of Pass. The course/clerkship director will develop a remediation plan and present it to the MSRPB for their approval. Once the deficiency has been remediated, the grade becomes Pass (P) on the permanent transcript.

- A Double Helix Curriculum—Translations and Transitions course grade of Fail (F) cannot be remediated. The course must be repeated. The transcript will note Fail in the academic year that the course was taken. Successful completion of a failed course will be noted by a Pass on the student's permanent record in the academic year when the course is retaken.

- A grade of Incomplete (I) may be given if unfinished course work or requirements remain at the completion of a course. The notation of an incomplete grade will be stricken from the permanent record, if it resulted from an illness or emergency.

- Course directors retain the option of assigning grades of Incomplete (I) for students who are doing fully satisfactory work and who cannot complete the course requirements for compelling reasons. At the course director's discretion, after the clerkship requirements are fulfilled, the Incomplete may remain on the transcript, be struck through next to the final grade, or may be removed from the transcript if the circumstances were beyond the student's control (e.g., health, an excused absence, personal emergency, etc.).

- Students, who start courses, clerkships, Acting Interships, or electives and withdraw before completing the electives, will be assigned grades of Withdraw on their transcript. Students will NOT receive partial credit for the weeks completed. When a student has been enrolled for at least 50% of a course, clerkship, Acting Internship, or elective and elects to withdraw with a failing performance, a grade of Withdraw Failing will be recorded on their transcript.

- For courses that have ended more than two weeks before a MSPRB meeting, Course Directors must submit final grades of courses to the Registrar no less than 72 hours before the next scheduled MSPRB meeting. Clerkship Directors must submit final grades including written comments to the Registrar within six weeks after the end of the basic science block for each clerkship.

ADVISORY STATUS

Advisory Status is for internal tracking and support purposes to identify, assist and monitor students with academic or other difficulties in medical school. Advisory Status will occur (as noted below) if a student performs in the bottom 20% of his/her/their class on each of three consecutive exams or assessments. Students can be put on Advisory Status by the MSPRB based upon a pattern of academic, conduct or professionalism issues. Advisory Status is an internal monitoring only and is not noted in the permanent record, nor on the transcript, nor is it reported to outside agencies. However, a record of the Advisory Status will be maintained in the official non-circulating file in the Registrar's Office during the period of enrollment. All references to being on an Advisory status will be removed from the file upon graduating from the medical school.

One of the important requirements of the MSPRB is that the board monitor student exam performance.

Advisory Status Determination and Reporting

Course:

1. After EACH exam, the course directors will forward to the Registrar's Office the raw data on the bottom 20% of the class along with their grades.
2. A grade in the bottom 20% in three or more consecutive exams or one grade of Pass Marginal or Fail will result in a student being placed on Advisory Status.
3. Interpersonal and/or behavioral concerns that cannot be adequately addressed within the context or time frame of a course or those that raise additional concerns will result in being placed on Advisory Status until documentation of satisfactory behavior is available.
4. If a student is on Advisory Status solely due to academic performance and the student's performance is above the bottom 20% on three successive exams, the MSPRB will consider taking the student off Advisory Status.

Clerkship, Acting Internship, Elective:

1. When there are concerns regarding the behavior, academic performance, problems with interpersonal relationships and/or motivation of a student that cannot be reasonably resolved during a clerkship or clinical experience, the student should be brought to the attention of the MSPRB by the clerkship director via the Associate Dean for Student Affairs. In instances where there are concerns that the problem cannot be reasonably resolved during a clerkship or clinical experience, the student may be placed on Advisory Status.
2. All students who receive a grade of Pass Marginal (Pm) or Fail (F) in the core clerkships and/or the required clinical experiences will be placed on Advisory Status, referred to the appropriate Advisory Dean (AD) and reviewed by the MSPRB regularly.
3. A student may be placed on Advisory Status if there are recurring or unresolved issues, including those of clinical competency, honesty, integrity, interactions with patients, peers, staff, or faculty.
4. At the discretion of the MSPRB, the next clerkship director may be advised about a student's past difficulty or Advisory Status when the student requires additional support or supervision.

Advisory Status Procedures

A student on Advisory Status will meet with his/her/their Advisory Dean and/or the Associate Dean for Student Affairs to review the resources available to address the student's need. Options include tutoring services, support services, coaching, and assessments regarding learning styles and study habits.

Satisfactory Academic Progress (SAP) requires that a student:

- Fully satisfactorily complete all Phase 1 courses subjects during two full years as a matriculated student.
- Fully satisfactorily complete all Phase 2 courses and clerkship during two years as a matriculated student.
- Take no longer than six calendar years as a matriculated student to complete the requirements for the M.D. degree.

Time spent on Leave, as a Student Fellow, or in another degree program does not count in this calendar. Students who have not completed the requirements in six calendar years as outlined above will be considered for dismissal from the medical school by the MSPRB. The MSPRB is "…empowered by MedSAC to monitor the performance of all students….and given authority for deciding the promotion, graduation, commendation, and remediation of all medical students."

Approved by the Curriculum Steering Committee on June 22, 2021

GRADUATION REQUIREMENTS

URSMD MD PROGRAM ELECTIVE REQUIREMENTS CHANGES

At the December 19, 2023 Curriculum Steering Committee, the CSC voted to change the elective requirements to the following:

Elective Requirements:

23 weeks of elective in Phase 3 and Phase 4 combined to graduate (no change)
No more than six weeks in a research elective (no change)
No more than 12 weeks of extramural electives (no change)
No more than 12 weeks in a given subspecialty* (increase from 8)
Allow up to eight weeks of non-clinical electives (previously no restriction)
*Students who do 12 weeks in a given subspecialty must complete six weeks of their remaining electives in a clinical setting that is different from and their subspecialty choice. (new requirement).

Students can always do more than the minimum required number of electives.

This change in policy will begin with students currently in Phase 2, those who have not completed all the Phase 3 required clerkships and courses by the end of the 2023-24 academic year. This includes all students returning to the MD program from the PhD portion of the MD-PhD program, from a year out, or a leave of absence.

Students in the Class of 2025 can elect to follow the new requirements. If they choose to do so, they must follow all of the new requirements outlined above.

Academic Schedule:

Each University of Rochester medical student is required to complete successfully the following:

Academic Requirements
Orientation (Phase 1)
Human Structure and Function (Phase 1)*

Introduction to Clinical Medicine (Phase 1)
Meliora in Medicine (Phase 1)
Medical Evidence & Inquiry (Phase 1) *
Molecules to Cells (Phase 1) *
Foundations of Biopsychosocial Practice (Phase 1)
Pharmacology (Phase 1) *
Host/Defense (Phase 1) *
Phase 1 Assessment (Phase 1)
Mind/Brain Behavior (Phase 2) *
Medical Humanities Selectives (Phase 2) *
Primary Care Clerkship (Phase 2)
Disease Processes and Therapeutics (Phase 2) *
Women's Health (Phase 2) *
Disorders of Childhood (Phase 2) *
Meliora in Medicine (Phase 2)
Phase 2 Assessment (Phase 2)
Transitions to Licensure (Phase 2) *
Medicine Clerkship (Phase 3)
Surgery Clerkship (Phase 3)
Scientific and Social Foundations of Medicine Principles of ICU Science and Ethics (Phase 3)
Neurology Clerkship (Phase 3)
Psychiatry Clerkship (Phase 3)
Scientific and Social Foundations of Medicine Mind/Brain/Behavior (Phase 3)
Obstetrics and Gynecology Clerkship (Phase 3)
Pediatrics Clerkship (Phase 3)
Scientific and Social Foundations of Medicine Genes, Ecology, and Culture (Phase 3)
Phase 3 Assessment (Phase 3)
Elective Weeks: - Minimum 23 weeks (Phase 3 and Phase 4)** - Elective requirements for the MD-PhD students beginning their PhD portion in 2020-21 will be clarified upon return to the MD program.
Surgical Subspecialty Selective (Phase 3 or Phase 4)- 2 weeks
Emergency Medicine Clerkship (Phase 3 or Phase 4)
Family Medicine Clerkship (Phase 3 or Phase 4 starting with Class of 2023†)
Acting Internship (Phase 4)
Critical Care Selective (Phase 4 starting with Class of 2023†) – 2 weeks
Improving Health Systems (Phase 4)
Successful Interning (Phase 4)

*MD/OMFS students are exempt from this course that is in Phase 1 or Phase 2
** See ELECTIVE requirement details on Page 41.
^Students who take their Acting Internship in an ICU setting (SICU or MICU) are required to take an additional 2 weeks of a medicine or pediatrics hospitalist rotation

Further details regarding graduation requirements, activities which meet the requirements of two weeks of surgical subspecialty and Acting internships, enrolled students should consult the Course Catalogue on MedSIS.

Completion of Required Experiences in Year of Planned Graduation:

School policy mandates that all required clerkships and Acting Internships must be completed by April of the graduating year to allow for adequate time to receive evaluations and to complete any possible

remediation before graduation. Electives can be taken in April and May to fulfill the total credit requirements for graduation.

Medical Student Promotions and Review Board (MSPRB) Additional Mandated Academic Requirements for Graduation:

The MSPRB is empowered to **require** medical students to complete additional course work, focused and/or independent electives as a part of their requirements for graduation.

If the period of completing the MSPRB mandated academic requirements extends beyond four years (eight semesters), the student's status will change to the continuation of enrollment student status. The continuation of enrollment preserves the full student status, loan deferment eligibility and eligibility for financial aid. The student will be charged the prevailing fee for the continuation of enrollment status (See the Bursar's Website for institutional charges) https://www.rochester.edu/adminfinance/bursar/.

The MSPRB mandated requirement(s) to graduate will be listed on the transcript as either the specific activities (elective) required or full time independent study with the appropriate weeks of credit (over and above the existing requirement).

Graduation of a student will be recommended by the MSPRB to the University Board of Trustees if the student has demonstrated the necessary ethical and professional qualities required of a physician, has successfully completed and passed graduation requirements, including all required and elective courses and all required clerkships, electives, and activities.

Deferring Diploma Due to Outstanding Requirements:

Receipt of the diploma may be deferred for a period of four weeks beyond graduation if additional time is needed to complete the graduation requirements. Students who can complete outstanding requirements within the one-month period will have their names in the official graduation program and will be permitted to participate in all commencement exercises. Diplomas will NOT be released until all graduation requirements have been completed.

Implications for Participating in Commencement:

When there are extenuating circumstances, students with more than four weeks of requirements may petition the MSPRB for permission to participate in the commencement exercises. If permission is granted, the students will be allowed to participate in all aspects of commencement. However, their names will NOT appear in the official graduation program, nor will their diplomas be released until all graduation requirements have been completed.

Clerkship Site Assignment Requests:

All directors of required clerkships must give students an opportunity to indicate a preference for their clerkship site. If a student would like to be assigned to a different site or once the clerkship has begun wishes to be reassigned to another site, the student should contact the clerkship director and indicate the reasons for the requested change. The student should also inform his/her/their Advisory Dean and the Associate Dean for Student Affairs of this request. The clerkship director and the Associate Dean for Student Affairs will confer on the request and the final decision is made by the clerkship director. (Effective September 30, 2014)

ELECTIVES

For the Class 2024 and the Class 2025

Limitation on Specialty Discipline Electives: Students may not schedule more than eight (8) weeks of their required elective week total over the third and fourth years in a given discipline including any extramural (away) electives. The Double Helix Curriculum—Translations and Transitions is designed to provide medical students an opportunity to obtain clinical experiences that will not be included in post-graduate training. The four weeks of required Acting Internship weeks (those experiences that meet the Acting Internship requirement) are not counted in the eight-week elective total per discipline. For example, a student completes two weeks of ophthalmology in Phase 3, completes four weeks away in ophthalmology in Phase 4 and an additional four weeks of ophthalmology in Rochester. From these ten weeks only eight weeks count towards fulfilling the elective week's requirement. The additional two weeks will be counted as noncredit. Students are expected to participate fully in and complete all registered electives appearing on their academic program.

Starting with the Class of 2026 (and optionally Class 2025)

Limitation on Specialty Discipline Electives: Students may not schedule more than twelve (12) weeks of their required elective weeks over Phase 3 & 4 in a given specialty discipline, including any extramural (away) electives. Students who do 12 weeks of electives in a given specialty discipline must complete six (6) weeks of their remaining required electives in a clinical setting that is different from the 12 weeks taken in a given specialty. Any additional elective weeks in the same specialty discipline will be noted on the official transcript and counted as non-credit bearing (count toward full-time status, but not toward graduation requirements). The four weeks of required Acting Internship (those experiences that meet the Acting Internship requirement) are not counted in the 12 weeks of electives in a given specialty discipline.

Limitation on Non-clinical Electives: Students may not schedule more than eight (8) weeks of their required elective weeks over Phase 3 & 4 in non-clinical electives. Any additional non-clinical elective weeks will be noted on the official transcript and counted as non-credit bearing (count toward fulltime status, but not toward graduation requirements).

The Double Helix Curriculum—Translations and Transitions is designed to provide medical students an opportunity to obtain clinical experiences that will not be included in post-graduate training. Students are expected to participate fully in and complete all registered electives appearing on their academic program. Students can always do more than the minimum required number of electives.

This change in the electives policy will begin with students enrolled in Phase 2 during the 2023-24 academic year and those who have not completed all the Phase 3 required clerkships and courses by the end of the 2023-24 academic year. This includes all students returning to the MD program from the PhD portion of the MD-PhD program, from a year out, or a leave of absence. Students in the Class of 2025 can elect to follow the new requirements. If they choose to do so, they must follow all of the new requirements outlined above.

Extramural Electives:

Students who have successfully completed all courses in the first two years and have maintained good academic standing may participate in extramural electives in this country and abroad. Students may

spend up to 12 weeks of clinical electives at outside institutions with the approval of their Advisory Dean. Extramural electives provide unique opportunities for students to gain novel experiences in other countries or acquire insights into how different academic health centers and medical schools function. Moreover, student participation in clinical electives at other hospitals allows students to not only broaden their undergraduate medical education in the clinical area of their choice, but also may provide unique perspectives on the outside hospital, its residency training programs and the location.

In order to ensure that extramural electives are equivalent in quality to those offered at Rochester, students must obtain approval from a full-time, URSMD faculty member whose appointment is in the same field as that of the desire elective. Since arrangements for extramural clinical electives are more complex than those for other clinical electives, students are advised to make early inquiry (January of Phase 3). Information about the required documentation and special scheduling considerations may be obtained from the AAMC's Visiting Student Learning Opportunities (VSLO). VSLO. Information can be found on the registrar's website and the Course Catalog in MedSIS. Students are responsible for making sure that their extramural elective evaluations are forwarded to the Registrar's Office after completion of the elective. Students must complete an evaluation of their extramural elective, which is coordinated though OCA.

International Clinical Electives:

See the later section on International Medicine Programs

Payment or Acceptance of a Scholarship for Coursework for Credit:
Payment or acceptance of scholarships for coursework for credit (including electives for credit away from Rochester) is prohibited. Students may, however, accept reimbursement for travel, housing and board to the extent that these are directly incurred in participating in the coursework for credit. For example, payment of housing expenses would be allowed if housing must be maintained in Rochester at the same time. This restriction is in place for several reasons. First, it is important to assure that extramural electives and other academic work for credit are educational experiences. Second, there is a desire to prevent students from receiving credit for experiences that have minimal or no educational value. Third, it is critical to assure that the sponsor of the educational experience regards and will conduct the academic experience as an educational program. Finally, there is a desire to prevent students from participating in poorly designed programs because of the prospect of remuneration.

Students are encouraged to discuss extramural elective ideas and special academic experiences with their Advisory Deans in their individual curriculum planning meetings.

Reading Electives:

Duration of Elective: Maximum of two weeks in Phase 3 and Phase 4/4th Year combined. Any reading or other special electives created needs to be formally proposed, reviewed and approved by the Advisory Dean before being added to the student schedule and cannot be scheduled in overlapping dates. A reading elective would be added in MedSIS as a special elective. See the MedSIS Phase 2 Student User Guide for instructions on adding a special elective.

Learning Objectives:
Students should emerge from the elective having improved capacity to write about and critically think about medically related literature that is tied to their career interest and continued professional development. Reading and writing are contributory to the integration of art and science and is great preparation for internship and life-long learning.

Criteria:
Factors taken into consideration for approval by the Advisory Dean are that the readings are medically focused and are related to career interests and professional development. It is expected that the activities of the reading elective will result in a workload for students that is comparable to other electives. Students must have weekly face-to-face interaction with their faculty preceptor during the duration of the elective. If the preceptor is off-site, meetings can be held by Skype, FaceTime, or any other electronic format. Students must submit a product within seven (7) days of the end of the elective date. Reading electives cannot be scheduled in overlapping dates with other course requirements or extramural electives.

Products should reflect the expectation that the reading elective workload is comparable to other electives and may include the following:

- Formal presentation
- Written paper (i.e. reflection, critique, etc.)
- Pre-determined product that is mutually agreed upon by the preceptor and student.

Evaluation:
Students will be evaluated by the preceptor with a grade of Pass, Pass Marginal, Fail, or Incomplete

Research Electives:

For electives that are created as a "research elective", students may only complete a maximum of six weeks for credit over Phase 3 and Phase 4/4th Year combined. Any special research elective created needs to be formally proposed, reviewed and approved by a faculty member and the Advisory Dean before being added to the student schedule and cannot be schedules in overlapping dates. A research elective would be added in MedSIS as a special elective. See the MedSIS Phase 2 Student User Guide for instructions on adding a special elective.

Unscheduled Time

Phase 3 and Phase 4/4th Year students who are enrolled in enough courses/clerkships/electives to satisfy their full-time status and graduation requirements may choose to have unscheduled time, where they are not scheduled for an elective or course. Students may have up to 3 consecutive weeks of unscheduled time in a term (excluding winter vacation) before having to take a Temporary Academic Pause.

Approval Process for Students Engaging in Non-credit Bearing Electives

- Students are required to complete a special elective form for any summer or non-credit bearing clinical experience. This elective form must include a description of the activity.
- Students are required to have the signed approval of a U of R faculty preceptor (in an appropriate clinical department) the approval of the Advisory Dean AND the Registrar's Office **prior** to the start of the elective. (**NO RETROACTIVE** approval will be accepted).

Students must have an evaluation form completed by the on-site mentor **two weeks after the completion of the elective**. This evaluation form will become part of the student's academic record. The special elective experience will be reflected on the student's transcript as a non-credit bearing elective.

DROP/ADD POLICY

Students must consult with their Advisory Dean if they are considering a change in their academic program. Any revisions to the academic program must be approved by his/her/their Advisory Dean. A drop/add request for electives must be completed and submitted by the student in MedSIS and after approval of the Advisory Dean and the Registrar's Office in MedSIS the change will be completed.

For all required clerkships and Acting Internships in Phase 3 and Phase/Year4, students will not be allowed to drop or add a clerkship or Acting Internship within four weeks of the rotation start date. Any drop/add requests made during the four-week window will require the approval of both the clerkship/ Acting Internship director and the student's Advisory Dean.

For all electives in Phase 3 and Phase/Year 4, students will not be allowed to drop or add an elective within two weeks of the elective start date. Any drop/add requests during the two-week window will require approval from both the elective director and the student's advisory dean.

Failure to adhere to the above policy will result in the scheduled experience being listed on the transcript with a grade of Withdraw.

Again, exceptions to the policies stated above will be considered ONLY under extenuating circumstances and ONLY with approval from both the student's advisory dean and the course director. Students **must** register for all electives prior to beginning work. Post-hoc credit for work in progress or completed will **NOT** be granted.

COURSEWORK AT OTHER U OF R SCHOOLS

Students can take noncredit courses in other University of Rochester schools with the approval of their Advisory Deans and that school. An audit fee may be charged for non-credit courses. Tuition will be charged by the other school for all coursework taken for credit. Students are responsible for all tuition and audit charges for coursework in other U of R Schools.

ASSESSMENT DATA

The Office of Curriculum and Assessment uses MedHub as its centralized assessment system for the curriculum and faculty teaching. The primary uses of these data is to monitor and improve the medical student education program and to evaluate whether the school's expected outcomes are achieved.

Student Confidentiality:

Students are assured all data they provide to the Office of Curriculum and Assessment is confidential, and that reports based on their aggregate feedback will not be released to course / clerkship directors until grades have been registered. Students are also informed, however, that inappropriate comments will lead to an administrator identifying the author and providing feedback on the comments. Some comments may lead to disciplinary action by the school.

Sharing Feedback about Faculty:

Reports based on student feedback about teaching faculty can be shared only with course / clerkship directors, the faculty in question and his/her/their department chair/division chief, and committees that consider special awards and honors, promotion and tenure. Any other feedback about faculty that is

shared for the purposes of improving courses or other reasons must be general in nature and not permit identification of individual faculty.

Ownership of Data

Assessment data are the property of the Office of Curriculum and Assessment whose members along with other faculty may conduct research on questions of interest in the data. In these instances, all data is de-identified.

Access to Data

Research is the only legitimate purpose other than curriculum monitoring and improvement for which confidential curriculum evaluation data can be released. All requests for use of the data should be accompanied by a written research proposal that outlines the study methodology and submitted to the Director of Assessment.This proposal will be reviewed by the Office of Curriculum and Assessment (OCA). If more than one request is received for use of the same or similar data, OCA will inform the parties of the multiple requests and suggest that they collaborate in their research. If a proposal is approved, the researchers also need to obtain approval from the institution's Research Subjects Review Board. The Director of Assessment will consult with the Associate Dean for Student Affairs and/or the Senior Associate Dean for Medical Student Education regarding the request for information.

Collecting Data from Medical Students

All requests for collecting data from University of Rochester School of Medicine and Dentistry medical students need to be submitted to the Office of Curriculum and Assessment and the Senior Associate Dean for Medical Student Education to be reviewed, and where appropriate, referred to the institution's Research Subjects Review Board. This includes questionnaires developed by medical students, faculty, and researchers within the medical school. Requests from outside the medical school will be reviewed and if there is merit to the request will be sent to the Student Senate for final decision. If Senate declines to have the survey sent to students, the SADMSE will notify the outside requester. If Senate agrees, all links will be sent by the SADMSE to the students so student contact information is not shared.

Student Participation in the Evaluation of Faculty and Curriculum:

The evaluation of the academic program and faculty is a compliance requirement for University of Rochester Medical Students. Students' views on the educational process provide much of the data used to assess courses and faculty. In addition to participating in curricular innovation and in the outcome studies to determine which innovations are most effective, Rochester students are expected to treat the educational enterprise with the same seriousness of purpose as patient care and research.

The Office of Curriculum and Assessment (OCA) monitors student evaluation compliance. At the end of each semester, OCA provides a summary of students' evaluation non-compliance to the Medical Student Promotions and Review Board (MSPRB). The MSPRB determines the threshold for warnings and notations in the permanent record.

AAMC Student Questionnaires:

The data collected from AAMC Student Questionnaires (such as the AAMC Matriculating Student Questionnaire (MSQ), AAMC Year Two Questionnaire (Y2Q) and the Graduation Questionnaire (GSQ) are anonymous and influence planning, improvements and changes in medical education. Consequently, reminders about the completion of AAMC questionnaires will be made at the start of medical school and in the final semester of the fourth year. The medical school cannot require students to complete these, however students are strongly encouraged to thoughtfully complete them.

Follow-up on Incomplete Student Evaluations:
One week after a course, clerkship, and/or section ends, the Office of Curriculum and Assessment (OCA) will send **one** reminder to students who have not submitted evaluations to complete their evaluations within **one additional** week. Students who fail to submit their evaluations after that time (i.e., 14 days after a course ends) will have their names added to the list of non-compliant students forwarded to the MSPRB. **Note**: Students have four weeks to complete and submit evaluations for courses/clerkships that end in December.

All questions regarding your course evaluation compliance status, difficulty accessing MedHub should be directed to Isaiah Evans in the Office of Curriculum and Assessment (OCA).

Evaluations and Educational Experiences with Family Members:
To avoid the appearance of favoritism that may result from curricular experiences with family member evaluators/preceptors, students are not permitted to engage in formal (credit bearing and/or funded) educational experiences with close relatives. NOTE: The policy does NOT prevent medical school admission of family members who are on teaching faculty, nor does it prohibit the faculty from teaching family members in whole class lectures in the core courses. The concern is being certain in such instances that another faculty member grades the papers/exams, etc. and that student family members are not assigned to faculty family member PBL groups.

In addition to the core clerkships, clinical electives, PBL's, small group assignments, students will not be allowed to participate in URSMD funded fellowships and educational experiences with family member evaluators. Whenever possible, students should not be assigned to hospitals where relatives currently practice to avoid bias in the student's evaluation.

For the purposes of this policy, the following are considered relatives: Spouse, partner, spouse's/partner's natural and adopted children, grandchildren, and great-grandchildren; parents, step parents, grandparents, and great-grandparents; brothers, sisters, half-brothers, and half-sisters; aunts, uncles, nieces, nephews, first cousins, and second cousins; and persons married to or partnered with them

Avoiding the Appearance of Bias in Evaluations Due to Prior Relationships
The medical school adheres to the university's policy on Intimate Relationships (outlined beginning on here). Additionally, the Medical School expects and requires both faculty and students to avoid situations where a previous relationship could bias evaluations, teaching or could create the appearance of bias. (Examples include but are not limited to: 1.) a student assigned to work with, and/or be supervised by, and/or be evaluated by an individual who has or is currently providing medical or mental health care, 2.) working with a preceptor in a credit bearing course and/or required remediation where that preceptor has a close relationship with the student's family). Should these or other situations exist or if there is a case of doubt about such a situation, the student must immediately contact his/her/their Advisory Dean, the Associate Dean for Student Affairs, and the Course or Clerkship Director. The faculty member must contact the Course or Clerkship Director who notifies the Associate Dean for Student Affairs. The Course or Clerkship Director will reassign the student to a different preceptor, supervising physician, and instructor. Exceptions to this policy are not allowed.

The school views this issue as a matter of professionalism and all suspected violations of this policy will be reviewed by the Honor Board, the MSPRB and/or the Faculty Professionalism Council and Department Chair.

Consistent with the above policy, providers of health care including psychiatric/psychological services to medical students must have no involvement in the academic assessment of, disciplinary action of, or in the decisions about promotion of that student. Questions or disclosures must be referred to the Associate Dean for Student Affairs.

FINANCIAL AID

Financial Aid Eligibility:

Federal law requires that all students who receive Title IV financial assistance to achieve satisfactory academic progress (SAP) toward their degree. It is mandated that SAP be measured by both quantitative and qualitative standards. The following policy has been adopted by the University of Rochester School of Medicine and Dentistry and applies to all students in the MD program including those who receive Title IV financial aid.

All students who have not failed a course for the second time, and whose behavior has not been judged to be unprofessional, will be considered to be making satisfactory progress and will be considered in good standing.

Satisfactory Academic Progress (SAP) as defined by the URSMD requires that a student:

- Fully satisfactorily complete all Phase 1 courses subjects during two full years as a matriculated student.
- Fully satisfactorily complete all Phase 2 courses and clerkship during two years as a matriculated student.
- Take no longer than six calendar years as a matriculated student to complete the requirements for the M.D. degree.

Time spent on Leave, as a Student Fellow, or in another degree program does not count in this calendar.

International Student Aid Eligibility

International students are not eligible for financial assistance sponsored or guaranteed by state and federal programs. Therefore, international candidates will be offered *conditional* acceptances to the M.D. program pending verification of their ability to finance their medical education.

On or before May 15 of the year of matriculation for the M.D. degree, the accepted student must deposit to the School funds sufficient to meet the full expenses of the four years of enrollment.

Matriculated international students will be eligible to apply for OMSEP sponsored awards and fellowships that do not require candidates to be US citizens or permanent residents of the US. Consequently, international students are not eligible to receive support from Federal Work Study (FWS), NIH, New York State and other government supported sources.

If an international student's immigration status changes to permanent resident or U.S. citizen in the course of study, **while the pre-paid tuition plan will remain**, he/she can request termination of the **residual funds** in the holding account, when valid and appropriate documentation of the adjustment is provided to the Bursar's Office.

With the exception of select OMSEP funded fellowships, financial assistance will not be available to international students at any time during their matriculation at the medical school.

Loss of Financial Aid Eligibility:
A student who fails to meet either the qualitative or quantitative components of the satisfactory academic progress standards will be considered not making satisfactory academic progress. A student not making satisfactory academic progress will not be eligible for federal financial assistance.

Notification of Change in Eligibility
Any student whose eligibility for federal financial aid changes as a results of the satisfactory academic progress (SAP) policy, will be notified in writing via a letter to the URMC mailbox and via e-mail to the URMC e-mail address.

Appeals to Reinstate Financial Aid Eligibility:
Any student whose federal financial aid is terminated due to unsatisfactory academic progress may submit an appeal for reinstatement to the Director of Financial Aid. As part of the appeal, the student will be required to disclose any/all extenuating circumstances and include supporting documentation. Students need to demonstrate how/why their extenuating circumstance prevented them from making satisfactory academic progress, and what has changed in their situation that would allow the student to successfully demonstrate satisfactory academic progress in future semesters. The Director of Financial Aid will review the mitigating circumstances that contributed to the student's unsatisfactory academic progress with the student's Advisory Dean, the Associate Dean for Student Affairs, and/or the Senior Associate Dean for Medical Student Education. **The appeal decision is final.**

An appeal will only be approved if the SMD:

1. Has determined that the student will be able to meet the SAP standards after the subsequent payment period (semester); or
2. Develops an academic plan with the student that, if followed, will ensure that the student is able to meet SAP standards by a specific point in time.

Financial Aid Probation:
Financial Aid probation is granted only after a student has appealed and has had eligibility reinstated. A student on Financial Aid Probation may only receive federal financial aid for two payment periods (semesters). At that point, the student must meet SMD's satisfactory academic progress standards. Failure to meet those standards will result in termination of federal financial aid eligibility **without an option to appeal.**

Treatment of Transfer Credits:
Any credits that are accepted towards the student's MD degree will be counted as both attempted and completed coursework in the SAP evaluation process. (Effective July 1, 2011)

DISTINCTIONS AND DESIGNATIONS

Academic Research Track (ART):

Overview:
The Academic Research Track (ART) is a program designed to support students who are interested in pursuing careers in academic medicine with a research component.

The Academic Research Track provides selected students with a broad and deep exposure to basic, clinical, educational, or translational research, involving both didactic and mentored research experiences through an enriched medical school curriculum.

The ART will be based in the Double Helix Curriculum—Translations and Transitions, with additional requirements:

Attendance at series of monthly seminars, lectures and workshop, consisting of:

- Mini-courses or modules describing topics related to medical research, including statistics, study design, conflicts of interest and bias, research communication and obtaining funding
- Additional required training in Ethics in Research through the course offered in the Graduate School.
- A strongly suggested participation in mentored research during the summer between Phase 1 and 2 (~eight weeks in duration), designed to provide exposure to research and to potential research mentors.
- Completion of a 'year-out' to participate in a mentored research project – typically, between Phase 2 and year 3 or between years 3 and 4.
- Completion of a first-author manuscript describing the research and its results, in a form suitable for submission to a peer-reviewed journal.
- Oral presentation of your work at the end of the mentored year out.

Students who are involved in research leading to a Master's degree – such as in existing programs in Public Health or in Neurobiology – or certificate programs may have additional requirements. The Master's thesis may not be submitted both for the Master's degree and for ART. ART does not provide tuition assistance for Master's degree programs.

For additional information regarding the Academic Research Track (ART) contact:
Laurie Steiner, MD
Associate Professor of Pediatrics
Director of ART and non-International Medical School Research
Laurie_Steiner@urmc.rochester.edu

Distinction in Community Health:

The MD with Distinction in Community Health is an option for students who make significant longitudinal contributions to community service, complete the Community Health Improvement Course elective, and engage in learning about current issues and topics in community health throughout medical school. Candidates will be invited to community health learning events, funding opportunities, and will be given opportunities to present their work and develop a community health portfolio that will be reviewed by the Distinction committee in spring of graduation year.

Requirements for Distinction in Community Health

1. Significant longitudinal contributions to community service
    a. A total of 140 hours of community service across the four years of medical school is required: Forty hours of service in Phase 1 and Phase 2 of medical school with an additional 60 hours combined across the Phase 3 and 4th years, to be completed by December of fourth or final year.
    b. The Office of Medical Student Enrichment Programs (OMSEP) office will oversee the tracking of service (SRO) hours for each student's community service experience. Hours must be logged with the OMSEP office by the end of each academic year.

c. Candidates for Distinction can/should focus some of their community service hours towards longitudinal community health improvement. Students should align their service hours towards a particular population health issue or target population or organization, and are encouraged to develop a longitudinal plan for community health improvement with Dr. Theresa Green or a mentor.

2. Completion of the four week Community Health Improvement Course (CHIC1 + CHIC2) electives prior to December 31st of the fourth or final year.
   a. CHIC elective students who are Candidates for Distinction will be expected to work on their longitudinal project during CHIC, and complete a comprehensive portfolio summarizing the longitudinal project, and disseminate their work to faculty, staff and students through presentation and written documentation. Students must successfully complete the course content presented in CHIC1 and CHIC2.

3. Engagement in learning about current issues and topics in community health; Candidates for Distinction are required to complete the following during their four years of medical school, but prior to December of the fourth or final year:
   a. Attend (live attendance or digitally) at least four (4) Public Health Grand Rounds presentations and submit reflections.
   b. Complete the Community Engagement in Population Health on-line MOOC (Class of 2024 and after), or attend a conference/special event related to community health, or actively join a community-based organization or coalition for a year if the MOOC is unavailable.

Process for Distinction in Community Health

All candidates for the MD with Distinction in Community Health must register to do so (on MedSIS) before the start of year 4. There is no obligation in registering, and registering will provide information for community health learning opportunities.

1. During fourth year, candidates are required to complete CHIC1 and CHIC2 electives prior to December of their fourth or final year. Prior to, and during CHIC elective, candidates will work with a community partner to complete a community health improvement project, populate their portfolio and complete the learning requirements outlined above.
2. By December of their fourth or final year, candidates will submit their completed portfolio (with evidence of completion of all requirements) and will disseminate their project via a brief oral presentation and a poster, and will engage in a question and answer session with the Faculty Committee on Distinction in Community Health. (Usually during the Distinction in Community Health Forum held in February of the student's fourth or final year).
3. The SMD's Faculty Committee on Distinction in Community Health will serve as the selection committee for the MD with Distinction in Community Health designation. The Committee will review the candidate's portfolio and select the MDs for Distinction.

The selection committee recommends the distinction to the MSPRB. The Review Process will be completed **before April 1st** of each year. The candidates selected for the MD with Distinction in Community Health will be informed at commencement. (Students selected for Distinction in Community Health who delay their graduations, will have their Distinction in Community Health announced at commencement the year they graduate.) Therefore, the distinction **WILL NOT** be included in the Medical Student Performance Evaluation (MSPE) of candidates.

Resources

Theresa Green, Ph.D., MBA
Distinction in Community Health Coordinator
Director of Community Health Policy and Education,
Center for Community Health & Prevention
Assistant Professor, Department of Public Health Sciences
585-224-2063
Theresa_Green@URMC.Rochester.edu

OME Resources

Please email OME_SRO@urmc.rochester.edu

Selection Committee

The SMD's Community Service Faculty Advisory Committee will serve as the selection committee for the *MD with Distinction in Community Health designation.* Kevin Fiscella, M.D., Associate Professor, Dept. of Family Medicine, Chair

Distinction in Research:

Students may apply for consideration of the MD with Distinction in Research no later than **January 15th of their fourth year.** The MD with Distinction in Research differs from the certificate issued to students who have successfully completed the ART program. A candidate for Distinction in Research must submit a 5-page-maximum synopsis of the research* and a letter from the faculty (UR or other) research advisor describing the candidate's role in the research, commenting on the degree of independence and evaluating the scholarly performance. Because letters from mentors play an important part in the evaluation of the submission, each candidate is encouraged to inform the advisor about the information the review committee seeks. The research must be completed during the student's tenure in medical school to be considered for the MD with Distinction in Research. Research done at another institution while matriculated at UR can be considered for the MD with Distinction in Research.

To avoid putting other candidates at a disadvantage, candidates are required to **limit** the text of the synopsis of their research to five (5) pages. The document **must** include labeled sections describing:

- Background of the project
- Methods used
- Results
- Discussion of the significance of the results
- Summary of the candidate's role in the project

Candidates who have published manuscripts related to the distinction research should append the paper(s) to their application. Candidates who have participated in research projects in several fields should choose **one** as the focus of the Distinction in Research application.

The MD with Distinction in Research Review Committee (UR basic, clinical, and community-oriented faculty) will judge the quality of the research. The Committee recommends the distinction to the MSPRB. The Review Process will be completed **before April 1st** of each year. The candidates selected for the MD with Distinction in Research will be informed at commencement. (Students selected for Distinction in Research who delay their graduations, will have their Distinction in Research announced at commencement the year they graduate.) Therefore, the distinction **WILL NOT** be included in the Medical Student Performance Evaluation (MSPE) of candidates.

Guidelines for Joint Degree Candidates:
While M.D./Ph.D. students and Masters students cannot use their Ph.D. or masters work as the basis of their application for the Distinction in Research degree, they may use other investigative work, for consideration of the MD with Distinction in Research.

Annual Announcement of Distinction in Community Health and Distinction in Research Awardees:
The candidates selected for the MD with Distinction in Community Health and MD with Distinction in Research will be noted in the program at commencement. Students selected for Distinction in Community Health or Distinction in Research who delay their graduations, will have their distinction *noted* at commencement the year they graduate. Therefore, the distinction designation WILL NOT be included in the Medical Student Performance Evaluation.

MEDICAL STUDENT PERFORMANCE EVALUATION (MSPE)

The AAMC notes that: "The MSPE is a summary letter of evaluation intended to provide residency program directors an honest and objective summary of a student's salient experiences, attributes, and academic performance." All URSMD medical students will have an MSPE written summarizing their performance in medical school regardless of their decision to apply for a residency position. Release of the MSPE is done on the date advised by the AAMC (previously 1 October).

The MSPE will be formatting with consideration of AAMC guidelines. While the MSPE will note that courses in the first two phases (years) of the curriculum are graded pass/ fail, beginning with the class entering in August 2021, the MSPE will note the courses in the first two phases where a student received a letter of achievement noting their performance was in the top 10% of their class.

An example of an MSPE is shared with students at annual class meetings.

Deadline for Including Clerkship and Acting Internship Evaluations in the MSPE
The deadline for receiving and including clerkship and Acting Internship evaluations in the MSPE is **September 1st.** Clerkship and Acting Internship evaluations received after the September 1st deadline will **not** be included in the MSPE. **With a student's written request** to the Registrar's Office, the transcript in the Electronic Residency Admission System (ERAS) will be updated to include grades received after September 1st.

Medical Student Performance Evaluation (MSPE) Groupings
Students are grouped based upon their performance in core clerkships. The following descriptors and approximate percentages will be used for the URSMD MSPE groupings: **Outstanding** (20%), **Excellent** (20%), **Very Good** (55%) and **Good** (5%). Grouping is determined by the Medical School Promotions and Review Board whose decision is final **(not appealable)**.

Formula to determine MSPE Groupings: The formula below will be used by the MSPRB to determine the groupings for the MSPE. Grades from the Primary Care, Medicine, Neurology, Obstetrics and Gynecology, Pediatrics, Psychiatry and Surgery clerkships) will be included in the formula. The first, second, and third year basic science course work will not be included in the formula. A grade multiplier will be used to balance the distribution of the clerkship grades.

Formula: A Four point scale **H=4, HP=3, P=2, Pm=1.5** x grade multiplier (a division by the average grade in the clerkship for the class year) weighted by the length of the clerkship in weeks, divided by the number of clerkships completed.

In designating the specific MSPE group assignments, awards, community service and additional degrees earned during medical school will NOT be used in a systematic way to move students at break points.

Grouping For Out of Phase Students

Out of phase students will be grouped with the class in which they complete at least 51% of their core clinical requirements. They will retain their grouping in the class in which they graduate. For example, a student completes Phase 3 in AY 2021-22 and enters a fellowship year in 2022-23. The student is grouped with the Class of 2023 and is in the “excellent” group. When the student returns to medical school in 2023-24 as a member of the Class of 2024, they retain their grouping of “excellent”.

Medical Student Performance Evaluation (MSPE) Groupings for Students Who Have Not Completed Five Required Clerkships before August of the Fourth Year

Students who have not completed five required clerkships before August of the fourth year will not be assigned an MSPE groupings. Instead, the following statement will be included in their MSPE: "It is the policy of the University of Rochester School of Medicine and Dentistry that students who have not completed five required clerkships before August of the fourth year will not be placed into MSPE groupings. However given X's clinical performance, he/she/they would most likely be in the _____category". The MSPRB determines what that category would most likely have been. The decision is final (not appealable).

Author of MSPE

Each medical student’s MSPE will be written by his/her/their Advisory Dean during the summer beginning the final academic year of medical school. The Advisory Dean has no role in summative assessments during medical school and does not provide formal personal counseling. If a medical student does not want their assigned Advisory Dean to write their MSPE, the student must notify the Associate Dean for Student Affairs of their request for a different MSPE author by June 1 of the year in which the MSPE is to be written. To provide the student with someone who is experienced in writing an MSPE, the Associate Dean for Student Affairs will assign a different Advisory Dean to author the student’s letter. The student will be notified of the assignment and work with that Advisory Dean in the letter creation and review.

Request for Review of the Advisory Dean Prepared MSPE

By the first week of September, all students will receive an electronic copy of the draft of the MSPE without the MSPRB decided descriptor. Students will review the letter and make their Advisory Dean (or MSPE letter author) aware of **factual errors**. The MSPE draft with the factual errors noted and **proposed** corrections must be returned electronically to the Advisory Deans within a time specified with the release of the draft that is no less than 48 hours. No student proposed revisions will be considered or made after the deadline.

A student who has substantive concerns regarding the tone and/or accuracy of their MSPE that cannot be resolved with a discussion with their MSPE author, can submit a written request with the **specific concerns noted**, to the Associate Dean for Student Affairs. The Associate Dean for Student Affairs will convene an advisory committee (not including the original MSPE author) which will review the draft MSPE with the noted concerns and if warranted, will amend the MSPE for balance and accuracy. The

review can review original clerkship summaries but will not look at individual evaluations. The committee's decision and any MSPE amendments will be conveyed in writing to the student. The decision of the review committee will be **final**. Students will **not** have the option to choose the version of the MSPE to be submitted for residency application. The review committee's approved document will be the final MSPE.

Students, who have proposed revisions to their MSPE, will be able to schedule an appointment with the Registrar's Office to view (with supervision) the final MSPE. Copies of the final MSPE will NOT be released or sent to enrolled students or graduates.

MSPE Release and Amendments

A sealed copy of the original MSPE will only be sent to the requesting agency with the student's written permission. Copies of the MSPE will NOT be released or sent to enrolled students or graduates. The school will not amend or change the final MSPE at a student's request, nor honor requests to include updates, add graduation honors/ awards, changes in specialty interest, etc.

Once the URSMD MSPE has been finalized on or before 1 October of the final year, it is not modified except under the following circumstances:

1. The student does not graduate in the academic year when the MSPE was finalized. In this circumstance, the letter is revised to reflect their medical student course and finalized the next academic year. In this case, the student retains their original grouping.
2. A student has a formal academic or disciplinary action as determined by the MSPRB that results in an addition to the permanent record or a reportable legal matter occurs after the MSPE has been released, but before the student's graduation, the school retains the right to revise/addend an MSPE and send the revised MSPE to the appropriate training program, affiliated organization, licensure entities, etc. The student will be advised (at the last known contact address) about the revised MSPE content and the external bodies notified. In this circumstance, "Addendum" with the date is added to the letter below the author's original signature. Following this, the text describes incident(s) and school response(s) and then a signature by an appropriate school official. The content of this addendum is determined by the MSPRB and the board's decision is final.
3. A student who does not enter graduate medical education in the academic year immediately following graduation may have an addendum reflecting their final months of medical school if the student submits a written request to the Associate Dean for Student Affairs within twelve months of graduation. The addendum is written by the original author if available or by the Associate Dean for Student Affairs. The content of the addendum is not appealable.

The MSPE is not modified for students to reflect activities after they have graduated from the medical school under any circumstances.

Approved by the Curriculum Steering Committee on July 20, 2021

ALPHA OMEGA ALPHA HONOR SOCIETY

Alpha Omega Alpha (AOA) is a national medical society of which the URSMD has a chapter. Students are elected to AOA by a committee composed of faculty who are members of AOA. The Senior Associate Dean for Medical Student Education, the Associate Dean for Student Affairs and Advisory Deans are not part of the AOA selection committee or selection process. The MSPRB may

remove a student from AOA eligibility based upon academic or professionalism concerns during medical school but has no other role in the AOA selection process.

Beginning with the Class of 2023, all medical students are eligible for election to AOA. Students who wish to be considered for AOA will complete an online form outlining their contributions during medical school in areas that include research, community service, and leadership. Activities and contributions prior to medical school are not taken into consideration by the selection committee. The AOA selection committee will have access to academic performance in the form of clerkship grades and commendations received during first and second years. All information is de-identified prior to AOA committee review. The AOA selection committee will elect up to 20% of the graduating class.

Students elected to AOA will be informed by mid-September. Decisions of the AOA selection committee are not appealable.

GOLD HUMANISM HONOR SOCIETY

The Gold Humanism Honor Society (GHHS) recognizes students, residents and faculty who are exemplars of compassionate patient care and who serve as role models, mentors, and leaders in medicine. GHHS members are peer nominated and are the ones that others say they want taking care of their own family.

The committee that selections medical students into the URSMD chapter of the GHHS does so based upon a student peer nomination process. The process is done at the end of Phase 3 and all students in that class are asked to submit nominations. 15% of the class may be selected.

The GHHS inductees will be informed by mid-September.

MEDICAL SCIENTIST TRAINING PROGRAM (MSTP) STUDENTS

The MSTP (also known as - MD/PhD program) begins with two years of medical school course work and the taking and passing of Step 1. Upon successful completion, the student enters Graduate School and most students defend their thesis in 3 – 5 years. MSTP students return to medical school upon advisement by their Advisory Dean and the MSTP Director, typically following dissertation defense and receiving their Ph.D.

See also: https://www.urmc.rochester.edu/education/md-phd/prospective-students/curriculum.aspx

MD/PhD Program Performance Expectations:

Students in the MD-PhD Program at The University of Rochester are expected to maintain excellent academic performance during all components of the combined training program. Although the school anticipates that most students will remain at or near the top of the class, a variety of circumstances may interfere with student performance on an individual examination or other course/clerkship component. However, academic performance in the bottom third of two or more courses in the medical school curriculum or any performance at the “C” grade level in graduate school coursework will result in special review by Program Directors and the MSPRB and consideration of several remedial strategies. Lack of improvement in performance following the prescribed remedial strategies will result in further evaluation and may result in a recommended leave of absence, probation or possible termination from the MD-PhD Program (all of which would be reflected in the permanent record).

Students who display deficiencies in professional conduct will be reviewed by the MSPRB. The policies and procedures for the review by the MSPRB are outlined elsewhere in this handbook. Students with concerning academic performance will have their performance reviewed by the MSPRB if it is related to the MD curriculum or by the Internal Advisory Committee if it is during the PhD curriculum. The Internal Advisory Committee may seek information from the graduate program director, Advisory Dean, MSPRB, thesis advisor and/or thesis committee as deemed appropriate by the Internal Advisory Committee. Decisions to terminate a student from the MD-PhD program are made by the Internal Advisory Committee. Any student terminated from the MD-PhD program by the MD-PhD Internal Advisory Committee may continue to meet criteria for participation in medical (MD) or graduate (PhD) programs according to specific school guidelines as outlined in the medical and graduate student handbooks. A decision about continuation in the PhD program will be made by the Senior Associate Dean for Graduate Studies. A decision about continuation in the MD program will be made by the MSPRB.

Termination from the MD-PhD program will be noted on both the MD and the PhD transcripts.
Source: MD-PhD Program Policies and Student Guidelines (Instituted in 2005; revised December 2009, revised May 2018)

MD/PhD Program Requirements:

Students enrolled in the MD-PhD Program are required to participate in program-specific courses and events as part of their training. These include a course entitled Scientific Reasoning in Medicine during the first and second years of medical school, the Ethics and Professional Integrity in Research course, the Longitudinal Clerkship Experience and associated MSTP Clinical Rounds during graduate training, an Annual MSTP Retreat, an Annual Medical Scientist Research Symposium, and regular dinner seminars. In addition, most MD-PhD Program trainees will participate in formal laboratory rotations prior to identifying a thesis research laboratory. Details on these requirements and other aspects of MD-PhD training are described in the MD/PhD Student Handbook, which can be accessed at:
https://www.urmc.rochester.edu/MediaLibraries/URMCMedia/education/md/md-phd/documents/MSTP-Student-Handbook-1-7-21.pdf

Scientific Reasoning in Medicine (SRM)

The Scientific Reasoning in Medicine (SRM) course consists of a two-part journal club held on regularly scheduled Mondays and Fridays throughout the academic year, for a total of 24 sessions each year. The purposes of these sessions are to keep first and second year MSTP students engaged in basic science and to encourage trainees to consider translational implications of research during the first two years of medical school. In addition, SRM exposes MSTP students to potential research mentors. Criterion used to assess student performance in the class include attendance, participation in group discussion, and the ability of group leaders to facilitate a lively discussion on the selected article(s). Completion of the course after both years will result in 2 elective credits towards the medical school curriculum graduation requirements.

Longitudinal Clinical Experience for MSTP Students:

Purpose:

To enable **MSTP** students to:

- Stay connected to clinical medicine during their Ph.D. for a more integrated joint degree program.
- Keep up their clinical history and physical exam skills while completing their PhDs and ensure a smoother transition back to the MD curriculum.
- Earn clinical elective credit during the PhD for flexibility in the clinical years.
- Begin exploring clinical specialty options during graduate school.

General Features:

- Four hours per week in a clinical setting.
- Year or half-year preceptor assignments.
- Four weeks of 4th year elective credit/year of clinical experience (two weeks of 4th year elective credit/half year of clinical experience).

Learning Objectives:

- Students will gain knowledge of their preceptor's clinical approach to patients and medicine.
- The experience should emphasize clinical reasoning and the integration of basic science to clinical care.
- In the appropriate setting, students will be involved in practicing history/physical exam skills.
- This is **NOT** a third year rotation. Students are not required to write up patients or follow/round on patients in an inpatient setting unless they request to do so.

Requirements:

- For full year credit (4-week clinical elective equivalent): 40 weeks attendance. This allows for one month off between electives in addition to missed sessions for holidays, illness, preceptor absence, etc.
- For half year (2-week clinical elective equivalent): 20 weeks attendance.
  To receive credit, students must attend a total of three LR sessions for each 20 week LCE block either as a presenter or group participant.
- It is expected that students will participate in this program for up to two years of their graduate work.
- Approval of experience must be obtained from both the Advisory Dean and the MSTP Director.

Total Maximum Credit – eight (8) weeks (Revised January 2006, March 2009)

Longitudinal Rounds:

Longitudinal rounds (LR) are interactive seminars designed to complement MSTP student clinical experiences by offering a forum to practice oral presentation skills and refine clinical reasoning. Objectives of the LR experience are to allow students to refine case presentation skills and to gain a broader exposure to the range of medical subspecialties. LR sessions are held monthly and trainees will coordinate the scheduling such that the clinical preceptor can also attend their particular session.

OPTING OUT OF EDUCATIONAL EXPERIENCES DUE TO CONSCIENTIOUS OBJECTIONS

A URSMD medical student who desires not to participate in specific health care and/or research procedures in non-emergency situations, and who has complied with the existing notification and approval process, shall not be required by faculty, residents, or other health team member to participate in any health care or research activity related to the conscientious objections.

Students cannot opt out of participating in educational experiences that involve emergency health care.

Because students with conscientious objections must participate in the care of patients during emergency situations, they will not be exempted from core/required curricular content. As such, they must be assessed on the educational content and must demonstrate (via means other than the actual procedures of the area of objection) the expected level of knowledge competence. The URSMD is not responsible for providing tutoring and/or academic support to assist a student with meeting the academic standards related to the area of objection.

Procedures for Advising the School about Conscientious Objections:

A student with conscientious objections must:

1. Advise the school each year in writing, about his/her/their conscientious objection
2. Identify and explain the reasoning in support of the conscientious objection
3. Indicate the specific (non-emergency) educational experiences he/she/they anticipates opting out of.

The deadlines for advising the school about a conscientious objection are:

Annual Deadlines for Requesting Accommodations for Conscientious Objections:

Accepted candidates	July 15 (note: candidates offered admission after July 15, must advise the school about their conscientious objection at the time of accepting the offer of admission)
Phase 2	July 15
Phase 3 and Year 4	Due by the deadline for submitting the next year's schedule

All requests should be made via the Orientation Website (incoming students) or current students at http://bit.ly/1xtuY4W.

If a student's conscientious objection and anticipated absence or non-participation in educational experiences, substantially alters the depth and integrity of the educational requirements for University of Rochester medical students, a review committee will be convened by the Associate Dean for Student Affairs. The review committee determines the reasonableness of the anticipated non-participation. The student may appeal an adverse review committee decision to the MSPRB.

Appeals Process:

Students with concerns about eligibility and provision of accommodations for conscientious objections may appeal the decisions to the Medical Student Promotions and Review Board (MSPRB).

The student's formal appeal must be received in writing by the Associate Dean for Student Affairs within five business days of the date of the eligibility outcome letter. The correspondence should state the reasons for appeal and provide an alternative plan the student wishes to be considered. The MSPRB appeals review will occur within forty-five calendar days of the initial decision.

Five members of the MSPRB should participate and all decisions should receive a majority vote. Formal rules of evidence do not apply. Any material considered relevant by the MSPRB shall be considered. The MSPRB may invite consultants to participate in the review of the appeal as non-voting participants. The student may be required to meet with the MSPRB as a part of the review process. The student may appear alone, or with an advocate who is not an attorney.

The MSPRB will offer an independent opinion about the merits of the appeal, the reasonableness of the requested accommodations and if granting such will substantially alter the depth and integrity of the educational requirements for University of Rochester medical students. The decision of the MSPRB is final.

PROFESSIONAL LIABILITY INSURANCE FOR MEDICAL STUDENTS

Actively registered students of the University of Rochester School of Medicine and Dentistry are provided professional liability coverage under the University's professional liability program for activities limited to complete an approved program of medical instruction.

The activities covered under this program are those required by the curriculum of the University of Rochester Medical School. Any activities a medical student performs for which he or she is paid, or activities a medical student volunteers to perform which are not required by the curriculum or not registered with the medical school, are not covered under the University's program.

RELIGIOUS OBSERVANCE

In order to be in compliance with New York State Education Law 224-a, the University has adopted the following statement regarding respect for students' religious beliefs.

"As provided in New York Education Law Section 224-a, students who choose not to register for classes, attend classes or take exams on certain days because of their religious beliefs will be given an equivalent opportunity to register for classes or to make up the work requirements or exams they miss, without penalties or additional fees."

School of Medicine and Dentistry students who anticipate absences from scheduled educational activities due to religious observances, are required to provide written notification to the Registrar's Office **by the listed deadlines** of the anticipated days they will be absent for the academic year. The approved accommodations are for the **actual days** of the observance(s) and do not include additional time for out of area travel to participate in an observance.

Deadlines for Requesting Accommodations for Religious Observance:

Accepted candidates	July 15 (note: candidates offered admission after July 15, must advise the school about their request for religious observance at the time of accepting the offer of admission)
Phase 2	July 15
Years 3 and 4	Due by the deadline for submitting the next year's schedule

All requests should be made via the Orientation Website (incoming students) or current students at http://bit.ly/1xtuY4W.

Students are notified by the Associate Dean for Student Affairs of the outcome of their request for accommodatiosn for religious observance. Course and clerkship directors are also notified by the Associate Dean for Student Affairs. Students are also encouraged to discuss their anticipated approved religious observance absences with their course and/or clerkship directors.

If the requested accommodations in effect require or result in students never participating in required educational experiences, a review committee will be convened by the Associate Dean for Student Affairs. The review committee determines the reasonableness of the requested accommodations and if granting such will substantially alter the depth and integrity of the educational requirements for University of Rochester medical students.

Appeals Process:

Students with concerns about eligibility and provision of accommodations for religious observance may appeal the decisions to the Medical Student Promotions and Review Board (MSPRB) according to the process established by the medical school.

The student's formal appeal must be received in writing by the Associate Dean for Student Affairs within five business days of the date of the eligibility outcome letter. The correspondence should state the

reasons for appeal and provide an alternative plan the student wishes to be considered. The MSPRB appeals review will occur within forty-five calendar days of the initial decision.

Five members of the MSPRB should participate and all decisions should receive a majority vote. Formal rules of evidence do not apply. Any material considered relevant by the MSPRB shall be considered. The MSPRB will offer an independent opinion about the merits of the appeal, the reasonableness of the requested accommodations and if granting such will substantially alter the depth and integrity of the educational requirements for University of Rochester medical students. The decision of the MSPRB is final.

The MSPRB may invite consultants to participate in the review of the appeal as non-voting participants. The student may be required to meet with the MSPRB as a part of the review process. The student may appear alone, or with an advocate who is not an attorney.

REVIEW OF STUDENT STATUS AND DUE PROCESS PROCEDURE

Medical Student Promotions and Review Board (MSPRB)

1. MedSAC (Medical School Advisory Council) will appoint members of and be responsible for actions of the Medical Student Promotions and Review Board (MSPRB), a body empowered by MedSAC to monitor the performance of all students. The MSPRB is charged with and given authority by MedSAC for deciding the promotion, graduation, commendation, and remediation of all medical students. MedSAC will appoint a separate five-member body from its members (MedSAC Appeals Board) to hear students' appeals of actions of the MSPRB.

2. The MSPRB is a seven member Standing Subcommittee of MedSAC. Members are all faculty and will be named by MedSAC, in consultation with the Senior Associate Dean for Medical Student Education. Calls for nominees for open positions will be made to the faculty who can self-nominate. Terms of office will be for four years, with appointments staggered to preserve continuity. MedSAC may appoint members to additional terms.

   MSPRB Alternate Status
   - After serving four years as a voting member (note: would not preclude the option to reappoint for an additional four years), a member may serve three years as an alternate MSPRB member, when a quorum of voting members will not be available (participant will be needed most for ad hoc meetings)
   - Alternates are invited but not required to attend all scheduled meetings, but would be provided all background information if participating in a voting session.
   - The decision on whether to identify, appoint, and include an alternate MSPRB member rests with the MSPRB.

3. The MSPRB will be chaired and co-chaired by two faculty members; one will have his/her/their primary appointment in a basic science department, and the other will be named from the clinical faculty. The terms as chair and co-chair will be for three years. The duties of the chair and co-chair will be to moderate all meetings of MSPRB. The Senior Associate Dean for Medical Student Education, the Associate Dean for Student Affairs, the Associate Dean for Admissions, the School of Medicine and Dentistry Registrar and the Advisory Deans will be ex-officio members of MSPRB without vote. At the discretion of the MSPRB chair and co-chair, joint degree program, course and clerkship directors will be invited to attend MSPRB meetings whenever performance in their courses is being discussed or whenever they may provide insight about a student whose

performance/behavior is being discussed. At the discretion of the chair, consultants and other resource people may participate in the MSPRB deliberations without voting privileges.

4. All students for whom there are concerns either new or previously unresolved will be discussed at each meeting.

5. The MSPRB will be staffed by the Associate Dean for Student Affairs (ADSA), who will also correspond with students about the outcome of MSPRB discussions and decisions on behalf of the MSPRB. The Associate Dean for Student Affairs must communicate all actions of the MSPRB in writing to the student in question within one week of the MSPRB meeting. Similarly, the student will be notified when remediation has been successfully completed or monitoring ended.

Authority and Charge

1. The MSPRB is authorized by MedSAC to execute its duties.
2. The charge of MSPRB is to monitor the academic performance of all students while matriculated in the medical school, while on leave, and while on Student Fellowships. Its approach should be primarily dedicated to understanding and successfully remediating whatever academic or behavioral problems or concerns are brought to its attention. For students enrolled in the Rochester Early Medical Scholars (REMS) Program, and other early assurance or combined-degree programs, the Department/Program in which the student is enrolled will monitor the academic performance of the student during the non-medical degree portion of the training. The Department/Program will have jurisdiction over all academic issues. However, if questions of integrity, responsibility, and proper conduct arise in the other degree program(s) (or in any other area), these may be taken up by MSPRB to determine any potential impact upon the student's early assurance admission or return to the medical curriculum.

3. Any unprofessional conduct such as violations of the Expectations of Medical Studentsmay be grounds for disciplinary action. These are considered academic issues and will fall under the purview of MSPRB. MSPRB will determine appropriate remediation, monitoring, or dismissal of students whose academic performance or conduct is deficient. The MSPRB is authorized to make these determinations independent of MedSAC.

MSPRB Procedures:

All academic deficiencies including allegations of unprofessional conduct will be brought to the attention of the MSPRB.

Monitoring of student performance will be a continuous process, and ad hoc meetings may be called at any time to consider the performance of individual students.

Regular meetings will review the performance of enrolled medical students including those on fellowship, leave of absence, or in the non-MD program component of a combined degree program.

The performance of all students who have received a marginal pass or failing grade since the preceding MSPRB meeting will be discussed at the MSPRB meeting.
The performance of students who have already remediated grades less than Satisfactory/Pass, and those who are on Advisory Status or on Probation will also be discussed.

A regular meeting held within a month of the end of each semester will be dedicated primarily to the promotion of all first,second, and third year students. Fourth or final year students will be reviewed prior to graduation to confirm they have met all the requirements to graduate.

MSPRB Review of Academic Performance Issues:

If a student's performance is to be reviewed by the MSPRB, his/her/their Advisory Dean will be notified by the Associate Dean for Student Affairs prior to the meeting of the MSPRB to allow time to contact the course/clerkship director and/or student to understand any mitigating or extenuating circumstances surrounding the performance concern.

A quorum of the MSPRB consists of either the chair or co-chair and a total of at least five of the seven members. Decisions to dismiss a student shall require a majority of the entire MSPRB. All other decisions shall require a majority vote of those present. Decisions of MSPRB, including recommendations for remediation, will be sent to the student within one week of the MSPRB meeting. Custody of these official actions of the MSPRB will reside with the Associate Dean for Student Affairs.

For each student who is discussed, a decision will be made including, but not limited to: a) taking no action; b) sending the student a letter of concern/advice; c) placing the student on an "Advisory" status; d) recommending remedial action; e) recommending disciplinary action (e.g., reprimand, probation, mandated actions including leave, independent evaluations, etc.); or f) dismissal from the medical school.

Students whose performance will be "monitored" (placed on an Advisory Status) will not be required to do additional work, but a support plan will be devised by MSPRB to help them succeed, and their progress will be scrutinized at subsequent MSPRB meetings, until the MSPRB votes to end their Advisory Status. Advisory Status is meant to assist students in succeeding and is not considered an adverse action (e.g., it will not be reported in the MSPE or appear on the transcript). For students required to undertake remedial work, the MSPRB should clearly stipulate the nature, expectations, and timing of this remediation. The adequacy with which the student completed this remediation will be addressed by MSPRB at its first meeting after the stipulated completion. Formal disciplinary actions by the MSPRB and dismissals are noted in the MSPE and in the permanent record.

In the MSPRB review of any student who receives a grade of Marginal Pass and/or Fail in any two courses or clerkships in a given academic year, the MSPRB will specifically discuss repeat of the academic year or dismissal from the medical school. If the repeat of a previously failed required course or clerkship does not result in a fully satisfactory grade (Pass), this will result in an MSPRB decision of dismissal from the medical school. Of note, a Pass Marginal grade is not a fully satisfactory grade.

MSPRB Review of USMLE Performance:

The MSPRB will monitor students' performance on USMLE Step 1 and Step 2 CK. In the event a student fails, the MSPRB is responsible for taking appropriate action (e.g., recommending tutoring, special course, or a Leave of Absence) to improve the student's performance and comply with published school policies in place at that time.

Appeals Processes:

Appeals of MSPRB Decisions

Decisions of the MSPRB requiring a student to repeat a full academic year, requiring a leave of a year or more, or dismissing a student are the only MSPRB decisions students may appeal. The processes to appeal the requirement that a student repeat a course or clerkship are outlined in the Grade Appeals Policy and in the Clerkship Appeals Policy. MSPRB decisions subject to appeal may be appealed by students to the Medical School Advisory Council (MedSAC) Appeals Board (MAB).

The student's formal appeal must be received in writing by the Associate Dean for Student Affairs within five business days of the date of the MSPRB's required repeat of an academic year, required leave letter, or dismissal letter. The student will write a formal appeal, stating the reasons for appeal and outlining an alternative plan of action that he/she/they wishes to be considered.

The MedSAC Appeals Board (MAB) shall consist of five designated MedSAC members. The remaining members of MedSAC shall serve as MAB alternates when the designated members are not available to participate. The Chair of the MAB shall identify the MAB alternates based on availability for participation in the process. Five designated and/or alternate members of the MAB must be present, and all decisions are made by a majority vote. Formal rules of evidence do not apply. Any material considered relevant by the MAB shall be considered. It is intended that the MAB offer an independent opinion about the merits of the case. The MAB will reconsider the entire case and arrive at its own decision.

The appearance of the student before the MAB shall occur within forty-five calendar days of the initial MSPRB decision. The student may appear alone, or with an advocate (who is not an attorney), before the MAB. The student and/or advocate may not record and/or audiotape any portion of the appeals process meeting(s).

In the correspondence to the student confirming the date and time to report for the appeals meeting, a deadline (date and time) will be included for the student to provide the advocate's name, affiliation and contact information. In addition, if the student would like the MAB to review and/or consider documents, other than the written appeal, a deadline for submitting the specified number of copies, will be included in the confirming correspondence. All documents will be submitted to the Associate Dean for Student Affairs.

The MAB retains the right to deny the participation of an advocate named after the stated deadline or for whom the requested documentation has not been submitted. The MedSAC Appeals Board retains the right to exclude supporting documents received after the stated deadline.

The Associate Dean for Student Affairs will communicate in writing the decision of the MAB to the student within three business days of the MAB meeting. The Senior Associate Dean for Medical Student Education, the Associate Dean for Student Affairs, and the student's Advisory Dean may sit at the discretion of the MAB as ex officio, non-voting members. Custody of the record of the official actions of the MAB will reside with the Associate Dean for Student Affairs.

Unless a student is considered by the MSPRB to possibly be a danger to patients or others, he/she/they may continue to attend classes and clerkships through his/her/their appeal (see MSPRB Appeals) of an adverse MSPRB action.

Appeals of MedSAC Appeals Board Decisions:
Adverse decisions of the MAB may be further to the Dean of the Medical School, whose decision is final. The student's formal appeal to the Dean must be received in writing by the Associate Dean for Student Affairs within five business days of the date of the MAB's decision letter. The appeal must state the reasons for appealing, and present an alternative plan. The Dean's obligation is to review the file with attention to the discipline, dismissal, and processes to confirm they were conducted in accordance with published school policies before rendering a decision. The Dean has the discretion to consider any other matter or information he/she/they deems relevant in reaching his/her/their decision and may, at his/her/their discretion, meet with the student (without the student's attorney).

Review of Prior Appeals Decision Due to New Information:
When new information (for example discovery of fraud, inaccurate or misleading information) results in a review of a prior decision, a student will be given an opportunity to review and respond to the new information.

The MSPRB and the MAB may consider the new information and how it will impact on a prior decision by reviewing solely the new information and the student's response. The MSPRB and the MAB also retain the right to meet with the student before deciding if and how the new information will impact on a prior decision.

Above policy updated and approved by MedSAC on July 21, 2021.

Medical Student Promotions and Review Board Voting Members:

Catherine Gracey, MD., Chair	Professor, Department of Medicine
Robert S. Freeman, Ph.D., Co-Chair	Professor, Pharmacology & Physiology
Debra Ogie, MD	Associate Professor of Clinical Medicine
Nayan Patel, MD	Hospitalist, Department of Medicine
Adrienne L. Morgan, Ph.D.	Vice President of Equity and Inclusion, and Chief Diversity Officer, University of Rochester
Tziporah Rosenberg, PhD, LMFT	Associate Professor, Psychiatry and Family Medicine
Jerome Jean-Gilles, Jr. MD	Assistant Professor, Pathology and Laboratory Medicine

Ex-officio Members:

Flavia Nobay, MD	Associate Dean for Student Affairs Professor, Emergency Medicine
Kathleen Kelly, JD	School of Medicine and Dentistry Registrar
David R. Lambert, M.D.	Senior Associate Dean for Medical Student Education Professor of Medicine
Christine Hay, MD	Associate Dean for Admissions

Advisory Deans:

David Kaufman, MD	Professor of Surgery
Cheryl Kodjo, M.D.	Professor of Pediatrics
Anne Nofziger, MD	Associate Professor, Family Medicine
Erik Rueckmann, M.D., MPH	Assistant Professor of Emergency Medicine

Procedures to Avoid the Impact of Conflicts of Interest:
The following policy and procedures have been implemented to avoid the impact of conflicts of interest. A faculty member or other institutional official will automatically recuse him/herself from any discussion or vote relating to a matter where there is a potential for or the existence of a conflict of interest and state publicly that there is a personal conflict.

The SMD policy and procedures to avoid the impact of conflicts of interest will be included on the agenda of all evaluation/disciplinary MSPRB, MedSAC Appeals and Honor Board meetings. The voting members will be reminded that their eligibility to participate in a discussion or vote is a result of no known conflicts of interest. (Effective October 12, 2005, updated August 18, 2011)

Examples of conflicts of interest that would result in a member of the MSPRB, MedSAC Appeals, and Honor Board recusing themselves from a discussion regarding a student include but are not limited to: involvement in any course, clerkship, elective or curriculum requirement that is related to the student issue being discussed, prior personal relationship with the student or immediate family member, and any other reason for which the board member feels they cannot be objective. The member must state (in person or electronically) that they have a conflict of interest and will recuse themselves. The chair will acknowledge the recusal (if it is the chair who is recusing, the co-chair will acknowledge the recusal). Recusal includes leaving the meeting room (in-person or virtual), not offering any additional information, and not participating in the discussion. Committee members are instructed to have no discussion with the faculty member who recuses themself. In subsequent board meetings where the student is discussed, the member will again recuse themselves in the same manner.

SELF DISCLOSURE IN THE COURSE OF LEARNING

It is essential that we respect not only the confidentiality of patients, but also of health care providers and fellow students. Any discussions that take place during practice exam sessions, small group patient exercises or feedback sessions are strictly confidential, unless you are explicitly instructed otherwise. Because of the nature of this work, self-disclosure occurs with some frequency. The importance of remaining respectful of others who share personal information cannot be overemphasized, whether in class, in Advisory Dean lunches or other settings.

The nature of medical work and the need to practice examination techniques on one another can poses some emotional challenges. Students practice limited parts of the physical exam on one another in Introduction to Clinical Medicine (ICM) and in skills sessions in other courses/clerkships. Students will not be performing rectal, genital, breast and or pelvic exams on one another. Professional models are scheduled for pelvic, genital and rectal exams.Students may feel uncomfortable about physically exposing themselves to another individual. Students should never feel pressured to do so. Discussion with the course/clerkship director about any concerns is important and welcomed.;

SMALL GROUP ASSIGNMENTS

The process for assigning students to small groups will vary (random, alphabetical, course director determined to achieve a desired balance) depending on the circumstances.

STUDENT LEAVES AND WITHDRAWAL

Fellowship Approval Process for Students in Good Academic Standing:

In an effort to shorten the approval process for fellowship leaves for students in good academic standing (without academic deficiencies, on probation or disciplinary action from the Medical Student Promotions and Review Board), the Advisory Deans will approve requests for fellowship leave. All requests must be made on the fellowship leave form (available in the Student Services Center) and have the requisite signature from the project sponsor before the Advisory Dean approval can be secured. For students in good standing, the status of Student Fellow may be conferred by the Advisory Deans for up to one

year. Fellowships longer than one year must be approved by the MSPRB. The student must outline the nature of the academic work they wish to pursue in the Fellowship application. A faculty member of the University of Rochester or of another institution must be designated as the sponsor of the fellowship. A report of accomplishments (written by the student) and an evaluation of student performance by the sponsor during the fellowship should be returned to the Registrar's Office within two months of its completion. This evaluation will be entered into the student's permanent record. Throughout the fellowship, the student must continue to make satisfactory progress. If questions of integrity, responsibility, and proper conduct arise, these may be taken up by MSPRB to determine potential impact upon the student's return to the medical curriculum.

Leave of Absence (LOA):

Students may be granted permission to take a LOA from the medical school curriculum for a maximum of 12 months. Such students will be assessed the prevailing LOA fee per term. If a LOA extends beyond twelve months, the student will automatically be dismissed and is required to reapply for admission.

While LOA status retains one's place in the school, it does not carry with it the full-time student status necessary to participate in University health programs or to qualify for deferment of student loan repayment. Borrowers taking a LOA must, therefore, have Exit Interviews in the Financial Aid Office before leaving campus. Students taking a LOA who have already received loan funds to cover expenses which have not yet been incurred at the time of leaving school, may expect that pro-rated portions of those loans must be returned to lenders. A Medical LOA is treated as a Long-Term LOA in all matters related to tuition, fees, and financial aid.

Students leaving during a term, for which they have already paid tuition, will be subject to the refund policies. (See Refund_policies) (Revised August 10, 2016, reviewed January 30, 2017)

Temporary Academic Pause (TAP):

A Temporary Academic Pause is effective for up to a maximum of twenty-nine (29) days. While there is no additional charge for this status, there is also no reduction in charges previously assessed for the term. A Temporary Academic Pause defaults to an Official LOA on day 30, if the student has not returned to credit bearing academic responsibilities or executed the appropriate documents to change his or her student status. An Official LOA is noted on the student's official transcript and is reported to the Federal Government, which may affect a student's loan repayment status.

It is the student's responsibility to discuss the affect that the Temporary Academic Pause will have on his/her/their grade and discuss a plan for course makeup with the relevant course director(s). It is also the student's responsibility to discuss the affect that the Temporary Academic Pause could have on his/her/their graduation date with the Advisory Dean. Finally, it is the student's responsibility to discuss the affect that the Temporary Academic Pause could have on financial aid with the SMD Financial Aid Office.

NOTE: A temporary academic pause cannot be extended beyond twenty-nine days and only one can be taken per academic year.

If a student decides to withdraw from medical school at any point during Temporary Academic Pause or after, any eligibility for a tuition refund and any other eligible refunds will be calculated from day of formal written notification of the decision to withdraw. (Effective December 7, 2004, revised August 10, 2016, revised January 30, 2017, July 9, 2018)

Procedure for Requesting a Temporary Academic Pause:

1. The student must meet with their Advisory Dean to discuss the need for the Temporary Academic Pause prior to dis-engaging from the medical school.

2. If a decision is made to go forward with the Temporary Academic Pause, the student must meet with the University Bursar and the Director of Financial Aid to gain an understanding of the impact that a Temporary Academic Pause or Official Leave of Absence (LOA) (Temporary Academic Pause that turns into an Official LOA) will have on their financial aid eligibility, tuition refunds, and potential monies needed when returning to the education program. The student also needs to sign off on a document that describes the potential financial and health insurance issues if the student does not return following the Temporary Academic Pause.

3. To finalize the Temporary Academic Pause, the student must secure the signatures of their Advisory Dean on the ***Temporary Academic Pause Request Form for Medical Students***, which can be obtained by the student or his/her/their Advisory Dean from the Registrar's Office. The student must also indicate specific dates that include the first day of leave and the last day of leave.

Approval Process for Other Leaves:

The Medical Student Promotions and Review Board will approve all other leave requests as well as changes in student status (e.g., Fellowship status) for students with academic deficiencies, disciplinary action or on probation.

The appropriateness of a Long-term Leave (Leave longer than 30 days for academic, health, or emergency reasons) and of fellowships for students with academic deficiencies, on probation or with disciplinary action will be decided by the Medical Student Promotions and Review Board (MSPRB). The MSPRB may impose conditions for the Leave (for example requiring the student to seek care to address a health concern) and conditions to be fulfilled for eligibility to return from Leave. Mandated MSPRB actions will be reported in the MSPE. Long-term Leaves should generally not exceed one year, although MSPRB may extend the Leave on a case-by-case basis. The Associate Dean for Student Affairs (ADSA) will communicate in writing the conditions for and timing of termination of Leave status to the student on behalf of the MSPRB.

Students returning from Leave must notify the Registrar of their intent to return **at least two months before their intended return. Students who fail to notify the Registrar will be considered to have withdrawn from the School.** If conditions had been placed upon their return by MSPRB, the student must furnish evidence that those conditions have been met in a timeframe determined by the MSPRB. Failing this proper notification or meeting of conditions, the student will lose his/her/their status with the University and must apply for re-admission with the Admissions Committee in order to return. The status of students on long-term Leave will be discussed at a MSPRB meeting no less than one month prior to the student's anticipated return. At that meeting, the MSPRB may recommend that the Leave be extended or completed on schedule; students requesting an extension of Leave must submit this request, together with the reasons for the extension, **in writing to the ADSS no less than two months before the end of the approved Leave.**

(Revised August 10, 2016, January 30, 2017, July 27, 2022)

Medical Leaves:
If a leave is taken for medical reasons, the confidentiality of the student-physician relationship will be respected; no medical information will be made available to the MSPRB without the consent of the student. A letter on official letterhead (with the appropriate identifiers) from a qualified (license and specialty) treating physician/professional supporting the advisability of a Leave (without disclosing diagnosis) will assist the MSPRB's decision. A student returning from Leave for medical reasons may choose to release medical information to support the return from Leave. In addition, the School will require a statement or letter on official letterhead (with the appropriate identifiers) from a qualified (license and specialty) treating physician/ professional, prior to rematriculating, attesting to the student's suitability to return to the rigors of medical studies. The MSPRB will generally require an examination by a physician or other health care professional of its choosing to document that the student is fit to return from Leave. The cost of this examination will be borne by the university. A Medical LOA is treated as a Long-Term LOA in all matters related to tuition, fees, and financial aid.

Withdrawal:
A student may apply to withdraw from the medical school at any time. A student choosing to withdraw must notify the Associate Dean for Student Affairs in writing of their intent. Subsequent reinstatement (as a first year student or as a student with advance standing) require the student formally apply through the Admissions Office. Deciding to reinstate is made by the Admissions Committee, after consultation with the MSPRB if the student had less than satisfactory performance. If a student withdraws while being considered for dismissal from the school, a notation of “Withdrew in advance of dismissal” will appear on the transcript.

TRANSPORTATION REQUIREMENT

University of Rochester medical students learn in a curriculum with early clinical exposure. Clinical assignments are made with the expectation that all students have access to reliable transportation to get to their scheduled clinical sites. Consequently, students are required to have access to reliable transportation before January of Phase 1.

Students are responsible for making all transportation arrangements and for defraying all costs associated with their transportation.

The school will not coordinate transportation for students to clinical sites and cannot guarantee clinical sites in close proximity to the medical school. Carpooling with classmates is not a viable option nor is the regional public transportation system efficient for transfers to and from clinical sites. The standard financial aid budget includes $250.00 per month for transportation. While financial aid cannot be used to purchase a car, staff members in the Financial Aid Office are available to discuss options to help defray the costs of “reasonable” and “educationally required” transportation expenses.

UNITED STATES MEDICAL LICENSING EXAM (USMLE)

USMLE – INFORMATION FOR STUDENTS
Source: NBME

Students and Graduates:
For Medical Students and Graduates of Medical Schools in the United States and Canada Accredited by the LCME or AOA:

The United States Medical Licensing Examination® (USMLE®) is a three-step examination for medical licensure in the United States and is sponsored by the Federation of State Medical Boards (FSMB) and the National Board of Medical Examiners® (NBME®). The definitive source of information about USMLE is the USMLE Bulletin of Information, which is available along with additional information on the USMLE website.

Students and graduates of medical schools in the United States or Canada accredited by the LCME or AOA may apply to take USMLE Step 1 and Step 2 on NLES (NBME Licensing Examination Services). Eligible applicants may register to take Step 1 or Step 2 CK within a **three-month eligibility period**, such as February 1 – April 30 or March 1 – May 31. Eligibility periods that include months in the upcoming year typically become available for registration by mid-September.

University of Rochester USMLE STEP 1 Policy:

All University of Rochester medical students are required to take USMLE Step 1 **before the first day of Phase 3 following Phase 2**. Passing of USMLE Step 1 is required for graduation from the medical school. Students in the MD program who have not taken USMLE Step 1 by the first day of Phase 3 and have successfully passed all requirements of Phase 2 will be automatically enrolled in a semester long "Independent Preparation for Licensure" course (IND999) described below. For students who have not successfully passed all courses and completed requirements (e.g. required evaluations) of Phase 2, a determination of options and status will be made by the MSPRB.

As noted elsewhere in the handbook, all Student Fellowships must be approved **1 week prior** to the start of the term. Students approved for Student Fellowship must take their Step 1 exam **before the first day of Phase 3 following Phase 2.** If they do not take Step 1 by that date, they will be automatically enrolled in Independent Preparation for Licensure (IND999) and forfeit their fellowship for the semester.

All MSTP (MD-PhD) students must take their Step 1 exam **before the first day of Phase 3 following Phase 2.** If they do not take Step 1 by that date, they will be automatically enrolled in Independent Preparation for Licensure. They will not be allowed to enter the PhD portion of their training until the end of the semester. The impact of this status on their stipend and MSTP support are determined by the MSTP program.

There are **no exceptions to this policy** in that extensions of the deadline will not be granted to students including for those whose Phase 3 schedule begins with elective or vacation, those entering fellowship, or the PhD portion of the MD-PhD program.

Any student who completes USMLE Step 1 prior to the start of Phase 3, is engaged in Phase 3, and fails USMLE Step 1 will leave Phase 3 at the end of their clerkship/elective and will be enrolled in Independent Preparation for Licensure (IND999).

Any student who does not pass USMLE Step 1 and is engaged in an approved fellowship, will leave the fellowship immediately and will be enrolled in Independent Preparation for Licensure (IND999).

Any MSTP (MD-PhD) student who completes USMLE Step 1 prior to the start of Phase 3 and is engaged in the PhD program and fails USMLE Step 1 will leave the PhD portion and will be enrolled in Independent Preparation for Licensure (IND999). The impact of this status on their stipend and MSTP support are determined by the MSTP program.

Students who delay taking Step 1 or fail Step 1 must take/re-take USMLE Step 1 before December 1st. These students remain enrolled in Independent Preparation for Licensure (IND999) until the school has received their passing score. Tuition and financial aid implications will be reviewed with the student however, the student will maintain full-time status. Students cannot return to clerkships, fellowships, nor the PhD program until the start of the next semester.

Enrollment in Independent Preparation for Licensure will be noted in the student's MSPE as a mandated action.

As noted above, all students, regardless of whether they are in Phase 3, a fellowship year, or the PhD portion of the MD-PhD program (i.e. any student enrolled in IND999 for the full or partial semester) **must take USMLE Step 1 on or before December 1st** so a passing score can be received by the school prior to the start of the next semester beginning in January.

Students will be automatically dismissed from the medical school if any one or more of the following occur:

a. Failure to take USMLE by December 1st while enrolled in IND999.
b. Failure to pass USMLE Step 1 with the last date of exam being December 1st.
c. Failure to pass USMLE Step 1 after three attempts completed on or before December 1st.

The dismissal recommendation may be appealed via the existing appeals process outlined elsewhere in this document.

Students must release results of USMLE Step 1 to the medical school. The MSPRB will review the USMLE performance of all students as noted earlier in this document.

Independent Preparation for Licensure (IND999):

Independent Preparation for Licensure is a *full semester, non-credit* bearing course that *maintains full-time student status*. Graded as "completed/not completed," it does not apply to the courses or elective weeks required for graduation**.** In order to complete the course, within one week of enrolling, the student **must develop an independent study plan, which will be reviewed by the course director and the student's Advisory Dean**. The plan must include:

- Initial engagement with a learning specialist and the course director.
- A schedule with a minimum of 40 hours per week dedicated to preparation to take the USMLE Step 1. Engagement in established outside preparation programs can be applied to this time expectation.
- Defined resources and methods to assess progress.
- Barriers encountered in taking and passing the exam and a plan to overcome them
- An expected date to take USMLE Step 1, noting the exam must be taken **on or before December 1st** of the term in which IND999 is completed. Failure to meet this deadline will result in dismissal as noted earlier in this document. Students remain enrolled in IND999 until they have received a passing score or the end of the term in which IND999 is completed.
- It is **HIGHLY** recommended that any student enrolled in IND999 take/retake the USMLE by **October 1st , however the deadline to take the exam is December 1st.**

Students who successfully compete USMLE Step 1 prior to the end of the term in which IND999 is completed must engage *full-time in an approved research project* to maintain full-time student status

or *take a leave of absence*. For those who take a leave of absence, existing policies determine tuition and financial aid implications.

Enrollment in Independent Preparation for Licensure (IND999) will be noted in the student's MSPE as a **mandated action**. Examples of what the MSPE will note include but are not limited to:

"*Student was required to enroll in Independent Preparation for Licensure as of DATE as they had not successfully completed USMLE Step 1 by the start of Phase 3 as required by the school. Upon successful completion of USMLE Step 1, they began Phase 3(or began the PhD portion of the MD-PhD program) on DATE."*

"*Student was required to enroll in Independent Preparation for Licensure as of DATE as they had not successfully passed USMLE Step 1 as required by the school. Upon successfully passing USMLE Step 1, they began Phase 3 (or began the PhD portion of the MD-PhD program) on DATE."*

Students can only enroll in IND999 for one semester and it must be the semester after Phase 2 has been completed. Partial enrollment in the semester is considered one semester. IND999 is not available for USMLE Step 2 preparation.

University of Rochester USMLE STEP 2 CK Policy:

USMLE Step 2 CK must be taken with a passing score received by the school on or before **February 1** of the final year of medical school. There is no Independent Preparation for Licensure option for Step 2 CK preparation. For students who have not met this requirement, the school will notify all residency programs to which the student has applied that their graduation is in jeopardy. Additionally the NRMP may be notified of the potential for the student not to graduate which would make them ineligible for the NRMP match.

Students must release results of Step 2 CK to the medical school. The MSPRB will review the USMLE performance of all students.

NOTE: The school will not release individual scores to anyone outside the institution, including residency programs. If the scores need to be shared with another party, the student will be responsible for transmitting the scores.

Because Step 1 and Step 2 CK are required parts of the academic program, the examination fees have been included in the Cost of Attendance (COA) for students in the MD and MSTP programs in Phase 2 and Phase 4.

(Revised and approved by the Curriculum Steering Committee on December 19, 2023)

DOCUMENTATION REQUESTS

Letter of Verification/Good Standing:

Requests for letters of verification/good standing may be requested from the SMD Registrar's Office at http://www.urmc.rochester.edu/education/registrar. Forms to be completed by the SMD Registrar's Office may also be uploaded at this website.

Medical Student Performance Evaluation (MSPE):

A sealed copy of the original Medical Student Performance Evaluation (MSPE) will only be sent directly to the requesting agency with written permission by the student. Copies of MSPE will NOT be released or sent to graduates. For further details see the section on MSPE.

Transcript Requests:

Enrolled Medical Student Transcript Requests:

Enrolled medical students can request copies of their medical school transcript by completing a transcript request form via the SMD Registrar's website:

http://www.urmc.rochester.edu/education/registrar

Official copies of transcripts (signed and sealed) will not be given to students, and will only be transmitted to the requesting source as authorized by the student. Transcript requests are generally processed on a weekly basis or within 5-7 business days. There is not a charge for transcripts.

MD Graduate Transcript Requests:

Graduates may request copies of their medical school transcripts by completing a transcript request form on the SMD Registrar's website:

http://www.urmc.rochester.edu/education/registrar

Graduate requests are generally processed on a weekly basis or within five (5) business days. Documents can be sent via Express mail when an account number and postage-paid return envelope are provided.

Replacing Diplomas:

Diplomas:

Each graduate is given only one original diploma and one 8.5 x 11 copy of their diploma.

Replacing Diplomas:

A request for a replacement diploma will only be approved under the following circumstances:

- Legal name change due to court-ordered gender change
- Original diploma damaged, lost or stolen

There is a $100.00 fee and a separate application for replacement diplomas (see website http://www.urmc.rochester.edu/education/registrar/links.cfm). The alumnus must complete, have notarized and submit the URSMD application for a replacement diploma. As a part of the application process, the alumnus must include a copy of a government issued identity document (see the note below regarding acceptable documents).

Replacement Diploma in Conjunction with a Court-ordered Gender Change:
Per the AAMC guidelines, SMD does not change names after graduation except in conjunction with a court-ordered gender change. The original diploma must be returned.

Damaged, Lost or Stolen Replacement Diploma Requests:
If the original diploma has been damaged, it must be returned. If a diploma has been lost, a signed attestation is required that the diploma was lost. If a diploma has been stolen, a signed attestation and documentation regarding the lost diploma (such as an insurance claim or police report) must be submitted.

NOTE: There is a six (6) to eight (8) week processing time for replacement diplomas.

Acceptable Documents To Establish/Verify Identity:

- State-issued driver's license (or State Identification Card) *with a photograph, or information that includes name*, sex, height, weight, color of eyes, and date of birth;
- United States Military Card;
- United States Passport;
- Certificate of United States Citizenship;
- Certificate of Naturalization; or
- Alien Registration Card issued by United States Immigration to verify Permanent Residency.

NOTE: With the exception of a name change via a legal process, the spelling of names and dates on documents used for verification of identity must be the same as the legal name, date of birth, social security, etc. in the URSMD official records.

III. ADDITIONAL INFORMATION AND POLICIES

EMERGENCY RESPONSE PROCEDURES

The intranet site:
https://secure1.rochester.edu/safety/restricted/erp/Med_School/erphome.html
Has detailed information regarding the following:

Section 1 - Emergency Response Procedures

- 1.1 - General Information
- 1.2 - Missing Person
- 1.3 - Medical Emergency Response Team (MERT)
- 1.4 - AMBER Alert
- 1.5 - Assistance Needed STAT - Violent Incident
- 1.6 - Utility Alert - Structural Failure
- 1.7 - Utility Alert- Systems Interruption
  - 1.7.1 - Utility Alert- Information Technology (IT)
  - 1.7.2 - Utility Alert - Telecommunications
    - 1.7.2A - Telephone Outage - Analog and/or Metered Lines
- 1.8 - Chemical/Biological/Radiological (CBR) Spill
- 1.9 - Guide for Personal Injury/Exposure
- 1.10 - Fire Alert Confirmed
- 1.11 - Bomb Threat/Questionnaire

- 1.12 - Fire Alert
- 1.13 - Elevator Failure
- 1.14 - Critical Security Incident
- 1.15 - CHEMPACK Plan
- 1.16 - Biohazard Detection System (BDS) Alarm
- 1.17 - Condition Decon
- 1.18 - Tornado Warning
- 1.19 - Active Shooter
- 1.20 - Theft or Loss of Select Agent from BSL3 Lab (not published on the web site)
- 1.20.1 - Release of Select Agent from Containment (not published on the web site)
- 1.20.2 - Select Agent Inventory Discrepancy - BSL3 Lab (not published on the web site)
- 1.20.3 - Security Breaches - BSL3 Lab (not published on the web site)

NOTIFICATION AND ROLE IF THERE IS A BIOLOGICAL EVENT

In the event of a biological incident at URMC, an e-mail will be sent to:

Dr. David Lambert, Senior Associate Dean for Medical Student Education
Dr. Flavia Nobay, Associate Dean of Student Affairs
Diane Frank, Director of Office for Medical Education
Penny Sarsfield, Administrative Assistant
Simmone Washington, Associate Dean Operations

Students will be notified of instructions through overhead announcements in the medical school instruction areas, by a group e-mail and from UR Alert. In addition to in-class announcements and a group e-mail, the Communications Center will be instructed to send a distribution page to all the Phase 3 and Phase 4 students.

Students who are at the Medical Center will be instructed to report to the Flaum Atrium. The Flaum Atrium will serve as the hospital point of distribution (HPOD) clinic. A key component of URMC's plan is to prophylaxis employees and health care students if there is a drug available for the biological incident (for example, Doxy and Cipro for an Anthrax event).

Medical Student Responsibilities at the Hospital Point of Distribution (HPOD) Clinic:

Since hospital/university routine business will be suspended if there is a biological incident at URMC, medical students will be **expected to assist** with **appropriate** tasks at the hospital point of distribution (HPOD) clinic. Examples of anticipated roles for medical students include form screeners/drug triage. After a brief orientation, students would be responsible for reviewing the consent forms and referring patients for further medical clearance or to pharmacy dispensing station.

NOTIFICATION FOR NATURAL OR OTHER DISASTERS

In the event of a natural or other disaster at URMC, an e-mail will be sent to:

Dr. David Lambert, Senior Associate Dean for Medical Student Education
Dr. Flavia Nobay, Associate Dean for Student Affairs
Diane Frank, Director of Office for Medical Education
Penny Sarsfield, Administrative Assistant
Simmone Washington, Associate Dean Operations

Students will be notified of instructions through overhead announcements in the medical school instruction areas and by a group e-mail and from UR Alert. In addition to in-class announcements and a group e-mail, the Communications Center will be instructed to send a distribution page to all the Phase 3 and Phase 4 students. Students will be given instructions on what to do and/or where to

report.

PANDEMIC EMERGENCY PREPAREDNESS PLANS

In early 2020, the COVID-19 pandemic began and the COVID-12 Public Health Emergency ended in May of 2023.

Below are policies that were in place regarding international travel and in preparation for a potential pandemic.
University of Rochester School of Medicine and Dentistry, The Center for Advocacy, Community Health, Education and Diversity and The Offices of Graduate Education

In early 2020, the COVID-19 pandemic began. The university and medical school responses included requiring all students who were studying internationally to return to the U.S. Screening of students based upon travel to high coronavirus infection areas and also based on symptoms was completed. For medical students, the school implemented remote learning and postponing clinical experiences along with other measures. All international travel and away electives/rotations were put on hold. Returning to clinical and on-site educational experiences will occur when appropriate safety measures can be implemented and will be done in consultation with AAMC policies, guidelines from national agencies and local health department policies.

Students will be informed and updated regularly through email and web-based platforms regarding and changes.

INTERNATIONAL STUDENT EXPERIENCES

The functions of the University's Office of Global Engagement (OGE) include providing central support for and coordination of international activities undertaken by the university's schools, providing services regarding travel and security to ensure the health, safety, and securing of members of the university undertaking international travel. All international electives are submitted to the director of medical student international programs and are reviewed and actively monitored by the OGE. The OGE uses a standardized, rigorous process that includes US State Department cautions and warnings. The director of medical student international programs and the student are notified of the OGE determination. If the office determines the risk to student safety is too great, the requested elective is denied.

To address specifics regarding potential risk to medical students and maintaining their safety, the medical school works with the OGE as noted below:

1. The availability of emergency care
   All students completing international electives are required to have evacuation insurance which is coordinated by the OGE and emergency contact information on file.
2. The possibility of natural disasters, political instability, and exposure to disease
   Approval of all international electives involves the OGE which assesses the possibility of natural disasters, political instability and exposure to disease.
3. The need for additional preparation prior to, support during, and follow-up after the elective
   Students must complete pre-departure procedures outlined by the OGE. Content discussed includes personal safety, ethics of international work, and a review of applicable regulations related to planned activities. Upon return, any needed follow up beyond a standard debrief is addressed by the director of international medical student programs. The director of international medical student programs offers an additional pre-departure presentation with discussion for students traveling abroad.

PRIVACY AND ACCESS TO ACADEMIC RECORDS

Faculty and Administration Access to Medical Student's Academic Records

Any requests for information in a medical student's academic record must contain a written consent/release by the student with the specific information to be disclosed indicated. Since students have immediate and 24/7 access to their academic information in MedSIS, they are able to review this information and can directly provide some information to others at their discretion. If necessary, students can request the Registrar's Office provide specific information from their academic record to a third party by submitting a request/release at: https://www.urmc.rochester.edu/education/registrar.aspx or by sending an email to mdreg2@urmc.rochester.edu.

The medical school's medical student information system (MedSIS) has user specific permissions that the school has determined based on a "need to know" approach:

- The Registrar and Assistant Registrars as well as the Senior Associate Dean for Medical Student Education, the Associate Dean for Student Affairs, the Director of Assessment and the Administrator for the Office of Curriculum and Assessment have full access to all students
- The Advisory Deans have full access only to their students' information.
- Select staff only see the sections of MedSIS that are relevant to their duties (scheduling, grade entry).
- Faculty and Coordinators only see their own courses and the grades they submit.

Any paper files (AMCAS application, verification of identity) are in locked cabinets in a secure vault in the medical school's Registrar's Office. The Registrar and Assistant Registrars have full access to this information. This information is otherwise only shared with the Senior Associate Dean for Medical Student Education, the Associate Dean for Student Affairs, and the Advisory Deans at the discretion of the Registrar.

Inquiries for information are addressed by the Registrar, the Senior Associate Dean for Medical Student Education and the Associate Dean for Student Affairs, potentially in consultation with the Office of Counsel.

The medical school follows the Family Educational Rights and Privacy Act and students are notified about this annually. (Reviewed and revised July 9, 2021)

Family Educational Rights and Privacy Act (FERPA)

Annual Notice to Students:
The medical school adheres to the University of Rochester's policies and procedures of FERPA, which can be found at https://www.rochester.edu/bulletin/policies/ferpa/.

SOLOMON AMENDMENT AND THE RELEASE OF PERSONAL INFORMATION

To Military Recruiters

At the request of military branches, the regulations under the Solomon Amendment, 32 CFR Part 216, require the School of Medicine and Dentistry to release select information on currently enrolled students

to military recruiters for the sole purpose of military recruiting. Before releasing the requested information, the school will ask if it is the intent to use the requested information only for military recruiting purposes.

The military is entitled to receive information for students who are "currently enrolled," which is defined as registered for at least one credit hour of academic credit during the most-recent, current or next term.

Under the Solomon amendment, the military is entitled to receive the following student information:

- name;
- address;
- telephone number;
- age (or year of birth);
- level of education (e.g. freshman, sophomore, or degree awarded for a recent graduate); and
- major of study

If a student has requested that his or her directory information not be disclosed to third parties, as is permitted under FERPA, that student's information will not be released to the military under the Solomon Amendment. In such instances, the school will remove the student's personal information and only release to the military the following directory information: name, box #, e-mail address, and the NRMP results (residency placement and specialty). A note will be included that "We have not provided information for X number of students, because they have requested that their directory information not be disclosed as permitted by FERPA."

Student Desk Reference

The SMD Medical Student Desk Reference is made available to all medical students, faculty, and staff electronically and in hardcopy. The information that will be listed for all medical students in the Medical Student Desk Reference includes: name (preferred first name and legal last name), picture, Box #, E-Mail address, pager number, student type (e.g. MD, MD/PhD), and Advisory Dean. In addition, the school will release and publish the NRMP results (residency placement and specialty) on all students/alumni, unless omission is specifically requested. The University also publishes a student directory, that contains the names and Medical Center Post Office Box addresses of medical students.

STUDENT ID NUMBERS

New York State law forbids the use of social security numbers for public identification purposes. To protect the privacy of students the University has adopted an eight-digit ID System. All students are required to have a University ID. Students should expect to use the ID when interacting with University offices.

The University ID may be printed on class rosters and other public displays of the ID. Social security numbers are used only by the Financial Aid and Bursars offices as needed. The University ID card does not have the University ID number printed on the card; it will be encoded on the magnetic strip on the ID card. Incoming medical students will learn their URID numbers through access of the medical school orientation website that opens each year prior to matriculation. Current medical students may access their URID numbers through the MedSIS portal.

These ID numbers are NOT to be considered directory information and therefore will not be provided to anyone inquiring. While use of the unique ID number for University business is allowed, the numbers

will not be shared with anyone not having the "need to know" as determined by the Registrar or in some instances in consultation with the Office of Counsel.

USE OF VIDEO AND AUDIO EQUIPMENT IN EDUCATIONAL SETTINGS

For Problem Based Learning (PBL) rooms, audio and video recording equipment will be operated only from the Control Room which will be locked at all times unless a member of the Center for Experiential Learning (CEL) is present in the room. CEL-IT staff are the specialists with primary responsibility for this facility.

- The live feed from the Control Room will be off at all times, except when the system is being used for an announced educational purpose. In all cases, students will be informed in advance when any session is being recorded. Except when these pre-announced classes or assessment exercises are videotaped, the live feed from the Control Room will always be off (e.g., during all Advisory Dean lunches, during all other classes, off-hours times when students study in the PBL rooms, etc.)

- During times when professional staff needs to set up or test the equipment, notices will be posted on all PBL room doors**.** Recording equipment maintenance work will not be scheduled during potentially sensitive times such as Advisory Dean's lunches or physical exam instruction sessions.

- Students will not only be informed in advance by CEL and Course Directors about any PBL or clinical exercise that will be recorded, but will also be informed as to whether the use is for their own formative development (e.g., access will be provided to them to monitor their own progress), for a formal assessment (e.g., an OSCE exercise in which a recording might become part of their student record and subject to all the confidentiality of any other part of their educational record), for a faculty development exercise (e.g., so PBL tutors can watch themselves and develop skills in small group facilitation), or any combination of these or any other purpose**.**

- Any concerns about violation of confidentiality should be addressed immediately to the Honor Board, the Associate Dean for Student Affiars, or the Senior Associate Dean for Medical Student Education.

VIDEO, AUDIO AND RECORDING EQUIPMENT IN OTHER EDUCATIONAL SETTINGS

Personal audio or video/digital recording equipment cannot be used by students in educational settings, except as provided below. Educational settings include but are not limited to lectures; problem based learning sessions, small group learning activities, laboratory experiences, and clinical clerkship or elective activities. Additionally students cannot audio or video/digital record meetings or conversations with course/clerkship directors, administrative support staff, nor medical school personnel.

An exception to the above policy exists for any medical student who has requested permission to record educational sessions as an accommodation for a disability, and has been approved to do so by the medical school's disability access coordinator. The process for requesting accommodations can be found in this handbook under Accommodations for Students with Disabilities. As with all approved accommodations, the disability access coordinator will notify the relevant course/clerkship directors when recording approval has been granted as an accommodation. Students will not also be required to obtain individual instructor permission within each course or clerkship. Notwithstanding the above,

due to federal privacy laws, students with accommodations cannot record individual patient encounters in clerkship settings without additional approval of the medical center privacy officer, who may consult with the medical school's disability access coordinator. The privacy officer's approval will be sought by the medical school to avoid undue burden to the student. In instances where a patient case is discussed or a patient is present in the educational setting (e.g. lecture, small group), any recorded information is treated as Protected Health Information and is under the same restrictions as outlined in or implied by the Health Insurance Portability and Accountability Act (HIPAA) and medical school/hospital policies. Students must not share such content with anyone. Students must delete/destroy such content once they have completed all required assessments in that course/clerkship. The medical school will endeavor to remind students who have approved accommodations of these obligations but a failure to remind does not excuse non-compliance.

IV. COMMUNITY SERVICE, RESEARCH, INTERNATIONAL MEDICINE

OFFICE OF MEDICAL STUDENT AND ENRICHMENT PROGRAMS (OMSEP)

Mission Statement:

The University of Rochester School of Medicine and Dentistry (URSMD) is committed to increasing the number of physicians with diverse backgrounds and those who demonstrate a vision and commitment to improving the health status of diverse patient populations via patient care, research and/or teaching. As a result, the Office of Medical Student Enrichment Programs (OMSEP) was established to continue to broaden the scope of medical education beyond the classroom to include health, culture, and educational experiences with the goal of creating cross-culturally humble physicians. OMSEP serves as a resource to bridge URSMD with local, national, and international communities. The goals of OMSEP include:

- Fostering inquiry, advocacy, assessment and dialogue about cultural humility
- Creating educational programs that address the issues and experiences of cultural humility
- Promoting and understanding the social, political, and economic determents of health (i.e. Speaker's Bureaus and student groups such as SNMA, APAMSA, and Spectrum)

COMMUNITY OUTREACH: STUDENTS OF ROCHESTER OUTREACH (SRO)

Students of Rochester Outreach's (SRO) primary goal is to provide medical students the opportunity for interprofessional service learning. Working in freestanding programs or those in partnership with community organizations, SRO opportunities focus on the needs of community members who are experiencing social or economic hardships, and are often underserved. Students benefit the community while learning. The emphasis of engaging with each of the community sites is to establish mutually beneficial relationships and to develop an appreciation for the social and cultural dimensions of health through attentive, compassionate listening. The program is established to help students achieve the following outcomes:

- Understand the social, political and economic determinants of health and disease in our local community
- Interact with individuals needing support and friendship without the pressure of solving a medical problem
- Learn as a member of a multi-disciplinary team that includes educators, social workers, nurses and community members
- Serve the community in which they live and work
- Reflect on the challenges faced by others, social determinants of health and the student's

commitment to serving others

The University of Rochester defines community engagement as the collaboration between the university and its larger community for the mutually beneficial exchange of knowledge and resources in a context of partnership and reciprocity. With this in mind, SRO activities should meet the following guidelines:

- Activities should provide direct engagement with community members. A minimal number of hours spent independently in planning an event or analyzing data can be counted, but should not be the focus of the SRO experience.
- Activities should involve interactions with people. Working with animal shelters or farms will not be counted. Independent research without community engagement will not count as SRO activity.
- Activities must be local and serve the Rochester population and community. Although global experiences are certainly worthwhile, they are beyond the scope of the SRO program.
- Activities should be in service to the community and benefit the people who live here. As much as possible, the students should assist the community/site with its prioritized needs.

The Office of Medical Student Enrichment Programs (OMSEP) will oversee the tracking of hours for each student's community outreach experience. The OMSEP office provides a list of SRO opportunities, however students can complete volunteer work outside of the listed sites if they include a description of the organization and details of the work completed. All student volunteers must register for SRO500 on MedSIS. Students participating in Street Outreach and/or URWell **MUST** register for SRO595 to be covered under school liability. Any students registered through either course must provide documentation of hours volunteered at the end of the academic year, and a preceptor must validate the hours with a signature.

Students interested in pursuing the longitudinal "Distinction in Community Health" designation on their MD diploma, should register for INT500 to learn more. (This does not obligate students to complete Distinction.) Details on the required volunteer hours for this Distinction are found elsewhere in this handbook. For Candidates for Distinction, SRO hours should eventually be spent towards a community health improvement project that will be presented to the Committee for Distinction in Community Health.

STUDENT RESEARCH

Student Research:

The Office of Medical Student Enrichment Programs (OMSEP) awards research grants to be used for medical student research. These funds will be awarded on a competitive basis for summer and year-out projects. Projects may be local, national, or international. The number of funded positions is dependent on funding availability each year. The OMSEP disseminates information about available applications and deadline information in the fall.

Students can apply for the following fellowships:

- Summer
    - Basic Science, Clinical Translational Fellowship
    - Community Outreach Fellowship
    - E. Cowles Andrus Summer Fellowship
    - International Medicine Fellowship
    - Medical Humanities Fellowship
    - Racy Fellowship in Psychiatry

- Robert Caldwell Fellowship
- Schmitt Program on Integrative Research
- Schyve Fellowship

- Year-Out
  - Basic Science, Clinical Translational Fellowship
  - Clinical and Translational Science Award (CTSA)
  - Community in Healthcare
  - David Hamilton Smith Award
  - Hawkins Pathology Fellowship
  - International Medicine Fellowship
  - Medical Humanities Fellowship

Applications for OMSEP funded programs will be evaluated by a faculty committee competitively, based on the following:

1. Quality of the applicant – This includes medical school record and grades; publication record or likelihood of publication; and likelihood of success of the project
2. Environment – This includes the quality of the research environment; the quality of the mentor and mentor team; and the quality of the mentoring plan.
3. Science – The clarity and soundness of the research question or hypothesis; thoroughness of background information; thoroughness of preliminary studies; appropriateness of methods; clarity of individual role; the quality of the study design; significance of anticipated results; and appropriateness and thoroughness of references.

Applications for programs funded by other sources, such as the CTSI, departmental, or foundation sources, will be evaluated by a faculty committee, according to the guidelines of the funding source. Details about the review criteria and funding sources can be found on the information page for each funding opportunity.

Summer award recipients may receive a maximum stipend of $3,000 for 8 weeks of research and year-out award recipients typically receive a stipend of $19,800 for 12 months of research, although this may vary according to funding mechanism. As many programs are funded by federal work study, federal work study eligibility may impact the amount of stipend awarded.

Only project proposals without other external sources of funding will be considered; students cannot be funded from the school and outside of the school for the same project.

Students completing research enrichment experiences that have been approved by the URSMD are covered under the U of R Medical School's malpractice insurance policy.
At the end of the summer or year-out projects, students are required to submit an abstract for the *University of Rochester School of Medicine and Dentistry Research Journal* and present a medical poster at the Annual Medical Student Poster Presentation.

INTERNATIONAL MEDICINE PROGRAMS

International Research:
As noted in the section above, there are summer and year-out opportunities for medical students to conduct research abroad. Detailed information about the processes is provided with information on local and domestic research experiences and is available from OMSEP.

International Clinical Electives:
International travel is an integral part of the academic, research, and healthcare mission of the University of Rochester, and the University broadly encourages and supports international clinical electives by medical students in support of that mission.

Medical students who are interested in participating in international clinical experiences for academic credit are required to complete an Extramural Elective Drop/Add Form through MedSIS. They must enter all the information requested including a brief description of the experience, the location, dates traveling, and contact information of their international Preceptor. They will need to assign the Director of Medical Student International Programs, Dr. David Adler, as the faculty sponsor.

The University of Rochester's Center for Education Abroad must review and approve all University-related international travel for students. Interested students should initiate this process with the assistance of OMSEP. Students approved to conduct international clinical electives must adhere to the existing OMSEP guidelines and policies for international student experiences. No credit will be granted retroactively.

URSMD HAS RECIPROCAL EXCHANGE AGREEMENTS FOR MEDICAL STUDENT CLINICAL ELECTIVES WITH SEVEN INTERNATIONAL INSTITUTIONS, THROUGH OMSEP:

- Jagiellonian University Medical School - Krakow, Poland
- National Taiwan University Medical College - Taipei City, Taiwan
- Seoul National University - Seoul, South Korea
- Universidad de Navarra - Pamplona, Spain
- Universidad Nacional de San Augustin de Arequipa - Arequipa, Peru
- Universidad Nacional Mayor de San Marcos - Lima, Peru
- Royal College of Surgeons in Ireland – Dublin, Ireland

Phase 3 and Phase 4 (Year 4) URSMD students are able to apply to participate in clinical electives at each institution. There are no language requirements for Spain, South Korea, Taiwan, and Poland at this time. Tuition fees of $200 per week are associated with the Taiwan and Spain institutions.

Applications are submitted to the OMSEP office and must include:

- Letter of Intent, Curriculum Vitae
- Letter of Recommendation from your Dean
- Certificate of Good Standing with institutional seal
- Two letters of recommendation from faculty members
- Official Transcript

Once an application is put together, OMSEP submits it to the international school contact with the dates a student is interested in attending and the electives they would like to participate in. After the institution confirms the availability to have a URSMD student attend, OMSEP connects the student and institution to continue the process.

URMD students are also able to set up clinical electives outside of the established exchange programs on their own. The application and institutional review/approval process for clinical electives at institutions not among those with which we maintain exchange agreements is the same.

Any request to complete electives in a country listed on the U.S. Department of State's travel-warning list will be reviewed by the Travel Review Subcommittee within the University of Rochester's Office of Global Engagement before approval is granted. All students who have plans to travel to any countries on the U.S. Department of State's warning list are required to submit their travel plans to OMSEP for review no later than **twelve weeks (three months)** before departure.

The University of Rochester provides a secure registry system for students to record individual travel plans and contact information to help ensure smooth communication and rapid, consistent institutional support for University of Rochester global activities in the event of a serious emergency abroad. The UR has created a simple, online form, which allows students to register their upcoming travel plans with the Office for Global Engagement. This registration is required for all medical student international clinical electives. Additional pre-departure resources and recommendations from the Office of Global Engagement can be found here.

Students are responsible for carefully following all U.S. Department of State alerts and advisories for their travel destination regardless of whether or not these alerts and advisories fall short of restricting student travel to the country. For example, an alert or advisory might warn against travel to specific regions of the country or highlight the dangers of undertaking particular activities in the country. Students are expected **to monitor such alerts and advisories and to take appropriate precautions such as avoiding the specified areas or activities.**

All students participating in international electives MUST adhere to the travel policy AND register for INM750. **Four weeks** before departing for an international elective, students are required to have all necessary paperwork completed and have provided copies to the OMSEP. All necessary paperwork and information is provided to students upon the registration of INM750.

V. COMPLIANCE AND REGULATORY POLICIES

ADMINISTRATIVE SUSPENSIONS

Students placed on Administrative Suspensions will be prohibited from participating in their academic programs and will be denied access to SMD administrative services. The students' health insurance and student status will be maintained during Administrative Suspensions. An Administrative Suspension will not be reported in the permanent record or recorded on the transcript. **A $100.00 administrative fee will be assessed for each Administrative Suspension.**

ANNUAL ATTESTATION

As a part of the annual registration process, students will be required to affirm that for the past academic year there has not been a change in their Criminal Background, Arrest History and/or Sex Offender Status.

NOTE: Any omission, inaccurate or misleading information will be cause for a review of the student's status and disciplinary action including dismissal from medical school.

TECHNICAL STANDARDS

Technical Standards Policy:
All applicants accepted to the University of Rochester School of Medicine & Dentistry must be able to meet the School's technical standards. Students are required to review the standards and document

they have read, understand, and are able to meet the standards with or without reasonable accommodations. Matriculating students will attest to the ability to meet the technical standards listed below on the orientation forms website. Thereafter, enrolled students will be required to reaffirm the ability to continue to meet the technical standards at the beginning of each academic year.

The School of Medicine is prepared to provide reasonable accommodations to students who are accepted by the School and who have physical and learning disabilities (e.g.: mobility impairments, chronic illnesses, dyslexia and other learning disabilities). The University will review the information in order to determine whether a reasonable accommodation can be made. The University reserves the right to reject any requests for accommodation, that in its judgment, would involve the use of an intermediary that would in effect require a student to rely on someone else's power of selection, detection and observation, fundamentally alter the nature of the School's educational program, lower academic standards, cause an undue hardship on the School, or endanger the safety of patients or others.

Questions should be directed to Flavia Nobay, Associate Dean for Student Affairs.

URSMD Technical Standards (for matriculating students beginning with the Class of 2026)

Patient safety and wellbeing are critical factors in establishing requirements involving the physical, cognitive, and interpersonal abilities of candidates for admission, promotion, and graduation. The necessary abilities and characteristics described below are also referred to as technical standards. They are defined in several broad categories including observation, communication, motor function, intellectual-conceptual, integrative, quantitative abilities, social and behavioral skills, ethics and professionalism.

The stated intention of a medical student to practice only specific areas of clinical medicine, or to pursue a non-clinical career, does not alter the School of Medicine's requirement that all medical students achieve competence in the full curriculum required by the faculty.

Observation:

Medical student's must acquire information as presented through demonstrations and experiences in the foundational sciences. Medical students must be able to obtain and interpret information through a comprehensive assessment of patients, correctly interpret diagnostic representations of patients' physiological data, and accurately evaluate patients' conditions and responses. These skills require the use or functional equivalent of vision, hearing, and touch.

Communication:

Medical students must exhibit interpersonal skills to enable effective caregiving for patients, including the ability to communicate effectively, with all members of a multidisciplinary health-care team, patients, and those supporting patients. Medical students must be able to record information clearly, utilize electronic medical records and accurately interpret verbal and nonverbal communication. Medical students must be able to communicate efficiently with other health care professionals and read and write effectively in English.

Motor Functions:

Medical students must be able to perform physical examination and diagnostic maneuvers. Medical students must be able to provide general care and emergency treatment for patients, and to respond

to emergency situations in a timely manner. Examples of emergency treatment reasonably required of physicians include but are not limited to 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. These activities require sufficient physical mobility, coordination of both gross and fine motor neuromuscular functions, and balance and equilibrium. Medical students must be able to meet applicable safety standards for the environment, and to follow universal precaution procedures.

Intellectual-Conceptual, Integrative and Quantitative Abilities:

Medical students must be able to effectively interpret assimilate, understand, synthesize and communicate the complex information required to function within the medical school curriculum both in person and via remote technology, and engage in problem solving individually and in small groups. Medical students must demonstrate the ability to comprehend three-dimensional relationships. Medical students must be able to adapt to different learning environments and modalities.

Behavioral and Social Attributes:

Medical students must exercise good judgment; attend to the responsibilities necessary for the care of patients; and develop mature, sensitive, and effective relationships with patients and members of the healthcare team in a courteous, professional, and respectful manner. Medical students must be able to contribute to collaborative, constructive learning environments. Medical students must demonstrate the skills and emotional stability required to effectively manage heavy workloads, function under stress, adapt to changing environments, display flexibility, and learn to function in the face of the uncertainties inherent in the clinical problems of patients. Medical students are expected to exhibit professionalism, personal accountability, compassion, integrity, concern for others, and interpersonal skills including the ability to accept and apply feedback and treat all individuals in a respectful manner, regardless of gender identity, age, race, sexual orientation, religion, disability, or any other protected status.

Ethics and Professionalism:

Medical students must maintain and display ethical and moral behavior commensurate with the role of a physician in all interactions with patients, faculty, staff, students, and the public. Medical students must be honest, able to self-assess their mistakes, respond constructively to feedback and assume responsibility for maintaining professional behavior. Medical students should understand and function within the legal and ethical aspects of the practice of medicine. Candidates for admission must acknowledge and provide written explanation of any felony offense or disciplinary action taken against them prior to matriculation in the School of Medicine. In addition, should a student be convicted of any felony offense while in medical school, they agree to immediately notify the Associate Dean for Student Affairs as to the nature of the conviction. Failure to disclose prior or new offenses can lead to disciplinary action by the School of Medicine that may include dismissal.

The technical standards delineated above must be met with or without accommodation. The use of an intermediary that would in effect require a student to rely on someone else’s power of selection, detection, and observation will not be permitted with the exception of an American Sign Language interpreter. Students who, after review of the technical standards, want to request a reasonable accommodation to fully engage in the program should contact the Associate Dean for Student Affairs to confidentially discuss their disability and related accommodation needs. Given the clinical nature of

our programs, time may be needed to create and implement the accommodations, so advance notice of accommodation needs, when practicable, is necessary.

Approved by MedSAC on April 20, 2022
Approved by Curriculum Steering Committee on January 31, 2023

URSMD Technical Standards (for the Class of 2023, 2024 and 2025)

All candidates for the M.D. degree must possess essential skills and abilities necessary to complete the medical school curriculum successfully either with or without reasonable accommodations for any disabilities the individual may have.

NOTE: The use of an intermediary that would in effect require a student to rely on someone else's power of selection, detection and observation will not be permitted. The School of Medicine's Technical Standards are as follows:

Ability to:

- Record historical information
- Detect, understand, and interpret physical findings
- Communicate physical findings, develop and record diagnoses as well as treatment plans
- Ability to manipulate equipment and instruments traditionally used by physicians and physicians-in-training.
- Ability to recognize, understand and interpret instructional materials required during undergraduate medical education.
- Ability to detect and appreciate alterations in anatomy, or other abnormalities encountered as part of the general physical examination.
- Ability to recognize, interpret and evaluate diagnostic studies.
- Ability to review and interpret notes prepared by other members of the health care team.
- Ability to perform calculations necessary to deliver appropriate care to the patient.
- Ability to communicate effectively with patients, families and other health care personnel.
- Ability to perform all of the above skills within a timeframe that is appropriate for a clinical setting.

Amended July 2012

CONFLICT OF INTEREST, TITLE IX AND GUIDELINES TO PREVENT THE MISTREATMENT OF STUDENTS ATTESTATION

To comply with LCME standards, students will be required to annually review and affirm that they have read and understand these policies. This will be conducted through MedSIS and will become part of the student's compliance records. Students will receive an e-mail each academic year with instructions to complete the mandatory compliance.

MEDICAL STUDENT BASIC LIFE SUPPORT (CPR) CERTIFICATION

The University of Rochester School of Medicine and Dentistry requires that all medical students be certified in Basic Life Support. Certification or re-certification will not be part of a medical school course, but will be a stand-alone session to be scheduled at the student's convenience. The URSMD requires a CPR BLS Certification Card.

Each entering student is required to provide the Registrar's Office with a copy of his/her/their certification card by December 30, of their first year of medical school. Documentation of current certification will exempt students from needing to do an original or refresher course during their first semester. Their certification and expiration dates will be noted in their permanent records. For most students, a re-certification will be required at the end of second year or during the summer of the third year. A copy of the re-certification card must be submitted to Student Services for placement in the permanent record.

Certification can be obtained through the Medical School's Center for Experiential Learning (CEL) at no cost to the student or any certified agency. The Center for Experiential Learning offers American Heart Association certification (original and refresher) throughout the year to medical students. This certification is valid for two years.

Although students have until December 30, to complete the certification process, they are encouraged to complete the requirement as soon as possible. For additional information, consult the Center for Experiential Learning (CEL) web site: https://cmetracker.net/ROCHESTER/Publisher?page=pubOpen#/EventID/159989/

ELECTRONIC MEDICAL RECORDS (EPIC)

Medical students will complete both ambulatory (AMB) and inpatient (ILP) eRecord training using e-Learning on line training modules. First year students will be trained in the late fall of their first year on Ambulatory eRecord. Second year students will generally be trained in the use of Inpatient eRecord at the end of their second academic year.

Electronic Medical Record Documentation Policy for Medical Students:

Copying in Others' Notes

History of Present Illness, Physical Exam, Assessment, and Plan Sections

Students must author their own history of present illness (HPI), physical exam, assessment, and plan. Students may never copy all or part of another student's or provider's HPI, physical exam, assessment, or plan.

Consequences of copying

Copying another provider's HPI, physical exam, assessment, or plan represents unprofessional behavior and may be reflected in students' evaluations and grades.

Linking in other sections of the history
The following sections of the note may be linked into a student's note at the discretion of the clerkship director, with the stipulation that the student must review and confirm the accuracy of these sections:

- Past medical history
- Past surgical history
- Medication List
- Allergies
- Social History
- Family History
- Review of Systems

Clerkship directors reserve the right to revoke this option for students whose notes are found to contain outdated or inaccurate information.

Reports of labs, imaging, and other tests ("Data")
Data should not be indiscriminately imported into a note. Data may be imported in a fashion which reflects judgment about which information is relevant for that patient. The data section should be up to date and relevant. Outdated information should be deleted.

Copy Forward = "Copy Forward- Edit"
Students may copy forward their own progress notes (although this is discouraged), but the information must be updated daily to accurately and concisely reflect the current clinical status of the patient. Outdated, irrelevant information should be deleted. Clerkship directors reserve the right to revoke this privilege for students whose notes are found to contain outdated or inaccurate information.

Use of templates or outlines
The use of checklists to create the history of present illness is strongly discouraged. Individual clerkships' policies on the use of templates or outlines for notes should be clearly stated, and should be followed during those clerkships.

Verification
Students' notes should be reviewed by a resident or attending physician daily. When writing a note, students should select the "Provider Student" note type, select "Co-signature Required", and designate the cosigner. When cosigning a student note, residents and attending physicians should use the "Cosign" function and avoid using the "Edit" or "Addendum" functions.

Procedure Notes
The documentation of procedure notes by students is at the discretion of the individual clerkship directors.

THE HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA) - MANDATORY SESSIONS

To comply with HIPAA (Health Insurance Portability and Accountability Act) which was enacted by Congress in 1996, all medical students enrolled in the medical school in any capacity, must complete institution specific training by September 15, of the year of matriculation. All students from other medical schools must also complete training specific to the University of Rochester.

To meet the training requirements, U of R medical students will complete basic training and orientation in the medical school curriculum and further training available on the University of Rochester Medical Center HIPAA intranet site. Students have two HIPAA training options: 1) view a 35 minute *Privacy and Security Training* video [a script of the video and a Key Concepts document are available to review with the video and links can be found within the instructions on the website]; 2) read all of the Privacy and Information Security training modules on-line. The video can be accessed on MedSIS or through the HIPAA website. Visiting students must also complete these requirements prior to beginning rotations through the University of Rochester. Compliance is mandatory.

Students should access the HIPAA website:
http://sites.mc.rochester.edu/departments/hipaa/training-education/

POLICY ON THE IMPLICATIONS OF INFECTIOUS AND/OR ENVIRONMENTAL DISEASE OR DISABILITY ON MEDICAL STUDENT EDUCATION ACTIVITIES

All medical students are educated in infection prevention which includes completing the NYS Mandatory Infection Control and Barrier Precautions Training as described elsewhere in this handbook. Additional education includes reviewing information on the use of personal protective equipment (PPE) and handwashing annually. Prior to the clinically intensive Phase 3 of the curriculum, they are re-educated on safety with sharp devices and infection prevention. Despite all of these measures, a student may be exposed to an infectious and/or environmental agent in the course of the medical school clinical experiences. Any such exposure may result in disease or disability. In these instances where the disease or disability as a consequence of an exposure as described above, the medical school will put into place all reasonable accommodations for the student to complete their education. These accommodations may include but are not limited to time away from the curriculum with a modified timeline for completion of the requirements for the MD degree or accommodations to assist the student in continuing to fully participate in the medical school curriculum.. Students in this situation would follow the same processes and procedures for requesting accommodations that are in place for students who have a disease or disability that is not related to exposure to an infectious and/or environmental agent during the course of the required medical school curriculum. Additionally, all medical students are required to enroll in disability insurance with a private company and this is coordinated by the medical school.

INFECTION PREVENTION GUIDELINES FOR UNIVERSITY OF ROCHESTER MEDICAL STUDENTS

Universal Precautions:

Universal precautions apply to all exposure to blood, body fluids, tissues and secretions.

- **WASH** hands before and after all contact with patients. Consider all blood, visibly bloody secretions and fluids and genital secretions from ALL PATIENTS to be infectious.
- **GLOVES** are required for all anticipated contact with human blood, body fluids, or mucous membranes. Double glove for surgical procedures.
- **CHANGE GLOVES** and wash your hands after each procedure and before contact with another patient.
- **WEAR MASK OR GOGGLES** when blood or body fluids may splash into your face.
- **WEAR WATERPROOF GOWN** when blood or body fluids may soak through a cloth gown.
- **YOU ARE RESPONSIBLE** for properly disposing of any sharps or infectious materials you have used in designated containers.

For Tuberculosis: N95 respirator masks are required for potential tuberculosis exposures.

Definition of blood and body fluids (for blood borne pathogens):

- Human blood and blood products
- Semen and vaginal secretions
- Cerebrospinal fluid (CSF), synovial fluid, peritoneal fluid, pericardial fluid, amniotic fluid
- Saliva in dental procedures (assume blood contamination)
- Any body fluid visibly contaminated with blood
- Any unfixed human tissue or organ
- HIV-containing cell, tissue, or organ cultures or solutions, and blood, organs, or other tissues from experimental animals infected with HIV or hepatitis B virus (HBV)

Notice that other body excretions such as saliva, urine, stool, vomitus, and respiratory secretions are not included on this list (unless visibly contaminated with blood). However, many of these excretions present other infectious hazards.

Needle Sticks, Cuts and Blood/Body Fluid Exposure:
WEAR YOUR BADGE CARD (updated April 2023)

EXPOSURE AT SMH/URMC

WASH OR IRRIGATE IMMEDIATELY IF EXPOSED TO BLOOD OR BODY FLUIDS

- Intact skin or Non-intact skin: **needle stick or cut** wash with soap and water.
- Mouth: rinse well with water.
- Eyes: rinse with sterile water, saline or tap water.

ASAP - Call University Health Services at **585-275-2662** for source patient blood testing, reporting incident details and further directions. **Nights/weekends/holidays**: The UHS on-call physician will coordinate care. **Call 585-275-2662**.

Complete an Incident Report form (SMH 115) by CALLING EH&S @ 585-275-3241

See UHS website for forms and directions. https://www.rochester.edu/uhs/primary-care/services-for-full-time-students/blood-body-fluid-exposures/

EXPOSURE AT AFFILIATED SITES

WASH OR IRRIGATE IMMEDIATELY IF EXPOSED TO BLOOD OR BODY FLUIDS

- Intact skin or Non-intact skin: **needle stick or cut** wash with soap and water.
- Mouth: rinse well with water.
- Eyes: rinse with sterile water, saline or tap water.

Report the incident to the onsite Employee Health office to ensure prompt source patient testing. After hours ask to speak to the Nursing Supervisor.

F.F. Thompson Hospital……	585-396-6457
Highland Hospital……	585.341.8017
Rochester General Hospital……	585.922.4026

Then also report the incident to UHS @ 585.275.2662. If you receive a bill, contact UHS @ 585.275.4955.

After consultation with the on call physician / provider – the decision on further evaluation and treatment will be determined, whether at the affiliated hospital or elsewhere.

Billing can be complex. All full time students are required to have health insurance covering care for acute injuries. *Exposures are usually acute injuries.* Therefore charges for care outside UHS should be billed to the student's health insurance plan. Students are not eligible for coverage by Worker's Compensation plans. Students with questions about bills should bring them to the attention of UHS Occupational Health Administration.

Other Infectious Diseases:

If you think you have been exposed to any of the following diseases, please contact the UHS Occupational Health Nurse for follow-up investigation:

- Chickenpox/zoster
- Meningococcal disease
- Pertussis
- Scabies
- Tuberculosis

If you are ill, there are certain conditions that may limit your contact with patients. If you think you have any of the following conditions, please contact the UHS Exposure Hotline at 585-275-2662 about the advisability of working with patients:

- Chickenpox or shingles
- Conjunctivitis
- Diarrheal illness
- Measles
- Skin infections
- Upper respiratory illness with fever

NYS MANDATORY INFECTION CONTROL AND BARRIER PRECAUTIONS TRAINING FOR HEALTH PROVIDERS

New York State requires all licensed healthcare professionals and medical students to complete and pass a comprehensive infection control certification. The University of Rochester SMD offers a Comprehensive Infection Control Course through the Center for Experiential Learning (CEL) that meets the State of New York's requirements.

The University of Rochester requires students to provide documentation of their certification and successful completion of the course or an**approved equivalent** Infection Control certification to be eligible to matriculate. Students are required to pay the CEL fee and provide documentation of their certification as part of the registration for medical school.

Students who fail to provide documentation of their certification by registration will not be permitted to register.

**Requests to Accept Equivalent Training

The prior training must have been completed within the past four years from the NYS approved providers. While there is an Equivalency Exception Criteria, it is limited to the following individuals with signed attestation:

- Completion of a fellowship in infectious disease; or
- two years of experience as a hospital epidemiologist; or
- current certification in infection control; or
- infection control practitioner qualified by training and/or experience.

The website with the NYS DOH approved providers is pasted below:

http://www.health.state.ny.us/professionals/diseases/reporting/communicable/infection/training/provider_list/alphabetical_list.htm

NYS Comprehensive Infection Control Course

Infection control is an essential component of any health care delivery. Infection control measures can be as simple as hand washing and as complex as high-level disinfection of surgical instruments. Measures to prevent the transmission of disease in health care settings have evolved over the years and as such, this New York State Department of Health approved and mandated training curriculum contains the most up-to-date content.

Steps toward completing the program through the University of Rochester Infection Control training program can be found at: https://web.cvent.com/event/f689fcdb-ad90-4c50-817f-9432f8849149/summary. Create a profile (use your URMC email) and read through the material.

- Create a profile (use your URMC email) and pay the feel
- Enter your credit card information to pay the fee
- Receive your certification of completion and print a copy; bring the copy to Student Services to update your compliance records.
- This certification is valid for a period of four (4) years. Students must remain certified. If a student takes time away from the MD curriculum, they must recertify when the certification expires.

MANDATORY URMC ANNUAL IN-SERVICE EDUCATION COMPETENCY EXAM

The annual URMC Mandatory in-service exam must be completed by all medical students by September 15 of each year. Non-compliance will lead to an administrative suspension* and the requirement to discontinue the academic program until the certification process has been completed.

Students will complete the annual mandatory In-service Exam via Blackboard on the student portal.

* Students placed on Administrative Suspensions will be prohibited from participating in their academic programs and will be denied access to SMD administrative services. The students' health insurance and student status will be maintained during Administrative Suspensions. An Administrative Suspension will not be reported in the permanent record or recorded on the transcript. The student will be charged a $100.00 administrative fee.

MEDICAL STUDENT IMPAIRMENT POLICY

Impairment Related to the Use of Alcohol or Drugs:

General Policy

A student must not use alcohol or drugs in a manner that could compromise patient care. Additionally, it is the responsibility of every student to protect the public from an impaired colleague and to reach out to a colleague whose capability is impaired because of ill health. A student is impaired if substance abuse, illness or disability prevents the student from adequately or meaningfully participating in the medical school program. Every student is obligated to report persons of the health care team whose behavior exhibits impairment, lack of professional conduct or lack of competence. Such reports must conform to established institutional policies as described here and elsewhere in the Medical Student Handbook.

Reporting

Students should contact the Honor Board, the CARE network, the Associate Dean for Student Affairs, or their Advisory Dean to report concerns regarding an impaired University of Rochester medical student. Advisory Deans will bring impairment concerns that emerge from individual relationships with students to the MSPRB to relieve the burden of sole responsibility. Reports of possible impairment that are made to the Honor Board, CARE Network or Associate Dean for Student Affairs will be forwarded to the MSPRB.

Students may self-report their impairment problem by contacting CPH directly at the hotline number (1-800-338-1833). To report a member of the healthcare team who is suspected of impairment, students should contact their Advisory Dean, Associate Dean for Student Affairs, or the appropriate clerkship director.

Enforcement of Policy

A. Referral

A student whose performance is <u>believed to be</u> impaired by substance abuse or suspected substance abuse will be referred by his/her/their Advisory Dean or the Medical Student Promotions and Review Board (MSPRB) to the Committee on Physicians' Health of the Medical Society of the State of New York (CPH) for diagnosis, monitoring and treatment. CPH will report to the MSPRB a student's failure to seek treatment subsequent to the MSPRB referral; a student's unsuccessful treatment; and/or relapse in treatment of substance abuse. The MSPRB Chair may suspend the academic or clinical activities of any such student during the diagnosis or treatment phase if the student is judged by him/her to be a danger to self or to others. A student's failure to seek treatment, failure to be successfully treated, or relapse will be grounds for dismissal or other disciplinary actions by MSPRB. Students can also self-refer to CPH.

B. Action by MSPRB and CPH

Upon receipt of a report regarding a student with a possible impairment, the MSPRB or its designee will further investigate the report. After assessing the concern, MSPRB will report to CPH a student whose performance is believed to possibly be impaired because of substance abuse. CPH will attempt to assess whether a substance abuse problem exists, and, if it does, whether performance as a student has been impaired.

Students who have been referred to CPH by the MSPRB and who refuse to undergo an evaluation will be referred back to the MSPRB by the NYS CPH for further action. The MSPRB need not be bound

by confidentiality and may take administrative action (e.g., suspension or dismissal) against a student who does not cooperate with evaluation.

If MSPRB believes that a student may have a substance abuse problem, but impaired performance has not occurred, MSPRB will recommend to the student that he/she obtain treatment. The student may refuse treatment without being subject to disciplinary action unless his/her/their performance becomes impaired.

If CPH reports to MSPRB its determination that a student does not have impairment, the report will be placed in a sealed envelope marked confidential in the student's confidential file. Access to the file will be restricted to the Senior Associate Dean for Medical Student Education, the Associate Dean for Student Affairs, and the MSPRB. The MSPRB shall have the authority to make determinations related to the information.

C. Treatment and Monitoring by CPH

If the performance of a student has been impaired by substance abuse, treatment by CPH therapists will be recommended. No disciplinary action will be taken so long as the student accepts, complies with, and successfully undergoes treatment. It is the practice of the CPH to utilize blood or urine tests to monitor treatment. Successful abstention will be documented by CPH monitoring blood or urine drug levels as long as the CPH physician deems it necessary. In instances where patient welfare or safety is in jeopardy or the student refuses to undergo treatment, MSPRB will be notified by CPH and MSPRB will take appropriate action. Funding for MSPRB mandated evaluation will be borne by the Dean's office. The costs for treatment and monitoring will be borne by the student.

For all causes of student impairment, there will be a mechanism for the systematic sharing of information with the MSPRB so long as the student remains in treatment. A student's failure to participate in a mandated evaluation, failure to successfully complete recommended treatment, or relapse during or after treatment will be grounds for dismissal from the program or other disciplinary actions by MSPRB.

If the period of necessary treatment and/or monitoring extends beyond graduation, the New York State CPH will notify the CPH of the State of the student's residency and request that treatment and/or monitoring continue in that State.

Impairment Unrelated to Alcohol or Drugs:

When a student's personal health or well-being is affected due to a suspected impairment unrelated to drugs or alcohol, such that the student's performance is impaired or reasonably may become impaired, the MSPRB shall have the right to mandate that the student undergo a medical or psychiatric evaluation for the purpose of providing recommendations to the MSPRB relative to the student's ability to meet program requirements and to provide safe and effective patient care. The School, at its option, may use University Health Service (UHS) and/or the University Counseling Center (UCC) evaluators to perform the evaluations and for treatment and monitoring when conflicts of interest can be avoided. Funding for MSPRB mandated evaluation will be borne by the medical school. The costs for treatment and monitoring will be borne by the student.

When a student has been assessed as having impairment, UHS, UCC and/or Committee on Physician Health (CPH) may be designated by the MSPRB to monitor the student's treatment and progress. The CPH/UHS/UCC professional who has been designated as the student's treatment monitor will be a liaison between the student's provider and the MSPRB. The MSPRB will not request specific

information regarding the student's diagnosis or the contributing factors. The MSPRB will require UHS/UCC/CPH and/or another designated student treatment monitor to provide it with an opinion as to whether a student will be able to return to the program**,** ~~and~~ what limitations the student will have, and what reasonable accommodations, if any, the student will need to safely and effectively participate in the program. The MSPRB shall have the right to determine whether the student can perform in accordance with the program requirements.

For all causes of student impairment, there will be a mechanism for the systematic sharing of information with the MSPRB so long as the student remains in treatment. A student's failure to participate in a mandated evaluation, failure to successfully complete recommended treatment, or relapse during or after treatment will be grounds for dismissal from the program or other disciplinary actions by MSPRB.

If the period of necessary treatment and/or monitoring extends beyond graduation, the New York State CPH will notify the CPH of the State of the student's residency and request that treatment and/or monitoring continue in that State.

Amendment
The school reserves the right to amend this policy at any time.

Implications of Infectious and/or Environmental Disease or Disability:
For any student who becomes ill or disabled as a result of infectious or environment exposure while a medical student will be given schedule adjustments and accommodations as with any illness or disability. Students who have an infectious/contagious disease or disability that interferes with education/patient care that the student self-discloses at the time of matriculation, at the time of the annual health review, or at any time are evaluated by an ad hoc committee that may include (as appropriate) the UHS Director, the Hospital Epidemiologist, a member of the SMD faculty with expertise in the disease/condition and a representative of the Dean's Office. The committee makes recommendations to the Dean about any restrictions that may be needed; any special support the student will need, and provides counseling to the student. (Effective May 1, 2015)

NEW YORK STATE CHILD ABUSE REGISTRY

All students are required to complete the New York State Department of Children and Family Services authorization form for the State Central Register Database Check. Students will complete the authorization as a part of the orientation to Year 3. However, if the forms were completed and approved during Phase 1 or Phase 2 for a different psychiatry or volunteer experience, students do not have to repeat the process. Students who complete the form prior to Year 3 are responsible for contacting the psychiatry clerkship coordinator to confirm the form is on record.

NOTE: Any omission, inaccurate or misleading information will be cause for a review of the student status and disciplinary action which includes dismissal from medical school.

PROTECTED HEALTH INFORMATION (PHI)

Part of medical education is the proper documentation of patient encounters and review of this documentation by preceptors. Students should be aware that protecting PHI is part of this process.

Notes and EMR documents can only be copied from the electronic medical record for specific teaching/educational requirements as indicated by individual clerkships. The following information

should be deleted from any notes or EMR documents that students submit to preceptors, either in electronic form or as hard copies:

- Name
- Medical Record Number
- Date of Birth
- Date of hospitalization
- Room/bed number
- Other information that could easily identify the patient

Notes submitted to preceptors for review should be handled confidentially and disposed of in locked confidential recycling containers or shredded after use. All emails including PHI for educational purposes should be deleted immediately.

Appropriately de-identified electronic notes should only be submitted via the secure intranet server, using the student's URMC email address and not through students' or faculty's private accounts. The email must be noted as "Confidential" in the subject.

Individual clerkship/elective directors should provide clear expectations about assignments, and students should contact clerkship/elective directors with any questions about expectations to ensure the integrity of electronic protected health information.

Definition of PHI

In the HIPAA Privacy Rule, Protected Health Information means individually identifiable health information that is transmitted or maintained in electronic or any other form or medium. Whether PHI is electronic, paper or oral, all protections and requirements apply under the Privacy regulations. HIPAA's Security regulations are limited to electronic PHI only.

The Privacy regulations define individually identifiable health information as information that is a subset of health information, including demographic information collected from an individual, and:

a. Is created or received by a health care provider, health plan, employer, or health care clearinghouse; and
b. Relates to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present, or future payment for the provision of health care to an individual; and
c. That identifies the individual; or
d. Where there is a reasonable basis to believe the information can be used to identify the individual.

Violations of the above guidelines either purposeful or unintentional will result in disciplinary action which could include dismissal from the medical school. (November 26, 2012)

REQUIREMENTS

New York State Department of Health:

- NYS Infection Control – prior to matriculation through University of Rochester Infection Control training program. https://web.cvent.com/event/f689fcdb-ad90-4c50-817f-9432f8849149/summary
- Mandatory child abuse lecture given during first year in Skills in Complete Patient Evaluation (SCOPE)
- Psychiatry Clerkship - Child Abuse Registry – Phase 3 Orientation

University of Rochester Medical Center:

- Electronic Medical Records/ eRecord (EPIC) – **scheduled as access is needed**
- The Health Insurance Portability and Accountability Act (HIPAA). Completed via a video review in the Medical Student Information System (MedSIS) by September 15, of the year of matriculation.

University of Rochester School of Medicine and Dentistry:

- Conflict of Interest Policy review - Annually
- Title IX Policy review - Annually
- Guidelines to Prevent Student Mistreatment Policy review – Annually
- Affirmation Statement - annual attestation regarding changes to criminal background, arrest history and sex offender status
- Annual Mandatory In-Service Exam – Completed via Blackboard (http://learn.rochester.edu)
- Verification of Ability to Meet SMD Technical Standards - Annually
- The Health Insurance Portability and Accountability Act (HIPAA). Completed via a video review in the Medical Student Information System (MedSIS) by September 15, of the year of matriculation.
- Human Subject Training for Research – Phase 1 by December 1
- NYS Infection Prevention – Phase 1, good for four years – completed through CEL
- AAMC Questionnaires
  - Matriculating Student Questionnaire (MSQ) Phase 1 Orientation
  - The Graduating Student Questionnaire (GSQ) at the start of the Process of Discovery
- Second and fourth year exist surveys on curriculum and support services
- Faculty/course evaluations – on going
- CPR – must provide evidence of certification by December 30 of Phase 1 and updates when certification expires – completed through CEL
- eRecord (electronic medical records)
  - Ambulatory modules completed in December of Phase 1
  - Inpatient modules completed in April of Phase 2
- eView (Radiology) – April of Phase 2
- 2nd & 3rd Year Comprehensive Assessment

University Health Service (UHS):

(September 15 deadline, except as noted)

UHS Monitored Requirements:

The UHS monitors compliance and assists students in meeting Federal OSHA, New York State College and health care hospital requirements

All School of Medicine and Dentistry Students **MUST** fully comply with all UHS requirements, by the established deadlines (generally September 15) or be required to discontinue their academic programs.

- Matriculating students must complete all UHS requirements and submit the required Health Professions Student Health History Form prior to the start date. Students who fail to complete all UHS requirements and to submit the completed Health History form prior to the start of classes are subject to a late fee and risk of not matriculating.
- Complete immunization requirements (TB risk assessment required annually; PPD and tetanus if more than nine years ago).
- Evidence of an annual physical health review (including a PPD & health update appointment)
- Annual TB respiratory protection (mask fitting)
- Submit documentation of Health Insurance Coverage. Note: The Student Health Plan consists of two parts:
  1. the mandatory health fee
  2. health insurance

  NOTE: All students will be covered and charged for U of R health insurance unless they complete the waiver on the UHS Health Insurance Options Form.

URMC POLICY OF CONFIDENTIALITY

Please note that all confidentiality policies for Strong Health employees and health care professionals apply fully to medical students at all times.

Strong Health employees and health care professionals possess sensitive, privileged information about patients and their care. Patients properly expect that this information will be kept confidential. The System takes very seriously any violation of a patient's confidentiality. Discussing a patient's medical condition, or providing any information to other unauthorized persons, will have serious consequences for the disclosing party. Personnel should not discuss patients in public or with their families.

Each provider is the owner of the medical record which documents a patient's condition and the services received by the patient. Medical records are strictly confidential, which means that they may not be released to outside parties except with the written consent of the patient or in other limited circumstances. Special protections apply to mental health records, records of drug and alcohol treatment, and HIV related information. Medical records must not be physically removed from the provider's office or facility, altered, or destroyed. Personnel who have access to medical records must take pains to preserve their confidentiality and integrity, and nobody is permitted access to the medical record of any patient without a legitimate, work-related reason for so doing. Any unauthorized release of or access to medical records should be reported to a supervisor or the Compliance Officer.

New York State has enacted a series of computer crime laws that are designed to punish and deter computer crime. In compliance with the law, Strong Health prohibits unauthorized access to its computer system, either directly or by network or telephone. An individual who does not have a legitimate password is unauthorized to gain access. The System also prohibits the destruction or corruption of electronically stored or processed data. Persons who violate these rules will be prosecuted to the full extent of the law. (Source: URMC Compliance Manual)

GRADUATE HOUSING

All questions related to graduate and family housing may be addressed to uapts@reslife.rochester.edu or visit the web link pasted below:

http://www.rochester.edu/reslife/graduate/

The MD program is not involved in any aspects of graduate housing.

INTEGRITY HOTLINE

585-756-8888

Purpose:
The Integrity Hotline offers you easy access to report any improper or unethical behavior you believe could jeopardize the integrity of the institution.

Reports of any potential non-compliant activities or violations of federal or state regulations may be made confidentially and **ANONYMOUSLY**, if you prefer. The hotline is a dedicated outside line without the capability of identifying a caller's telephone number.

Available 24 hours a day, the hotline is answered by Compliance Office staff from 9 a.m. to 5 p.m. with voice mail for after-hours calls.

Tell Us About:
Any concerns regarding inaccurate billing for services, research fraud, breach of patient privacy/confidentiality or information system security, violations of professional practice standards/business ethics or conflicts of interest.

Additional Reporting Options:
The hotline augments other reporting paths, including an individual's supervisor, department leadership or administration offices such as University Audit, University Counsel, Human Resources, Environmental Health and Safety and University Intercessors. In addition, the University of Rochester provides guidance to help you resolve job-related issues.

Those in our community who are hearing impaired may provide information through the New York Relay Service at 1-800-662-1220.

http://www.urmc.rochester.edu/compliance-office/integrity-hotline/

VOTER REGISTRATION AND HIGHER EDUCATION ACT

The Higher Education Act, which governs most federal student-aid programs, stipulates that higher education institutions must obtain voter materials 120 days before the local registration deadline and distribute them to students enrolled in all degree or certificate programs on the campus.

Registration Requirements:
To register, you must be:
18 years of age by the date of the election in which you want to vote, a United States Citizen, a resident of Monroe County for 30 days prior to the election, not in jail or on parole

Monroe County Registration Procedures

In Person: Registration forms are available at most government offices, banks, post offices, libraries, and supermarkets or you may register in person at the Monroe County Board of Elections Office, 39 W. Main Street, Rochester, --Monday through Friday between 9:00am - 5:00pm. Voter Registration forms are also available in the Student Services Center.

Over-the-Phone: Call 585-428-4550 and a registration form will be sent to you in the mail to complete and return.

Mail/E-Mail: Print an application form from http://www.elections.ny.gov/votingregister.html (Related Documents) complete and return through the mail; or, e-mail your request for a registration form to be sent to you. Be sure to include your mailing address.

Deadline for Registering to Participate in an Election:
If you want to vote in an election, you must mail or deliver your completed registration form to the Board of Elections no later than 25 days before the election in which you want to vote. Your eligibility to vote will be based on the date you file this form, and the county board will notify you of such.

Absentee Voting Qualifications:
A voter may qualify to vote by absentee ballot if their duties, occupation, business or vacation requires them to be absent from their county of residence on election day or if he will be confined by illness or physical disability either on a temporary or permanent basis.

Jury Duty and Rules for Postponing Service:
While the school can and will provide documentation to support a request to postpone service beyond a six-month period, due to rule changes, there is not a guaranteed exemption for medical students. Students may be required to report for jury duty during scheduled medical school breaks and/or vacation periods.

Students who need letters to document their enrollment status should contact the Director of Student Services. While the first request for postponement of jury service will be granted, there is a required time frame (no less than two months and no more than six months from the report date.) when the service must occur, which may necessitate a request to postpone service beyond the six month period.

NOTE: Legal counsel advised about one technical point, if a student receives a notice to report for “grand jury” (which requires an extended commitment over multiple weeks), the student could request to transfer the notice to regular jury duty (known as “petit jury”) rather than grand jury, when seeking the postponement.

http://www.nyjuror.gov/

VI. OFFICES FOR MEDICAL EDUCATION

Admissions Office:
Admission to the School of Medicine and Dentistry, applicant tours, student interviews, host program.

Christine Hay, MD
Associate Dean for Admissions
Room G-9534 / Tel: 585-275-4606

Michelle Vogl
Director of Admissions
Room G-9536 / Tel: 585-275-4542

Ann Cornwell
Admissions Coordinator
Room – G-9536 / Tel: 585-275-9778

Kelsey Johnson Hartigan
Admissions Marketing and Interview Coordinator
G-9536 / Tel: 585-275-3112

Advisory Deans:
Each entering student is assigned to one of four advisory deans who serve as that student's advisor for the entire undergraduate medical educational experience. Students may meet individually for personal advising, curricular planning, or career counseling.

David Kaufman, M.D.
Professor, Thoracic Surgery
SSC, Room G-7644 / Tel: 585-275-4537

Cheryl Kodjo, M.D., MPH
Assoc. Professor Pediatric Adolescent Med
SSC, Room G-7644 / Tel: 585-275-4537

Anne Nofziger, MD
Associate Professor, Family Medicine
G-7808 / Tel: 585-275-5762

Erik Rueckmann, M.D., MPH
Associate Professor, Emergency Medicine
SSC, Room G-7644 / Tel: 585-275-4537

Bursar's Office:
Billing and emergency loans.

Office of the University Bursar
bursar@admin.rochester.edu
Phone Hours: Monday-Friday from 9:30-11:30am and 1:30-4:30pm
Bursar Information Window Hours: Monday-Friday 9:30am-12:30pm and 1:30-4:30pm
Mailing Address: PO Box 270037, 330 Meliora Hall, Rochester, NY 14627

Office of Medical Student Enrichment Program:
Research, international and community service opportunities

Jene Dupra, Administrative Assistant, SSC, Room G-7644 / Tel: 585-275-8615
Summer and Year Out Research: OME_Research@urmc.rochester.edu
International Education Exchange Programs: OME_VIS@urmc.rochester.edu
Students of Rochester Outreach: OME_SRO@urmc.rochester.edu

Office of Curriculum and Assessment (OCA):
OCA is located in the Offices for Medical Education in the School of Medicine and Dentistry. OCA focuses on curriculum implementation, innovation, evaluation and research. OCA, through its directors, reports directly to the Senior Associate Dean for Medical Student Education.

Christopher J. Mooney, PhD, MPH
Director, Assessment
Room G-8540 / Tel: 585-275-8570

Andria Mutrie, MS
Director of Curriculum
Room G-8540 / Tel: 585-275-0827

Lauren Bestram
Course Coordinator
G-8540H / Tel: 585-275-0385

Erika Hansen
Course Coordinator
G-8540 / Tel: 585-275-0308

Katie Libby
Course Coordinator
G-8540 / Tel: 585-275-4739

Elaine Morgillo
Course Coordinator
G-8540 / Tel: 585-275-5975

Isaiah Evans
Course Coordinator
G-8540 / Tel: 585-275-4577

Financial Aid Office:
Financing education, debt management counseling and work study eligibility.

Herbert (BJ) Revill
Director of Financial Aid
SSC, Room G-7644 / Tel: 585-275-4523

Margaret Christian
Assistant Director of Financial Aid
SSC, Room G-7644 / Tel: 585-275-4523

Offices for Graduate Studies:
Richard T. Libby, PhD
Senior Associate Dean, Office for Graduate Education,
Professor of Ophthalmology & Biomedical Genetics
Room G-9551
Tel: 585-275-4522

MSTP Admissions and Administration:

M. Kerry O'Banion, M.D., Ph.D.
Director

Laurie Steiner, M.D.
Associate Director

Alysha Taggart
Program Administrator
Room: G-9548

Registrar's Office:
Course schedules, transcripts, student verification, and registration for licensure exams.

Kathleen Kelly, JD
Registrar
SSC, Room G-7644 / Tel: 585-275-4541

Monique Williams
Assistant Registrar
SSC, Room G-7644 / Tel: 585-275-4541

Student Affairs Office:
Tutoring, academic support services, accommodations for religious observances and students with disabilities, and the Medical Student Promotions and Review Board.

Flavia Nobay, M.D.
Associate Dean for Student Affairs
SSC, Room G-7644
Tel: 585-275-4537

Tressa Newton, EdD
Dir, Office of Student Enrichment, Career Counseling & Wellness
SSC, Room G-7644
Tel: 585-273-3289

Student Services Center (SSC):

The Student Services Center is the one-stop shopping, resource center for students. It is located in area G-7644, and houses the offices of the Senior Associate Dean for Medical Student Education, the Advisory Deans, Financial Aid, the Registrar, Student Affairs and Director of Offices for Medical Education.

Hours of operation: 8:00 a.m. – 5:00 p.m., Monday - Friday
Telephone: 585-275-7245 FAX: 585-273-1016 Location: G-7644 Suite

David R. Lambert, M.D.
Senior Associate Dean for Medical Student Education (SADMSE) and Professor Medicine
SSC, Room G-7644 / Tel: 585-275-4537

Penny Sarsfield
Administrative Assistant
SSC, Room G-7644 / 585-275-5910

Diane Frank
Director, Offices of Medical Education
SSC, Room G-7644 / Tel: 585-275-7923

Michelle Knotowicz
Administrative Assistant
SSC, Room G-7644 / Tel: 585-275-7245

Emily Lindquist
Administrative Assistant
SSC, Room G-7644 / Tel: 585-273-3293

Jene Dupra, Administrative Assistant,
SSC, Room G-7644 / Tel: 585-275-8615

FACILITIES FOR STUDENTS

Lockers:

All students are assigned locks and lockers prior to matriculation by Student Services. If there are any problems with the lock or lockers, please contact Student Services at 585-275-4537.

Mailboxes and E-Mail:

Every student is assigned a post office box and E-mail address during first year registration. Since all official medical school correspondence is sent to the post office box or via E-mail, it is the student's responsibility to check his or her post office box and E-mail daily.

URMC medical student graduates will retain their URMC e-mail addresses for ten (10) months following the date of graduation.

On-Call Room:

During the third and fourth years, students have access to the On-Call Rooms located on the Ground floor: G-5704 and G-5702. You will need to enter passcode 22722 to enter the space. The On-Call Rooms should remain locked at all times for security reasons.

Student Lounge (Room G-7647):
Television, recreational facilities, and a kitchen with refrigerator, microwaves, and sink are available **for graduate and medical student use ONLY**. You will need your student ID for swipe access. This lounge should remain locked at all times for security reasons.

Swipe access to the Music Room in the Student Lounge may be obtained from Diane Frank, Director of Offices for Medical Education, SSC, Tel: 585-275-7923 Room G-7644. For security reasons, the music room should remain locked at all times.

The Student Lounge may be reserved for various functions by contacting the Student Services Receptionist, Room G-7644, Tel: 585-275-4537

STUDENT COMPUTING

There are several student computing areas, some open all night that contain dozens of Macs & PCs. See Edward G. Miner Library's Public & Student Computing link http://www.urmc.edu/hslt/miner/ for more information on student computing, or to learn about digital library resources available to students.

For more information about medical student computing at the University of Rochester, contact the help desk manager at 585-275-6944.

VII. STUDENT CONDUCT AND RESPONSIBILITIES

ALCOHOL USE ON SCHOOL PROPERTY

In the Medical Center and at all of its off-site locations, the non-patient use of alcoholic beverages is limited to events held at sites which occur outside patient care areas. These events and the use of alcohol must be approved by the Office of the Senior Vice President for Health Affairs, catered by a catering service approved by the UR Sanitarian from Environmental Health and Safety, and holds a current liquor license, as well as liquor liability insurance approved by the Office of Counsel to the Medical Center. Students must not have alcohol on the premises.

Medical Student Events:
Medical student events that include alcohol cannot have “open bars,” cannot have alcoholic beverages provided either free or as part of an admission fee. This policy is in effect for all student events paid for by medical school or student contributed funds, on site or at an outside facility. (Effective May 15, 2013)

All alcoholic beverages must be purchased by the individual from the approved URMC caterer or outside facility for events held outside of the university property. (Amended June 2009)

New York State Law prohibits the serving of individuals actually or apparently under the age of 21, to intoxicated individuals, or to individuals who are known to become habitually intoxicated.

BEHAVIOR AND PROFESSIONALISM

Standards and Policies:
Medical students at the University of Rochester are expected to adhere to the highest standards of professionalism, both on and off campus in their professional and personal actions. (NOTE: Rochester Early Medical Scholars (REMS) Program, and other early assurance or combined-degree programs

participants/candidates and candidates who accept Rochester's offer of admission are held to the same standards). They are expected to demonstrate outstanding professional qualities outlined in the Expectations for Medical Students. Violations of the standards set forth in that statement are grounds for disciplinary action, up to and including dismissal from the school.

If a student faces civil/criminal court action, the school may proceed with its own process in the matter or, at its discretion, choose to delay the proceeding until the outcome in the courts is determined. If preliminary investigation of any matter suggests the student may be a danger to patients or others, or may face criminal action in the courts, the student may be temporarily suspended from academic or clinical activities.

Major disciplinary actions (such as probation, suspension, formal reprimands, mandated Leave, or requirement to repeat a year) taken by MSPRB against a student will be recorded in the permanent record and reported in the student's Medical Student Performance Evaluation (MSPE).

Allegations of research misconduct or sexual harassment/violence by medical students will be subject to any additional requirements of federal agencies and University regulations.

Procedures:

Any person can bring to the attention of any faculty member a medical student's violation of medical school professional or ethical standards. Any faculty member receiving such a report shall inform the Associate Dean for Student Affairs (ADSA), an Honor Board member, the Chair or the Co-Chair of MSPRB as soon as possible.

The Chair or Co-Chair will decide whether the allegation warrants further investigation by the MSPRB or if the allegation will be referred to the Honor Board if not already done. In considering this, the Chair or Co-Chair may interview, or direct the Advisory Dean or Associate Dean for Student Affairs to interview the persons allegedly involved. If this investigation suggests legitimate grounds for MSPRB review, he/she will refer the matter to the full MSPRB by sending a letter summarizing the matter to the members and to the student (by certified mail, return receipt requested).

Within forty-five days of receiving the report, the MSPRB will meet to consider the matter. The ADSA will notify the student in writing of the date and time of the meeting. The student will be given written instructions on where to report for the meeting. The MSPRB has the discretion to change the date and time, or location of the meeting.

An MSPRB quorum consists of the Chair or Co-Chair and a total of five or more voting members. Any decision to dismiss a student shall require a majority of the entire MSPRB; all other decisions require a majority vote of those present. Formal rules of evidence do not apply. Any material considered relevant by the MSPRB shall be considered.

The student may appear alone, or with an advocate (who is not an attorney), before the MSPRB. The student and/or advocate may not record and/or audiotape any portion of review process meeting(s).

In the correspondence to the student confirming the date and time to report for the MSPRB review meeting, a deadline (date and time) will be included to provide the advocate's name, affiliation and contact information. In addition, if the student would like the MSPRB to review and/or consider documents, a deadline for submitting the specified number of copies, will be included in the confirming correspondence.

The MSPRB retains the right to deny the participation of an advocate named after the stated deadline or for whom the requested documentation has not been submitted. The MSPRB retains the right to exclude supporting documents received after the stated deadline. (Amended December 6, 2005)

The student may appear at the meeting on his/her/their own with an advocate who is not an attorney. The student may submit to the MSPRB, in advance of the meeting (before deadline as noted above), whatever written documents he/she chooses to defend his/her/their position or character. The student and/or advocate may not record and/or audiotape any portion of review meeting(s).

The MSPRB's decision will be provided in writing, to the student within three business days of the meeting.

Decisions of the MSPRB for dismissal or required leaves of a year or more are the only MSPRB decisions students may appeal. In such instances, MSPRB decisions may be appealed by students to the Medical School Advisory Council (MedSAC) Appeals Board (MAB). Within five business days of the date of the MSPRB's letter, the student may appeal such decision to the MAB. Any appeal must be in writing and must state the reasons on which it is based. Appeals are submitted to the Associate Dean for Student Affairs. Procedures of the MAB will be identical to those described for appeals of MSPRB dismissal or required leaves. (see MSPRB Appeals)

Honor Board Recommendations:

Decisions of the MSPRB for dismissal or required leaves of a year or more related to Honor Board recommendations are the only MSPRB decisions students may appeal. In such instances MSPRB decisions may be appealed by students to the Medical School Advisory Council (MedSAC) Appeals Board (MAB) within five business days of the date of the MSPRB's letter. Any appeal must be in writing and must state the reasons on which it is based. Procedures of the MAB will be identical to those described for appeals of MSPRB dismissal or required leaves. (see MSPRB Appeals)

INTIMATE RELATIONS

Source: U of R Faculty Handbook Sections III.C and D
http://www.rochester.edu/provost/assets/PDFs/Faculty_handbook.pdf

Intimate Relationships [updated May 2018]

Freedom of thought and expression and the opportunity for all members of the University community to pursue knowledge unencumbered are the foundation of the academic enterprise. The development of intimate relationships may, in some cases, compromise the academic relationships that are fundamental to the intellectual and professional development of members of the University. The faculty member - student academic relationship is of special concern in this context given the innate power imbalance between faculty and students; however, such power imbalances also may exist among faculty members. The purpose of this policy is to protect the rights and interests of all members of the University community by avoiding the potential for real or perceived coercion, favoritism, bias, or exploitation that may be created by intimate relationships among members of the University community.

To provide clarity regarding the intentions and purposes of this policy, the following definitions are employed.

- **Student** refers to all full-time, part-time, visiting, or prospective undergraduate or graduate students, and all postgraduate trainees, research associates, residents, and fellows.

- For the purposes of this policy **Faculty** refers to tenure-track, instructional, adjunct, research, and clinical faculty members of all ranks. (Other individuals (e.g.: students, post-doctoral fellows and
- other trainees) who exercise academic authority over students should see their respective handbooks for related policies.)
- **Intimate relationships** refer to non-familial sexual, dating, and/or romantic relationships. Note: unwanted advances or other inappropriate behaviors may be considered sexual harassment, which falls under HR Policy 106.
- **The exercise of academic authority** includes the following activities (on or off campus): teaching courses, (i.e., having primary or shared responsibility for the conduct of a course but not, for example, simply delivering occasional guest lectures); grading or otherwise evaluating student work; advising on formal projects such as a thesis or other research; serving as an external examiner or member of a thesis committee; participating in decisions regarding student funding or resource allocation; performing clinical supervision; and making recommendations or otherwise influencing decisions regarding admissions, employment, tenure and promotions, or the awarding of grants, fellowships, or other recognitions. Generally, it is assumed that faculty exercise academic authority over all students in their department or program. However, there are circumstances and academic structures within the University where the assumption of academic authority may not be fitting, for example, in cases of some secondary faculty appointments or informal program affiliations, or in the distributed departments and programs in the School of Medicine and Dentistry. In such cases, it is left to the department chair and cognizant dean to define appropriate domains of academic authority; however, if there is uncertainty on the part of the student or faculty member academic authority should be assumed or clarification about the existence of academic authority should be sought from / determined by the department chair and cognizant dean.

Any questions regarding the above definitions, as well as other aspects of this policy, should be directed to the University Intercessor or the appropriate department chair or dean.

The Policy

- Faculty are prohibited from entering into intimate relationships with undergraduate students of the University.
- Faculty are prohibited from entering into intimate relationships with any member of the University community over whom they exercise academic authority as defined above.
- Faculty are prohibited from accepting academic authority (as defined above) over any member of the University community with whom they currently share an intimate relationship, or with whom they have shared such a relationship in the past.

Violations

Violations of this policy will result in disciplinary actions, which can include, but are not limited to, written warnings, loss of privileges, mandatory training or counseling, probation, suspension, demotion (including revocation of tenure), expulsion, and termination of employment. Disciplinary actions will be enforced at the appropriate administrative level ranging from department chair to the Office of the Provost.

Exceptions

In cases in which a mutually consensual relationship develops, exceptions to this policy may be granted, but must be managed carefully by agreement of both parties in the relationship, the chair(s)/dean(s) of the faculty member and other party, and the University Office of Counsel. A written

management plan outlining measures to insure the integrity of the academic interaction and to protect the interests of all parties must be filed with the cognizant dean and reviewed annually. The University Intercessor is available for guidance in the creation of such a plan.

Management of Academic Relationships with Immediate Family Members

Close familial relationships may exist between faculty members and other members of the University, for example when a faculty member's child, person over whom the faculty member has legal guardianship, spouse, or committed partner joins the University as a student or member of the faculty. In any such case in which the faculty member may exercise academic authority over the other party, unless there is an existing policy at the program level, a plan must be developed in consultation with the cognizant department chair(s) detailing how any conflicts of interest will be managed. The plan must be approved by the affected party, the faculty member, and the cognizant chair(s) and dean(s). Related policies include: https://www.rochester.edu/working/hr/policies/pdfpolicies/121.pdf and https://www.rochester.edu/working/hr/policies/pdfpolicies/106.pdf. *Also refer to other handbooks as developed (graduate handbook, post-doctoral handbook, undergraduate, etc.).*

POLICY on INDUSTRY INTERACTIONS

An excerpt from the policy and guidelines:

"Purpose of Policy:
The purpose of this policy is to establish guidelines for interactions with Industry representatives for all Personnel of the University of Rochester Medical Center and its Affiliates (collectively URMC). Interactions with Industry occur in a variety of contexts, including marketing of new pharmaceutical products, medical devices, equipment, and supplies on-site, on-site training for newly purchased devices, educational support of medical students and trainees, and continuing medical education. Faculty and trainees also participate in interactions with Industry off campus and in scholarly publications. Many aspects of these interactions are positive and important for promoting the educational, clinical and research missions of the Medical Center. However, these interactions must be ethical and cannot create conflicts of interest or improper relationships that could endanger patient safety, data integrity, the integrity of our education and training programs, or the reputation of either the faculty member or the institution. In some situations, a conflict of interest or improper relationship could violate certain federal or state anti-kickback laws. These laws impose severe civil and criminal penalties upon institutions and individuals who request or receive anything of value (such as a gift, meal, trip or payment) in exchange for a clinical or business referral.

Statement of Policy:
It is the policy of URMC to adhere to the highest ethical standards and legal requirements, to avoid conflicts of interest, improper relationships and other interactions with Industry that may suggest the appearance of a conflict of interest or an improper relationship. Individuals must consciously and actively divorce clinical care decisions from any perceived or actual benefits expected from any company. It is unacceptable for patient care decisions to be influenced by the possibility of personal financial gain. When conflicts of interest do arise, they must be addressed appropriately."

The entire policy and guidelines can be found at:
https://www.urmc.rochester.edu/MediaLibraries/URMCMedia/quality/documents/Industry-Interactions-Policy-Updated.pdf

MEDICAL STUDENT HONOR CODE

Definition and Purpose

The Honor Code at the University of Rochester School of Medicine and Dentistry requires students to conduct themselves with honor in all aspects of their lives as physicians-in-training. By granting great responsibility, the Honor Code fosters an environment of freedom and trust. By accepting an offer of admission at the University of Rochester School of Medicine and Dentistry, each student commits to adhere to our Honor Code.

The Honor Code is not a set of rules, but rather an articulation of principles that emphasize our common commitment to engage with one another in order to serve our patients while balancing personal freedom with professional standards. Specific Expectations of Medical Students are outlined below and in the *University of Rochester School of Medicine and Dentistry Student Handbook*. The Honor Code articulates our values and the Bylaws define the process for how we hold each other accountable for our words and actions so that we foster a culture of respectful response.

The Honor Code

We commit ourselves to be honest, respectful, and to conduct ourselves with **integrity** in all interactions with patients, their families, faculty, and other health professionals. As students and physicians, we recognize our role as ambassadors for our institution and the field of medicine. We will respect the spirit of academic integrity in research and collaborative scholarly work. We accept responsibility to both shape and adhere to this ethical code in our words and actions.

The medical profession requires **mutual responsibility** and mutual understanding. Potential ethical violations require each of us to initiate a respectful, constructive dialogue with that person in our community who might have a different understanding of our shared principles. Achieving a common understanding does not necessarily require agreement. Helping our colleagues see and address ethical challenges is central to our profession. This code and the Honor Board hearing process are to be used as a formative framework, realizing that the difficult task of professional feedback may be less structured after medical school. The Honor Board hearing and ruling are meant to facilitate a restorative process in the spirit of *Meliora*. We recognize how difficult approaching another about his or her actions can be, and this code is designed to support us in holding each other accountable. **Failure to ensure a report is completed when necessary is itself a violation of our code**.

We come together in **service** to our patients, colleagues, and community. In the framework of the biopsychosocial model, we acknowledge that our patients, and all people, are more than their ailments. We share a belief that challenges are better faced together than alone, and that disclosing mistakes is as important as teaching solutions. We hope to recognize when our knowledge and/or experience is inadequate, and we will seek consultation and supervision at those times.

The value of our beliefs lies in our commitment to live them out through our actions. Recalling the privileged contract we have made with society, we dedicate ourselves as physicians to be advocates for our patients and agents of social justice, realizing at times that this may require putting their interests ahead of our own. We will practice medicine with introspection, embracing our limitations as opportunities for growth in knowledge and ability. As we mature in our understanding of medicine, we will strive to be innovative leaders and teachers of the next generation.

In the spirit of *Meliora*, we will live by this code in the hope that we may find renewed energy and commitment to our beliefs and purpose.

Expectations of Medical Students:

(Source: Taken from Recommendations and Guidelines for Students from the AAMC Organization of Student Representatives and amended by the Medical School Advisory Council)

A student shall be dedicated to providing competent medical service with compassion and respect for human dignity.

Nondiscrimination: It is unethical for a student to refuse to participate in the care of a person based on that person's race, religion, ethnicity, socioeconomic status, gender, age, or sexual orientation and/or perceived lifestyle choices. It is also unethical to refuse to participate in the care of a patient solely because of medical risk, or perceived risk, to the student. It is not, however, unethical for the pregnant student to refuse to participate in activities that pose a significant risk to her fetus. Essential components of the educational requirements for University of Rochester medical students include: practicing under supervision, evaluating, counseling and referring assigned patients. Consequently, while students are required to evaluate, counsel and refer all assigned patients, they retain the option, via the prevailing process, to opt out of select **procedures** in non-emergency settings due to conscientious objections. (Updated, May 17, 2016)

Confidentiality: The patient's right to confidentiality is a fundamental tenet of medical care. The discussion of problems or diagnoses of a patient by professional staff/medical students in public violates patient confidentiality and is unethical.

Professional Demeanor: The student should be thoughtful and professional when interacting with colleagues, patients and their families. Unprofessional behavior includes the use of offensive language, gestures, or remarks with sexual overtones. Students should maintain a neat and clean appearance, and dress in attire that is generally accepted as professional by the patient population served. Under pressure of fatigue, professional stress, or personal problems, students should strive to maintain composure or to remove themselves from the situation when appropriate. The student should seek supportive services when appropriate.

Misrepresentation: A student should accurately represent himself or herself to patients and others on the medical teams or elsewhere. Students should never introduce or portray themselves as "Doctor" as this is clearly a misrepresentation of the student's position, knowledge, and authority.

Honesty: Students are expected to demonstrate honesty and integrity in all aspects of their education and in their interactions with patients, staff, faculty, and colleagues. They may not cheat, plagiarize, or assist others in the commission of these acts. Students must assure the accuracy and completeness of his or her part of the medical record and must make a good-faith effort to provide the best possible patient care. Students must be willing to admit errors and not knowingly mislead others or promote themselves at the patient's expense.

Patient and Student Safety: The medical school is committed to the safety of students and patients in the clinical experiences. Clerkship directors with input from faculty in a given department or departments will define the level of responsibility medical students should have in the clinical setting. This level of responsibility provided by supervising faculty and residents is based on factors including but not limited to: complexity of patient care or activity; potential for untoward effects; level of student training; demonstrated competency, maturity and responsibility of the individual student. Students who feel they do not possess the appropriate knowledge, skills or attitudes to provide care in a specific clinical situation or environment are expected to share this immediately with their supervising faculty or resident and their level of responsibility appropriately modified. In the unlikely event that residents or faulty are not available, the student should contact the clerkship director, elective director, or medical

school administration for assistance and guidance. Students should also seek advice from clerkship directors and their Advisory Dean about how they might develop the knowledge, skills, and attitudes to fully participate at the level expected of a medical student at that level of training.

Conflict of Interests: When a conflict of interest arises, the welfare of the patient must at all times be paramount. A student may challenge or refuse to comply with a directive if its implementation would be antithetical their own ethical principles, when such action does not compromise patient welfare Gifts, hospitality, or subsidies offered by medical equipment, pharmaceutical, or other manufacturers or distributors should not be accepted if acceptance would influence the objectivity of clinical judgment. Student interactions with commercial interests should conform to the American Medical Association (AMA) guidelines (See policies for Opting out of Educational Experiences due to Conscientious Objections and the Industry Interactions Policy in the student handbook).

Sexual Misconduct: The student will not engage in romantic, sexual, or other nonprofessional relationships with a patient, even at the apparent request of a patient, while the student is involved with the patient's care. The student is not expected to tolerate inappropriate sexual behavior on the part of other medical personnel or patients.

Impairment: The student will not use alcohol or drugs in a manner that could compromise patient care. It is the responsibility of every student to protect the public from an impaired colleague and to reach out to a colleague whose capability is impaired. The student is obligated to report persons of the health care team whose behavior exhibits impairment or lack of professional conduct or competence, or who engage in fraud or deception. Such reports must conform to established institutional policies. At the University of Rochester, students should contact their Advisory Dean or the Committee on Physicians' Health of the Medical Society of the State of New York.

Criticism of Colleagues: Professional relations among all members of the medical community should be marked with civility. Thus, scholarly contributions should be acknowledged, slanderous comments and acts should be avoided, and each person should recognize and facilitate the contributions of others to the community. The medical student will deal with members of the health team and all others in a cooperative and considerate manner. Concerns about the conduct of other members of the health care team should be reported through appropriate supervisory and regulatory channels.

Research: The basic principle underlying all research is honesty. Scientists have a responsibility to provide research results of high quality; to gather facts meticulously, to keep impeccable records of work done; to interpret results realistically, not forcing them into preconceived molds or models; and to report new knowledge through appropriate channels. Co-authors of research reports must be well enough acquainted with the work of their coworkers that they can personally vouch for the integrity of the study and validity of the findings, and must have been active in the research itself. Plagiarism is unethical. To consciously incorporate the words of others, either verbatim, or through paraphrasing, without appropriate acknowledgment is unacceptable in scientific literature.

Evaluation: Students should seek feedback and actively participate in the process of evaluating their teachers (faculty as well as house staff). Students are expected to respond to constructive criticism by appropriate modification of their behavior. When evaluating faculty performance, students are obliged to provide prompt, constructive comments. Evaluations may not include disparaging remarks, offensive language, or personal attacks, and should maintain the same considerate, professional tone expected of faculty when they evaluate student performance.

Teaching: The very title “Doctor” – from the Latin docere, “to teach” – implies a responsibility to share knowledge and information with colleagues and patients. It is incumbent upon those entering the profession to teach what they know of the science, art, and ethics of medicine to patients and other members of the medical community.

Responsibility to the profession: Students are expected to behave in such a fashion as to bring honor upon the profession.

Violation of any of these expectations, whether at the Medical Center or elsewhere, will be grounds for a referral to the Honor Board.

Students, by entering the University of Rochester, agree to follow the terms of the Honor Code

Disclaimer

The Honor Code exists in conjunction with other University, School of Medicine and Dentistry, and regulatory policies. The Honor Code is **not** in lieu of, nor does it replace or supersede existing University, School of Medicine and Dentistry, and/or regulatory policies and procedures. In addition, the Medical Student Promotions and Review Board (MSPRB) retains the right to review professionalism, behavioral and other student cases directly, (independent of the Honor Code process) where health and safety concerns exist and in instances, determined by the MSPRB, to be egregious violations of the Medical School’s professionalism standards.

Honor Board Composition

Definition

4. The University of Rochester School of Medicine and Dentistry Honor Board is a group of peer elected students and appointed residents and faculty that work to assist our community in the interpretation and implementation of the Honor Code.

Purpose

1. Educate the community regarding ethics and professionalism in medicine;
2. Be available as consultants to develop curricula relating to professional conduct;
3. Help facilitate respectful response between students and other members of our medical community regarding possible Honor Code violations
4. Investigate and evaluate all reports of potential violations of the Honor Code while maintaining due process for students, determine whether they require disciplinary or educational interventions, and recommend appropriate consequences for the parties involved in Honor Code transgressions to the Medical Student Promotions and Review Board.

Membership, Chairs, and Terms

1. The first, second, third, and fourth year classes as well as the MD/PhD students shall each elect two representatives to the Honor Board.
    a. Students will be elected during their first year by their classmates and will serve until April 30 of Phase 1
    b. Elections will be held in April of Phase 1 (term effective May 1) for a three-year term
    c. The student Honor Board representatives are members of their respective Class Councils but do not have voting privileges therein.
    d. A special election will be held by the student Board member’s class in the event of a student Board member’s resignation, change in class membership, prolonged absence or removal from the Honor Board

2. The MD/PhD students will be elected at their yearly retreat. Two members of the MD/PhD program will serve during their laboratory years in a staggered fashion. Each MD/PhD representative will serve a two year term. These terms will overlap such that one student is elected each year.
3. Two residents or fellows from University of Rochester Medical Center residency or fellowship programs will be selected by the Senior Associate Dean for Medical Student Education; each will serve a three-year term or until the residency or fellowship is completed.
4. Four members of the faculty will serve staggered three-year terms and will be appointed by the Senior Associate Dean for Medical Student Education. There will be no term limit. They will include representatives from both the basic sciences and clinical medicine.
    a. After serving three years, a voting faculty member can be reappointed for another three-year term or be appointed to serve three years as an alternate faculty Honor Board member, when a quorum of voting members will not be available. When a former faculty Honor Board member is not available to be an alternate, in consultation with the Senior Associate Dean for Medical Student Education, the faculty Co-chair will identify a member of the faculty to service as an alternate. Alternates are invited but not required to attend all scheduled meetings, but would be provided all background information if participating in a voting session.
    b. The Senior Associate Dean for Medical Student Education will select a faculty member replacement in the event of a faculty Board member's resignation, prolonged absence or removal from the Honor Board.
5. The Honor Board will have Co-chairs (one faculty and 1-2 students).
    a. The faculty Co-chair will be appointed by the Senior Associate Dean for Medical Student Education and serve a two-year term. There will be no term limit.
    b. The student Co-chair(s) will be selected, for a one-year term, by the student Honor Board members, from members who have served **at least two years** on the Honor Board. There will be no term limit. The student Co-chair(s) will be chosen during the spring of each year (with a May 1 effective date) to ensure that a student Co-chair is always in place.
6. Past members may serve as ex-officio members of the Board if they are students in good standing and lost their representative position through a change in class membership. Ex-officio status requires Board approval by simple majority vote of a quorum. An ex-officio member may participate in Board proceedings but does not have voting privileges. The ex-officio member is not required to attend all Board meetings and his/her/their presence is not counted towards quorum.
7. The Advisory Dean of a student under review may serve as an ex officio member of the Honor Board.

Regular Honor Board Meetings

1. The Board shall meet not less than quarterly through the academic year. Additional meetings may be called at the direction of the Co-Chairs.
2. A summary report of Honor Board activity may be submitted periodically to the MSPRB. However, this summary report will not provide specific information regarding students, cases, etc.
3. A quorum must be present when voting occurs.
4. Procedures to Avoid the Impact of Conflicts of Interest:
   The SMD policy and procedures to avoid the impact of conflicts of interest will be included on the agenda of all Honor Board case review meetings. The voting members will be reminded that their eligibility to participate in a discussion or vote is a result of no known conflicts of interest (refer to the Conflict of Interest Policy in the student handbook).

Educational Efforts of the Honor Board
The Board will hold educational meetings at least twice each year. Matters surrounding student ethics will be discussed and exemplary case studies will be reviewed, in such a fashion as to maintain strict anonymity. In addition, an introduction to the Honor Board will be part of the first year orientation.

Definitions:
Quorum
1. A quorum requires the presence of at least eight Honor Board members that include at least one representative from three separate student classes and at least two faculty members.

   NOTE: *Conflict/Confluence of Interest:* Honor board members will recuse themselves from any discussion or vote relating to a matter where there is a potential for or the existence of a conflict/confluence of interest. These members will not be counted toward a quorum.

Supermajority
1. Defined as at least 2/3 of a voting quorum in attendance:
   a. If 8 or 9 members are present 6 votes will be needed
   b. If 10 members are present 7 votes will be needed
   c. If 11 or 12 members are present 8 votes will be needed
   d. If 13 members are present 9 votes will be needed
   e. If 14 or 15 members are present 10 votes will be needed
   f. If 16 members are present 11 votes will be needed

A finding of honor code violation requires a supermajority result from a quorum vote.

Bylaws:

Respectful Response and Reporting
1. Any faculty member, staff member, student, or community member who observes a potential violation of the Honor Code is obligated to report it to the Honor Board or the Honor Board's proxy in the Office of Medical Education (Michelle Knotowicz or OME Advisory Deans). The reporter is required to discuss the infraction with the person who committed the possible violation while also reporting the matter to a member of the Honor Board. The exception to this is if there is reason to fear for the personal safety of the reporter, wherein confrontation of the offender would not be prudent. Failure to respond to and report an observed transgression is itself a violation of the Honor Code.
2. Notifying the Honor Board can occur in-person, by telephone or through electronic means to an individual Honor Board member or to the Honor Board proxy in the Office of Medical Education.
3. Submitting a report to the Honor Board can be stressful given the potential results from such a report. However, anonymous reporting will not be permitted because it will impede a proper investigation and students must acknowledge responsibility for following the Honor Code. Consequently, an anonymous report will not be reviewed by the Honor Board. Note: The Honor Board reserves the right to alert appropriate institutional officials (for example, UR Security, MSPRB, Advisory Deans) about alleged egregious and/or life threatening anonymous allegations.

Review
1. Preliminary review of the matter will be conducted by the Co-chairs, or their designee, of the Honor Board within five days (when school is in session). They will make an initial determination

regarding the case. The Co-chairs have the discretion to refer the review of a case directly to the MSPRB. Determinations will include:
    a. Full review by the Honor Board;
    b. No Honor Code / Honor Board issue;
    c. Issue more properly handled by others (for example UR Security, MSPRB or the Dean's office).
2. In the event that it is decided that the case warrants full review by the Honor Board, a review with a **quorum** of Honor Board members will be held within three weeks of the complaint. If a **simple majority** of that quorum finds that there is a reasonable basis to pursue the issue, the Board will select two members (one student and one faculty) to serve as co-investigators.
3. Under ordinary circumstances, the investigation will be completed and a hearing with an Honor Board quorum will be held within four weeks. The accused student will be given any reasonable chance to submit written and oral comments to the investigators prior to the meeting.
4. If a case is not investigated, then a de-identified summary of the case will be archived. Copies of the record will not be provided to others except for educational purposes.

Hearing

1. The accused student will come to the hearing to discuss the case and answer any questions. The student may have an advisor, but an attorney is not allowed. The result of the investigation will be presented, including the results from witness interviews.
2. For all Honor Board meetings where cases are reviewed, a quorum of all voting members must be present. Meetings where cases are discussed are closed to the public, but guests may be invited.

Ruling and Recommendations

The requisite standard of proof will be a preponderance of evidence. There are two possible Honor Board rulings.

1. The Board may determine that a violation was found.
    a. A finding of a code violation by the Honor Board requires the affirmative vote of a **supermajority** of the quorum.
    b. If there is a finding of a violation, then the Honor Board will suggest a response, which also has to be affirmed by a **supermajority**. The responses could include, but are not limited to; educational assignments that will help others avoid similar mistakes, Advisory Status, remediation, probation, forced leave of absence, or expulsion. The complete case will then be forwarded to the MSPRB for final review and determination. The report will include a summary of the evidence and a rationale for the recommendations.
2. The Board may determine that a violation was unsubstantiated and the case is closed, though representatives can continue to facilitate necessary reconciliation between members of our community.

Record Keeping at the Honor Board

Record keeping is important so as to identify trends that require intervention such as educational programs and to create an institutional memory of the Honor Board. As a result, records will be kept in one of three forms. First, if a case is not investigated, then a blinded summary of the case will be kept for the files. Copies of the record will not be provided to others except for educational purposes. Second, if a case is investigated but no violations are determined, the full case records are kept until the involved parties graduate from the School of Medicine and Dentistry. Then, a blinded summary will be created and archived. Copies of the full records will not be provided to others outside the Honor Board and copies of the blinded summary will not be provided to others except for educational purposes. Third, if a case is investigated and violations are found, then the case records will be forwarded to the MSPRB.

Process

Procedure for Amending the Medical Student Honor Code and curric

Guiding principles and procedural outline:

- Any honor board member, medical student in good standing, faculty member, or resident in good standing may propose amendments to the Honor Code in writing to an honor board member. Proposers shall address the perceived shortcoming in the Code and describe anticipated outcomes should their proposal be ratified. If there are open Honor Board cases related to proposed amendments, action on the amendments will be deferred until the cases are closed.
- Any person proposing an Honor Code amendment is invited to participate in the discussion and modification process. However, only the honor board members will be called to consensus on an amendment draft.
- Honor board members are obligated to notify the honor board of any and all amendments proposed to them and to facilitate bringing the proposals to the board for consideration. The initial proposer's identity shall remain anonymous to the student body.
- Proposed amendments[1] will be discussed at the next regularly scheduled honor board meeting, but may only be discussed once case business has been completed. Consideration of amendments may not take priority over honor board cases. [1] Temporal relationship of amendment definitions; proposed amendment -->amendment draft--> ratified amendment
- The honor board member to whom the proposal was originally brought shall oversee the discussion to ensure fair consideration.
- Discussion of the amendment by the honor board members must address the perceived shortcoming in the code and whether the proposed change is consistent with the intended spirit of the Honor Code.
- Amendments shall be ratified or denied through the process of consensus decision-making. Consensus is achieved when all participants agree to accept or reject a proposed amendment though it may not be the ideal solution for each individual. Consensus decision-making is collaborative, fosters teamwork, and creates opportunities for the middle road. A consensus allows improvement that might otherwise be blocked by lack of compromise.
- The consensus process requires quorum of at least eight honor board members, two of whom must be faculty members.
- The consensus process is as follows;
    a. discuss the proposed amendment
    b. formulate an amendment draft
    c. call for consensus
    d. identify and address concerns
    e. modify the amendment draft to account for concerns
    f. repeat steps c, d, e, and f until consensus is reached.
- If the group cannot modify the amendment draft in a way such that there is unanimous consent, the consensus process allows for the following three forms of dissent;
    a. Declare reservations on record, explaining their significant concern but still consenting to the amendment.
    b. Stand aside: A member may stand aside if that person has a serious personal disagreement with the amendment draft and does not want to be part of the consensus. However, this member is willing to let the group reach consensus by removing herself from the decision-making body without impeding that body from achieving consensus.
    c. Block: A consensus may be blocked by any honor board member only if the dissenter feels that the amendment draft endangers the foundations of the honor system or violates the mission of

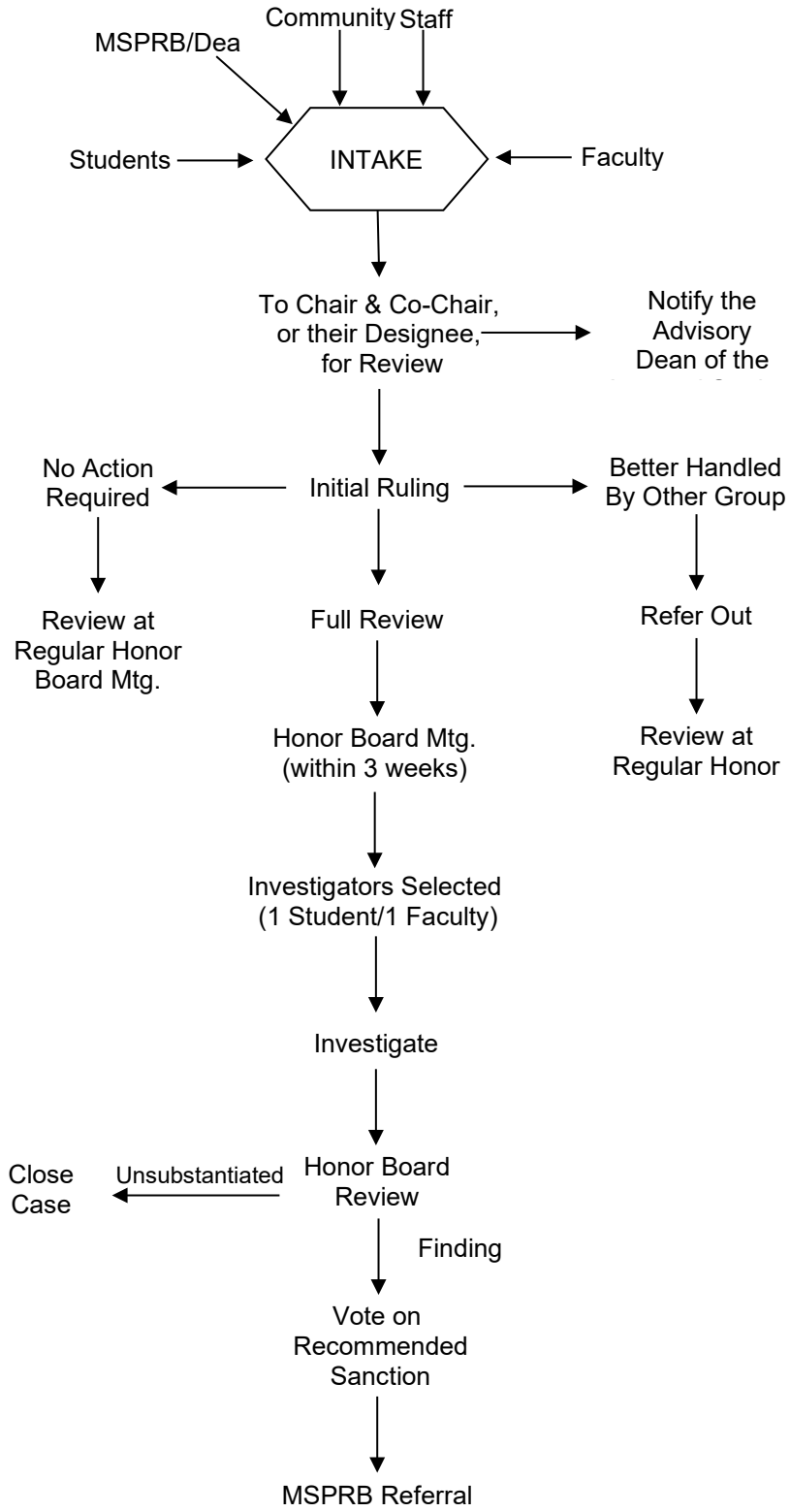
the honor board. A block prevents the proposed amendment from moving forward but it may continue to be discussed.

- If consensus can be reached, the amendment draft is thus approved by the honor board and will then be subject to review by the Senior Associate Dean for Medical Student Education. If concerns are raised, the amendment will be sent back to the honor board for reconsideration.
- If the Senior Associate Dean approves the amendment draft, it will be presented to the students, chief residents, instruction committees, and residency program directors for a general comment period of one week. The means of presentation to and collecting comments from each group will be determined by the representatives for each group. The groups are MS1, MS2, MS3, MS4, MSTP students, and teaching faculty (instruction committees, residency program directors, and chief residents).
- If there are no public comments, the new Honor Code amendment is considered ratified and becomes effective immediately. If there are comments, they will be circulated among all honor board members, who will determine whether the comments warrant changes to the amendment draft. To maintain transparency, the records of this circulation will be inserted into the minutes at the next scheduled meeting.
- If substantive changes may be required based on public comments, the amendment draft will repeat the consensus process above at the next scheduled honor board meeting once case business has been completed.
- All substantive changes to the Honor Code will use the above process.

Honor Board Members:

Name	Position, Title
Caroline Quill, MD	Chair, Assistant Professor of Medicine
Denzil Harris, MD	Co-Chair, Fellow, Hospice and Pallative Medicine
Scott Liebman, MD, MPH	Professor, Department of Medicine, Nephrology
Linda Callahan, PhD	Assistant Professor, Department of Neuroscience
Aaron Weaver, MD	Assistant Professor, Emergency Medicine
Brad Turner, MD	Associate Professor, Pathology
Camille Corre, MD	Child Neurology Resident
Angelina Winbush, MD	Internal Medicine Resident
Ferda Tan	Class of 2027
Raviraj Rege	Class of 2027
Jag Lally	Class of 2026
Michaela Malin	Class of 2026
Brooke Jones	Class of 2025
Kadiatou Traore	Class of 2025
Rachel Johnson	Co-Chair, Class of 2024
Alison Livada	MSTP
Sarah Sandkuhler	MSTP

Process of the Honor Board Reporting and Investigation



Created: February 2004.
Modified: January 2006, June 2007, February 15, 2008, July 2, 2008, August 28, 2008, March 2009; April 2009, May 27, 2009, July 29, 2009, January 5, 2010, August 2, 2010, March 2012, and October 20, 2014, April 2018
Ratified: January 2015, May 2016, April 2018
(Approved: February 2004; Amended in January 2006, February 2008, March 2009; April 2009, July 29 2009, January 5, 2010, August 2, 2010, March 2012, October 2014, January 2015, May 2018)

PLAGIARISM

The following information is provided to assist students in understanding the parameters used in defining plagiarism.

Students are sometimes uncertain about what constitutes misuse of another person's expressed ideas. This statement is designed to explain the limits normally used to define plagiarism.

- Plagiarism is literary theft, intentional or unintentional. It is the use of a unique idea or phrase which does not originate with the user, without proper acknowledgment of the source.

- In written papers, due credit to the original source of major or unique ideas (i.e., ideas which you could not and did not arrive at by yourself) must be given in the form of footnotes or clear allusions at the proper places in the paper itself. These precise indications of source must be given whether the material is paraphrased or quoted directly. An appended bibliography only is insufficient acknowledgment.

- Quotation marks must enclose all direct quotations even though the quoted material is no more than occasional phrases interspersed with original observations.

- Illegitimate use of written material or the obtaining of information from other students while an examination is in progress constitutes plagiarism.

Source: Department of English, University of Rochester

Plagiarism Guidelines for Clinical Experiences:

- Copying text from another person's note into a student's own note (except as noted below) is plagiarism. This applies to all elements of the clinical note (i.e. history, exam, assessment, and plan).
- In some instances, it may be appropriate to utilize chart review and integrate important background information into the history. In this case, the original source of the background information should be clearly noted.
- Please refer to specifics about electronic medical record documentation policy for medical students in the Student Handbook.

Approved by the Curriculum Steering Committee October 31, 2023

REPORTING DISRUPTIVE EVENTS AT STRONG MEMORIAL HOSPITAL (SMH)

From SMH Management Team:

The Joint Commission standard (LD.03.01.01) states, in part: "Disruptive events can be harmful to patient care. Leaders (will) provide education that focuses on safety and quality for all individuals and create a process for managing disruptive events."

To access the Event Reporting system (RL Solutions):

- from the URMC Intranet home page, go to the 'Providers' page then click on 'Events Reporting (ERS)' on the lower left side bar.

There are several options on that site for training, answers to frequently asked questions, events that must be reported, etc.

You can also access the site by this link:
http://intranet.urmc-sh.rochester.edu/Providers/systems/ERS/index.asp
(January 26, 2010, updated January 19, 2015)

VISITOR ATTENDANCE POLICY

Purpose: The primary purpose of our classes, PBL's, clerkships or other educational sessions is the education of our students. While the school welcomes appropriately registered and/or authorized visitors (see guidelines below), auditors, children and pets are not permitted in classes, PBL's, clerkships or other educational sessions.

Policy:

- The confidentiality of patients whose clinical material may be presented to the class must be preserved. Visitors may not attend any class where clinical material which could lead to the identification of a patient will be presented. Visitors are not be permitted to take examinations or participate in the Comprehensive Assessment.
- Advanced permission via e-mail correspondence must always be sought from faculty presenters before any visitor can attend class. Permission for eligible visitors may be granted with the exception of sessions where identifiable clinical material will be presented.
- Visitors must not distract students. Visitors who have the potential for distraction will not be allowed. (Effective September 25, 2007)

VIII. GUIDELINES FOR THE POLICIES, PROCEDURES AND REPORTING MECHANISM FOR THE MISTREATMENT OF MEDICAL STUDENTS

POLICIES FOR AN OPTIMAL LEARNING ENVIRONMENT

The University is committed to maintaining a workplace and academic environment free from discrimination and harassment. In support of its vision and values and commitment to equality of opportunity, the University set forth Policy 100: Workplace Values and Equal Opportunity Policy. (https://www.rochester.edu/policies/policy/workplace-values/). Policy 100 applies to all members of the university community.

Policies Governing a respectful community and the treatment of all students

In addition, URSMD is also governed by 3 policies that add support to the University's Policy 100
.

1. The AAMC Policy Statement
   Reaffirming Institutional Standards of Behavior in the Learning Environment
   The medical learning environment is expected to facilitate students' acquisition of the professional and collegial attitudes necessary for effective, caring and compassionate health care. The development and nurturing of these attitudes is enhanced and, indeed, based on the presence of mutual respect between teacher and learner. Characteristics of this respect is the expectation that all participants in the educational program assume their responsibilities in a manner that enriches the quality of the learning process.

While these goals are primary to a school's educational mission, it must be acknowledged that the social and behavioral diversity of students, faculty, residents, and staff, combined with the intensity of the interactions between them, will, from time to time, lead to alleged, perceived or real incidents of inappropriate behavior or mistreatment of individuals. Examples of mistreatment include sexual harassment; discrimination or harassment based on race, religion, ethnicity, gender, sexual orientation, physical handicap or age; humiliation, psychological or physical punishment and the use of grading and other forms of assessment in a punitive manner. The occurrence, either intentional or unintentional, of such incidents results in a disruption of the spirit of learning and a breach in the integrity and trust between teacher and learner.

The ACGME Modified Policy
The Policy to Assure a Professional and Respectful Learning Environment

2. University of Rochester School of Medicine and Dentistry Teacher-Learner Policy
Modified from ACGME "Compact between Resident Physicians and `Their Teachers"
To meet their educational goals and the medical school's objectives, medical students must participate actively in the care of patients and must assume progressively more responsibility for that care as they advance through their training. In supervising medical students, faculty, residents and other students must ensure that medical students acquire the knowledge and skills while demonstrating the appropriate attitudes in each required and elective component of the curriculum. Throughout this process, teachers and learners must adhere to the highest standards of quality and safety in the delivery of patient care services. Teachers are expected to nurture the values and behaviors that strengthen the doctor-patient relationship, demonstrate the Biopsychosocial approach and sustain the profession of medicine as an ethical enterprise.

All teachers must be committed to maintaining high standards of educational quality. A medical student's educational needs should be the primary determinant of any assigned patient care services. Medical students must be mindful that they have responsibilities to their patients and these always take priority over purely educational considerations.

Medical students must learn in clinical settings epitomizing the highest standards of medical practice. Indeed, the primary obligations of institutions and individuals providing medical student education is the provision of high quality, safe patient care in a respectful and professional learning environment. Teachers accept an obligation to ensure high quality medical care in all learning environments.

Medical students are especially vulnerable and their well-being must be accorded the highest priority. Given the uncommon stresses inherent in fulfilling the demands of their education program, medical students must be allowed sufficient opportunities to meet personal and family obligations, to pursue recreational activities, and to obtain adequate rest. This is accomplished through the adherence to medical school policies on duty hours.

Obligations of Teachers:
1. As role models for our medical students, we will maintain the highest standards of care, respect the needs and expectations of patients, and embrace the contributions of all members of the healthcare team.

2. We pledge our utmost effort to ensure that all components of the educational program for medical students are of high quality, including our own contributions as teachers.

3. In fulfilling our responsibility to nurture both the intellectual and the personal development of medical students, we commit to fostering academic excellence, exemplary professionalism, cultural sensitivity, and a commitment to maintaining competence through life-long learning.

4. We will demonstrate respect for all medical students, residents and faculty as individuals, without regard to gender, race, national origin, religion, disability or sexual orientation; and we will cultivate a culture of tolerance among the entire staff.

5. We will do our utmost to ensure that medical students have opportunities to participate in patient care activities of sufficient variety and with sufficient frequency to achieve the competencies required by their chosen discipline.

6. We will provide medical students with opportunities to exercise graded, progressive responsibility for the care of patients to meet the education program objectives. We will do our utmost to prepare and include medical students to function effectively as members of healthcare teams.

7. In fulfilling the essential responsibility we have to our patients, we will ensure that medical students receive appropriate supervision for all of the care they provide during their training.

8. We will evaluate each medical student's performance on a regular basis, provide appropriate verbal and written feedback, and document our assessment.

Obligations of Medical Students:

1. We acknowledge the fundamental obligation of physicians—to place patients' welfare uppermost; quality health care and patient safety will always be our prime objectives.

2. We will put forth our utmost effort to acquire the knowledge, clinical skills, attitudes and behaviors required to fulfill all objectives of the educational program and to achieve the competencies deemed appropriate for each component of the medical school curriculum.

3. We embrace the professional values of honesty, compassion, integrity, and dependability.

4. We will adhere to the highest standards of the medical profession and pledge to conduct ourselves accordingly in all of our interactions. We will demonstrate respect for all patients and members of the health care team without regard to gender, race, national origin, religion, economic status, disability or sexual orientation.

5. We learn most from being involved in the direct care of patients and from the guidance of residents and faculty and other members of the healthcare team. We understand the need for supervision of our work with patients.

6. We accept our obligation to secure direct assistance from faculty or residents whenever we are confronted with situations or clinical decisions that exceed our confidence or skill to handle alone as outlined in the Medical Student Honor Code / Patient and Student Safety**. Students should seek consultation and supervision whenever their participation in the care of a patient may be inadequate because of lack of knowledge and/or experience**.

7. We welcome candid and constructive feedback from faculty, residents, peers and members of the health care team who observe our performance, recognizing that objective assessments are indispensable guides to improving our skills.

8. We also will provide candid and constructive feedback on the performance of our fellow students, of residents, and of faculty, recognizing the life-long obligation of physicians to participate in peer evaluation and quality improvement.

*Although all student evaluations are confidential, a process exists to allow select personnel (e.g., URSMD MedHub Administrator) to identify the student author of an evaluation that contains unprofessional or concerning comments. This process, however, would occur only in severe circumstances or when the comment violates the student honor code. Specifically, if a written evaluation is found to contain unprofessional or concerning comments (e.g., intentionally denigrates an individual without constructive information; raises concerns regarding the welfare of a student or another individual) then this evaluation will be reviewed, with the author remaining anonymous, by SMD Leadership to determine whether the evaluation warrants removal. Reviewers will include administrators from the Office of Curriculum and Assessment and select faculty from the Instruction Committees who are not directly related to the evaluation content. If evaluation content is removed, the Office of Curriculum and Assessment's MedHub Administrator will identify the author to arrange a meeting. The Associate Dean for Student Affairs may be involved in this meeting. Following the meeting, 1) the issue may be considered addressed; 2) the student may be referred to the Honor Board; or 3) the student may be referred to the Medical School Promotions and Review Board (MSPRB). This decision will be made by the Associate Dean for Student Affairs. Repeat offenses: If a student authors evaluation content that is required to be removed after an initial meeting and discussion, the school's response will automatically include referral to either the Honor Board or the MSPRB.

9. We recognize the rapid pace of change in medical knowledge and the consequent need to prepare ourselves to maintain our expertise and competency throughout our professional lifetimes.

3. Guidelines to Assure a Professional and Respectful Learning Environment

University of Rochester Medical Center ICARE Values:

The University of Rochester Medical Center's (URMC) culture is steeped in its values – Integrity, Inclusion, Compassion, Accountability, Respect and Excellence (ICARE). These values apply to all members of the URMC community – faculty, students, and staff – in all missions of the medical center: education, research, clinical care and community. A respectful and professional learning environment is an important reflection of our ICARE values.

The medical school has adopted the ICARE values as the professional behaviors of the medical students.

Learning Environment:
The URMC learning environment is committed to facilitating students' and trainees' acquisition of the professional and collegial attitudes necessary for effective, successful careers in research, teaching, and clinical care. The development and nurturing of these attitudes is enhanced and based on the presence of mutual respect among all members of our learning community.

Characteristics of this mutual respect include the expectation that all participants in an educational program assume their responsibilities in a manner that enriches the quality of the learning process, supports a spirit of inquiry, and values diversity of opinion.

Members of our learning community include all individuals educated in undergraduate, graduate, doctoral and post-doctoral programs at the University and the medical center as well as those learners from other institutions training at URMC. Faculty include all faculty, employed and volunteer, who participate in the education of learners and contribute to the learning environment. Staff include all employed staff or volunteers at the University of Rochester.

URMC expects and requires learners, faculty, and staff to conduct themselves in a professional and respectful manner while participating in any activity related to URMC. Inappropriate behavior that negatively impacts URMC's professional and respectful learning environment is prohibited. Inappropriate behavior includes but is not limited to: sexual harassment; any discrimination or harassment based on age, color, disability, domestic violence status, ethnicity, gender identity or expression, genetic information, marital status, military/veteran status, national origin, race, religion/creed, sex, sexual orientation, or any other status protected by law; humiliation; verbal, psychological or physical punishment; and/or the use of grading and other forms of assessment in a punitive manner. The intentional or unintentional occurrence of such behavior results in a disruption of the spirit of learning and a breach in the integrity and trust among, and between, learners, faculty, and staff.

<u>Expectations and Responsibilities for All Learners, Faculty and Staff:</u>

- Non-discrimination and non-harassment: to treat others and be treated consistent with the institution's commitment to maintaining a workplace and academic environment free from unlawful discrimination and harassment.
- Collegiality: to cultivate and enjoy a welcoming environment in which to pursue research, clinical care, teaching and professional activities.
- Respect: to be valued as an important member of the URMC community and to treat all others with respect.
- Conflicts of interest: to receive appropriate instruction about conflicts of interest to avoid situations where learners and educators are unable to do their jobs with the appropriate level of impartiality.
- Policies: to be educated about and know how to access University of Rochester, medical center, hospital and program-specific policies including, but not limited to, grievance processes and disciplinary processes.
- Procedures: to receive and be aware of guidelines, policies and resources to report concerns about the learning environment or behaviors of other learners, faculty, or staff, including but not limited to reporting concerns regarding harassment or discrimination.
- Feedback: to be provided formative and summative information on performance at regular intervals as well as ad hoc when necessary, consistent with the program's procedures, to provide clear guidance and expectations on performance. Additionally, provide feedback to all in a productive, prompt manner as required by educational or institutional expectations.
- Design of instruction: to ensure equal access for learners with diverse backgrounds and abilities to curricula, courses, learning activities, and academic support services.
- Assessment: to ensure valid and equitable measurement of learning through appropriate measurement instruments.
- Confidentiality and Due Process: to ensure that identity is protected to the greatest extent possible and due process received for any complaint or concern, as required by University policy and legal requirements.

POLICY AGAINST DISCRIMINATION AND HARASSMENT (PADH)

To protect all members of the University's community against discrimination and harassment, the Office of Equity and Inclusion has put forth the **Policy on Discrimination and Harassment (PADH)**. The full University Policy Against Discrimination and Harassment can be found at: https://www.rochester.edu/policies/106-update-2022/

The University is governed by multiple state and federal laws that prohibit discrimination and harassment based on various protected classes and the PADH is intended to comply with all of them. However, harassment and discrimination that is sexual in nature has a parallel but separate process for reporting concerns based on the federal/state regulations related to Title IX Policy.

EXAMPLES OF DISCRIMINATION AND HARASSMENT and DEFINITIONS

Examples of complaints or concerns considered by the medical school process to be harassment and discrimination are noted below, (this is not an exhaustive list):

- Violations of Teacher-Learner Policy
- Medical Student Mistreatment
- Acts of Intolerance and Discrimination
- Retaliation
- Sexual Harassment

DISCRIMINATION AND HARASSMENT DEFINITIONS, POLICIES AND PROCESSES

The chart below describes types of discrimination and harassment based on membership in a protected class and identifies applicable policies, resources, and reporting mechanisms.

Definitions (see policies for complete definitions)	**Sexual Misconduct and Discrimination Based on Sex**	**Harassment Based on Protected Group**	**Discrimination Based on Protected Group**
	Sexual misconduct can include sexual assault (rape, sexual battery, sexual coercion, or sexual violence), dating and domestic violence, stalking, and violence based on sex. Discrimination based on sex includes discrimination or harassment based on sex (including pregnancy), sexual orientation, gender identity or expression. Sexual harassment can include sexual misconduct, unwelcome sexual advances or requests for sexual favors, or other verbal or physical conduct of a sexual or sex-based nature.	Form of discrimination which involves (1) unwelcome verbal, written, physical, or electronic conduct, (2) intended to cause or which could reasonably be expected to cause an individual or group to feel intimidated, demeaned, abused, or fearful, or to have concern for their personal safety, (3) because of membership in a protected class. The conduct must be sufficiently severe or pervasive, *and* must objectively and subjective unreasonably interfere with an individual's work or equal access to education or create an intimidating, hostile, or offensive work or academic environment.	Discrimination is (1) any conduct (2) that adversely affects or impacts an individual's or group's ability to function and participate as a member of the University community (3) because of their age, color, disability, domestic violence status, ethnicity, gender identity or expression, genetic information, marital status, military/veteran status, national origin, race, religion/creed, sex, sexual orientation, or any other status protected by law, or because of their perceived or actual affiliation or association with such individuals or groups.

Examples (see policies for additional examples)	Sexual harassment can include: • unnecessary touching, patting, pinching or brushing • sexually degrading words or gestures • verbal sexual abuse or harassment • offensive sexual graffiti, pictures or cartoons	Degrading and derogatory words, graffiti, pictures, jokes, epithets, statements, stereotyping verbal, visual or written messages of intimidation, unwanted physical contact, comments or threats based on membership in a protected group.	Exclusion from or denial of access to services and/or resources based on a person's membership in a protected group.
Policies applying to allegations against a *student*	Student Sexual Misconduct Policy	Policy 100 AAMC Policy ACGME Modified Policy ICare Policy	Policy 100 AAMC Policy ACGME Modified Policy ICare Policy
Policies applying to allegations against employees (faculty, staff, resident, postdoc)	Policy Against Discrimination, Harassment and Discriminatory Employment/Service Practices	Policy Against Discrimination, Harassment and Discriminatory Employment/Service Practices	Policy Against Discrimination, Harassment and Discriminatory Employment/Service Practices
Processes for Reporting	Sex-based Proxy Report	Student See Reporting Table Above All other Employees PADH Reporting link	Student See Reporting Table Above All other Employees PADH Reporting link
Institutional Resources	Stephen Burke Deputy Title IX Coordinator for SMD stephen.burke@rochester.edu	Flavia Nobay, MD David Lambert, MD Advisory Deans Honor Board	Flavia Nobay, MD David Lambert, MD Advisory Deans Honor Board
Medical Student Specific Links to Resources	SMD Medical Student	SMD Medical Student	SMD Medical Student

MECHANISMS TO REPORT DISCRIMINATION, HARRASSMENT AND DISCRIMINATION OF A NON-STUDENT

The reporting of concerns of discrimination and harassment related to faculty; staff; residents; fellows; postdoctoral appointees; student employees; interns (paid or unpaid); volunteers; and to all visitors (including patients, contractors, and vendors) to any University campus, facility and/or property, and

to University sponsored activities and events, whether on University premises or not is done through the PADH website **uofr.us/padh-report** .

MECHANISM IN WHICH TO FILE CONCERNS OF HARRASSMENT AND DISCRIMINATION AGAINST A MEDICAL STUDENT

Concerns regarding discrimination and harassment against a medical student as reported by a student or non-student has its own reporting process that is navigated through the Office of Medical Education. This process is distinct from the PADH reporting process. This is true in ALL cases of discrimination and harassment against a medical student with the *exception* of reporting any harassment /discrimination that is sexual in nature. All concerns that are sexual in nature must go through the **Title IX Policy/process** (see below)

For complaints of discrimination or harassment against a medical student, that are NOT related to sexual harassment, abuse, assault or discrimination, reports must be made to the medical school's Offices for Medical Student Education. Once received, these concerns and complaints will be addressed for appropriate action. The primary contact for all complaints that are related to harassment and discrimination that are not sexual in nature is Flavia Nobay, MD. the Associate Dean for Student Affairs. Additional resources to contacts are:

URSMD MD Program Contacts for Complaints Against Medical Students (not sexual in nature)

CONTACT	NAME	EMAIL
Senior Associate Dean for Medical Education	David Lambert	David_lambert@urmc.rochester.edu
*Associate Dean for Student Affairs	Flavia Nobay	Flavia_Nobay@urmc.rochester.edu
Advisory Deans	David Kaufmann Cheryl Kodjo Anne Nofziger Erik Rueckmann	David_Kaufmann@urmc.rochester.edu Cheryl_Kodjo@urmc.rochester.edu Anne_Nofziger@urmc.rochester.edu Erik_Rueckmann@urmc.rochester.edu
Honor Board	• Class Honor Board Representative • Chair of Honor Board	

Incidents of mistreatment related to sexual discrimination, sexual misconduct, sexual harassment and acts of intolerance and discrimination that are sexual in nature:

The University complies with **Title IX** of the Education Amendments of 1972, which prohibits sex discrimination (including sexual harassment and violence based on sex) in the University's educational programs and activities, as well as retaliation for asserting claims of sex discrimination. Discrimination based on sex will not be tolerated, and is considered misconduct that will be subject to discipline. Inquiries concerning the application of Title IX and sex-based complaints should be referred to the University's Title IX Coordinator, **titleix@rochester.edu**. Questions regarding the application of Title IX can be made to the Title IX Coordinator or the U.S. Department of Education's

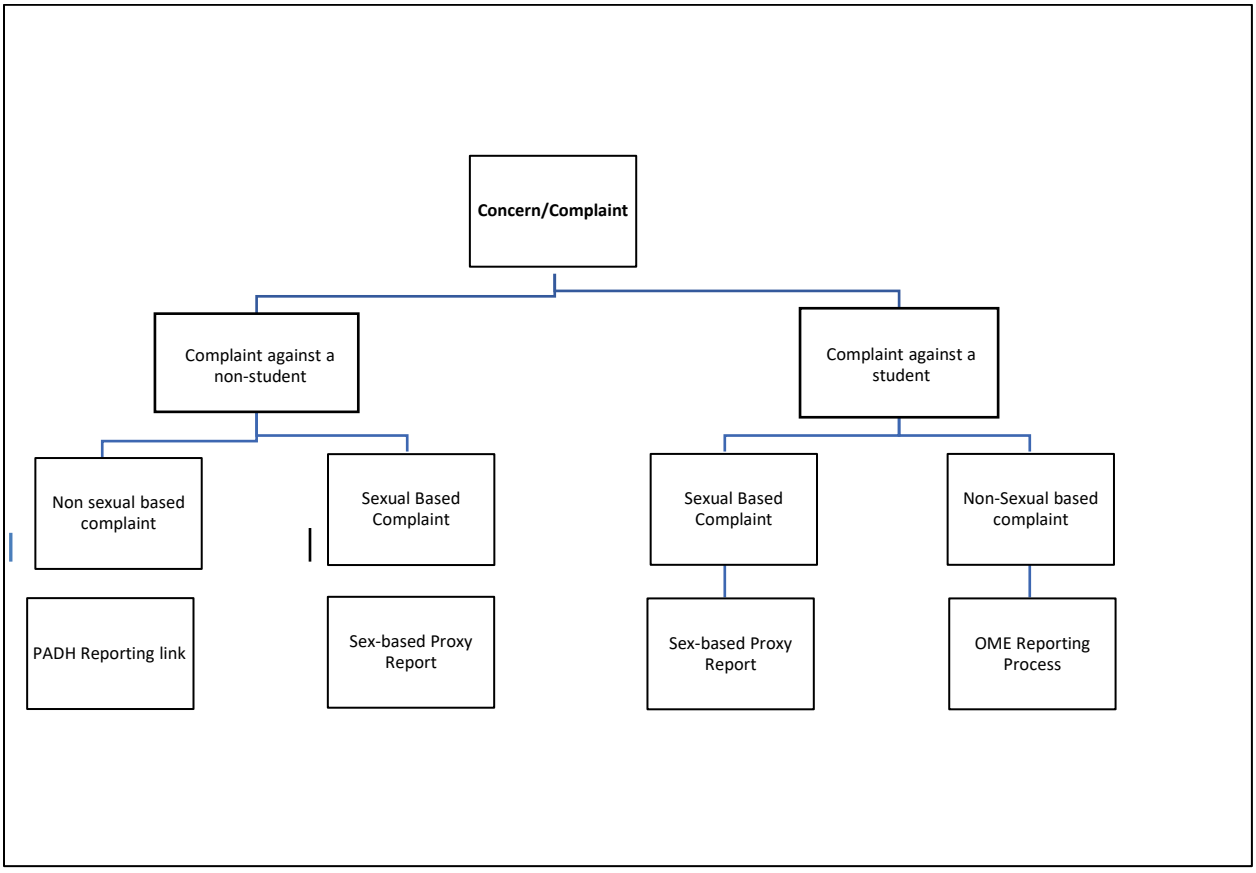
Office of Civil Rights (OCR) at its New York office at **(646) 428-3800** or its national headquarters at **(800) 421-3481**; TTY: **(800)-877-8339**. **Additional information is available**.

Students are subject to the institution's policy on prohibition of sexual misconduct. The full policy can be found at the following site Student Sexual Misconduct Policy (all students). Violations of this policy should be reported through the Sex-based Proxy Report.

Contact Person	Name	Email	Reporting Process
Deputy Title IX coordinator SMD	Stephen Burke	stephen.burke@rochester.edu	Sex-based Proxy Report
Title IX coordinator for U of Rochester		titleix@rochester.edu	Sex-based Proxy Report

Students who are unsure to whom they should report concerns are encouraged to speak with Flavia Nobay, MD, Associate Dean for Student Services.

Flow Chart of Reporting Mistreatment of Medical Students or Others



PROCESS FOLLOWING A REPORTED CONCERN:

Members of the medical school are encouraged to report discrimination, harassment or retaliation. This includes members of the medical school who feel that they have experienced behavior that

violates the above policies or who witness or become aware of conduct that they believe violates the above policies. Regardless of the manner of reporting, the University will look into and respond to all good faith concerns and complaints raised under this Policy as expeditiously as possible and take remedial measures as needed.

Appeals
Any appeal to the remedial course or outcome of a potential investigation of a non-sexual complaint against a medical student will be addressed by the Senior Associate Dean for Medical Education, Dr. David R. Lambert

Confidentiality
The University will take reasonable steps to protect the privacy of complainants, respondents, and witnesses. The parties remain free to share their own experiences, though, to avoid the possibility of compromising the confidentiality of the investigation, during the course of the investigation itself, it is generally advisable to limit the number of people in whom they confide.

Record Keeping
The complete investigative file, including a copy of any determination or appeal decision relating to a complaint under this process along with a copy of remedial action or discipline taken in response to any non-sexual complaint against a medical student, shall be maintained in the OMSE. No documentation relating to an investigation, including the determination itself, will be placed in any individual's personnel file *unless* that individual has been formally counseled or disciplined as a consequence of the complaint and investigation.

POLICY ON MEDICAL STUDENT WORK HOURS DURING PHASE 1 AND PHASE 2

To address the time commitment required of medical students during Phase 1 and Phase 2 and optimize time for independent study, information assimilation, student health and safety, the medical school has adapted the following policy.

Scheduled sessions should, on average, total no more than 25 hours per week and there should be no week in excess of 36 scheduled hours to allow for flexibility needed for clinical requirements. Optional review sessions, examinations, and assessments are not counted in the scheduled sessions. There must be, on average, two half-days per week that do not have scheduled activities.

All scheduled class time in Phase 1 and Phase 2 includes lecture, laboratory, problem based learning (PBL), team based learning (TBL), small group, and direct clinical care will be counted based upon the time scheduled. Recorded video, on-line module or similar assignments will be counted by the length of the activity.

Course and clerkship directors will work collaboratively to evaluate the workload associated with each week of the curriculum with oversight by the Office of Curriculum and Assessment (OCA). OCA will ensure that the above guidelines are met. Review of scheduled hours will be done by the First and Second Year Instruction Committee for each semester and reported to the MSPRB Committee (CSC). Any course, component, or semester of the curriculum that has non-adherence to this policy will work with the Senior Associate Dean for Medical Student Education on behalf of the CSC to arrive at a solution that will be presented to the CSC which has final decision making authority.

Approved by the Curriculum Steering Committee November 16, 2021

POLICY ON MEDICAL STUDENT WORK HOURS DURING CLINICAL YEARS

To address the time commitment required of medical students during clinical rotations and taking into account the effects of fatigue and sleep deprivation on learning, clinical activities, student health and safety, the medical school has adapted the following policy.

- Duty hours must be limited to 80 hours per week averaged over a four-week period, inclusive of all in-house call and patient care activities.
- Continuous on-site duty, including in-house call, must not exceed 24 consecutive hours. Students may remain on duty additional hours to participate in didactic activities, transfer care of patients, conduct outpatient clinics, and maintain continuity of medical and surgical care.
- Students must be provided with one day in seven free from all educational and clinical responsibilities, averaged over a four-week period, inclusive of call. One day is defined as one continuous 24-hour period free from all clinical educational and administrative activities.
- Students should be provided with a 10 hour period after in-house call that they are free from all patient care activities.

Clinical clerkships will design student duties with these requirements in mind. Clinical course directors are responsible for monitoring and documenting student duty hours and for the education of their faculty, residents and other appropriate individuals to facilitate compliance with this policy. Students are required to comply with all monitoring requirements set forth by each specific clerkship.

Approved prior to June 2015; Reviewed and Approved by Curriculum Steering Committee on May 31, 2023

IX. TUITION, DEFINITIONS AND RELATED POLICIES

Office of the Bursar
University of Rochester
PO Box 270037
330 Meliora Hall
Rochester, New York 14627
bursar@admin.rochester.edu

Phone Hours: Monday-Friday, 9:30-11:30am and 1:30-4:00pm
585-275-3931
Fax: 585-461-3356

Bursar Information Window Hours
Monday-Friday: 9:30am-12:30pm and 1:30-4:30pm

TUITION AND FEES

All students will be charged four years/eight terms of tuition. All current tuition and fees can be located on the Bursar's website:

https://www.urmc.rochester.edu/education/bursar/medical-students/institutional-charges.aspx.

BILLING SCHEDULE AND ONLINE BILLING

Assessment of Tuition and Fees:
Tuition and fees are charged to the student financial account in two installments each academic year. Students are billed in July for the fall term with **payment due August 10** and in January for the spring term with **payment due February 10.**

Student Financial Account:
All students are required to submit a Financial Responsibility Agreement prior to registration for classes. The agreement is submitted during the UR Student onboarding process. Electronic billing is the official method of billing for the University, and students will not receive a paper bill by mail.

The student financial account can be viewed online through UR Student. Log in and navigate to the upper right-hand corner and click on either your picture or the cloud icon. From there select "Student Financials" from the menu on the left. The "Student Financials" option will only appear if you have had a credit or charge applied to your account. Students are responsible for viewing their student financial account in UR Student at least once every 30 days. You will also receive notifications reminding you when upcoming payments are due. Students are encouraged to pay their charges online through UR Student.

Flywire (a trusted source for sending wire transfers) is available for international students at www.flywire.com. Direct wire payments cannot be accepted. All check payments must be in U.S. dollars and drawn on a U.S. bank. Credit and debit cards are not accepted.

Past due accounts:
Any student who fails to pay their term bill by the due date will:

1. Have a Bursar's Hold placed on their account, including a $100 Administrative Fee.
2. Be prohibited from registering for subsequent coursework until arrangements for payment are made.
3. Not be granted a diploma until the balance is paid.

Exceptions:
All students who have outside service scholarships, such as military or National Health Service Corps are required to pay their term bill within six weeks of the first billing for each term. Students with these scholarships may be required to apply for student loans, which can be repaid by the student when the outside agency pays their student bill. The student will be held responsible for any late fees that might accrue on their account.

Students expecting documented aid from sources not controlled by the School – outside loans and scholarships - will see one-half of the expected amount listed as anticipated credit on their bill for up to six weeks after the that first bill for the term is generated. Students may also expect to see an additional amount due on their bills as a result of their lender withholding loan fees from their disbursements. In addition, all anticipated credits for financial aid will expire on September 1st. Students will be held responsible for the payment of any uncovered balance and subsequent late fees that accrue on their student account.

Late Charge:
A late payment penalty of 1% per month will be assessed on the unpaid balance of all bills on their due date and every month thereafter until payment is made in full. The Late Charge will be calculated on the amount derived by subtracting from total charges all payments made or financial aid credits received by the 10th of the month, and anticipated credits which can be documented by the Financial Aid Office. Late charges may be waived upon e-mail written appeal to the Office of the Bursar if failure to pay is the result of an error in the Bursar's Office. Otherwise, there will be **no** waiver of late fees.

Credit and Payments:
Credits are applied to a student's account either (1) as payments received from the student, family, or outside source or (2) as University-administered financial aid sources transferred to student accounts:

- Federal loans are credited automatically at the start of each billing period, assuming the Financial Aid Office has received all required documents.
- University scholarship funds are transferred automatically at the start of each billing period, assuming the Financial Aid Office has received a signed copy of the original award notice.
- University loan funds are transferred each term, assuming the Financial Aid Office has received all required documents.

Students are encouraged to use the online payment option, through UR Student. Payments can be made by an e-check in this system. E-checks are free. Students may grant family members access to pay their bills in UR Student.

Checks can be accepted at Student Services, or may be mailed to the University Bursar at the address below:

Office of the Bursar
University of Rochester
PO Box 270037
330 Meliora Hall
Rochester, NY 14627

Cash payments cannot be accepted. Students with cash can visit the J.P. Morgan Chase branches at the Medical Center or River Campus to obtain a cashier's check. For additional questions regarding cash payments, contact the Office of the Bursar at bursar@admin.rochester.edu

Anticipated Credits in Lieu of Payment:
Students expecting documented aid from sources not controlled by the School – outside loans and scholarships - will see one-half of the expected amount listed as **anticipated credit** on their bill for up to six weeks after the that first bill for the term is sent. Students may also expect to see an additional amount due on their bills as a result of their lender withholding loan fees from their disbursements.

In addition, all anticipated credits for financial aid will expire on September 1st if the student's award notice and signed promissory note(s) are not turned into the Financial Aid Office by that date. Students will be held responsible for the payment of any subsequent late fees that accrue on their student account.

SMD STUDENT REFUNDS

The Office of the Bursarwill issue a refund when:

1. The total amount of all financial aid exceeds the amount of tuition and fees, the resulting credit balance will be refunded to the student in accordance with Federal regulations.
2. A student account reflects a credit balance due to changes to charges appropriately due to the student.
3. Payment is received by cash, check, or wire transfer on an account that is currently paid in full. The Office of the Bursar reserves the right to refuse payment on a paid in full account and to issue a refund whenever an account reflects a credit balance.

In some cases, students may decide to drop or add courses within a specific term, which may make them ineligible or over-awarded for their loans. If a refund was issued prior to a reduction in a student's loan amount, and the loan reduction results in a new balance on the student's account, the student is responsible for paying the difference in the next billing cycle.

Every effort is made by the Bursar staff to verify the accuracy of all refunds issued. Sometimes additional processing time may be required. It is strongly recommended that students and parents also verify the accuracy of all refunds received, and report any discrepancies to the Office of the Bursar immediately.

Accessing UR Student for Refunds:
If a student expects to receive a refund for the proceeds of their student loan(s), they should make sure the "Student Refund Election Rule" information in the "Payment Election" task in UR Student is up to date. **Refunds will be issued by check by default unless you choose the "Direct Deposit" option for the "Student Refund Election Rule," provide your banking information, and complete the payment election process.** Paper checks will be issued in the student's name and will be mailed through the USPS to the student's current billing address on file. You are required to maintain a current billing address in UR Student. Students will not be eligible to receive a refund until they have completed the promissory note(s), entrance counseling and have submitted all documents required by the Financial Aid Office. Please be advised that refunds are not issued until the start of classes each term, and the processing time for direct deposit refunds is 5-7 business days.

1098T Forms:
1098-T Tax forms are generated by the University at the end of January and are available to be downloaded as a PDF from UR Student.

TUITION, REGISTRATION STATUSES, DEFINITIONS AND FEES

Understanding the tuition policies requires familiarity with the registration status options offered by the School. There is no provision in the M.D. program for a part-time registration status; consequently all tuition is billed on a full semester basis.

Student Fellowship:
A student who takes time out from the medical curriculum to pursue research or an approved activity related to the successful completion of the M.D. program may be granted a Student Fellow status. Still considered a full time student, the student must pay the required health fees, the Student Services fee, and the Medical Student Research Fellowship tuition fee.

The length of a Fellowship is generally two consecutive terms and not more than twelve months. Financial support received for this period *may* be in the form of a stipend to cover health fees, living and travel expenses.

All Student Fellowships must be submitted and approved **1 week prior** to the start of the term. Students must start and be engaged in their approved Students Fellowship no later than 29 days after the start of the term or their Student Fellowship will revoked, funding suspended, and they will be placed on mandatory leave of absence for the term. No midterm Student Fellowships will be approved.

Students registering as Fellows are assessed a reduced tuition amount. Students registered as Fellows, who avail themselves of credit bearing coursework during their time out, will be assessed full time tuition during those terms, and will be assessed Extended Time for the terms required for completion of the MD degree after paying for eight terms.

Exception:

A student doing a research year out **between Phase 3 and Phase 4** may take credit-bearing coursework for a maximum of four weeks at either the beginning OR the ending of their fellowship year without additional tuition charges for that term. This one-time exception will not affect the eight-term full time tuition policy. **Note:** A Fellow (who may be awarded a stipend for their year out) taking advantage of this exception will **NOT** be eligible to receive the year out stipend during that four week period.

NOTE: Although the proposed revision gives students some tuition relief during fellowship and/or the joint degree year(s), students who earn elective credit during fellowship leaves will still be required to pay four full years of tuition to complete the MD program. In essence, the tuition paid for electives during the joint degree study period will not be deducted from subsequent years' tuition.

Extended Time Fee (ETF):

- For students who are required to take a year out or to repeat a portion of the curriculum, as designated by the MSPRB
- *For year out fellows who also desire to participate in credit bearing electives
- Student status and loan-deferment entitlement are retained
- Health fees will be charged. Students can "opt out" of coverage, if appropriate.
- *Students will retain eligibility for malpractice insurance
- The ETF will be charged beginning year five. Consequently, if a repeated year and/or year out occur during Years 1-4 of enrollment, the students will pay full tuition.

*When the appropriate prerequisites can be satisfied, at a minimum will require the successful completion of ICM and PCC. Consequently, first year students will not be eligible to participate in credit bearing clinical elective experiences during year out fellowships.

Exceptions:

The Medical School will not charge students enrolled in the U of R MD-Ph.D. additional enrollment fees during the graduate school phase of their training.

NOTE: MD-PhD students will pay the required graduate school tuition and fees. However, they will be required to complete the appropriate paperwork and documentation to be eligible to participate in and to receive credit for the required longitudinal clinical experience. (November 29, 2001)

Official Leave of Absence (LOA):
Students may be granted permission to take a LOA from the medical curriculum for a maximum of 12 months. Such students will be assessed the prevailing LOA fee per term. If an Official LOA extends beyond twelve months, the student will automatically be dismissed and is required to reapply for admission.

While LOA status retains one's place in the School, it does not carry with it the full-time student status necessary to participate in University health programs or to qualify for deferment of student loan repayment. Borrowers taking a LOA must, therefore, have Exit Interviews in the Financial Aid Office before leaving campus. Students taking a LOA who have already received loan funds to cover expenses which have not yet been incurred at the time of leaving school, may expect that pro-rated portions of those loans must be returned to lenders.

To finalize the Official LOA, the student must secure the signatures of both their Advisory Dean and the Associate Dean for Student Affairs on the *Leave of Absence Request Form for Medical Students*, which can be obtained by the student or his/her/their Advisory Dean from the Registrar's Office. The student must also indicate specific dates that include the first day of leave and the last day of leave.

Students leaving during a term, for which they have already paid tuition, will be subject to the University refund policies. (See Refund Policies)

In addition to an Official Leave of Absence, students may be granted a Temporary Academic Pause. A Temporary Academic Pause is effective for a maximum of 29 days. While there is no additional charge for this status, there is also no reduction in charges previously assessed for this period. **A Temporary Academic Pause defaults to an Official LOA at the end of the twenty-nine day period (day 30) if the student has not returned to credit bearing academic responsibilities or executed the appropriate documents to change the student status.** (Updated: December 29, 2017)

Broken or Lost Fees:
Students are billed at cost for equipment broken or lost. (Examples include 'bone boxes', iPads)

Mandatory Disability Insurance:
Disability Insurance coverage is provided to all medical students to compensate for the loss of future earnings should they become disabled while in medical school. This coverage will be provided to you by the University of Rochester through its partnership with Unum Insurance Company. Individual policies are issued and mailed directly to students.

Health Insurance:
All full-time students participate in the Student Health Program, which provides care and services offered by the University Health Service (UHS) and the University Counseling Center (UCC). All full-time students pay the mandatory health fee, which covers care and services provided by UHS and UCC at their offices. For more information about the services covered by the mandatory health fee, check Student Health Program on the UHS web site.

In addition to the mandatory health fee, all full-time students must have health insurance coverage. Students can enroll in the University-sponsored UR Student Health Insurance Plan (Aetna) or, if their own plan meets University insurance criteria, they can choose to waive the health insurance. All full-time students must complete the Online Insurance Process every year to enroll or waive the University-sponsored health insurance plan. Requests to waive the University-sponsored insurance will be audited

to assure compliance with University criteria. Students can appeal a waiver denial by submitting an appeal form by September 15. For more information about health insurance, check "Health Insurance for Full-time Students" on the UHS web site.

The UR Student Health Insurance Plan (Aetna) provides coverage for hospitalization, surgical procedures, diagnostic laboratory tests and x-rays, visits to specialists, athletic injuries, flu shots, and prescription medications.

All students are required to enroll or waive the University-sponsored health insurance every year by September 15. The link to the Online Insurance Process is in Quick Links on the UHS website (www.rochester.edu/uhs). Students who fail to complete the Online Insurance Process by September 15 will be enrolled in the University-sponsored insurance plan for the entire year. **The charge for the insurance plan cannot be waived after September 15.**

For more information about the mandatory health fee and/or health insurance, check "Student Health Program" on the UHS web site. If you have questions, contact the UHS Insurance Advisors at insurance@uhs.rochester.edu or 585-275-2637.

Mandatory Health Fee:
All full-time students of the University are charged an annual mandatory fee, which covers primary care visits to the University Health Service (UHS), time-limited therapy at the University Counseling Center (UCC), health education and health promotion services, public health and disease prevention programs. All full-time students pay the mandatory health fee, regardless of the health insurance option they choose. Coverage is from August 1 through July 31.

Pagers:
Pagers will be distributed in the Student Services Center before beginning year three and billing for their usage will be via the term bill. ***A year out fellow who will not need access to the pager for a full semester or academic year must return the pager by June 30 or December 31 to avoid being charged.*** The cost of replacing a lost pager is $100.00. Graduating students who do not return their pager will be charged $100.00. Students are responsible for replacing pager batteries. Any problems with the pager should be brought to the attention of Student Services.

Parking Fee:
Students who wish to use University parking must obtain a parking permit directly from the Parking Office. Students are required to pay the Parking Office directly.

Supplementary Fee for Infection Control:
M.D. students are required to pay a supplementary fee for infection control to defray a portion of the costs associated with additional medical precautions appropriate for individuals studying in a hospital environment and having contact with patients.

Student Activity Fee:
Set annually by students, this fee supports student activities as agreed upon by the Student Senate.

Student Services Fee:
This fee defrays a portion of the costs for miscellaneous services such as lockers, maintenance of the student lounge, orientation for first-year students and a graduation and post commencement administrative fee for seniors.

Technology Fee:
The annual technology fee defrays a portion of the cost for access to, updating and maintaining curricular and wireless technology. This fee is charged to all medical students, first through fourth year.

URMC Fitness Center:
Onsite fitness center resources are available at the College Town Fitness Center on 71 Celebration Drive and the Bloch Fitness Center located on River Campus. Membership to the fitness centers is provided to all URSMD medical students at no charge. Students must complete a 30-minute Fitness Center Orientation and submit membership enrollment forms to the Fitness Center. Fitness Center orientation and enrollment forms are only required once and are good for the students tenure at the medical school. No additional action is required for students that have already participated in the Fitness Center Orientation and submitted the required enrollment forms to the Fitness Center.

For additional information, visit the College Town Fitness Center website and/or the Bloch Fitness Center website.

TUITION AND FEE REFUND POLICIES FOR STUDENTS WHO WITHDRAW, INITIATE AN OFFICIAL LEAVE OF ABSENCE, ARE MANDATED TO TAKE A LEAVE OF ABSENCE, OR ARE DISMISSED:

Withdraw/Leave of Absence/Inactive Status Prior to the First Day of Classes
Students who cancel admission, withdraw or take a leave from the University, voluntarily or involuntarily, before the first day of classes will receive a full tuition and fee refund (100%) but will be assessed an administrative fee of $100.00. Such students are not included in University records as registered for the term. All disbursed Title IV aid, institutional aid, state and other aid will be returned to the appropriate account by the Financial Aid Office. *Note, however, that non-refundable application and enrollment fees will not be refunded.*

Withdraw/Leave of Absence/Inactive Status (including Dismissal) On or After the First Day of Classes
An enrolled student who withdraws, voluntarily or involuntarily takes a leave from the University, or are dismissed on or after the first day of classes and through the seventh day of the term (first week), will receive a full tuition and fee refund (100%). An enrolled student who becomes inactive on or after the eighth day of the term but before the time when they will have completed 60 percent of the period of enrollment (semester), will have their institutional charges and institutional aid adjusted based on a daily proration of attendance. Federal financial aid is adjusted as described below.

A student who withdraws, voluntarily or involuntarily takes a leave of absence, or is dismissed after the 60% point of the period of enrollment will receive no refund of institutional charges or financial aid for that term.

For example, if a student withdraws on the 65th day of a term of 135 days (48% of the term), the charge would be 48% of prevailing tuition costs and the refund would be 52% of the tuition charge. If the student withdrew on the 81st day of that term or later, there would be no refund, since the 60% point of that term had been reached.

The refund schedule for the **UHS Health Fee** is as follows:

- 100% during the first two weeks of the semester or first week of the quarter, for students NOT insured with UR Student Health Insurance.

- 0% during the remainder of the semester or quarter.
- 0% for students covered by UR Student Health Insurance, regardless of time in semester. Students with UR insurance are not eligible for health fee or insurance premium refunds. Health benefits continue until current coverage ends.

Student Fee Adjustments:
Once billed, there is no adjustment to payments for disability insurance nor to fees charged (such as library fines, health service charges, unpaid parking fines, UR Student Health Insurance, student activity fees etc.) upon the student's separation from the medical school. Courses, clerkships, and electives in which the student was enrolled appear on the student's record and show the grade of "W" (withdrew).

Date of Separation:
The date of withdrawal for voluntarily leaves of absence or withdrawl is determined by the date that the Offices of Medical Student Education of the School of Medicine and Dentistry receives written notification from the student. The date of dismissal is the date when the last of any and all student requested appeals has upheld the dismissal. If a student does not appeal dismissal, the date is the date the MSPRB dismissed the student. The adjustment of charges and all refund calculations are done by the Bursar's Office upon receipt of a change-of-status form from the Registrar's Office. For specific details on dates and examples can be found on the Bursar's Office Website.
https://www.urmc.rochester.edu/education/bursar/medical-students/refund.aspx

Students Receiving Title IV Federal Aid
Per federal regulations, a student earns their aid based on the period of time they remain enrolled. Unearned Title IV funds, other than federal work-study, must be returned to the appropriate federal agency. During the first 60% of the enrollment period, a student earns Title IV funds in direct proportion to the length of time s/he remains enrolled. A student who remains enrolled beyond the 60% point earns all the aid for the payment period.

For example, if a period of enrollment is 100 days and the student completes 25 days, then the student has earned 25% their aid. The remainder of the aid must be returned to the appropriate federal agency. Unearned aid must be returned to the specific programs, in order, up to the total net amount disbursed from each source. The order of return is as follows: Unsubsidized Direct Loan, Subsidized Direct Loan, Direct Graduate PLUS Loan, Direct Parent PLUS Loan, Pell Grant, FSEOG, Iraq & Afghanistan Service Grant, Health & Human Services programs, institutional financial assistance programs, privately funded scholarship programs.

Short-Term Emergency Loans
A short term emergency loan is available to any matriculated and registered medical or graduate student in the School of Medicine and Dentistry who is in good academic standing and does not have any unpaid short-term loans. The loan is non need-based and interest-free. Eligible students may borrow up to $600 for a maximum period of 60 days. Any Financial Aid received and applied to a student's account will repay the Short Term Loan before a refund is issued. If a student repays loans promptly, there is no limit to the number of times he or she may access this loan. These loans are funded by alumni contributions and the American Medical Association Education and Research Foundation (AMA).

Students should contact the Bursar's Office at bursar@admin.rochester.edu to request the "Emergency Short Term Loan Contract." Once received, the Bursar's Office will confirm with the appropriate Registrar that the student is in good academic standing and there are no outstanding short term

loans. Once confirmed, the Bursar's Office will initiate a refund which will be deposited to the student's bank account within 5 business days, provided the student has completed their payment elections in UR Student and authorized a bank account for refund purposes. If payment elections for refunding do not exist, the refund will be issued via check and mailed to the student.

Students with past due balances on their student accounts may be denied use of the fund as well.

Students expecting to graduate in May, will lose access to the Short Term Loan privilege on the March 1st preceding their graduation date.

FEDERAL REGULATIONS CONCERNING PRIVACY AND CONFIDENTIALITY

Due to very strict Federal regulations concerning privacy and confidentiality, the Office of the Bursar is not able to discuss or release information regarding a student's account without the student's written approval. This includes phone calls related to the payment of bills. Students who desire to have the Bursar's Office discuss their student accounts with appropriate people (such as parents or spouses, who wish to make payments), should grant access by adding them as a friend or family member in UR Student.

X. SUPPORT SERVICES

ADVISORY DEAN PROGRAM

Rochester students arrive from diverse origins to join a profession with shared values: compassion; the understanding care of patients; learning, investigating, and uncovering the secrets of health and illness. This is an exciting transition, but it may also be challenging. In an effort to ease this transition and to enhance a supportive learning environment, Rochester has incorporated an innovative model of student advising. The advisory dean program at Rochester is designed to enhance the personal and professional development of medical students throughout the course of their undergraduate medical education. This program helps facilitate the many transitions that students face during their medical school tenure, including college student to medical student; classroom to clinic office; medical school to residency. Regular small group and individual meetings with an advisory dean help to foster relationships and ultimately assist in each student's growth and development in medicine.

Phase 1 medical students are introduced to their advisory dean during orientation week. Initial individual meetings allow students and advisory deans to meet and learn about each other. Weekly informal small group lunch meetings during the first semester are designed to foster open discussions of special issues facing medical students today including transition to medical school, ethical issues in clinical medicine and biomedical research, and the changing health care environment. One of the goals of these discussions is to help foster professionalism in our students. Additionally, these meetings give students a direct opportunity to express their thoughts about the curriculum and the school. During the second semester, the small groups meet every three weeks. The ability of advisory deans to get to know students on a personal level throughout their tenure in medical school is invaluable.

During Phase 2 of medical school, small groups meet every three weeks. In addition to continued discussions of professionalism, the meetings continue to facilitate the students' thinking about their careers in medicine. Students are also encouraged to meet with their advisory deans on an individual basis to address plans for their curriculum for the final two years of medical school.

Four meetings are held with Phase 3 students on their clinical rotations. These meetings incorporate case-based discussions of ethical dilemmas that students have encountered. Through advisory dean

facilitated peer discussions, individual students are able to better understand their responses to clinical situations and how their professional development may be shaped, positively and negatively, by those around them. Career advising continues in both small group and individual settings with the advisory deans.

In addition to three small group meetings in the final year of medical school, advisory deans focus their efforts with students on an individual basis. Career advising, including preparation of the Medical Student Performance Evaluation (Dean's Letter) and individual student residency applications (personal statements and curriculum vitae), and assistance with the transition to residency are the central focus of the advisory dean system.

The connection of each advisory dean with a small cohort of students (approximately 26) in each class has helped to foster a trusting relationship and has enhanced students' personal and professional development into physicians.

Review of Request to Change Advisory Deans:

Any medical student with a compelling reason to change their Advisory Dean (AD) assignment will have one opportunity to request a change of Advisory Dean.

The first step in the process is for the student to meet with the student's current AD to discuss the concern. If after this meeting the student desires to move forward with the review process, a letter requesting a change of AD assignment with the reason(s) must be submitted to Dr. Flavia Nobay, Associate Dean for Student Affairs.

Dr.Nobay will meet with the student to hear the concerns and review the process. Dr. Nobay will convene a faculty three member ad hoc review committee, however, students in academic difficulty (examples include Advisory Status, Probationary Status or pending dismissal proceedings) will not have their request reviewed by the ad hoc committee until the academic difficulty has been resolved. The ad hoc committee will meet with the student and make a decision regarding the request. If the request is approved, the ad hoc committee will assign the new AD. If the request is denied, the student may appeal the request to the Medical Student Promotions and Review Board (MSPRB).

MSPRB will meet with the student and make a decision regarding the request. If the request is approved, the MSPRB will assign the new AD. The MSPRB decision is final. (Approved: May, 25, 2010)

ACCOMMODATIONS

Accommodations for Students with Disabilities:

To be in compliance with the Americans with Disabilities Act (ADA), the School of Medicine and Dentistry is committed to making reasonable accommodations to assist students with documented disabilities to fulfill their educational objectives. The Medical School reserves the right to reject any requests for accommodation, that in its judgment, would involve the use of an intermediary that would in effect require a student to rely on someone else's power of selection, detection and observation, fundamentally alter the nature of the School's educational program, lower academic standards, cause an undue hardship on the School, or endanger the safety of patients. The current version of the Medical School's technical standards can be found in the Student Handbook. At any time, course or clerkship directors or the Medical School Promotions and Review Board (MSPRB) may be consulted on the question of whether the accommodations requested are reasonable or would constitute a fundamental alteration of the academic program or a direct threat to the health and safety of any person. Please note, that the student's diagnosis will be kept confidential.

Procedures for Requesting ADA Accommodations:
Students who wish to request accommodations for a disability must follow the University of Rochester's procedures, as described at https://www.rochester.edu/disability/policies.html. Those procedures describe the documentation required of students requesting accommodations, the process for deciding whether to grant accommodations, notification to instructors, review of accommodation decisions, and other related matters. The Medical School's access coordinator as described in the University procedures is Dr. Flavia Nobay, Associate Dean for Student Affairs Students with questions can contact Dr. Nobay at 585-275-4537 or flavia_nobay@urmc.rochester.edu or Jennifer Prosceo, Director of Office of Disability Resources at 585-276-5075 or jennifer.prosceo@rochester.edu.

Dr. Nobay should be contacted if students encounter difficulty in accessing approved accommodations from individual instructors or course directors.

Confidentiality of Records
Information about a student's disability will be retained separate from the student's academic file, as required by law. The school will not generally release details of a student's diagnosis or fact that accommodations were provided (for example to residency programs, etc.) without the permission of the student.

Appeals Process for ADA Accommodations:
Students with concerns about eligibility verification decisions and provision of accommodations may appeal these decisions. The University provides both informal and formal processes for medical students to appeal accommodation decision. Although the University encourages use of informal processes to resolve disputes, a student may use a formal process without first pursuing the informal one.

Informal Process

- In instances where there is a dispute, the student, instructor, University administrative staff, and/or the access coordinator will make every effort to resolve the disagreement.

- If a resolution cannot be reached, the student, instructor, or University administrative staff may seek informal resolution by submitting a **Request for Review** of the disputed decision to the University of Rochester Director of Disability Compliance. The Director of Disability Compliance will attempt to resolve the dispute with the participation of the medical school access coordinator, Dr. Flavia Nobay.

- If the dispute cannot be resolved, the Director of Disability Compliance will convene the Eligibility Assessment Committee, which will include the medical school access coordinator, within seven (7) working days of receiving the Request for Review.

  Eligibility Assessment Committee
  The Eligibility Assessment Committee is appointed on an ad hoc basis by the Director of Disability Compliance. This committee may include faculty, academic administrators and others appropriate to the particular case under review. The access coordinators will provide general information regarding determination and implementation of accommodations. The Dean or designated representative of the Department offering the course(s) in which the accommodation is requested may be asked to provide information to the committee.

- The Committee will review the Request for Review and any additional relevant information from the student and University personnel and will render a decision within ten (10) working days from the date of receiving the Request for Review.

- If the individual is not satisfied with the decision of the Committee, a formal grievance may be filed under the Section 504/ADA - Grievance Procedure.

- While a Request for Review is under consideration, the instructor will provide the reasonable accommodations that are not under dispute and have been approved and communicated by the access coordinator.

Formal Process – Section 504/ADA Grievance Procedure:
The University's formal grievance procedure for challenging a decision regarding accommodations is **Policy 106 - Policy Against Discrimination and Harassment**.

Other Medical School Accommodations for Temporary Health Issues/Concerns (non-ADA):
Students may also request short-term accommodations to the Medical School program for reasons of health that do not constitute disabilities under the ADA and similar laws. Examples include modifications for short-term or minor injuries or illnesses. In such cases, the granting of accommodations is entirely within the discretion of the Medical School, within the bounds of applicable law. Students may appeal these decisions as described below.

Appeals Process for Accommodations for Temporary Health Issues/Concerns (non-ADA):
Students with concerns about eligibility verification decisions and provision of temporary health accommodations for health may appeal the decisions to the MSPRB according to the process established by the medical school.

The student's formal appeal must be received in writing by the Associate Dean for Medical Education/Student Affairs within five (5) business days of the date of the eligibility outcome letter. The correspondence should state the reasons for appeal and provide an alternative plan the student wishes to be considered. The MSPRB appeals review will occur within fourteen (14) calendar days of the student's appeal.

Five members of the MSPRB should participate and all decisions should receive a majority vote. Formal rules of evidence do not apply. Any material considered relevant by the MSPRB shall be considered. The MSPRB will offer an independent opinion about the merits of the appeal, the reasonableness of the requested accommodations and if granting such will substantially alter the depth and integrity of the educational requirements for University of Rochester medical students. The decision of the MSPRB is final.

The MSPRB may invite a University Disability Resources Office (UDRO) representative and/or other consultants to participate in the review of the appeal as non-voting participants. The student may be required to meet with the MSPRB as a part of the review process. The student may appear alone, or with an advocate who is not an attorney.

Anticipated Absences for Health Care:
Students who anticipate absences from classes, clinical or other scheduled academic responsibilities for planned, short-term or continuity health care, must contact the Associate Dean for Student Affairs for approved release time. Without revealing a student's diagnosis or health care needs, the Advisory Dean/Associate Dean for Student Affairs will advise the course or clerkship director(s) about the student's excused absence. Students may be required to make up missed academic experiences.

If the nature and/or frequency of the release time in effect requires or results in a student not participating in required educational experiences, the MSPRB will be convened to evaluate the reasonableness of the requested release time and if granting such will substantially alter the depth and integrity of the educational requirements for University of Rochester medical students.

Approved by the Curriculum Steering Committee on July 20, 2021

ASSISTANCE FOR PREGNANT MEDICAL STUDENTS

To facilitate the school's ability to provide assistance, medical students who are pregnant are urged to advise their Advisory Deans and the Associate Dean for Student Affairs as soon as they are aware of their pregnancy.

The School is available to assist with schedule modifications and facilitating referrals to the University Health Service. (Effective September 10, 2010)

MEDICAL STUDENT REPRODUCTIVE PROTECTION POLICY

I. Policy: Some training locations at the Medical Center may pose potential health risk to students during pregnancy and/or their fertile years. The School of Medicine and Dentistry is committed to minimizing these risks through safety education and management but realizes that some risks may still exist. Students need to understand those risks and be able to make informed decisions about working in those settings. Students who train in areas which contain hazardous chemicals, biological agents, or radiological materials capable of causing adverse reproductive outcomes will be referred to the University Health Service (UHS) for an overview of known risks, reproductive hazards and safety training to minimize risks. While training may mean accepting some risks, the individual student is responsible for making this decision.

II. Guidelines:

A. Administration of this policy is the responsibility of the OME Deans and Course/Clerkship Directors. All students -- both male and female -- shall be made aware of the known risks and reproductive hazards in their training. Students whose training involves possible exposure to agents that are known to cause injury to the sperm, egg or fetus shall be informed of the risks and how to minimize them.

B. Technical advice on chemical and bio-hazardous materials is available from the Environmental Health and Safety (EH&S). Technical advice on radiological materials is available from Radiation Safety. Medical advice is available from the University Health Service.

1. As part of its compliance with the OSHA Laboratory Safety Standard and the Hazard Communication Standard, the University can provide written information and training based on processes and protocols to prevent or minimize exposures to hazardous materials capable of causing adverse reproductive outcomes.

2. On Request, Material Safety Data Sheets (MSDS) that describe the specific hazards, including any reproductive hazards, of each chemical and what training practices and/or protective equipment are necessary to reduce risks of exposure will be provided by the Office of Educational Resources (585-275-7666).

3. Course and Clerkship Directors are required to inform students about the known risks in areas which contain biohazards, chemicals and/or radiation and the safety rules to minimize risks of exposure.

4. In non-emergency situations students have the right to choose or refuse training in an area which contains hazardous chemicals, biological and or radiological materials capable of causing adverse reproductive outcomes. Note: Students cannot opt out of participating in educational experiences that involve emergency health care or a biological incident at Strong Memorial Hospital, where medical students will be expected to assist with appropriate tasks at the hospital point of distribution (HPOD) clinic.

Advising the School about Opting out of Training:

When a student wishes to opt out of training which contains exposure to hazardous chemicals, biological and or radiological materials capable of causing adverse reproductive outcomes, a student must:

1. Advise the course director and Advisory Dean in writing, about his/her/their decision to opt out of training which contains exposure to hazardous chemicals, biological and or radiological materials capable of causing adverse reproductive outcomes.

2. Indicate the specific (non-emergency) educational experiences he/she anticipates opting out of.

NOTE: Because students who opt out of training must participate in the care of patients during emergency situations, they will not be exempted from being evaluated and demonstrating competency on the educational content missed. The URSMD is not responsible for providing supplementary tutoring and/or academic support to assist a student with meeting the required academic standards.

Appeals Process:

If a student's anticipated absence or non-participation in educational experiences substantially alters the depth and integrity of the educational requirements for University of Rochester medical students, the Medical Student Promotions and Review Board (MSPRB) will convene a review committee to determine the reasonableness of the anticipated non participation. The student may appeal an adverse review committee decision to the MedSAC Appeals Board (MAB), whose decision will be final.

A student (for example a pregnant student) who opts out of training for a given academic period, but who plans to return to complete a course will receive a grade of I (incomplete). When the

course/clerkship is completed, the incomplete grade will be removed from the record and replaced with the final grade.

Adapted from the University of Rochester Personnel Policy/Procedure Policy: 167 Revised: 06/2011

ACADEMIC SUPPORT SERVICES

Peer Tutors:

As a part of the institutional effort to nurture and assist students, tutoring and study skills enhancement are provided **free of charge**.

As students move from an undergraduate educational setting to a graduate or professional school environment, it is not uncommon for them to discover that the study and learning techniques that enabled them to excel at the undergraduate level require modification to successfully negotiate the medical or professional school curriculum.

A peer tutorial service has been established to assist students who experience difficulty with the courses. In addition to providing an opportunity to sit down with individuals who have devised successful approaches to mastering the material, the peer tutorials provide time to have the material presented in a way that is consistent with the student's learning style, one-on-one or in a small group setting.

To avail yourself of tutoring services, contact the course directors; your Advisory Dean or Dr. Flavia Nobay. Students should request assistance when they first have a sense that they are getting behind or are experiencing difficulty.

Study Skills Assistance:

Medical students who experience difficulty with organizing information for review, problem solving or study skills, have access FREE of CHARGE to the University's Center for Excellence in Teaching and Learning located on the River Campus, in 1-154 Dewey Hall (for students).

For appointments, students can call 585-275-9049.
Web site: http://www.rochester.edu/College/LAS/index.html

CHAPLAIN'S OFFICE

Faith Communities Affiliated with the University of Rochester:

Distinguished by the diversity of its members, the University of Rochester welcomes people of various faiths from around the world. The Interfaith Chapel works to support the expression of this mixture of heritages and groups.

- Zen (Buddhist) Meditation Group
- Asian Christian Community
- Cru
- Newman Community – Roman Catholic Christianity
- Hillel – Jewish Life
- Muslim Students' Association
- Protestant Chapel Community
- UR Christian Fellowship – Christianity in the Gospel Tradition
- Chabad House – Jewish Student Community

Each community is based in the Interfaith Chapel, River Campus. Each welcomes and includes professional and graduate students from throughout the University system and their families. For a schedule of activities, programs, and services, contact each community directly.
http://www.rochester.edu/chapel/communities.html

Rev. Dr. C. Denise Yarbrough
dyarbrough@admin.rochester.edu
Director of Religious and Spiritual Life

EDWARD G. MINER LIBRARY

Jennifer Raynor
Director, Miner Libraries
Phone: 585-275-5194
Library Location: 1-6221
Library General Phone: 585-275-3361
Web Site: https://urmc.edu/miner

UNIVERSITY COUNSELING CENTER (UCC)

The University Counseling Center (UCC) provides a comprehensive initial assessment and an individualized treatment plan to full-time members of the University of Rochester community who pay the mandatory health fee. Based on the initial assessment, a treatment plan is developed with the clinician that addresses the client's unique needs and concerns. This plan may include recommendations such as, but not limited to: group therapy, brief individual therapy, referrals to community provider for specialized treatment or longer term therapy services, Therapist Assisted On-line (TAO) therapy, case management services, psychiatry or other campus services.

Locations:
River Campus Office, 585-275-3113
Third Floor, UHS building
738 Library Road
Susan B. Anthony Circle
Call (585) 275-3113 to schedule an appointment
www.rochester.edu/ucc/

Medical Center Office, 585-275-3113
Medical Center office is temporary closed due to extensive flood damage on December 26, 2022.
Call (585) 275-3113 to schedule a remote appointment or in-person appointment at the River Campus office.
www.rochester.edu/ucc/

Confidentiality: All contacts with a University Counseling Center therapist are confidential. The fact that a student is using UCC will not be disclosed to any University official or faculty member, or to family, friends or roommates without permission of the student. Because of the sensitive nature of visits, extreme care is taken to protect the confidentiality of patients' records. UCC records are separate URMC medical records. In addition, UCC will not release any clinical information about a student's visit, even with the student's written request, except to another healthcare provider for purposes of further treatment.

Urgent Mental Health Situations and After-Hours Care: UCC offers on-call emergency service 24 hours a day throughout the year for students who are distressed themselves or who are concerned about someone else. Students should call the University Counseling Center at 585-275-3113 to reach the professional on-call.

If you have any questions, please do not hesitate to call our office at 585-275-3113.

UNIVERSITY HEALTH SERVICE (UHS)

University Health Associates of the University Health Service (UHS) is a primary care practice for members of the University of Rochester community. Primary care services are provided by a team of physicians, nurse practitioners, and registered nurses. Ralph A. Manchester, M.D. is the Director of the University Health Service.

Medical Center Office	Due to a flood on December 26, 2022, the Medical Center Office is closed until further notice Please call 585-275-2662 to schedule an appointment at the River Campus office
Scheduling Appointments:	Call 585-275-2662
Health Advice Information:	Call 585-275-1160 to speak with a registered nurse about a health concern or for a prescription renewal.
Women's Health Information:	Call 585-275-1161 to speak with a registered nurse about a health concern or for a prescription renewal.
After-Hours Care:	Call 585-275-2662; message provides instructions for reaching the physician on call.
UHS Web Site:	www.rochester.edu/uhs/

University policy requires all students with an active status to have comprehensive health insurance coverage. Students with comprehensive health insurance coverage from other sources may waive the major medical ("optional") UHS insurance. To waive the optional UHS coverage, the appropriate section of the Health Insurance Options Form must be completed and returned to UHS or the U of R health fees will be charged.

NOTE: Students **CANNOT** waive the mandatory health fee.