



# Student Handbook

## Policies & Procedures

2009 - 2010  
Academic Year

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# USC POLICIES

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- University Equal Opportunity Policy
- University Policy on Accommodations for Students with Disabilities
- University Policy on Obligation for Payment
- University Policy on Time Limit for Degree Completion
- University Policy on Alcohol and Other Drugs

## **UNIVERSITY EQUAL OPPORTUNITY POLICY**

The University of Southern California complies with all laws prohibiting discrimination against students or applicants on the basis of race, color, religion, gender, national origin, age, disability, sexual orientation or status as a disabled veteran. An otherwise qualified individual shall not be excluded from admission, employment, or participation in educational programs and activities solely by reason of his/her physical handicap, or medical condition.

This policy applies to all personnel actions such as recruiting, hiring, promotion, compensation, benefits, transfers, layoffs, return from layoff, training, education, tuition assistance and other programs.

Inquiries concerning the application of the various rules and regulations concerning equal opportunity and affirmative action should be addressed to Laura LaCorte, Office of Compliance, UGB 105, University Park Campus, Los Angeles, California, 90089-8007. The office can be reached by telephone at (213) 740-8258.

## **UNIVERSITY POLICY ON ACCOMMODATIONS FOR STUDENTS WITH DISABILITIES**

The University of Southern California is committed to full compliance with the Rehabilitation Act (Section 504) and the Americans with Disabilities Act (ADA). As part of the implementation of this law, the University has adopted a policy that assures continued reasonable accommodation will be provided for students with disabilities so they can participate fully in the University's educational program and activities. It is the specific responsibility of the University Administration and all faculty serving in a teaching capacity to ensure the University's compliance with this policy.

The general definition of a student with a disability is any person who has "a physical or mental impairment which substantially limits one or more of such person's major life activities," and any person who has "a history of, or is regarded as having, such an impairment." Reasonable academic and physical accommodations include but are not limited to: extended time on examinations; time extensions on papers and projects; special testing procedures; advance notice regarding booklists for visually impaired and some learning disabled students; use of academic aides in the classroom such as note takers and sign language interpreters; early advisement and assistance with registration; accessibility for students who use wheelchairs and those with mobility impairments; and need for special classroom furniture or special equipment in the classroom. Other accommodations include the format or time allowed for an exam as well as substitution of similar or related work for a non-essential requirement. USC is not required by law to change the "fundamental nature or essential curricular components of its programs in order to accommodate the needs of disabled students," but the University must provide reasonable academic accommodation.

### **SERVICES**

Disability services and programs are administered through the Office of Academic Support on the University Park Campus.

Students with learning disabilities as well as physical disabilities may register for accommodations with Disability Services and Programs on University Park Campus located in the Student Union Building, 3601 Trousdale Parkway, Room 301. The telephone number is (213) 740-0776. More information can be found at [http://sait.usc.edu/academicsupport/centerprograms/dsp/home\\_index.html](http://sait.usc.edu/academicsupport/centerprograms/dsp/home_index.html). Students who anticipate the need for accommodation during exams should register with the Office of Disability Services and Programs well in advance of the testing date. Four weeks notice should be allowed in order that their needs may be appropriately evaluated and addressed by the Curriculum Office.

## UNIVERSITY POLICY ON OBLIGATION FOR PAYMENT

All students must register, settle their bills or make satisfactory arrangements to do so with the Collections Office by the assigned registration dates. The University currently assesses a late charge of \$100/week for students not registered by the third week deadline and a monthly finance charge thereafter on all past due balances. A "Returned Check Charge" will be assessed by Financial Services for any check that is returned by the bank for any reason.

Students who are prevented from registering because of a legitimate activity restriction (registration hold) **are not permitted to file an exception request (petition) to register late**, whether or not their restriction is lifted at a later time. If such students are unable to clear their holds before the deadline, **they must stop attending classes at the end of the third week.** Students are urged to plan ahead and meet all financial aid deadlines and ensure that all needed documents are complete, have been signed, and have been submitted on time. If financial aid is still pending prior to a semester, the University Collections Office will work with the student and the Financial Aid Office to defer the amount due, or in other cases will often work out a payment plan, but students must initiate contacts with University Collections as early as possible and follow through with promises made **before the end of week three!** Failure to make payments of tuition, fees, deposits, or other amounts owed the University when they fall due, or to arrange for such payments before their delinquent dates, is considered sufficient cause, until the debt has been adjusted, to (1) bar the student from class or examinations, (2) withhold diploma, transcript of records and/or (3) suspend the student.

The Dean, Vice Dean for Education and Associate Dean for Student Affairs are responsible for the administration of this policy. Any request for any exception to the policy must be presented to the Associate Dean for Student Affairs in writing.

## UNIVERSITY POLICY ON TIME LIMIT FOR DEGREE COMPLETION

Students must maintain satisfactory progress toward their stated degree objective at all times. Progress is measured from the beginning of the first course at USC applied toward a specified degree, and all requirements for that degree must be completed within a specified time. The maximum time limit allowed for each degree is considerably greater than what is needed to complete all requirements. Departments may set more stringent time limits than those specified in this section.

The time limit for completing the doctoral degree is eight years. An academic department may grant an extension of up to one year at a time for a maximum of two years. In unusual cases, a student may petition the appropriate Performance Committee for further extensions.

Students who have exceeded the time limit for completing their degree program will not be permitted any further registrations. If granted an extension of time, the dean of the degree-conferring unit will permit registration for the specified period of extension. Approved leaves of absence (up to a total of two years or four semesters) are not counted in the time allowed for completion of degree requirements. The time limits apply unless otherwise designated by the faculty and previously approved by the University Committee on Curriculum for a particular degree program.

## UNIVERSITY POLICY ON ALCOHOL AND OTHER DRUGS

The illegal or abusive use of alcohol and/or other drugs by students, faculty or staff adversely affects USC's commitment to provide an environment of excellence in teaching, research and learning. As members of the USC community, we all share in the responsibility for creating and maintaining a healthy and productive environment for work and study alike. With this responsibility comes the obligation to be involved in preventing problems caused by the abuse of alcohol, tobacco and other drugs.

USC's comprehensive approach to addressing substance abuse emphasizes:

- Taking effective steps to create and maintain a drug-free workplace and educational environment for

students, faculty and staff.

- Providing continual prevention, education and counseling services along with referrals to off-campus treatment facilities as appropriate.
- Encouraging individuals who are experiencing problems associated with alcohol and/or other drugs or chemical dependency to seek assessment, counseling and/or treatment voluntarily with the understanding that this assistance is confidential and will not be used against them.

(Taken from *USC Drug-Free – Prevention, Education and Counseling Services along with University Policies and Procedures for Preserving a Drug-Free Workplace and Study Environment* – hereafter referred to as *USC Drug-Free*.)

### ALCOHOL POLICY

With this approach in mind, the university has expectations concerning alcohol use on campus which directly correspond to California and Los Angeles laws and ordinances and include, but are not limited to, the following provisions:

1. The purchase, possession, or consumption of any alcoholic beverages (including beer and wine) by any person under the age of 21 is prohibited.
2. Alcoholic beverages will not be provided to individuals under 21 years of age.
3. The selling, either directly or indirectly, of alcoholic beverages (including beer and wine) except under the authority of a California Alcoholic Beverage Control Board license is prohibited. This includes selling cups, mixes, ice, tickets for admission, required donations, etc.
4. The serving of alcohol to an intoxicated person or to the point of intoxication is prohibited.
5. The manufacture, use or provision of a false state identification card, driver's license, or certification of birth or baptism is prohibited.
6. The act(s) of being drunk and disorderly in public view, including on public sidewalks and walkways, is prohibited.
7. The consumption of alcoholic beverages in a public place (unless licensed for consumption of alcohol on the premises) is prohibited. This includes a prohibition of alcoholic beverages in public areas of academic facilities, recreation fields, university housing corridors and lounges.
8. Operating a motor vehicle, bicycle, skates, or scooters while under the influence of alcohol is prohibited.
9. The possession of an alcoholic beverage in any open container in a motor vehicle, or while operating a bicycle, skates, skateboard, or scooter is prohibited regardless of who is driving and whether one is intoxicated (taken from *USC Drug-Free*).
10. Behavior that is disruptive or abusive to others as a result of using intoxicants.

### ALCOHOL AND EVENT PLANNING

Since the consumption of alcoholic beverages is prohibited (unless licensed for consumption of alcohol on the premises), any event being sponsored or hosted by a campus individual, university-recognized group, department, or office, must get approval to serve alcohol. All student organizations must have permission to serve alcohol at their events. All student organizations should contact the Office of Student Affairs for additional information. Approval must be obtained for all events on campus. For approval and copies of the detailed protocol on serving alcohol on campus, call Health Sciences Campus Office of Student Affairs, KAM 100-B, (323) 442-2553.

### DRUG POLICY

The university's policy is to conform to all applicable laws and follows the current stance of the medical and mental health professions regarding the use of other psychoactive substances including stimulants, depressants, narcotics, inhalants and hallucinogens including marijuana.

The university expects all students and student groups to comply with all local, state and federal laws. It is the responsibility of each individual to be aware of, and abide by, all federal, state and local ordinances and university regulations. Current laws provide for severe penalties for violations which may result in criminal records (taken from *USC Drug-Free*).

### TOBACCO POLICY

The use of tobacco is prohibited in all enclosed buildings, facilities and university vehicles. See Smoke-Free Policy.

### VIOLATION OF ALCOHOL AND DRUG POLICY

Student involvement in underage consumption of alcohol or the manufacture, use, possession, distribution or sale of illicit drugs is a matter of concern to the university and will subject a student so involved to disciplinary action by the university. Dependent on the nature of the violation, university sanctions may include educational intervention, mandated community reparations, suspension, or expulsion aside from or in addition to prosecution under applicable state and federal laws. University action may be taken whether or not independent action is taken by civil authorities.

### IF YOU NEED HELP...

There are many well-documented risks associated with the use of alcohol and other drugs, affecting not only the individual user, but also his or her family, friends and roommates. Alcohol abuse is frequently a factor in cases of assault on campus. Other problems associated with alcohol and other drug abuse include poor academic or job performance; relationship difficulties, including sexual dysfunction; a tendency toward verbal and physical violence; financial stress; injuries or accidents; and violations of the law such as driving under the influence and willfully destroying property.

Members of the university community are encouraged to seek assistance and/or support for themselves or others through any of the following resources:

- Eric Cohen Student Health Center, (323) 442-5631
- Student Counseling Services, (213) 740-7711
- Health Promotion and Prevention, Services (213) 740-4777
- University Park Campus Student Health Center, (213) 740-9355
- Alcoholics Anonymous, University Religious Center 205, Monday-Friday at noon

Copies of *USC's Drug-Free – Prevention, Education and Counseling Services* along with *University Policies and Procedures for Preserving a Drug-Free Workplace and Study Environment* can be obtained through the Office of Contracts and Grants, Stonier Hall, 837 W. 36th Place or via the Web.

# ACADEMIC POLICIES

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- Policy on Official Correspondence
- Policy Regarding Personal Property in the Multidiscipline Laboratories
- Absence Policies
- Evaluation Process and Promotion Requirements
- Examination Policy
- Grades and Grading Policy
- Promotion Requirements
- Evaluation Appeal Process
- Academic Probation, Dismissal, and Appeal Process
- OSCA and OSCE Student Instructions and Information
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- Leave of Absence Policies and Procedures
- Medical Student Performance Evaluation (MSPE)
- Awards
- Graduation Requirements
- Record Retention Policy

## POLICY ON OFFICIAL CORRESPONDENCE

Official correspondence from the Keck School of Medicine to students will be considered to have been delivered if sent to the student's home address on record, MDL mailbox, or University email account. However email is considered the official mechanism of communication at the Keck School of Medicine. Students are expected to read messages sent to their official USC address in a timely manner. Students are responsible for checking these on a regular basis, and will be held accountable for materials sent via any of these routes. Communication from students to the School or University should be addressed to the department or administrative unit in question. If uncertain, students should address communications to:

Office of Student Affairs  
Keck School of Medicine  
University of Southern California  
1975 Zonal Avenue, KAM 100-B  
Los Angeles, CA 90089-9020

For first and second year students, mailboxes are located in the MDL to which they are assigned. For third and fourth year students, mail is forwarded to the student's home address of record. Students should attempt to have all personal mail sent to their home address; however, if mail must be sent to the School in an unusual circumstance, address mail to:

### Years I and II

(Name, MDL Number if known)  
(Medical Student, Year I or II)  
Keck School of Medicine  
1975 Zonal Avenue, KAM 100-B  
Los Angeles, CA 90089-9020

### Years III and IV

(Name)  
(Medical Student, Year III or IV)  
Keck School of Medicine  
1975 Zonal Avenue, KAM 100-B  
Los Angeles, CA 90089-9020

The Keck School of Medicine encourages students to have publications and any other personal mail sent to the student's home address.

## POLICY REGARDING PERSONAL PROPERTY IN THE MULTIDISCIPLINE LABORATORIES

During Years I and II, each student is assigned a desk and a chair in one of the multidiscipline laboratories in the McKibben or Bishop Buildings. All personal items, (i.e. laptop computer, books, or clothing) are expected to be stored and fully contained within the desk unit. Personally owned equipment, furniture, or animals will not be permitted in the laboratory. Prohibited items include, but are not limited to, chairs, beds, sleeping cots, rugs, drapery materials, electric hot plates or any items of large or unwieldy sports or exercise equipment. Exceptions to this policy will be made only for reasons relating to a medical or physical condition of individual students when items of medically related equipment are deemed necessary or advisable for the proper functioning or comfort of these students. Most house plants will be permitted in the labs and will not require approval. Any exceptions to the policy must be specifically approved by the laboratory director (Bishop 108).

Student desks within the multidiscipline laboratories are set in place prior to the beginning of the school year in such a manner as to allow maximum access by students and lab personnel. **The desks may not be re-arranged without prior approval of the laboratory director.** In addition, shared MDL equipment, (i.e. projectors, models, etc.) may not be removed from the assigned MDL.

No materials may be attached to the outside of the student desks or to the walls of the laboratory. The tack board (bulletin board) on the desk is the only area where students may display photographs, drawings, art work, pictures from magazines, calendars, charts, etc.

All photographs and other visual materials which may be considered unsuitable for display in a physician's office or in a public waiting room are also unsuitable for display in a professional school; many persons find such materials offensive and therefore inappropriate. Individual students must realize and respect the fact that although individual

space is assigned in the lab, it is intended primarily for study purposes and the lab facilities as a whole are used by many students and faculty. In addition, family members, patients and visitors may enter the lab rooms and their sensitivities must also be considered.

The purpose of the policy regarding personal property or graphic material is to **maintain a suitable working environment in the laboratory conducive to instruction and to individual student study**. The addition of privately owned equipment or furniture to the laboratory may obstruct free flow of traffic and result in added congestion and inconvenience to other students and faculty and may violate the City of Los Angeles codes. Equipment and materials (including crepe paper streamers) constructed for home use are often unsuitable for use in a public building because they cannot meet City of Los Angeles codes for fire and public safety. USC is obligated to comply with these codes and is subject to unannounced inspections by City Fire Inspectors.

To prevent damage or theft, bicycles or mopeds may be brought into the building only with the permission of the laboratory director; when in the building, they must be stored or located in a manner which will be designated by the laboratory director so as not to interfere with the normal intended use of the lab rooms. Larger vehicles such as motorcycles may not be brought into the buildings; designated spaces are available for such vehicles in the parking structure.

Students should be aware that the University's insurance coverage does **not** include any personal belongings, even though permission may have been granted for the personal property to be used or stored within University buildings; students are advised that all financial responsibility for loss or damage rests solely with the owner or private insurer.

### **Security in the MDL: MDL Door Keys**

MDL doors should be locked except during class times. Students are issued keys which will allow access to his/her own MDL at any time and should observe security standards, especially on evenings and weekends. No key deposit will be charged; however, if a key is lost or stolen, a replacement fee of \$10.00 will be charged. For this reason, and for reasons of laboratory security, students should not leave their keys in visible areas.

Doors must not be propped open when a room is unoccupied. Any doors found open or unlocked after hours will be closed, and locked, so students should carry their keys when they leave the room. Students should note that it is possible to accidentally leave a door in an unlocked condition. Whenever a student enters, he/she should test the knob to verify that it is locked after the key is removed. Any trouble in the use of the lock should be reported to the MDL staff [Bishop 106; (323) 442-1119], or to the University Department of Public Safety. Public Safety officers may be summoned at any time by dialing **2-1200** on the phones located in the first and second floor hallways of the Bishop Building.

## **ABSENCE POLICIES**

### **Year I/II Absence Policy**

1. ICM and PPM are required courses
2. Absence request forms are required for all absences
  - A. For absences in advance of a session
    - a) The student will obtain the ICM or PPM instructor's signature and submit the form to the appropriate office for review and course director approval in advance of the missed session
    - b) The instructor will also identify the makeup activity when they sign the form. For ICM, the student will submit the form to the ICM office; for PPM, the student will submit the form to the Curriculum Office.
  - B. For unanticipated absences e.g., illness, family emergency
    1. The absence request form is still required
    2. Students must notify the ICM (323-442-2439) or PPM (Curriculum 323-442-1763) office and their instructor on the day of the absence and the absence will be reported to the Office of Student Affairs.

3. In case of an absence, a note from a physician (who is not a relative) or written confirmation of an office/ER visit, may be required at the discretion of the ICM or PPM instructor or course director.
4. For other unanticipated absences documentation verifying the reason for the absence is required
3. Any missed session must be made up (excused or unexcused)
4. In general, examples of excused absences include: illness, family illness, death, religious holiday, or making a presentation at a professional conference
5. Any unexcused absence will result in that student not being rated as outstanding by ICM or by PPM for Deans Recognition

### **Required Clerkship Absence Policy**

#### **Absence for Reason of Illness**

Absence due to illness must be reported to the clerkship director or medical student educator on a required clerkship. In case of extended absence (2 days or more), a note from a physician (who is not a relative), is required and the absence will be reported to the Office of Student Affairs. A physician note may be requested for any absence due to illness at the discretion of the clerkship director or designee.

#### **Absence for Reasons Other Than Illness**

Anticipated absences must be approved in advance by the clerkship director or designee. A required Student Absence Request Form must be submitted along with supportive documentation at least 6 weeks in advance of the start of the clerkship to be considered for approval. Absences where less than 6 weeks notice is provided will be considered at the discretion of the Clerkship Director. Some general guidelines include:

- IN GENERAL—absences due to illness, residency interviews, USMLE Step 2 CS, or presentation of student research are examples of appropriate reasons for excused absences.
- USMLE – Only Step 2 CS will be considered an excused absence due to limited numbers of testing sites; all other USMLE exams must be taken during vacation time.
- BLS/ACLS Training – will not be considered an excused absence; this must be taken during vacation time.
- Residency Interviews – interviews scheduled during a clerkship, elective or selective must be approved in advance. Printed email verification of the invitation to interview must be submitted with the request.

While faculty will try to accommodate reasonable requests, students are not guaranteed time away from courses. No more than 3 days of excused absences (to include official Holidays) can be anticipated during a clerkship. All absences, excused or unexcused, must be made up before a passing grade can be assigned. The specific make-up activities will be determined by the clerkship director. Only by successfully petitioning the Committee on Performance, Professionalism, and Promotion may a student obtain a waiver from having to make up lost time. Students should take vacation time if they anticipate a need for more than 3 absences during a clerkship.

Unexcused absences from a clerkship may be grounds for failing and/or disciplinary action. Any unexcused absence makes the student ineligible to earn a final grade of “Honors,” and may be grounds for failure regardless of final exam or clinical performance evaluations. Additionally, failing to notify staff or faculty in the clerkship office when a student is unable to attend lecture may preclude them from earning a final grade of “Honors,” at the discretion of the clerkship director.

### **Selective/Elective Absence Policy**

In order to ensure adequate clinical exposure, no more than 3 days of excused absences (to include official Holidays) can be accepted during a selective or elective. This policy does not imply that absences are guaranteed; absences may be excused at the discretion of the faculty. Absence due to illness must be reported to the faculty or his/her designee as soon as possible. In case of extended absence (2 days or more), a note from a physician (who is not a relative) is required and the absence will be reported to the Office of Student Affairs. A physician note may be requested for any absence, at the discretion of the faculty.

Students will generally be required to make up days before a passing grade can be assigned. All absences must be excused and any planned absence must be registered with the Course Director and preceptor prior to the first day of the selective. Students should take vacation time if they anticipate a need for more than 3 absences during a

selective. USMLE Step 2 CK and BLS/ACLS will not be considered excused absences.

Ample weeks of vacation are allotted during the Junior/Senior Continuum. Students should use vacation time for studying for Step 2 and residency interviews as well as for actual vacation time.

## **EVALUATION PROCESS AND PROMOTION REQUIREMENTS**

Teaching faculty establish learning objectives and evaluation criteria for each organ system, discipline, and clerkship. These are provided for students before each component of the curriculum. Throughout medical school, students will be evaluated with respect to all of the following:

- Fund of knowledge
- Problem solving ability
- Professional behavior
- Relevant personality traits
- Clinical skills
- Interpersonal skills

Written examinations play a major role in evaluating students in Years I and II. Students should understand the Examination Policies, described elsewhere in this Handbook.

Faculty assigns an overall Summary Evaluation of student performance for each component of the curriculum. Written, narrative evaluations of students' performance are required for ICM, PPM, core clinical clerkships, selectives and electives. These are entered verbatim into the student's permanent file along with the Summary Evaluation, which is recorded in the Medical Student Performance Evaluation (MSPE) which accompanies applications for residency.

Numerical and letter grades are not awarded, and students are not ranked. Notwithstanding awards or honors (e.g., Alpha Omega Alpha) that mention class standing as a criterion for selection, KSOM neither maintains nor reports a grade point average or class ranking for medical students. To determine eligibility for awards based on academic performance, the School may prepare a temporary analysis of eligible students' performance; however, this analysis is not a part of a student's official school record. The transcript and other records of performance are used to determine suitability for election to Alpha Omega Alpha, the Medical Honor Society, and other School and University honors and awards.

## **YEAR I/II EXAMINATION POLICY**

### **A. Year I/II Examination Administration**

Students should bring to the examination AT LEAST two #2 pencils with adequate erasers. No electronic devices may be used during an examination with the exception of calculators that will be provided by the Curriculum Office if needed. PDAs, laptops, and calculators may not be brought into the examination areas. Cell phones and pagers must be turned off. No backpacks, notes or papers of any kind are allowed in the testing area, unless otherwise instructed. Any student found with unauthorized items in the examination area will be subject to dismissal from the examination (failure) and may be subject to additional disciplinary measures. Hats with brims or bills (such as baseball caps) as well as hoods on hooded sweatshirts may not be worn during an exam. Students are expected to conduct themselves at all times in accordance with the Code of Professional Behavior.

During an examination and during breaks, there should be no discussion between students, regardless of discussion content. Breaks may be taken for restroom or refreshment purposes (in the testing area only)

and the number of breaks during an examination may be limited. During a break, students should restrict their activities to the area near the examination room; they may not return to the classrooms or the MDLs. Students must make an effort to avoid even the appearance of any breach in examination security. Any student suspicious that cheating is occurring during an exam should immediately alert a proctor.

After a student has completed an examination, s/he must return the exam to a proctor, quietly leave the examination area and avoid discussion with other students still working on the examination. If necessary, proctors may ask students to leave the examination area. Exams may not be removed from the testing area.

Once a student begins an examination, it is not possible to grant an excused absence for that particular examination. The grade for the attempted examination will stand as the final grade.

Once examination grades are generated, the Curriculum Office will distribute grades and will notify the students of cutoffs for passing each examination. Students failing a course will be notified by the Curriculum Office via email.

The Curriculum Office will be pilot testing on-line examinations during 09-10 academic year for Year II students. More information will be given prior to implementation.

## **B. Competency Examinations**

1. In general, one or more competency examinations are administered for each system of the curriculum taught in Years I and II. Competency examinations will emphasize primarily the content being taught during a given system, but an understanding of previously taught materials will be reinforced as the year progresses, so that examinations are cumulative.
2. System faculty in consultation with the Examination Development Committee develops these examinations.
3. Each system committee determines criteria for passing competency examinations, and uses these criteria to evaluate each student's overall performance in the system. In general, less than satisfactory performance in only one component of a system with multiple examinations will not result in a grade of unsatisfactory for the system; in this situation, the Student Performance Committee may suggest remedial work for the student to address the deficiency (see "Enhancement Policy" below).
4. Content for two or more systems may be combined for administration during one examination period. In this situation, students will receive advance notice at the beginning of the systems in question.

## **C. Comprehensive Examinations**

1. Years I and II will each conclude with a comprehensive written examination. These examinations will include content and analysis encompassing all of the systems presented prior to the comprehensive exam, and development of clinical skills.
2. The Examination Development Committee and system chairs will develop these examinations. The Examination Development Committee will review student performance and transmit its recommendations for passing to the Year I/II Student Performance Committee.
3. Students must demonstrate competency in Core Principles, Skin, Hematology and Neurosciences in Year I before they may take the Year I Comprehensive Examination.
4. Students must demonstrate competency in all systems and Integrated Cases in Year II before they may take the Year II Comprehensive Examination.
5. Students not successful on a comprehensive examination will be given one make-up comprehensive examination during the summer.

#### **D. Enhancement Policy**

Enhancements are:

1. Recommendations to students that originate from faculty in system committees.
2. Provided to students demonstrating an overall passing system grade, but who have focal deficits in one or more subject areas within the system.
3. Intended to aid students in improving their comprehension.

##### Expectations Regarding Enhancements:

The faculty expects enhancement recommendations to be fulfilled by students, in consultation with the designated faculty member. The faculty views enhancement recommendations as a means to counsel students to achieve mastery and excellence. Although enhancement recommendations are recommendations only, the faculty views them as being important to the student's professional development. For example, if a physician newly diagnoses congestive heart failure in a patient and the physician has not read about congestive heart failure for the past two years, that physician might be expected but not required to read about recent advances in management. An isolated choice not to pursue additional information in such a situation is probably not serious. However, repeated failures to update knowledge would adversely affect patient care. It is in that context that the faculty expects students to complete recommended enhancement exercises as one aspect of desirable professional behavior, to improve comprehension in the specified subject area.

Recurrent failures to follow enhancement recommendations will be considered an indication of lack of professional development. Likewise, recurrent failures to follow enhancement recommendations may eliminate a student from consideration for Dean's Recognition.

##### Enhancement Options:

In all instances, the student will be addressing the enhancement exercise in consultation with a faculty member designated by the system committee. A number of options are available to consider for enhancement exercises including but not limited to the following:

1. Oral discussion with faculty.
2. Submit a written paper.
3. Submit a literature search for discussion with designated faculty member.
4. Examination followed by analysis and feedback with faculty.
5. Work with tutors or other designated study groups.
6. Student designs a study plan agreeable to the designated faculty member.

#### **E. Post-examination Feedback**

An informal feedback session is held after all examinations except the Comprehensive Examination. The purpose of the session is for students to check their answers against the exam key and to provide feedback to the system chair regarding questionable answers. During the examination, students should mark their answers on their examination booklets as well as on their answer sheets. At these feedback sessions, students will receive their examination booklets and answers will be posted. Students may voice their objection to answers on the exam key by completing a feedback slip (usually available at the front of the auditorium. Completed feedback slips will be forwarded to the system chair to review prior to the finalizing of the key and the processing the exam scores.). Students may only submit feedback to the faculty regarding items on the examination during this feedback session.

During feedback, students can only check their own exam answers, not anyone else's exam - even if asked to do so by another student. This is for exam privacy and security reasons. Checking an exam other than your own is a violation of the Code of Professional Behavior. Students must leave all bags, purses and materials outside or at the back of the auditorium.

No copies, reconstructions or notes of any sort are to be made of examination items or answer keys at any time, including during the initial examination administration, feedback and post-feedback review sessions; to do so will be considered a violation of the Code of Professional Behavior.

Once the exam has been reviewed and feedback slips have been completed, students **MUST** return their exam to the proctor and leave the auditorium. Students are not allowed to return to the auditorium to wait with other students; they must wait outside of the auditorium. Again, this is an issue of exam security. Exams may not be removed from the testing area.

When time is called, students must return their exams to the proctors. Students needing more time to review the exam and key may do so in the Curriculum Office in the weeks following the examination.

Examination feedback for computerized testing will occur during the week after testing during an unscheduled block in the next system. The Curriculum Office will notify students of the procedure.

#### **F. Review of Previously Taken Examinations**

After an examination and its feedback session have been completed, examination booklets are maintained in the Curriculum Office, KAM 314, and may be reviewed by students under the following restrictions:

1. In accordance with the Code of Professional Behavior, examination questions are not to be copied or transmitted to another person in any manner. Students will not be allowed to bring notebooks, papers, or backpacks while reviewing exams.
2. Curriculum Office staff may require 24 hour notice to retrieve an examination for review. The staff also can deny a request for exam review. If denied, the student will be told the reason for the denial.
3. The Curriculum Office cannot retrieve examinations for review periods immediately preceding another examination period, and requests for review during these periods will be denied.
4. Examinations will be available for review for up to four weeks following the initial administration of a specific examination, except the Neurosciences midterm and Musculoskeletal System exams which have a two-week review limit.
5. There is no review of the Comprehensive examination allowed.
6. Review of computerized examinations will be allowed with Curriculum Office proctors in the testing facility. Students will be notified of dates and times when access will be available.

After the feedback session, students may review their examinations in the Curriculum Office for a four-week period only, starting the week following each examination. The only exceptions to this policy are the Neurosciences midterm exam and the Musculoskeletal system exam, which have a limit of only two-weeks. To ensure availability, appointments should be made at least 24 hours in advance for students wishing to review an examination. The times available to review examinations will be determined by the Curriculum Office. Due to the limited window of opportunity to review an exam, students who feel their performance may have been marginal or failing should take advantage of this time for review since there will be no other time for review of examinations.

## **G. Late Examinations**

1. A student who is unable to take a scheduled examination for any reason must immediately notify the Office of Student Affairs at (323) 442-2553 as soon as circumstances preventing the examination become known.
2. Illness on Examination Day – A physician’s certificate as to the nature of the illness, or other documentation depending on the nature of the problem, will be required for the student’s file. Students missing an examination due to illness are expected to see a physician on or before the day of the examination, and provide documentation of same. Medical excuse notes may only be signed by USC Student Health physicians, non-family member physicians or other appropriate healthcare providers. The final determination of the validity of the excuse will be made by the Associate Dean or Assistant Dean for Student Affairs. An evaluation of “Incomplete” will be entered on the student record until such time as the examination is taken.
3. Students with serious illness or another catastrophic conflict that prevents taking an examination as scheduled may be rescheduled to take an examination. Rescheduling is not guaranteed, and is subject to approval by the Associate Dean or Assistant Dean for Student Affairs. Only the Associate Dean or Assistant Dean for Student Affairs may grant approval for examination delay.
4. Requests for late examination should be submitted in writing as soon as extenuating circumstances are known. Failure to act in a timely manner will generally cause requests to be denied. Requests for a late examination submitted after an examination has begun will not be granted.
5. “Not ready to take the examination” is not an acceptable justification for delaying an examination.
6. The format and content for late examinations will generally vary from the original exam, and may include essay questions, oral examination, or other means of evaluation.

### Schedule for Taking Late Examinations

Late or postponed examinations (due to excused absence from regularly scheduled examination dates) are administered by the Office for Curriculum. The Office sets the date and time of the late exam. Late examinations at the end of the academic year will be scheduled prior to the start of the regular makeup examination period. Any student approved to sit for a late exam as scheduled by the Office for Curriculum who fails to do so, will receive a “failing” grade for the course.

### Missed Examinations

Any unexcused failure to take a scheduled examination – either the original exam, a late exam, or a make-up exam – will result in an evaluation of “Fail” and a score of “zero” will be recorded as the grade.

## **H. Make-up Examinations**

1. Students receiving a “failing” grade in a specific segment of the curriculum, who are approved to sit for make-up examinations by the Student Performance Committee, will be scheduled for make-up examinations by the Curriculum Office.
2. Year I make-up examinations will be administered in June and July; the exact schedule will be distributed to all students in the fall semester.
3. Year II make-up exams will be administered as follows: Cardiovascular, Renal and Respiratory Systems during the first three weeks of the Spring semester; Endocrine, Skin, Reproduction and GI/Liver during spring break and the first two weeks of Integrated Cases System. Makeup examinations for both Year I and II Comprehensive Examinations will be administered during late-

June and early-July.

4. The makeup examinations schedule may only be changed by the Curriculum Office, not by an individual student or faculty member. Any student with academic difficulty **MUST NOT** make any summer plans until all grades have been received. Any student unable to attend a scheduled makeup exam on a date scheduled by the Curriculum Office will receive a grade of “Fail” on that exam and will need to appear before the Student Performance Committee to request approval to repeat the academic year.

#### **I. Remediation of a Failing Score in Overall Performance in a System**

1. The mechanism for making up a failing score is determined by the teaching faculty from Core Principles, the System in question, or Integrated Cases, with the approval of the Student Performance Committee. This mechanism may include any or all of the following: taking a make-up examination, writing a paper, assigned reading, other work determined by the faculty that addresses the identified deficiency, or repetition of the entire system or discipline.
2. Only one remedial process or make-up examination will be administered to a student for each system failed. If a student fails a make-up examination or fails to complete other remedial work, the student’s performance and status will be considered by the Year I/II Student Performance Committee.
3. The Year I/II Student Performance Committee has established limits on the amount of remedial work that is considered feasible for a student who has experienced failing scores throughout the year. Although the Committee will consider each student's situation individually, as a general rule, any student who exceeds the limits outlined below will not be permitted to do make-up work.
  - a) In Year I, and subject to Student Performance Committee approval, students will not be eligible for make-up examinations under the following circumstances: a) if a student passes Core Principles and then fails greater than 15 weeks of the remaining Year I systems or b) if a student fails Core Principles and then fails either Hematology/Clinical Immunology or Neurosciences. If a student is ineligible for make-up examinations they are non-promotable to Year II.
  - b) In Year II, and subject to Student Performance Committee approval, students will not be eligible for make-up examinations if their initial performance includes failing more than three systems.

### **YEAR III/IV EXAMINATION POLICY**

#### **Year III/IV Examination Administration**

Students should bring to the examination **AT LEAST** two #2 pencils with adequate erasers. Students will not be permitted to use written notes, to make written notes, or to record in any way the contents of a test book. Calculators, watches with communication or computer memory capability, electronic paging devices, recording/filming/communication devices, radios, cell phones, and other mechanical or electronic devices are may not be brought into the examination areas. Hats with brims or bills (such as baseball caps) as well as hoods on hooded sweatshirts may not be worn during an exam. Any student found with unauthorized items in the examination area will be subject to dismissal from the examination (failure) and may be subject to additional disciplinary measures. Students are expected to conduct themselves at all times in accordance with the Code of Professional Behavior.

During an examination and during breaks, there should be no discussion between students, regardless of discussion content. Breaks may be taken for restroom or refreshment purposes (in the testing area only) and the number of breaks during an examination may be limited. During a break, students should restrict their activities to the area near the examination room. Students must make an effort to avoid even the appearance of any breach in examination security. Any student suspicious that cheating is occurring during an exam should immediately alert a proctor.

After a student has completed an examination, s/he must return the exam to a proctor, quietly leave the examination area and avoid discussion with other students still working on the examination. If necessary, proctors may ask students to leave the examination area. Exams may not be removed from the testing area.

Once a student begins an examination, it is not possible to grant an excused absence for that particular examination. The grade for the attempted examination will stand as the final grade. Students failing a clerkship will be notified by the Curriculum Office via email.

## **GRADES AND GRADING POLICY**

### **Years I/II Grades: P=Pass; F=Fail; I=Incomplete; E=Exempt**

An initial non-passing grade in any course will show along with a subsequent passing grade when they successfully correct the deficiency (e.g., F/P). The grade Exempt is awarded to students who are deemed by the Student Performance Committee to have met a course's requirements by means other than taking the course and receiving a grade. For the purpose of transcript representation, the Introduction to Clinical Medicine (ICM) and Professionalism and the Practice of Medicine (PPM) courses are not measured in weeks, as both courses progress continuously throughout the year. The Comprehensive Exam given at the end of Years I and II is also not measured in weeks.

### **Year III/IV Grades:**

### **Required Clerkships: H=Honors; HP=High Pass; P=Pass; F=Fail; I=Incomplete**

The following courses are Required Clerkships:

- Family Medicine
- Medicine I
- Medicine II
- Neurology
- Obstetrics/Gynecology
- Pediatrics
- Psychiatry
- Surgery

### **Selective/Elective Clerkships: C=Credit; NC=No Credit; I=Incomplete**

Transcripts of students with an initial non-passing grade in any required clerkships, selectives, or electives will also be shown on the transcript along with the subsequent passing grade when they successfully correct the deficiency (e.g., F/P or NC/C). Students required to repeat a required clerkship to correct a failing grade will show two separate instances of the clerkship.

## **GRADING POLICY FOR REQUIRED CLERKSHIPS**

The clinical performance component of the clerkship will represent at least 50% of the student's grade.

### **Grading System**

The designations for final clerkship grades are Honors, High Pass, Pass and Fail. In general, individual faculty or residents will not assign any of the above grades; only the clerkship directors will assign one of the designations listed above. Therefore, internal clerkship evaluation forms will not have these designations.

The grading policy for each clerkship must be clearly described and distributed to the students at the orientation to the clerkship. The grading policy should place accurate, appropriate significance on the clinical performance of

students and enable students to demonstrate acquisition of required knowledge, skills and professional behavior and attitudes. Ideally, the criteria will be described with sufficient clarity and detail that students will readily understand the behavioral basis for each of the possible final clerkship grades. Questions concerning evaluation procedures should be directed to the clerkship director.

Honors, High Pass and Pass criteria will be delineated by each clerkship. The highest grade a student can earn is Pass if a student fails to complete any required assignment that is due prior to the final day of the clerkship and the student has not been previously excused by the clerkship director or medical student educator (MSE). If the uncompleted work represents a significant portion of the clerkship requirements the student may receive an overall grade of Fail. This policy reflects the high priority that we place on professionalism; failure to complete assignments in a timely manner clearly demonstrates a lack of professionalism.

#### Grade of Incomplete

Incomplete is not a final grade but rather a designation that can be used if a student has been excused for an absence, or if a student has been excused from completing a required component of the clerkship. Any missing work or clinical assignments must be completed at the earliest possible date as determined by the clerkship director with an attempt not to exceed six weeks after the end of the clerkship. The student should not be given longer than six months to complete any outstanding work. This deadline can only be extended by the Associate Dean for Student Affairs or the Assistant Dean for Student Affairs. The deadline and requirements to be completed to advance the grade of Incomplete to a passing grade must be clearly defined and listed on the clerkship evaluation form that is submitted to the Office of Student Affairs. If the outstanding work is not completed by the deadline the Incomplete will become a Fail and appear as part of the permanent transcript.

#### Grade of Fail

A grade of Fail will be given in the following situations:

1. Failure to demonstrate minimal competence based on overall clerkship performance.
2. Any unprofessional behavior as outlined in the Student Handbook or other published curricular materials, e.g., KSOM Code of Professional Behavior.
3. Failure to resolve a grade of Incomplete will result in a grade of Fail on the student's transcript.

If a student receives a grade of Fail, the student must repeat the clerkship. The student may be required to repeat only the component of the clerkship that he/she failed, at the discretion of the clerkship director. As of June 7, 2004 and henceforth, a grade of Fail will remain on the student's transcript along with the subsequent passing grade, and become a part of the student's permanent record.

If a student fails two or more clerkships, the student will be required to repeat the year.

### **PROMOTION REQUIREMENTS**

#### **Promotion to Year II**

1. The Student Performance Committee will review all students' performances at the end of Year I to determine eligibility for promotion.
2. For promotion to Year II, students must:
  - a) Successfully complete all competency examinations (or make-up examinations, if eligible) from the Core Principles, Skin, Hematology/Clinical Immunology, Neurosciences and Musculoskeletal systems.
  - b) Successfully complete all requirements for Year I Introduction to Clinical Medicine, including a comprehensive evaluation of clinical skills.
  - c) Successfully complete all requirements for Year I Professionalism and the Practice of Medicine.
  - d) Successfully complete the evidence-based medicine assignments.
  - e) Successfully complete the Year I Comprehensive Examination.

3. The Year I/II Student Performance Committee has established limits on the amount of remedial work that is considered feasible for a student who has experienced failing scores throughout the year. Although the Committee will consider each student's situation individually, as a general rule, any student who exceeds the limits outlined below will not be permitted to do make-up work.

In Year I, and subject to Student Performance Committee approval, students will not be eligible for make-up examinations under the following circumstances: a) if a student passes Core Principles and then fails greater than 15 weeks of the remaining Year I systems or b) if a student fails Core Principles and then fails either Hematology/Clinical Immunology or Neurosciences. If a student is ineligible for make up examinations they are non-promotable to Year II.

4. When the Student Performance Committee determines that a student has failed to demonstrate sufficient progress as outlined above, the committee may recommend remedial work, repeating part of or the entire year of instruction, dismissal, leave of absence, or other action.

### **Promotion to Year III**

1. The Student Performance Committee will review all students' performances at the end of Year II to determine eligibility for promotion.
2. For promotion to Year III, students must:
  - a) Successfully complete all competency examinations (or make-up examinations, if eligible) from the Cardiovascular, Renal, Respiratory, Endocrine/Metabolic, Reproduction, and G.I./Liver Systems.
  - b) Successfully complete all requirements from Integrated Cases.
  - c) Successfully complete all requirements for Year II Introduction to Clinical Medicine, including the Year II comprehensive evaluation of clinical skills.
  - d) Successfully complete all requirements for Year II Professionalism and the Practice of Medicine.
  - e) Successfully complete the Required Student Project.
  - f) Successfully complete the Year II Comprehensive Examination.
  - g) Take the USMLE, Step 1 examination
3. The Year I/II Student Performance Committee has established limits on the amount of remedial work that is considered feasible for a student who has experienced failing scores throughout the year. Although the Committee will consider each student's situation individually, as a general rule, any student who exceeds the limits outlined below will not be permitted to do make-up work.

In Year II, and subject to Student Performance Committee approval, students will not be eligible for make-up examinations if their initial performance includes failing more than three systems.

4. When the Student Performance Committee determines that a student has failed to demonstrate sufficient progress as outlined above, the committee may recommend remedial work, repeating part of or the entire year of instruction, dismissal, leave of absence, or other action.

### **Promotion to Year IV**

1. The Committee on Performance, Professionalism, and Promotion will review all students' performances at the end of Year III to determine eligibility for promotion.
2. For promotion to Year IV, students must:
  - a) Successfully pass all Year III required clerkships or have special approval from the Associate Dean for Student Affairs to delay a Year III required clerkship to Year IV.
  - b) Pass USMLE Step 1.
3. When the Committee on Performance, Professionalism, and Promotion determines that a student has failed to demonstrate sufficient progress as outlined above, the committee may recommend remedial work, repeating part of or the entire year of instruction, dismissal, leave of absence, or other action.

## EVALUATION APPEAL PROCESS

### YEARS I AND II

#### How Evaluations are Processed and Recorded

Following each examination during the first two years of medical school, the Curriculum Office will conduct a feedback session during which students will have the opportunity to review correct answers for the examination and submit written comments for review by the System Chair. The System Chair will review student comments and may choose to modify scoring for individual items. Student's written comments and the System Chair's decision will also be reviewed by the Examination Development Committee, which, in consultation with the System Chair, may suggest additional modifications to scoring. Additionally, the System Chair and/or faculty may choose to provide written feedback in response to student comments to an individual student or to the entire class.

Introduction to Clinical Medicine (ICM) and Professionalism and the Practice of Medicine (PPM) final evaluations are reviewed with individual instructors at the end of the course in each academic year, and are due from the Course Director within six (6) weeks of the completion of the course. The Course Director is responsible for reviewing the narrative evaluations of all students and will submit them to the Office of Student Affairs. The evaluation is recorded in the permanent student record and will be included in the MSPE. Evaluations must be approved and signed by a faculty member.

#### FAIL EVALUATIONS (YEARS I/II)

If a student receives a grade of fail in ICM or PPM, s/he is not promotable, and determination of status (dismissal, permission to repeat the entire academic year, permission to repeat only the ICM or PPM course, or other determination) will be made by the Student Performance Committee. The grade of fail and the written evaluation will be recorded in the student's file, and the grade will be entered on the transcript. Upon successful completion of the repeated course, the make-up grade will also be recorded on the transcript and in the student's file. The official record will contain **both** the comments of the unsatisfactory grade of fail and the comments of the satisfactory make-up evaluation.

#### Appeal of Evaluations

Students wishing to raise questions about examinations administered during the first two years of medical school must do so in writing during the scheduled feedback session held immediately after the examinations. Following review of student comments, decisions made by the Course Director and the Examination Development Committee are final.

It is important that students discuss any difference of opinion they may have regarding the content of their evaluation with the ICM/PPM Course Director. Only the ICM/PPM Course Director has the authority to change the content. A student should not discuss his/her evaluation with any course faculty without the consent of the ICM/PPM Course Director. If the student is still dissatisfied after discussing the evaluation with the ICM/PPM Course Director, he/she should submit a written appeal to the ICM/PPM Course Director. The matter must also be reported the matter to the Office of Student Affairs. **Appeals must be completed within six (6) weeks of the receipt of the evaluation.** A student who is still dissatisfied with their evaluation after receiving a response from the ICM/PPM Course Director may submit a written appeal to the Vice Dean for Medical Education.

### YEARS III AND IV

#### How Evaluations are Processed and Recorded

Certified evaluations are due within six (6) weeks of the completion of the clerkship, selective or elective. Clerkship Directors or Preceptors are responsible for compiling comments from attending physicians, full-time faculty, and house officers. The evaluation and written comments are recorded verbatim in the permanent student record and

will be included in the MSPE.

### **Fail/No Credit Evaluations**

If a student receives a grade of Fail or No Credit, the written evaluation will be recorded in the student's file, and the grade will be entered on the transcript. When remedial work is completed, the make-up grade is also recorded on the transcript and in the student's file. The official record will contain both the comments associated with the unsatisfactory grade and the comments associated with the satisfactory make-up evaluation.

A grade of Fail or No Credit will be discussed with the student at the close of the clerkship, selective or elective. The conditions for make-up are prescribed by the individual department. Students who have not completed make-up of a Fail or No Credit grade may not petition nor participate in electives away from USC. Previously scheduled electives at hospitals not affiliated with the School of Medicine will not be permitted until make-up work has been successfully completed.

### **Appeal of Evaluations**

It is important that students discuss any difference of opinion they may have regarding the content of their evaluation with the Clerkship Director or Preceptor. Only the Clerkship Director or Preceptor has the authority to change the content. A student should not discuss his/her evaluation with any clerkship faculty or residents without the consent of the Clerkship Director or Preceptor. If the student is still dissatisfied after discussing the evaluation with the Clerkship Director or Preceptor, he/she should submit a written appeal to the Clerkship Director or Preceptor. If the matter is not resolved the student may submit a written appeal to the Department Chair and report the matter to the Office of Student Affairs. **Appeals must be completed within six (6) weeks of the receipt of the evaluation.** A student who is still dissatisfied with his/her evaluation after receiving a response from the Department Chair may submit a written appeal to the Vice Dean for Medical Education. The Vice Dean for Medical Education will issue a final decision in writing to the student. There is no appeal of the Vice Dean's decision.

## **ACADEMIC PROBATION, DISMISSAL, AND APPEAL PROCESS**

### **ACADEMIC PROBATION**

If a student becomes ineligible for promotion for any reason, the student is placed automatically on academic probation.

The Student Performance Committee or the Committee on Performance, Professionalism, and Promotion may place a student on probation at any time during the student's enrollment.

A student may be placed on probation by the Associate Dean for Student Affairs for either academic or non-academic matters without convening the appropriate Performance Committee. The student may meet with the Associate Dean for Student Affairs to discuss whether probation is warranted, and may appeal being placed on probation to the appropriate Performance Committee.

At the time a student is placed on probation, s/he will be informed of the reason for probation, the terms of probation, the duration of probation, and any other matters deemed pertinent by the Performance Committee or Associate Dean for Student Affairs.

### **DISMISSAL**

A student is allowed only one repeat of an academic year during his/her enrollment at the Keck School of Medicine.

A student may be dismissed from the Keck School of Medicine without first having been placed on probation.

### **Procedure for Dismissal**

1. A student who is being considered for dismissal shall be invited to meet with the Associate Dean for Student Affairs no later than ten (10) days prior to the appropriate Performance Committee meeting so that any extenuating circumstances may be made known.
2. The student will receive a written statement that he/she may be considered for academic dismissal at least ten (10) days prior to the meeting of the Performance Committee.
3. The student may inspect his/her medical school file, including material upon which the proposed dismissal is based.
4. The student will be given an opportunity and is urged to appear before the appropriate Performance Committee when a recommendation for dismissal is being considered. The student may waive his/her right to such an appearance. The student should notify the Associate Dean for Student Affairs in writing within five (5) business days prior to the meeting of his/her intent to appear.
5. The student shall be given a written copy of all rules and procedures to be followed at least ten (10) days prior to the student's hearing.
6. If the student attends the Performance Committee meeting, the student may be accompanied by counsel but must inform the Associate Dean for Student Affairs of this intent at least ten (10) days prior to the meeting.
7. A quorum (two-thirds of the membership) must be present to vote on dismissal. Affirmative votes by two-thirds of the members present are necessary for dismissal. If a Committee member is unable to attend a meeting, he/she may send an alternate who has prior approval of the Vice Dean for Medical Education. The alternate has full authority to act in the absence of the regular Committee member.
8. At the students' request, he/she will be provided the information against him/her, including academic reports and evaluations used in arriving at the summation of his/her performance.
9. The student will have an opportunity to present any relevant information to the Performance Committee regarding his/her performance, using any relevant evidence including affidavits, exhibits and oral testimony. If the student desires copies of written materials to be distributed to Committee members, he/she must present them to the Office of Student Affairs at least three (3) business days before the meeting, or prepare the materials him/herself.
10. Recommendations for student dismissal must be based upon the information presented at the hearing.
11. The recommendations of the Performance Committee will be transmitted orally to the student by the Chairperson of the respective Performance Committee. The recommendations of the Committee will be transmitted in writing to the Vice Dean for Medical Education and the student within three (3) business days following termination of the meeting.

### **APPEAL PROCESS**

1. The student may appeal the Committee's recommendation to the Vice Dean for Medical Education no later than ten (10) business days following transmittal of the Committee's written recommendation.
2. The Vice Dean for Medical Education may choose to uphold, to reverse, to ask the Committee to reconsider, or may choose to appoint an ad hoc committee to hear the student's appeal.
3. The members of this ad hoc committee shall be faculty members who have not been involved in the decision to dismiss. The Chairperson of the respective Performance Committee shall present the findings of the Performance Committee to the ad hoc appeals committee but shall not sit as a voting member of said

Committee.

4. The ad hoc hearing committee shall submit its recommendation in writing to the Vice Dean for Medical Education within five (5) business days after the meeting.
5. Following receipt of the Performance Committee or ad hoc hearing committee recommendation, the Vice Dean for Medical Education will issue a final decision in writing to the student. There is no appeal from the Vice Dean's decision.

### **OBJECTIVE STRUCTURED CLINICAL ASSESSMENT (OSCA) AND OBJECTIVE STRUCTURED CLINICAL EXAMINATION (OSCE) STUDENT INSTRUCTIONS AND INFORMATION**

1. The OSCAs and OSCEs are required clinical examinations in the third year clerkships, and therefore all requirements in the Code of Professional Behavior will be enforced. Students must not discuss standardized cases (paper, patient or real patient) with other students at any time before, during, or after taking an OSCE or OSCA.
2. The KSOM Dress Code will be applicable to these testing situations. Professional attire including white coat and LAC+USC ID badge is required. No flip-flops, shorts, tank tops, jeans or revealing clothing will be allowed. Scrubs with a white coat are acceptable if cleared with the Medical Student Educator in advance.
3. Students must bring their own stethoscopes, oto-ophthalmoscopes, penlights, and other required equipment to the examinations. Students who do not bring their required equipment may still take the exam, but loaner equipment will not be provided. Students must also wear a watch with a second hand, as there are no clocks in the rooms.
4. Colored paper will be provided inside the exam rooms for taking patient notes. Students are not permitted to remove any exam materials including the colored note paper from the test site. All patient note papers with the student name written at the top will be collected and shredded. Any exam papers taken by a student will be considered a violation of the Code of Professional Behavior.
5. No notes, study materials, reference materials or personal scratch paper will be allowed inside the patient exam rooms. Backpacks, purses, satchels, and briefcases will not be allowed inside the patient exam rooms or the post-encounter rooms and will need to be left outside the rooms, in the hallway.
6. Mechanical and digital devices including but not limited to, cell phones, pagers, PDAs, calculators, recording or filming devices, radios, and 2-way communication devices are not allowed in the examination rooms during testing.
7. Talking with classmates is not allowed in the testing hallway or in the post-encounter rooms.
8. No gum, food, candy or beverages are allowed in the testing area.
9. Students must enter the testing area from the Keith Administration Building basement lobby area and exit via the door to the Biggy Parking Structure. Students who have completed the examination are not allowed to re-congregate in the Keith Administration Building basement lobby.
10. Overhead audio announcements will tell students when to begin each patient encounter, when there are 5 minutes remaining, and when the patient encounter is over. These announcements, as well as instructions from the proctors, must be followed.

**Any action considered irregular behavior by the proctoring staff will be reported to the clerkship. The clerkship and the Standardized Patient Office reserve the right to remove students who exhibit disruptive behavior.**

### **OSCA Policy**

The Objective Structured Clinical Assessments (OSCA) for the Medicine and Surgery clerkships are designed as formative experiences for students. Reviews for the Surgery OSCA and Medicine OSCA are conducted in dedicated OSCA review sessions with the respective Medical Student Educators, and students are urged to take advantage of these scheduled learning opportunities. The policy of the Standardized Patient Office does not allow individual student review of test checklists. The Standardized Patient Office does offer students the opportunity to review their OSCA encounters in the Clinical Skills Center on days that do not involve testing with ICM, clerkships or other programs. If you are interested in reviewing an OSCA encounter, please email Denise Souder, R.N., Ed.D., Instructor of Clinical Skills and Associate Director, Clinical Skills Education and Evaluation Center, at dsouder@usc.edu for an appointment.

### **OSCE Policy**

The Objective Structured Clinical Examination (OSCE) is designed to evaluate a student's ability to gather information important for a given patient presentation. Studies show that the OSCE is an excellent and reliable tool to evaluate medical student and resident clinical performance; the Liaison Committee on Medical Education has deemed OSCEs as the "preferred method of evaluation" for several clinical competencies. In addition, the CPX (Clinical Performance Examination), a KSOM graduation requirement, and the USMLE Step 2 CS (Clinical Skills) Exam, will assess similar performance domains: questioning skills, information-sharing skills, and professional manner/rapport.

While the OSCA is formative in nature and is open to student tape review, the OSCE is summative, representing a part of an overall grade. Therefore, OSCE encounters are not available for student review. All issues regarding the clerkship OSCE must be addressed directly with the respective Medical Student Educator.

## **UNITED STATES MEDICAL LICENSING EXAMINATIONS (USMLE)**

Three Steps of the United States Medical Licensing Examination (USMLE) are required for licensure in the United States. The USMLE program recommends that U.S. licensing authorities require completion of USMLE Steps 1, 2, and 3 within a seven-year period, though this varies from state to state (California currently requires completing all three steps within a 10-year period). This period begins when the examinee first passes a Step, either Step 1 or Step 2. Score records will include a complete history of each person's attempts at USMLE Steps in order to provide the information necessary for licensing authorities to implement these recommendations.

Successful passage of Step 1 and Step 2 (both Clinical Knowledge and Clinical Skills) of the USMLE is required for graduation from the Keck School of Medicine. Since both passing Step 1 and taking Step 2 examinations are required for graduation, diplomas for students who have not completed both requirements will be withheld until both requirements are met. Students will ordinarily take Step 3 of the USMLE during their first graduate year of residency training. Under no circumstances does the school guarantee that the student will pass any USMLE Step examination successfully.

### **STEP 1**

All students must take USMLE Step 1 before the start of Year III clerkships or within 6 months of completion of Year II (whichever comes first). Students considered non-promotable from Year II may be excused from taking the USMLE by the Associate Dean for Student Affairs or may submit a request for deferral to the Associate Dean for Student Affairs. If the status of any student is unclear, the Associate Dean for Student Affairs will determine eligibility.

Any student who takes but fails to pass the USMLE Step 1 examination may proceed into Year III but will be required to retake and pass the examination prior to Year IV. Students who have not passed the USMLE Step 1 by

the end of their third year will be placed on a mandatory leave of absence. Students can take Step 1 a maximum of three times. Students who have not passed Step 1 after three attempts are ineligible for promotion to Year IV and will be considered for dismissal by the Year III/IV Committee on Performance, Professionalism, and Promotion.

## **STEP 2**

Students must take both sections of Step 2 – Clinical Knowledge (CK) and Clinical Skills (CS) on or before December 31<sup>st</sup> of Year IV. Any student who fails to take Step 2 (CK and CS) prior to December 31<sup>st</sup> of Year IV will not be certified for the National Residency Match Program. Any exceptions to this policy must be approved by the Associate Dean for Student Affairs.

## **STEP 3**

Step 3 is ordinarily taken during the first graduate year of residency training.

### **Application**

Application to take the examination is the responsibility of the student. Students should apply well in advance of desired examination dates to maximize the chance of receiving a testing appointment for the desired date and location. Applications and information about the examination may be obtained from the USMLE website <http://www.usmle.org>. All fees and examination dates are subject to change. See USMLE website for current information. Examination centers for Steps 1 and 2 are located throughout the United States and around the world.

The above information regarding the USMLE is subject to change by the NBME. We encourage you to review the USMLE web site for the most current information. The School is not responsible for changes in the above information.

### **Guidelines for USMLE Examinees with Disabilities**

The National Board of Medical Examiners provides reasonable and appropriate accommodations for examinees with documented disabilities. Examinees are informed of the availability of test accommodations in the USMLE Bulletin of Information. All requests for test accommodations must be received in a timely manner. Reasonable accommodations vary according to the type and degree of disability. Accommodations will be made on an individual basis and depend on the nature and extent of the disability, documentation provided, and the requirements of the examination. Because the NBME's requirements for documentation may result in requests for supplemental information, we encourage students requesting accommodations to apply well in advance of deadlines. Students intending to request accommodations for the USMLE examinations should recognize that the review and approval process is stringent and time consuming; students planning to request accommodations are encouraged to review NBME requirements at least a year prior to planned testing.

## **LEAVE OF ABSENCE POLICIES AND PROCEDURES**

A leave of absence, for whatever reason, may be arranged by the Associate Dean for Student Affairs.

Leaves of absence are handled differently depending upon the reason for the leave:

1. **LEAVES FOR HEALTH REASONS** are obligatory and handled by the Associate Dean for Student Affairs.
2. **LEAVES FOR ACADEMIC REASONS** are reviewed by the respective Student Performance Committee and recommended to the Associate Dean for Student Affairs.

Conditions of return, extensions, etc., are handled by petition (in person or in writing) to that Committee.

3. **LEAVES FOR COMPLETING JOINT DEGREE OR RESEARCH PROGRAMS** are processed through the Office of Student Affairs and initiated by a student petition in writing. Such leaves are considered voluntary leaves. With the exception of the joint degree programs, leaves of absence will not normally be extended beyond one academic year. Exceptions to this policy must be granted by the Associate Dean for Student Affairs.
4. **LEAVES FOR OTHER REASONS** (i.e., financial, personal, etc.) are processed through the Office of Student Affairs and initiated by a student petition in writing. Such leaves are considered voluntary leaves.

A request for a leave of absence should include: the desired start date for the leave; the desired duration and/or completion date of the leave; a description of any activities to be pursued during the leave, including specific planned outcomes, if any; and, for leaves planned to pursue research or other educational programs, the name(s) of any faculty supervisor(s). Where applicable, supporting documentation should also be submitted, e.g., letter from treating physician, faculty supervisor, etc.

Before a decision is rendered, the Associate Dean for Student Affairs will discuss the request with the student. A decision of approval will guarantee the student a return to school if the conditions of the leave are met and if there is an uncommitted space in the year to which the student will return. Assured space in a class applies only to students who have completed Year II. A review of compliance with the conditions will be made by the Associate Dean for Student Affairs prior to the return of the student. The basis for this review will be a written report from the student outlining his/her accomplishments.

#### Voluntary Leave of Absence

Voluntary leaves of absence are generally discouraged as an educationally unsound practice and because serious scheduling problems may occur as a consequence of the leave. Before deciding to file a request for leave, students should consider whether:

1. The leave requested will put the student at a disadvantage in scheduling postgraduate education (intern/resident matching plans).
2. The leave will influence any loan commitments (i.e., eligibility, time of repayment).

The student must recognize that:

1. Return after leave requires that the student has met all other requirements for progression to the level on which he/she is returning, whether or not such requirements change during the leave period. In the event of a change of policy, return to the Keck School of Medicine requires meeting the requirement(s) of the new policy.
2. Responsibility for meeting deadlines which may occur during the period of leave, e.g., scheduling deadlines, USMLE exam dates, or NRMP deadline dates, are assigned to the student and not to the Office of Student Affairs.
3. Students who have completed Year II and who are on a Leave of Absence for any reason must pass USMLE Step 1 before they may return to clerkships.

Students who are granted leave of absence should be aware that:

1. Extensions of leave must be reviewed and approved by the Associate Dean for Student Affairs annually. A status report will be required from the committee advising the graduate student who is seeking the M.D./Ph.D. degree.
2. Exceeding the leave time approved, without an approved extension, abrogates the Dean's authority to guarantee return and may be the basis for a student's withdrawal or dismissal from the medical school.
3. Students approved for leave must file, with the Student Affairs Office, a mailing and email address and phone number at which they can be reached during the leave.
4. Multiple leaves of absence are discouraged.
5. A return to school earlier than the time allotted is contingent on whether the student's clerkship requirements can be accommodated in the existing schedule.

### Process for Leave of Absence Consideration

Students who are considering a leave of absence need to:

1. Submit a written request for a leave of absence, as described above.
2. Meet with the Associate Dean for Student Affairs for consideration of request for leave of absence.
3. Meet with the Financial Aid Office, KAM B-22, to clear loans and other financial obligations.
4. Meet with the Registrar in KAM 100-B to discuss individual leave of absence requirements.
5. Return MDL keys prior to the start of a leave of absence (Year I and II students only).

### Process for Returning From Leave of Absence

Students returning from a Leave of Absence for any reason need to:

1. Contact the Office of Student Affairs by the date indicated on the letter granting the leave of absence.
2. Submit a request to return from a leave of absence three months prior to the end of the leave of absence.
3. Be responsible for all requirements for progression to the level on which student is returning.

## **FIFTH YEAR RESEARCH OR DUAL DEGREE LEAVE OF ABSENCE**

### **Fifth Year Research Option**

This program provides students the opportunity to take a full year of research experience with a Keck School of Medicine faculty mentor any time following the first year of medical school. Students electing this program will continue to be considered enrolled as full-time students. Students may elect such a research program with a faculty mentor at another institution if the program is approved by the appropriate department at Keck School of Medicine and the Associate Dean for Student Affairs. A yearly stipend may be provided, equal to the authorized university stipend for a graduate student at the postgraduate year. Any student interested in this option should contact the Office of Student Affairs at (323) 442-2553 for full information and an application.

### **Deans Research Scholarship**

A one year stipend may be provided to students completing a Fifth Year Research Option that is approximately equal to the authorized university stipend for a graduate student at the postgraduate year. Students may apply for this scholarship at time they submit their application for the Fifth Year Research Option.

### **The M.D./M.B.A. Program**

The Keck School of Medicine and the Marshall School of Business jointly offer an innovative program for students seeking knowledge in both medicine and business administration. The program prepares graduates with knowledge and skills to assume leadership in business and health care.

The M.D./M.B.A. programs spans five and one-half years. Interested students may apply during their second or third year of medical school, and begin core M.B.A. courses following successful completion of at least the first two years of medical school. At the conclusion of the program, students will have completed 48 units in the Marshall School of Business, and four years of courses in the Keck School of Medicine. Additional information about the application process and business curriculum is contained in the Marshall School's application, available from the Marshall School of Business on University Park Campus, (213) 740-7846. Students considering this program should contact the Office of Student Affairs, (323) 442-2553.

### **The M.D./M.P.H. Program**

The joint M.D./M.P.H. Program at the Keck School of Medicine is designed for individuals who envision a medical career that combines public health and medical disciplines. Many individuals entering careers as medical doctors or public health practitioners wish to acquire not only medical practice competencies, but also an understanding of the history, organization, goals, and philosophy of public health. The joint M.D./M.P.H. program offers a broad-based orientation to public health while a student completes medical school requirements. The Master of Public Health degree provides increased knowledge of and sensitivity to the political, historical, economic, and social environments of health promotion and health services delivery.

The M.D./M.P.H. program spans 5 years (4 years of medical school and 1 year of public health courses). Students begin the core M.P.H. courses following the successful completion of the first two years of medical school. The last two years of the program are devoted to the clinical clerkships of the School of Medicine and to the completion of the elective courses and practicum (field experience) of the M.P.H. Program. At the conclusion of the joint degree program, students will have completed 46 units in the Master of Public Health Program and four years of courses in the School of Medicine.

Students enrolled in the School of Medicine should apply to the Master of Public Health Program no later than January of their second year. All requirements for admission to the regular M.P.H. Program must also be fulfilled by dual degree applicants.

The M.D. and the M.P.H. degrees are awarded simultaneously upon completion of the School of Medicine and the Master of Public Health Program requirements. For more information, contact the M.P.H. Program Office at (626) 457-6676. Students considering this program should contact the Office of Student Affairs, (323) 442-2553.

### **MEDICAL STUDENT PERFORMANCE EVALUATION (MSPE)**

Our MSPE structure is based on the 2002 Association of American Medical College's recommendations for the Medical Student Performance Evaluation (MSPE), which we have fully implemented. The MSPE replaced what was previously known as the Dean's Letter.

The MSPE is not a letter of recommendation, but an objective summary letter designed to evaluate a student's performance throughout medical school in accordance with nationally defined guidelines. When the AAMC revised its guidelines, one goal was to reduce length by eliminating information contained elsewhere in a student's residency application.

The MSPE Letter contains four sections: (1) Introduction; (2) Unique Characteristics; (3) Academic History; and (4) Summary, supplemented by appendices (described below). Other information may be included if appropriate.

- (1) The Introduction gives the student's name and the location of the Keck School of Medicine.
- (2) The Unique Characteristics section is developed by compiling some of the most frequently occurring "qualities" as mentioned in the student's clinical clerkship evaluations. We do not routinely include membership in clubs, volunteering at a health fair, or most other extracurricular activities, since students incorporate this information in the residency application. We may on occasion include activities requiring a higher level of commitment, e.g., club presidency, significant leadership as an elected student government officer, or other extraordinary activities deemed worthy of inclusion by the Assistant and Associate Deans for Student Affairs.
- (3) The Academic History constitutes the largest section of the MSPE. It is organized chronologically, summarizes academic progress, and recognizes any Honors (e.g., Dean's Recognition, Highest Distinction, or election to AOA) the student received.

This section contains year-end ICM and PPM narrative evaluations from the first and second year. These evaluations may be abstracted, and highly subjective comments may be modified, but other wording changes regarding performance in the courses can only be made by the instructor.

The narrative evaluations from each clerkship (required and elective/selective) follow in chronological order, preceded by the grade (Honors, High Pass, Pass, Fail, Incomplete, Credit and No Credit) in bold letters, and the site where the clerkship was completed if not at USC or affiliated hospitals. Evaluations may be abbreviated if necessary to meet AAMC guidelines for brevity. We include all clerkship evaluations received in the Office of Student Affairs by the time the letter is written in September/October of the senior year.

Although we may edit the clerkship narratives for grammar, spelling, etc., our policies do not permit us to modify the verbatim section of the clinical clerkship narrative which describes a student's performance.

Changes in the verbatim portion can be requested through a formal appeal process that includes the clerkship director or preceptor, the Department Chair, and the Vice Dean for Education (as described in detail elsewhere in this Student Handbook).

The Academic History may include information about irregular progress through medical school, such as leaves of absence, transferring in from another medical school, the Fifth Year Research Track, etc. Negative information, if it exists, may also be included in the Academic History. Please see the paragraph below, entitled Inclusion of Negative Information, for further explanation and examples.

(4) The Summary explains that Keck School of Medicine students are recommended for postgraduate training as Acceptable, Good, Very Good, Excellent, or Outstanding, based on a formula computing the number of weeks of Honors/High Pass/Pass on required clerkships received in the Office of Student Affairs at the time the letter is written. Neurology and Medicine II grades are excluded from this computation, as most students will not have taken these rotations by the time the MSPEs are written. The summary adjective is not “pro-rated” based upon the number of core clerkships completed at the time the MSPE is prepared. The minimum criteria are as follows:

- **OUTSTANDING:** 18 weeks of Honors; no grades of Pass
- **EXCELLENT:** 42 weeks of High Pass or the equivalent (e.g. 6 weeks of Honors, 6 weeks of Pass, and 30 weeks of High Pass)
- **VERY GOOD:** 18 weeks of High Pass or the equivalent
- **GOOD:** 0-17 weeks of High Pass or the equivalent
- **ACCEPTABLE:** Rarely used (notably irregular academic progress, e.g., repeating a year).

### Appendices

A page describing Keck School of Medicine curriculum and educational policies, and graphs illustrating comparative academic performance, will be appended to each MSPE.

These include:

- Appendix A: Graphic representation of comparative performance in preclinical/basic science courses.
- Appendix B: Graphic representation of comparative performance in core clinical clerkships.
- Appendix D: Graphic representation of overall comparative performance in medical school.
- Appendix E: Medical school information page.

(Note: National guidelines for Appendix C: Student Professionalism are under development.)

### Inclusion of Negative Information

The MSPE may contain negative information about a student's cognitive performance and personal attributes. Examples of such information include, but are not limited to: Ethics Code violations; failing a year of the preclinical curriculum, or failing a clerkship; failure to pass USMLE Step 1 by the end of Year III; documented, significant behavior problems including, but not limited to, verbal or physical abuse, racism, sexual harassment, or homophobia; unprofessional behavior involving colleagues, staff, faculty or patients; substance abuse; criminal activity; and lying that advances one's self interest and/or adversely affects others.

### Student Review of MSPE

Once the MSPE has been drafted, students are encouraged to review their MSPE and may request changes prior to

the final printing and distribution of the MSPE in accordance with Student Affairs procedures and KSOM policies. Every student will be invited to review its contents in the Office of Student Affairs. If a student feels that inaccurate or misleading statements are present, the student may complete a Change Request Form, identify the specific changes requested, and provide any evidence the student feels may support the appeal. The Associate Dean of Student Affairs will review the request and the student will be notified when a decision is made. If the appeal is denied by the Associate Dean of Student Affairs, the student may file a subsequent appeal to the Student Affairs Committee.

#### MSPE Release Date:

An individual student's MSPE will not be distributed without the student's signed consent. MSPEs are released nationwide on November 1st to all programs, including Early Match specialties. MSPEs cannot be given to anyone (including the student) before November 1st.

## AWARDS

### ACADEMIC ACHIEVEMENT AWARDS

Selections for awards are made in accordance with individual awards' established deadlines; therefore, academic determinations will be based on student achievement officially recorded at the time of the award deadline.

***Medical School Honors (Graduation with Highest Distinction)*** – Awarded for consistent excellence, this is the highest accolade bestowed at graduation by the Keck School of Medicine. Students must achieve Dean's Recognition in Year I and/or II and 36 or more weeks of Honors in required clerkships during the Year III/IV Continuum. The words Graduate "*with Highest Distinction*" are added to the recipient's transcript and Medical Student Performance Evaluation. Less than 10% of graduating seniors are expected to receive this honor each year.

***Dean's Recognition*** – This designation identifies the consistently superior student. Criteria for selection will be based on performance throughout the year and will be specified by the Educational Policy Committee.

- **Years I & II:** Dean's Recognition will indicate excellent achievement by a student. Dean's Recognition characterizes students who distinguish themselves in their academic coursework; whose RSPs are especially noteworthy; and who achieve a high level of success in development of their professional skills and attitudes. Dean's Recognition will be recorded on the official transcript and in the Medical Student Performance Evaluation. The selection process is as follows:
  1. At the end of each of Year I and Year II, students meeting standards of excellence will be considered as potential recipients of Dean's Recognition.
  2. Criteria will include:
    - a. Comprehensive examination performance at or above the mean without make-up examination.
    - b. Required Student Project that meets standards set for Dean's Recognition (Year II only).
    - c. Noteworthy professional development as demonstrated by ICM and PPM evaluations.
    - d. Outside Activities that meet standards set for Dean's Recognition.
    - e. Additional accomplishments as deemed appropriate by the Dean's Recognition Committee.
  3. Final decisions will be determined by the Dean's Recognition Committee.
- **Years III & IV:** This designation is utilized to identify the consistently superior student. This designation is awarded to students who achieve 30 weeks or more of Honors during the Year III/IV continuum, based on the 50 weeks of required core clerkships. This information will appear on the official transcript and in the Medical Student Performance Evaluation.

***Alpha Omega Alpha National Honor Society*** – This is essentially the "Phi Beta Kappa of medical school." The society was established in Chicago in 1902, and is composed of medical school students, faculty and alumni. According to the AOA Constitution, "...its aims shall be the promotion of scholarship in medical schools, the encouragement of a high standard of character and conduct among medical students and graduates, and the

recognition of high attainment in medical science, practice and related fields."

The major consideration for election is the "promise of future leadership in medicine," either as a practitioner or academician, as reflected in a student's academic record in medical school, and as reflected in subjective considerations of character. In addition to academic performance, character and integrity of the applicant and other factors such as extracurricular medical activities and research accomplishments are taken into consideration. New members are elected in August/September of the senior year. Students must be in the top 25% of their class to be considered for membership, as computed by a formula which covers all years of medical school to the time of election, but only one-sixth of the class may be elected.

Any questions regarding AOA selection or activities should be directed to the AOA Faculty Advisor, Dr. Paul Holtom.

***American College Of Physicians Student Internist Award*** – An award to honor an outstanding graduating student who has matched in Internal Medicine. Candidates will have received Honors in both Medicine I and Medicine II and demonstrated leadership and humanistic qualities in medical and extracurricular activities.

***American Medical Association-Education/Research Fund Clinical Award*** – Presented to the student in the senior class with the highest record of achievement during the core clerkships.

***American Medical Association-Education/Research Fund Outstanding Student Award*** – Presented to the senior medical student with the highest record of achievement in all four years of medical school.

***American Medical Women's Association Janet M. Glasgow Achievement Award*** - Awarded if the top student in the class is a woman, based on the four-year academic record

***Dr. David A. Berman Pharmacology Award*** – Established in 1998 to honor Dr. David Berman, long-time Professor of Pharmacology, this award is given to the graduating senior who had the highest performance in the discipline of pharmacology.

***Endocrine Society Student Award*** – Given to a senior student with an outstanding academic record and a demonstrated interest in Endocrinology.

***Eric Cohen, M.D., Introduction To Clinical Medicine Award*** – Recognizes the one student who best exemplifies the goals and objectives of the ICM program.

***Excellence In Emergency Medicine Award*** – Given to recognize a senior medical student who has shown exceptional ability and performance in the field of Emergency Medicine and plans specialization in this area. The recipient is selected by the Department of Emergency Medicine from students who have rotated through their service.

***The Howard P. House, M.D. Excellence in Otolaryngology Award*** – Awarded to the most outstanding student entering a residency in otolaryngology.

***Jeanette Wilkins, M.D. Memorial Award*** – This award was instituted in 1995 in memory of Dr. Jeanette Wilkins, a former member of the Keck School of Medicine faculty, and is given to an outstanding senior woman who is entering the specialty of pediatrics, infectious disease, or orthopaedic surgery. Selection is made by a faculty committee.

***The Mark S. Ehrenreich Prize In Medical Ethics*** – Presented only when the best paper in the field of medical ethics is submitted by a senior, as judged by USC's Pacific Center for Health Policy and Ethics.

***Merck Manual Award*** – Presented to the four graduating seniors with the record of highest academic achievement during the basic sciences of Years I and II.

***Medical Student Prize Of Excellence In Neurology*** – Selected by the Department of Neurology, based on

performance during the Neurology Clerkship. The award is presented by the American Academy of Neurology.

***Sagar Gupta, M.D., Memorial Scholarship Award*** – Presented to the most outstanding graduating student who is entering a general surgery residency at LAC+USC Medical Center. In memory of Sagar Gupta, M.D., Class of 1995.

***Tom R. DeMeester, M.D., Excellence in Surgery Award*** – This award is given in recognition of a senior medical student who has shown exceptional ability and performance in the field of Surgical Medicine and will be entering general surgery or a sub-specialty of surgery, and has attained distinction or provided exceptional service to the Department of Surgery.

## **SERVICE AWARDS**

***Community Achievement Award*** – Given to honor a medical student who has had an impact on the general population and the medical community as a whole, and who has been an example of the effect that medical students can have on patient care at all treatment levels.

***Dr. George Herron, M.D., Memorial Award*** – An award given to the graduating senior who, in the opinion of the senior class, has given the most to the class during the four years of medical school. The recipient is selected by a vote of the class. In memory of Dr. George Herron, USC School of Medicine Class of 1957.

***Frederick Napier Elliott Award*** – Given to the one graduating student who best exemplifies the qualities of Dr. Frederick Elliott, a former member of the School's faculty. Award is based on a thorough understanding of the art as well as the science of medicine; a blend of compassion, insight, honesty and appreciation for the technology of medicine; and the ability to draw from patients and colleagues alike their finer attributes and to encourage them to use it to heal others as well as themselves. Students are nominated by the Associate Dean of Student Affairs and selected by an alumni committee.

***James Le Memorial Award*** – To honor a graduating MD/DDS medical student who has demonstrated school involvement at Keck and service to the community.

***Leonard Tow Humanism In Medicine Award (presented by The Arnold P. Gold Foundation)*** – Given to one senior student who, by class vote, is felt to consistently demonstrate compassion and empathy with peers and patients.

***Order Of Arête (Senior Graduate Recognition)*** – The highest honor accorded by the University of Southern California to graduate students upon completion of their academic program. Students are recognized for outstanding service and leadership, nominated by the Associate Dean of Student Affairs, and selected by the Division of Student Affairs of the University Park Campus.

***Peter J. Katsufraakis, M.D. Leadership Award*** – To honor an outstanding graduate who exhibited leadership, and community and school service.

***Skull And Dagger Society*** – This all-University organization selects one or more medical students annually who have an excellent academic record and who have attained distinction or provided exceptional service to the University. Nominations are made by the Associate Dean for Student Affairs.

## **RESEARCH AWARDS**

***American Medical Association-Education/Research Fund Research Award*** – Presented to the top student in the senior class who has authored or presented a research paper during medical school.

***The Irving I. Lasky, M.D. Memorial Award*** – The recipient is selected by a committee of faculty researchers, chaired by the Research Committee Chair, in recognition of the most outstanding research.

## GRADUATION REQUIREMENTS

### Academic Requirements for Graduation

All requirements for courses and clerkships must be completed prior to graduation. Students cannot graduate with a Fail or No Credit evaluation in any of the above components of the curriculum. Students will be responsible for ensuring that they have completed curricular requirements, and may verify their status and eligibility with the Office of Student Affairs.

Students must successfully pass all competency examinations (or make-up examinations, if eligible) from the Core Principles, Skin, Hematology/Clinical Immunology, Neurosciences, Musculoskeletal, Cardiovascular, Renal, Respiratory, Endocrine/Metabolic, Reproduction, and G.I./Liver systems. Students must successfully complete all requirements for Integrated Cases and pass the Year I and II comprehensive examinations. All requirements for Year I and II ICM and PPM must be successfully completed. The evidence-based medicine assignments and the Required Student Project must also be successfully completed.

During the Year III/IV Continuum, the student must satisfactorily complete all required curricular work as follows:

#### **Required Clerkships:                      No. of Weeks**

Family Medicine	6 weeks
Medicine I	6 weeks
Medicine II	4 weeks
Obstetrics/Gynecology	6 weeks
Pediatrics	6 weeks
Psychiatry	6 weeks
Neurology	4 weeks
Surgery	12 weeks
Total	50 weeks

#### **Other Rotations:                              No. of Weeks**

Selectives	16 weeks
Electives	16 weeks
Total	32 weeks

Note: Of the 32 weeks of Selectives and Electives, a minimum of 20 weeks must be devoted to clinical rotations. Ultimately, all Selective and Elective schedules are subject to approval by the Office of Student Affairs.

Students must pass the Clinical Performance Examination (CPX), USMLE Step 1 and Step 2 CK and CS.

### Fiscal Requirements for Graduation

The student is responsible for the timely payment of all tuition, fees and other special charges. The Office of Student Affairs will review the current status of all graduating seniors and **will not certify the student for graduation** unless all payments have been made and there are no outstanding obligations. Questions concerning financial obligations may be directed to the Financial Aid Office, KAM B22, (323) 442-1016.

### Signing out before Graduation

Graduating students must clear their records prior to graduation. A sign-out sheet will be provided and must be completed and turned in to the Office of Student Affairs before the student's diploma will be released. All portions of the sign-out sheet must be cleared.

### **Attendance at Graduation and Diplomas**

Students in good academic standing, but with curriculum deficits which may include additional required, selective or elective clerkships to meet curriculum graduation requirements, with evidence of satisfactory completion of clerkships, evidence of passing the CPX, USMLE Step 1 and both sections of USMLE Step 2, and completion of Senior Departure Sign-out Form that will be completed by June 30 may participate in commencement ceremonies with the permission of the Associate Dean for Student Affairs, but their diploma will be withheld until all curricular and financial requirements have been met. All requirements must be met by June 30th in order to receive a diploma with the May graduation date. Date of graduation will be adjusted when needed to reflect late completion of graduation requirements; University Diploma dates are also available in August (deadline July 31<sup>st</sup>) and December (deadline November 30th).

### **Diploma Security and Care**

Diplomas should be kept safe and secure. If damaged or lost, on receipt of an affidavit attesting to loss or destruction, a reissued diploma may be ordered through the Office of Degree Progress, University Park Campus. Any extant fragments of the original must accompany the order. Re-orders take from one to three months to fill. Include your USC ID, year of graduation, and your name at the time of graduation.

## **RECORD RETENTION POLICY**

### **Applicant Records**

Admissions applications are submitted electronically by each applicant via AMCAS. Letters of recommendation are submitted via electronic letter service or mail. Letters of recommendation that are not submitted electronically are mailed to the Admissions Office, scanned into PDF format, and stored electronically in two separate locations: Admissions LOR files and Admissions LOR Back-Up files. After they are scanned and stored, the original mailed letters of recommendation are destroyed; this process is ongoing throughout the application term.

All other original documents are destroyed once yearly in the summer immediately following the application term. All electronic documents are destroyed once during the summer of the following application term.

To conserve system resources necessary to maintain access to admissions documents, and to retain admissions documents and files for a period of time in accordance with professional standards and legal requirements, the following guidelines will be followed:

<b>Applicant Status</b>	<b>Retention Period</b>
Applicants who do not enroll	1 year after end of application term
Applicants who enroll	5 years after graduation or date of last attendance <i>Documents retained indefinitely: AMCAS application, Essential Characteristics form, Applicant Update Sheet.</i>

All admissions documents will be purged according to the schedule above, and the Registrar will be responsible for adhering to this schedule. For each application term, documents will be purged once yearly based on the retention schedule, and all document purging and destruction will be completed by the end of September.

### **Student Records**

The official school records on all students are kept in the Keck School of Medicine Office of Student Affairs. After graduation, portions of the student's record are stored electronically. The original folder will be stored with contents intact for 5 years. After that time, all material except the electronic record of the items listed below will be destroyed.

*Medical Student Performance Evaluation  
Transcript*

*Curriculum Schedule*  
*CPX result*  
*Photograph of Student*

Note: Letters of recommendation sent for scanning into the AAMC's ERAS system are **not** part of the student record and thus are not affected by the processes described herein. Questions regarding these procedures should be addressed to the Registrar at (323) 442-2553.

# PROFESSIONALISM POLICIES

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- Essential Characteristics and Abilities Required for Completion of M.D. Degree at the Keck School of Medicine
- Code of Professional Behavior
- Professional Behavior Expectations
- Honor System
- Professional Behavior, Probation, Dismissal and Appeal
- Student Mistreatment Procedure
- Dress Code / Appearance Guidelines

## **ESSENTIAL CHARACTERISTICS AND ABILITIES REQUIRED FOR COMPLETION OF THE M.D. DEGREE AT THE KECK SCHOOL OF MEDICINE**

### **PREAMBLE**

The M.D. degree is a broad undifferentiated degree attesting to general knowledge in all fields of medicine and the basic skills required for the practice of medicine. Essential characteristics and abilities required for completion of the M.D. degree consist of certain minimum physical and cognitive abilities, and sufficient mental stability to provide reasonable assurance that candidates can complete the entire course of study and participate fully in all aspects of medical training. The Keck School of Medicine expects its graduates to become fully competent physicians capable of completing graduate medical education, passing licensing exams, and obtaining medical licenses. The Keck School of Medicine will provide reasonable accommodation to prepare its students.

The Keck School of Medicine has an ethical responsibility for the safety of patients with whom the candidates will come into contact both before and after graduation. Therefore, patient safety is a major factor in establishing requirements for physical, cognitive and emotional capabilities of candidates for admission, promotion and graduation.

All students of medicine must possess those intellectual, ethical, physical, and emotional capabilities necessary to undertake and achieve levels of competence in the full curriculum required by the faculty. An avowed intention to practice only a narrow part of clinical medicine does not alter the requirement that all students take and achieve full competence in the full curriculum.

Essential characteristics and abilities prescribed here are a prerequisite for admission, promotion and graduation from the Keck School of Medicine. All matriculants, students and graduates must meet all prescribed essential characteristics and abilities.

### **I. PHYSICAL REQUIREMENTS**

After reasonable training and experience, the candidate must be able to observe and participate in demonstrations and experiments in the basic sciences, including but not limited to dissection of cadavers, examination of gross specimens in gross anatomy, pathology laboratory and neuroanatomy laboratories, preparation of microbiologic cultures, and microscopic studies of microorganisms and tissues in normal and pathologic states (e.g., streak plates, perform gram stains and use a microscope) necessary for such studies. Observation of gross and microscopic structures necessitates the functional use of the senses of vision and touch and is enhanced by the functional sense of smell.

After reasonable training and experience, the candidate must be capable of performing a complete physical examination, including observation, palpation and percussion and auscultation. The candidate must be capable of using instruments, such as, but not limited to, a stethoscope, an ophthalmoscope, an otoscope, and a sphygmomanometer. The candidate must be capable of performing clinical procedures such as, but not limited to, the following: pelvic examination, digital rectal examination, drawing blood from veins and arteries and giving intravenous injections, basic cardiopulmonary life support, spinal puncture, and simple obstetrical procedures. The candidate must be capable of performing basic laboratory tests, using a calculator and a computer, reading an EKG, and interpreting common imaging tests. The applicant must be able to move in the clinical setting so as to act quickly in emergencies. At the conclusion of the Introduction to Clinical Medicine course the student will demonstrate proficiency in the skills described above. By the conclusion of the clinical clerkships the student should achieve full competence in the skills described above including the ability to synthesize and organize these skills.

### **II. COMMUNICATION**

A candidate must be able to communicate with, to receive communication from, and to observe patients in order to elicit information, describe changes in mood, activity and posture, and perceive nonverbal affective and gestural communication. These communication skills also must enable the candidate to obtain a medical history in a timely fashion from a wide variety of patients, and to communicate effectively, efficiently and sensitively with all members

of the health care team, other professionals, patients and their families. Communication includes speech and writing. The student must be able to produce a written “write-up” in the clinical rotations, which includes patient history, physical exam, and assessment. Also, the candidate must be able to comprehend written material sufficiently well to understand accurately common medical records, laboratory reports, and pharmacological prescriptions.

### **III. INTELLECTUAL-CONCEPTUAL, INTEGRATIVE AND QUANTITATIVE ABILITIES:**

A candidate must have sufficient cognitive (mental) capacities to assimilate the technically detailed and complex information presented in formal lectures, small group discussions, medical literature, individual teaching settings and clinical settings. A candidate must be able to measure, calculate, reason, analyze and synthesize information across modalities, appreciate three-dimensional spatial relationships among structures and logical sequential relationships among events, and form and test hypotheses in order to enable effective and timely problem-solving in diagnosis and treatment of patients.

### **IV. BEHAVIORAL AND SOCIAL ATTRIBUTES**

A candidate must possess the emotional health, maturity and self-discipline required for full use of one’s intellectual and judgmental ability and for successful participation in, and completion of, the course of study leading to the M.D. degree. These include but are not limited to attendance, integrity, honesty, conscientiousness in work, teamwork and other attributes described in ICM (Introduction to Clinical Medicine) and PPM (Professionalism in the Practice of Medicine). The candidate must accept responsibility for learning, exercise good judgment, and promptly complete all responsibilities necessary for sensitive and effective relationships with patients and others. Candidates must be capable of interactions with patients and health care personnel in a caring and professional manner. The candidate must be able to tolerate physically taxing workloads, to function effectively under stress, to adapt to changing environments, and to display flexibility.

### **V. SAFETY**

The Keck School of Medicine has responsibility to consider the safety and welfare of patients and others. Should a candidate have a condition that would place patients or others at significant risk, that condition may be the basis for denial of admission or dismissal from school. An otherwise qualified individual shall not be excluded from admission, or participation in educational programs and activities solely by reason of his/her physical handicap, or medical condition. Students must adhere to universal precaution measures. Students must be able to comply with all School requirements working in a clinic environment and with hazardous materials.

### **VI. EVALUATION**

The Keck School of Medicine may require that an accepted student undergo an evaluation at the school’s expense for the purpose of determining whether an accepted applicant or student meets these essential characteristics and abilities.

The University of Southern California Keck School of Medicine does not discriminate against otherwise qualified individuals who apply for admission to the M.D. degree program or who are enrolled as medical students. The designated disabilities coordinator with regard to applicants with disabilities is the Dean for Admissions. The designated disabilities coordinator for enrolled medical students with disabilities is the Coordinator of Disabled Issues who may be contacted through the Office of Student Affairs. Reasonable accommodations will be granted upon request; requests should be directed to the appropriate disabilities coordinator.

The USC document on essential characteristics and abilities required for a medical degree was adapted from the Medical College of Wisconsin document on technical standards (1995).

## CODE OF PROFESSIONAL BEHAVIOR

The students of the Keck School of Medicine of the University of Southern California, in order that our activities reflect the high standards of moral character demanded by the medical profession, do subscribe to the following CODE OF PROFESSIONAL BEHAVIOR:

### Honesty and Integrity:

- We will conduct ourselves with the highest degree of integrity and honesty in all our academic endeavors including examinations, papers, procedures, and activities given by or associated with the Keck School of Medicine or the medical profession.
- We will truthfully conduct our research and report our research findings, and will not represent others' work or ideas as our own.
- We will not seek, by action or implication, oral or otherwise, to create an incorrect impression of our abilities or to create an unfair advantage over our colleagues during evaluations and other procedures.
- We will not tolerate or support unethical behavior in our colleagues and will report such behavior when it occurs through established procedures as detailed in the Student Handbook

### Responsibility, Reliability, and Accountability:

- We accept our professional responsibility to respect the time and effort of others including our patients and will be punctual with required activities and assignments.
- We hold ourselves accountable to policies and procedures of the school and its associated clinical sites including, but not limited to, evaluations, charting, and documentation requirements.
- We recognize our own personal limitations and will seek help when needed. We will not assume responsibilities beyond our capabilities.
- We will represent the Keck School of Medicine appropriately in all relevant settings.

### Respect for others (students, colleagues, faculty, staff, patients):

- We will treat others with respect and honor their dignity, both in their presence and with the health care team.
- We will not discriminate nor tolerate discrimination based on race, ethnicity, language, religion, gender, sexual orientation, age, disability, disease, or socioeconomic status.
- We will respect the confidentiality of our patients at all times.
- We will treat all members of the health care team with respect and consideration and will work in collaboration with others to achieve satisfactory outcomes.
- We will demonstrate respect for our patients and colleagues by maintaining an appearance that is appropriate to learning and patient care.

Specific violations of the KSOM Code of Professional Behavior include but are not limited to the following examples. It is not just the letter, but also the spirit of the Code of Professional Behavior that is to be upheld by students.

- Giving or receiving aid in examinations; writing or preparing reports or presentations that a reasonable person would conclude are to be done without collaboration.
- Presenting the work of someone else as one's own.
- Plagiarism, including using prepared reports from the Internet or "cutting and pasting" without referencing original works.
- Falsely reporting attendance at a required activity when the activity was not attended.
- Falsifying data in research or knowingly participating in research activities that are reporting false data.
- Falsely reporting physical examination findings, laboratory data, or patient history information.
- Forging a physician's signature, even if told to do so by the physician. This includes, but is not limited to: prescriptions, physician's orders, forms for restricted medications, and discharge summaries.
- Performing a procedure without specific authorization and/or supervision by the student's supervising physician.
- Conducting clinical responsibilities while impaired by drugs or alcohol.

In addition:

- Students must abide by all University of Southern California policies as described in the University Catalogue and the SCAMPUS student guide book (section 11.00 – 11.55, Behavior Violating University Standards).

Attendance at the Keck School of Medicine of the University of Southern California constitutes de facto acceptance of the CODE OF PROFESSIONAL BEHAVIOR and its concepts, the Honor System, and its procedures.

### **PROFESSIONAL BEHAVIOR EXPECTATIONS**

Although all students are expected to behave professionally without supervision, these expectations have been written to elaborate upon the responsibilities of all students at Keck School of Medicine.

1. The student must be punctual for and attend all required ICM sessions, Professionalism and the Practice of Medicine (PPM) sessions, lectures, rounds, clinics, conferences, and all clerkship activities.
2. The student must be present for call, and participate in all team activities.
3. Absence from any of the above activities requires a written note cleared through the Office of Student Affairs, as well as the completion of an absence request/notification form.
4. The student must introduce and represent himself or herself as a student physician at all times. Therefore, a student will not wear a long white coat or a badge misidentifying his or her level of training.
5. The student must follow the LAC+ USC professional dress code in all clinical settings.
6. The student must follow all signatures by designating their current standing, e.g., MS III or MS IV.
7. The student may sign (or indicate electronically) only his or her own name and/or signature to indicate his or her presence at a workshop, conference, or other activity with a sign-in sheet or required electronic sign-in or evaluation form. Signing in another student's or physician's name, or having another individual sign your name or otherwise indicate your presence will violate the Code of Professional Behavior.
8. The student is responsible to make sure all notes and orders are cosigned by a supervising physician.
9. The student must never forge a physician's signature, even if told to do so by the physician. This includes but is not limited to: prescriptions, physician's orders, forms for restricted medications, and discharge summaries.
10. All information reported to the team from the student must be accurate to the best of the student's knowledge. The student must not report any portion of the patient's history or physical examination unless s/he has first-hand knowledge of the information being reported. The student must report only laboratory values or test results that s/he has personally seen or seen report of. The student is expected to admit that s/he has forgotten to ask, check, or look up something if such is the case.
11. The student is expected to treat all patients, employees, colleagues, and superiors with respect.
12. The student is responsible for disseminating information to the student group/team once asked to do so. For example, a student informed of the time of rounds, the teaching of a procedure, or a special teaching session must call the other medical students involved and inform them.
13. The student must have specific authorization and/or supervision by his or her supervising physician in order to perform any procedure.
14. The student is expected to turn in all of his or her assignments on time, and the content must be original work completed for that assignment. Any incorporation of the work of others must be cited. The student is also expected to complete all requested course and instructor evaluations.
15. The student is expected to consider the professional behavior and well-being of his/her peers, and to report behaviors of concern to the course or clerkship director, or to the Associate Dean for Student Affairs.
16. Sexual advances, gestures, improper propositions, harassment, battery, threatening behavior, stalking, illegal drug possession, and any conduct breaking the law will not be tolerated.

The student must abide by all University of Southern California policies as described in the University Catalogue and the SCAMPUS student guidebook (Section 11.00-11.55, Behavior Violating University Standards).

## HONOR SYSTEM

Medical ethics is a difficult subject to describe, much less to judge. Because of the relationship of physicians to the public at large, there exist strong feelings towards physicians' attitudes and behavior by society. Traditionally, the physician has been ultimately held accountable to society. The individual doctor's actions are reviewed and endorsed by colleagues who attempt to settle in their minds whether or not the adjudged has fulfilled the basic tenets and an essentially unwritten code on the ethical care of patients.

Professional behavior encompasses integrity, respect, courtesy, and compassion, in a pattern of moral and ethical interaction with patients, peers, faculty, and staff. It requires confidentiality and responsibility regarding patient information and group discussions, and demands an understanding of and esteem for oneself, patients, peers, faculty, and staff.

The Student Ethics Committee (SEC) at USC operates in this framework. Anticipating that the student will soon find himself/herself involved in this tradition, an attempt is made to prepare him/her to understand and respect this obligation. To do so, s/he must certainly respect and have confidence in himself/herself. The SEC is a body which is elected by the students and asked to interpret and describe for them what is ethical behavior, and in certain instances, to judge whether a certain student has met those criteria. The SEC itself can only direct. The final responsibility is, of course, a private one. Attendance at USC constitutes a de facto acceptance of this Code of Professional Behavior.

### STUDENT ETHICS COMMITTEE (SEC)

#### Administration

The SEC consists of two students from each of the four medical school classes, and two faculty members who attend all meetings of the SEC in an advisory capacity. The function of the SEC and its members is to provide guidance to students and faculty concerning the Code of Professional Behavior and the Honor System, to investigate alleged violations of the Code of Professional Behavior, to make recommendations concerning such violations based upon the SEC's findings in such an investigation, and to take any other actions the SEC deems reasonable and proper in the execution of its responsibilities to the Code of Professional Behavior, to the Student Body, and to the Keck School of Medicine.

1. SEC members are elected by classmates during the general elections held each year. The term of office is from the beginning of one Fall semester to the beginning of the Fall semester one year later; incoming officers may assume responsibilities prior to the expiration of the term of the outgoing member with the consent of the outgoing member, and incoming senior members will assume office upon graduation of the outgoing senior members.
2. There is no limit to the number of terms, consecutive or nonconsecutive, which may be served by any one individual. The faculty members will be appointed by the Associate Dean for Student Affairs (in consultation with the Student Affairs Committee), and will serve a two-year term, which may be renewed any number of times.
3. The outgoing Chairperson calls a meeting of the newly elected SEC members in the spring following the election. The actual terms of service commence in the Fall semester, notwithstanding situations described above. At this meeting, the elections of officers for the following year are held. The officers to be elected and their duties are:
  - a. The Chairperson
    - (1) Will preside over meetings.
    - (2) Will preside over all Honor Boards.
    - (3) Will normally be the principal liaison between the SEC and the School Administration in all matter.
    - (4) Will meet with the first year class and familiarize any transferring students during orientation each fall and explain the Code of Professional Behavior and the SEC utilizing a brief written synopsis of the Honor System, citing scenarios of infractions and procedures to be followed.
    - (5) Will be responsible for calling a meeting of the SEC following the Year I election for the purpose of

- becoming familiar with the proceedings of the SEC.
- b. The Vice-Chairperson
    - (1) In the absence of the Chairperson, shall have the ability to discharge the duties of the Chairperson in all matters.
    - (2) Cannot be a member of the same class as the Chairperson.
  - c. The Secretary
    - (1) Will record minutes of all regular meetings and distribute them to all SEC members, the Dean, the Vice Dean for Education, the Associate Dean for Student Affairs, the Assistant Deans for Curriculum and Student Affairs, and the Associate Dean for Curriculum.
    - (2) If the Secretary cannot be present, any SEC member may sit as the Secretary, as designated by the Chairperson.
    - (3) May function as Chairperson or Vice-Chairperson when necessary.
4. Should a SEC seat become vacated during the school year, the remaining member of the affected class will immediately solicit the class at large for interested individuals to come forth and apply for the vacated seat. If necessary, a class election will be held. Should only one person come forward, she or he will automatically qualify to fill the seat.
  5. The representatives for each class are responsible for announcing the procedures and intent of the Code of Professional Behavior to their class during the first month of every school year.

#### General Considerations

1. The Vice Dean for Medical Education, the Associate Dean for Student Affairs, and the two faculty members previously mentioned, serve as an advisory body to the SEC.
2. The Student Handbook of the Keck School of Medicine of the University of Southern California shall include information concerning the existence and enforcement of the Code of Professional Behavior at the School, and shall include a statement informing prospective applicants that attendance at this School constitutes de facto acceptance of the Code and its concepts and the Honor System and its procedures.
3. For those students offered a position in a class at the University of Southern California Keck School of Medicine, a detailed explanation of the Code of Professional Behavior and the Honor System will be provided during orientation.
4. Faculty, residents, and staff at the Keck School of Medicine should also consider it their responsibility to encourage and uphold the Code of Professional Behavior, including the reporting of violators.

#### **POTENTIAL VIOLATIONS OF THE CODE OF PROFESSIONAL BEHAVIOR**

##### Procedures

1. Any individual should initiate the following procedure if an honor violation is suspected:
  - a. In order to ensure an understanding of the situation, the identifying individual should talk to the person suspected of committing the violation.
  - b. If the facts indicate a possible violation of the Code of Professional Behavior, the alleged violator should be advised to report to the SEC.
  - c. If the alleged violator is advised to report to the SEC and does not, or if circumstances do not permit the confrontation, the individual suspecting an honor violation should file a formal complaint with an SEC member.
  - d. An individual may approach an SEC member for advice without lodging a formal complaint
2. A formal complaint shall be a brief written description of the suspected infraction signed by the person bringing the complaint, and also signed by an SEC member; if an oral complaint is made to an SEC member, it shall be followed by a written description.

3. A formal complaint must be brought to the SEC not later than 30 working days after the commission of the alleged incident, unless extenuating circumstance interferes. The formal complaint shall be brought no later than 60 working days after the discovery by the SEC of the alleged incident.
4. Once a formal complaint has been lodged, or once the alleged violator has reported to the SEC, a preliminary investigation will be instituted by the SEC.
5. This procedure should be followed by all persons: faculty, students, or community members with an academic or non-academic complaint.
6. If an SEC member is accused, the member will be relieved of SEC duties until after the case has been decided.

### Preliminary Investigation

1. Upon receiving a formal complaint concerning a suspected violation of the Code of Professional Behavior, the SEC member will take the following actions:
  - a) The SEC member will inform other members of the SEC of the complaint.
  - b) A brief meeting of the SEC will be called to discuss the complaint, determine the direction and goals of the subsequent investigation, and delegate investigatory responsibilities.
  - c) To the extent possible, all persons involved with the alleged violation, including the alleged violator as well as witnesses, will be interviewed by a member of the SEC. Additionally, any factual or material evidence pertinent to the allegation will be gathered.
2. Should an alleged violator refuse to cooperate with the SEC members at any time during their actions, the SEC will proceed without the alleged violator to the conclusion of its actions.
3. The SEC members will summarize all statements, facts, and evidence, including test papers if applicable and available, into a single report which will then be submitted to the members of the SEC, to the complainant, and to the alleged violator. This shall occur as soon as possible and within 20 working days of the formal complaint.
4. The alleged violator may ask the Chairperson of the SEC to expedite the proceedings, in which case all reasonable efforts shall be made to ensure that the proceedings are hastened.
5. The SEC will meet and review the case and decide by majority vote whether the case should be dismissed or continued to an Honor Board. A tie vote will be decided by a faculty member; faculty will otherwise not vote on whether to proceed to an Honor Board. If the SEC decides to dismiss the case, the alleged violator and the complainant will immediately be informed,
6. If the SEC decides to continue to an Honor Board, the following will occur:
  - a) The Chairperson of the SEC will inform the alleged violator in writing that the SEC has decided to bring the case before an Honor Board and of the charges to be presented to the Board. The SEC will provide the alleged violator with a copy of the SEC's procedures. The Chairperson will explain the procedures, and will answer any questions.
  - b) The accused shall have fifteen (15) working days after receiving the notification of the SEC's decision to proceed to an Honor Board to prepare for the Honor Board proceedings. If after 15 days from the notification, the alleged violator is unable to show cause for continuance, the case will proceed to an Honor Board.

## **HONOR BOARD**

### General Considerations

1. The Honor Board shall consist of nine members: the six medical student SEC members who are not classmates of the accused, one of the two appointed faculty SEC members, and two additional faculty members chosen by the SEC in consultation with the Associate Dean for Student Affairs.

2. The Dean of the Keck School of Medicine will not be eligible to sit on the Honor Board. Faculty members who teach in the organ system or the clinical service where the alleged infraction occurred, if applicable, cannot sit on the Honor Board.
3. The SEC will notify the Dean of the Keck School of Medicine (or his designee) of an impending Honor Board, in order that the Dean may notify the University legal staff. The University legal staff will place utmost priority on the Honor Board proceedings.
4. Should an alleged violation of the Code of Professional Behavior arise when there is a vacancy or vacancies in the SEC membership, the class presidents who are not classmates of the accused will fill said vacancies on the Honor Board, but only for a time period sufficient to resolve the issue at hand.
5. The alleged violator has the right to choose any person (exclusive of SEC members), and/or legal counsel to assist in the defense of the allegation. If the accused chooses to have legal counsel present, s/he must notify the investigating member no later than ten (10) working days before the Honor Board.
6. The burden shall be on the accused to request documents in advance of the Honor Board hearing, other than those previously specified, which will be used against the accused.
7. If the alleged violator is unclear of the charges, the burden shall be on the accused to request a clarification of the charges in advance of the Honor Board hearing.

#### Duties of the Honor Board Officer

1. The Chairperson of the SEC will preside over the proceedings, and will make procedural and evidentiary ruling.
2. The Secretary will be responsible for making a tape recording of the proceeding. Said tape recording shall remain in the possession of and shall exist for the use of the SEC exclusively. Tape will be retained until appeals or options for appeals have expired, and will then be destroyed.
3. If after the 15 days described previously, the alleged violator is unable to show cause for continuance, the case will proceed to the Honor Board. The investigating members of the SEC will be responsible for arranging a time and place for the Honor Board which is reasonably agreeable to all parties. He/she will be responsible for insuring the notification of all witnesses as to the time and place, and for the presence of all material evidence at the Honor Board.

#### Procedures

1. The purpose of an Honor Board is to make a determination of the facts of the case and to make a recommendation to the Dean or his designee.
2. An Honor Board will be convened as described previously.
3. The accused shall have the option as to whether he/she desires his/her Board proceedings open to the medical student body or closed to include only those individuals directly involved with the case.
4. Any arrangements with regard to due process afforded by these procedures shall be submitted to the Board no less than 3 day prior to the scheduled date of the hearing.
5. The Chairperson will call the meeting to order. He/she will then call upon the investigating member.
6. The investigating member of the SEC will present the facts and evidence of the case as established by the preliminary investigation. The following points shall be brought out by the presentation:
  - a) Name of the accused
  - b) Witnesses involved

- c) Nature of the suspected violation
  - d) Points of conflict.
7. Questions may be asked of the investigating member by the Honor Board or by the accused (who will be present during all testimony during his/her Honor Board).
  8. Any witnesses specified by the investigating member will now be called to testify before the Board. The Chairperson will instruct witnesses that the Honor Board is meeting to investigate the facts of the case and will ask the witnesses to tell what they know of the case. After the witness has testified, questions may be directed to the witness. Anyone present at the Board meeting may ask questions, although preference will be given to the members of the Honor Board. When there are no further questions, the witness will be excused. This procedure will be repeated with each witness.
  9. The accused will present his/her case and will answer questions. Anyone present may ask questions, although preference will be given to members of the Honor Board. The accused may then call any additional witnesses to testify in his/her behalf before the Honor Board. Anyone may ask questions, but preference will be given to members of the Honor Board. When there are no further questions, the witness will be excused. This procedure will be repeated with each witness.
  10. Formal rules of evidence do not apply. Hearsay evidence is admissible. However, the final decision cannot be based on the hearsay evidence alone. Cross-examination will be limited to the discretion of the Honor Board and shall not be unreasonable, repetitive, redundant, argumentative, harassing, vexing or irrelevant to any matter before the Board. In the foregoing instances, the Board will exercise its discretion to terminate cross-examination.
  11. After all evidence had been presented, the Honor Board will meet in closed session to consider the facts and reach a decision as to whether or not the allegation has been substantiated. This session will not be tape-recorded.
  12. A unanimous vote (by secret ballot of student and faculty members) of the Honor Board will be required to substantiate an allegation of an Honor Code infraction. If a unanimous decision cannot be reached initially, further deliberation and further voting can take place. If an infraction is substantiated, the Honor Board must agree on a recommendation for subsequent action by two-thirds vote. The Board will submit to the Dean of the Keck School of Medicine (or his designee) recommendations as to disposition of the case.
  13. Recommendations to the Dean of the Keck School of Medicine or his designee may include but are not limited to the following:
    - a. Dismissal of the individual from the Keck School of Medicine of the University of Southern California.
    - b. Dismissal from the individual's current class, with re-entry into the Keck School of Medicine with a subsequent class.
    - c. Retaking of any examination in question.
    - d. Being placed on Professional Behavior Probation.
    - e. Other recommendations as the facts and judgment of the Honor Board warrant.
  14. The Dean or his designee will meet with the Chair of the Honor Board and will then make a final decision concerning the disposition of the case, taking into account the findings and recommendations of the Honor Board.
  15. The Dean or his designee will inform the accused, accuser, and the Honor Board of his decision.
  16. The Chair of the Honor Board will then inform the rest of the involved parties.

#### Records of the Board Proceedings

If an infraction is substantiated, records of any case which results in any type of student censure will be preserved to protect the School and the Honor Board, but only the infraction and action taken may appear in the Medical Student

Performance Evaluation (MSPE). Records will be maintained in accordance with University policies pertaining to records of student conduct. If any infraction is not substantiated, all records of the investigation will be destroyed.

## **PROFESSIONAL BEHAVIOR PROBATION, DISMISSAL AND APPEAL PROCESS**

### **PROFESSIONAL BEHAVIOR PROBATION**

A student may be placed on Professional Behavior Probation for violations of the Code of Professional Behavior. Once a student has been placed on Professional Behavior Probation, any additional violations of this Code or these expectations may constitute the sole reason for further disciplinary action or dismissal from the Keck School of Medicine.

1. A student may be placed on Professional Behavior Probation by an Honor Board, a Performance Committee, the Associate Dean for Student Affairs, and/or the Dean of the Keck School of Medicine.
2. A student placed on Professional Behavior Probation shall be reported by the Office of Student Affairs to the appropriate Performance Committee and his or her status will be reviewed at least yearly by that committee. During this review, the student may be removed from Professional Behavior Probation status at the discretion of both the Performance Committee and the Associate Dean for Student Affairs.
3. A student on Professional Behavior Probation may request an early review by the Performance Committee prior to completing one year's probation. The student on probation must give the Performance Committee at least one month's advance notice to complete an early review.
4. A student placed on Professional Behavior Probation shall be reported to course/ clerkship directors, along with a copy of the Code of Professional Behavior and the Expectations that the student is expected to follow. Although the clerkship directors are notified, the past violation should not be noted or considered in the student's evaluation.
5. The fact of Professional Behavior Probation will be included in the student's Medical Student Performance Evaluation (MSPE) unless later specifically removed by both the Performance Committee and the Associate Dean for Student Affairs. Removal by the Performance Committee will require a majority vote by a quorum.

### **DISMISSAL**

A student may be dismissed from the Keck School of Medicine without first having been placed on probation.

#### **Procedure for Dismissal**

1. A student who is being considered for dismissal shall be invited to meet with the Associate Dean for Student Affairs no later than ten (10) days prior to the appropriate Performance Committee meeting so that any extenuating circumstances may be made known.
2. The student will receive a written statement that he/she may be considered for academic dismissal at least ten (10) days prior to the meeting of the Performance Committee.
3. The student may inspect his/her medical school file, including material upon which the proposed dismissal is based.
4. The student will be given an opportunity and is urged to appear before the appropriate Performance Committee when a recommendation for dismissal is being considered. The student may waive his/her right to such an appearance. The student should notify the Associate Dean for Student Affairs in writing within five (5) business days prior to the meeting of his/her intent to appear.
5. The student shall be given a written copy of all rules and procedures to be followed at least ten (10) days prior to the student's hearing.
6. If the student attends the Performance Committee meeting, the student may be accompanied by counsel but

must inform the Associate Dean for Student Affairs of this intent at least ten (10) days prior to the meeting.

7. A quorum (two-thirds of the membership) must be present to vote on dismissal. Affirmative votes by two-thirds of the members present are necessary for dismissal. If a Committee member is unable to attend a meeting, he/she may send an alternate who has prior approval of the Vice Dean for Education. The alternate has full authority to act in the absence of the regular Committee member.
8. At the students' request, he/she will be provided the information against him/her, including academic reports and evaluations used in arriving at the summation of his/her performance.
9. The student will have an opportunity to present any relevant information to the Performance Committee regarding his/her performance, using any relevant evidence including affidavits, exhibits and oral testimony. If the student desires copies of written materials to be distributed to Committee members, he/she must present them to the Office of Student Affairs at least three (3) business days before the meeting, or prepare the materials him/herself.
10. Recommendations for student dismissal must be based upon the information presented at the hearing.
11. The recommendations of the Performance Committee will be transmitted orally to the student by the Chairperson of the respective Performance Committee. The recommendations of the Committee will be transmitted in writing to the Vice Dean for Education and the student within three (3) business days following termination of the meeting.

### **APPEAL PROCESS**

1. The student may appeal the Committee's recommendation to the Vice Dean for Education no later than ten (10) business days following transmittal of the Committee's written recommendation.
2. The Vice Dean for Education may choose to uphold, to reverse, to ask the Committee to reconsider, or may choose to appoint an ad hoc committee to hear the student's appeal.
3. The members of this ad hoc committee shall be faculty members who have not been involved in the decision to dismiss. The Chairperson of the respective Performance Committee shall present the findings of the Performance Committee to the ad hoc appeals committee but shall not sit as a voting member of said Committee.
4. The ad hoc hearing committee shall submit its recommendation in writing to the Vice Dean for Education within five (5) business days after the meeting.
5. Following receipt of the Performance Committee or ad hoc hearing committee recommendation, the Vice Dean for Education will issue a final decision in writing to the student. There is no appeal from the Vice Dean's decision.

## **STUDENT MISTREATMENT PROCEDURE**

### **I. INTRODUCTION**

The diversity and complexity of the medical education environment require the medical school to reaffirm, on a periodic basis, its expectations of students, faculty, and staff. The spirit of this procedure is to promote dynamic personal and professional growth at all levels of the medical campus. This procedure seeks to limit any breach in the integrity and trust among students and professionals in the health care environment, by establishing standards of conduct, and a means of fairly dealing with problems of student mistreatment. This procedure is an important pillar of support to the mission statement of the university.

The Student Mistreatment Procedure (SMP) has been developed for the Keck School of Medicine with several goals in mind. Before stating those goals, however, it should be emphasized that this procedure is by definition subordinate to:

- 1) State and Federal Law
- 2) USC University Procedure
- 3) Affiliating Institutional Procedure (for problems in other medical education venues)

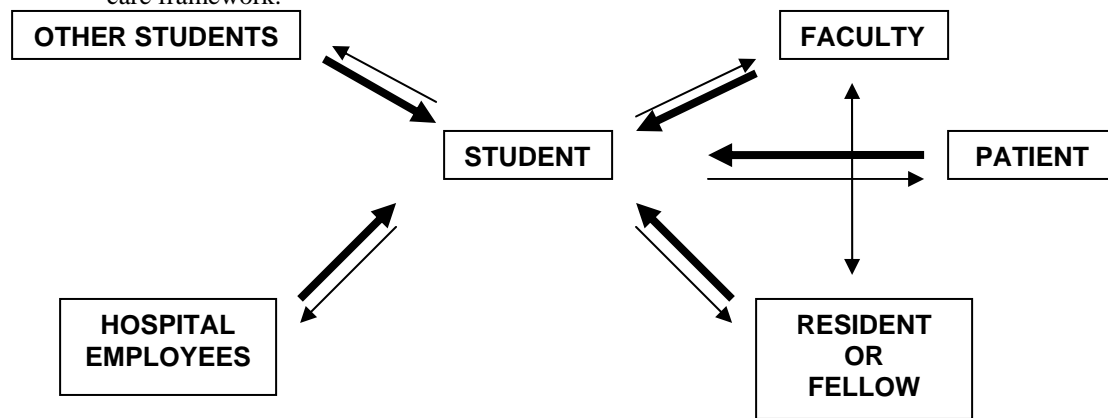
While the subordinate nature of this procedure is a legal necessity, the Student Affairs Committee believes that the medical education environment is unique and that this procedure may address several goals, including:

- 1) Explication of standards of conduct within the medical school and its research community.
- 2) Maximizing the opportunity for “local” mutually satisfactory remedies to be reached.
- 3) Delineation of an equitable method of investigating and adjudicating student mistreatment complaints.
- 4) Provision of a means of monitoring complaint occurrences within the medical school so resources can be directed toward solutions.
- 5) Protection of the rights of both the complainant and the accused.

**II. A UNIQUE ENVIRONMENT: The need for a Keck School of Medicine Student Mistreatment Procedures.**

The medical learning environment is more complex than the undergraduate environment for several reasons. These include:

- 1) Physical intimacy of medical examination and teaching;
- 2) Overnight call environment;
- 3) Prolonged hours in many medical arenas;
- 4) Patient care must supersede teaching and learning objectives;
- 5) Intimate partner relationships that may develop between members of the medical community;
- 6) Medical student vulnerability due to career aspirations, residency matching, and the subjective nature of medical education evaluation;
- 7) The teacher, student, and patient all have rights, which must be respected within the teaching and patient care framework.



The complex relationships of the medical education environment: student mistreatment may occur along any bold arrow.

**FIGURE 1**

In response to these realities, and a perceived need for a more explicit procedure governing the medical campus, the Student Affairs Committee created the Keck School of Medicine Student Mistreatment Procedure. This procedure is designed to maximize student protection in the complex medical learning environment, while providing an opportunity for local rapid solutions without necessarily resorting to legal remedies. To achieve this end, the Student Affairs Committee has sought to define the institutional standards, and to create a procedure for reporting and adjudication that does not conflict with other institutional procedures. Examples and definitions of appropriate and inappropriate behavior (see part III) will help both the student and the teacher understand what is and is not professional behavior. This understanding will help all to maintain the value of professionalism, which the university represents and promotes.

Goals of this procedure:

- 1) To define our principles of community and standards of conduct;
- 2) To provide a means of determining when an investigation is warranted;
- 3) To establish a non-threatening and easily accessible mechanism for reporting alleged mistreatment;
- 4) To provide an equitable method of locally investigating and resolving complaints, consistent with other university procedures;
- 5) To guarantee the rights of due process; and
- 6) To appropriately protect both the complainant and the accused.

### **III. INSTITUTIONAL STANDARDS AND DEFINITIONS**

#### ***Principles of Community***

USC is a multicultural community of people from diverse racial, ethnic and class backgrounds, national origins, religious and political beliefs, physical abilities, and sexual orientations. Our activities, programs, classes, workshops/lectures, and everyday interactions are enriched by our acceptance of one another, and we strive to learn from each other in an atmosphere of positive engagement and mutual respect. As professionals, we are responsible for our behavior and are fully accountable for our actions. We each must take responsibility for our awareness of racism, sexism, ageism, xenophobia, homophobia, and other forms of oppression.

Bigotry will not go unchallenged within this community. No one has the right to denigrate another human being on the basis of race, sex, sexual orientation, national origin, etc. We will not tolerate verbal or written abuse, threats, harassment, intimidation, or violence against person or property. In this context, we do not accept alcohol or substance abuse as an excuse, reason, or rationale for such abuse, harassment, intimidation, or violence. Ignorance or “it was just a joke” is also not an excuse for such behavior. Such behavior will be subject to the University’s disciplinary processes. All who work, live, study and teach in the USC community are here by choice, and as part of that choice, should be committed to these principles which are an integral part of USC’s focus, goals and mission. (*We wish to acknowledge the roles played by the University of California, Irvine and Santa Cruz, in the evolution and wording of “Principles of Community”*).

#### ***Standards of Conduct in the Keck School of Medicine***

Effective, caring and compassionate health care depends critically on the professional and collegial attributes acquired by medical students during their education. In this regard, the teacher-student relationship is one of the most important, since the teacher is responsible for both imparting information and guiding the personal development of the student. The teacher also stands as a potential role model for any student and it is therefore important that the teacher’s behavior towards her or his students is equitable and professional. At the core of an effective learning environment lies mutual respect between the teacher (including, but not limited to, faculty, residents and staff) and the student, and between each student and his/her student colleagues.

To this end, the Keck School of Medicine will not tolerate the harassment or abuse of, discrimination against, or improper favoritism towards a student by a teacher or a student colleague. This includes, but is not limited to:

### **A. Harassment of a Sexual Nature**

This includes, but is not limited to

1. Unwanted sexual advances,
2. Unwanted and inappropriate touching,
3. Displaying sexually suggestive materials in an unreasonable and inappropriate manner,
4. Unreasonable and inappropriate sexual comments in the presence of, or directed to, any person,
5. Making training, advancement, promotion or rewards contingent on sexual favors, and
6. Requesting sexual favors in return for grades.

### **B. Discrimination, Harassment and Abuse**

Examples include:

1. Denying opportunity of training or rewards based on gender, race, color, national or ethnic origin, sexual orientation (or perceived orientation), religious belief, age, disability or military service,
2. Conduct towards an individual intended to insult or stigmatize him/her,
3. Making inappropriate physical contact with the student,
4. Humiliating/denigrating the student, either privately or in the presence of other students, staff members, faculty or patients,
5. Requiring students to perform personal services for a teacher,
6. Grading or evaluating a student's performance on factors other than merit, and
7. Exclusion of a student from any usual education opportunity for any reason other than as a justifiable response to that student's performance or merit.

### **C. Abuse of a Student Based on His/Her Failure to Perform Adequately**

Upon occasion, the performance of a student may fall below that expected by the teacher. The teacher must ensure that his/her response to such an event is remedial, without being punitive or harsh. Under no circumstances will abuse directed towards the student be permitted. Abuse includes, but is not limited, to those items listed above.

### **D. Favoritism Towards a Student or Group of Students**

Although instances may arise when an instructor comes to favor some students over others, this should in no way skew her or his teaching activities such that:

1. Some students receive better access to information than others, or
2. Some students and their opinions are neglected in the teaching process, or
3. Some students receive preferential treatment which is not available to all students equally, and/or not based upon academic merit.

Teachers are also cautioned against behavior that leads to the perception of favoritism.

## **IV. REPORTING PROCEDURES**

The Office of Equity and Diversity must be notified of complaints by faculty, staff, students or applicants who believe themselves to be harmed by sexual harassment or discrimination and harassment related to issues that have [protected class status](#) (which includes, but is not limited to, sex, race, gender, national origin, color, religion, marital status, and any other class protected by law). The exception is if the complaint is from one student about another student (see process below). The office represents the university to government agencies, including Los Angeles County, on those same matters. Should a complaint of sexual harassment or discrimination and harassment be brought forth, it is extremely important that the Office of Equity and Diversity is contacted immediately. Keck School of Medicine may not proceed in any way to investigate allegations of this sort on its own.

A prompt report of harassment, mistreatment or retaliation is very important for several reasons. The Keck School of Medicine is better able to investigate and remedy complaints if they are immediately brought to attention. The recollection of witnesses generally diminishes over time. Many perpetrators will discontinue inappropriate behavior once they understand that it is objectionable. The School's ability to impose a meaningful remedy dissipates with the passage of time. For all these reasons, the Keck School of Medicine urges that complaints be filed promptly.

In the absence of a complaint, the Keck School of Medicine may initiate an investigation if it has reason to believe that its procedure prohibiting harassment, mistreatment or retaliation has been violated.

#### **A. Informal Consultation**

A student considering making a report may bring his or her concerns related to the incident(s) to a **Primary Contact**. Primary Contacts are the Associate or Assistant Dean for Student Affairs. Complaints should be brought to a Primary Contact as soon as possible, but within 90 days of the incident(s). This 90-day limit does not apply to cases which fall under the purview of the Office of Equity and Diversity. Delay in taking action with respect to an incident may foreclose other remedies.

The reporting individual may consult **informally** with either Primary Contact for information and assistance. The Primary Contact's duties shall include but are not limited to:

1. Counseling the student with respect to his/her rights.
2. Facilitating communication with the alleged offender, the alleged offender's Program Director, Department Chair, or other appropriate supervisors (at student request).
3. Serving as a sounding board, thus allowing the student to vent his/her feelings.
4. Assisting the student in filing a formal complaint.
5. Ensuring that the Office of Equity and Diversity is notified in a timely manner when appropriate.

Any such informal consultation will be confidential unless the student consents to mediation with the alleged offender, or if the alleged offense is reportable by law or otherwise required to be reported. An informal consultation may result in:

1. No written record if so requested by the complainant or
2. A confidential memorandum generated by the Primary Contact and retained in the files of the Chair of the Student Affairs Committee. (Confidential memoranda may be made available to the other members of the Student Affairs Committee should more than three complaints arise against one individual over the course of a single calendar year, or if the nature or degree of the complaints causes the Chair to believe the matter merits review by the Student Affairs Committee). If a pattern of mistreatment is suspected, the Student Affairs Committee may initiate an inquiry on its own by convening a Sub-Committee on Student Mistreatment. After two complaints have been received against the same individual, the alleged violator will be warned by the Committee that "some students" (no names given) perceive his/her conduct to be in violation of the School's Standards of Conduct, and that should this conduct continue, further steps will be taken.

#### **B. Formal Reporting**

To make a **formal** complaint of an alleged violation of the Standards of Conduct, a written, signed description of the alleged violation should be submitted to the Primary Contact. The report should be filed with the Primary Contact within 90 days of the occurrence of the alleged act. Early filing is encouraged so that the investigation can be more complete and more detailed. The student has the option to suggest a possible remedy.

The Primary Contact shall then forward the written complaint to the **Student Affairs Committee**. An ad hoc Student Affairs Sub-Committee on Student Mistreatment will be convened. This 5-member sub-committee (consisting of 3 faculty and 2 student members of the Student Affairs Committee) will conduct a preliminary investigation, giving the reporting individual, the alleged offender, and any other persons the sub-committee identifies, the opportunity to express their views on the matter. The sub-committee shall make it clear to all parties that retaliation in any way against any participant in the process is forbidden. The sub-committee shall

make a preliminary determination of the events documented in the complaint.

Thereafter, the sub-committee shall issue a written statement of its preliminary findings and recommendations for vote by the Student Affairs Committee. (Note: the Associate Dean for Student Affairs will abstain from voting at this time if the conflict involves 2 students). The decision of the Student Affairs Committee will be sent to the appropriate supervisor(s) who, in consultation with the Student Affairs Committee, will decide on final disciplinary action. Discipline will be consistent with University and School of Medicine policies on disciplinary actions as set forth in the USC Faculty Handbook, the USC Staff Employee Handbook, and the Keck School of Medicine Student Handbook, as applicable.

### **On-line Reporting Process**

In addition to the informal consultation and formal reporting processes outlined above, a student has the option of using the Keck School of Medicine online reporting system to report any concerns related to mistreatment by students, residents, faculty or staff. The report will be sent to the Chair of the Student Affairs Committee who will oversee the investigation of the incident. The report may be anonymous, however that may limit our ability to complete the investigation or to provide follow up information. The website for the on-line report is [medweb.usc.edu/studentmistreatmentreportindex.htm](http://medweb.usc.edu/studentmistreatmentreportindex.htm)

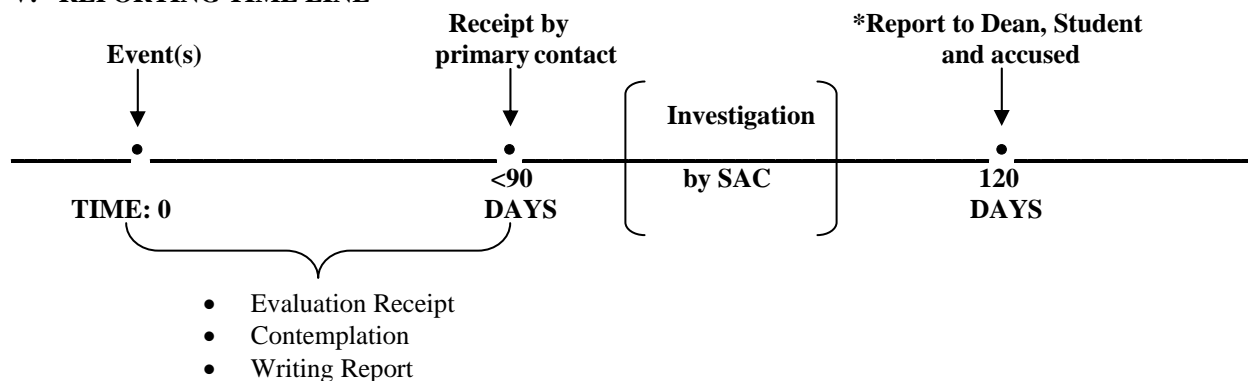
The Student Affairs Committee will issue its recommendation to the appropriate party/individual as follows:

If the offender is determined to be:

- A faculty member, the recommendation goes to the:  
Dean of the Keck School of Medicine  
Department Chair  
Senior Associate Dean for Faculty Affairs  
If faculty is an employee of LAC then Human Resources at LAC may also be advised of findings
- A resident, the recommendation goes to the:  
Program Director  
Department Chair  
Designated Institutional Officer/Associate Dean for Graduate Medical Education
- A student, the recommendation goes to the:  
Associate Dean for Student Affairs
- A University employee, the recommendation goes to the:  
Supervisor or Department Chair
- A LAC+USC employee, the recommendation goes to the:  
Department Chair  
Human Resources at LAC as indicated

The final decision will be issued in a statement by the Student Affairs Committee and provided to the individual making the report, the alleged offender, and the designated supervisors. If the sanction or corrective action is not in agreement with the remedy requested by the complainant, the reason for this decision shall be included in the written ruling. Sanctions shall go into effect against the person concerned no sooner than 10 calendar days after she/he has received a copy of the ruling, unless she/he files a written appeal with the Vice Dean for Education before 10 days have elapsed (time frames in accordance with the staff/faculty handbook). The Vice Dean for Education shall decide the appeal within 14 days of receipt and shall notify the individuals of his/her decision.

**V. REPORTING TIME LINE**



\*Investigation may take longer depending on schedules, availability, and witness related issues.

- 1) Student may stop at the primary contact.
- 2) Student may seek remedy outside the Student Affairs Committee at any time.

**VI. PROTECTION OF COMPLAINANT AND ACCUSED**

Students, hospital employees, patients, residents, fellows and faculty have individual rights, which should be recognized in the application of these procedures. With regard to allegations of student mistreatment, the student and teacher should remain vigilant to each other’s rights and responsibilities.

**THE STUDENT**

**THE ACCUSED (faculty, resident, or student as applicable)**

• Has a right to educational resources and facilities	• Has a right to establish performance standards
• Has a right to a confidential non-threatening reporting process	• Has a right and a duty to maximize patient care
• Has a right to a learning environment consistent with the definitions in Part III	• Has a right to a confidential timely non-threatening notification process
• Has a right to counseling and support services	• Has a right to protection from knowingly and intentionally false accusation
• Has a right to a timely response	

Since disputes of this nature can be career threatening, all must understand that false accusations must be prohibited. Protection of the faculty and residents from false accusation is essential for both the students and the faculty/residents. For these reasons a local investigation to establish the nature of the problem by the Student Affairs Committee (with **both** student and faculty input) is essential. This process will also provide the greatest likelihood of achieving a local solution which is satisfactory (and constructive) to both parties.

Finally, neither the faculty’s, resident’s nor the student’s rights supersede the patient’s right for care. Both the teacher and the student must be aware of this priority at all times.

**DRESS CODE / APPEARANCE GUIDELINES**

**PURPOSE:**

The USC Keck School of Medicine recognizes that dress, grooming, and personal hygiene contribute to the morale

of all and the image that the USC Keck school of Medicine presents to patients, families, and the community. The image presented in interactions with patients, colleagues, and visitors has a major influence on how one is perceived as a professional. Students at the Keck School of Medicine are expected to promote a professional environment. The following guidelines are the minimum standards for all USC Keck School of Medicine students.

## **POLICY GUIDELINES:**

### **Minimum Professional Standards**

#### **Personal Hygiene/Cleanliness:**

- Hair is to be clean and well groomed; for patient care, hair must be secured at the shoulders as to not require handling.
- Men must be clean-shaven or beards and mustaches must be clean, neatly trimmed, and well groomed.
- Body hygiene is required so that offensive body and/or breath odor is avoided.
- Cosmetics should be appropriate for a business environment and not detract from a person's appearance.
- Strong perfumes, colognes, lotions and/or after-shave lotion should not be worn.
- Fingernails must be kept clean, well manicured, and trimmed at a length that does not interfere with patient care performance and personal safety. Acrylic and artificial nails are not permitted.

#### **Clinical Setting Attire:**

- The official LAC+USC Healthcare Network photo identification badge must be worn at all times, between the shoulder and the waist, with the name and picture easily visible.
- KSOM issued white coat must be clean and pressed.
- Men: Collared shirt –button down or polo-style (necktie as required by ICM and respective clerkship) and trousers in clean, pressed, and in good condition.
- Women: Blouse with slacks or skirt, or a dress in clean, pressed, and in good condition with appropriate undergarments. Clothing must not be tight, sheer, or revealing. Skirts and dresses must be an appropriate length.
- Hosiery or socks are to be worn at all times per LAC+USC Healthcare Network dress code.
- Any clean and closed-toe and -heel shoes constructed of sufficient strength to protect the foot may be worn. Open-toe shoes, slingbacks, sandals, and flip-flops are not permitted for safety issues.
- Only facility provided scrubs may be worn on clerkships where they are allowed. Scrubs should be clean. Note: t-shirts or short sleeve shirts may be worn under scrubs in the operating room only if contained within the scrub shirt.
- Jewelry should not interfere with patient care performance and personal safety. Dangling jewelry including but not limited to ornate rings, long neck chains and earrings that extend below the ear lobe may not be worn by patient care personnel. Body piercing ornaments and earrings worn in other visible exterior parts of the body, other than the ear are not permissible\*.
- Students will also need to adhere to the dress code policies of any assigned clinical site (e.g., Kaiser, California Hospital, Cedars Sinai, etc.).

#### **Inappropriate Attire Not Permitted in Clinical Settings:**

- Jeans, denim, or denim-like fabric
- Shorts of any type, tights alone, leggings, mini-skirts, sweat pants or shirts, and athletic wear
- T-shirt, undershirts or sleeveless shirts worn by themselves
- Midriff, off-the-shoulder, spaghetti-strap, or strapless blouses, sweaters, and dresses
- Hats, caps, or visors indoor\*
- Wearing operating room/procedure room attire (masks, booties, hair coverings) outside of patient care areas
- Torn, wrinkled, unclean clothing, and scrubs
- Ill-fitting clothing or scrubs (oversized which is potentially hazardous)

**Classroom Setting/Presentations:**

As a participant in a graduate program and a representative of the USC-KSOM, it is important that personal hygiene/cleanliness and clothing/attire be appropriate for interaction with peers and faculty members. Students are to wear professional clothing/attire for presentations in the classroom (ICM, PPM, Clerkships, Poster Forums, Senior Seminar Series, etc.).

\* Wearing these items for medical or religious reasons is acceptable.

The KSOM Dress Code includes the LAC+USC Healthcare Network Dress Code and was adapted from the UCSF School of Dentistry Dress Code.

Approved by the USC KSOM, Educational Performance Committee, May 2009

# STUDENT HEALTH

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- Student Health Requirements
- Policies for Prevention of Bloodborne Pathogen Infection
- Policy for Students with Chronic Viral Hepatitis
- Student Disability Insurance

## **STUDENT HEALTH REQUIREMENTS UPON ENTRANCE TO THE SCHOOL**

Prior to matriculation, each student is required to submit a physical examination, health history, and proper medical documentation for the following requirements:

**Tuberculosis (TB) clearance:** A negative tuberculin skin test must be placed **two months or less** from your school start date. If the student has a history of a positive tuberculin skin test, he/she must have a negative chest x-ray performed **six months or less** from your school start date.

**Measles, Mumps and Rubella (MMR):** Positive IGG titer

**Tetanus/Diphtheria (Td):** Booster injection within the last 5 years  
(Booster injection must be 5 years or less from your school start date)

**Varicella:** Positive IGG titer

**Hepatitis B:** 3 injections and positive Hepatitis B surface Antibody titer

**\*Note:** Meningococcal vaccine is offered, but may be declined without restricting access to clinical rotations.

**\*Note:** Failure to provide adequate documentation may be grounds for restricting patient contact and/or registration.

## **ONGOING STUDENT HEALTH REQUIREMENTS AFTER ENTRANCE TO THE SCHOOL**

An annual tuberculin skin test (every 6 months for some facilities) is required for all students. An annual chest x-ray is required for those with positive tuberculin skin tests. The Student Health Fee will cover chest x-rays only for those students whose skin tests show conversion **during** their education on the Health Sciences Campus.

It is the policy of the Keck School of Medicine that all health care providers and all students involved in clinical care are expected to attend all patients, regardless of disease. Medical students, residents and faculty members have a fundamental responsibility to provide care to all patients assigned to them. A failure to accept this responsibility violates a basic tenet of the medical profession: to place the patient's interest and welfare first. Faculty have a special responsibility to model the professional behavior and attitudes expected of physicians in training, in their own willingness to provide competent, sensitive, and compassionate care to all patients.

### **Guidelines:**

If a violation of the policy occurs, the Associate Dean for Student Affairs will be informed.

1. Individuals who have had difficulty adhering to this policy will be referred for counseling and/or education.
2. If violations persist, despite the measures above, further refusal to care for such patients will result in disciplinary actions, including, but not limited to the possibility of interim and/or permanent suspension.

## **POLICIES FOR PREVENTION OF BLOODBORNE PATHOGEN INFECTION AND TREATMENT FOLLOWING ACCIDENTAL EXPOSURE**

Needlestick and Bodily Fluid Exposure Protocol:

**An exposure incident occurs when human blood or other potentially infectious materials enter your body by:**

- A splash to the eye, mouth or other mucus membrane
- Contamination of non-intact skin
- A puncture or cut with a sharp instrument which has been exposed to another's body fluid

**If exposed immediate first aid should be administered:**

- Wash needlesticks and cuts with soap and water. Flush splashes to the nose, mouth, or skin with water. Irrigate eyes with clean water, saline, or sterile irrigants. Report the incident to your supervisor and immediately seek medical treatment.

**Obtain Source Patient Information:**

- Obtain as much demographical data on the source patient as possible. (Name, Date of Birth, Medical Record Number, the diagnosis and history (including history of hepatitis, liver disease, HIV status, blood transfusions and IV drug or alcohol abuse).
- Exposure must be reported to the student's immediate supervisor. (Resident, Chief, Attending)
- The supervisor will consent the source patient to testing for HIV, HBV and HCV at the time of exposure or when medically able to obtain consent.

Students must immediately call the USC Eric Cohen Student Health Center **(323) 442-5631**. If after hours or over a weekend/holiday, telephone Student Health at (323) 442-5631 and ask for the physician on duty.

**For treatment to prevent bloodborne disease after exposure:**

- Hepatitis B (HBV) can be prevented by vaccination
- Human Immunodeficiency Disease may be prevented by taking post exposure antiviral and inhibitor drugs
- Hepatitis C (HCV) has no preventive therapy

For all students, all required initial baseline care, follow-up lab testing and prophylactic medications for a reported episode of potential occupational Bloodborne Pathogen (BBP) exposure are provided at no cost.

Needlesticks that occur outside of University Hospital or L.A. County Hospital may be treated with the local facility's protocols. Your insurance will cover this service at 90%. Also, be sure to immediately call the Eric Cohen Student Health Center for additional instructions. Occupational exposures should be considered urgent medical concerns to ensure timely postexposure management and administration of HBIG, hepatitis B vaccine, and/or HIV PEP.

**POLICY FOR STUDENTS WITH CHRONIC VIRAL HEPATITIS  
(Persistent Hepatitis B or C antigenemia)**

Patients infected with viral hepatitis pose a potential threat to any health care provider caring for them. While this risk is variable depending on the patient and the clinical situation, it is imperative that students observe proper procedure when dealing with all patients. This should include use of Standard Precautions in all patient contact.

Health care providers infected with viral hepatitis can also pose a threat to patients. Cases of hepatitis transmission from physician to patient are documented in the literature, and therefore students infected with viral hepatitis may have additional matters to consider regarding their contact with patients. These considerations will likely extend throughout their education and careers, and form the basis for the following policy.

1. All medical students are required to obtain hepatitis B vaccination before beginning medical school, and certainly before any patient contact. The vaccine is highly effective at inducing immunity to hepatitis B, and its side effect profile is minimal.
2. Students infected with chronic viral hepatitis (hepatitis B or hepatitis C) are required to discuss their condition with a physician or physician assistant in the Student Health Service. This discussion should include an evaluation of their current health status (or review of data previously collected elsewhere), and consider the impact their hepatitis infection may have on patients seen during their training.
3. Students are encouraged but not required to meet with faculty advisors regarding the potential impact hepatitis may have on their future career and specialty choice. This is especially important for any student with chronic hepatitis infection who is considering a surgical career. Appropriate advisors include the Chair or Chief of the

specialty being considered, faculty in the specialty being considered, and the Associate or Assistant Dean for Student Affairs.

4. Students are required to meet with the Director or another physician in the Employee Health Service of the LAC+USC Medical Center before beginning clinical rotations to discuss recommendations and potential restrictions on their clinical activities. This will generally take place prior to the beginning of the third year of the curriculum.
5. Students who are Hepatitis e antigen positive, and thus have the potential for significantly greater risk to patients, will not be allowed direct patient contact in operating rooms, burn units, the newborn nursery or other settings where immunocompromised patients would be at risk. Acceptable alternate educational experiences will be developed wherever possible to provide the student with the full educational benefit available, though there may be some instances where an equivalent experience will not be possible.
6. To comply with these policies, students are required to discuss their situation with the clerkship coordinator before beginning their rotation in Surgery, Pediatrics, Obstetrics-Gynecology, and other clinical rotations where their hepatitis status may have an impact on their clinical responsibilities. If the student and clerkship coordinator are unable to reach a mutually acceptable agreement regarding the student's activities, the Associate Dean for Student Affairs will be contacted by either party to arrive at a resolution. This resolution will follow consultation with other individuals or resources as needed.
7. To the extent possible, this process will respect and maintain the confidentiality of all involved parties. The health status of the affected student will not routinely be released to other members of the health care team, staff, faculty or patients.

This policy was adopted November 16, 1995 following input and review by clinical faculty, the Student Health Service of the Health Sciences Campus, the Employee Health Service of the LAC+USC Medical Center, the Associate Dean for Student Affairs, and University legal counsel. Any questions should be directed to the Associate Dean for Student Affairs.

### **STUDENT DISABILITY INSURANCE**

All medical students enrolled full-time in the School of Medicine will be covered in an AMA-sponsored group disability insurance program (\$61.00/year during 2008-2009), which will be added to your student fee bill. Should you become disabled due to illness (including pregnancy) or accidental bodily injury which occurs while you are insured; the plan will provide you with an income of approximately \$1,000.00 per month, after a 90 day elimination period, during your disability. Students may continue their coverage upon entering a residency program by purchasing the conversion policy at a rate determined by the provider. Terms and cost cited above are accurate as of time of printing, but students should verify this information by consulting the actual policy.

A full description of your benefits while in school and, potentially for the remainder of your professional career, is contained in print materials distributed during orientation week furnished by the Guardian Life Insurance Company. Any questions regarding coverage may be directed to the Broker (Health Professionals Insurance Services, Inc., at 1-800-628-2861).

Enrollment in this program establishes a relationship between the student and the insurer independent of the University and the Keck School of Medicine. Changes in coverage, terms, fees and other attributes of this insurance are at the discretion of the insurer. Neither the School nor the University has responsibility for any aspect of the relationship between the student and the insurer.