



SCHOOL OF
**MEDICINE &
DENTISTRY**

UNIVERSITY *of* ROCHESTER
MEDICAL CENTER

University of Rochester School of Medicine and Dentistry

Student Handbook

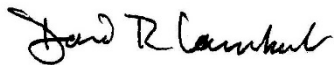
INTRODUCTION

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,

A handwritten signature in black ink that reads "David R. Lambert". The signature is written in a cursive style with a large initial "D".

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

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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 standards of conduct and Honor Code.

VERIFICATION OF ELIGIBILITY 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 CACHED Administrative Assistant. Upon receipt of the completed and signed release form, the Bursar's Office will charge the non-refundable service fee to student 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 not been a change in criminal background, arrest history and sex offender status.

Review Committee:

- Deirdre Flynn, JD, Senior Counsel for Litigation and Risk Management
- Flavia Nobay, MD, Associate Dean for Admissions. Associate Professor, Emergency Medicine
- Kathryn Castle, PhD, Assistant 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.

- **Documents that Establish Identity, one of the following:**
 - 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.
- **Documents that Establish Citizenship, one of the following:**
 - United States Military Card;
 - United States Passport;
 - Certificate of United States Citizenship;
 - Certificate of Naturalization;
 - Birth Certificate issued by a state, county, or municipal authority, bearing a seal or similar certification;
 - Alien Registration Card; or
 - Visa
- **Documents that Establish State Residency, one of the following:**
 - 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*;
 - State-issued registration certificate for a motor vehicle owned by the student; or
 - 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 4:00 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 Year I 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 Assistant Dean of Student Affairs. 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.

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.

USE OF LEGAL NAME POLICY

All students will be required to use their legal names on all school documents, course and grade rosters, e-mail and U of R ID. Students will have the option, **if requested by the stated deadline**, to have an alternate/preferred name in parenthesis on the white coat name tag: John Brown who prefers to be called "Jamie" would be listed as John (Jamie) Brown. The school reserves the right to exclude alternate names that have inappropriate content.

The Institution will only amend official student names that have been changed via a documented legal process.

II. ACADEMIC POLICIES, GUIDELINES AND PROCEDURES

ABSENCES FROM CLASSES, CLERKSHIPS, ELECTIVES AND ACADEMIC RESPONSIBILITIES

Attendance at whole class lectures is strongly encouraged, some specific all-class/large group activities may be required at the discretion of the course/clerkship 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 notify the course or clerkship director, and their Advisory Dean. 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/clerkship director and may be different from the original activity to ensure that the objectives have been met. Notation of absences not related to healthcare will be noted in narrative comments in the course or clerkship evaluation.

It is the student's responsibility to keep the faculty, course/clerkship directors, clinical team in clerkships and electives, and their Advisory Dean informed about any anticipated absences from classes, clinical or other scheduled academic responsibilities. Examples of excused absences include personal or family emergency, delivery of a podium presentation at a national meeting. Unexcused absences include athletic competitions, early vacation, attendance at a meeting with no accepted podium presentation.

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.

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 or the Assistant 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/Assistant 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 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. In the case of unexpected absences for urgent reasons (e.g., illness), the student must make every effort to notify the clerkship/course director, his/her administrative assistant, the senior resident and his/her Advisory Dean of their absence, and upon return to the clinical rotation must discuss the circumstances, including remediation of work missed, with the clerkship/course director. 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/course director for special circumstances as arranged in advance. It is expected that the student making such a request will do so as much in advance as practical, and will be prepared to discuss options for remediating the work that is missed. Longer time away will not be granted except under extraordinary circumstances and at the discretion of the clerkship/course director. It should be noted that some educational objectives are achieved through continuity with patients and absences may lead the make-up experience to be longer than the original absence.

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

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 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 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 Assistant 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 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 medical or psychiatric condition at issue, he/she must release his/her medical records to MSPRB to support this claim, or it cannot be considered.

ACCEPTABLE USE OF INFORMATION TECHNOLOGY AND RESOURCES

University Acceptable Use Policy

Adopted by the Provost and General Counsel - March 17, 2011

<http://tech.rochester.edu/policies/acceptable-use-policy/>

Overview:

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.

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 are 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, 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.

Scope:

This policy details specific requirements for the use of all computing and network resources at the University of Rochester. 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 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.

Acceptable Use Requirements:

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

- Use resources only for authorized purposes.
- Protect their userid(s) and system from unauthorized use. Each individual is responsible for all accesses to University information resources and technology by their userid(s) or any activity originating from their system. An individual's userid and [password](#) act together as their electronic signature.
- Access only information to which they have been given authorized access or that is publicly available.
- Protect electronic protected health information (ePHI) in compliance with HIPAA Privacy and Security Rules, [URMC HIPAA policies](#), and other applicable 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."*

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](#) to any other individual, even those claiming to be an IT support technician (over the phone or in person). If, in the professional judgment of the user, it is necessary to share a password with an IT support technician or any other individual, the password must be changed as soon as possible thereafter. Once shared, a password is considered compromised and must be changed immediately. Alternatively, the appropriate Helpdesk may be contacted for assistance with giving others appropriate authority to access an individual's files or e-mail on their behalf.
- 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 userid.
- 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 userid 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.

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.

NOTE: Students are required to use their legal names on all school documents, course and grade rosters, e-mail and U of R ID. The Institution will only amend official student names that have been changed via a documented legal process. All University communications sent via email will be sent to this address. Faculty members will use the official University email address to communicate with a student registered in their classes and administrative staff will correspond with students via this address.

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 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 URM C email servers is **not** allowed, students are free to manually redirect email from their URM C email address to another address (e.g. @hotmail.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 with Box.com and students with Box.com accounts may store data containing PHI/PII within their URMCM 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.

DOUBLE HELIX CURRICULUM GRADING – COURSES AND ELECTIVES

1st, 2nd, 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.

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.

Course Grade Appeals Policy:

1. Any student wishing to appeal a final 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 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 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. The information must be provided with the initial documentation of intent to appeal.

2. For courses, the first appeal is reviewed by the course director and their grading committee where applicable that made the initial grade determination. The appeal decision is provided to the student by the clerkship director.
3. If after review of the appeal decision made by the course director/grading committee, the student wishes to further appeal the grade decision and/or remediation requirement, the student must notify the clerkship director within three (3) business days who then notifies the Assistant Dean for Student Affairs. The Assistant Dean for Student Affairs will notify the chair of the appropriate Instruction Committee.
4. 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, 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 the initial grade narrative summary. To avoid conflicts of interest, the course director will not be present at nor participate in the discussion. The decision of the ad hoc committee is final. The ad hoc committee's decision is forwarded to the Assistant Dean for Student Affairs for student notification.

DOUBLE HELIX CURRICULUM GRADING – CLERKSHIP AND SUBINTERNSHIP (ACTING INTERNSHIP)

Clerkships and Subinternships (acting internship)

Clerkships and Subinternships* (acting internship) are graded: Honors/High Pass/Pass/Pass Marginal/Fail/Incomplete /Withdraw/Withdraw Failing/ To Be Determined (for clerkships only).

*All subinternships (acting internship) must be four consecutive weeks. Subinternships (acting internship)s will be graded on the five-point scale grades for all Subinternships (acting internship) taken. If the student chooses to complete more than one subinternship (acting internship), the first will be counted as the required subinternship (acting internship). The second will be counted toward elective credit.

The following grade definitions will be used for clerkships and subinternships (acting internship):

Honors: Academic and clinical performance rated as exceptional by all evaluators. Outstanding personal and professional qualities. Shows promise to excel in the most competitive residencies and will receive vigorous departmental support in applying for these. (In a typical year, approximately 20% of students will achieve this grade.)

High Pass: Academic and clinical performance rated as exceptional in several areas, at least very good in all others. Personal and professional qualities are excellent. Capable of succeeding in any residency and will receive strong departmental support. (In a typical year, approximately 30% of students will achieve this grade.)

Pass: Academic and clinical performance ranging from acceptable to very good in all areas (and may be exceptional in some areas). Personal and professional qualities are at least very good. No significant deficiencies. Most students receiving this grade will be capable of succeeding in any residency but will be challenged by the most competitive, and will receive strong departmental support

although will be advised not to limit applications to the most highly competitive programs. Some students receiving this grade would not be comfortable or successful in the most competitive residency programs, will be advised to apply to less competitive (but still very good) residencies, and will receive departmental support. (This is the modal grade: In a typical year, approximately 50% of students will achieve this grade.)

Pass Marginal: Some significant deficiencies identified, requiring remedial work (to be determined by the clerkship director and/or the clerkship grading committee, albeit not repeat of the entire clerkship) before a Pass grade for the clerkship can be awarded. A Pass marginal can only be remediated to a grade of Pass, and must be remediated for promotion. Pass marginal 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 subinternships (acting internship) **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:

2014 Adult Inpatient Clerkship: Medicine Block AI –**WF**

2015 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 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 with the clerkship director and the student.

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 a re-taken course, clerkship, or entire year, the student will be dismissed from the school by the MSPRB.

Clerkship, Elective, and Subinternship (acting internship) Grade Appeals Policy

1. A student wishing to appeal a final grade or remediation requirement in a clerkship must contact the clerkship 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 to discuss the reasons for their appeal.
2. The student may provide performance information that was not previously available to the clerkship 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 where applicable that made the initial grade determination. The appeal decision is provided to the student by the clerkship director.
4. If after review of the appeal decision made by the clerkship grading committee, the student wishes to further appeal the grade decision and/or remediation requirement, the student must notify the clerkship director within three (3) business days who then notifies the Assistant Dean for Student Affairs. The Assistant Dean for Student Affairs will 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, two of whom are current clerkship directors. The ad hoc committee will be given the student's written appeal. The clerkship director will provide the ad hoc committee a written justification for the assigned grade/required remediation along with the initial grade narrative summary. To avoid conflicts of interest, the clerkship director will not be present at nor participate in the discussion. The decision of the ad hoc committee is final. The ad hoc committee's decision is forwarded to the Assistant Dean for Student Affairs for student notification.

ASSESSMENTS

Courses

1. Students must pass both tutorials/small groups (quality of participation in PBLs/labs/conferences) and exams (numerical scores) to pass courses.
2. Students receive Pass, Pass Marginal, Fail or Incomplete at the end of each course.
3. Students must pass all courses and summative assessments to pass each year.

Clerkships

1. Mid-Clerkship Feedback - all clerkships must students with formal mid-clerkship feedback from the clerkship director or his/her designee at the clerkship's mid-point (see below). 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 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.
2. Clerkship grades have contributions from both narrative component and objective exam.
3. Grading for all clerkships is Honors, High Pass, Pass, Pass Marginal, Fail, Incomplete, or To Be Determined.
4. The grade distribution will vary between disciplines around a suggested target of 20% honors, 30% high pass, 50% pass, but Medical Student Performance Evaluation processes will make these percentages explicit for each discipline.

Mid-Clerkship Feedback:

One-on-one feedback (formative) on strengths and areas for improvement must be given to each student at least once during each clerkship by the clerkship director or his/her designee, depending on the clerkship. The objective 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 preceding clerkship.

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. All core medical school clerkships, electives, and subinternships (acting internship) will have a narrative component for either formative and/or summative purposes.

Global Assessments

The two Comprehensive Assessments (in Year 2 and Year 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.

Final Grade Submission Policy:

The LCME requires final grades for all courses and final grades for all clerkships including narrative comments must be submitted within six weeks after the end of the basic science block for each clerkship. The objective is to ensure that students know their grades for the two clerkships they completed in the preceding block by the time they start the second clerkship in the next block.

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 with a comment of explanation noted in the comments section.

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 subinternships (acting internship) **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 **June 30th 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 Assistant 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:

1. 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 Assistant Dean of Student Affairs who will forward the information to the MSPRB. The grading system to be applied is the responsibility of the Curriculum Steering Committee (another committee that reports to MedSAC).
2. 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 MSPRB for their approval. Once the deficiency has been remediated, the grade becomes Pass (P) on the permanent transcript.
3. A Double Helix Curriculum 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.

4. 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.
5. 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.).
6. Students, who start courses, clerkships, subinternships (acting internship), 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, subinternship (acting internship), or elective and elects to withdraw with a failing performance, a grade of Withdraw Failing will be recorded on their transcript.
7. 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 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 components of the MSPRB is monitoring 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 letter grades.
2. 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.

- If a student is on Advisory Status and the student's performance is above the bottom 20% on three successive exams, he/she will be taken off Advisory Status.

Clerkship, Subinternship (acting internship), Elective:

- 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 (via the Assistant 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.
- All students who receive grades 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.
- 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.
- 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 Advisory Dean and/or the Assistant Dean for Student Affairs to review the resources available to address the student's need. Options include tutoring services, support services and assessments regarding learning styles and study habits.

GRADUATION REQUIREMENTS

Academic Schedule:

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

Academic Requirements
Orientation (1 st year)
Mastering Medical Information (1 st year)
Introduction to Clinical Medicine (1 st year)
Human Structure and Function (1 st year)
Skills in Complete Patient Evaluation (SCOPE) (1 st year)
Molecules to Cells (1 st year)
Medical Humanities Seminars (1 st year)
Peer Feedback (1 st year)
Host Defense (1 st year)
Primary Care Clerkship (1 st year)
Addressing Disparities in Healthcare (1 st year)
Pharmacology (1 st year)
Mind/Brain Behavior (2 nd year)
Medical Humanities Seminars (2 nd year) (except MSTP)
Primary Care Clerkship (2 nd year)
Disease Processes and Therapeutics (2 nd year)
Women's Health (2 nd year)
Disorders of Childhood (2 nd year)

Quality, Safety, and Inter-professional Communication (2 nd year)
Second Year Comprehensive Assessment (2 nd year)
Adaptions and Clinical Transitions (2 nd year) (except MSTP)
Medicine Clerkship (3 rd year)
Surgery Clerkship (3 rd year)
Adult Inpatient Basic Science Block (3 rd year)
Neurology Clerkship (3 rd year)
Psychiatry Clerkship (3 rd year)
Mind/Brain/Behavior Basic Science Block (3 rd year)
Obstetrics and Gynecology Clerkship (3 rd year)
Pediatrics Clerkship (3 rd year)
Women's and Children's Health Basic Science Block (3 rd year)
Third Year Comprehensive Assessment (3 rd year)
25 Elective Weeks (3 rd and 4 th year) - 2 elective weeks must be completed in a surgical sub-specialty
Emergency Medicine (4 th year)
Subinternship (acting internship) (4 th year)
Community Health Improvement Course – CHIC (4 th year) - MSTP students who opt to be exempt from CHIC must complete 29 weeks of electives
Process of Discovery – POD (4 th year)
Successful Interning (4 th year)

Further details regarding graduation requirements, activities which meet the requirements of two weeks of surgical subspecialty and subinternships (acting internship), enrolled students should consult the Course Catalogue on MedSIS.

Student Academic Schedule – Years 3 and 4

Clinical students when participating in academic experiences do not routinely receive any time off from scheduled requirements. Full attendance during all aspects of required and elective experiences is expected as a part of fulfilling professional role obligations regarding educational and patient care responsibilities. In the case of unexpected absences for urgent reasons (e.g., illness), the student must make every effort to notify the clerkship director, his/her administrative assistant, the senior resident, and/or his/her Advisory Dean of their absence, and upon return to the student's responsibilities must discuss the circumstances, including remediation of work missed with the clerkship/elective director. Any other absences are discouraged and must be granted by the clerkship/elective director and Advisory Dean for special circumstances as arranged in advance. No absences should be requested for any experiences less than four weeks in length.

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 interviews while fulfilling academic requirements.

Each required clerkship/course and elective 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.

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 Advisory Dean of this

request. The clerkship director and the Advisory Dean will confer on the request and the final decision is made by the clerkship director. (Effective September 30, 2014)

Completion of Required Experiences in Year of Planned Graduation:

School policy mandates that all required clerkships and subinternships (acting internship) 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.

ELECTIVES

Limitation on Specialty Discipline Electives:

Students may not schedule more than eight (8) weeks of their elective total of 25 weeks over the third and fourth years in a given discipline including any extramural (away) electives. The Double Helix Curriculum 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 Subinternship (acting internship) weeks (those experiences that meet the Subinternship (acting internship) requirement) are not counted in the eight week elective total per discipline. For example, a student completes two weeks of ophthalmology in the third year, completes four weeks away in ophthalmology in fourth year and an additional four weeks of ophthalmology in Rochester. From these ten weeks only eight weeks count towards fulfilling the 25 elective weeks requirement. The additional two weeks will be counted as non-credit. Students are expected to participate fully in and complete all registered electives appearing on their academic program.

International Clinical Experiences Approval Process:

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. Enter all the information requested including a brief description of the experience, the location, dates traveling, and contact information of your international Preceptor. You will need to assign Emily E. Anderson as the faculty sponsor. Any request to complete electives in a country listed on the [travel warning list](#) will be submitted to the Office of Global Engagement for further review before approval is granted. Students approved to conduct international clinical electives must adhere to the existing CACHED guidelines and policies for international student experiences. No credit will be granted retroactively.

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

year three). Information about the required documentation and special scheduling considerations may be obtained from the AAMC's Visiting Student Learning Opportunities (VSLO). VSLO resulted from the merging of the Visiting Student Application Service (VSAS) and the Global Health Learning Opportunities (GHLO) in January 2018. 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 through OCA.

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 Year 3 and 4 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.

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 years 3 and 4 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 scheduled in overlapping dates.

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 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 subinternships (acting internship) in the third and fourth years: Students will not be allowed to drop or add a clerkship or Subinternship (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/Subinternship (acting internship) director and the student's advisory dean.

For all electives in the third and fourth years: 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.

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 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 has a centralized assessment system for the curriculum and faculty teaching. The primary uses of this assessment 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.

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 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 Assistant 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.

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 Mary Jane Dyer 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, spouse'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 them

AAMC Student Questionnaires:

The data collected from AAMC Student Questionnaires (such as the AAMC Matriculating Student Questionnaire (MSQ), 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.

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 who receive Title IV financial aid.

Policy

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 progress requires that a student complete all first year subjects during two full years as a matriculated student. Students must satisfactorily complete the first two years of course work during four calendar years as a matriculated student, and must 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.

In addition to compliance with the ethical and professionalism requirements for URSMD medical students, all candidates for the degree doctor of medicine (M.D.) must complete all graduation requirements, including all required courses, clerkships and electives. The Medical Student Promotions and Review Board (MSPRB) monitor the academic progress of each student during four academic year evaluation meetings.

Students must receive passing (Pass) grades in all courses before being promoted to the next level. 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.

Unless a student is considered by the Senior Associate Dean for Medical Student Education to be a danger to patients or others, he/she may continue to attend classes and clerkships through his/her appeal (see [MSPRB Appeals](#)) of an adverse MSPRB action.

A student may apply to the Dean to withdraw from the School at any time. Subsequent reinstatement (as a first year student or as a student with advance standing) can be made by a decision of the Admissions Committee, after consultation with the MSPRB if the student had 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.

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 result of the satisfactory academic progress (SAP) policy, will be notified in writing via a letter to the URM mailbox and via e-mail to the URM 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 Assistant 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)

GRADUATION REQUIREMENTS:

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.urmc.rochester.edu/education/bursar/medical-student.aspx>.

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). The MSPRB will determine if the mandated course work/independent study will be reported as adverse or disciplinary action in the permanent record and the Medical Student Performance Evaluation.

Graduation Requirements:

Graduation of a student will be recommended by the MSPRB to MedSAC if he/she 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 one month 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. However, their 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 one month 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.

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, with additional requirements:

Attendance at series of monthly seminars, lectures and workshops, throughout the years of training, 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 years 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 years 2 and 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.

For additional information regarding the Academic Research Track (ART) contact:

Robert A. Gross M.D., Ph.D.
Professor of Neurology and of Pharmacology and Physiology
Director, ART
585-275-0698 / robert_gross@urmc.rochester.edu

Honors Fellowship Designation:

Students who have completed a one year fellowship can apply for an Honors Fellowship Designation (the honors designation will provide an adjustment to the student's returning year's financial aid award to lessen the impact of an increase in tuition). To be considered, students must submit the following:

- The honors fellowship application.
- Submit a description of the project and an overview of the accomplishments.
- Submit a letter of support and evaluation from the fellowship sponsor.

The completed application and the required documents should be submitted to the Assistant Dean for Student Affairs Student Services, Box 601 by November 15 of **the year of the completion** of the fellowship. (The Honor Designation Fellowship Form can be found on the Registrar's web with forms and in Blackboard.) An Advisory Committee will review all requests for the honors designation. The applications (application, project overview of accomplishments and the sponsor's letter of evaluation) that are of sufficient merit will be recommended to the MSPRB for the honors designation. (Note: the Director of Financial Aid will determine the number of tuition subsidies available in a given year).

Distinction in Community Health:

The MD with Distinction in Community Health is an option for students who make significant longitudinal contributions to community service, excel in the Community Health Improvement Course (CHIC), 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 announcements, 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 each of the 1st and 2nd year of medical school with an additional 60 hours combined across the 3rd and 4th years, to be completed by November 30th of year 4.
 - b. The Center for Advocacy, Community Health, Education and Diversity (CACHED) office will oversee the tracking of service (SRO) hours for each student's community service experience. Hours must be logged with the CACHED office by the end of each academic year.
 - c. Candidates for Distinction should focus 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 the CHIC Director or other faculty mentor approved by the CHIC Director.

2. Excellence in Community Health Improvement Course (CHIC)

- a. Students who are Candidates for Distinction in Community Health will be permitted to complete and summarize their longitudinal project during the fourth-year, required CHIC course (register for Block I-IV, but NOT Block V) with guidelines provided in the course materials.
- b. Students who are Candidates for Distinction, who have been successful at working on a longitudinal project, will fully participate in the required CHIC didactic learning and community lectures, however experiential learning during CHIC will be geared towards completing, summarizing and disseminating the student's longitudinal work.
- c. CHIC students who are Candidates for Distinction will be expected to complete a comprehensive 10-page paper summarizing the longitudinal project, and give a brief presentation of work to faculty, staff and students.
- d. Candidates for Distinction are required to receive a grade of 'pass' for CHIC and should excel in their CHIC performance, serving as examples for other students in their CHIC block. Evidence of outstanding achievement during CHIC can be included in the student's portfolio through a reference letter from the community partner or through a Letter of Achievement awarded to the top 10% of the class.

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 November 30th of 4th or final year:

- a. View at least three (3) oral presentations of 4th Year CHIC students who are candidates for Distinction for Community Health by end of third year.
- b. Attend (live attendance or digitally) at least four (4) Public Health Grand Rounds presentations.
- c. And one of the following:
 - i. Complete the Community Engaged Research Modules on-line, or
 - ii. Attend a conference/special event related to community health, or
 - iii. Actively join a community-based organization or coalition for a year

Process for Distinction in Community Health

All candidates for the MD with Distinction in Community Health must register to do so (on MedSIS) before December 15th of Year II (for students graduating in 2016 and afterwards). There is no obligation in registering, and registering will give you information for community health learning opportunities, therefore register early.

1. Near the end of each year students who are candidates will be asked to update their portfolio. If candidates have fulfilled the requirements for that year, they will be approved as candidates for the following year and notified.
2. During fourth year, candidates are required to complete CHIC prior to December of their fourth year. During CHIC, candidates will finish their comprehensive paper and disseminate their work in a brief presentation.
3. By November 30 of 4th year, candidates will submit their completed portfolio (with evidence of completion of all requirements, including comprehensive paper) to the Advisory Committee for review (through CHIC Director).

4. 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 candidates selected for the MD with Distinction in Community Health will be informed at commencement. (Students selected for Distinction in Community Service who delay their graduations, will have their Distinction in Community Service 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
Director of Community Health Policy and Education
Director of Community Health Improvement Course
Center for Community Health URMC
Department of Public Health Sciences
585-224-2063
Theresa.Green@URMC.Rochester.edu

Community Health Improvement Resource Staff

Jen VanRy
Course Coordinator
Community Health Improvement Course (CHIC)
Center for Community Health URMC
585-224-2061
Jennifer.Vanry@URMC.Rochester.edu

OME Resources

Adrienne Morgan, PhD
Senior Director, CACHED Office (G-9554)
585-275-7203
Adrienne.Morgan@URMC.Rochester.edu

Emily E. Anderson, Administrative Assistant
585-275-2928
Emily.Anderson@urmc.rochester.edu

Peter Pellett, Secretary IV
585-275-2175
Peter.Pellette@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 Service 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.

NOTE: 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.

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.

NOTE: The Review Process will be completed **before April 1st** of each year.

***The research must be completed during the student's tenure in medical school:**

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.

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. Work submitted to satisfy the Community Health Improvement Course (CHIC) requirement is eligible for consideration for the Distinction in Research designation.

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 in Research* noted at commencement the year they graduate. Therefore, the distinction WILL NOT be included in the Medical Student Performance Evaluation.

MEDICAL STUDENT PERFORMANCE EVALUATION (MSPE/DEAN'S LETTER)

Deadline for Including Clerkship and Subinternship (acting internship) Evaluations in the MSPE:

The deadline for receiving and including clerkship and subinternship (acting internship) evaluations in the MSPE is **September 1st**. Clerkship and subinternship (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:

All URSMD medical students will have an MSPE written summarizing their performance in medical school. 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%).

Formula to determine MSPE Groupings

The formula below will be used by the MSPRB to determine the groupings for the MSPE (and to identify the candidates eligible for AOA consideration). Grades from the Primary Care Clerkship and the core clerkships (medicine, neurology, OBGYN, pediatrics, psychiatry and surgery) 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.

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.

Medical Student Performance Evaluation (MSPE) Groupings for Students Who Have Not Completed the 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 would most likely be in the _____category". The MSPRB determines what that category would most likely have been.

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.

A sealed copy of the original Medical Student Performance Evaluation (MSPE)/Dean's letter will only be sent to the requesting agency with the student's written permission. Copies of MSPE/Dean's Letters will NOT be released or sent to enrolled students or graduates. The School will not amend or change

the final MSPE/Dean's letter, nor honor requests to include updates, add graduation honors/ awards, changes in specialty interest, etc.

If an academic and/or professionalism issue 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 a 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.

Author of MSPE:

Each medical student's MSPE will be written by his/her 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 Assistant 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 Assistant 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. (Effective: March 16, 2016)

Request for Review of the Advisory Dean Prepared MSPE:

By the end of August, 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 Advisory Dean 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 **one week**. No student proposed revisions will be considered or made after the one week deadline. (Amended: March 16, 2016)

A student who has substantive concerns regarding the tone and/or accuracy of his/her MSPE can submit by **September 7**, a written request with the **specific concerns noted**, to the Assistant Dean of Student Affairs. An advisory committee will review the draft MSPE with the noted concerns and if warranted, will amend the MSPE for balance and accuracy. The review 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. (Amended: March 16, 2016)

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.

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. Advisory Deans are not part of the AOA selection committee.

The MSPRB's role in the AOA selection process is to identify up to twenty-five (25) percent of the class as the candidates eligible for AOA **consideration**. **The AOA Selection Committee** makes the **final** decision regarding the students selected (and cannot exceed one sixth of the graduating class).

The AOA results will be posted around **the end of August**.

AOA determination is made by the selection committee based primarily on contributions to research, community service, and/or leadership during the student's time in medical school. The AOA selection committee is given information on any Letters of Achievement received by students in medical school courses. The committee also receives select sections of the MSPE biographical form that indicates student contributions to research, community service, and leadership and additional degrees earned during medical school. Activities and contributions prior to medical school are not taken into consideration by the selection committee.

As noted, up to one sixth of the graduating class is elected to AOA.

MEDICAL SCIENTIST TRAINING PROGRAM STUDENTS (MSTP)

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 we anticipate that most students will remain at or near the top of the class, we recognize that 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 Advisory Deans 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 with academic performance problems will be reviewed by the appropriate bodies in the medical school (Medical Student Promotions and Review Board-MSPRB) and/or by the MD-PhD Internal Advisory Committee. 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 in the MD Student 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 Executive 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. Notably, some modifications are made in the MD curriculum to accommodate these MD-PhD training specific requirements. Details on these requirements and other aspects of MD-PhD training are described in the MD/PhD Student Handbook, which can be accessed at:

<http://www.urmc.rochester.edu/education/md/md-phd/students/handbook-forms.cfm>

Scientific Reasoning in Medicine (SRM)

The Scientific Reasoning in Medicine (SRM) course consists of a two-part journal club held twice per month throughout the academic 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).

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

(Effective March 11, 2009)

To be consistent with the URMC/Strong Memorial Hospital's policy, 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, the hospital or a member of its medical staff 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 for being evaluated on the educational content and must demonstrate (via means other than the actual procedures of the area of objection) the expected level of competence. The URSMD is not responsible for providing tutoring and/or academic support to assist a student with meeting the academic standards.

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 conscientious objection
2. Identify and explain the reasoning in support of the conscientious objection
3. Indicate the specific (non-emergency) educational experiences he/she 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)
Year II	July 15

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 determine the reasonableness of the anticipated non participation. The student may appeal an adverse review committee decision to the MSPRB, whose decision will be final.

Strong Memorial Hospital Policy:

No employee of Strong Memorial Hospital or member of its medical staff, who has previously informed the hospital of their decision not to participate, shall be required by the hospital or a member of its medical staff to participate in any health care or research activity which is contrary to their religious beliefs or moral convictions, except in emergency situations. (This includes, but is not limited to, abortions and sterilization procedures.)

In cases where such conscientious objection causes operational or service disruption, the hospital will make reasonable attempts to reassign the employee or staff member to avoid such disruptions.

DESCRIPTION

1. Any member employee of the Strong Memorial Hospital or member of its medical or nursing staff who does not wish to give advice with respect to, or participate in, any induced termination of pregnancy, sterilization procedure, or any other specific health care or research activity should inform their department, upon appointment if possible.
2. Any employee of Strong Memorial Hospital or member of its medical staff may refuse to perform or be involved in a patient handling or movement that the individual reasonably believes in good faith will expose them or a patient to an unacceptable risk of injury. Such process will require the individual make a good faith effort to ensure patient safety and bring the matter to the attention of the area supervisor in a timely manner. An individual who reasonably in good faith follows this shall not be subject to disciplinary action by the Hospital for the refusal to perform or be involved in the patient handling or movement.
3. However, to fulfill the hospital's legal and ethical obligation to provide high quality care at all times, staff must agree to provide care in any emergency circumstances, particularly in situations which have a high probability of being or are life-threatening.
4. Departments may have more specific policies that must be followed by staff members in those departments.

References:

10 NYCRR §405.3

U.S. Department of Health and Human Services, Title 42, §300a-7.

SMH Policy 9.4, "Abortion"

Personnel Policy Manual

Department of Obstetrics/Gynecology Policy Manual

13.6 History

Ann Ottman: Assistant Quality Officer 3/8/2017
Ann Ottman: Assistant Quality Officer 2/22/2017

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) according to the process established by the medical school.

The student’s formal appeal must be received in writing by the Assistant 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.

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 coverage limits are \$3,000,000 per claim/no annual aggregate under a claims-made policy form modified in include an Extended Reporting Endorsement (aka “Tail Coverage”).

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 of the UR Medical School, are not covered under the University’s program.

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 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.

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."

If the requested accommodations in effect require or result in students not participating in required educational experiences, the MSPRB will be convened to evaluate 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.

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)
Year II	July 15
Years III and IV	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 the requested accommodations in effect require or result in students not participating in required educational experiences, the MSPRB may be convened to evaluate 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.

Students are also encouraged to discuss their anticipated approved religious observance absences with their course and/or clerkship directors.

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 Assistant Dean for Student Affairs must receive the student's formal appeal in writing 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 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 Committee) 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 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 will be 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. Terms of office will be for four years, with appointments staggered to preserve continuity. MedSAC may appoint members to additional terms. (Updated January 8, 2015)

MSPRB Alternate Status (Effective April 2, 2007)

- 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.
3. The MSPRB will be chaired and co-chaired by two faculty members; one will have his/her 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 and to report its decisions to MedSAC. The Senior Associate Dean for Medical Student Education, the Assistant 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. All 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. The assumption is all students will be discussed at each meeting.
5. The MSPRB will be staffed by the Assistant 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 Assistant Dean for Medical Education/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 should be notified when remediation has been successfully completed or monitoring ended.

Authority

1. 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.
2. Any unprofessional conduct (such as violations of the Expectations of Medical Students ([see student expectations](#))) may 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.

Medical Student Promotions and Review Board Voting Members:

Robert Swantz, M.D., Chair
Professor, Pediatrics

Robert S. Freeman, Ph.D.
Professor of Pharmacology & Physiology

Linda Chaudron, M.D.
Professor of Psychiatry & Ob/Gyn

Benedict F. DiGiovanni, M.D.
Professor, Orthopaedics

Lynn Liu, M.D.
Associate Professor, Neurology, Pediatrics &
Anesthesia

Kerry O'Banion M.D., Ph.D.
Professor, Neurobiology & Anatomy

Linda Spillane, M.D.
Professor of Emergency Medicine

MSPRB Alternate status (Effective April 2, 2007)

*Suzanne Stevens, Ph.D.,
Associate Professor of Neurobiology & Anatomy

*The alternate may attend all MSPRB meetings and participate in all deliberations, but will only have voting privileges when his/her presence is counted towards a quorum

Ex-officio Members:

Kathryn Castle, PhD	Assistant Dean for Student Affairs Associate Professor, Psychiatry
Kathleen Kelly, JD	School of Medicine and Dentistry Registrar
David R. Lambert, M.D.	Senior Associate Dean for Medical Student Education Professor of Medicine
Flavia Nobay, MD	The Associate Dean for Admissions Associate Professor, Emergency Medicine

The Advisory Deans:

David Kaufman, MD	Professor of Surgery
Cheryl Kodjo, M.D.	Associate Professor, Pediatric Adolescent Medicine
Erik Rueckmann, M.D., MPH	Assistant Professor of Emergency Medicine
Elizabeth Naumburg, M.D.	Professor of Family Medicine

Advisor:

Adrienne Morgan, Ph.D.	Assistant Dean for Medical Education Diversity and Inclusion Assistant Professor, Medical Humanities and Bioethics
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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, however, will be held within a month of the end of each semester, primarily to consider the performance of all first and second year students. Three meetings will occur annually, primarily for consideration of the performance of clinical students. Appropriate course and clerkship directors will be notified of the time and place of these meetings in advance of their occurrence.

The performance of all students who have received a marginal 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 will also be discussed.

MSPRB Review of Academic Performance:

If a student's performance is to be reviewed by the MSPRB, his/her Advisory Dean will be notified by the Assistant Dean for Medical Education/Student Affairs prior to the meeting of the MSPRB to allow

time to contact the course director and/or student to explain any mitigating or extenuating circumstances surrounding the grade.

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. The Assistant Dean for Student Affairs will distribute a summary of actions taken at the meeting to MSPRB members, the Senior Associate Dean for Medical Student Education, the Registrar and the Advisory Deans. Custody of these official actions of the MSPRB will reside with the Assistant 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; or e) recommending disciplinary action (e.g., reprimand, probation, mandated leave, etc.). 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. The requirement of remedial work is considered an adverse action and will be reported in the MSPE.

MSPRB Review of USMLE Performance:

The MSPRB will monitor students' performance on USMLE Step 1 and Step 2 CK and Step 2 CS. 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 school policies. (See [USMLE POLICY](#))

Appeals Process:

Decisions of the MSPRB requiring a student to repeat an academic year, dismissing a student or requiring a leaves of a year or more 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 [Course Grade Appeals Policy](#), [Clerkship Subl Grade Appeals Policy](#).) MSPRB decisions may be appealed by students to the Medical School Advisory Committee (MedSAC) Appeals Board (MAB). 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. It is intended that the MAB offer an independent opinion about the merits of the case. It will reconsider the entire case and arrive at its own decision. The student's formal appeal must be received in writing by the Assistant Dean for Student Affairs within five business days of the date of the MSPRB's dismissal or required leave letter. The student will write a formal appeal, stating the reasons for appeal and outlining an alternative plan of action that he/she wishes to be considered. The appearance before the MAB shall occur within forty-five calendar days of the initial 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 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 to provide the advocate's name, affiliation and contact information. In addition, if the student would like the MedSAC Appeals Board 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.

The MedSAC Appeals Board 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. (Revised December 6, 2005)

Five designated and/or alternate members of the MAB should be present, and all decisions should receive a majority vote. Formal rules of evidence do not apply. Any material considered relevant by the MedSAC 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 Assistant 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 Assistant Dean for Student Affairs, and the student's Advisory Dean may sit at their discretion as ex officio, non-voting members. Custody of the record of the official actions of the MAB will reside with the Assistant Dean for Student Affairs.

MedSAC Appeals Board:

Adverse decisions of the MAB may be further appealed within five business days of the date of the MAB's decision letter to the Dean of the Medical School, whose decision is final. The appeal must be in writing, 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 deems relevant in reaching his/her decision and may, at his/her discretion, meet with the student (without the student's attorney). (Effective July 1, 2016)

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 MedSAC Appeals Board 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 MedSAC Appeals Board also retain the right to meet with the student before deciding if and how the new information will impact on a prior decision. (Effective December 6, 2005)

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)

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 also poses some emotional challenges. Students practice limited parts of the physical exam on one another in Introduction to Clinical Medicine (ICM). You may feel uncomfortable about physically exposing yourself to another individual. While examination is almost always facilitated by such exposure, you should never feel pressured to do so; instead, you should do what feels right for you. Just as we should never pressure a patient to remove clothing for an exam, we should never feel obliged to consent to similar pressures for ourselves. To dispel any notions to the contrary, please be assured that 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.

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

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 a fraction of a year or for one or two years. 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 Leave of Absence (LOA):

A Temporary LOA 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 LOA 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 leave of absence will have on his/her 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 leave of absence could have on his/her graduation date with the Advisory Dean. Finally, it is the student's responsibility to discuss the affect that the temporary leave of absence could have on financial aid with the SMD Financial Aid Office.

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

If a student decides to withdraw from medical school at any point during Temporary LOA 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 LOA:

1. The student must meet with their Advisory Dean to discuss the need for the Temporary LOA prior to dis-engaging from the medical school.
2. If a decision is made to go forward with the Temporary LOA, the student must meet with the SMD Bursar and the Director of Financial Aid to gain an understanding of the impact that a Temporary of Official Leave of Absence (LOA) (Temporary LOA 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 LOA.

3. To finalize the Temporary LOA, the student must secure the signatures of their Advisory Dean on the **Temporary Leave of Absence Request Form for Medical Students**, which can be obtained by the student or his/her 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.

Mandatory Leave Policy for Step 1 Failure or Delayed Completion of Step 1:

Additionally, if a student is placed on a mandatory LOA due to failing or not taking STEP 1 before August 1st prior to beginning Year III, the student cannot return (or at minimum, cannot qualify for financial aid) until the start of the term following their successful passing of STEP 1.

For example:

- A student is placed on mandatory LOA on August 1, he takes/passes STEP 1 on October 21st, he cannot return (or cannot qualify for financial aid) until January 1st.
- A student is placed on mandatory LOA on August 1, she takes/passes STEP 1 on April 21st, she cannot return (or cannot qualify for financial aid) until July 1st

In the case where a student will not return until the following academic term, tuition will be adjusted (prorated) to reflect the amount of time that the student was enrolled for the respective term. Please note that students are required to pay for eight (8) full semesters of medical school tuition. Affected students will meet with the Bursar to discuss their individual circumstances. (Updated: 8/1/2017)

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 counseling) 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 Assistant 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. Failing this proper notification or meeting of conditions, the student will lose his/her 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 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)

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.

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 Year 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, 2014 Bulletin of Information

Students and Graduates:

For 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 <https://www.usmle.org/bulletin/>, 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 CK and Step 2 CS 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. Eligible applicants for Step 2 CS will be assigned a 12-month eligibility period starting on the date their registration is entered into the Step 2 CS scheduling system.

<http://www.nbme.org/Students/usmle.html>

University of Rochester USMLE STEP 1 Policy:

(See policy below for MSTP Students)

All University of Rochester medical students are required to take USMLE Step 1 **before the first day of Year 3** following Year 2 to progress into Year 3 or Student Fellowship. Students in the MD program who have not taken USMLE Step 1 by the first day of Year 3 will be enrolled in an independent study non-credit bearing elective that will end on July 31st. A student considering a fellowship must have a finalized and approved fellowship with all required information completed before August 1st. Any student who has not completed Step 1 or enrolled in a student fellowship will be placed on a mandatory leave of absence.

NOTE: A mandatory Leave of Absence is an action reported in the MSPE and to outside residency and accrediting bodies.

Students registered in the third year of the curriculum who do not pass Step 1 will be allowed to complete the elective or clerkship that they are currently enrolled, but will not be allowed to complete additional credit bearing clinical and/or elective experiences until STEP 1 has been passed. Students on approved fellowship leave who do not pass STEP 1 will be allowed to sustain their fellowship leave status. All students, regardless of whether they are in third year or a fellowship year will have 12 months from the time of initially taking Step 1 or a total of three attempts whichever occurs first to pass. If they are not successful, they will face a dismissal recommendation. The dismissal recommendation may be appealed via the existing appeals process.

University of Rochester USMLE STEP 2 (CK and CS) Policy:

USMLE STEP 2 (CK and CS) must be taken and *passed (effective for the class of 2021 forward)* by **February 1** following Year 3.

The results of Step 1, Step 2 CK, and Step 2 CS must be released to the school. The Medical Student Promotions and Review Board will review all USMLE performance.

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, Step 2 CK, and Step 2 CS are required parts of the academic program, the examination fees and related travel costs for Step 2 CS have been included in the Cost of Attendance (COA) for Years 2 and 4. (Effective May 11, 2004, Updated: February 2, 2009, October 24, 2017)

Medical Scientist Training Program (MSTP) USMLE Policy:

(Effective for MSTP Students who matriculate in 2010 and forward)

The University of Rochester requires MSTP students to take and pass Step 1, Step 2 CK, and Step 2 CS of the USMLE. MSTP students are required to take USMLE Step 1 before **June 1st** following Year 2. Step 2 CK and Step 2 CS must be taken by **February 1** following the completion of the Year III clerkships. MSTP students who have not taken and passed the USMLE steps by the deadlines will be dismissed from the MSTP.

The results of Step 1, Step 2 CK, and Step 2 CS must be released to the school. The MSTP and the Medical Student Promotions and Review Board will review all USMLE performance.

Because passing USMLE Step 1, Step 2 CK, and Step 2 CS are requirements for the MSTP program, the examination fees and related travel costs for Step 2 CS have been included in the MSTP Cost of Attendance (COA) for Years 2 and 4 and thus will be paid by the student. (Effective December 2009, Updated: October 24, 2017, September 5, 2018)

DOCUMENTATION REQUESTS

Document Release Policies:

Letter of Verification:

Signed by the Registrar and sealed on U of R stationery.

Transcripts:

All requesting agencies will receive an official copy. Only unofficial transcripts will be sent directly to graduates or current students.

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.

NOTE: Except where noted in the policy, the school does not amend or change the final version of the 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 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 five (5) business days. There is not a charge for transcripts.

NOTE: Requests for verification of enrollment, transcripts, and/or MSPE, will not be honored for enrolled students who have been administratively suspended.

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.

NOTE: Requests for verification, transcripts, MSPE, certifying and/or replacing diplomas will not be honored for graduates who have administrative holds, or who are in default on their student loans.

All documents sent to requesting agencies have the Registrar's signature and school seal. Graduates are not charged an additional fee for transcripts or graduate requests.

Certifying and/or Replacing Diplomas:

Certifying Diplomas:

Each graduate is given the only original diploma. Before the Registrar's Office can certify a diploma, make an 8"x11" copy of the diploma take **the copy and the original diploma** to a notary public and have the notary certify that the copy(ies) is a true likeness of the original diploma. Complete and sign the request form and submit along with the 8"x11" notarized copy of the diploma to the Registrar's Office.

Replacing Diplomas:

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

- Legal and/or court-ordered change in name
- 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) that includes his/her signature and a dated color passport photo that has been taken within 30 days of the request.

Replacement Diploma Because of a Name Change:

If the individual is requesting a replacement diploma because of a name change, the school will require evidence such as a notarized copy of a marriage certificate or court order.

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

NOTIFICATION AND ROLE IF THERE IS A STRONG HOSPITAL BIOLOGICAL EVENT

Notification of Medical Students:

In the event of a biological incident at Strong Memorial Hospital, an e-mail will be sent to Dr. David Lambert, Dr. Kathryn Castle, Diane Frank, Director of Office for Medical Education and their administrative support contacts (Jane Risolo). Sarah Peyre, EdD, the Director of Institute of Innovative Education (IIE) should receive an e-mail.

OME Student Contact Group E-mail:

David.Lambert@URMC.Rochester.edu

Kathryn.Castle@urmc.rochester.edu

Diane.Frank@urmc.rochester.edu

Jane.Risolo@urmc.rochester.edu

Students will be notified of instructions through overhead announcements in the medical school instruction areas and by a group e-mail. 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 3rd and 4th year 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 Strong'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 Strong Memorial Hospital, 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.

PANDEMIC EMERGENCY PREPAREDNESS PLANS

University of Rochester School of Medicine and Dentistry, The Center for Advocacy, Community Health, Education and Diversity and The Offices of Graduate Education

URSMD Matriculated Medical and Graduate Students Traveling Internationally or Studying in Rochester from International Countries:

There is heightened concern about H5N1, a highly pathogenic avian flu virus. Although the virus has crossed species other than birds there have been only a few cases in which human-to-human transmission is believed to have occurred. Whether this virus evolves into the next pandemic or not, emergency preparedness planning is essential. If the virus gains the sustainable ability to transmit from human to human the public health strategy would focus on slowing the spread.

Mandatory Pre-Departure Orientation and Policies and Procedures:

- Prior to departure, students must participate in a course, seminar series, or supervised self-study for cultural orientation and preparation for the trip.
- Gather information concerning any political problems or health hazards that may place them at risk by consulting the State Department and Centers for Disease Control and report that information to the Director of Community Health, International Medicine and Research Programs. The Director of Community Health, International Medicine and Research Programs, the Senior Associate Dean for Medical Student Education, and the International Medicine Faculty Advisory Committee have final discretion over travel in the event the State Department or the CDC issues a travel advisory for the country to which you are traveling.
- Contact University Health Service to obtain medical travel advice and immunizations appropriate for the country to which travel is planned. Review www.cdc.gov/travel for travel information.
- Receive exemption or approval from the University's Research Subject and Review Board.
- Obtain MEDEX ((Medical Evacuation and Repatriation of Remains insurance) from the CACHED Office before departure.
- Designate persons both in the foreign country and in the United States who may be contacted in event of an emergency.
- Register on-line with the U.S. Embassy prior to departure to the foreign destination. Proof of pre-registration must be provided to representatives in CACHED and OGE

Preparedness and Communications for Matriculated URSMD Medical and Graduate Students:

Preparedness

- Personal infection control measures: frequent hand washing (carry hand gel), cough hygiene (consider bringing a face mask).
- Avoid poultry markets and handling raw meat
- Medications- have adequate supply of your own meds
- Influenza vaccine- obtain when available
- More information: www.pandemicflu.gov
- Consult the SMD (www.urmc.rochester.edu/smd) and student portal websites for the latest information regarding the University's pandemic emergency plan. The UHS web site will also have information (www.rochester.edu/uhs). In addition, students should contact the American embassy in the host country for additional information and advice.
- Students will be tracked through the CACHED office and OGE regarding their status and to provide updates regarding the emergency plan.

Students in a location of a current outbreak must observe the existing health care precautions and quarantine plans established by the host country. Students should access the SMD or student portal websites for current updates.

Students returning to the United States from a country undergoing a current outbreak where the quarantine has been lifted will not be permitted reentry into the University community until cleared by University Health Service.

UR students traveling abroad will be advised to wait until the pandemic has passed and the country has lifted the quarantine before attempting to travel to the United States. In case of a widespread outbreak (like SARS, Ebola), monitoring will be conducted at airports for persons who are ill. The affected country or region may declare a health emergency and the policies in-country would determine permitted travel options. Policy makers in the US will determine whether those arriving from affected countries will require quarantine if not ill at the time of entry. Students can receive this information through the University Health Services Office (UHS) at www.rochester.edu/uhs or by contacting representatives in CACHED (adrienne_morgan@urmc.rochester.edu) or OGE (tracy_pezzimenti@urmc.rochester.edu). MEDEX (Medical Evacuation and Repatriation of Remains insurance) can be used to transport persons within the guidelines outlined in the policy held by the University. Please note: Students with University-sponsored Aetna health insurance have coverage for both emergency and hospital stay costs during periods they are away from the University, according to the policy benefit description. Students should reference <https://www.aetnastudenthealth.com/students/student-connection.aspx?GroupID=474948> for the current description of benefits. Generally, non-emergency visits to doctor's offices are the responsibility of the student.

PRIVACY AND ACCESS TO ACADEMIC RECORDS

Family Educational Rights and Privacy Act

Annual Notice to Students:

The University of Rochester complies fully with the provisions of the Family Educational Rights and Privacy Act (FERPA), 20 U.S.C. 1232g. Under FERPA students have, with certain limited exceptions, the right to inspect and review their educational records and to request the amendment of their records to ensure that they are not inaccurate, misleading, or otherwise in violation of the student's privacy or other rights. Requests to inspect or review records should be addressed to the registrar, or to the appropriate administrator responsible for the record and will be honored within 45 days. Any student questioning the accuracy of any record may state his or her objection in writing to the University administrator responsible for the record, who will notify the student of his or her decision within 45 days of receiving the objection. A student dissatisfied with the administrator's decision may request a hearing pursuant to federal regulations at 34 C.F.R. Part 99. Students concerned with the University's compliance with FERPA have the right to file complaints with the U.S. Department of Education's Family Compliance Office.

FERPA further requires, again with certain limited exceptions, that the student's consent must be obtained before disclosing any personally identifiable information in the student's education records. One such exception is disclosure to parents of dependent students. Another exception is disclosure to school officials with legitimate educational interests, on a "need-to-know" basis, as determined by the administrator responsible for the file. A "school official" includes anyone employed by the University in an administrative, supervisory, academic, research, or support staff position (including law enforcement

unit personnel and health staff); any person or company acting on behalf of the University (such as an attorney, auditor, or collection agent); any member of the Board of Trustees or other governance/advisory body; and any student serving on an official committee, such as a disciplinary or grievance committee, or assisting another school official in performing his or her tasks. A school official has a legitimate educational interest if the official needs to review an education record in order to fulfill his or her professional responsibility. Other exceptions are described in the FERPA statute at 20 U.S.C. 1232g and regulations at 34 C.F.R. Part 99.

Directory Information:

The University considers the following to be directory information: name, campus address, e-mail address, home address, telephone number, date and place of birth, academic fields of study, current enrollment (full or part time), dates of attendance, photographs, participation in recognized activities and sports, degrees and awards, weight and height of athletic team members, previous educational agencies or institutions attended, and other similar information. The University may publicize or respond to requests for such information at its discretion. However, the use of the records for commercial or political purposes is prohibited unless approved by the appropriate dean.

Currently enrolled students may request that directory information be withheld from disclosure by making a request, in writing, to the appropriate registrar. The University assumes that failure on the part of the student to specifically request the withholding of any directory information indicates approval of disclosure.

The SMD Medical Student Desk Reference (Face Book) is made available to all medical students, faculty, and staff electronically and in hard copy. The information that will be listed for all medical students includes: name, picture, Box #, E-Mail address, pager number, student type, and Advisory Dean. In addition, the school will release and publish the NRMP results (residency placement and specialty) on all students/alumni.

The University also publishes a student directory, that contains the names and Medical Center Post Office Box addresses of medical students.

Faculty and Administration Access to Medical Student's Files

Any requests for information must contain a written consent/release by the student with the specific information indicated. Most often it is a transcript. Since students have access to their academic information in MedSIS, they are able to directly provide some information to others at their discretion. Under no other circumstances are individuals other than those designated earlier allowed access to a medical student's file.

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

Any paper files (AMCAS application, verification of identity) are in locked cabinets in a secure room in the Registrar's Office. Access to this information is limited to Advisory Deans, the Senior Associate Dean for Medical Student Education and the Assistant Dean for Student Affairs as well as the Registrar and Assistant Registrar.

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

The medical school follows the Family Educational Rights and Privacy Act and students are notified annually about this. (Effective May 1, 2015)

SMOKE FREE INSIDE AND OUT

As an institution, which seeks to understand and find cures for disease, educates the physicians of tomorrow, and provides care to tens of thousands of people from the Finger Lakes region and beyond, it is our wish that all individuals refrain from smoking and other consumption of tobacco products while on our campus. However, we recognize that smoking is an addiction and have developed practical solutions to protect the safety of those who must smoke and those affected by the smoking of others.

The University of Rochester Medical Center complies with state laws which prohibit smoking on hospital properties. To ensure that patients, visitors and employees do not encounter second-hand smoke at our building entrances, smoking is limited to [three outposts](#) located on non-hospital properties, away from public entrances. These outposts are intended provide a safe alternative to crossing busy streets. Employees, students and visitors are prohibited from smoking in neighborhoods adjacent to the Medical Center.

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 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 in mid-May each year. 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."

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 Dr. David R. Lambert, 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

CENTER FOR ADVOCACY, COMMUNITY HEALTH, EDUCATION AND DIVERSITY (CACHED)

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 Center for Community Health, Education, and Diversity (CACHED) 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. CACHED

serves as a resource to bridge URSMD with local, national, and international communities. The goals of CACHED 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 determinants of health (i.e. Speaker's Bureaus and student groups such as SNMA, APAMSA, and Spectrum)

Senior Director

Adrienne Morgan, PhD

Assistant Dean for Medical Education, Diversity and Inclusion

omecached@urmc.rochester.edu

COMMUNITY OUTREACH: STUDENTS OF ROCHESTER OUTREACH (SRO)

Students of Rochester Outreach's (SRO) primary goal is to provide medical, graduate and nursing students the opportunity to have hands-on experiences with groups that are economically underserved and disadvantaged. The emphasis at all sites is to establish relationships with agency clients and to develop an appreciation for the social and cultural dimensions of health through attentive, compassionate listening. All student volunteers must register for SRO500 on MedSIS.

The outcomes for the program are as follows:

- Understand the social, political and economic determinants of health and disease in our 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 activists
- Serve the community

Students should work with an agency or URSMD group that matches their interests and professional goals. There are several SRO groups run by URSMD students through the CACHED office. Every year in September, CACHED hosts an SRO fair where students can learn about all the groups and sign up to volunteer. For a full list of URSMD run SRO groups, please contact omecached@urmc.rochester.edu. To receive acknowledgment for your SRO experience, you must volunteer a minimum of 20 hours per year. Students with under 20 hours of volunteer time will still be documented. Students interested in pursuing the longitudinal "**Distinction in Community Health**" designation on your MD diploma, **must volunteer a minimum of 140 hours** across the four years of medical school. For full details on receiving "Distinction in Community Health" see [distinction in community health](#).

STUDENT RESEARCH

Student Research:

The Center for Advocacy, Community Health, Education and Diversity (CACHED) 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 slots is

dependent on funding availability year-by-year. The CACHED office disseminates information about available applications and deadline information in the fall.

Award recipients can receive a maximum stipend of \$1500 per month. These funds will be awarded in conjunction with other sources of financial support, such as department support or federal work-study to total from all sources \$1,500 per month. Consequently, only project proposals without other external sources of funding will be considered; unusual circumstances will need to be described and documented in the mentor's letter of support. Students completing research enrichment experiences are covered under the U of R Medical School's malpractice insurance policy.

Student can apply for the following fellowships:

- Summer
 - Babigian Fellowship in Psychiatry
 - Basic Science, Clinical Translational Fellowship
 - Community Outreach Fellowship
 - E. Cowles Andrus Summer Fellowship
 - International Medicine Fellowship
 - Medical Humanities Fellowship
 - Robert Caldwell Fellowship
 - Schmitt Program on Integrative Research
- Year-Out
 - Basic Science, Clinical Translational Fellowship
 - Clinical and Translational Science Award (CTSA)
 - David Hamilton Smith Award
 - Hawkins Pathology Fellowship
 - International Medicine Fellowship
 - Medical Humanities Fellowship

Applications 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.

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 Abstract Journal* and present a medical poster at the Annual Medical Student Poster Presentation.

INTERNATIONAL MEDICINE PROGRAMS

International Clinical Electives/Travel:

URSMD has exchange contracts with five international institutions, through CACHED, in Peru, Spain, South Korea, Taiwan and Poland. 3rd and 4th year 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 \$100 and \$200 per week are associated with the Taiwan and Spain institutions.

Applications are submitted to the CACHED 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, CACHED 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, CACHED connects the student and institution to continue the process.

URMD students are also able to set up clinical electives or international travel outside the exchange program on their own.

All students participating in international electives/travel MUST adhere to the travel policy AND register for INM750.

University of Rochester School of Medicine and Dentistry International Medicine Travel Policy

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 travel by medical students in support of that mission. 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.

Travel to countries listed on the [US State Department Travel Warning list](#) will be reviewed and evaluated on a case-by-case basis by the University's Travel Review Committee (TRC) to determine the level of risk. All students who have plans to travel to any countries on the US State Department Travel Warning list are required to submit their travel plans to the CACHED Office for review by the TRC committee **twelve weeks (three months)** before departure. Please contact the CACHED Office to receive the Request to Travel to a Department of State Travel Warning Destination Form.

Students are responsible for carefully following all State Department Alerts and Warnings regardless of whether or not these alerts and warnings fall short of restricting student travel to the country. For example, an alert might warn against travel to specific parts of the country or highlight the dangers of undertaking particular activities in the country. Students are expected **to monitor such warnings and to take appropriate precautions, avoiding any specified areas or activities.**

Two weeks before departing for an international elective/travel, students are required to have all necessary paperwork completed and have provided copies to the CACHED office. 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

Verification of Ability to Meet SMD Technical Standards:

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. 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.

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.

April, 1997 Amended March 2006, Amended July 2012

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.

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 Kathryn Castle, Assistant Dean for Student Affairs.

(April, 1997; Amended March 2006, Amended July 2012, September 2018)

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 certification card by December 30, of his or her 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 the Registrar's Office 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://www.urmc.rochester.edu/institute-innovative-education/center-experiential-learning/educational-resources/emergency-medical-education.aspx>

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/>

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****

- 1) **WASH OR IRRIGATE IMMEDIATELY IF EXPOSED TO BLOOD OR BODY FLUIDS**
 - Intact skin: wash with soap and water.
 - 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.

- 2) **REPORT IMMEDIATELY to UHS by calling 585-275-2662 including nights/weekends/holidays.**

During business hours speak with a receptionist who will transfer you to a Registered Nurse at the Medical Center UHS. (Don't leave a voice mail)

After hours and holidays, when you call 585-275-2662 hold for an operator and provide the following information:

- Your name
- Date of birth
- Phone number
- and that it is an exposure

The operator will then page the on call physician. If the MD doesn't respond within 20 minutes, call back.

- 3) EXPOSURE AT SMH
See instructions in #2
- 4) EXPOSURE AT AFFILIATED SITES

Students must notify UHS (**585-275-2662**) ASAP to coordinate care. If possible, the medical student should be counseled by the UHS MD or RN before any initial treatment is done at an affiliated site. Students should discuss any exposure with the hospital's employee health office, their instructor, and the infection control office in the institution where the incident occurred. The affiliated hospital will be responsible to test the source patient.

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.

Employee Health at Local Hospitals:

Highland Hospital
Employee Health: 585-341-8017
After hours: contact nurse supervisor

Monroe Community Hospital
Employee Health: 585-760-6208
After hours: contact nurse supervisor

Rochester General Hospital
Employee Health: 585-338-4026
After hours: contact nurse supervisor

Unity Health System
Employee Health: 585-723-7880
After hours: contact nurse supervisor

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 Center for Experiential Learning (CEL):

<http://www.urmc.rochester.edu/center-experiential-learning/cme/Types-of-Activities/infection-control.aspx>

- Create a profile (*use your URMC email*) and read through the material.
- Enter your credit card information to pay the fee
- Complete the post-test and refer back to any content as necessary. Passing Grade is 80% or higher.

- Receive your certification of completion and print a copy; bring the copy and provide the documentation to the Registrar's office to update your compliance records.
- This certification is valid for a period of four (4) years.

MANDATORY URMIC ANNUAL IN-SERVICE EDUCATION COMPETENCY EXAM

The annual URMIC Mandatory in-service 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 Assistant 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 Assistant 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, Assistant Dean for Student Affairs, or the appropriate clerkship director.

Enforcement of Policy

A. Referral

A student whose performance is believed to be impaired by substance abuse or suspected substance abuse will be referred by his/her 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 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 Assistant 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 abstinence 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 Year 1 or Year 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 which 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 URM C 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 CEL website <http://www.urmc.rochester.edu/center-experiential-learning/cme/Types-of-Activities/infection-control.aspx>
- Mandatory child abuse lecture given during first year in Skills in Complete Patient Evaluation (SCOPE)
- Psychiatry Clerkship - Child Abuse Registry – 3rd Year 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 - 1st Year Orientation
- 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 – 1st Year
- NYS Infection Prevention – 1st Year, good for four years – completed through CEL
- AAMC Questionnaires

- Matriculating Student Questionnaire (MSQ) 1st Year Orientation
- The Graduating Student Questionnaire (GSQ) at the start of the Process of Discovery
- Second and fourth year exit surveys on curriculum and support services
- Faculty/course evaluations – on going
- CPR – must provide evidence of certification by December 30 of Year 1 and updates when certification expires – completed through CEL
- eRecord (electronic medical records)
 - Ambulatory modules completed in December of first year
 - Inpatient modules completed in April of second year
- eView (Radiology) – 2nd year
- 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 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: URM 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/>

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.

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

Patricia Samuelson
Director of Admissions
Room G-9536 / Tel: 585-275-4542

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

Mary Staie
Interview Coordinator/Receptionist
Room – G-9540 / 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

Elizabeth Naumburg, M.D.
Professor, Family Medicine
SSC, Room G-7644 / Tel: 585-275-4537

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

Bursar’s Office:

Billing and emergency loans.

Peg Ehmann
Bursar
SSC, Room G-7644 / Tel. 585-275-4672

Nancy Ducci
Student Account Representative
SSC, Room G-7644 / Tel: 585-275-4672

Center for Advocacy, Community Health, Education and Diversity (CACHED):

Community Outreach, International Health, Research Programs and Diversity Programs (Summer Research Fellowship Program (SURF), Science and Technology Entry Program (STEP), Martin Luther King Day of Learning.

Adrienne Morgan, Ph.D.
Senior Director
Room G-9552 / Tel: 585-275-4172

Emily E. Anderson
Administrative Assistant
Room – G-9554 / Tel: 585-275-2928

Peter Pellett
Secretary IV
Room G-9546 / Tel: 585-275-2175

The Center for Experiential Learning (CEL):

CEL is a one-stop educational support center for faculty, staff, and students. The CEL strives to improve the way professionals are taught through innovative educational programs and services. Those services include ACCME certification, operational support for the anatomical gift program, conferences and events planning, simulation, educational space scheduling and the standardized patient program.

The CEL is located in Rm. 2-7515, and can be reached by phone at 585-275-7666 or 585-275-4392. Hours for the CEL are Monday thru Friday, 7:30 am – 5:00 pm

Sarah Peyre, EdD.
Director

<http://www.urmc.rochester.edu/center-experiential-learning.aspx>

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
Director, Assessment
Room G-7812 / Tel: 585-275-8570

Andria Mutrie, MA
Director of Curriculum
Room G-7522 / Tel: 585-275-0827

TBD
Information Analyst
Suite G-7522 / Tel: 585-275-4577

Erika Hansen
Secretary IV
G-7522 / Tel: 585-275-0308

Katie Libby
Administrative Assistant
G-7522 / Tel: 585-276-6510

Elaine Morgillo
Administrative Assistant
G-7522 / Tel: 585-275-4521

Elizabeth Mintz
Primary Care Clerkship Coordinator/AA
G-7522 / Tel: 585-273-1615

Tressa Newton
Administrative Assistant
G-7522 / Tel: 585-275-7202

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

TBD
Financial Aid Advisor
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 / Tel: 585-275-5185

Marc Halterman, M.D., Ph.D.
Associate Director / Tel: 585-273-1335

Catherine Senecal-Rice
Program Administrator
Room: G-9548 / Tel: 585-275-8721

Alysha Taggart
Administrative Assistant
G-9547 / Tel: 585-275-9777

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.

Kathryn Castle, PhD
Assistant Dean for Student Affairs
SSC, Room G-7644
Tel: 585-275-4537

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, the Bursar, 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

Jane H. Risolo
Administrative Assistant
SSC, Room G-7644 / 585-275-5910

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

Penny Sarsfield
Administrative Assistant
SSC, Room G-7644 / Tel: 585-275-7245

Cassandra Womack-Goolsby
Secretary III
SSC, Room G-7644 / Tel: 585-275-4541

FACILITIES FOR STUDENTS

Lockers:

All students are assigned locks and lockers during prior to matriculation by the Fitness and Wellness Center. If there are any problems with the lock or lockers, please contact Heather VanOrden at 585-275-2706.

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.

On-Call Room:

During the third and fourth years, students have access to the On-Call Rooms located on the first floor. The men's on-call room is 1-5506 and the women's is 1-5530. You will need your student ID for card swipe access. The On-Call Room should remain locked at all times for security reasons.

Student Lounge (Room G-7647):

Television, recreational facilities, telephones, 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.

A key for 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. The student may retain the key for the duration of their tenure. The key must be returned to Student Services prior to graduation or a fee of \$15.00 will be assessed.

The Student Lounge may be reserved for various functions by contacting the Admission's Receptionist, Room G-9540, Tel: 585-275-3112

Use of Athletic Equipment in the Medical Center:

The use of athletic equipment such as bicycles, in-line skates, roller skates and skateboards inside buildings endangers others and poses a severe accident potential. Therefore, use of such equipment

is prohibited in corridors, hallways, and other public spaces inside buildings. Violations may result in disciplinary action.

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 Assistant 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 Assistant 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 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 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 Committee (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 Assistant 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 Committee (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:

In June 2008, the University of Rochester Medical Center (URMC) joined a number of leading academic medical centers that strengthened policies aimed at decreasing implicit and implied conflict of interests when faculty, staff and students interact with representatives of the pharmaceutical, biotech, medical device, and other commercial players in the health care industry. Like those of many other academic medical centers across the country, the rules govern what industry representatives may do in our facilities and what faculty, staff and students can do when they interact with industry representatives on any clinical or educational matters.

The underlying principle of the policy is that URMC faculty, staff and students may not accept gifts (including meals) from industry or its representatives that could bias clinical decisions or create the perception by patients and others that such biases might exist. The policy is not intended to limit the many positive interactions that occur with industry representatives and their companies, whether in promoting optimal patient care, education, research, or community health. Importantly, the policy does not prohibit use of medication samples, educational grants, or industry support of important public conferences and continuing education events, though it imposes certain restrictions intended to ensure that they are free from potential for bias.

The policy covers the following six topics:

1. Gifts and compensation
2. Site access by sales and marketing representatives
3. Scholarships and educational funds for students and trainees
4. Support for educational and other professional activities
5. Disclosure of relationships with industry
6. Training of students, trainees, faculty, and staff on the policy

URMC faculty, staff, trainees, and students who have questions about compliance with this policy should contact the URMC Compliance Office (275-1609) or the URMC Office of Counsel (758-7600) for assistance. Individuals with questions about policy development, implementation, or clarifications should contact Robert Panzer, M.D., Associate VP for Patient Care Quality and Safety.

The full policy can be found at:

<http://intranet.urmc-sh.rochester.edu/policy/industryinteractions/>

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

1. 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 Year 1
 - b. Elections will be held in April of Year 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 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 (Jane Risolo 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, to the Honor Board list-serve (SMDHonorBoard@urmc.rochester.edu), 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 Bylaws

Guiding principles and procedural outline:

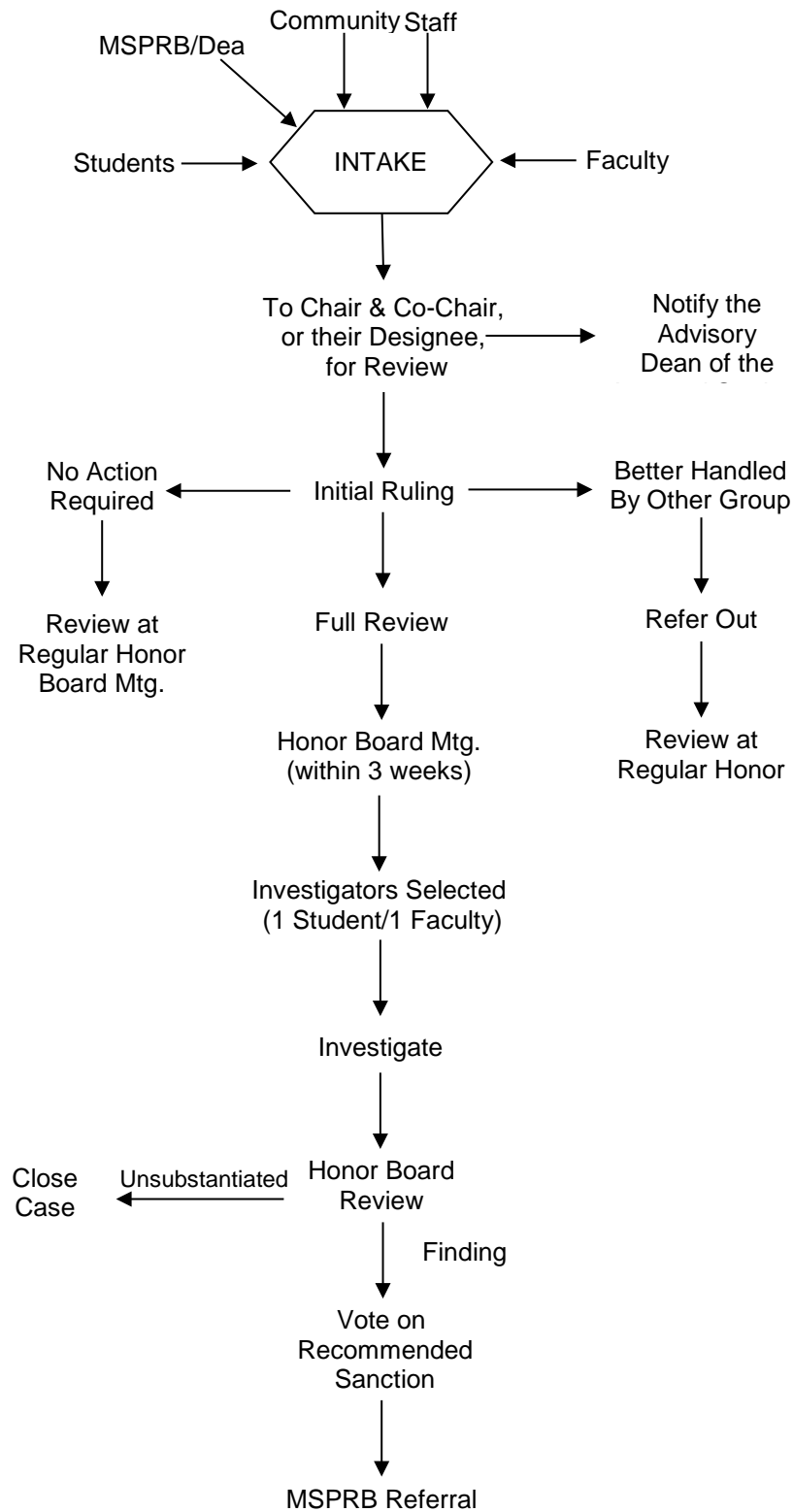
- Any honor board member, medical student in good standing, faculty member, or resident in good standing may propose amendments to the Honor Code in writing to an honor board member. Proposers shall address the perceived shortcoming in the Code and describe anticipated outcomes should their proposal 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 amendments¹ 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
Marjorie Gloff, MD	Co-Chair, Assistant Professor of Anesthesiology
Myra Wiener, MD	Ex-officio
Stephanie Brown Clark, MD, PhD	Associate Professor & Director, Division of the Medical Humanities
John Olschowka, PhD	Professor of Neuroscience
Jeffrey Scott Rubenstein, MD, MBA	Professor of Pediatrics
Michelle Circe, MD (alternate)	Emergency Medicine Senior Instructor
Rose Barham, MD	Department of Medicine/Pediatrics Resident
Ariel Reinish, MD	Department of Pediatrics Fellow
Tresne Hernandez	Class of 2022
Spencer Matson	Class of 2022
Kevin Mcgann	Class of 2021
Jason Hwang	Class of 2021
Brett Teplitz	Co-Chair, Class of 2020
Sean Paul Schlosser	Class of 2020
Peter Juviler	Co-Chair, Class of 2019
Victoria Zhou	Class of 2019
Armond Collins	Ex-officio
Adwiteeya Misra	MSTP
Keshov Sharma	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)

MEDICAL STUDENT PROMOTIONS AND REVIEW BOARD (MSPRB)

[\(See MSPRB\)](#)

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

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 URMIC 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:

1. 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.
2. 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.
3. Visitors must not distract students. Visitors who have the potential for distraction will not be allowed. (Effective September 25, 2007)

VIII. TEACHER / LEARNER POLICIES – URSMD MD PROGRAM

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 contact his/her Advisory Dean, the Assistant Dean for Student Affairs, and the Course or Clerkship Director. The faculty member must contact the Course or Clerkship Director. 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 Department Chair.

GUIDELINES TO PREVENT THE MISTREATMENT OF STUDENTS

In compliance with AAMC on student mistreatment, the following procedures have been adopted to prevent the mistreatment of School of Medicine and Dentistry students.

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.

Students should report all concerns to their Advisory Dean and to course and clerkship directors. Student concerns that, in the student's view, are not satisfactorily addressed via this process will be reviewed by the Senior Associate Dean for Medical Student Education (SADMSE). The SADMSE will take the appropriate steps to resolve the problem(s) and advised the student about the action taken and the outcome of the review. See [Reporting Violations](#) for additional individuals available for assistance.

UNIVERSITY OF ROCHESTER SCHOOL OF MEDICINE & 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.
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.

Medical school and university guidelines have been shared with the faculty, residents and students.

Concerns about violations of the Teacher-Learner policy or concerns about potential mistreatment should be directed to Kathryn Castle, PhD., Assistant Dean for Student Affairs or the Senior Associate Dean for Medical Student Education (SADMSE) Dr. David R. Lambert in the Offices for Medical Education. Students should also notify their Advisory Dean. See the [Reporting Violations](#) chart for additional individuals that are available to assist.

The basic science course directors and clinical clerkship directors are also options for the initial contact. They are responsible for prevention of mistreatment of students in the courses and clerkships. The SADMSE will be the contact person for issues that occur in all electives.

Student concerns that are not satisfactorily addressed via the proposed course/clerkship grievance procedure will be reviewed by the Senior Associate Dean for Medical Student Education. If further action is warranted, the SADMSE will take the appropriate steps to resolve the problem(s).

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.

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.

All concerns or complaints regarding inappropriate behavior, either witnessed or experienced, should be reported to designated officers or offices in the School of Nursing or the School of Medicine and Dentistry's Undergraduate Medical Education, Graduate Medical Education, Graduate Education and Postdoctoral Affairs, or Eastman Institute of Oral Health, as indicated below or in program handbooks. Each area is charged with taking appropriate steps consistent with their program's processes and procedures to thoroughly review and address the reported concern.

Expectations and Responsibilities for All Learners, Faculty and Staff:

- 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.

Sexual Misconduct, Harassment, Discrimination, Unprofessional Behaviors and/or Violations of the Expectations and Responsibilities Policies and Reporting Procedures

It is the University's aim to provide a setting which is characterized by respect for all and encouragement for the development of each individual's full potential. The University will not tolerate any behavior, including verbal or physical conduct, which constitutes sexual misconduct, harassment, discrimination or other unprofessional actions. All learners, staff, and faculty are accountable for compliance with our ICARE values and codes of conduct. Violations may lead to disciplinary action which, in sufficiently severe cases, may lead to separation from the University after applicable due process.

Students or trainees in the School of Medicine and Dentistry, School of Nursing, and URMC should advise a supervisor or other designated faculty member, leader or staff about all suspected violations of this guideline as well as all incidents of mistreatment, sexual discrimination, misconduct, harassment and acts of intolerance and discrimination. Reports should be directed to their school or program as indicated in the chart below. All individuals who file a report will be advised about the follow-up and outcome of any reported incident.

The chart below describes types of discrimination and harassment based on membership in a protected class and identifies applicable policies, resources, and reporting mechanisms.

DISCRIMINATION AND HARASSMENT DEFINITIONS, POLICIES AND PROCESSES

	Sexual Misconduct and Discrimination Based on Sex	Harassment Based on Protected Group	Discrimination Based on Protected Group
Definitions (see policies for complete definitions)	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, <i>and</i> must objectively and subjectively 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: <ul style="list-style-type: none"> • 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 by a student against a student	Student Sexual Misconduct Policy (all students) Sex-based Incident Proxy Report	Student Misconduct Policy – Policy Against Discrimination and Harassment (all students)	Student Misconduct Policy – Policy Against Discrimination and Harassment (all students)
Policies applying to allegations against employees (faculty, staff, resident, postdoc)	Policy 106	Policy 106	Policy 106

Processes for Reporting	Student Student Sexual Misconduct Policy (all students) Sex-based Proxy Report Policy 106 (if reporting faculty, staff, resident, postdoc) Faculty/Staff/Resident/Postdoc Policy 106 Sex-based Proxy Report Human Resources Business Partner Program specific dean's office (see links below)	Student Center for Student Conflict Management Care Network Bias-Related Concern Report Policy 106 (if reporting faculty, staff, resident, postdoc) Faculty/Staff/Staff/Resident/Postdoc Policy 106 Human Resources Business Partner Program specific dean's office (see links below)	Student Center for Student Conflict Management Care Network Bias-Related Concern Report Policy 106 (if reporting faculty, staff, resident, postdoc) Faculty/Staff/Resident/Postdoc Policy 106 Human Resources Business Partner Program specific dean's office (see links below)
Institutional Resources	Morgan Levy, JD Title IX Coordinator and Equal Opportunity Compliance Director morgan.levy@rochester.edu 585-275-7814 Lynnett VanSlyke University Intercessor and Director of Disability Compliance 585-275-9125 l.vanslyke@rochester.edu	Lynnett Van Slyke University Intercessor and Director of Disability Compliance 585-275-9125 l.vanslyke@rochester.edu Frederick Jefferson, EdD University Intercessor 585 275-5931 jefferson@admin.rochester.edu	Lynnett Van Slyke University Intercessor and Director of Disability Compliance 585-275-9125 l.vanslyke@rochester.edu Frederick Jefferson, EdD University Intercessor 585 275-5931 jefferson@admin.rochester.edu
MEDICAL STUDENT SPECIFIC LINKS TO RESOURCES	SMD Medical Student	SMD Medical Student	SMD Medical Student

UNIVERSITY OF ROCHESTER POLICIES

Sexual Harassment:

How to Report Incidents of Mistreatment, Sexual Discrimination, Misconduct, Harassment and Acts of Intolerance and Discrimination:

The medical school needs to be advised about all suspected violations of the Teacher-Learner policy as well as all incidents of mistreatment, sexual discrimination, misconduct, harassment and acts of intolerance and discrimination. Students are encouraged to report suspected violations to the designated contact person(s) indicated below. They should inform their Advisory Dean of the suspected violations either before or in conjunction with reporting to the designated contact person(s) indicated below. The chart below provides a quick reference with the contact people for reporting violations of the Teacher-Learner policy and incidents of mistreatment, sexual discrimination, misconduct, harassment and acts of intolerance and discrimination.

Students who report violations of the Teacher-Learner policy, incidents of mistreatment, sexual discrimination, misconduct, harassment and acts of intolerance and discrimination to the medical school will be advised about the follow-up and outcome of their reported incident.

Students who are unsure to whom they should report concerns are encouraged to speak with Kathryn Castle, Ph.D., Assistant Dean for Student Services.

REPORTING VIOLATIONS:

	CONTACT PERSON	EMAIL	OFFICE / TELEPHONE
Violations of the Teacher-Learner Policy	David R. Lambert, MD Senior Associate Dean for Medical Student Education	david_Lambert@URMC.Rochester.edu	Offices for Medical Education (G-7644), 585-275-4537
	Kathryn Castle, PhD Assistant Dean for Student Services	kathryn_castle@urmc.rochester.edu	Offices for Medical Education (G-764) 585-273-4537
Medical Student Mistreatment	David R. Lambert, MD Senior Associate Dean for Medical Student Education	david_Lambert@URMC.Rochester.edu	Offices for Medical Education (G-7644), 585-275-4537
	Additional Medical Student Contacts:		
	Kathryn Castle, PhD Assistant Dean for Student Services	kathryn_castle@urmc.rochester.edu	
	Advisory Deans The course and clinical clerkship directors		
Sexual discrimination	Morgan Levy, JD Title IX Coordinator and Equal Opportunity Compliance Director	morgan.levy@rochester.edu	24 Wallis Hall, RC Box 270039 585-275-9125
	Linda Chaudron, MD Deputy Title IX Coordinator for SMD	linda_chaudron@urmc.rochester.edu	Box PSYCH 585-276-7652
Acts of intolerance and discrimination	Lynnett VanSlyke University Intercessor	l.vanslyke@rochester.edu	24 Wallis Hall RC Box 270039 585-275-9125
	Kathryn Castle, PhD Assistant Dean for Student Affairs	Kathryn_castle@urmc.rochester.edu	Offices for Medical Education (G-7644) 585-273-4537
	Frederick Jefferson, EdD Intercessor for Racial Harassment	jefferson@admin.rochester.edu	Box 270021 585 275-5931

While the Medical School generally considers the wishes of the alleged victim in deciding when and how to respond to cases of sexual and other harassment, in instances when the perpetrator has threatened to harm and/or is felt to be a danger to the victim or the SMD community, the School retains the right (without approval of the victim) to take appropriate measures to protect the victim and the community.

Additional Mistreatment Reporting Procedures/Options:

(January 18, 2018)

- www.Rochester.edu/sexualmisconduct
 - Reporting an incident (sex-based incident)
 - Filing a proxy report (towards the bottom of the page)
 - Click on “submit the proxy report form” (can complete online or download a printed form)
 - *Do not need to indicate reporter’s name or other identifying information.
- Care Network
 - www.Rochester.edu/care/index.html
 - Care referral
 - Bias-related incident
 - Community concern report (national, international incident)

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.
- Optimally, 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 and 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.

PROCEDURES TO AVOID THE IMPACT OF CONFLICTS OF INTEREST

[\(See Procedures to Avoid...\)](#)

IX. TUITION, DEFINITIONS AND RELATED POLICIES

Address: Bursar’s Office
University of Rochester

School of Medicine & Dentistry
601 Elmwood Avenue, Box 601
Rochester, New York 14642-8601
SMDBursar@urmc.rochester.edu
Telephone: 585-275-4672
FAX: 585-273-1016

Location: Student Services Center, G-7644

Personnel: Peg Ehmann, Bursar
Nancy Ducci, Student Account Representative

TUITION

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>. If you have further questions, please contact the bursar at the number listed above.

BILLING PROCEDURES

Assessment of Tuition and Fees:

Tuition and fees are billed in two installments each academic year. Entering students are billed in July for the first term of their first year, with payment due August 10. Those entering students accessing school-processed financial aid will be given the one-time courtesy of a one week extension in order for those funds to be processed. Second, third, and fourth year students and Research Fellows are billed in July with payment due August 10. For the spring term, all students are billed in January, with payment due February 10. Bills are posted on approximately the 20th of each month. A student receives a statement for any month during which there is activity on their account and/or an outstanding balance.

A Bursar's Hold, including a \$100 Administrative Fee, will be placed on the account of any student who fails to pay their term bill by the last day of the month that term bill is due.

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.

Student Payment Agreement:

Every student is required to submit a completed Student Payment Agreement online @ <https://secure1.rochester.edu/bursar/payment/login.php> for the Bursar's Office, where it will be retained for the student's tenure at the School of Medicine. Please call the Bursar's Office with any questions.

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 15th of the 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 written appeal to 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.

NOTE: In addition to the existing 1% late fee, a **\$100 administrative fee will be applied to any student's account NOT paid by the last day of the month the payment is due.**

Any student who has an outstanding balance at the end of a billing period will be prohibited from registering for subsequent coursework until arrangements are made for payment.

Credits/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 the *UR* ePay selection in the BlackBoard student portal. Payments can be made by an e-check in this system. E-checks are free. Students may grant family members access to the *UR* ePay system by creating "authorized users" through their BB portal access. Authorized payers may access *UR* ePay through the SMD Bursar's website <http://www.urmc.rochester.edu/education/bursar/>

Those preferring to pay with a check in person may continue do so at the Bursar's Office (Student Services Center, Room G-7644) from 8 a.m. to 5:00 p.m. weekdays or at the Cashier's Office at Strong Memorial Hospital. **Cash payments are accepted only at the Cashier's Office.**

Checks can be accepted at the Bursar Office within Student Services, or may be mailed in to the address below:

University of Rochester School of Medicine
Bursar's Office, Box 601
601 Elmwood Avenue
Rochester, NY 14642-8601

If you prefer to pay your bill with a wire transfer, please contact the Bursar's office @ 585-275-4672 or email smdbursar@urmc.rochester.edu for instructions.

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 SMD Bursar's Office will 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 Bursar's Office 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 Bursar's Office immediately.

Accessing UR ePay Direct Deposit for Refunds

University of Rochester has partnered with Nelnet (UR ePAY) to provide all refunds, including ACH refunding (direct deposit) to all U of R students. Please follow the steps below to set this up and begin receiving your refunds via direct deposit.

1. Log onto Blackboard and select UR ePAY on the left-hand side of the page.
2. Once you are in UR ePAY look for Student Choice Refunds in the left-hand menu
3. Click on Manage My Student Choice Refunds Account to continue to our new site for electronic refund processing
4. At the top of the screen you should see your name and URID
5. Click on Refund Method and choose – Bank Account (Direct Deposit) to set up your account.

NOTE: You may choose the paper check option. Paper checks will be issued by Nelnet in the student's name and will be mailed through the USPS to the student's current billing address on file.

1098T Forms:

1098t Tax forms are generated by the University at the end of January and mailed to current student mailboxes. Forms are mailed to the most recent outside address available for the previous year's graduates.

TUITION REFUND POLICIES

Refund of Tuition Payment before Matriculating:

Entering students who have paid charges for the first billing period who elect to withdraw before the start of classes, will be assessed an administrative fee of \$100.00. The balance of the paid expenses will be refunded.

Student Fee Adjustments:

Except where noted, once billed, there is no adjustment in fees charged.

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 Continuation-of-Enrollment-for-the-MD Degree 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.

Honors Fellowship:

Student fellows who desire to be given consideration for the honors designation will be required to complete the honors fellowship application process no later than November 15 of the year of the completion of the fellowship. (See [Honors Fellowship](#))

Students approved for the honors designation will receive a tuition subsidy for the year they return to fulltime coursework. The amount of tuition billed will be at the level that the student would have been charged for FT/C status the previous year had the student not been doing the Fellowship. In subsequent years tuition is assessed at the prevailing rate. Only student fellows who are granted the honors designations receive the tuition subsidy.

Continuation of Enrollment (COE):

- For students pursuing academically oriented experiences that are not a part of the required University of Rochester medical school (M.D.) curriculum.
- Used for research fellows and some instances of independent study
- Student status and loan-deferment entitlement are retained
- Health fees will be charged unless students sign the annual health insurance waiver. In that case, only the Mandatory Health Fee will be charged.

Students registering as Fellows are assessed a reduced tuition amount, referred to as **Continuation-of-Enrollment for M.D. Degree (COE)** tuition. 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 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. (Effective January 1, 2015, updated June 1, 2017)

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 Assistant Dean for Student Affairs on the *Leave of Absence Request Form for Medical Students*, which can be obtained by the student or his/her 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 refund policies. (See [Refund Policies](#))

In addition to an Official Leave of Absence, students may be granted a Temporary LOA. A Temporary LOA 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 LOA 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)

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. The disability insurance is administered by the Guardian Life Insurance Company. Information regarding the coverage is available on the SMD Bursar's website <https://www.urmc.rochester.edu/education/bursar.aspx> as well as in the SMD Bursar's Office. (Updated November 10, 2014, June 28, 2016, July 9, 2018)

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 and Wellness Center:

Students are encouraged to utilize the Medical Center Fitness and Wellness Center. The membership dues are paid by the medical school for students enrolled in the MD program. All students wishing to use the fitness and wellness center must complete a one-time, 30 minute orientation through the fitness center.

Tuition Refund Policy for Students Who Withdraw or Who Initiate A Long-Term Leave of Absence:

Students who withdraw or who initiate a long-term Leave of Absence during an academic year are obligated to pay full tuition, if the period of their enrollment has been 60% or longer of an academic term. If the date of their official withdrawal occurs **before the first 60% of a term** a pro rata cost of tuition reduction will be calculated based on the number of days remaining in the enrollment period. The calculation of "earned tuition" charges will consist of the number of days of student status divided by the number of days in the enrollment period.

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 **date of withdrawal** is determined by the date that the Offices of Medical Education of the School of Medicine and Dentistry receives written notification from 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>

Return of Financial Aid Funds:

If, upon withdrawal or initiation of a long-term leave of absence from school, a student has received any financial aid other than Federal Work-Study, federal regulations dictate that the "unearned" funds be returned in the following order:

- unsubsidized Federal Stafford loans
- Federal Perkins loans
- any other Title IV programs
- U.S. Health and Human Services programs
- institutional financial assistance programs
- privately funded grants or scholarships
- the student

Unearned funds are determined by a calculation based on the number of days remaining in the billing term.

State scholarship funds are refunded or prorated according to the specific regulations of the sponsoring state.

Refunds are calculated according to Department of Education guidelines to ensure fair and equitable assessment for all students. Federal guidelines and examples of refund calculations are on file in the Bursar's Office and may be studied upon request.

Short-Term Emergency Loans

From a source funded by alumni contributions and the American Medical Association Education and Research Foundation (AMA-ERF), the School is able to offer any matriculated and registered medical or SMD graduate student who is in good academic standing a non-need-based, interest-free loan of up to \$600 for a maximum period of 60 days. If a student repays loans promptly, there is no limit to the number of times he or she may access this loan. **Any Financial Aid received and applied to a student's account will first repay the outstanding Short Term Loans before refunds are processed.**

Application is made in the Bursar's Office by completing and signing an "Emergency Short Term Loan Contract." The next business day, the student may pick up the processed contract with an attached cash voucher to take to the Cashier's Office in Strong Memorial Hospital. Students must present their current ID badge at the cashier's office to collect their loan money (in cash).

Students with past due Short Term Loan balances for more than four weeks will be denied access to the fund. Students with substantial past due outstanding balances on their student accounts and students with poor credit ratings may be denied use of the fund.

NOTE: The Cashier's Office does not guarantee the availability of cash after 4:00 p.m. during the week or on Saturdays.

FEDERAL REGULATIONS CONCERNING PRIVACY AND CONFIDENTIALITY

Due to very strict Federal regulations concerning privacy and confidentiality, the Bursar's Office 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 send a memo giving the Bursar's Office this permission. There are forms available in Student Services. The forms can be sent through the mail to Box 601 or by URSMD e-mail. The FERPA form is available in the Student Services Center or on the Bursar's website, <http://www.urmc.rochester.edu/education/bursar/federal-privacy-regulations.cfm>

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.

First year 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 two weeks. The ability of advisory deans to get to know students on a personal level throughout their tenure in medical school is invaluable.

During the second year 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 third year 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 (26) in each class has helped to foster a trusting relationship and has enhanced students' personal and professional development into physicians. The advisory dean system is a model advising program for undergraduate medical education.

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 Dean Kathryn Castle. Dean Castle will meet with the student to hear the concerns and review the process. Dean Castle 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

The school will make reasonable accommodations for students who have chronic, short-term, emergencies and/or non-ADA eligible health needs. 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.

Accommodations for Health:

A student with approved accommodations for a chronic health issue will meet briefly with the Assistant Dean for Student Affairs, at the end of each academic year, to discuss their current accommodations and if the accommodation(s) would be needed in the coming school year.

Procedure for Requesting Accommodations for Health:

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 Assistant Dean of Student Affairs Kathryn Castle, Ph.D. Students with questions can contact Dean Castle at 585-275-4537 or kathryn_castle@urmc.rochester.edu or Lynnett VanSlyke, University Director of Disability Compliance, at 585-275-9125 or l.vanslyke@rochester.edu.

Documentation as required by the University policy referenced above should be submitted to Dean Castle. She may, as needed, consult with the University of Rochester's Office of Disability Services.

Dean Castle should be contacted if the 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 Accommodations for Health:

Students with concerns about eligibility verification decisions and provision of accommodations for health 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 Assistant Dean for Medical Education/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 the SMD ADA Ombudsperson, 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 their Advisory Deans for approved release time. Without revealing a student's diagnosis or health care needs, the Advisory Dean 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.

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.

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 Assistant Dean of Student Affairs Kathryn Castle, Ph.D. Students with questions can contact Dean Castle at 585-275-4537 or kathryn_castle@urmc.rochester.edu or Lynnett VanSlyke, University Director of Disability Compliance, at 585-275-9125 or l.vanslyke@rochester.edu.

Documentation as required by the University policy referenced above should be submitted to Dean Castle. She may, as needed, consult with the University of Rochester's Office of Disability Services.

Dean Castle should be contacted if the 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:

As described in the University procedure referenced above, a student seeking review of an accommodation decision should first pursue an informal resolution. After engaging in such process, or as an alternative, students may also invoke the formal grievance procedure found in University of Rochester Policy 106, at <https://www.rochester.edu/working/hr/policies/pdfpolicies/106.pdf>

Role of the Medical Student Promotions and Review Board (MSPRB)

At any time, the MSPRB may be consulted on the question 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. The current version of the Medical School's technical standards can be found at [technical standards](#).

Medical information about the student's disability will not be shared with the MSPRB, although the student may be required to meet with the MSPRB as part of its process.

Medical School Ombudsperson

Aside from the Medical School's access coordinator (Dean Castle) and the University Office of Disability Resources, students may also seek assistance with disability accommodations or other matters from the Medical School's Ombudsperson for Student with Disabilities, Susan A. Hetherington, Ph.D. Associate Professor of Neurodevelopmental and Behavioral Pediatrics..

Among the ways the Ombudsperson may be able to provide assistance are:

- To discuss the decision whether to disclose a disability to the School of Medicine and Dentistry;
- To identify disability resources in the University and the Rochester community;
- To explain and interpret University and School of Medicine ADA-related requirements, procedures and documentation;
- To advocate on a student's behalf with respect to the provision of ADA-related accommodations, and

Dr. Hetherington can be reached by telephone at 585-275-6608 or email susan_hetherington@urmc.rochester.edu.

Additional Student Responsibilities

Students will be responsible for contacting each course director to review their individual needs. The ADA Coordinator should be contacted if the students encounter difficulty in accessing the accommodations.

The ADA Coordinator will meet with each student once a semester to review the accommodations and any requests for modifications.

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 Assistant 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 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
06/2011

Policy: 167 Revised:

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 Dean Kathryn Castle. 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 Christina Community
- Cru
- Newman Community – Roman Catholic Christianity
- Hillel – Jewish Life
- Muslim Students' Association
- Protestant Chapel Community
- UR Christian Fellowship
- Chabad House

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
Director of Religious and Spiritual Life

EDWARD G. MINER LIBRARY

Karen Liljequist
Interim Director, Medical Center Libraries and Technologies
Phone: 585-273-4869
Library Location: 1-6221
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

Monday - Thursday 8:30 a.m. - 7:00 p.m. (May – August 8:30 a.m. – 5:00 p.m.)

Friday 8:30 a.m. - 5:00 p.m.

Call (585) 275-3113 to schedule an appointment

Medical Center Office, 585-275-3113

Medical Center, Room 1-5091A

A limited number of appointments available.

Call (585) 275-3113 to schedule an appointment.

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

585-275-2662

Hours:

8:00 a.m.-5:00 p.m. weekdays
(9:00 a.m.-5:00 p.m. on Tuesdays)

Location:

Room 1-5077, Medical Center

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.