



TEXAS TECH UNIVERSITY  
HEALTH SCIENCES CENTER  
EL PASO

Paul L. Foster School of Medicine

**Texas Tech University  
Health Sciences Center El Paso  
Paul L. Foster  
School of Medicine**

**Student Affairs Handbook**

**Section I. Student Affairs  
Section II. Official Policies**

Revised January 31, 2018

SECTION I. Student Affairs - General Information

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## WELCOME



Welcome to the Texas Tech University Health Sciences Center El Paso PLFSOM! As the incoming class of this medical school you will find many exciting challenges ahead of you. The staff of the offices of Student Services and Student Affairs are here to serve you in order to enhance your experience and facilitate communication between students and faculty and student to student.

Please feel free to visit with Dr. Horn, Dr. Salazar, Alex Garcia or any of the staff of the Offices of Student Services or Student Affairs whenever you have concerns, questions or just want to chat. Our main number is 915-215-4370. We look forward to working with you.

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## MISSION STATEMENT

The mission of the Texas Tech University Health Sciences Center El Paso PLFSOM Office of Student Affairs, is to advocate and guide medical students in their personal, academic, and professional goals as they navigate the medical education pathway. We are committed to a positive learning environment.

### About This Student Handbook

This handbook contains information that will be helpful to students as they progress through medical school. Students are encouraged to keep this handbook and refer to it often.

***The PLFSOM reserves the right to make changes to the information and policies contained herein at such times as it deems appropriate. Students will immediately be informed in writing of any substantive changes in the policies of the PLFSOM.*** NOTE: All policies in this handbook are subject to approval by the President.

This ***PLFSOM Office of Student Affairs Medical Student Handbook*** and the ***Texas Tech University Health Sciences Center El Paso Student Handbook: Student Code*** can both be found online. The ***PLFSOM Office of Student Affairs Medical Student Handbook***  
<http://elpaso.ttuhsoc.edu/som/studentaffairs/documents/PLFSOM%20Student%20Affairs%20HB%202016-17%201%205%2017.pdf>  
***TTUHSC El Paso Student Handbook: Student Code***  
[http://elpaso.ttuhsoc.edu/student-services/documents/TTUHSC\\_EL\\_PASO-Institutional-Handbook.pdf](http://elpaso.ttuhsoc.edu/student-services/documents/TTUHSC_EL_PASO-Institutional-Handbook.pdf)

## CAMPUS DIRECTORY

<b>OFFICE</b>	<b>TELEPHONE</b>	<b>ROOM</b>
Disability Support Services	(915) 215-6560	MEB 3319
Academic Support	(915) 215-6560	MEB 3319
SBS/Accounting Services EMERGENCY	(915)215-5723 911	130 Val Verde
Financial Aid Advisor	(915) 215-4923	MEB 1210
Financial Aid (Lubbock)	(806) 743-2300	2C410
Information Technology	(915) 215-4111	MEB 2160
Legal Assistance (call for appointment)	(915) 215-4561	MEB 1210
Library	(915) 215-4309	MEB 2100
Medical Education	(915) 215-4320	MEB 2200
Office of Curriculum, Evaluation and Accreditation (adjacent to Founding Deans Office)	(915) 215-4392	MEB 3 <sup>rd</sup> Floor
POLICE (non-emergency)	(915) 215-7111	HSC RM 228
Registrar	(915) 215-4925	MEB 1210
Student Affairs	(915) 215-4370	MEB 1210
Student Health (Hague Clinic)	(915) 215-5810	125 W. Hague Rd., Suite 340

## COMMUNICATION

All communication with the faculty and staff at PLFSOM must go through your institutional (ttuhsc.edu) email address. We expect that you will check your institutional email account daily for important information.

It is the student's responsibility to respond appropriately and in a timely manner to all school-related notices sent to them by email, regular mail, or other means.

### Class Meetings

The Office of Student Affairs sponsors periodic meetings for each class. These meetings are typically held during lunch and are an opportunity for students to address concerns and questions in a public forum. Important information about USMLE, policy changes, or other topics is often presented. Students are required to attend in order to keep current with issues that affect them.

### Mailing Addresses

Students must keep their local mailing addresses updated on the WebRaider Student Portal, in the Student Information Section click on Student Addresses and Phones at <https://eraider.ttuhsc.edu/signin.asp>

### Student Email

Students are **REQUIRED** to use their school-assigned email addresses to receive official communications from the PLFSOM and TTUHSC El Paso and are encouraged to check their email **daily**. Students are responsible for responding promptly to any official emails and are also responsible for any information transmitted via official email. Technical questions concerning email may be directed to the Information Technology Help Desk (915-215-4111).



### Website

Current official announcements for medical students and other information about medical school can be found on the PLFSOM Student Affairs website. Information regarding class schedules, curriculum changes, and other matters related to ongoing coursework can be found at the PLFSOM Student Affairs website <http://elpaso.ttuhsc.edu/som/studentaffairs/>.

Each student also has their own E-portfolio, which is a repository of your unit grades, final grades, projects, reflections and career planning tools. You will receive further orientation from IT about this tool.



## SERVICES FOR STUDENTS

### Computer Services

All medical students have access to IT support assistance on campus. If you have difficulties with the software or hardware, please contact:

#### El Paso IT Help Desk

Clinic Science Building Basement, B08A or Medical Education Building Room 2160

Hours of Operation: Monday- Friday 7:00 a.m. – 6:00 p.m.

Telephone: 915-215-4111 Option 1

A number of services for students are available through the HSC Information Technology department, including Microsoft software downloads, IT (CBT) training through SkillSoft, and discounts on Dell products. For more information, please visit the IT website at <http://elpaso.ttuhsc.edu/it/>.

A Virtual Private Networking (VPN) account is also available for students at no charge. Visit the IT Help Desk web site <https://TTUHSC El Paso.teamdynamix.com/TDClient/KB/?CategoryID=952>

Assistance is available for computer related problems from the IT Help Desk at 915-215-4111 Option 1 or [elp.helpdesk@ttuhsc.edu](mailto:elp.helpdesk@ttuhsc.edu).

### **Copier Locations**

Self-service copiers are located in the Student Affairs Offices in rooms 1210 B and 1210 E as well as in both libraries.

### **Identification Badge / Name Tag replacements**

You must wear your TTUHSC El Paso badge at all times while on campus. It identifies you as a member of the community and it also gives you access (Proxy access) to restricted areas such as the student lounge and wellness center in the MEB and the building after hours. Lost photo id badges will be replaced at no charge for the first two times. A third replacement will not be issued unless Student Affairs is contacted. Proxy access may not be granted upon third issue. Students may contact the Texas Tech Police Department for ID replacements at 915-215-7111. ID badges are made on Mondays, Wednesdays and Fridays from 9:00 – 11:00 am and 2:30 – 4:00 pm.

### **Legal Assistance**

Students should contact Student Affairs and we will assist the student by connecting them to institutional legal services.

### **Library**

The Delia Montes-Gallo Library of the Health Sciences at TTUHSC El Paso is located in the AEC building is located on the first floor of the Academic Education Center (AEC) building across from Texas Tech Physicians of El Paso (4801 Alberta Avenue). The AEC library has a computer lab and three study room in addition to study carrels, booths, and public computer access stations (both PC and Mac).



The Doris F. Eisenberg Library of the Health Sciences at TTUHSC El Paso is located on the second floor of the Medical Education Building (MEB). This location has a “quiet room,” a conference room and a study room. There are also three small group study rooms located directly outside of the MEB library. In addition, the MEB Library provides students with 24/7 access to study carrels and tables at which students may study and connect to the network via Ethernet cables or Wi-Fi. Computer stations are available for use as well (both PC and Mac).

The library's operating hours are as follows:

AEC library: M-F 7:30am-10:00pm; Sat 10:00am-10:00pm; Sun 1:00pm-10:00pm

MEB library: M-F 7:30am-11:00pm; Sat 10:00am-11:00pm; Sun 1:00pm-11:00pm

Some of the services available to students, faculty and staff include:

- Reference assistance – both in-person (M-F 8:00am-5:00pm) and online
- Interlibrary loan
- Library instruction classes (individual or group)

Thousands of electronic resources are available to students, including:

- 40,000+ electronic books
- 27,000+ subject-related electronic journals

For example:

- UpToDate

- PubMed
- ClinicalKey
- Exam Master, BoardVitals (USMLE prep)
- Anatomy.tv, Netter Presenter
- MICROMEDEX and EMBASE
- Evidence Based Medicine databases (DynaMed, Essential Evidence Plus, etc.)
- Ovid databases (Cochrane databases, Medline, PsycInfo)
- Scopus, ISI Web of Knowledge

Please visit the library's website at <http://www.ttuhschool.edu/libraries/> for detailed information about these and other services at each of the TTUHSC EL PASO library sites.

### Lockers

Each student has an assigned locker in their college. Each student will need their own lock. See the college master for assignments. In the third and fourth year of medical school, lockers are available in the basement of the Texas Tech Physicians of El Paso (4801 Alberta Avenue). Students must also provide their own locks for these lockers.



### J Robert and Sherry Brown Student Lounge

The student lounge and wellness center are located on the 1<sup>st</sup> floor of the Medical Education Building across from the Office of Student Affairs. They are available to medical students 24 hours per day seven days a week by using your ID badge for access. Faculty and residents are prohibited from its use.

### Security

The Texas Tech Police Department is responsible for maintaining 24-hour security on the El Paso campus. There is also 24-hour security at each of the school's affiliated hospitals. Students are encouraged to request safety escorts to parking areas at night. Call the police department if you would like a safety escort or need assistance. TTPD can be reached at 915-215-7111. There are also Emergency Blue Phones located on the campus. Please familiarize yourself with these phone locations. For assistance with phone locations you may contact the TTPD.



### Study Space

A large number of individual and group teaching rooms can be found throughout the MEB. Both libraries on campus have student study spaces. The library in the MEB has over 45 individual study carrels. These study spaces are equipped to accommodate laptop computers. During the day, the group teaching rooms are used to conduct university business. The rooms are available after 5pm for students and are designed for groups of 3 or more students. All study space is shared by TTUHSC El Paso faculty, staff and students, which includes nursing students, graduate students, visiting TTUHSC El Paso students, and residents. Medical students may also use the J. Robert and Sherry Brown Student Lounge and areas throughout the HSC campus.

### Traffic and Parking

Students, staff, and faculty on the El Paso campus are required to have valid parking permits on their vehicles and must park in the appropriately designated areas. Violators will be ticketed. Students should remember that one of TTUHSC El Paso's primary purposes is to provide health care. Many patients who visit the HSC clinics are unable to walk long distances. It is very important that the parking areas designated for patient parking remain available for patients. Students may park in their designated areas only. First and second year students are assigned to park at an off-site parking lot approximately 1 mile away from where students will be transported to campus via shuttle. In years three and four of medical school, students may park at the designated hospital parking lots. All students may park in the MEB parking lots after 3pm weekdays, and anytime on weekends and holidays.

## Financing Medical School

Student indebtedness is an area of increasing concern for medical educators. Based on figures supplied by the AAMC, the mean indebtedness of the Class of 2016 graduates from LCME accredited medical schools was \$190,000. Nearly 76% of students enrolled in public medical schools will graduate with debt. Students are encouraged to borrow only what money is necessary and to budget carefully to avoid accumulating high debt loads during medical school.

**Resources:** The Office of Student Services offers different types of resources and information about financial aid and debt management.

- The Office of Student Services professional staff can guide you through the process of applying for financial aid. Visit their website at <http://elpaso.ttuhs.edu/studentservices/>.
- General financial aid information on loans and scholarships, the financial aid process along with different resources, such as AAMC First for Medical Education can be found at <http://elpaso.ttuhs.edu/studentservices/financialaid/>.

## STUDENT HEALTH ISSUES

### Health Insurance

The PLFSOM does not provide health insurance for its students or their dependents but all students are required to maintain health insurance throughout their four years of medical school. All of our clinics and hospitals where students receive their clinical training **require** each student to be covered by health insurance as well. Clinic personnel may ask you for proof of coverage at any time. Students will be denied access to clinical experiences if not covered by health insurance. Students are free to purchase health insurance from any health insurance provider. TTUHSC El Paso Student Services offers Health Insurance through Academic Health Plans. That information may be found at: <https://TTUHSC El Paso.myahpcare.com/enrollment>

### Immunizations

The Association of American Medical Colleges states that all students should be immunized against a number of infectious diseases for their own safety as well as the safety of others. **All PLFSOM students must be compliant with the school's immunization requirements prior to the first day of orientation or the first day of class in each semester.**

Requirements:

- **Tetanus/Diphtheria:** Primary series of Tetanus immunizations, plus one dose of Tdap within ten (10) years of matriculation. (Tdap should be administered if it has been 2 years since the last Td booster.)
- **Measles (Rubeola):** Proof of immunity determined by serologic titer.
- **Rubella (German Measles):** Proof of immunity determined by serologic titer.
- **Mumps:** Proof of immunity determined by serologic titer
- **Varicella (Chicken Pox):** Proof of immunity determined by serologic titer.

### Tuberculosis:

**A.** A two-step Tuberculin skin test is required. Documentation of TB skin test administered within the last 12 months will be considered as step 1. The second TB skin test must be completed at least one week after the first TB skin test. Proof of a negative TB skin test within the past 3 months will be considered as step 2. TTUHSC EL PASO PLF SOM will administer second TB skin test on orientation day.

**B.** If you have a history of a positive TB skin test, **documentation of a positive TB skin test is required.** Documentation of a chest x-ray (CXR) within the last three (3) months and completion of a TB symptom review is required. BCG vaccine does not preclude the need for TB skin testing or chest x-ray.

- **Polio:** Documentation of basic series of oral or inactivated polio immunization.
- **Hepatitis B:** Series of three (3) and serologic proof of immunity. The third dose must be received no later than December 1 of the entering semester. If a student does not develop immunity after the initial series, a second series and re-titer will be required as recommended by the CDC.

- Annual Flu vaccine – given in the fall (covered by immunization fee)

Student immunization records are kept on file in TTUHSC El Paso Occupational Health. As immunizations are updated, students must provide written documentation to them. (See Policy for Student Clearance in Part II).

### Exposure Events:

Students who have an “exposure event” to human blood or body fluid will report the exposure to their supervisor and receive immediate screening and blood testing. The patient who is the source of the exposure will also be tested. Follow up blood tests are done to check for possible disease transmission. Medications may need to be taken in some cases. The students’ health insurance will be billed. If the insurance does not cover these costs Student Affairs will be contacted. You will receive further orientation to the pertinent policy at orientation and periodically thereafter. The policy can be found at: <http://elpaso.ttuhsoc.edu/occupationalhealth/documents/Exposure%20Matrix%202011-2016.pdf>

### Medical Care

Student Health Fees provide access to diagnostic, preventive, and therapeutic health services at Texas Tech Physicians of El Paso at Hague. Spouses or other dependents are not covered by student health fees. These covered services are discussed in detail in a separate brochure available on the Student Affairs website at: <http://elpaso.ttuhsoc.edu/som/studentaffairs/documents/Student%20Health%20Brochure.pdf> Students may make an appointment by calling and identifying themselves as a medical student. There is one physician who is assigned for medical student care who does not assess students or evaluate them in third year. This is a private clinic so students are not rotating here. Your health information is private and protected by HIPAA the same as all patients. Students may be seen by other specialists at Texas Tech Physicians of El Paso clinics that are covered under their insurance. If a student chooses to see a provider who could later assess them for a grade, they should notify the clerkship coordinator that a clinical relationship exists so that the faculty member may recuse themselves from evaluating that student. It is for this reason that students should not be seen by clerkship directors who will need to grade the student in the future.

### Personal / Psychological Counseling (Program of Assistance for Students)

As a member of TTUHSC El Paso community you are provided with **FREE, CONFIDENTIAL COUNSELING** through the Program of Assistance for Students (PAS). You may self-refer to this program by calling any of the providers on the list) and letting them know you are a TTUHSC El Paso medical student. You can also call 1-800-327-0328 or 806-743-1327, Monday-Friday, 8:00 am - 5:00 pm. to request a list of providers in our community to access confidential counseling. The PAS numbers also serve as a crisis hotline. Your student services fee provides up to five free visits per academic year and anyone in your household may use these visits. “If something is bothering you, whatever the issue, call PAS to see how we can help. PAS counselors are trained in addressing all types of problems: *Family and Relationship Problems; Depression; Excessive Stress or Anxiety; Alcohol and Drug Abuse; Other Problems in Living*”.

The community mental health providers are not associated with Texas Tech. Your visit is confidential. You may find out more at the website: <http://elpaso.ttuhsoc.edu/studentervices/pas.aspx>. **This information is also found in the Student Affairs Office bulletin boards and is posted in each College.**

### Disability Insurance

As part of your required fees, the school provides long term disability insurance through Dearborn National. If a medical condition arises that may cause you to be disabled. Please contact the Office of Student Affairs to file for the disability under this plan.



### WHAT THE OFFICE OF STUDENT AFFAIRS DOES FOR YOU

The Office of Student Affairs provides a number of services for medical students. The office has two locations: rooms 2140 and 2145 in the Medical Education Building. Both offices are open Monday through Friday, 8:00 to 5:00pm and can help you with anything you need. Among the functions of the Student Affairs Office:

- serve as a student advocate and act as a liaison between students and faculty
- works with the student's College Master to meet the student's individual needs
- works with the College Masters to meet the needs of the class as a whole
- ensure that students are treated fairly and in accordance with institutional policies
- provide individual career counseling and hold career workshops
- facilitate activities of the Grading and Promotion Committee and the Student Affairs Committee
- handle requests for leaves of absence
- provide personal counseling and/or refer to outside resources
- handle ERAS (Electronic Residency Application Services)
- handle NRMP (National Resident Match Program)
- handle VSAS (Visiting Student Application Service)
- hold residency workshops
- write Medical Student Performance Evaluations, also known as Dean's letters, for MSIV students
- carry out all student orientations, White Coat Ceremony, Match Day activities, Convocation and Graduation
- hold informational class meetings
- work with class officers in meeting needs of students
- monitor academic performance and professionalism
- provide academic assistance as needed
- hold workshops for improving academic performance
- hold workshops for preparing for USMLE Step 1
- authorize USMLE Step applications
- oversee student areas such as the wellness center

#### **WHAT YOUR COLLEGE MASTER DOES FOR YOU**

Each student is assigned to a College and to the College Masters within that college. The College Masters provide the following:

- advocacy for students and serve as liaisons between students and faculty when needed
- individual mentoring regarding course/clerkship work and career counseling
- monitoring of academic performance and professionalism
- academic assistance as needed
- encouragement for elected College Representatives in meeting student needs
- oversee the College area

#### **CAREER PLANNING SERVICES**

Choosing a medical specialty is a critical but often difficult decision for students to make. Although many students enter medical school with ideas about their future specialty, studies show that 70% of such students will change their minds before graduation.

We have a number of resources available to you to help you make the best decisions possible based on your interests, aptitudes, and competitiveness. Students often don't know where to start, but the AAMC has developed a self-paced program to assist students through the process. This Careers in Medicine Program is a key component in our school's career advising program.

**The Careers in Medicine** program sponsored by the AAMC is a longitudinal program of career exploration and decision-making that spans all four years of the medical curriculum. The program is designed for students to be able to use on their own but is enhanced by students working with faculty advisors and Student Affairs officers. Students are given access to the Careers in Medicine website that includes sections entitled ***Understanding Yourself, Exploring Options, Choosing a Specialty, and Getting into a Residency***. A Careers in Medicine timeline found at the end of this list of resources shows you what you should be doing each step of the way.

You can visit the Careers in Medicine website at: <http://www.aamc.org/cim/>;

**Career Planning Resources:**

- **The Student Affairs Office** also provides career advising. In addition to working with clinical faculty acting as advisors, students are also encouraged to meet with Student Affairs faculty or staff to discuss career plans. They will hold special meetings to provide information and instruction to students about the National Resident Matching Program (NRMP) and the Electronic Residency Application Service (ERAS) in the third year as well as career information and residency interview preparation.
- **College Masters can** serve as career advisors or refer you to an appropriate faculty mentor.
- **Clinical faculty members** are available to serve as mentors/advisors, Third year students will choose an advisor at the beginning of their third year. The list of available clinical faculty advisors is maintained on the student affairs website.
- **Student Interest Groups** are a great resource for specific career information. Each of the 40 organizations on campus will have meetings and presentations throughout the year.

Class Year	Careers in Medicine Phase	Suggested CiM Activities and Tasks	PLFSOM Activities
Year 1		<ul style="list-style-type: none"> <li>• Orientation to Careers in Medicine</li> <li>• Seek out an advisor or mentor</li> </ul>	<ul style="list-style-type: none"> <li>• MS1 Orientation</li> </ul>
	<u>Understanding Yourself</u>	<ul style="list-style-type: none"> <li>• Attend CiM workshops and begin completing self-assessment exercises</li> <li>• Continue self-assessment</li> <li>• Complete self-assessment exercises</li> <li>• Review completed Personal Profile with your advisor</li> </ul>	<ul style="list-style-type: none"> <li>• Attend the Class Meeting introducing the CiM Website and Self-Assessments</li> <li>• Meet with Alex or Dr. Horn to go over your Personal Profile</li> <li>• Visit the Career Corner in the downstairs Student Services office to check out books on career selection</li> </ul>
Year 2	<u>Exploring Options</u>	<ul style="list-style-type: none"> <li>• Begin gathering basic information about specialties of interest through CiM Specialty Pages, other online sites, and library research</li> <li>• Attend specialty panel and information group sessions provided by your school</li> <li>• Compare your self-assessment information to the information you have gathered about specialties. Narrow down your specialty interests</li> </ul>	<ul style="list-style-type: none"> <li>• Attend the Class Meeting on Exploring Options</li> <li>• Attend Career Tasters in Spring</li> <li>• Meet with Alex, or Dr. Horn to go over your options</li> <li>• Get involved in Interest Groups to meet physicians</li> </ul>

		<ul style="list-style-type: none"> <li>to 3-4 top choices</li> <li>• Plan your 3rd year schedule</li> <li>• Take USMLE Step 1</li> </ul>	
Year 3	<b><u>Choosing a Specialty</u></b>	<ul style="list-style-type: none"> <li>• Begin clinical rotations - Record your reflections on the Clinical Rotation Evaluation</li> <li>• Review the "Charting Outcomes in the Match" report to assess qualifications and competitiveness for different specialties</li> <li>• Conduct informational interviews and/or participate in preceptorships</li> <li>• Contact associations and specialty organizations</li> </ul>	<ul style="list-style-type: none"> <li>• Meet with Student Affairs &amp; choose an advisor in a specialty you are interested in</li> <li>• Attend the "After the Match" student workshop</li> </ul>
		<ul style="list-style-type: none"> <li>• Meet with your advisor to discuss your top choices</li> <li>• Complete the Specialty Indecision Scale if you're having difficulty making a decision</li> <li>• Complete the "Choosing Your Specialty" exercise</li> </ul>	<ul style="list-style-type: none"> <li>• Attend the Class Meeting on Choosing a Specialty</li> <li>• Meet with Alex, or Dr. Horn to help you choose a specialty</li> <li>• Meet with your advisor at least twice – they'll help you plan your Y4 schedule</li> <li>• Visit the Career Corner in the downstairs Student Services office to check out books on career selection</li> </ul>
Year 4	<b><u>Getting into Residency</u></b>	<ul style="list-style-type: none"> <li>• Research residency training programs through AMA's FREIDA or the AMA's Graduate Medical Education Directory (Green Book)</li> <li>• Rate your preferences using the Residency Preference Exercise</li> <li>• Begin reviewing and comparing residency programs</li> <li>• Register with ERAS and begin preparing residency</li> </ul>	<ul style="list-style-type: none"> <li>• Attend the Class Meeting on Getting Into Residency</li> <li>• Attend the workshop on Writing your CV and Personal Statement</li> <li>• Meet with your advisor</li> <li>• Office of Student Affairs can help you register for ERAS &amp; NRMP</li> <li>• Write your Unique Characteristics for your MSPE</li> </ul>

		<p>applications (CV, letters of recommendation, personal statements, etc.)</p> <ul style="list-style-type: none"> <li>• Register with the NRMP for the Main Residency Match</li> <li>• Register for early Match programs, if applicable</li> <li>• Complete applications and designate programs to which your materials will be submitted</li> <li>• Take USMLE Step 2</li> <li>• MSPE released October 1</li> <li>• Interview with residency programs</li> <li>• Rate programs using the Residency Preference Exercise</li> <li>• Early match deadline, early-mid January</li> <li>• Rank-order your selections in the NRMP Main Residency Match</li> <li>• Match Day - third Thursday in March</li> </ul>	<ul style="list-style-type: none"> <li>• Attend the Interview Workshop</li> <li>• Visit the Career Corner in the downstairs Student Services office to check out books on interviewing</li> <li>• Meet with Alex, or Dr. Horn for help with interviewing or making your Rank Order List</li> <li>• Attend Match Day events!</li> </ul>
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### **PROGRAM FOR ACADEMIC SUPPORT & ENRICHMENT (PASE)**

A major function of the Office of Student Services is the Program for Academic Support & Enrichment (PASE). This program provides services that are designed to help each student succeed from their first year to their last. It offers many resources to students that will help them maximize their academic potential and learn more efficiently and effectively. Features of the program include:

- **Individual assistance** in identifying and improving areas such as:
  - Studying
  - Reading
  - Note taking
  - Test taking
  - Time management
  - Stress management
- Group workshops/presentation on above topics
- Learning assessments given to each student with a personalized report of their strengths and weaknesses
- Individualized study plans based on learning preferences
- Workshops aimed at identifying learning styles
- Workshops on residency interview preparation
- Workshops on USMLE Step 1, Step 2, NBME, and OSCE preparation
- Remedial advisement

- Academic support for students with disabilities

The PASE program also houses the **PLFSOM Medical Student Teaching Center (MSTC)**. This is a program open to all medical students that offers free academic assistance from medical student peers in a variety of areas throughout their medical education. The Teaching Assistants (TAs) are second, third, and fourth year students who excel in several subject areas. Sessions can be done individually, in small groups, or in workshops. Areas of assistance are: Anatomy, Biochemistry, Biostatistics, Epidemiology, Histology, Immunology, Genetics, Microbiology, Neuroanatomy, Pathology, Pharmacology, Physiology, Step 1, NBME Shelf Exams, and Step 2 CK.

The PASE Program is available to all students – from those who are having trouble to students who just want to brush up on a particular skill or improve their existing study habits. PASE is led by the Director of Academic and Disability Support Services, Dr. Tammy Salazar. You can set up an appointment by contacting the Academic and Disability Support Services Coordinator, Ryleigh Stagg either by phone or e-mail: 915-215-6560 or [Ryleigh.Stagg@ttuhsc.edu](mailto:Ryleigh.Stagg@ttuhsc.edu) or stop by the office in the MEB3319. If you are interested in the MSTC services, please contact Dr. Salazar or stop by the MSTC in MEB 1210B.

### **DISABILITY SUPPORT SERVICES**

The Office of Disability Support Services (DSS) is committed to providing equitable access to learning opportunities for all students with documented disabilities (e.g. mental health, attentional, learning, chronic health, sensory, or physical). Accommodations are not provided retroactively and students are encouraged to register with the DSS office as soon as they begin their academic program. TTUHSC El Paso encourages students to access all resources available for consistent support and accommodations.

Please contact Dr. Tammy Salazar, Director of the Office of Disability Support Services, to engage in a confidential conversation about the process for requesting reasonable accommodations in the classroom and clinical settings. For more information, you can also visit the DSS website at <http://elpaso.ttuhs.edu/studentservices/dss.aspx>

### **STUDENT ORGANIZATIONS**

The Office of Student Services will supervise all TTUHSC El Paso PLFSOM student organizations and interest groups. There are over 40 student organizations that can be viewed at <https://www.elpaso.ttuhs.edu/som/msc/organizations.aspx>. To establish a student organization, review guidelines, see forms, or have an overview of a constitution and bylaws please go to <http://elpaso.ttuhs.edu/fostersom/studentaffairs/supportorg.aspx>. Upon submission of all required documents and approval from the Office of Student Services, the officers from each organization will meet with Student Services to discuss budgetary guidelines. The contact person at Student Services is Diana Andrade: email [Diana.Andrade@ttuhsc.edu](mailto:Diana.Andrade@ttuhsc.edu) or phone 915-215-4364.

### **Gold Humanism Honor Society**

The Gold Humanism Honor Society (GHHS) is a national organization that promotes the values of humanism and professionalism in medicine. The GHHS recognizes medical students, residents, and physician-teachers for their commitment to the values of humanism and professionalism in medicine. Members of the GHHS advocate for humanism by organizing activities on campus and in the community. Inspiration for the GHHS began in the late 1990s at Columbia University when a group of medical educators and residency program directors expressed the need for a mechanism to identify applicants for internships and residencies who have outstanding clinical *and* interpersonal skills. Thanks to a series of grants from the Robert Wood Johnson Foundation, deans, medical educators, and experts in assessment were convened to explore and research the viability of an honor society to promote humanistic values and behaviors. The organization was named in honor of Arnold P. Gold, MD, a pediatric neurologist at Columbia University whose exemplary career has been an inspiration for a generation of medical trainees.

The PLFSOM Chapter of the GHHS was chartered in 2011, and membership is limited to no more than 15% of each class. Members are selected by their peers in the third year of medical school. The student members organize activities on and off campus to promote the values of the organization.

### **Alpha Omega Alpha**

The Alpha Omega Alpha Honor Medical Society, commonly known as Alpha Omega Alpha or AOA, is a national honor society for medical students, residents, scientists and physicians in the United States and Canada. The goal of AOA is to recognize and perpetuate excellence in the medical profession. The AOA motto is to "Be Worthy to Serve the Suffering." AOA was founded in 1902 by medical students who were dedicated to medicine as a scholarly pursuit and to the importance of physicians dedicating themselves to serving patients.

Election to AOA is limited to those students that have excellent scholastic qualifications. In addition to academic excellence, candidates are selected on the basis of their outstanding professionalism, leadership skills, teaching, community service, research and scholarly activity. The total number of students elected shall not exceed one-sixth of the total number in the class expected to graduate.

We are currently only selecting senior AOA students. To be nominated to AOA a student must be in the top 25% of their class as determined primarily by their clerkship grades and secondarily by their score on the Step I. Those students that have been nominated will then be requested to submit an AOA application addressing their research/scholarship, teaching experiences, leadership activities, and volunteer service since matriculating to PLFSOM. At the same time, the clerkship directors, SARP directors, year one and two course directors, SCI course directors and the college masters will be polled to make recommendations for selection into AOA from the nominated students.

The AOA committee will evaluate the AOA application and faculty recommendations to develop a ranking of the nominated students according to the values of AOA that each student has demonstrated while attending PLFSOM. These values will be professionalism, leadership skills, teaching, community service, research and scholarly activity. This ranking will have equal weight to the ranking of the grades the student has made to be nominated into AOA. Selection into AOA is not just about grades the student has achieved. We are looking for student leaders who ultimately will become medical leaders in the future. Since we are only able to select one sixth of the class into AOA, some of the students that are nominated will not be selected into AOA.

### **Medical Student Council**

The Medical Student Council (MSC) represents the medical student body. Each class is represented by its elected president, vice president, secretary, treasurer, service chair as well as a representative from each college in each class. The MSC is regarded by faculty and administration as the official voice of the student body and it is advisory on an ad hoc basis to the Dean and the various Associate Deans. The membership of this group comes from each of the four classes.

In the MSC Constitution, duties and responsibilities of the officers are mandated and defined. Likewise, the formation of committees is discussed. Also contained within the Constitution are the mechanisms by which proposals and petitions are handled when they are brought before the Student Government. For further information on the Medical Student Government, please visit <http://elpaso.ttuhs.edu/som/msc/default.aspx>.

### **Organization of Student Representatives**

The OSR is the student branch of the Association of American Medical Colleges (AAMC). The OSR is charged with the representation of undergraduate medical student body of the U.S. to the academic medicine community. The concerns of the OSR lie exclusively within academic medicine and medical education. Each of the LCME accredited medical schools have students who serve as the OSR representative for their schools. As an OSR representative, you must communicate the opinions of your student body to the national officers so that the OSR can effectively represent medical students on a national level. In addition, you can take OSR national priorities and objectives from your colleagues at the national level and implement them at your school. At PLFSOM, the role of OSR representative is chosen through an essay and interview process of members of the Student Curriculum Committee and is selected by the Office of Student Affairs in conjunction with current OSR students.

### **Student Curriculum and Evaluation Committee Charter**

Charter: The Student Curriculum and Evaluation Committee (SCEC) is a student organization sponsored by the Office of Medical Education. This committee's major purpose is to assist in the gathering and

interpreting of student perspectives and recommendations in support of the PLFSOM's efforts related to continuous educational program improvement and accreditation.

The Student Curriculum and Evaluation Committee:

- Advises the Associate Dean for Medical Education, the Assistant Deans for Medical Education, the Director of Assessment and Evaluation, and the Course/Clerkship Directors regarding the design and implementation of the medical school curriculum based on student experience.
- Seeks to provide balanced representation of student perspectives regarding the educational program, to assist the Office of Medical Education and the Curriculum and Educational Policy Committee in the interpretation of course and faculty evaluations, and to offer constructive recommendations for improvement regarding all aspects of the educational program.
- Supports and facilitates broad student participation in course and faculty evaluations so as to maximize the reliability and credibility of the results.
- Provides leadership in the preparation of independent student self-studies as required for LCME Accreditation processes.
- Provides representation to the faculty Curriculum and Educational Policy Committee (CEPC) in accordance with the PLFSOM Faculty Bylaws.

PLFSOM delegates to the Association of American Medical Colleges (AAMC) Organization of Student Representatives (OSR) are selected from the SCEC.

For each class, each college elects two Student Curriculum and Evaluation Committee members to serve for one year, and members may be re-elected.

Service on the Student Curriculum and Evaluation Committee is dependent on the maintenance of good academic standing as collaboratively determined by the Associate Dean for Student Affairs and the Associate Dean for Medical Education. Members who resign or who are determined to be at academic risk may be replaced by special election by the relevant College or replaced at the next appointed election.

### **Student Affairs Committee**

The Student Affairs committee is a standing committee of the PLFSOM that includes faculty and students. The purpose of the committee is to review and recommend policies and programs that support student affairs, campus life and the academic mission. Student representatives from each academic level serve until they graduate. Students are recommended by their college master to the Associate Dean for Student Affairs.

### **The Student Life Committee – Be Well, Do Well**

The Student Life Committee (SLC) is an advisory committee to the Student Affairs Committee. Its major purpose is to organize student wellness activities that maximize student academic performance and provide positive lifestyle balance. Organized into three (3) subcommittees (Expressive Arts; Mind/Emotional/Lifestyle; and Physical/Stress Management), it is responsible for developing a calendar of student activities. These activities are run primarily by student volunteers but may also include interested outside individuals.

Students from all colleges will be included in the SLC. Each college will elect 1-2 student representatives per class year to serve on the SLC. This includes the Student from each college who currently serve on the Student Affairs Committee. Once elected as a student representative, that student can continue to serve on the committee during their 3<sup>rd</sup> and 4<sup>th</sup> year in medical school. The SLC will elect a chairperson, but may have co-chairs, a treasurer and a chairperson for each subcommittee. The term for these position will be for one year; however, a student can be reelected for additional terms at the discretion of the SLC. The SLC will have a faculty advisor who is a member of the Student Affairs Committee.



## **SPECIAL EVENTS**

### **The White Coat Ceremony**

The White Coat Ceremony owes its beginnings to the Arnold P. Gold Foundation, whose mission is to foster humanism in medicine. The Foundation is a public, not-for-

profit organization established in 1988 by Drs. Arnold and Sandra Gold, their colleagues at the Columbia University College of Physicians & Surgeons in New York City, and dedicated community leaders and philanthropists. Through funds raised by The Foundation for programs, significant advances have been made in the development, implementation, evaluation and replication of innovative medical educational programs and projects which are influencing the way physicians are trained. One such program is the White Coat Ceremony.

The “White Coat Ceremony” is designed to clarify for students, prior to their entrance into the medical community that a physician’s responsibility is to both take care of patients and also to care about patients. In other words, doctors should “care” as well as “cure”. It was initiated for the entering class of the College of Physicians & Surgeons of Columbia University in New York City on August 20, 1993.

In the presence of family members and friends, students are welcomed into medical school by their Deans, faculty, alumni and fellow classmates. They hear an inspiring address by an eminent physician role-model; are “cloaked” with their first white coats by distinguished faculty and administrators of the medical school; and recite their own class oath.

The White Coat Ceremony is the highlight of orientation for first year medical students. The event is designed to capture the students’ attention at a strategic and impressionable moment; at the very beginning of their medical education. The ceremony stresses the importance of the doctor-patient relationship and fosters a psychological contract in which the student accepts responsibility to be technically excellent, committed to the profession and compassionate with patients.

The first White Coat Ceremony at TTUHSC El Paso PLFSOM was held in July 2009. Every year forward, the ceremony continues to be an integral part of the first immersion week and a vital element in the students’ introduction into the community of medicine.

### **Match Day**

Senior medical students secure residency positions for post-graduate training through a process called the Match. Students enroll in the National Resident Match Program (NRMP), a program that is similar to the match students participate in for admission to medical school.

Through the Electronic Residency Application Service (ERAS), students apply to various residency programs in the fall of their 4<sup>th</sup> year. Residencies invite students for interviews and in February, students and residency programs submit their rank order lists to the NRMP. Results of the Match are released the third Friday in March.

The Student Affairs Office will plan an “envelope opening” ceremony for that day, as well as celebration events.

### **GENERAL INFORMATION FOR STUDENTS**

1. HIPAA training – all students receive training on HIPAA. This will be a live presentation at year one orientation but is a required online module each subsequent year while a student.

The Health Insurance Portability and Accountability Act of 1996, HIPAA, requires that covered entities train all members of its workforce, volunteers, trainees and anyone else who represents the organization in privacy and security policies and procedures. Training for new workforce members is done immediately upon hire/matriculation and annual refresher training is assigned via online Asynchronous Course Management Engine (ACME). Review of HSCEP OP 52.09, Confidential Information, [http://elpaso.ttuhsoc.edu/opp/\\_documents/52/op5209.pdf](http://elpaso.ttuhsoc.edu/opp/_documents/52/op5209.pdf), and a signed Confidentiality Agreement, [http://elpaso.ttuhsoc.edu/opp/\\_documents/52/op5209b.pdf](http://elpaso.ttuhsoc.edu/opp/_documents/52/op5209b.pdf), is required as part of orientation and an updated signed agreement is required each year. See link for details on privacy training standards, [http://elpaso.ttuhsoc.edu/hipaa/\\_documents/HPP1](http://elpaso.ttuhsoc.edu/hipaa/_documents/HPP1). The U.S. Department of Health and Human Services states that organizations are required to create and utilize "appropriate sanctions against workforce

members who violate policies and procedures." Should a breach occur, TTUHSC El Paso must conduct a confidential and timely investigation of the matter in accordance with TTUHSC El Paso policies to lessen the harmful effect to wronged party to the maximum extent practical.

2. Basic Cardiac Life Support (BCLS) – all students must maintain a valid BCLS card throughout their time at Paul L. Foster SOM
3. Community Wide Orientation – all students must complete this module each year:  
<http://www.epcc.edu/cwo/pages/default.aspx>.
4. Criminal Background Check – this must be done before starting at PLFSOM and repeated if a student steps out of the curriculum for more than 3 months or if there is an arrest (See Policy on Reporting Arrests).

## SECTION II. Student Affairs - Policies

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## CONDUCT POLICIES

### Standards of Behavior in The Learning Environment

The faculty of the PLFSOM fully supports the AAMC Compact between Teachers and Learners of Medicine which states:

#### 1. AAMC Compact between Teachers and Learners of Medicine

- a. Preparation for a career in medicine demands the acquisition of a large fund of knowledge and a host of special skills. It also demands the strengthening of those virtues that undergird the doctor/patient relationship and that sustain the profession of medicine as a moral enterprise. This Compact serves both as a pledge and as a reminder to teachers and learners that their conduct in fulfilling their mutual obligations is the medium through which the profession inculcates its ethical values.

#### 2. Guiding Principles

- a. DUTY: Medical educators have a duty, not only to convey the knowledge and skills required for delivering the profession's contemporary standard of care, but also to inculcate the values and attitudes required for preserving the medical profession's social contract across generations.
- b. INTEGRITY: The learning environments conducive to conveying professional values must be suffused with integrity. Students learn enduring lessons of professionalism by observing and emulating role models who epitomize authentic professional values and attitudes.
- c. RESPECT: Fundamental to the ethic of medicine is respect for every individual. Mutual respect between learners, as novice members of the medical profession, and their teachers, as experienced and esteemed professionals, is essential for nurturing that ethic. Given the inherently hierarchical nature of the teacher/learner relationship, teachers have a special obligation to ensure that students and residents are always treated respectfully.

#### 3. Commitments of Faculty

- a. We pledge our utmost effort to ensure that all components of the educational program for students and residents are of high quality.
- b. As mentors for our student and resident colleagues, we maintain high professional standards in all of our interactions with patients, colleagues, and staff.
- c. We respect all students and residents as individuals, without regard to gender, race, national origin, religion, or sexual orientation; we will not tolerate anyone who manifests disrespect or who expresses biased attitudes towards any student or resident.
- d. We pledge that students and residents will have sufficient time to fulfill personal and family obligations, to enjoy recreational activities, and to obtain adequate rest; we monitor and, when necessary, reduce the time required to fulfill educational objectives, including time required for "call" on clinical rotations, to ensure students' and residents' well-being.
- e. In nurturing both the intellectual and the personal development of students and residents, we celebrate expressions of professional attitudes and behaviors, as well as achievement of academic excellence.
- f. We do not tolerate any abuse or exploitation of students or residents.
- g. We encourage any student or resident who experiences mistreatment or who witnesses unprofessional behavior to report the facts immediately to appropriate faculty or staff; we treat all such reports as confidential and do not tolerate reprisals or retaliations of any kind.

#### 4. Commitments of Students and Residents

- a. We pledge our utmost effort to acquire the knowledge, skills, attitudes, and behaviors required to fulfill all educational objectives established by the faculty.
- b. We cherish the professional virtues of honesty, compassion, integrity, fidelity, and dependability.
- c. We pledge to respect all faculty members and all students and residents as individuals, without regard to gender, race, national origin, religion, or sexual orientation.

- d. As physicians in training, we embrace the highest standards of the medical profession and pledge to conduct ourselves accordingly in all of our interactions with patients, colleagues, and staff.
- e. In fulfilling our own obligations as professionals, we pledge to assist our fellow students and residents in meeting their professional obligations, as well.

5. The occurrence, either intentional or unintentional, of any incident that violates the compact results in a disruption of the spirit of learning and a breach in the integrity and trust between teacher and learner. Further, the PLFSOM has a policy of zero tolerance for any type of discrimination or harassment. A student who feels that he/she has been the object of inappropriate behavior on the part of a faculty member, a resident, a staff person, or other student, shall report such behavior in a timely fashion to the Associate Dean for Student Affairs.

6. When an incident is reported, the Associate Dean for Student Affairs will coordinate with the student as his/her advocate to ensure that the appropriate policies and procedures of TTUHSC El Paso and the PLFSOM are invoked in the student's behalf (see Policy on Student- Faculty Disputes and Student-Student Dispute Resolution Policy). The procedures of the Code of Professional and Academic Conduct will also be followed as necessary in this process.

**Medical Student Code of Professional and Academic Conduct**

Medical professionals are expected, not only by patients but also by society as a whole, to possess certain attributes, which include, but are not limited to:

- 1. Altruism, whereby they subordinate their own interests to take care of their patients
- 2. High ethical and moral standards
- 3. Honesty, integrity, trustworthiness, caring, compassion and respect in their interactions with patients, colleagues and others.
- 4. Accountability, not only for their own actions, but also for those of their colleagues, which is the basis for the autonomy of the profession.
- 5. Maintaining confidentiality concerning the patient and the patient's records.



The PLFSOM expects medical students to exhibit these attributes.

**Medical Student Honor Code**

*In my capacity as a PLFSOM medical student, I will uphold the dignity of the medical profession. I will, to the best of my ability, avoid actions which might result in harm to my patients. I will protect the dignity of my patients and the deceased, and will protect their confidential information in accordance with the prevailing standards of medical practice. I will not lie, cheat, or steal. I will enter into professional relationships with my colleagues, teachers, and other health care professionals in a manner that is respectful and reflective of the high standards and expectations of my profession. I will not tolerate violations of this code by others and will report such violations to the appropriate authorities.*

**Academic Misconduct**

Below is an excerpt from the Code of Professional and Academic Conduct that describes academic misconduct:

**Note: The TTUHSC El Paso Code of Professional and Academic conduct can be found in its entirety on the TTUHSC El Paso Office of Student Services website at:**

<http://elpaso.ttuhsce.edu/student-services/documents/TTUHSC-EP-Institutional-Handbook.pdf>

**All PLFSOM students should read and be familiar with the contents.**

7. Academic Misconduct

a. A student who witnesses academic misconduct or who is approached with an offer to gain unfair advantage or commit academic misconduct is obligated to report that violation to the appropriate authority (See Part II.F). Failure to do so may result in disciplinary action. Faculty and staff are likewise responsible to report academic misconduct in accordance with Part II.F.

b. "Academic misconduct" involves any activity that tends to compromise the academic integrity of the University, or subvert the educational process, including, but not limited to, cheating, plagiarism, falsifying academic records, misrepresenting facts and any act designed to give unfair academic advantage to the student or the attempt to commit such an act.

c. "Cheating" includes, but is not limited to:

- i. Using any aid, sources and/or assistance beyond those authorized by the instructor in taking a course, laboratory, field work, quiz, test or examination; writing papers; preparing reports; solving problems; or carrying out assignments;
- ii. Failing to comply with instructions given by the person administering the test;
- iii. Using, buying, stealing, transporting or soliciting in whole or part the contents of an examination, test key, homework solution or computer program;
- iv. Seeking aid, receiving assistance from, or collaborating (collusion) with another student or individual during a course, quiz, test, examination or in conjunction with other assignment (including, but not limited to writing papers, preparing reports, solving problems or making presentations) unless specifically authorized by the instructor;
- v. Discussing the contents of an examination with another student who will take the examination;
- vi. Divulging the contents of an examination, for the purpose of preserving questions for use by another, when the instructor has designated that the examination is not to be removed from the examination room, be returned to or kept by the student;
- vii. Substituting for another person, or permitting another person to substitute for oneself to take a course, test or any course-related assignment;
- viii. Paying or offering money or other valuable thing to, or coercing another person to obtain an examination, test key, homework solution or computer program, or information about an examination, test key, homework solution or computer program;
- ix. Falsifying research data, laboratory reports and/or other academic work offered for credit;
- x. Taking, keeping, misplacing or damaging the property of the University, or of another, if the student knows or reasonably should know that an unfair academic advantage would be gained by such conduct;
- xi. Possession at any time of current or previous test materials without the instructor's permission;
- xii. Acquisition or dissemination by any means, without written permission, of tests or other academic material belonging to a member of the University community;
- xiii. Alteration of grade records;
- xiv. Bribing, or attempting to bribe, a member of the University community or any other individual to alter a grade;
- xv. Falsification, fabrication, or dishonesty in reporting laboratory and/or research results;
- xvi. Submitting substantially the same work to satisfy requirements for one course that has been submitted in satisfaction of requirements for another course, without specific permission of the instructor of the course for which the work is being submitted.

xvii. Possession during an exam of prohibited materials, including but not limited to study/review materials, class notes, review questions, etc.

d. "Plagiarism" includes, but is not limited to, the appropriation, buying, receiving as a gift, or obtaining by any other means another's work (such as words, ideas, expressions, illustrations, or product of another), in whole or in part, and the submission of it as one's own work offered for an academic credit or requirement. When a student presents the works of another (published or unpublished) in his/her academic work, the student shall fully acknowledge the sources according to methods prescribed by his/her instructor.

e. "Falsifying academic records" includes, but is not limited to, altering or assisting in the altering, of any official record of the University and/or submitting false information or omitting requested information that is required for, or related to, any academic record of the University. Academic records include, but are not limited to, applications for admission, the awarding of a degree, grade reports, test papers, registration materials, grade change forms and reporting forms used by the Office of the Registrar.

f. "Misrepresenting facts" to the University or an agent of the University includes, but is not limited to, providing false grades or resumes, providing false or misleading information in an effort to receive a postponement or an extension on a test, quiz, or other assignment for the purpose of obtaining an academic or financial benefit for oneself or another individual, or providing false or misleading information in an effort to injure another student academically or financially.

g. For additional information relating to the PLFSOM Academic Misconduct procedures, please refer to E.1.d.

### **Policy for Student Clearance**

1. All PLFSOM students must complete certain requirements in order to attend clinic or hospital assignments during their medical school curriculum whether in the TTP El Paso clinics, University Medical Center of El Paso or community clinics through the SCI course. This also applies to volunteer activities that occur in these locations (through student interest groups).

MS1 - Each student must complete the following prior to the first day of orientation:

- Immunizations as required by clinical affiliates (updated yearly)
- Basic Cardiac Life Support Certification
- Community Wide Orientation
- Evidence of Health Insurance coverage
- Criminal Background check
- STEPS (safety module)

MS2, 3 and 4s

- Yearly update of TB skin test
- BCLS recertification – if expired
- Community Wide Orientation
- Annual HIPAA online training
- Evidence of Health Insurance coverage
- Annual influenza vaccine in the fall
- Drug Screen (prior to Year 3)

2. Consequences of non-compliance:

Compliance with administrative duties can be predictive of future issues in professionalism. A student is expected to respond to reminder emails. If a student fails to complete the tasks by the established deadline, they are considered noncompliant.

If a student fails to meet the requirements as outlined above they would not be allowed to attend any clinical activities. Missing activities because of noncompliance would be an unexcused absence. The student may receive a negative grading consequence.

With the second episode of noncompliance, a notation citing their poor professionalism would be placed in their file. This could be included in the MSPE at graduation in regards to professional attributes.

A third episode of noncompliance would require the student be discussed at the Grading and Promotion Committee for lack of professionalism. (See GPC policy on how professionalism can impact progression in the curriculum).

### **Professional Accountability**

Process for reporting behaviors/professionalism evaluation

Teachers document on small group evaluation form if in small group activity (all students):

1. Teacher reports problem to course director.
2. First occurrence (alerted by small group evaluation or teacher concern): Course director meets with student and notifies College Masters (CMs) of concern.
3. Second occurrence: Course director forwards to CMs who meets with the student to discuss early trend.
4. Third occurrence: CMs send student to Associate Dean for Student Affairs (ADSA) to discuss.

Documentation:

1. Course director notifies the College Masters when he/she meets with a student for an initial complaint by email (in writing).
2. CMs will review any and all advisory sessions at the end of the semester for professionalism comments and discuss negative trends with the student to plan ways for student to change behaviors. (This meeting should be documented.) Students are encouraged to meet with their CMs each semester to review their progress and this would be one aspect included in that meeting.
3. At the end of year one and two, the student's CMs will review all professionalism comments and give a summary of the student's progress to date in professionalism (end of year professionalism report). For year one, this will be a formative report so that the student knows what areas need improvement. For year two, this will be a summative comment that will be included in the Medical School Performance Evaluation (MSPE or Dean's letter) that is distributed to residency application sites. Students may challenge comments in their portfolio by following the "Challenging Student Records or Grades Policy".

## **CLASSROOM AND CLINICAL POLICIES**

### **Attendance Policy (also found in Common Requirements)**

Attendance during Pre-clinical years:

During your years at the TTUHSC El Paso Paul L. Foster School of Medicine, attendance and participation in all scheduled activities is expected. This is part of the professional commitment to medicine that you assume as a medical student. Our curriculum has many laboratory and small group experiences that would be hampered if members of the group choose not to come to class. As a member of the learning community, your absence can impact your fellow students through your lack of participation, and may adversely affect your own success in medical school. **Each course may have specific experiences that require your attendance so each course or clerkship will establish their own attendance policy.**



**No credit will be given for any graded exercise missed without a valid excuse. See the *Missed Graded Activities Policy*.**

#### How to Report an Absence – preclinical:

In Years 1 and 2, all absences must be reported to the Office of Student Affairs via the official reporting email system. Student must email [plfabsence@ttuhsc.edu](mailto:plfabsence@ttuhsc.edu) or click on the Report Absences link on the homepage of the Office of Student affairs: [www.ttuhsca.edu/fostersom/studentaffairs](http://www.ttuhsca.edu/fostersom/studentaffairs). We will need the following information: name, date and time of missed activity, college master, and reason for absence. Only illness, healthcare appointments, personal emergency, or previously approved school-sponsored activities will be excused. If the absence is excused, Student Affairs will notify all appropriate faculty and staff within 72 hours of the event of the excused absence.

#### Attendance in Clinical Years:

Attendance at clinical duties and didactics is mandatory. Unexcused absences will not be tolerated and may result in disciplinary action, potentially including a requirement to repeat a clinical block or rotation. Students have allotted institutional holidays as stated in the student handbook and on each academic calendar.

Students assigned to WBAMC will be excused from duty on institutional holidays. Students will be expected to work on Military Training Days that do not coincide with institutional holidays. If the clinic the student is assigned to is closed, the student will be assigned duties on campus for the day.

Students are required to attend both the first and last days of the rotation. The only excused absences will be for interviews, illnesses (with doctor's note), or documented family emergency. Students will not be excused in order to depart for an away or international rotation.

Absences are only excused at the discretion of the Clerkship/Course Director. Commonly excused absences include:

- Illness/Healthcare appointments
- Family Emergency
- Death in the Family
- Religious Holidays (please see the Religious Holy Days Policy below)
- Presenting at a National Conference
- Interviews for Residency (MS4 only)

#### Absences in the Third Year

During the third year, a student is expected to attend all clinical and didactic activities. If a student will be absent for any activity, they must obtain approval from the Clerkship Director. If the Clerkship Director determines that a student's absence(s) compromises the student's ability to attain the necessary competencies, they may require the student to make up days or complete alternate assignments. If a student is required to make up time, this must be completed during unscheduled time and the hours worked must be in compliance with the duty hour policy.

If a student is absent more than 4 days per block or 12 days during third year, it will be reviewed by the Associate Dean for Student Affairs. Excessive absences could be a violation of the Student Code of Conduct and may be forwarded to the Grading and Promotions Committee.

In the event of an emergency that results in an absence from clerkship duties, the student must notify the Clerkship Coordinator AND the Office of Student Affairs as noted above as soon as possible.

#### Absences in the Fourth Year

In the fourth year, a student may have no more than **three** excused absences in a 4 week block without having to make up that time. **However**, if the Clerkship/Course Director determines that a student's absence(s) compromised the student's ability to attain the necessary competencies, they may require the

student to make up days or assignments, regardless of the number of days missed. It is also at the discretion of the Clerkship/Course Director to give the student an alternate assignment to satisfy all or part of the make-up time. If a student is required to make up time, this must be completed during unscheduled time and the hours worked must be in compliance with the duty hour policy.

If a student is absent more than 6 days in a semester during fourth year, it will be reviewed by the Associate Dean for Student Affairs. Excessive absences could be a violation of the Student Code of Conduct and may be forwarded to the Grading and Promotions Committee.

#### Notification of Absence (Third and Fourth Year)

When a student is going to be absent, they are required to notify: 1) the Clerkship Coordinator BEFORE their shift begins. Acceptable forms of notification are: email (preferred), phone call, or text message.

**Please see individual Clerkship Syllabus for Clerkship-specific contact requirements; 2) The Office of Student Affairs by emailing [plfabsence@ttuhsc.edu](mailto:plfabsence@ttuhsc.edu).**

#### Documentation of Absence (Third and Fourth Year)

If a student is absent:

- **Orientation Day** (MS3 and MS4) is a **Graded Activity**. Therefore a doctor's note on the healthcare provider's letterhead or prescription paper is required if Orientation is missed. The absence is subject to the institution's Missed Graded Activities Policy. Please see the [Student Affairs Handbook](#) for more information.
- **More than two consecutive days due to illness:** a doctor's note on the healthcare provider's letterhead or prescription paper is required.
- **When presenting at a national conference:** a copy of the invitation to present and travel itinerary is required.
- **When interviewing for residency** (MS4 only): a copy of the invitation to interview and travel itinerary is required.

#### Requests for Absences for Planned Activities

No student will be excused from an exam or graded activities for any reason unless due to illness or emergency situation or for an approved university event. This would require a letter from a dean to acknowledge university approval.

If a student wishes to be excused from class or clerkship responsibility to present a poster or paper at a professional meeting as a school-related function, he/she must first obtain permission from the Associate Dean for Student Affairs as far in advance of that absence as possible. Students wishing to attend a meeting as a participant rather than as a presenter must discuss with the course or clerkship director. In third and fourth year, that absence would be at the discretion of the clerkship director.

#### Religious Holy Days (See TTUHSC EL PASO OP 77.12)

- a. A student who intends to observe a Religious Holy Day should provide written notice, at the earliest possible date prior to the absence, to the following: (1) the course directors of classes that will be missed and (2) the Associate Dean for Student Affairs. A student will be excused from attending class(es), examinations, or other required activities for the observance of a Religious Holy Day, including travel for that purpose. A student whose absence is excused under this section will be allowed to take an examination or complete an assignment within a reasonable time and as determined at the sole discretion of the instructor of record and/or the Associate Dean for Student Affairs before or after the absence.
- b. A student who is excused under the above provision may not be penalized for the absence; however, the instructor may appropriately respond if the student fails to satisfactorily complete the missed assignment or examination within the time frame set by the instructor.
- c. Any disputes regarding this policy should be submitted in writing to the TTUHSC EL PASO President or his/her designee. Any decision by the President or his/her designee regarding the dispute shall be final.

- d. This policy does not apply to any student absence for a Religious Holy Day which may interfere with patient responsibilities or patient care.

#### Summary of absence policy:

- a. Year 1 and 2 – as directed by individual course directors in their syllabi
- b. Year 3 – not to exceed 4 days per block or 12 days per year
- c. Year 4 – not to exceed 3 days in a 4 week block or 6 days in a semester

#### Missed Graded Activities Policy

1. If a student is unable to take an exam or other graded activity at the scheduled time due to illness or a personal emergency, they must notify Student Affairs via the official absence email ([plfabscence@tuhscc.edu](mailto:plfabscence@tuhscc.edu)). In Years 3 & 4, the student the clerkship director or preceptor directly. All activities must be made up within **one week** of the scheduled activity.
2. If the absence from the scheduled exam is due to illness the student must bring a doctor's note to the Student Affairs or Clerkship Director. Students will also be directed to contact the course or clerkship director of the department in question so that the exam can be made up within one week as stated in the attendance policy.
3. NBME examination make-up in the third or fourth year should be arranged with the Office of Medical Education and will be allowed more than one week.
4. **No credit will be given for any graded or required exercise missed without a valid excuse.** If the student believes this consequence is not appropriate to their particular situation, they may appeal this in writing to the Associate Dean for Student Affairs who will in turn consult with the course/clerkship director responsible for the exam, and one other course/clerkship director from that year to determine if this prescribed course of action is appropriate. In the event that a second exam is missed and again the designated procedures are not followed, the student will meet with the Student Affairs Committee.
5. Students may appeal any decision on absences to the Student Affairs Committee. (Grades are appealed under a separate policy.)

#### Classroom Behavior Policy

Students are expected to demonstrate professional behavior in the classroom as demonstrated by punctuality, respect for others' opinions, attentiveness, and courtesy.

#### Dress Code Policy

All students are expected to dress in appropriate professional attire during the entire course of their medical school education at the PLFSOM in the classroom, clinic or hospital. Professional dress would include (but not be limited to) clean clothing, no holes, no open toe shoes, no shorts, no sweats.



The student is expected to be compliant with the OSHA guidelines when seeing any type of patients – standardized or real patients - or during any lab experience.

Hats, caps, and other head gear are not permitted in the classroom. Only headgear worn for religious purposes and approved in advance by the Office of Student Services is permissible.

Bluetooth headsets for phones should not be worn in the classroom setting.

### **Electronic Devices in the Classroom Policy**

The use of electronic devices in the classroom setting (i.e., laptop computers, PDAs, etc.) is to be limited to that which is necessary for that particular class.

Cell phones are to be turned off or placed in vibrate mode.

***Unauthorized use of audio and videotaping is prohibited.***



### **Testing Policy**

1. All formative and summative computer testing will be done at a designated location with secure access. The student will not be allowed to bring anything into the room during the testing so they should allow ample time to store their belongings. (Lockers are available in the colleges.) Scratch pads, calculators and other items needed for the test will be provided.
2. Tests are the property of the faculty who have provided questions to assess student knowledge and provide the students with feedback to improve their performance for the unit and course tests as well as the national licensing tests (USMLE). *Any unauthorized reproduction of test items by any method is a serious breach of the Medical Student Code of Professional and Academic Conduct and will result in disciplinary action up to and including dismissal from the School of Medicine.*

### **Duty Hours Policy**

Preamble: The PLFSOM has the responsibility to develop and implement work hour policies for medical students, especially those on clinical clerkship rotations, in accordance with LCME ED-38. These policies should promote student health and education.

1. Students should not be scheduled for on-call time or patient-care activities in excess of 80 hours per week.
2. Students should not be scheduled for more than 16 continuous hours.
3. Students should have 10 hours free of duty between scheduled duty periods.
4. Students should have at least one day off each week averaged over a one month period.
5. Students should not have more than 6 consecutive nights on night float duty.
6. This policy applies to all clerkships/rotations in the third and fourth year at PLFSOM.
7. The clinical departments will determine the frequency of overnight call, but it should not be more frequent than every 4th night.
8. It is anticipated that student attendance at clerkship seminars, conferences, and other didactic sessions will be facilitated by this policy and that provisions in this policy are not the basis for missing these sessions. Requests for excused absences from these sessions should be submitted to the clerkship director or his/her designees on an individual basis.
9. Variances from this policy must be approved by the Associate Dean for Student Affairs.

### **Evaluation participation policy**

All students are expected to participate in the evaluation system at PLFSOM. The expectations are set out in the *Faculty Evaluation & Reporting Policy* and the *Course Evaluation & Reporting Policy* (available at <http://elpaso.ttuhsu.edu/som/ome/CEPC/policies.aspx>). The expectations laid out below are synopsized from these policies.

Evaluations expected of students consist of course and teaching evaluations. Expectations depend on where a student is in their course of study. Students in the M1 & M2 years are expected to complete a minimum of:

<b>Units</b>	<b>Course Evaluations Expected</b>	<b>Faculty /Facilitators Evaluations</b>	<b>Due</b>
<b>Immersion</b>	SCI Course	Up to 5 faculty evaluations (may be reduced based on content)	10PM MT Thursday after end of immersion unit
<b>End of Each Unit:</b>	SPM Unit Med Skills Unit SCI Spanish	5 Faculty	10PM MT 5 days after the SPM unit test
<b>End of Final Unit of semester:</b>	SPM Unit Med Skills Unit SCI Master's Colloquium	5 Faculty 2 Masters	10PM MT 5 days after the test
<b>Clerkship Preparation Course</b>	Course evaluation	2 Faculty	10PM MT 5 days after the test

For students in their clerkship years, the expectations are:

<b>Course type</b>	<b>Course Evaluations Expected</b>	<b>Faculty/Resident/Fellow or Coordinator Evaluations</b>	<b>Due</b>
<b>M3 Clerkships</b>	Block plus 2 clerkship	4 per Clerkship (faculty or resident)	8AM MT Monday after last NBME
<b>M4 courses at PLFSOM</b>	Course	1 (faculty or resident)	8AM MT Monday after course ends
<b>M4 Away Rotations</b>	Course	--	8AM MT Monday after course ends

M1 & M2 students will be assigned faculty to evaluate. In the event that the student does not believe they saw the faculty member, s/he is expected to decline the evaluation and complete a voluntary evaluation on the faculty member of their choice (evaluation of Spanish faculty is encouraged). M3 & M4 students are expected to choose the individuals they evaluate.

Participation in evaluations is considered an indicator of both professional citizenship and general professionalism. Throughout their careers, physicians are required to submit paperwork under time limits and other pressures. In many ways, the evaluation system is a platform for students to begin to learn the skills for dealing with such demands.

Evaluations completed by students are used for curricular review/improvement and faculty accountability. Course results, reported in aggregate after grades are submitted, are provided to curriculum committees, course directors, faculty, deans and department chairpersons. Faculty/resident results are reported to the specific faculty/resident and their supervisors. Identified trends of concern are also reportable to the Associate Dean for Student Affairs and the Associate Dean for Medical Education. In addition to curricular review/improvement and faculty accountability functions, accreditation and research drives the expectation

of participation. Curriculum reviews at the end of each course, year, and every 3 years include the results of evaluations. Evaluation ratings for faculty are used both for performance reviews and promotion and tenure applications.

LCME requires that schools have a robust evaluation system with high levels of student involvement. Research indicates that professionalism at the undergraduate medical education level is predictive of later professionalism issues. On these bases, we have established consequences for non-compliance.

Consequences for non-compliance:

All students will receive professionalism assessments at the end of each required evaluation period. The assessments indicate if the student met the expectation, was late (evaluations close for participation the day after the deadline), or failed to submit one or more evaluations. Additionally, students may receive an assessment on their communication skills as appropriate.

The professional citizenship assessments contribute to the College Master annual summaries. For year one, this will be a formative report so that the student knows what areas need improvement. For year two, this will be a summative comment that will be included in the Medical School Performance Evaluation (MSPE or Dean’s letter) that is distributed to residency application sites. (See Professional Accountability policy) Students may challenge comments in their portfolio. (See Challenging Student Records or Grades policy).

Information about assignments, any changes, or other information about evaluation requirements will be communicated via email. Students are expected to read emails in their entirety and request clarifications before the deadline. Students will not receive warnings prior to receiving professionalism assessments. Students may view assessments in their e-portfolios in the evaluations tab.

**Medical Education Program Policy**

<b>Policy Name:</b>	<b>Bring Your Own Device (BYOD) Policy</b>				
<b>Policy Domain:</b>	Academic Technology	<b>Refers to LCME Element(s):</b>	5.8 Library Resources 5.9 IT Resources		
<b>Approval Authority:</b>	Curriculum and Educational Policy Committee	<b>Adopted:</b>	1/26/2018	<b>Date Last Reviewed:</b>	
<b>Responsible Executive:</b>	Associate Dean for Medical Education	<b>Date Last Revised:</b>	1/11/2018		
<b>Responsible Office:</b>	Academic Technology	<b>Contact:</b>	Jose V. Lopez: <a href="mailto:Josev.lopez@ttuhsc.edu">Josev.lopez@ttuhsc.edu</a> Robin Dankovich, Ed.D.: <a href="mailto:robin.dankovich@ttuhsc.edu">robin.dankovich@ttuhsc.edu</a>		
<b>Related Policies:</b>	<ol style="list-style-type: none"> <li>1. <a href="#">56.50 - Access Control (AC)</a></li> <li>2. <a href="#">52.09, Confidential Information</a></li> <li>3. <a href="#">56.04, Electronic Transmission of Personally Identifiable Information (PII) and Protected Health Information (PHI)</a></li> <li>4. <a href="#">52.14, HIPAA Sanctions Process</a></li> <li>5. <a href="#">56.01, Use of Information Technology Resources</a></li> </ol>				

- I. **Policy Statement:** Students in the Paul L. Foster School of Medicine (PLFSOM) are responsible for obtaining and maintaining electronic devices in accordance with current technical specifications for full participation in the M.D. degree program.
- II. **Reason for Policy:** This policy is intended to ensure that all medical students have appropriate access to the data and information technology required for their participation in the program.
- III. **Who Should Read this Policy:** All PLFSOM students, course/clerkship directors, educational program administrators, and PLFSOM academic information technology (IT) support staff.
- IV. **Resources:** This policy is administratively supported by the Office of Medical Education (with technical support from the PLFSOM's academic IT team).
- V. **Definitions:**
  - **Bring Your Own Device (BYOD):** The general expectation that students will use their own electronic device(s) -- such as laptops, smartphones, and tablets -- in the PLFSOM/Texas Tech University Health Sciences Center El Paso (TTUHSC El Paso) learning environment.
- VI. **The Policy:**
  - I. All students must have a laptop to enable access to course materials, assessments and information (tablets and smartphones are not sufficient for this purpose).
  - II. Students must select laptops that meet the minimum technical specifications as stated below (see item VIII).
  - III. TTUHSC El Paso and PLFSOM are not responsible for the consequences of a student choosing to use a device that does not meet the minimum technical specifications.
  - IV. Students must avoid potential breaches of privacy or confidentiality at all times, but particularly when using the Internet and social media. Students are expected to take precautionary measures including the use of more secure means of communicating as required.
  - V. Students must act in accordance with privacy legislation regarding the collection, storage, and disclosure of personal information and maintenance and use of health records.
  - VI. Students must not access or store patient information on a personal device.
  - VII. Students are expected to respect administration, faculty, and tutor directions about using or shutting-off devices during certain educational activities, including a faculty member's decision not to be recorded.
  - VIII. Minimum technical specifications (to be reviewed annually, prior to May 1<sup>st</sup>):  
The following requirements are subject to change. Any updates to the minimum technical specifications will be announced by e-mail (distributed to all listed above as those who should read this policy). Ordinary technical updates to the BYOD technical requirements do not require review or approval by the Curriculum and Educational Policy Committee, and will be administered by the Office of Medical Education.

### BYOD Minimum Technical Specifications

Win 7, Win 8, Win 10	Mac OS X ver. 10.8, 10.9, 10.10, 10.11
1.86 GHz Intel Core 2 Duo processor	Intel processor
2 GB RAM	
1 GB available HD space	
17" or larger monitor (Desktops)	
13" or larger monitor (Laptops)	

Minimum screen resolution: 1024x768, 32 bit color setting	
Internet Explorer 8, 9, 10, 11	Safari 5.1.9 or higher
Chrome 34.0.1847 or higher	
Firefox 29 or higher	
Browser settings:	
- Javascript enabled	
- Cookies enabled	
- CSS enabled	
- Disable pop-up blockers	
Broadband internet connection (DSL, Cable or T1)	
Network bandwidth of 256 Kbps or higher per workstation (including internet access)	
Working USB port required (ExamSoft)	

- **Do not use browser beta versions. Only those listed are supported.**
- **Workstation certification for NBME exams must be performed on test day at least 10 minutes prior to exam on all laptops that will be used for testing.**
- **iPads, tablets, and laptops with integrated touchscreens are not recommended overall nor allowed for testing.**
- **Virtual machines and applications are not allowed.**
- **Laptop devices should be able to connect to both Ethernet/wired and wireless networks (newer systems may require a network adaptor).**
- **Students are responsible for care, repairs, and security of their laptop's devices and peripherals (e.g., mouse, power supply, network cables).**

- IX. Student non-compliance with this policy, including the use of non-conforming personal devices for testing, may result in any of the following:
- a. School-designated administration of the affected student's test on an institutionally provided device (subject to availability).
  - b. School-designated change in the modality of the affected student's test (for example, administration of a paper version).
  - c. School-designated changes in the affected student's test setting and/or location.
- In addition, student non-compliance may result in the reporting of a professionalism concern to the Office of Student Affairs, and potential referral to the Grading and Promotions Committee.

## Grading and Promotion Committee Policies and Procedures

### GRADING POLICIES

### Promotions Policies & Procedures

#### 1. Introduction

The responsibility for evaluation of students rests with the faculty of the TTUHSC El Paso PLFSOM. Faculty have an obligation to the students, to the school, and to the larger society to award passing grades only to those students who have demonstrated mastery of the course material. In addition to evaluation of students'



knowledge and skills, the faculty has the obligation to determine whether students' behavior or conduct is suitable for the practice of medicine. It is inappropriate to allow a student to progress or graduate when unacceptable behavior or conduct in the treatment and care of patients and/or in relationships with staff and peers have been established, even if grades on tests or other forms of evaluation have been satisfactory.

The faculty of the PLFSOM has the responsibility for recommending students for promotion and graduation. This responsibility is administered through the Grading and Promotion Committee (GPC) that represents the faculty at large. Every attempt will be made to apply principles of fairness and due process when considering actions of the faculty or administration that might adversely affect the students. Comments, questions, and concerns should be directed to the Office of Student Affairs.

## 2. Students covered by this policy

These grading and promotions policies apply to students enrolled in the courses necessary to complete the requirements for the Doctor of Medicine degree in the TTUHSC El Paso PLFSOM. These policies do not cover the course work done for the other degree programs in which the student may be enrolled.

## 3. Responsibilities for monitoring of student progress:

The Associate Dean for Student Affairs in conjunction with the College Masters and the Associate Dean of Medical Education is responsible for monitoring the progress of medical students during their course of study in order to provide or refer students to the appropriate academic or personal counseling services, if applicable. The office of Student Affairs will provide staff support to the GPC and will maintain permanent minutes of GPC actions. The Associate Dean for Student Affairs serves as advocate for due process for students.

## 4. Responsibilities of the GPC

The GPC is a committee of the faculty appointed by the Dean with recommendations by the Faculty Council and is charged with the responsibility to review and evaluate the academic and behavioral progress of each medical student enrolled at the TTUHSC El Paso PLFSOM. It is not a policy making body but rather applies the policies that are approved through the Curriculum Education Policy Committee and the Faculty Council.

## 5. Responsibilities of the Dean

The Dean, as the Chief Academic Officer, has the final responsibility for actions taken regarding a student. The initial recommendation and subsequent action for each student are delegated to the GPC. However, the Dean is responsible for executing the appeals process in which a final decision is made.

## 6. Grading and Promotion Committee

- a. The voting members of the Grading and Promotion committee consists of nine faculty, three basic scientists involved in teaching in the first and second year, three clinicians involved in teaching in the first and second year and three clinicians involved in teaching in the third and fourth year.
- b. The Associate Dean for Student Affairs and the Associate Dean for Medical Education serve as ex-officio members, with voice but without vote.
- c. The chair and chair-elect are elected by the committee from its members.
- d. The proceedings of all meetings are held confidential in accordance with the Family Educational Rights and Privacy Act of 1974. The proceedings and decisions of the GPC are privileged information. GPC members may not discuss particular cases or the outcome with anyone outside the GPC.
- e. All committee decisions requiring a vote are determined by a simple majority vote with the Chair as a voting member. Five members of the committee constitute a quorum at a regular or called meeting. The Chair and Chair-elect may, in urgent cases, consult with the Associate Dean for Student Affairs regarding an emergency leave of absence for a student in academic difficulty. The Chair, Chair-elect, and Associate Dean will set the conditions for return from a leave of absence, with approval of the Dean.

## 7. Review of Year 1 and 2 coursework

All courses for the first two years at the TTUHSC El Paso PLFSOM are Pass/Fail. Please consult the individual course syllabi for specific grading policies for each course.

Progress of a student will be reviewed by the GPC at least at the end of each semester in the context of all course work, student's professionalism, evidence of progressive improvement and personal circumstances.

a. Semester Review – January of each year

Committee will consider all students after completion of the fall semester.

- i. If a student has passed all courses satisfactorily – no further discussion.
- ii. If a student is considered “at risk” they will be placed on academic watch level 1 or 2 at the discretion of the committee. (See Academic Standing policy). A proposed learning plan will be devised in order to strengthen identified deficiencies.  
Definition of “at risk”:
  - a. Incomplete on one semester course:
    - a. SPM
      - i. One unit – Academic Watch level 1
      - ii. Two units – Academic Watch level 2
    - b. SCI, Medical Skills, Masters’ Colloquium
      - i. Academic Watch level 1
  - b. Incomplete on two semester courses (i.e. 2 SPM units and SCI course)
    - i. Meet with GPC for consideration of individual remediation or repeat of the year
    - ii. Academic Watch level 2
  - c. Course director identifies the student at risk based on performance on given disciplines or low test scores
  - d. College master concern
  - e. Professionalism concern
- iii. Failure of any semester course at the semester consideration by committee:
  - a. One semester course failure – consideration for either remediation as recommended by the course director or restarting the year at the next academic year
  - b. Two semester course failures – consideration for restarting the year at the next academic year or dismissal
  - c. Three or four semester course failures –Dismissal

b. Year Review of Progress

Committee will consider all students after completion of the spring semester.

i. Year 1 students

- a. If a student has passed all courses satisfactorily and passed the CEYE - promotion to second year.
- b. If a student is “at risk” as defined below they will be placed on academic watch and remediation may be required :
  - Incomplete on one semester course (see levels of academic watch above)
  - Incomplete on two semester courses consideration by the GPC for individual remediation or repeat of the year (if eligible) and placed on academic warning.
  - Course director identifies the student at risk based on performance on given disciplines or low test scores
  - College master concern
  - Professionalism concern
  - Failure on CEYE first attempt
- c. Failures –will be placed on Academic Warning if repeating the year or as considered by committee
  - One semester course in year – repeat of year or individualized remediation
  - Two or more semester courses in year – repeat of year or dismissal
  - Failure of CEYE on 2 attempts – repeat of year or individualized remediation
  - Failure of three or more semester courses – dismissal

c. Year 2 student

- i. If a student has passed all courses satisfactorily they are eligible to sit for Step 1 and promotion to third year.
- ii. If a student is “at risk” as defined below they will be placed on academic watch and remediation may be required :
  - i. Incomplete on one semester course (see levels of academic watch above)

- ii. Incomplete on two semester courses consideration by the GPC for individual remediation or repeat of the year (if eligible) and placed on academic warning Course Director identifies the student at risk based on performance on given disciplines or low test scores
  - i. College master concern
  - ii. Professionalism concern
- a. Failures – will be placed on Academic Warning if repeating the year or as considered by committee
  - a. One semester course in year – repeat of year or individualized remediation
  - b. Two semester courses in year – repeat of year or dismissal
  - c. Failure of three or more semester courses – dismissal
  - d. Failure of Step 1 on three attempts – dismissal
- iii. Timeline – completion requirement for remediation:
  - a. Year 1 students - July 1 after completion of Year 1 (or prior to orientation of next Year 1)
  - b. Year 2 students - May 1 to complete the semester work, Must take Step 1 prior to Year 3 orientation in order to begin Year 3 on schedule; AND one calendar year after completion of year 2 to complete the three attempts of Step 1. (See 3d for GPC action if fails Step 1.)
  - c. Student must be available for scheduled remediations and may not attend off campus school related activities (SARP, other research) until they have successfully completed their requirements.
  - d. Students repeating a year – The Grading & Promotion requirement for a repeat year may be more restrictive than that for a first time student. The requirements will be defined in the individual student’s letter from the committee and must be adhered to.
  - e. The first 2 years of medical school must be completed within three years including leaves of absences or repeating of the year.

**Important Notes:**

Remediation is recommended by the course director and agreed to by the GPC. Students may be dismissed without academic watch or warning ever being designated. The GPC may also choose to remove “Good Standing” as a disciplinary action.

**8. Grading & Promotions Committee (GPC) Review of Year 3 and 4**

All courses for the Year 3 and 4 at the TTUHSC El Paso PLFSOM are Honors/Pass/Fail. Progress of a student will be reviewed by the GPC after each block in the context of all course work, student’s professionalism, evidence of progressive improvement and personal circumstances. The GPC may place a student on academic watch or warning or revoke Good Standing if there are concerns regarding professionalism.

**a. Grading and Promotion Committee Review for Year 3**

If	Then
Failure of one clerkship: <ul style="list-style-type: none"> <li>a. Fail clinical component OR</li> <li>b. Fail Professional component OR</li> <li>c. Fail 2 attempts at the NBME OR</li> <li>d. Fail 2 attempts at the OSCE</li> </ul>	<ul style="list-style-type: none"> <li>a. One month remediation in the fourth year in that discipline without receiving elective credit OR</li> <li>b. Repeat of third year OR</li> <li>c. Dismissal</li> </ul>
Failure of two clerkship (same definition as above)	<ul style="list-style-type: none"> <li>a. Remediation* OR</li> <li>b. Repeat of year OR</li> <li>c. Dismissal</li> </ul>
Failure of the NBME in three different clerkships (on first attempt)	<ul style="list-style-type: none"> <li>a. Remediation* OR</li> <li>b. Repeat of the third year OR</li> <li>c. Dismissal</li> </ul>
Failure of three clerkships	<ul style="list-style-type: none"> <li>a. Repeat of third year OR</li> <li>b. Dismissal</li> </ul>

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Rating of "Needs Improvement" in the same competency on three or more Clerkship Final assessments

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- a. Remediation\* OR
  - b. Repeat of third year OR
  - c. Dismissal
- 

**\* The remedial work will not be counted as elective time in satisfying the conditions for graduation.**

b. Grading and Promotion Committee Review for Year 4

- i. Failure of a required or elective experience in the fourth year – review by GPC for remediation, repeat of year or dismissal.
- ii. Failure of more than one block in year 4 – review for remediation, repeat of the year or dismissal.
- iii. Failure of Step 2 CK or CS on first attempt – no review required by GPC but student must log a pass of CK and CS by May 1 in order to graduate in May.
- iv. Failure of Step 2 CK or CS on the second attempt – discussion by GPC of remediation and delay of graduation.
- v. Failure of Step 2 CK or CS on the third attempt - Dismissal.

9. Transcript notation

When a student receives a failing grade in a semester course that does not require a repeat of the year a grade of "F" (Fail) will be entered in the transcript with a notation of "Successfully Remediated" when the remediation is complete. If a student repeats a year, the transcript will list both attempts at the course with a "RP "(repeat) notation after the courses from the first attempt and the final grade of the second attempt at the course.

10. Documentation of Student Academic Performance

All grades will be recorded in WebRaider for each student and will be available in the student's electronic portfolio. TTUHSC Office of the Registrar in Lubbock maintains the official transcript of all students.

11. Promotion Policies

Normal progression through the PLFSOM curriculum requires that a student demonstrate a consistently satisfactory level of performance and professional behavior. Students will be expected to complete the medical school curriculum within four (4) years of the initial date of matriculation.

The curriculum may be extended due to 1) a leave of absence, 2) academic difficulty requiring repetition of an academic year as per this policy. However, inability to complete Years One and Two of the curriculum in three years and/or the entire curriculum within six (6) years will result in dismissal.

12. General Issues

- a. The committee is not bound by categorical or arithmetic assessment of student performance but rather reviews each student in the context of his/her academic achievement and any other circumstances that may influence performance. If a student exhibits conduct or behavior inconsistent with a potential physician, a course or clerkship grade of Fail may be given. Such conduct or behavior that occurs beyond the boundaries of a class or rotation may also be considered by the GPC. In that case, the student will be referred for disposition of the case under the Code of Professional and Academic Conduct in the TTUHSC El Paso PLFSOM Student Affairs Handbook.
- b. For a course being remediated, a transcript notation of "successfully remediated" will be attached to the original failing grade when successful remediation is accomplished.
- c. Failure to successfully remediate a course in Years 1 and 2 according to course standards before the start of the next academic year will result in repetition of the entire year in which the failure occurred.
- d. Final grades will be reviewed at the end of each semester. Students who receive a grade of Fail may meet with the GPC to discuss their academic performance and possible actions by the

committee. For deliberations not delegated to the Chair and Chair-Elect, the Committee will be convened.

- e. If a student repeats an entire academic year, the new grades are recorded on the transcript in addition to the original ones.
- f. Students who are required to repeat an academic year may not take courses from the next academic year during the period of repetition.
- g. Students reviewed by the GPC will be notified in writing of the GPC decision with any stipulations for continuation in the curriculum.
- h. A final grade in each course or clerkship may be derived from the component scores. The components for evaluation are defined by each course or clerkship.
- i. Repetition of the clerkship and remedial work, as defined and prescribed above, will not be counted as elective time in satisfying the conditions for graduation.
- j. The completion of the medical school curriculum within the above standards and the approval of overall performance by the GPC are required for graduation. The Student Affairs Office will annually present to the Dean and HSC Registrar a list of candidates for receipt of the Doctor of Medicine Degree based on the above.

### 13. Notification of Students with Satisfactory Progress

The Office of Student Affairs will notify students in writing if they need to meet with the GPC and the outcome of their deliberations. All other students will proceed through the curriculum with no formal notice of promotion.

### 14. Deliberations of GPC

- a. Each student who has demonstrated unsatisfactory progress in the curriculum as defined above will be subject to the courses of action as previously set forth in this policy. When meeting with a student on an issue related to academic performance, the GPC may also take into account a prior history of sanctions for misconduct in making a determination.
- b. At a hearing with the GPC, the student will be expected to discuss their academic performance and to propose a course of action to address the academic deficiencies. Following the hearing with the student, the GPC may then vote for a course of action. With a quorum present, the committee action will be determined by a majority vote.
- c. The determination and stipulations arising from the actions of the GPC will be communicated in writing by the Chair of the GPC to the student and the Dean. The student may appeal a decision by the GPC under Section 15 and 16.
- d. Following the final decision, the Offices of Accounting Services, Financial Aid, Registrar and other pertinent HSC offices are to be notified in writing by the Office of Student Affairs of the dismissal of a student or repetition of a year by a student.

### 15. Dismissal and Appeals Policies

- a. A student shall be dismissed if the GPC determines that the student has not performed satisfactorily in academic pursuits, is not competent to pursue the assigned course of study, or has been deemed by the GPC, for just reason, unfit to continue the study of medicine. The student shall be notified in writing of the action of the GPC.
- b. A student may appeal the decision of the GPC. This appeal must be made to the Dean of the School of Medicine within five (5) business days, must be in writing, and must cite grounds for the appeal. An appeal may only be based on a claim that due process of GPC policies and procedures was not followed.

### 16. Appeals Procedure

- a. A student shall appeal a decision by the GPC within five (5) business days of notification of the decision by submitting to the Dean through the Associate Dean for Student Affairs a written notice of appeal containing a detailed basis for the request.
- b. The Dean may issue the decision alone or may appoint an Appeals Committee comprised of three members of the senior faculty to determine whether a basis for appeal exists. The Associate Dean for Student Affairs and the Chair of the GPC (or designee) will serve as ex officio members of the Committee.

- c. The Appeals Committee will be convened by the Associate Dean for Student Affairs within five (5) business days after appointment to consider the student's 'appeal.
- d. The student shall notify the Associate Dean for Student Affairs in advance if he/she is to be accompanied by an attorney or other representative. An attorney or representative may appear only in an advisory capacity and may not address the Appeals Committee. Should the student be accompanied by an attorney or representative, the School of Medicine shall be represented by the Office of General Counsel. If necessary, the appeal hearing may be delayed up to **five (5)** business days of the scheduled date if needed to allow personnel from the Office of General Counsel to attend.
- e. The student may present a statement to the Appeals Committee relative to the appeal. Collection of additional information to resolve the issue may be pursued. Both the Appeals Committee and student may call witnesses relevant to resolution of the appeal. Should information or witnesses be either repetitious or not relevant, the Appeals Committee shall take action to expedite the proceedings. At the conclusion of the hearing, the Appeals Committee shall forward its recommendation to the Dean. If the recommendation is not unanimous, a minority view will be appended.
- f. Unless suspended for some justifiable reason, the student shall remain on the class roll and may pursue appropriate course work until the appeal is resolved.
- g. After reviewing the Appeals Committee recommendation (if applicable) the Dean will make a final decision. The decision of the Dean is final. The student and the Chair of the GPC Committee will be notified in writing by the Dean.

#### 17. Policy Regarding USMLE-Step I Exam

- a. In order to become fully licensed to practice medicine in the United States, individuals must have passed all 4 USMLE Step exams – Step 1, Step 2 Clinical Knowledge, Step 2 Clinical Skills, and Step 3. Each state's medical licensing board determines the number of attempts individuals may make at each Step in order to remain eligible for licensure. In Texas individuals are limited to 3 attempts on each Step.
- b. Students are expected to take Step 1 of USMLE prior to the start of Year Three. Students may request a delay in taking Step 1 if they have concerns regarding their readiness to take Step 1 and proceed with Year Three. A written request must be made to the Associate Dean for Student Affairs before the start of their third year.
- c. All students who take the USMLE Step 1 prior to the scheduled start of Year Three will be eligible to start the Year Three clerkship rotations. Passage of USMLE Step 1 is required for students to proceed in Year Three beyond the end of the first clerkship block.
- d. Students who fail USMLE Step 1 on their initial attempt will then be assigned to Independent Study to prepare for and retake Step 1. Students may return to the Year 3 curriculum upon passage of Step 1.
- e. Students cannot pursue any elective time in satisfying the conditions for graduation until they have passed Step 1 and completed any outstanding remediation for third year coursework.
- f. Inability to pass Step 1 within one year after the completion of Year 2 coursework or three unsuccessful attempts will result in review by the GPC and possible dismissal (see grid). Appeals regarding this issue will be handled as outlined in Sections 15 and 16 of the Promotions policy.

#### 18. Policy Regarding USMLE Step II Exam

- a. Passage of Step 2 Clinical Knowledge and Step 2 Clinical Skills will be required for graduation. Initial attempts at Step 2 exams must be taken by October 31 of the year preceding graduation. Students who fail to do so will not be allowed to participate further in clinical rotations until these exams are taken.
- b. Passing scores must be documented no later than May 1 of the year graduating. Failure to document a passing score by May 1 will result in a delay in graduation.

#### 19. GPC Role Regarding Allegations of Student Misconduct

- a. If allegations of misconduct arise, an Ad Hoc committee (Student Conduct Board per TTUHSC El Paso Student Affairs Handbook Code of Professional and Academic Conduct) will be appointed by the Associate Dean of Student Affairs.

- b. When the Ad Hoc committee issues its findings and recommendations related to these specific complaints to the Dean, the Chair of GPC will be included in the reporting line.
- c. Upon receipt of the ad hoc committee findings and recommendations, the Chair of the GPC will then act as follows:
  - i. If there are no findings of misconduct by the Ad Hoc committee, the GPC will not act further on the matter.
  - ii. If the Ad Hoc committee finds misconduct has occurred the GPC will consider further action.
- d. Following these deliberations by the GPC, the Chair of the GPC will submit the decision from the GPC to the Dean related to the current complaint in light of the prior history of sanctions related to academic or misconduct issues. The Dean may then take this decision into account along with the recommendations of the Ad Hoc committee in making a final determination regarding the present matter.

20. Procedure for Amending of GPC Policies and Procedures

- a. A proposal to amend the policies and procedures may be submitted in writing to the Chair of the Curriculum and Education Policy Committee by any person or group who believes a need for revision exists. The proposal shall be considered by the full CEPC for review and discussion. If the CEPC approves the amendment, it shall be initiated with notification to the Faculty Council at the next CEPC report date.
- b. Clarification or non-substantive rewording of policy may be performed by the GPC. The clarification will be reviewed by the Office of General Counsel and copies forwarded to the CEPC.

Year review	Student Performance	Committee action
Year 1	Passed all courses both semesters with no significant professionalism concerns	Proceed in curriculum
	AT RISK – see narrative in policy Academic Watch Level 1 or 2	a. Individual remediation OR b. Repeat of year
	Failure in one semester course Academic Watch level 2 or Warning if repeating the year	a. Repeat of year OR b. Individualized remediation
	Failure in two or more semester courses Academic Warning if Repeating year	a. Repeat of year OR b. Dismissal
	Failure of CEYE on second attempt Academic Warning	a. Repeat of year OR b. Individualized remediation
Year 2	Passed all courses both semesters with no significant professionalism concerns	Proceed in curriculum
	AT RISK – see narrative in policy Academic Watch Level 1 or 2	a. Individual remediation OR b. Repeat of year
	Failure of three summative exams over SPM & SCI (“at risk”)	Repeat of year or individual remediation
	Failure in one semester course Academic Watch Level 1 or 2 unless dismissed	a. Individualized remediation OR b. Dismissal
	Failure in two semester courses Academic Warning if Repeating year	a. Repeat of year OR c. Dismissal
	Failure in three or more semester courses	Dismissal
	Failure of Step 1 on three attempts	Dismissal

<b>Year 3</b>	<b>Student Performance</b>	<b>Committee Action</b>
	Failure of one clerkship: a. Fail clinical component OR b. Fail Professional component OR c. Fail 2 attempts at the NBME OR d. Fail 2 attempts at the OSCE Academic Watch Level 1	a. One month remediation in the fourth year in that discipline without receiving elective credit OR b. Repeat of third year OR c. Dismissal
	Failure of two clerkship (same definition as above) Academic Watch Level 2 or Academic Warning if repeating the year	a. Remediation OR b. Repeat of year OR c. Dismissal
	Failure of the NBME in three different clerkships (on first attempt) Academic Watch Level 2 or Academic Warning if repeating the year	a. Remediation OR b. Repeat of the third year OR c. Dismissal
	Failure of three clerkships Academic Warning if Repeating year	a. Repeat of third year OR b. Dismissal
	Rating of "Needs Improvement" in the same competency on three or more Clerkship Final assessments Academic Watch Level 2 or Academic Warning if repeating the year	c. Repeat of third year OR d. Dismissal
	Issues of Professionalism	a. Remediation OR b. Repeat of third year OR c. Dismissal
<b>Year 4</b>	Failure of one or more required rotations or electives Academic Watch	a. Remediation b. Repeat of year c. Dismissal
	Failure of Step 2 CK or CS on first attempt Academic Watch Level 2	No review required by GPC but student must log a pass of CK and CS by May 1 in order to graduate in May.
	Issues of Professionalism	a. Dependent on occurrences
	Failure of Step 2 CK or CS on the second attempt Academic Warning	Discussion by GPC of remediation and delay of graduation.
	Failure of Step 2 CK or CS on the third attempt	Dismissal

### **Challenging Student Records or Grades**

Students have the right to challenge records, grades, and information directly relating to them.

1. An initial meeting will be informal and participants will include: the custodian of the challenged records or information, and the student,

2. Students are encouraged to address concerns as close to the awarding of the grade or narrative as possible. If the matter is not addressed within the academic year of the awarded grade or narrative, the student will present a reason for the delay to the Associate Dean for Student Affairs who will decide if the grade/narrative may still be challenged.
3. If a student proceeds to challenge records, grades, or information directly relating to him or her they must notify the custodian of the record, grade, or information. The notice must be in writing and specifically identify the item challenged and the basis for the challenge. The custodian must respond in writing to the student within seven (7) SOM working days and forward a copy of the challenge and response to the Associate Dean for Student Affairs.
4. If the written response is unsatisfactory to the student, a formal hearing will be conducted in accordance with the procedures described below.
  - a. A hearing will be conducted within five (5) working days following the request for the hearing.
  - b. The hearing will be conducted by an institutional official or other party (Hearing Officer) who does not have a direct interest in the outcome of the hearing. The appointment of the official or party will be made by the Associate Dean for Student Affairs.
  - c. The student will be afforded a full and fair opportunity to present evidence relevant to challenging the content of the educational records in order to ensure that they are not inaccurate, misleading or otherwise in violation of the privacy or other rights of the student. The hearing also provides an opportunity for correction or deletion of any inaccurate, misleading or otherwise inappropriate data contained in the records, and/or for insertion into the records, a written explanation of the student respecting the content of the challenged records.
  - d. The Hearing officer will also confer with the custodian of the grade prior to making a decision. The hearing officer may call other witnesses or seek additional information as warranted.
  - e. The decision of the hearing must be rendered in writing to all involved parties within five (5) working days after the conclusion of the hearing.
5. The decision of the hearing officer is final.

## **Academic Standing Policy**

### **I. Definition of Good Standing**

Good standing is a designation that indicates a student is eligible for promotion, to continue participation in the curriculum, and to transfer to another institution. Academic and professionalism issues do not automatically result in revocation of the status of good standing. The Grading and Promotion Committee (GPC) will examine serious academic and professionalism issues to determine whether this impacts the standing of the student.

### **II. Remediation and/or Disciplinary Actions**

The GPC will determine whether any academic or professionalism disciplinary action that may impact a student's eligibility to be promoted or to continue in the curriculum will result in the loss of good standing. Revocation of status of good standing becomes effective only after the student has exhausted all appeals processes. When the terms of the disciplinary action are satisfied, the GPC may restore the status of good standing with the student remaining in academic watch or warning (see below). Remediation is not considered a disciplinary action unless the GPC explicitly deems it as such.

### **III. Academic Watch or Warning**

The PLFSOM uses two internal categories called: "academic watch" or "academic warning," neither of which, in and of itself, result in the loss of good standing. Even while maintaining the designation of good

standing, failures within the curriculum may result in the GPC placing the student in a status of “academic watch” or “academic warning.”

- A. Academic watch** indicates that a student is *potentially* at risk of not meeting requirements for promotion as a result of academic failures and/or breaches of professional behavior.
  - 1. Academic Watch – Level 1 – A student has failed one unit of SPM or is at risk of failing another course. Students who have failed two components of a third year block may be placed on academic watch. Students at this level will be discouraged from participating in any leadership and extracurricular activities.
  - 2. Academic Watch – Level 2 – A student has failed two units of SPM or is at risk of failing another course. Students who fail a clerkship would be placed on Level 2. Students at this level will be required to resign from any leadership activities. While they may have extracurricular activities they will be warned of the risk of moving to academic warning and repeat of the year.
  - 3. A student may also be placed on academic watch as a result of professionalism issues, Step failure, failure of a clinical skills summative evaluation, or failure to successfully complete a curriculum component or an administrative requirement. The GPC will decide the level of academic watch.
- B. Academic Warning** indicates a student has failures that require the student to repeat the year. Students at this level will be required to resign from any leadership activities.
- C.** It should be noted that both academic watch and warning are internal designations and will not appear on the transcript, MSPE, or other official document that is shared externally.
- D.** Corrective measures instituted by the GPC to address issues of academic watch or warning may include, but are not limited to, remediation programs (internal or external), repetition of a specific course, or repetition of the curriculum of an entire year (see Grading and Promotion Policy). When external remediation programs are prescribed, students will be responsible for attendant financial costs. Additionally, standard tuition and fee charges will apply to any repeated course work.
- E.** Students in the status of academic watch or warning will remain under the purview of the GPC for one year after successful completion of all remediations and any failure of any component of a course or a clerkship may bring those students’ issues back before the GPC. The GPC considers the complete academic and professional history of all students presenting to the committee.
- F.** Students in the status of academic watch or warning who intend to take a leave of absence must meet with the Associate Dean of Student Affairs for direction. For most leaves, students must receive approval of the GPC prior to the leave and receive direction from the GPC upon their return. The Office of Student Affairs may allow a medical leave or a leave for extenuating circumstances in the setting of academic watch or warning without the approval of the GPC, but the GPC must be informed by the Office of Student Affairs and may require such students to appear before the committee prior to school re-entry.

#### **IV. Removal from Academic Watch or Warning**

- A. A student will be removed from Academic Watch or Warning by the GPC when remediations are completed or when a student has shown adequate progression by time and performance.
- B. A student may petition the GPC to be removed from Academic Watch or Warning if they feel they have completed the remediations and have demonstrated adequate progression.

### **ADMINISTRATIVE POLICIES**

#### **Leaves of Absence**

- 1. General Information

The PLFSOM has a policy that requires that a student complete the curriculum within a six-year time frame to include any leaves of absence.
- 2. Students in Good Academic Standing
  - a. Leaves of absence for periods not to exceed one academic year may be granted by the Associate Dean for Students Affairs upon written request by a medical student in good academic standing. Reasons for leave may include, but are not limited to: financial distress necessitating full-time employment; an educational endeavor at another institution of higher

education; and medical leave. Medical leave requests must further include a written statement from a physician that such a leave is indicated in the best interests of the student. The written request and physician statement (in the case of a medical leave) will be considered by the Associate Dean for Student Affairs. The Associate Dean will set and specify in writing the conditions for return upon termination of the leave and the student will indicate understanding by signing and returning a copy of the written letter which will be placed in his/her Student Affairs file. Student Affairs will inform the appropriate departments of such leave. At the time the student wishes to return, he/she will submit a letter of intent to the Associate Dean. In the case of short-term leaves of absence for acute illness or other emergency, the student will be responsible for arranging to complete any missed work.

b. If a student requests to extend a leave beyond one year, he/she will be withdrawn from the curriculum and will need to apply for re-admission to the Admissions Committee in its regular process for consideration of medical school applicants, unless he/she is granted a leave extension by an appeal to the Dean as described below. (See **Appeal for Denial of Leave or Re-entry**)

### **Off Cycle Process**

Step 1 date –The off-cycle student must take the test 4 weeks before planned return to curriculum. They must have documented a Pass before entering an elective or the third year curriculum. They must take Step 1 within one year of completing second year unless they are granted an extension by GPC. If a student opts to delay Step until spring, they will be placed on a LOA for the spring semester.

Registration – The off-cycle student will be registered for a block 2 clerkship prior to the start of the semester. Block 1 clerkships will be removed from the transcripts. If the student doesn't start at block 2 they will receive a "W" on the transcript for the clerkship scheduled for block 2 in the fall. If the student is able to take a 4th year elective prior to block 2, this will be added to registration by registrar (or MedEd) after a rotation is assigned.

Financial aid – The off-cycle student must meet with the office of Financial Aid to discuss the impact on loans and satisfactory academic progress (SAP). If the student plans to return for block 2, they will register and pay tuition prior to the start of the fall semester. They would not be eligible for refund of tuition (see policy on tuition refund in Institutional Student Handbook) if they do not start block 2 and may not meet SAP for the year. If a student does not meet SAP they would have to appeal to receive financial aid for the next academic year. If they are on a LOA for spring they would not pay tuition or be eligible for financial aid for the spring semester.

The MSPE (letter to residency programs) will have a notation in the pre-clerkship section: "The student elected to delay the start of third year to further prepare and take Step 1."

The student who is off-cycle by one block understands that they will finish third year in August of the fourth year which can greatly limit elective options including away electives or months off. They will still be held to the requirement of completing Step 2 CK and CS by October 31 of the fall of fourth year.

If a student does not enter the third year curriculum by the start of block 2, they will not graduate with their class.

Students must attend Third year orientation with their class.

The student will sign a memo stating that they understand the consequences of going off cycle as explained above.

#### 1. Students Not in Good Academic Standing

- a. If the student requesting leave is in academic difficulty, the leave request will be forwarded to the Grading and Promotions Committee for consideration and disposition. If the need for the decision is urgent, the Associate Dean for Student Affairs, Chair and Chair-elect of the Grading and Promotions Committee may make a joint decision regarding granting of the leave, duration of the leave and conditions for re-entry that will be furnished in writing to the student. The student will indicate understanding by signing and returning a copy of the written letter that will be placed in his/her Student Affairs file. Student Affairs will inform the appropriate departments of such leave. At the time the student wishes to return, he/she will submit a letter of intent to the Associate Dean. The Associate Dean of Student Affairs, and where applicable, the Chair and Chair-elect of the Grading and Promotions Committee, and/or the Grading and Promotions Committee itself will determine whether the criteria for re-entry have been met. In the case of a medical leave, a written report from the student's physician and/or an independent assessment of the student's condition by another physician may be required.
- b. Any student in poor academic standing who requests a second medical leave of absence within two years of the first must follow the same procedure; however, the Grading and Promotion Committee will review the student's entire academic record, history of medical leaves, and documentation of progress in treatment to decide if the student will be allowed to re-enter the medical school curriculum. If a student is allowed to re-enter, the conditions for re-entry will be specified at that time.
- c. If a student requests to extend a leave beyond one year, he/she will be withdrawn from the curriculum and will need to apply for re-admission to the Admissions Committee in its regular process for consideration of medical school applicants, unless he/she is granted a leave extension by an appeal to the Dean as described below. (See **Appeal for Denial of Leave or Re-entry**)

## 2. Appeal for Denial of Leave or Re-entry

In the event a student's request for leave or re-entry is denied, the student may submit a written appeal to the Dean of the PLFSOM. The Dean may hear the matter directly or may appoint a 3-member faculty committee to hear the matter and make recommendations to him. The Dean's decision will be final.

## 3. Medical Leaves of Absence

- a. Medical leaves of absence may be granted by the Associate Dean for Student Affairs. Request for a medical leave must include a written statement from a physician that such a leave is indicated in the best interest of the student. The written request by the student and substantiating information from the physician will be considered by the Associate Dean for Student Affairs. If the student is in good academic standing, the Associate Dean may grant a medical leave for a period of up to one academic year. He will notify the appropriate departments of the student's leave and set the conditions for return upon termination of the leave. Granting of the leave and conditions for re-entry will be furnished in writing to the student and a copy will be placed in his/her Student Affairs file.
- b. If the student is not in good academic standing, the Associate Dean for Student Affairs will consult with the Chair and Chair-elect of the Grading and Promotions Committee, and they will either deliberate as a group or refer to the Grading and Promotions Committee the decision on granting of leave, duration of leave, and conditions for re-entry. Granting of the leave and conditions for re-entry will be furnished in writing to the student and a copy will be placed in his/her Student Affairs file. Upon completion of a medical leave, the Associate Dean for Student Affairs, and where applicable, the Chair and Chair-elect of the Grading and Promotions Committee, and/or the Grading and Promotions Committee itself will determine whether the criteria or conditions for re-entry have been met. They may require a written report from the student's physician and/or may require an independent assessment of the student's condition by another physician of their designation.
- c. If a student in poor academic standing requests a second medical leave of absence within two years of the first leave, the student must again produce a written request along

with a written statement by a physician supporting the request. The leave may then be granted as per the procedure noted above for up to one year. However, granting of a second leave under these circumstances will not guarantee that a student may return to the medical curriculum. At the time the student wishes to return, the student will produce a written request to do so along with a letter from an appropriate physician that supports that request. The Grading and Promotions Committee will then deliberate as to whether or not the student will be allowed to re-enter the curriculum. This decision will be based on a review of the entire academic record, history of medical leaves, and documentation of progress in treatment. If a student is allowed to re-enter, the conditions for re-entry will be specified at that time.

d. A request for an absence longer than one year will necessitate the withdrawal of the student. The student will make application for readmission through the regular admissions process.

#### 4. Appeal for Denial of Leave

a. In the event a student's request for leave is denied, the student may submit a written appeal to the Dean of the PLFSOM. The Dean may hear the matter directly or he may appoint a 3-member faculty committee to hear the matter and make recommendations to him. The Dean's decision will be final.

b. In the event a student on medical leave of absence is denied re-entry, the student may appeal in writing to the Dean of the School of Medicine. The Dean may hear the matter directly or he may appoint a 3-member faculty committee to hear the matter and make recommendations to him. The Dean's decision will be final.

#### **Appropriate Treatment of Medical Students**

The PLFSOM is a learning community whose goal is to enable the learner to achieve an education to his/her fullest potential while providing quality patient care. A cornerstone of the educational community is the expectation that learners will be treated appropriately and with dignity. The guiding principle of professional behavior is the absolute requirement of "respect for other persons". In our diverse learning community, respect is to be demonstrated toward all individuals, regardless of race, ethnicity, national origin, gender, sexual orientation, or religion. Such a learning environment includes honest and constructive corrective feedback. Such feedback should be provided in a helpful, specific and accurate manner, focused on behaviors, and, and when negative, given privately and respectfully.

Those providing feedback should do so mindful of the goal of helping the learner to improve. Those receiving feedback should do so graciously, with the assumption that it is given generously and in good faith. When inappropriate treatment is perceived to have occurred, learners must be able to communicate their concerns free from the fear of retaliation. Academic growth often occurs best when the learner is challenged; therefore, heated discourse and conflict are inherent to an academic environment of openness but must be conducted in a civil and respectful way.

#### **Expectations of the Faculty (in accordance with the AAMC compact between teacher and learner):**

- Demonstration of the professional virtues of fidelity, compassion, integrity, courage, temperance, and altruism
- Maintenance of high professional standards in all interactions with patients, colleagues and staff
- Provision of high quality educational program for medical students
- Nurturance of the medical students' intellectual and personal development and achievement of academic excellence
- Demonstration of respect for medical students as individuals, without regard to gender, race, national origin, religion, or sexual orientation
- Support of an environment that ensures the wellbeing of medical students
- Development of an intolerance for abuse or exploitation of the medical students
- Encouragement of medical students who experience mistreatment or who witness unprofessional behavior to report the occurrence immediately to appropriate faculty and staff in an atmosphere of confidentiality

- Non-tolerance of reprisals or retaliations against medical students who report instances of unprofessional behavior

**Expectations of Medical Students (in accordance with the AAMC compact between teacher and learner):**

- Demonstration of the professional virtues of fidelity, compassion, integrity, courage, temperance, and altruism
- Maintenance of the highest standards of the medical profession in all interactions with patients, patients' families, medical students, residents, other health care colleagues, and staff
- Acquisition and demonstration of the knowledge, skills, attitudes, and behaviors required to fulfill all educational goals and objectives established by the faculty
- Demonstration of respect for faculty members, medical students, residents, patients, patients' families, other health care professionals, and staff as individuals, without regard to gender, race, national origin, religion, or sexual orientation
- Demonstration of accountability and responsibility in the educational program and in the provision of patient care

**Definition:**

Mistreatment is behavior that adversely affects the learning environment and negatively impacts the learner/teacher relationship. Inappropriate and unacceptable behaviors promote an atmosphere in which abuse is accepted and perpetuated in the learning environment. In general, actions taken in good faith by faculty or residents to correct unacceptable performance is not considered mistreatment. Pointing out during rounds, conferences, operating rooms, or other settings that a learner is not adequately prepared for his/her assignments or required learning material is not mistreatment unless it is done in an inappropriate manner.

The following are some specific illustrations of behaviors that would promote appropriate treatment of medical students and residents, and behaviors that would be considered inappropriate:

Examples of appropriate behavior include, but are not limited to:

- Conducting all interactions in a manner free of bias or prejudice of any kind
- Providing a clear description of expectations by all participants at the beginning of all educational endeavors, rotations and assignments
- Encouraging an atmosphere of openness in which students and residents will feel welcome to offer questions, ask for help, make suggestions, and disagree
- Providing timely and specific feedback in a constructive manner, appropriate to the level of experience/training, and in an appropriate setting, with the intent of guiding students and residents towards a higher level of knowledge and skill
- Focusing feedback on observed behaviors and desired outcomes, with suggestions towards improvement
- Focusing constructive criticism on performance rather than personal characteristics of the student or resident
- Basing rewards and evaluations on merit, not favoritism

Examples of inappropriate behavior include, but are not limited to:

- Questioning or otherwise publicly addressing students or residents in a way that would generally be considered humiliating, dismissive, ridiculing, berating, embarrassing, or disrespectful by others (including persons outside the medical profession)
- Asking students or residents to perform personal chores (e.g., buying lunch, bringing coffee, running errands, etc.)
- Telling inappropriate stories or jokes (e.g., ethnic, sexist, racist, crude)
- Behaving in an aggressive manner (e.g., yelling, throwing objects, cursing, threatening physical harm) that creates a hostile environment
- Assigning tasks or denying educational opportunities with the intent of punishment
- Making disparaging comments about students, residents, faculty, patients, patients' families, other health care professionals, or staff

- Touching students or residents in a sexual manner
- Taking credit for a student's or resident's work
- Intentional neglect or habitual disregard for student/resident learning

Under no circumstances is it considered acceptable practice for any participant in the educational programs to demonstrate bias, prejudice, exclusion, or other unprofessional behavior. Such unacceptable behavior also includes the creation of a concern of "retaliation". Any perceived or witnessed action of mistreatment shall warrant the filing of a complaint or grievance as desired by the aggrieved party according to the procedures for filing a complaint or grievance.

Students who experience mistreatment are urged to proceed with the formal process of reporting that mistreatment as described in the dispute resolution policies (Student Faculty dispute resolution policy).

### **Student - Faculty Dispute Resolution Policy**

It is the policy of PLFSOM to affirm the right of its students to a prompt and fair resolution of a complaint or grievance involving allegations of inappropriate behavior by faculty toward students. We are committed to an environment as supported in the AAMC document: Compact between Teachers and Learners of Medicine. The Office of Student Affairs will administer the School's policies regarding student grievances and will insure that due process is afforded to all concerned. This policy does not apply to grading disputes.



#### *Procedures:*

##### 1. Early Resolution

- Prior to filing a request for a hearing, the student shall attempt to resolve the issue with the individual(s) involved. If the student is not satisfied with the outcome after meeting with the individual or doesn't feel comfortable talking to the faculty member involved, the student may meet with their college master, the Senior Associate Dean for Medical Education or the Associate Dean for Student Affairs to voice their concerns. Whomever the student chooses to voice their concerns to may counsel the student to discuss the issue with the involved faculty member or recommend that the student proceed to #2 below. The student shall address the issue and initiate action under this policy within 30 days of the event giving rise to the grievance.
- If not satisfied with the outcome of the #1 above, the student shall contact the Department Chair. The Department Chair will investigate the complaint, attempt to reconcile differences, and find an acceptable solution. The Department Chair will provide a written statement of his/her recommendation to all parties, who will then have ten working days to respond. Every effort should be made to resolve the issue without going beyond this level.
- If the grievance is against the Chair of the Department, the student should meet with the Associate Dean for Student Affairs, who will attempt to facilitate resolution before proceeding with a hearing as, described below.

##### 2. Filing a Hearing Request

- If the student is not satisfied with the Department Chair's recommendation, he/she may file a request for a hearing by submitting a written request to the Associate Dean of Student Affairs. The hearing request must include a specific statement of the student's complaint, an explanation of what remedy the student seeks, and a copy of the Department Chair's recommended resolution.
- If the student files a request for a hearing, the Student Hearing Committee as defined below must convene within 15 working days.

##### 3. Hearing Procedure

Upon receipt of a written request for a hearing, the Associate Dean for Student Affairs will appoint a Hearing Committee according to the following procedure:

- a. Each party will propose in writing a list of four faculty members to serve on the Hearing Committee. The Office of Student Affairs will contact one faculty member from each list in order of the party's preference to determine their willingness to serve. The faculty will then be selected. The two faculty members will then select a third faculty member and these individuals will comprise The Hearing Committee. This group will select a chair from among themselves.
- b. The Office of Student Affairs will provide technical assistance and support to this committee.
- c. As soon as the hearing is scheduled, a written notice will be sent to all involved parties. The notice will specify the time, place and nature of the hearing, plus a brief description of the grievance. The notice will also confirm the right of all involved parties to present witnesses and evidence and to be accompanied by counsel for advisory purposes only.
- d. At least three days prior to the meeting, all parties will provide to the Chair of the Hearing Committee a copy of all documentary evidence the parties intend to introduce at the hearing and a list of the names of any witnesses or counsel who will attend the hearing. The student and the involved individuals(s) shall have access to all information to be considered by the Hearing Committee, including the names of all persons giving evidence.
- e. The student and the involved parties shall attend the hearing and be offered an opportunity to state their positions, and present testimony and other evidence relevant to the case. The responsibility of establishing the validity of the grievance rests with the student.
- f. The Hearing Committee Chair shall keep an audio taped record of the hearing, which shall include date, time and location of the hearing, names of those present, and any evidence (e.g., records, written testimony, and duplicated materials) introduced.

#### 4. Committee Decision

- a. After completion of the hearing, the Hearing Committee shall meet in closed session and prepare written recommendations. Copies of the Hearing Committee Chair's report shall be forwarded to the involved parties within 5 working days.
- b. The student may request a reconsideration of the case in instances where he or she is dissatisfied with the decision of the Student Hearing Committee. The appeal must be made, in writing, within five working days, to the Dean of the PLFSOM.
- c. The Dean of the School of Medicine will review the grievance resolution and render a decision. The decision of the Dean is final.



### **Student – Student Dispute Resolution Policy**

On occasion, disputes may arise between students which are disruptive to the learning environment and which are unresolved by usual means. In such instances, this policy provides a means to address such unresolved disputes between students and to provide a mechanism to attempt to mediate and reach resolution to such issues when they emerge.

#### Procedures

##### 1. Initiating the process

- a. Any party may file a request in writing with the Office of Student Affairs. The request should include the reasons for pursuing this process and what the party or parties seek to achieve through this process. If, in the opinion of the Associate Dean for Student Affairs, the dispute is disruptive to the learning environment and not likely to be resolved by other means, the process as described below will proceed.
- b. The process may also be initiated if the Associate Dean decides that an existing conflict between students warrants such action. In this instance, the Associate Dean will notify the parties in writing that they will be required to participate in the process as described below. Failure by the student to participate in this process under these circumstances will subject the student(s) to a hearing and possible sanctions under the Code of Personal/Professional and Academic Conduct.

## 2. The process

- a. Upon receipt of a written request for dispute resolution, the Office of Student Affairs will appoint a Dispute Resolution Committee according to the following procedures. Each party will propose in writing a list of four faculty to serve on the committee, listed in order of preference. The Office of Student Affairs will contact the faculty from each list in order of preference to determine their ability and willingness to serve. Two faculty will thus be selected. These faculty will then select a third faculty member and the three will comprise the Dispute Resolution Committee. They will select a chair among themselves. The Office of Student Affairs will constitute the Committee within 10 working days of receipt of the preference list. The committee will be expected to meet with the students within 5 working days of being constituted.
- b. Each party in the dispute will meet separately with the committee for up to 1 hour to present its point of view regarding the dispute and the course of action requested. Following these individual meetings, the committee will then jointly meet with all parties to review the information and proposed resolutions from each side. This joint discussion will last up to 1 hour and will only be extended by a majority vote of the committee.
- c. Upon completion of these resolution sessions and any committee deliberations, the committee will, within 5 working days, submit a written proposal for conflict resolution to each party and the Office of Student Affairs, each of which will have 5 working days to respond to the proposal in writing to the committee. The committee will then have 5 working days further to submit a final resolution plan to the parties and the Office of Student Affairs. This final resolution plan will be binding on all parties. Failure to abide by the plan or maintain the confidentiality of the committee proceedings will be considered a violation of the Code of Personal/Professional and Academic Conduct and will subject the student(s) to a hearing and possible sanctions under the Code.

### Impaired Medical Students Policy

PLFSOM hereby establishes this policy to identify and provide assistance, within ethical and legal parameters, for students who previously have been or are currently impaired.

#### 1. Purpose:

This Policy will work in conjunction with the Impaired Physician Policy (11.13.13) it is designed to:

- a. Identify and adequately address the needs of medical students with ongoing impairment,
  - b. enhance awareness among faculty and students of the typical characteristics of the impaired medical student in an effort to identify students in need of help,
  - c. promote educational programs and other methods of primary prevention of impairment of all medical students,
  - d. provide treatment and monitoring of students identified as impaired,
  - e. take administrative actions as necessary, and
  - f. preclude non-treatable or unresponsive individuals from achieving professional status necessary to practice medicine.
2. Review: The Student Affairs Committee will review this PLFSOM policy biannually and submit recommendations to the Faculty Council.

#### Policy/Procedures

#### 3. Definitions (taken from Impaired Physician Policy):

- a. **Impairment by substance abuse or misuse** refers to any condition, resulting from substance abuse that interferes with the individual's ability to function at work as normally expected.
- b. **Impairment for other neuropsychiatric illnesses or medical reasons** refers to any other categories of impairment including major debilitating illnesses, depression, dementia, or other psychopathology or disruptive behavior that may interfere with the individual's ability to function at work as normally expected.
- c. **Symptoms of impairment** may also include declining work performance as manifested by unavailability, missed appointments, lapses in judgment, incomplete medical records, mood swings, unexplained absences, embarrassing behavior, signs of intoxication or self-medication, and/or withdrawal from hospital or other professional activities. Family problems and change in character or personality are further accompaniments of impairment.

## 7. Presentations

- a. To promote prevention of impairments, the Chair of the Physician Wellbeing Committee (PWC), or designee, shall make a presentation each year at Freshman Orientation to promote awareness of this policy by:
  - i. discussing this policy with the entering class,
  - ii. introducing the members of the committee, and
  - iii. distributing other helpful, applicable educational literature which will be developed by the PWC and made available to all medical students.

## 8. Reporting possible impairment

- a. **Self-reporting.** Any medical student who is concerned that he/she might be impaired or likely to become impaired should contact a member of the PWC who will bring the matter to the PWC to formulate a plan of action to provide appropriate assistance resources to the student.
- b. **Report by others.** Any person (i.e., student, faculty, staff, or administrator) who has reasonable cause to suspect that the ability of a medical student to perform may be impaired shall, in good faith, report the student to a member of the PWC.
- c. If a report is determined to be made in bad faith or malicious, that person will be reported to the Dean and may be subject to action under applicable institutional policies and/or laws and regulations.

## 9. Basis for intervention

Behavior that may be associated with, but not limited to, the following conditions:

- a. Demonstrated ineffectiveness in handling the stress of school and/or other outside personal problems
- b. Psychoactive substance abuse or dependence
- c. A psychiatric disorder
- d. A physical illness with pathophysiological and/or psychological manifestations
- e. Self-reporting by consulting with a member of the PWC
- f. Concern expressed to the PWC by a faculty member, administrator or another student

## 10. Verification

- a. Reports of impairment will be reviewed by the PWC and the PWC will decide whether to go forward under this policy based on the evidence presented, or document the file that no further action is warranted.
- b. The PWC may consult with representatives of the Texas Medical Association Physician Health and Rehabilitation Committee at the local or state level.

## 11. Process

- a. The chair of the PWC or the designee will meet with the identified student (or person who is reporting a student) to gather information about the concern.
- b. The PWC subcommittee will meet to discuss the concerns and formulate a plan for the student.
- c. The plan will be discussed with the student. If the student agrees with the committee recommendation they will proceed with implementation.
- d. The PWC may direct the student to obtain a drug test if there is concern about use of substances.
- e. Costs of treatment will be the student's responsibility.
- f. The student selects a treating provider and must sign a release of information for that provider to communicate with an assigned PWC member.
- g. The student must seek a provider as recommended by the PWC in a timely manner (not more than 2 weeks).
- h. The provider will discuss with the designated PWC member prior to onset of treatment to advise them of the treatment plan and the approximate amount of time required. The provider will make periodic progress reports to the designated member. At the end of the projected treatment period, the provider will report to the designated member that a) treatment has been completed successfully, b) further treatment is required and likely to produce a favorable outcome, or c) treatment was unsuccessful.
- i. The student will meet with the PWC member on a regular basis to review their progress.

### 13. Monitoring

- a. The student successfully completing the treatment obligation will be monitored by the designated faculty member of the intervention team. The faculty member will prepare a report of the anticipated scope and time frame of monitoring which the student will acknowledge by signature, and a copy will be given to the student.
- b. Monitoring may include, but is not limited to, random drug and alcohol testing, after-care therapy sessions and formal or informal meetings with the selected PWC faculty member.
- c. If post-graduate monitoring is recommended, the appropriate Impaired Health Professions Committee (i.e., TMA) will be notified.

### 14. Leave of Absence and Re-entry

- a. An impaired medical student will be allowed a leave-of-absence in accordance with the policy set forth in this PLFSOM Student Handbook.
- b. If the student requests a medical leave-of-absence, the designated faculty member described above may provide the written statement from a physician as required in the Student Handbook.

### 15. Unresponsiveness to intervention

- a. If the PWC determines that evaluation, treatment and/or monitoring are warranted and the student does not responsibly cooperate or respond, the PWC, by majority vote of the Committee, may refer the student to the grading and promotion committee for administrative action, which may include, but is not limited to, administrative leave of absence, suspension, or dismissal.

### 16. Confidentiality

- a. All Committee activities shall remain confidential.
- b. Representatives of administration will not be notified of specific cases unless the impaired student refuses or is unresponsive to the appropriate treatment, the student's actions endanger the public or himself/herself, or a leave-of-absence is sought by the PWC and/or student.
- c. Although specific cases will be presented to the PWC, confidentiality will be maintained to the extent reasonably possible.

### 17. Files

- a. All files will be kept by the Chair of the PWC for five years after the student graduates.
- b. For those who require post-graduate monitoring, the file will be transferred to the appropriate Impaired Health Professionals Committee in the state where the individual resides in accordance with laws and regulations governing such actions.

### 18. Student Participation

- a. Student representatives shall serve as ad hoc members of the committee. Three students across the four classes will be appointed by the Associate Dean for Student Affairs. The student representatives will attend training with the rest of the committee and be available for committee work related to their peer group.

## **Blood Borne Pathogen Infection Policy for Medical Students**

**PURPOSE:** The purpose of this Texas Tech University Health Sciences Center (TTUHSC) El Paso Paul L. Foster School of Medicine (PLFSOM) Policy and Procedure is to promote patient safety while providing risk management, educational and practice guidance to blood borne pathogen infected medical students.

### **POLICY/PROCEDURE:**

1. **General.** This policy complies with the most current evidence contained within the Society for Healthcare Epidemiology of America (SHEA) and Centers for Disease Control and Prevention (CDC) guidelines and recommendations for management of health care providers and students infected with hepatitis B virus (HBV), hepatitis C virus (HCV), and/or human immunodeficiency virus (HIV).

## 2. Definitions.

- a. Blood borne disease: a disease caused by a microbial agent capable of being transmitted via contact with the blood of an infected individual. Most notably, this includes infection with HIV, HBV and HCV.
- b. Exposure prone procedures (EPP): Invasive procedures where there is the potential for direct contact between the skin (usually a finger or thumb) of the student and sharp instruments, needle tips, or sharp tissues (i.e., spicules of bone) in body cavities, wounds, or in poorly visualized, confined anatomical sites.
- c. Non-exposure prone procedures (NEPP): Provided routine infection prevention using standard precautions are adhered to at all times, procedures where hands and fingers of the student are visible and outside of the body at all times and procedures or internal examinations that do not involve possible injury to the health-care person's hand by sharp instruments and/or tissues are considered NEPP. Examples of such NEPPs:
  - 1) Drawing blood.
  - 2) Setting up and maintaining intravenous lines or central lines provided there has been no skin tunneling and the procedure is performed in a non-exposure prone manner.
  - 3) Routine oral, vaginal or rectal examinations.
  - 4) Minor suturing on surface of body.
  - 5) Incision of external abscesses or similar lesions.

## 3. Expectations of Students.

- a. Students are required to comply with [TTUHSC EP OP 75.11 - TTUHSC EP Health Surveillance Program for TTUHSC EP Institutional Health and Infection Control Program](#).
- b. Students are expected to be aware they will be required to participate in the care of patients with various communicable and infectious diseases including hepatitis, HIV and acquired immune deficiency syndrome (AIDS).
- c. Students are ethically responsible to know their serological status with respect to blood borne pathogens and must report a positive test to the school through the Office of Disability Support Services of any blood borne infection who will inform appropriate PLFSOM and TTUHSC El Paso personnel based on a "need to know" basis, and as outlined in this policy.
  - 1) Confidentiality regarding a student's health status will be maintained to the greatest extent possible. An expert review panel (defined in paragraph 6) may be consulted for guidance.
  - 2) Disclosure of student's health status may be necessary if there is reason to believe the infected student has declined or failed to follow the provisions of this policy with respect to notification of appropriate personnel or otherwise fails to respond within a reasonable amount of time to a PLFSOM recommendation in accordance with this policy.
- d. Students are expected to be in a state of health such that they may competently fulfill PLFSOM curricular requirements, including patient care duties, without posing a risk to themselves or others.
- e. Students are obligated to comply with HBV immunization policies and other immunization

requirements as outlined by the TTUHSC EP Office of Occupational Health.

Students are required to receive the HBV vaccine series and test positive on subsequent quantitative serology titer. Further testing will be provided for students who do not respond to a second series of the vaccine.

- f. Students are required to comply with any HBV, HCV and/or HIV testing reasonably requested by the TTUHSC EP Office of Occupational Health and/or the expert review panel (defined in paragraph 6).
- g. Students are required to use standard precautions (and additional precautions as appropriate) when engaging in the clinical care of patients.
- h. Students are required to disclose to the Office of Occupational Health any instance in which they are potentially exposed to a blood borne pathogen in a clinical setting and provide a blood specimen if indicated.

#### **4. Expectations of the School of Medicine.**

- a. The PLFSOM will provide education and training to all students regarding appropriate methods to prevent the transmission of communicable diseases, including blood borne pathogens, consistent with the CDC guidelines for standard precautions. Additional precaution procedures will be reviewed with individual students by the Office of Occupational Health on an as needed and case by case basis.
- b. The PLFSOM will maintain confidentiality to the greatest extent possible regarding information disclosed by students concerning their serological status and disclose relevant student specific information only with appropriate consent or as otherwise outlined in this policy.

#### **5. Medical students potentially exposed to a blood borne pathogen.**

- a. Medical students who are potentially exposed to a blood borne pathogen (potentially exposed medical students) are required to seek medical attention as soon as possible after the event as per [TTUHSC EP OP 75.11 - TTUHSC EP Health Surveillance Program for TTUHSC EP Institutional Health and Infection Control Program](#).
- b. Potentially exposed medical students are required to report and document the potential exposure event as per TTUHSC EP OP 75.11 – TTUHSC EP Health Surveillance Program for TTUHSC EP Institutional Health and Infection Control Program.
- c. Potentially exposed medical students are required to follow post exposure testing and treatment. This information, including testing of the source patient, is outlined in TTUHSC EP OP 75.11 and reviewed annually with students.

#### **6. Expert Review Panel.**

- a. An expert review panel will be convened to review, make recommendations, and monitor the status of a student infected with a blood borne pathogen. The members of the expert review panel may be selected from, but not necessarily limited to, the vice president for academic affairs or his/her designee, chairman of the Infection Control Committee from the institution, an infectious disease and/or hospital epidemiology specialist, a liver disease specialist (e.g., gastroenterologist/ hepatologist) with expertise in blood borne pathogens and their infectivity, the director of the TTUHSC EP Office of Occupational Health, a person with bioethics experience, and TTUHSC EP legal counsel. The director of Disability Support will be an ex-officio member of the expert review panel.

- b. A student infected with a blood borne pathogen shall apply for Americans with Disabilities (ADA) status based on their medical condition, in accordance with TTUHSC EP OP 77.14 – Students with Disabilities. The expert review panel will assist Disability Support Services in making recommendations according to CDC and SHEA guidelines regarding appropriate alterations to the learning environment necessary to prevent the student from participating in EPPs, such as those encountered on clinical rotations that involve surgery or other invasive procedures, without jeopardizing the students’ medical education. Clinical departments that perform EPPs will also be consulted when determining reasonable accommodations.
- c. Once a letter of accommodations that details the student’s restrictions has been prepared by Disability Support Services, a copy will be sent to the student, the Assistant Dean for Clinical Instruction, and the unit manager of Year 3-4. The unit manager will forward to pertinent clerkship directors as instructed by the Director of Disability Support Services. The director of Disability Support Services will communicate directly with each clerkship director on the student’s disease status and implementation of restrictions determined by the expert review panel.
- d. The expert review panel will develop a plan of counseling and advice to assist an infected student regarding clinical practice and career choices. This information will be discussed with the student by the associate dean of student affairs and/or the director of the TTUHSC EP Office of Occupational Health.
- e. The expert review panel will evaluate the student’s status and continued testing and/or treatment as indicated in the guidelines outlined in this policy.

**7. Medical students infected with blood borne pathogens.**

- a. Medical students infected with a blood borne pathogen (infected medical students) are professionally and ethically obligated to inform the school through the Office of Disability Support Services of any blood borne infection.
- b. Infected medical students may pursue their studies only as long as their continued involvement in the curriculum does not pose a health or safety hazard to themselves or others.
- c. Infected medical students will have their condition reviewed and monitored by an expert review panel at the request of the director of Disability Support.
- d. Infected medical students may have their clinical duties or clinical exposure modified, limited, or abbreviated based on recommendations from the expert review panel and as outlined in CDC guidelines, particularly as clinical duties may relate to the performance of exposure prone procedures and/or based on the status of the student’s blood borne infection (i.e., viral loads, etc.).
- e. Infected medical students are required to immediately disclose if he/she exposes a patient to their blood borne pathogen in a clinical setting. Pre-notification to patients is not required.
- f. Infected medical students have the right to appeal recommendations made by the expert review panel by submitting, in writing, a proposed amendment to the recommendations and the rationale(s) supporting such amendment(s). The student may submit additional documentation from his/her personal physician or other healthcare provider(s) in support of their appeal.
  - 1) Appeals must be submitted to the director of Disability Support Services within ten (10) business days of the student receiving written notification of their letter of

accommodations. The director of Disability Support Services will consult with the expert review panel on the appeal. A response to an appeal will be forwarded to the student within fifteen (15) business days of receipt of the written appeal.

- 2) If a student's appeal is denied by the expert review panel, the student may appeal that decision, in writing, within five (5) business days to the PLFSOM dean by submitting a written notice of appeal to the associate dean for student affairs containing a detailed basis for the request.
  - a) The dean will review the student's written appeal, the recommendation(s) of the expert review panel, and all supporting documentation.
  - b) The dean will either issue a decision alone, or appoint an appeals committee comprised of three faculty members to determine the outcome of the appeal, within ten (10) business days of receipt of the written appeal.
  - c) The associate dean of student affairs (or designee) will serve as an ex-officio member of the Appeals Committee.
  - d) The Appeals Committee will be convened by the associate dean for student affairs within ten (10) business days after appointment to consider the student's appeal. This committee shall base its decision upon the documentation submitted. The student may not appear in person individually or by representative
  - e) The chair of the Appeals Committee will provide the dean with the committee's recommendation within ten (10) business days after the committee convenes to consider the appeal.
  - f) The dean will review the recommendation of the Appeals Committee and issue a final decision within ten (10) business days after receipt of the Appeals Committee's recommendation.
  - g) The decision of the dean is final.
  - h) During the appeals process, the current letter of accommodations will be enforced.

## **8. General guidelines for medical students infected with blood borne pathogens.**

- a. Students should not be prohibited from participating in patient care activities solely on the basis of their blood borne pathogen infection. Viral load burden may determine if a student should be restricted from performing certain exposure prone procedures (see paragraph 10).
- b. Using standard precautions, an infected medical student may perform routine physical examinations provided there is no evidence of open or healing wounds, or eczema on the student's hands.
- c. If the skin of the hands is intact and there are no wounds or skin lesions, then in examining a body orifice (oral, vaginal or rectal), an infected medical student must wear gloves as per standard precautions.
- d. If the skin of the hands is not intact, whether from a healing laceration or from any skin condition interfering with the normal protection afforded by intact skin, or cannot be covered with an appropriate barrier, the infected student should not provide direct patient contact until he/she receives effective treatment and the condition is resolved.

- e. Infected students may conduct EPPs if a low or undetectable viral load is documented through regular testing by the provider monitoring the student's disease status at least every six (6) months, unless higher viral levels or other health circumstance requires more frequent testing (e.g. addition or modification of drug therapy testing). Viral load testing results should be submitted to the expert review panel by the monitoring provider. Learning environment adjustments, restrictions, and subsequent monitoring, if warranted, will be recommended by the expert review panel in accordance with the guidelines outlined in this policy and that information will be conveyed to the student by the associate dean of student affairs and/or the monitoring provider.
- f. No additional restrictions are recommended for infected medical students under the following circumstances (other than those outlined herein):
  - 1) The infected medical student follows the policies and procedures outlined by the PLFSOM regarding clinical practice.
  - 2) The infected medical student maintains regular follow-up care and treatment as directed by a provider who has expertise in the management of his/her infection, (e.g. infectious disease physician or hepatologist), allows his/her provider to communicate with the expert review panel about the student's health status, and undergoes testing every six (6) months or as otherwise prescribed to demonstrate the maintenance of a viral burden of less than the recommended threshold.
  - 3) The infected student practices optimal infection control precautions and strictly adheres to the recommended practices, including the routine use of double-gloving for Category II and Category III procedures and frequent glove changes every three (3) hours, particularly if performing technical tasks known to compromise glove integrity.

**9. Summary of Recommendations for Managing Medical Students Infected with HBV, HCV, and/or HIV as indicated by current SHEA Guidelines and CDC Recommendations.**

Virus, Circulating Viral Burden	Categories of Clinical Activities	Recommendations	Testing Activities
<b>HBV</b>			
<10 <sup>4</sup> GE/ml	Categories I, II, and III	No Restrictions	Twice per Year
≥10 <sup>4</sup> GE/ml	Categories I and II	No Restrictions	Per expert provider
≥10 <sup>4</sup> GE/ml	Category III	Restricted	Per expert provider
<b>HCV</b>			
<10 <sup>4</sup> GE/ml	Categories I, II and III	No Restrictions	Twice per Year
≥10 <sup>4</sup> GE/ml	Categories I and II	No Restrictions	Per expert provider
≥10 <sup>4</sup> GE/ml	Category III	Restricted	Per expert provider
<b>HIV</b>			
<5x10 <sup>2</sup> GE/ml	Categories I, II and III	No Restrictions	Twice per Year
≥5x10 <sup>2</sup> GE/ml	Categories I and II	No Restrictions	Per expert provider
≥5x10 <sup>2</sup> GE/ml	Category III	Restricted	Per expert provider

**GE=** genome equivalents

**10. Categorization of Health Care Associated Procedures According to Level of Risk for Blood Borne Pathogen Transmission as Outlined in the Current SHEA Guidelines and CDC Recommendations.**

a. Category I: Procedures with minimal risk.

- 1) Regular history taking and/or physical exam, including routine gloved oral, vaginal, or rectal examinations.
- 2) Minor surface suturing.
- 3) Elective peripheral phlebotomy.
- 4) Lower gastrointestinal tract endoscopic procedures, such as sigmoidoscopy and colonoscopy.
- 5) Hands-off supervision during surgical procedures and computer-aided remote robotic surgical procedures.
- 6) Psychiatric evaluations.

b. Category II: Procedures for which blood borne virus transmission is theoretically possible but unlikely.

- 1) Locally anesthetized ophthalmologic surgery.
- 2) Locally anesthetized operative and prosthetic procedures.
- 3) Minor local procedures (e.g., skin excision, abscess drainage, biopsy, and use of laser) under local anesthesia, often under bloodless conditions.
- 4) Percutaneous cardiac procedures (e.g., angiography and catheterization).
- 5) Percutaneous and other minor orthopedic procedures.
- 6) Subcutaneous pacemaker implantation.
- 7) Bronchoscopy.
- 8) Insertion and maintenance of epidural and spinal anesthesia lines.
- 9) Minor gynecological procedures (e.g. dilation and curettage, suction abortion, colposcopy, insertion and removal of contraceptive devices and implants, and collection of ova).
- 10) Male urological procedures, excluding transabdominal intrapelvic procedures.
- 11) Minor vascular procedures (embolectomy and vein stripping).
- 12) Amputations, including major limbs (e.g. hemipelvectomy and amputation of legs or arms) and minor amputations of fingers, toes, hands or feet.
- 13) Breast augmentation or reduction.

- 14) Minimum exposure plastic surgical procedures (e.g., liposuction, minor skin resection for reshaping, face lift, brow lift, blepharoplasty, and otoplasty) total and subtotal thyroidectomy and/or biopsy.
  - 15) Endoscopic ear, nose and throat surgery and simple ear and nasal procedures such as stapedectomy, stapedotomy, and insertion of tympanosotomy tubes.
  - 16) Ophthalmic surgery.
  - 17) Assistance with uncomplicated vaginal delivery.
  - 18) Laparoscopic procedures.
  - 19) Thoracoscopic procedures.
  - 20) Nasal endoscopic procedures.
  - 21) Routine arthroscopic procedures.
  - 22) Plastic surgery.
  - 23) Insertion, maintenance, and drug administration into arterial and central venous lines.
  - 24) Endotracheal intubation and use of laryngeal mask.
  - 25) Obtainment and use of venous and arterial access devices that occur under complete antiseptic technique, using Standard Precautions, "no sharp" technique, and newly gloved hands.
- c. Category III: Procedures for which there is definite risk of blood borne virus transmission or that have been classified previously as "exposure prone."
- 1) General surgery, including nephrectomy, small bowel obstruction, cholecystectomy, subtotal thyroidectomy and elective abdominal surgery.
  - 2) Cardiothoracic surgery, including valve replacement, coronary artery bypass grafting, other bypass surgery, heart transplantation, repair of congenital heart defects, thymectomy and open lung biopsy.
  - 3) Open extensive head and neck surgery involving bones, including oncological procedures.
  - 4) Neurosurgery, including craniotomy, other intracranial procedures, and open- spine surgery.
  - 5) Non-elective procedures performed in the emergency department, including open resuscitation efforts, deep suturing to arrest hemorrhage, and internal cardiac massage.
  - 6) Obstetrical/gynecological surgery, including cesarean section delivery, forceps delivery, hysterectomy, episiotomy, cone biopsy, ovarian cyst removal and other transvaginal obstetrical procedures involving hand-guided sharps (includes making and suturing an episiotomy).
  - 7) Orthopedic procedures, including total knee arthroplasty, total hip arthroplasty, major joint replacement surgery, open spine surgery and open pelvic surgery.
  - 8) Extensive plastic surgery, including extensive cosmetic procedures (e.g. abdominoplasty and thoracoplasty).

- 9) Transplantation surgery, except skin and corneal transplantation.
- 10) Trauma surgery, including open head injuries, facial and jaw fracture reductions, extensive soft tissue trauma and ophthalmic trauma.
- 11) Interactions with patients in situations during which the risk of the patient biting the student is significant (e.g. interactions with violent patients or patients experiencing an epileptic seizure).
- 12) Any open surgical procedure with a duration of more than 3 hours, probably necessitating glove changes.

d. Special Circumstances.

- 1) If done emergently, such as during trauma or resuscitation efforts, peripheral phlebotomy is classified as a Category III procedure.
- 2) If unexpected circumstances require converting to an open procedure (e.g. laparotomy or thoracotomy), the procedure becomes a Category III.
- 3) If opening a joint is indicated and/or use of power instruments (e.g. drills, etc.) is necessary, the procedure will then be a Category III.
- 4) Any procedure involving bones, major vasculature, and/or deep body cavities will be classified as Category III.
- 5) A decision as to whether an infected student should continue to perform a procedure which in itself is not exposure prone should take into consideration the potential risk of complications arising which might necessitate the performance of an exposure prone procedure.
- 6) It is recognized that infection control precautions are not perfect. However, based on the nature of NEPPs and agent specific guidelines outlined in this document, it is expected that the risk of a transmission event occurring is low, and if an event were to occur remedial action can further minimize the risk to patients.

**11. Resources.**

- a. CDC recommendations for the Management of Hepatitis B Virus Infected Providers and Students. MMWR / Vol. 61 / No. 3 July 6. 2012
- b. Updated U.S. PHS Guidelines for Management of Occupational Exposures to HBV, HCV and HIV Recommendations for Postexposure Prophylaxis MMWR / Vol. 50 (RR-11)
- c. SHEA Guideline for Management of Healthcare Workers Who are Infected with Hepatitis B Virus, Hepatitis C Virus and/or HIV Virus. Infection Control and Hospital Epidemiology. Vol. 31 / No. 3 / 203-232 March 2010
- d. The Center for HIV Law and Policy. March 2008

**Anti-Discrimination and Sexual Misconduct Procedures (Including Title IX) Excerpted from TTUHSC El Paso Student Handbook: Student Code 2016-2017**

Texas Tech University Health Sciences Center El Paso (TTUHSC El Paso) is an Equal Employment Opportunity employer and ensures compliance with federal and state employment laws and regulations. TTUHSC El Paso provides a fair and equitable student conduct process, utilizing a thorough, neutral, and impartial investigation, from which is generated a prompt resolution.

## **1. Anti-Discrimination Policy**

TTUHSC El Paso does not tolerate discrimination or harassment of students based on or related to sex, race, national origin, religion, age, disability, status as a covered veteran, or other protected categories, classes, or characteristics. While sexual orientation is not a protected category under state or federal law, it is TTUHSC El Paso policy not to discriminate on this basis. Actions related to admission, discipline, housing, extracurricular and academic opportunities shall not be made based on a student's protected status. Discriminatory behavior is prohibited regardless of the manner in which it is exhibited, whether verbally, in writing, or electronically displayed or conveyed. Individuals who violate these policies and laws are subject to disciplinary action, up to and including expulsion.

### **a. Discriminatory Harassment**

- i. Discriminatory harassment is verbal or physical conduct based on a student's sex, race, national origin, religion, age, disability, sexual orientation, or other protected categories, classes, or characteristics and is so severe, persistent, or pervasive it adversely affects the victim's education or creates an intimidating, hostile, abusive or offensive educational environment which interferes with the student's ability to realize the intended benefits of the University's resources and opportunities.
- ii. Examples of inappropriate behavior that may constitute discriminatory harassment include, but are not limited to:
  - Slurs and jokes about a protected class of persons or about a particular person based on protected status, such as sex or race;
  - Display of explicit or offensive calendars, posters, pictures, drawings, screen savers, e-mails, or cartoons in any format that reflects disparagingly upon a class of persons or a particular person;
  - Derogatory remarks about a person's national origin, race or other ethnic characteristic;
  - Disparaging or disrespectful comments if such comments are made because of a person's protected status;
  - Loud or angry outbursts or obscenities in the academic environment directed toward another student, faculty, staff, or visitor; or
  - Disparate treatment without a legitimate business reason.

### **b. Sexual Harassment**

- i. Unwelcome verbal, written, or physical conduct of a sexual nature that is sufficiently severe, persistent, or pervasive such that it unreasonably interferes with the student's educational experience.
- ii. Examples of inappropriate behavior that may constitute unlawful sexual harassment include, but are not limited to:
  - Sexual teasing, jokes, remarks, questions;
  - Sexual looks and gestures;
  - Sexual innuendoes or stories;
  - Sexual favoritism;
  - Pressure for dates or sexual favors;
  - Gifts, letters, calls, e-mails, or materials of a sexual nature;
  - Sexually explicit visual material (calendars, posters, cards, software, internet materials);
  - Communicating in a demeaning manner with sexual overtones;
  - Inappropriate comments about dress or physical appearance; or
  - Non-consensual video or audio-taping of sexual activity;
  - Inappropriate discussion of private sexual behavior;
  - Exposing one's genitals or inducing another to expose their genitals;

- Unwelcome physical contact (touching, patting, stroking, rubbing);
- Non-consensual video or audio-taping of sexual activity;
- Sexual assault; or
- Other gender-based threats, discrimination, intimidation, hazing, bullying, stalking, or violence.

*Note: While not appropriate, not all rude or offensive comments or conduct constitute sexual harassment or unlawful discrimination.*

c. Reporting Concerns

Students complaining of discriminatory and sexual harassment should contact the Deputy Title IX Coordinator for Students, Assistant Vice President for Student Services, 5001 El Paso Dr. MEB 2140E El Paso, TX 79905 915-215-4786. Students complaining of discriminatory and sexual harassment in their employment capacity should contact the Office of Equal Employment Opportunity, 212 Administration Building, and (806) 742-3627. The Office of Student Services is available to assist with these processes.

d. Office of Civil Rights Complaints

Nothing in this policy shall prevent a student from presenting a charge of discrimination or other grievance covered by this policy to an external agency, such as the United States Department of Education: Office of Civil Rights (OCR), 400 Maryland Avenue, SW Washington, DC 20202-1100, Customer Service Hotline#: (800) 421-3481, <http://www.ed.gov/ocr>.

e. Non-retaliation

Retaliation is strictly prohibited against a person who files a complaint of discrimination or harassment in good faith, opposes a charge or testifies, or assists or participates in an investigative proceeding or Hearing. Retaliatory harassments is an intentional action taken by an accused individual or allied third party, absent legitimate non-discriminatory purposes, that harms an individual as reprisal for filing or participating in a grievance process.

f. Confidentiality

Confidentiality of both Complainant and accused will be honored to such extent as is possible without compromising the University's commitment to investigate allegations of discrimination and harassment and only in instances where there is no credible threat to the safety of the Complainant, Respondent, or others. The willful and unnecessary disclosure of confidential information by anyone, including the alleged victim, regarding discrimination and harassment complaints to any person outside of the investigation process may result in appropriate disciplinary measures against the offending party.

g. Faculty/Staff and Student Relationships

TTUHSC El Paso is committed to the promotion of professional and educational relationships and open channels of communication among all individuals. The faculty/staff and student relationship is of the highest value and impacts a student's educational experience. Consensual relationships, including affectionate liaisons or other intimate or close relationships between faculty and students in a faculty members class or with whom the faculty member has an academic or instructional connection are prohibited. Faculty/staff with direct or indirect teaching, training, research oversight or direction, supervisory, advisory, or evaluative responsibility over the student should recognize and respect the ethical and professional boundaries that must exist in such situations. If questions arise about situations involving faculty/staff and student relationships, they can be directed to the student's Academic Dean or the Assistant Vice President for Student Services.

h. Response: TTUHSC El Paso in an effort to prevent and eliminate sexual harassment, will direct resources and energy to the following:

1. **Education:** We encourage persons to know their rights. Sexual harassment is a violation of university policy (OP 51.02.14 found at <http://www.ttuhs.edu/hsc/op/op51/op5102.pdf>) and the Code of Student Conduct. It is also prohibited under Title VII of the Civil Rights Act of 1964, as amended, and Title IX of the Educational Amendments of 1972). All people have a right to an education and work environment that is free of bias, intimidation, or hostility. Educational programs and training sessions on the subject of sexual harassment are available to students, faculty, and staff.
  2. **Counseling and Support:** The University provides counseling services that may be used by persons who believe they have been sexually harassed. Students may seek counseling through the Student Assistance Program, while faculty members and other employees may use the Employee Assistance Program.
  3. **Sexual Harassment Prevention Training:** All students will receive training at matriculation through the Campus Clarity on-line module. Students are required to sign a statement that verifies completion of this training. Signed completion statements will be recorded in the student's file in the Office of Student Affairs.
- i. Grievance or Complaint Processes – please refer to Part IV of the TTUHSC El Paso Student Handbook: Student Code for the full process.

### **Copyright Policy**

Students shall not transfer copyrighted material onto a computer for any use other than personal study. Students may not act as distributors of copyrighted material to others, including the dissemination of copyrighted material by any means without written permission from the copyright holder. Some of the material provided to you on WebCT will be "printable" from your personal computer for your use only. The complete TTUHSC El Paso Copyright Policy can be found at <http://www.ttuhs.edu/hsc/op/op57/op5702.pdf>. (HSC OP: 57.02, Guidelines for the Educational Use of Copyrighted Works)

### **Drug Screening**

One or more clinical affiliates that all students could attend in third year require a drug screen. Student Affairs facilitates the testing of medical students and for notification of responsible parties.

Urine drug screening (UDS) applies to all TTUHSC El Paso PLFSOM students upon request of an affiliated institution or upon request of a TTUHSC El Paso institutional official. Urine drug screening must be done at an institutionally designated testing facility within 30 days prior to the planned rotation, or immediately upon request of an institutional official.

If the medical student is unable to provide a urine specimen for drug testing because of anuria due to a documented medical condition, arrangements must be made for collection of a blood sample for drug testing. Requests for urine drug screening examinations are initiated by the responsible party at the affiliated institution or when indicated by an institutional official.

## **PROCEDURES AND RESPONSIBILITIES**

### **A. URINE DRUG TESTING**

1. Two months prior to rotating at an affiliated institution or as scheduled by Student Affairs, the clerkship coordinator or clerkship director will insure that each medical student is advised of urine drug screening requirements.

2. Urine drug screen results must be completed prior to the assigned rotation. This process must be initiated at least 30 days prior to a rotation, and results available for transmission to the responsible party at the affiliated institution 15 days prior to rotation. The medical student must consult with the Associate Dean for Student Affairs if unable to complete drug screening within this 15-30 day time period.

3. If the student is not able to do the screen when the company is brought on site, they should contact Student Affairs for information on the drug testing site. The student then contacts the drug testing company for an appointment and must take a photo ID to the urine drug screening appointment. The student is responsible

for drug testing cost/payment. A urine sample will be obtained for urine drug screen (UDS). Consent and Authorization for Release of Information Regarding Drug Testing will be obtained.

4. If the medical student does not comply with urine drug screening requirements then he/she will not be allowed to complete the scheduled rotation and this is considered a violation of the schools policies on professionalism and could affect the grade for that clerkship.

## **B. URINE DRUG SCREEN FINDINGS**

Urine drug screens are sent to an independent laboratory for processing. This laboratory performs the drug screen, often within 24 hours. If there is a positive result on the screen, the laboratory will contact the student to initiate a referral for a Medical Review. The cost of this review will be paid by the student. The medical review officer will contact the student to get further information. If there is a valid prescription that explains the positive test, the Medical Review officer will send a report of Negative to the Director of Student Affairs (DSA). If there is the concern of a substance abuse issue, the positive result will be sent to the DSA who will forward it to the Physician/Student Wellness committee for evaluation. The student will not be eligible to participate in clinical activities until the issue has been addressed (see Impaired Medical Student policy). A medical student may request retesting of his/her original sample within five days of being notified of a positive result by contacting the laboratory. The medical student is responsible for the cost of retesting.

### **Policy on reporting arrests**

Per HSCPE OP 10.20 students must report to the Associate Dean for Student Affairs within 5 business days following the charge of a crime (see definition below).

“Students, trainees, and residents shall timely self-disclose relevant criminal history record information no later than five (5) business days following the charge of a crime. “Criminal history record information” (CHRI) means information collected about students, trainees or residents by a criminal justice agency that consists of identifiable descriptions and notations of arrests, detentions, indictments, information, and other formal criminal charges, and their dispositions. If self-disclosure reveals CHRI, the individual must then undergo a contemporaneous criminal background check, which may include fingerprinting. The report will be made available to the appropriate Dean or his/her designee. Failure of students, trainees or residents to disclose information which is subsequently found on a background check may result in dismissal or withdrawal of acceptance from the university.”

### **Social Media Policy**

From the Mayo Clinic’s 12-word Social Media Policy:

- Don’t Lie
- Don’t Cheat
- Don’t Steal
- Don’t Pry
- Can’t Delete
- Don’t Reveal

Don’t lie: This is a good rule in general, but is particularly important online where nothing is transient and everything is searchable. It is also not permissible to demean or degrade any individual associated with the HSC on internet resources or represent self as another person, real or fictitious, as a means to circumvent this policy.

Don’t pry: Do not seek out personal health care data or potential protected health information as part of a social platform conversation. TTUHSC El Paso students are not allowed to post or discuss any such sensitive information on personal social networking sites, including photos of patients.

Don’t cheat: In social media, cutting corners is more likely to be discovered and exposed with negative consequences.

Can't delete: It is important to remember that what you post online cannot be deleted. The most effective tool to address this is a strategic pause before you post. Count to 3 and think:

1 – To whom am I posting? Who is my audience?

2 – Is this post appropriate? Would I say this to someone face-to-face? Would this be appropriate at my institution?

3 – Does my post add value to the ongoing conversation?

Don't steal: Give credit where it is due and acknowledge those who inspired you or provided information you are passing along. In Twitter it's as simple as a retweet or a mention while in a blog you can share a link.

Don't reveal: If the information is proprietary or confidential, don't disclose it in social platforms. This also applies to educational material that belongs to the faculty of TTUHSC El Paso, including the logo, class material or information from your textbooks. Students should respect copyright, trademarks, and intellectual property rights. This includes putting this type of material in study guide or flashcards that are publically available.

TTUHSC El Paso faculty and staff do not monitor online communities, however any behavior violating the code of conduct that comes to a university official's attention will be treated like any other conduct violation. Please see TTUHSC El Paso Student Handbook: Student Code Section D "Misconduct" and Section E "Other Professional and Ethical School Standards".