Policies and Procedures Manual:
Medical Student Enrollment, Assessment of Academic Progress, Promotion and Graduation

These policies supersede all previous versions of the Policies and Procedures Manual and other information that may contradict the written policies. The information provided in this manual is subject to change at any time by action of the School of Medicine Administration. The most current version of this document can be found online.

Questions regarding the information contained herein may be referred to:

Office of the Associate Dean for Undergraduate Medical Education
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   Vice Dean for Medical Education
   Associate Dean for Undergraduate Medical Education
   Assistant Dean for Basic Science Education
   Assistant Dean for Clinical Education
   Assistant Dean for Student Affairs and Career Development
   Associate Dean for Admissions, Diversity and Inclusion
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I. MANAGEMENT STRUCTURE AND OVERVIEW OF RESPONSIBILITIES

Dean of the Medical School

The Dean of the Medical School is responsible for all education, research, medical, and fund-raising activities at the medical school. These education activities include undergraduate medical education (UME), graduate medical education (GME) and continuing medical education (CME). The dean delegates all medical education responsibilities to the Vice Dean for Medical Education. The Dean reports to the President of Wayne State University.

Vice Dean for Medical Education

The Vice Dean for Medical Education is delegated the responsibility from the Dean of the Medical School for all education activities (see figure 1). This includes UME, GME, and CME programs. The Vice Dean is also responsible for admissions, student affairs, education support functions, and all student promotion activities. The Vice Dean is also Chair of the Scholarship Committee and reports to the Dean of the Medical School.

Associate Dean for Undergraduate Medical Education

The Associate Dean for Undergraduate Medical Education is responsible for the development, implementation, and coordination of all undergraduate medical education curriculum activities. The Associate Dean is also responsible for records and registration, testing services, evaluation, academic support services, and Co-Curricular programs. The Associate Dean chairs the Curriculum Committee and reports to the Vice Dean for Medical Education.

Assistant Dean for Basic Science Education

The Assistant Dean for Basic Sciences is responsible for all the processes associated with Basic Science education. The Assistant Dean for Basic Sciences reports to the Associate Dean for Undergraduate Medical Education.

Assistant Dean for Clinical Education

The Assistant Dean for Clinical Sciences is responsible for all processes associated with clinical education. This also includes supervision of the director for clinical medicine I-II and the director of clinical support. The Assistant Dean for Clinical Sciences reports to the Associate Dean for Undergraduate Medical Education.

Assistant Dean for Student Affairs and Career Development

The Assistant Dean for Student Affairs and Career Development oversees all non-education programs that are administered to students, including: career development counseling, student organizations, health services (crisis intervention, supportive counseling, referrals), leaves of absence, ERAS/NRMP guidance and special events (White Coat Ceremony, Match Day, Commencement and others). The Assistant Dean also serves as a counselor and sounding board.
to students in all aspects of their school lives. The Assistant Dean for Student Affairs and Career Development reports to the Vice Dean for Medical Education.

**Associate Dean for Admissions, Diversity and Inclusion**

The Associate Dean for Admissions, Diversity and Inclusion is responsible for the selection processes associated with the matriculation of new students in the medical school. The Associate Dean is also responsible for coordination of the post-baccalaureate and outreach enhancement programs. The Associate Dean for Admissions, Diversity and Inclusion reports to the Vice Dean for Medical Education.

**Chief Administration Officer**

The Chief Administrative Officer (CAO) is responsible for human resources, support services, and budgetary functions for all the offices in the undergraduate medical education program. The CAO reports to the Vice Dean for Medical Education.
Course Directors and Faculty

Individual course directors are responsible for the delivery of course content and determining the methods by which students are evaluated and grades are determined. Faculty participate in curriculum renewal, deliver the curriculum as approved by the Curriculum Committee, and assess student knowledge and skills.

Overview of UME Education Committees

Curriculum Committee
The curriculum is reviewed and managed to ensure that the curriculum is delivered and evaluated accordingly. The various management methods include, E*Value, curricular maps, organization and review through the Basic Science and Clinical Science Course/Clerkship Directors Committees, with final approval of the Curriculum Committee. The Curriculum Committee monitors the content of required courses and clerkships, identifies gaps and redundancies, through the work and subsequent reporting of the Course Director and Clerkship Director Committees. In addition, the assistant deans for undergraduate medical education annually review the course and clerkship content with the Vice Dean of Medical Education to further identify gaps and redundancies. Medical students selected by the Student Senate attend monthly curriculum meetings and provide feedback on the curriculum.

Curriculum Committee members also address potential new areas for curriculum development if there are identified gaps and subsequently will instruct the chair of the Curriculum Committee to further explore and recommend the next steps regarding the proposed content area. Individual faculty members may have a unique interest in a content area and may respond to a request for proposals from a funding agency. Requests for curriculum change are first reviewed with the Vice Dean for Medical Education and then automatically sent to the Curriculum Committee for review. The Curriculum Committee is the approving body for all curriculum changes.

Promotions Committee

The Promotions Committee is the WSUSOM’s decision-making body with regard to the promotions and graduation process and has the prerogative of determining the student’s fitness and suitability for the study and practice of medicine. The Promotions Committee reviews whether students are making Satisfactory Academic Progress for federal financial aid eligibility and makes decisions relative to the retention and promotion of students. It also has the responsibility of assuring that due process, and that the rules and policies of the School are followed. See the section on the Promotions Committee for a further description of the role of the Promotions Committee.

Professionalism Committee

The Professionalism Committee is WSUSOM’s body for monitoring medical student professional behavior and for promoting the development of professionalism. The committee follows the University policies and procedures for guiding the Student Code of Conduct. All reports of unprofessional student conduct are investigated. See the section of the Professionalism Committee for a further description of the structure and function.
II. ENROLLMENT

Technical Standards for the WSUSOM

A candidate for the MD degree must possess abilities and skills which include those that are observational, communicational, motor, intellectual-conceptual (integrative and quantitative), and behavioral and social.

Once applicants with disabilities are accepted to a medical school, the school must provide certain accommodations to those persons so that they can enjoy the same services, benefits, and educational and training opportunities as those without disabilities. The law requires “reasonable” accommodation, but an accommodation cannot alter the essential elements of a course. Similarly, the technical standards of a program cannot be altered. The use of a trained intermediary is not acceptable in many clinical situations in that it implies that a candidate's judgment must be mediated by someone else's power of selection and observation. Any student who believes they have a disability should report to the WSU Office of Student Disability Services for determination of the disability and associated accommodation. Any student who believes they have a disability, please refer to the procedures associated with the Wayne State University Student Disability Services in this document.

Observation

The candidate must be able to acquire a defined level of required information as presented through demonstrations and experiences in the basic sciences, including but not limited to information conveyed through physiologic and pharmacological demonstrations in animals, microbiological cultures and microscopic images of microorganisms and tissues in normal and pathological states. Furthermore, a candidate must be able:

- To observe a patient accurately, at a distance, and close at hand, to acquire information from written documents, and to visualize information as presented in images from paper, films, slides or video.
- To interpret x-ray and other graphic images, and digital or analog representations of physiologic phenomenon (such as EKGs) with or without the use of assistive devices. Such observation and information acquisition necessitates the functional use of visual, auditory and somatic sensation while being enhanced by the functional use of other sensory modalities. In any case where a candidate's ability to observe or acquire information through these sensory modalities is compromised, the candidate must demonstrate alternative means and/or abilities to acquire and demonstrate the essential information conveyed in this fashion. If the alternatives are acceptable, it is expected that obtaining and using such alternate means and/or abilities shall be the responsibility of the student.

Communication

A candidate must be able to speak, to hear and to observe patients by sight in order to elicit information, describe changes in mood, activity and posture, and perceive nonverbal communications. A candidate must be able to communicate effectively and sensitively with
patients. Communication includes speech, reading and writing. The candidate must be able to communicate effectively and efficiently in oral and written form with all members of the health care team.

Motor Skills

It is required that a candidate possess the motor skills necessary to directly perform palpation, percussion, auscultation and other diagnostic procedures. The candidate must be able to execute motor movements reasonably required to provide general and emergency medical care such as airway management, placement of intravenous catheters, cardiopulmonary resuscitation, application of pressure to control bleeding, suturing of wounds and the performance of simple obstetrical maneuvers. Such actions require coordination of both gross and fine muscular movements, equilibrium and functional use of the senses of touch and vision.

Intellectual-Conceptual (Integrative and Quantitative) Abilities

The candidate must be able to measure, calculate, reason, analyze, integrate and synthesize. In addition, the candidate must be able to comprehend three-dimensional relationships and to understand the spatial relationships of structures. Problem solving, the critical skill demanded of physicians, requires all of these intellectual abilities. The candidate must be able to perform these problem-solving skills in a timely fashion.

Behavioral and Social Attributes

The candidate must possess the emotional health required for full utilization of his/her intellectual abilities, the exercise of good judgment, the prompt completion of all responsibilities attendant to the diagnosis and care of patients, and the development of mature, sensitive, and effective relationships with patients. The candidate must be able to tolerate physically taxing workloads and to function effectively under stress. He/she must be able to adapt to changing environments, to display flexibility, and to learn to function in the face of uncertainties inherent in the clinical problems of patients. Compassion, integrity, concern for others, interpersonal skills, interest and motivation are all personal qualities that will be assessed during the admissions and educational processes.

Ability to Comply with Clinical Patient Safety and Health Standards Policies

Wayne State University School of Medicine students are required to comply with all patient safety standards and requirements at the sites of their clinical rotations. This includes but is not limited to wearing hospital-approved operating room attire, following regulations related to sterilization procedures, and receipt of specific immunizations and/or evidence of immunity from specific diseases. Students must undergo periodic health testing in order to receive instruction in clinical settings and perform the essential function of a medical student. Additional information is in Refusal of Required Immunizations and Health Screenings policy for more information. It should be noted that failure to meet the requirements for patient safety, vaccination and/or health testing will result in the student not being permitted to train in affiliated clinical facilities,
thereby preventing the student from completing the required curricular activities needed to receive the Medical Doctor (M.D.) degree.

**Criminal Background Check Guidelines**

**Purpose**

In an effort to enhance the safety and well-being of patients and to ensure that students can become licensed physicians, the American Medical Colleges (AAMC) has recommended to medical schools the need to conduct criminal background checks on all enrolled medical students.

**Policy**

1. All matriculating students must have a criminal background check.

2. All students entering into the third year of medical training will be required to complete and submit an attestation form certifying at the time of Year 3 registration, that they have not been convicted of a felony. Students who self-report a felony will follow the review process as outlined for matriculating students and will not be allowed to begin classes until approval is granted by the Criminal History Review Committee (CHRC).

3. Any student whose background check contains a felony conviction will be referred to the CHRC. This committee will review the felony conviction report and allow the student an opportunity to address any erroneous information and clarify the report.

4. If the CHRC finds the severity of the felony impacts the students opportunity to matriculate or their “good standing” enrollment status, current students will be referred to the School of Medicine’s Promotions Committee for review, with a recommendation for dismissal. Students offered a position in the matriculating class, but have not matriculated will be referred to the Office of Admissions with a recommendation not to admit.

**Process**

1. The School of Medicine will convene a Criminal History Review Committee (CHRC). The chair of the promotions committee will chair the CHRC. The committee will consist of the following members: the assistant dean of student affairs, associate dean of undergraduate medical education, an appointed member of the promotions committee, and is staffed by the chief administrative officer in the department of medical education.

2. Students who are offered a spot in the incoming class will be required to obtain a criminal background check at their own expense using the services of Certiphi Screening Incorporated. Certiphi will create a Wayne State University profile that will only screen for convictions and conviction-equivalent adjudications/felonies only. When the background check is completed, Certiphi will release the information to the student for
review. Once the review is completed the student must release the report to Wayne State University.

3. If upon completion of the background check a felony conviction is found, the report will be reviewed by the CHRC. In the case of current student who self-reports a felony on their attestation sheet the CHRC will order a new criminal background check for review. The review will include the severity of the felony conviction, age the felony occurred and the time that has elapsed since the conviction.\textsuperscript{1}

4. Students with felony convictions listed on their report will meet with the CHRC. The student will have an opportunity to provide written documentation to respond to the report. Students will have 5 business days following notification from the medical school of the felony to provide any information about the circumstances surrounding the felony conviction.

5. If the CHRC finds the severity of the felony impacts the students opportunity to matriculate or their “good standing” enrollment status, current students will be referred to the School of Medicine’s Promotions Committee for review, with a recommendation for dismissal. Students offered a position in the matriculating class, but have not matriculated will be referred to the office of Admissions with a recommendation not to admit.

6. To maintain confidentiality, a student’s felony conviction report and any supporting documentation will be retained and stored in a secure manner. The file will be kept in the office of Records and Registration separate from student academic files. Upon graduation, withdrawal, or dismissal the file will be destroyed.

\textsuperscript{1} Guidelines obtained from the Michigan Department of Community Health website:
http://www.michigan.gov/mdch

**Compliance with Health Standards**

**Required Vaccinations/Evidence of Immunity Policy**

As a medical students and future members of the healthcare workforce it is important for WSU School of Medicine students to provide documentation that they have had all necessary vaccinations or have evidence of immunity from specific diseases. This documentation is essential not only to show that the student is protected, but also to protect those patients with whom they will come in contact during clinical rotations, visits to clinical facilities, and in the course of volunteer or relief programs. This documentation is also required by our affiliated clinical teaching facilities. The specific requirements for vaccination/immunity documentation are listed below. These requirements are based upon current recommendations from the U.S. Center for Disease Control (CDC), the Michigan Department of Community Health (MDCH), and other expert authorities. This information and the requirements must be reviewed very carefully to ensure compliance and should be shared with students’ healthcare providers as needed.

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Students must provide the specific dates of vaccinations or titers and if antibody titers are drawn, then copies of the actual laboratory reports must be provided to the Student Health Officer for inclusion in the students’ health files.

Annual influenza vaccinations and TB testing will be offered here at the School of Medicine at the appropriate times of each school year.

Any questions regarding this policy should be addressed to the Medical Student Health Officer at healthofficer@med.wayne.edu.

Required documentation of vaccinations or evidence of immunity

1. Tdap (Tetanus toxoid, reduced diphtheria toxoid and acellular pertussis vaccine)—this is a somewhat different formulation than the DTaP or DPT vaccinations that most of our students received in infancy/early childhood and it is also different than the Td (commonly “Tetanus shot”) that many may have received as adolescents or adults for tetanus prophylaxis for wounds. The Tdap has the standard dose of tetanus toxoid, a reduced dose of diphtheria and an acellular booster for pertussis (“wbruhooing cough”). With the resurgence and increasing incidence of pertussis, the CDC and other authorities have recommended that all healthcare providers who have not received a Tdap as an adult (i.e. at age 16 or older) should receive one, regardless of the time since their last Td vaccination. The hospitals in which our students participate in clinical rotations are requiring explicit documentation of the adult pertussis vaccination in order for students to be in their facilities.

2. Measles and mumps—documentation of two doses of these vaccinations is required or alternatively if documentation of two doses is not available, the individual should have quantitative measles and mumps antibody titers drawn to assess their immunity to these infections. (If antibody titers are drawn, then copies of the actual laboratory reports must be provided to the School of Medicine)

3. Rubella—documentation of at least one dose of this vaccination is required or alternatively if documentation of at least one dose is not available, the individual should have a quantitative rubella antibody titer drawn to assess their immunity to this infection. (If antibody titers are drawn, then copies of the actual laboratory reports must be provided to the School of Medicine)

4. Varicella—documentation of two doses of this vaccination is required or alternatively if documentation of both doses is not available, the individual should have a quantitative varicella antibody titer drawn to assess their immunity to this infection. If a student has a history of having had the chicken pox they would need to have a varicella titer drawn to confirm their immunity in the absence of having had varicella vaccinations. A history of having “had the disease” is not adequate documentation of immunity to varicella. (If antibody titers are drawn, then copies of the actual laboratory reports must be provided to the School of Medicine)

5. Hepatitis B—documentation of three doses of this vaccination is required and this is the one vaccination for which a quantitative antibody titer (anti-HBs) documenting the
individual’s response to the immunizations is required even with the documentation of the appropriate vaccinations having been completed. (Copies of the actual laboratory reports must be provided to the School of Medicine)

Annual Influenza Vaccination Policy

WSU School of Medicine students are required to receive an influenza vaccination each year. This annual requirement should be completed as soon as possible after the vaccine becomes available, but in any case no later than November 30th each year. Influenza vaccinations are essential in reducing the students’ risk of contracting influenza, reducing the risk to their family members, and most importantly to reduce the risk of influenza among those patients with whom they will come in contact during clinical rotations, visits to clinical facilities, and in the course of volunteer or relief programs. Documentation that each student has received an annual influenza vaccination is also required by our affiliated clinical teaching facilities. This policy is based upon current recommendations from the U.S. Center for Disease Control (CDC), the Michigan Department of Community Health (MDCH), and other expert authorities.

Annual influenza vaccination opportunities will be offered here at the School of Medicine at the appropriate times of each school year, typically in the late summer or early fall. Students must provide specific documentation to the Student Health Officer of their influenza vaccinations if they receive them from a health care provider outside of the School of Medicine programs. This documentation will be placed in the students’ health files here at the school.

Any questions regarding this policy should be addressed to the Medical Student Health Officer at healthofficer@med.wayne.edu.

Annual TB Screening Policy

1. Medical students, like all other healthcare personnel, must undergo tuberculosis (TB) screening on an annual basis during time periods determined by the School of Medicine and its affiliated teaching hospitals and clinical facilities.

2. A student’s failure to comply with the TB screening requirements of the School of Medicine may result in that student being excluded from participating in training or other activities at those facilities in accordance with their individual institutional infection control policies.

3. Upon completion of TB screening, the student will be asked to sign a release allowing the Wayne State University School of Medicine and/or its agents to release information regarding the results of this testing to affiliated health care facilities where students are participating in clinical educational activities which require confirmation that the students have completed the testing mandated by those facilities.

4. TB screening programs will be offered here at the School of Medicine according to the following general schedule:
a. Year 1 student screening will be scheduled in the fall of Year 1 (baseline screening)

b. Year 2 student screening will be scheduled in the spring of Year 2 (in preparation for beginning clinical rotations in Year 3)

c. Year 3 student screening will be scheduled in the spring of Year 3 (in preparation for continuing clinical rotations in Year 4)

d. Students may choose to have TB screening done at outside medical facilities, but must then provide the School of Medicine with documentation from those facilities of the screening results

5. TB screening will be undertaken according to the population to which each student belongs as follows:

   a. Students with no prior history of a positive Tuberculin Skin Test (TST) nor a positive Interferon-Gamma Release Assay (IGRA) blood test for TB Infection
   Should undergo routine TST.  (Alternative would be IGRA testing)

   b. Students who have received bacille Calmette-Guerin (BCG)vaccination in childhood
   Should undergo routine TST.  (Alternative would be IGRA testing)

   c. Students known to have latent TB (as evidenced by a history of a past positive TST or IGRA)
   Must have evidence of one negative chest x-ray and should submit a yearly TB symptom survey.
   (Students will need to submit a copy of the actual negative chest x-ray report to be placed in their medical folder at the School of Medicine. Students are strongly encouraged to keep a personal copy of their negative x-ray report to avoid unnecessary repeat chest x-rays)

6. Students should be aware that other institutions and medical facilities where they may apply to undertake electives and other training as a medical student may have different policies for TB screening that are not under the control of the School of Medicine.

7. Any questions regarding this policy should be addressed to the Medical Student Health Officer at healthofficer@med.wayne.edu.

Respirator Fit Testing Policy

All medical students are required to be fit tested to wear a 3M—N95 Respirator before beginning Year 3 clinical rotations, generally in the late winter or early spring of Year 2. The fit testing program is coordinated and scheduled by the School of Medicine and takes place at the school. This fit testing is required by our clinical training sites as part of their infection control policies.

N95 Respirators provide protection against aerosols and droplets that might contain bacteria, viruses, or other pathogens. They are required for personnel who are caring for specific patients such as those with tuberculosis or those with influenza who are undergoing procedures that might generate aerosols—for which regular surgical masks do not provide protection. N95 Respirators may also need to be worn by certain healthcare personnel who require a higher level of protection or by all personnel during times of a serious outbreak of an airborne infectious disease.

Students who decline respirator fit testing may be subject to one or more of the following actions that may be taken by our clinical training sites:

1. Exclusion from participating in some or all clinical training activities at their sites; or

2. Requiring the student to use and/or purchase for use a Powered Air Purifying Respirator (PAPR), which consists of a mask, headgear/hood, and battery powered blower unit (if available); or

3. Other restrictions imposed by the clinical training site(s) in accordance with their individual institutional infection control policies or respiratory protection programs.

Questions regarding this policy should be addressed to the Medical Student Health Officer at healthofficer@med.wayne.edu.

Refusal of Required Immunizations and Health Screenings Policy

-Regarding the potential refusal by a medical student to comply with required immunizations or medical testing for religious or other reasons-

The various affiliated hospitals and other clinical training sites where Wayne State University School of Medicine students are placed for their clinical rotations have stringent requirements that all members of their healthcare workforce are required to receive specific immunizations and/or have evidence of immunity from specific diseases and undergo periodic health testing in order to receive instruction in clinical settings and perform the essential functions of a medical student. This immunization requirement/documentation is essential not only to show that the students are protected, but also to protect those patients with whom they will come in contact during clinical rotations, visits to clinical facilities, and in the course of volunteer or relief programs. This immunization requirement/documentation is also required by our affiliated clinical teaching facilities before any medical student is allowed into their institutions. These requirements are very specific and are based upon current recommendations from the U.S. Center for Disease Control (CDC), the Michigan Department of Community Health (MDCH), and other expert authorities. The requirements are posted on the School of Medicine website, but are subject to revision at any time as dictated by changes originating from regulatory bodies,
clinical training sites, expert recommendations, changes in public health conditions, and advancements in medical science.

While the WSU SOM recognizes that a student may want to request an exemption from any required immunizations and/or from providing required evidence of immunity from specific diseases or from undergoing required periodic health testing either for his/her own health reasons or because these requirements conflict with his or her religious beliefs or practices. However, because these immunization requirements are imposed by our various affiliated hospitals and other clinical training sites, and because clinical training is an essential element of completing the requirements for a medical degree, such an exemption cannot be granted if the failure to meet these requirements would prevent the student from performing the essential functions of a medical student and from fulfilling the curricular requirements of the academic program.

It should be noted that failure to meet the requirements for vaccination and/or health testing will likely result in the student not being permitted to train in affiliated hospitals and other clinical facilities, thereby preventing the student from completing the required curricular activities needed to receive the Medical Doctor (M.D.) degree.

Any questions regarding this policy can be addressed to the Medical Student Health Officer at healthofficer@med.wayne.edu.

Needlesticks and Other Exposure to Blood/Body Fluids Policy

During the course of a medical student’s education, he or she will come into contact with occupational hazards as a natural consequence of caring for sick patients. Medical students have an increased risk for injuries due to needle sticks or contact with other sharp instruments since they may not yet be skilled in the procedures being performed. At all times, if a student is uncomfortable performing an assigned procedure because they feel either that their skills are inadequate or that they need more supervision/guidance than is available, then that student MUST refrain from doing the procedure.

Never attempt a procedure you are uncomfortable performing.

It is the obligation of the School of Medicine to formally educate its students regarding the prevention of occupational injuries. In addition, the school has developed programs by which students who are injured or exposed to blood or body fluids in the course of their training have the knowledge to properly seek care. Such programs are formally presented to students in the first, second and third years of the medical school curriculum, most recently as part of your Year 3 Orientation. In the event that a student is stuck with a needle or other sharp instrument, or sustains exposure to a body fluid on mucus membranes or non-intact skin, the student must report this to their senior resident or attending physician immediately. A written report must be completed detailing the circumstances of the exposure. The student must notify the School of Medicine’s Medical Student Health Officer of the reported incident via email at: healthofficer@med.wayne.edu.
The medical school has established relationships through affiliation agreements with all of our Clinical Site facilities (hospitals and ambulatory sites). Specific policies must be followed when an exposure or potential exposure has occurred:

A. A student who sustains an exposure to blood and/or body fluids in the course of a clinical assignment at any of our affiliated clinical institutions should immediately seek care in the designated department of that facility (Occupational/Employee/Corporate Health). These departments are listed for each institution on the back of the laminated cards that are distributed at Year 3 Orientation. This list should be kept for potential use during Year 4. If the exposure incident occurs during the regular business hours of the institution's designated department, the student will be seen for initial evaluation and treatment in that department at the expense of the institution (including charges for a 5 day supply of any necessary post-exposure prophylactic medications). This policy applies only to care of the initial event, and does not obligate any hospital or clinic to provide or pay for ongoing or long-term care resulting from an injury, accident or exposure which might have occurred on their premises.

B. If the incident occurs outside of the regular business hours of the institution's designated department (Occupational/Employee/Corporate Health), the student will receive initial evaluation and treatment in that institution's Emergency Department. Both the facility and professional charges for the student's Emergency Department evaluation and treatment (including fees for a 5 day supply of any necessary post-exposure prophylactic medications) will be billed to the student's personal (required) health insurance carrier. Any co-pays or deductibles for the above evaluation and treatment not covered by the student's required personal health insurance will be covered by the School of Medicine. Documentation of these non-covered charges must be sent to the School of Medicine's Student Health Officer at healthofficer@med.wayne.edu.

C. After the initial evaluation and treatment encounter at the clinical institution, the student will subsequently follow-up with their personal physician using their own health insurance coverage within five days of the incident.

D. All injured students must complete a short Wayne State University Report of Injury form for the WSU Office of Risk Management as soon as possible after the incident. This form is online at: http://idrm.wayne.edu/risk/Report_of_Injury.php. It is important to follow the instructions on that page since students only need to fill out the top portion of the form. The form may be submitted electronically to WSU Risk Management. If there are any questions about that form, the WSU Office of Risk Management can be contacted at (313) 577-3110. Additional information can also be found on their FAQ page at http://idrm.wayne.edu/risk/faq.php.

E. A copy of the Report of Injury form must be submitted at the same time to the Medical Student Health Officer at healthofficer@med.wayne.edu.

F. Any questions regarding this policy should be addressed to the Medical Student Health Officer at healthofficer@med.wayne.edu.
Infection control/Blood-Borne Pathogens Infection Policy

1. The Wayne State University School of Medicine (SOM) is dedicated to educating its students in the provision of health care of the highest quality. It abides by professional values that recognize the primacy of patient welfare and the need to reduce risks to the health of both patients and students within the framework of outstanding medical education activities.

2. The SOM is firmly committed to educating all Wayne State University medical students in universal precautions and in doing so before the start of their clerkship years. In addition, the SOM is committed to reemphasizing and reinforcing universal precautions training regularly over the course of those years.

3. The SOM believes it is important to annually review this policy and revise/update it as necessary to reflect the current level of science and national guidelines with respect to blood-borne pathogens.

4. Every student must strictly adhere to universal precautions, including appropriate hand washing, using recommended protective barriers, and taking meticulous care in the use and disposal of needles and other sharp instruments when on any clinical assignment (including, but not limited to, clerkships, electives, and volunteer clinical activities) whether at Wayne State University affiliated hospitals and clinical facilities or at non-affiliated or outside institutions.

5. The SOM follows the current recommendations of the U.S. Center for Disease Control (CDC), the Michigan Department of Community Health (MDCH), and other expert authorities in requiring that any person (including medical students) who performs tasks involving contact with blood, blood-contaminated body fluids, other body fluids, needles, or sharp instruments must be vaccinated against hepatitis B and their response to vaccination must be documented by obtaining appropriate antibody titers.

6. It is the duty and responsibility of any student who has risks for a blood-borne pathogen infection to be tested and KNOW their own status with respect to HIV, hepatitis B, and hepatitis C.

7. The SOM is committed to advising and providing continued career guidance to any and all students who know, or suspect they have, a blood-borne pathogen infection. As such, the SOM requires any student who knows or suspects that they have a blood-borne pathogen infection to report their status to the School of Medicine’s Medical Student Health Officer so that the student can be further counseled.

   a. The SOM requires students who know that they have a blood-borne pathogen infection to obtain a formal consultation from an Infectious Disease specialist with specific experience and expertise in the issues of health care providers with these conditions. The SOM can provide assistance in identifying such specialists.
b. In addition to following universal precautions, students with a known blood-borne pathogen infection are required to seek expert guidance, as noted above, before participating in exposure-prone procedures.

8. As is true for patients, SOM students have a right to privacy with respect to their personal health information including their blood-borne pathogen status. This information will be protected in accordance with the applicable SOM and University privacy policies and as required by state and federal laws.

9. If a blood-borne exposure occurs, however, in which there is a reasonable chance that blood was transmitted from the student to the patient, then the student has the personal responsibility and the SOM requires that student to immediately report their blood-borne pathogen status to their supervisory attending physician so that appropriate post-exposure prophylaxis may be undertaken on behalf of the patient. Similarly, should a blood-borne exposure occur from the patient to any student, the student is required to immediately report the exposure to the supervisory attending physician so that appropriate evaluation and post-exposure prophylaxis may be undertaken on behalf of the student. Additional information concerning the procedures to be followed by students who are potentially exposed to blood-borne pathogens can be found in the Health and Wellness section of the Office of Student Affairs and Career Development web pages available on the SOM website.

10. Medical students who believe that their blood-borne pathogen status is or might be a disability that could impact their medical school performance and might require accommodations in their medical school training are encouraged to consult with a disability specialist in the Wayne State University Student Disability Services (SDS) office. Detailed information about SDS, the Americans with Disability Act (ADA), SDS policies and procedures, documentation guidelines, and types of accommodations can be found on the SDS website at http://studentdisability.wayne.edu/index.php.

11. Any questions regarding this policy should be addressed to the Medical Student Health Officer at healthofficer@med.wayne.edu.

Acute Medical Events Policy

Wayne State University School of Medicine strives to create a safe environment for all faculty, students and visitors.

1. If someone becomes acutely ill or is injured and requires intervention:
   a. Remain calm and keep aisles, stairs, and doors clear of obstructions.
   b. Do not block doors.
   c. If the individual feels able to independently pursue medical care for their illness or injury and does not appear to be in any imminent danger, they should be allowed and encouraged to immediately seek this care. Students should report to the Office of Student Affairs for assistance.
   d. If, however, there is any doubt whatsoever about the individual’s ability to independently pursue medical care for their illness or injury, then the WSU
Campus Police should be contacted immediately at 313-577-2222 and they should be advised of the individual’s location and the nature of their illness/injury.
   i. Do not move the victim unless there is an immediate life threatening emergency
   ii. Comfort the victim and reassure them that medical assistance is on the way.
   iii. Remain on the scene to assist WSU Campus Police/Medical Service Providers with pertinent information about the incident.
   e. If the emergency occurs during non-business hours, please call WSU Campus Police at 313-577-2222 for assistance.

2. To Stop Bleeding:
   a. Apply direct pressure to the wound.
   b. Maintain steady pressure.
   c. Elevate limbs that are bleeding.

3. Burns and Chemical Burns:
   a. Remove victim from source of the burn if it is safe to do so. If chemical is involved, wear gloves or other protective gear.
   b. Cool the burn with large amounts of water. For chemical burns, remove contaminated clothing.
   c. Loosely cover burn with dry or sterile dressing.
   d. For electrical burns, make sure power source is OFF before making contact with the victim. If the victim is unconscious, do not move unless there is immediate danger. Loosely cover burn with dry or sterile dressing.

4. CPR/Heart Attack
   a. Call WSU Police immediately at 313-577-2222.
   b. Automated electronic defibrillators (AEDs) are available at locations throughout the School of Medicine buildings to be employed by those trained in their use.
   c. The WSU Police also have an AED available for response.
   d. If you have been trained by WSU Police or in an American Red Cross approved program, proceed with CPR.

Chronic Medical Conditions Policy

Wayne State University School of Medicine strives to create a safe environment for all faculty, students and visitors. Academically, the administration, faculty, and staff want to provide students the best opportunity to meet the Wayne State University School of Medicine qualifications, including; essential academic, technical, and institutional standards. In order to achieve these goals, a Chronic Medical Condition Policy was developed.

1. For the Student:
   a. Upon matriculation to medical school students must complete a Health Certification form. The form must be approved by your physician and submitted no later than June 30th of the academic year a student starts medical school.
b. If a chronic condition is diagnosed or exacerbated during medical school and is impeding your ability to meet the academic, technical and institutional standards, it is strongly recommended you contact your counselor or the Assistant Dean for Student Affairs.

c. If the Assistant Dean of Student Affairs determines the student’s condition is impacting the student’s ability to meet the academic, technical and/or institutional standards, the student may be required to provide medical documentation that verifies that the student is fit for duty and can participate actively with all medical school requirements.

d. Any student who feels that their chronic medical condition might require accommodations in their learning environment or during examinations should consult with a disability specialist in the Student Disability Services (SDS) office on main campus. The SDS office is located on the first floor of the David Adamany Undergraduate Library at 5155 Gullen Mall and can be contacted at 313-577-1851. Office hours are Monday-Friday 8:30-5:00 with extended evening hours on Monday and Thursday evenings until 7:00 during the fall and winter.

5. For Medical School Administration:
   a. Maintain the University academic standards, which include establishing essential functions, abilities, skills, knowledge and standards for courses, programs, services, jobs and activities or facilities and to evaluate students on this basis.
   b. If a student approaches an administrator with a chronic condition that may inhibit their ability to take examinations or perform other technical and institutional requirements, they should be immediately referred to their counselor or the Assistant Dean for Student Affairs.
   c. Have appropriate staff discuss students and the nature of the students’ medical illness, given signed consent, in order to implement approved accommodations, particularly instructional accommodations.
   d. Maintain confidentiality and only inform those who need to know in order to maintain student and patient safety.

**Enrollment Status**

In general, each student is considered enrolled from the time of matriculation into medical school until the time of graduation and must maintain a student status eligibility category. Enrolled students are considered to be in good academic standing. In some circumstances enrollment may be interrupted temporarily or be terminated for a number of reasons, including:

**Dismissal**

Dismissal is a permanent, involuntary removal of a student from medical school. Dismissals occur when it has been determined that a student’s overall academic performance and/or professional behavior have fallen below the School’s standards, or the student has violated any medical school policy. Dismissals can result either by action of the Promotions Committee or administratively by action of the Associate Dean for Undergraduate Education at the point where a student fails to meet specified academic benchmarks.
Promotion Committee Dismissals. Students can be dismissed after deliberation by the full Promotions Committee (see the description of the structure, function, and process of the Promotions Committee in another section). Dismissed students will be notified by a letter from the Chair of the Promotions Committee (the Vice Dean for Medical Education).

Students who are dismissed by the Promotions Committee must notify the School within 10 days of the dismissal of the intent to appeal. A full appeal letter must be submitted to the Office of Records and Registration prior to the scheduled appeal hearing before the Committee.

A determination to dismiss a student can be made at any time by the Promotions Committee. A request for a dismissal hearing by the Promotions Committee can be made by the Assistant Dean for Student Affairs, the Assistant Dean for Basic Science Education and the Assistant Dean for Clinical Education, through the Associate Dean for Undergraduate Medical Education, the Professionalism Committee, or the Criminal History Review Committee.

Administrative Academic Dismissals. Students can be dismissed administratively, by the Associate Dean for Undergraduate Medical Education, for any of the following reasons:

- Failure to pass USMLE Step 1, 2CK, or 2CS by stated deadlines
- Failure to achieve a grade of Satisfactory for a repeated Year 1 or Year 2 course
- Failure to begin and/or complete repeated coursework as scheduled
- Failure to pass an NBME subject examination on a third attempt
- Two clinical failures of Year 3 clerkships/Year 4 required courses, or a 2\textsuperscript{nd} clinical failure of a single clerkship or Year 4 required course

Students administratively dismissed by the Associate Dean for Undergraduate Medical Education for academic reasons can appeal to the Vice Dean for Medical Education. Students deciding to appeal must have a full appeal letter submitted to the Office of Records and Registration within 10 business days of the dismissal notification. The Vice Dean for Medical Education, as the Chair of the Promotions Committee, is the final arbiter of administrative dismissals for the School of Medicine. Students deciding to appeal this decision to the University must submit a written request to the Wayne State University Office of the Provost. http://undergrad.wayne.edu/appeal.php

A student who is administratively dismissed due to failing a repeated course, failing an NBME exam for the third time or a second clinical failure cannot appeal this final grade to the Provost prior to the School of Medicine administrative dismissal procedures. The appeal process for administrative dismissals supersedes the normal grade appeal policy contained elsewhere in this manual, as this final failing grade directly leads to the administrative dismissal. A student can, however, in this special circumstance, include a grade appeal as a part of his/her appeal of the dismissal to the Vice Dean for Medical Education (submitted to the Office of Records and Registration). Such a “bundled” appeal can then have a final appeal to the Provost (as a part of the dismissal appeal process) if the appeal of the grade/resulting dismissal is denied by the Vice Dean for Medical Education.
Option to Withdrawal. Students facing either type of dismissal are generally given an opportunity to voluntarily and permanently withdraw rather than being sent a dismissal letter. The offer to withdraw becomes null and void if the student decides to appeal the dismissal. Students who are dismissed for behavioral or professional reasons do not have the option of withdrawal.

Withdrawal

Withdrawal is a permanent, voluntary termination as a medical student instituted by the student him/herself. Students wishing to withdraw must submit a written request to the Assistant Dean for Student Affairs, including in the request the statement that the student understands that withdrawal is voluntary and permanent. A student cannot avoid disciplinary action or academic hearing procedures through a request to withdraw, however, the Promotions Committee may allow a student to withdraw prior to the completion of such hearings or an action to dismiss. The Promotions Committee and the Vice Dean for Medical Education can involuntarily withdraw a student.

Suspension

Suspension is a temporary removal of a student from participation in educational activities. While suspended, the student is placed on an administrative leave of absence. Suspension may occur for failure to meet Medical School or University requirements, because of a serious allegation of unprofessional behavior, or when a student is deemed to be a danger to patients, others, or him/herself. A student can be suspended by the Assistant Dean for Student Affairs, the Assistant Dean for Basic Science Education and the Assistant Dean for Clinical Education, through the Associate Dean for Undergraduate Medical Education or by the Vice Dean for Medical Education.

Leave of Absence

A leave of absence (LOA) is a temporary interruption of enrollment status. There are two types of LOA’s. The first is an administrative LOA, which a student is placed on by the medical school administration. Students may also request an LOA for personal, medical, or education reasons. Leaves of absence are approved by the Assistant Dean for Student Affairs. A formal written request for a leave of absence must be made to the Assistant Dean for Student Affairs. A leave of absence does not have to be granted or continued. All leaves of absence are recorded on the official transcript. Once placed on a leave of absence, the student remains on leave until they are approved to return AND begin course work. A leave of absence does not retroactively nullify course failure.

Time on an approved leave of absence does not count toward the federal financial aid eligibility time limits for making progress toward completion of the M.D. degree. Time off for leaves, however, does count toward the School’s 7-year limit for completion of all M.D. degree requirements.
The duration of personal or medical leaves of absence (or any combination) is not to exceed one year. Students who do not return from a leave of absence will be withdrawn from medical school. Extended leaves of absence for educational purposes require approval on an annual basis and proof of satisfactory progress in the educational program.

Students on leaves of absence will have their tuition assessment adjusted based on completed and university tuition refund policies.

**Administrative (ALOA).** An administrative leave of absence is a WSUSOM-initiated leave of absence due to failure of a United States Medical Licensing Examinations (USMLE) or other academic reasons. A student can also be placed on an ALOA for disciplinary reasons.

**Educational (ELOA).** Only students with an average standard score of greater than 484 in Years 1 and 2 and a passing score of 214 or better on USMLE Step 1 will be considered for an Educational Leave. The student must not have any record of course or clerkship failure or failure of any USMLE exam. Students who request an ELOA between MS3 and MS4 must take USMLE Step 2 CK and CS prior to September 1 of the year of their ELOA. An ELOA will only be considered if the student is enrolled in a formal degree granting program, NIH funded fellowship or equivalent program. Students must meet with the financial aid office to discuss the impact of an ELOA on their financial aid status. Students are required to meet with Assistant Dean of Student Affairs prior to making a written request for an ELOA. A written request should specify the educational program of study and the beginning and end dates of the leave. Supporting documentation indicating acceptance into the other educational program must be submitted. ELOAs are granted a year at a time and a reapplication must be made for each additional year of leave. In order to return from an approved ELOA, the student must confirm the expected date of return as outlined in the leave letter before returning to his/her medical studies. Final approval of ELOA for students meeting and not meeting these requirements is at the discretion of the Vice Dean of Medical Education or his/her designee.

**Personal (PLOA).** A student’s written request should specify the beginning and end dates of the leave. In order to return from an approved PLOA, the student must confirm the expected date of return as outlined in the leave letter before returning to his/her medical studies.

**Medical (MLOA).** A student’s written request should detail the reason he/she is seeking the MLOA and the beginning and end dates of the leave. Supporting documentation must be submitted by a licensed physician (or other licensed health care provider), specifying the medical reason for the leave (e.g., to recover from surgery) and the dates during which the MLOA is deemed to be medically necessary. In order to return from an approved MLOA, the student’s health care provider must affirm in writing that the student is fit to return to his/her medical studies. Such notification must be received as outlined in the leave letter before the anticipated return to school.

**Financial (FLOA).** A student may be placed on an FLOA if they are unable to pay tuition and fees as required by University and Medical School policies. Account balances also result in a university hold that will prevent a student from participating in scheduling and registration for medical school.
Modified (Decelerated) Program

A modified curriculum is offered that permits students to reduce their academic load in basic science courses and more effectively manage their time. The Modified Program will permit students to complete Year 1 courses in two years rather than the traditional one year. Students in the Modified Program would therefore take 5 years to earn their MD degree, and their expected graduation date is changed. Students in the modified program will not have a Year 1 standardized score calculated. The end of year standardized score only has meaning as a relative comparison of performance of students taking the full load of courses.

Students will be offered the modified program following academic difficulty (exam failures) in both Anatomy and Histology. A student may accept or decline the offer, or wait until the grades for the first examination given in physiology and biochemistry are posted. A modified program will not be given to students after this point. First year students may be permitted to self-select the modified program for personal reasons. Students in the modified program will be expected to work with the Director of the Academic Success Program to develop a study plan that will facilitate academic success. Entry into the Modified Program does not nullify earlier course failure.

The usual curriculum for the first year of the modified program would include: Histology (or Anatomy), Biochemistry, Clinical Nutrition, and Genetics. The second year curriculum would then be: Anatomy (or Histology), Physiology, Neurosciences, and Clinical Medicine 1, and Translational Medicine. Modified students who successfully complete the requirements for year 1 course will be promoted to the standard second year curriculum.

Modified program students will be considered part-time by the Medical School for both of the modified years. Therefore, the appropriate University policy for tuition assessment and federal regulations for financial aid for students carrying less than a full load will apply.

Directed Study for Student Repeating Coursework

Students who are repeating coursework in Years 1 or 2 are enrolled in and complete a directed study course designed to enhance a student’s study and test-taking skills with the goal of successful completion of remediation and to provide an educational foundation for advancement to the next level of training.

Each student will complete a detailed Plan of Work, coordinated and supported by the Academic Skills Counselor. Each Plan of Work is tailored to the specific needs of the student. The Plan of Work needs to be developed prior to the beginning of the first day of the academic year, as the directed study course begins on Day 1 (this is true even where the course to be repeated does not begin until later in the academic year).

The success plan is documented in a Plan of Work, for which the student is held accountable. Regular meetings with the Academic Skills Counselor help monitor the student’s progress toward successful completion of remediation, and are a requirement of the Promotions Committee. It is the student’s responsibility to make and keep specified appointments with the
Academic Skills Counselor. Non-adherence to the Plan of Work could result in an unsatisfactory grade and will be reported to the Promotions Committee. A description of the academic programming available for Year 1-2 students is available through the Academic Success Program.

**Students Remediating USMLE Step 1 Failure (Special Matriculation)**

Students who are remediating USMLE Step 1 failure are enrolled in a directed study and given a status of Special Matriculation. Special Matriculation is designated as a time for students to prepare, under supervision, for the USMLE Step 1 examination. Further information about Special Matriculation is detailed elsewhere.

**Eligibility to Participate in Educational and Co-Curricular Activities**

Only students who have completed registration for the academic year, including the payment of all required tuition and fees, are permitted to participate in the formal educational programs. Students with unpaid balances may be dis-enrolled from coursework and placed on a financial leave of absence. Students with holds will not be allowed to register or to participate in the scheduling process for the next academic year.

**Health and Disability Insurance Requirement**

All medical students are required to have health and disability insurance as a condition of their enrollment in the medical school. Following the lead of many other medical schools across the country, the medical school has negotiated a very comprehensive group health plan on behalf of our students and has made it mandatory at a market comparable price. This policy, through Blue Cross/Blue Shield of Michigan, is mandatory because we believe it to be the best value available in terms of the benefits package for the premium being charged. The benefits have been adjusted each year to meet the needs of the students based on student input through the Student Senate and based on an annual review of utilization.

All students will be enrolled in the Blue Cross Blue Shield of Michigan (BCBSM) Group Health Benefits Plan, unless they are eligible for a waiver as described in the health insurance packet. Please be aware that in order to meet waiver criteria by being covered under another’s policy, you must be listed as a dependent of that group plan. Individual policies purchased by you or by another for you (i.e., by a parent, a spouse, a friend or a significant other), do not qualify for a waiver.

If you think you may request a waiver, be prepared to supply evidence of current coverage including a letter from your current insurance company verifying that you are covered, or the employer stating proof of eligibility of benefits along with the current effective dates of coverage. The letter must be on the insurance company’s letterhead, and or on the employer’s letterhead under to which you are covered.

For Canadian students, Wayne State University’s (WSU) international students, scholars and their accompanying dependents are required to have health and accident insurance which meets the requirements of Wayne State University and is PPACA (Patient Protection and Affordable
Care Act) compliant. All F-1 and J-1 international medical students and scholars whose I-20 or DS-2019 was issued by Wayne State University are required to enroll in the Wayne State University Student/Scholar Health Insurance (IHI) plan administered by Chartis, or purchase one of the Medical School’s Health Insurance Plans or (for those living in Windsor ONLY) purchase an emergency care supplemental plan in addition to the Ontario Health Insurance Plan (OHIP). OHIP alone does not provide adequate coverage while here in the U.S., nor does OHIP meet the Department of State’s health insurance requirements nor is it PPACA compliant. Canadian students living in the U.S. are required to enroll in either Chartis or purchase one of the Medical School’s Insurance Plans. Enrollment in the IHI/Chartis plan or an emergency supplemental plan will be verified by Office of International Students and Scholars (OISS). Likewise, we are required to provide verification of enrollment to OISS if one of the Medical School’s plans is selected.

Students who are found to be out of compliance with this policy may be dis-enrolled from medical school.

**Prohibition from Participation in School Activities**

To ensure success, students who are on academic probation, have a status of Special Matriculation, are on a leave of absence of any type, or undergoing a disciplinary investigation are not permitted to participate as Senate or class officers, hold leadership roles in student organizations, sit on medical school committees, participate in school activities requiring registration, participate in extra-curricular international travel projects or programs, represent the school at any conferences or participate in co-curricular programs. It will be up to the various committees and Classes as to how they wish to re-assign the duties of the officer or committee after their absence. At the discretion of the Assistant Dean of Student Affairs, students may be prohibited from participation in other activities not specified here. For students who are on a very brief (1 month or less) leave of absence, their continued participation on committees or as officers will be considered on a case by case basis by the Assistant Dean of Student Affairs.

**Dis-Enrollment from Coursework**

Only students who withdraw, who have approved leaves of absence, or who are approved for the Modified Program will be dropped from scheduled coursework. The School of Medicine may cancel some or all classes due to failure to pay assessments.

**Seven-Year Limit to Complete All Degree Requirements**

Beginning with the matriculating Class of 2015, there is a 7-year limit on the time that students have to complete all M.D. degree requirements. The 7-year limit includes participation in the modified program, leaves of absences, repeating coursework, and remediating USMLE examinations. The Vice Dean for Medical Education has the discretion to grant extensions.

For MD/PhD students, the time working on the PhD is not counted toward the 7-year limit for the M.D. requirements.
Eligibility for Federal Financial Aid: Satisfactory Academic Progress

The Promotions Committee at the School of Medicine determines each student’s Satisfactory Academic Progress (SAP) at least on an annual basis. Responsibility for the ongoing monitoring of academic progress of students is the Associate Dean for Undergraduate Medical Education or his/her delegate, who reports academic deficiencies to the Chair of the Promotions Committee.

The academic requirements for the M.D. degree include satisfactory completion of the curriculum designed and implemented by the faculty. The definition and implementation of the Schools’ Satisfactory Academic Progress policy applies to all students, and complies with the federal eligibility requirements through Title IV for students to receive federal student financial aid. Satisfactory Academic Progress is defined qualitatively and quantitatively (pace).

Satisfactory progress is defined as receiving at least a satisfactory grade in all enrolled courses. A satisfactory grade is equivalent to a letter grade of B and an honors grade is equivalent to a letter grade of A (federal guidelines require a C or better). Students with satisfactory grade or higher in all courses at a given level (M1, etc.) is considered to be making SAP. Students with unsatisfactory performance are reviewed by the Promotions Committee to determine whether they will be allowed remediation or will be dismissed from medical school. Remediation of failed courses may result in a schedule which deviates from the norm, as approved by the Promotions Committee. A student must successfully remediate all coursework in order to be considered as again making satisfactory academic progress.

Most students take 4 years to complete the M.D. degree. Students, with the approval of the Assistant Dean for Basic Science Education, can decelerate the first year of medical school through our Modified Program, which allows for completion of all degree requirements in 5 years. According to Federal Financial Aid guidelines students are expected to complete all degree requirements in 6 years (150%) from matriculation for eligibility. For students in the combined MD/PhD program, the SAP policy only applies to the time they are enrolled in medical school portion of training. For purposes of determining a student’s progress, Years 1 and 2 are combined and Years 3 and 4 are combined. Off-track students are further expected to complete Years 1 and 2 in three years, and to complete Years 3 and 4 in three years (totaling 6 years).

A student may be granted a leave of absence for a variety of reasons. The period of leave for which the student is approved, is generally excluded from the calculation of “years since matriculation” for most of the students requiring a leave of absence, with the exception described below.

Separate from the calculation of years for SAP, beginning with the Class of 2015 the School of Medicine established a 7-year limit to complete all degree requirements, including all remediation time, leaves of absence, and participation in the modified program.

The normal period of enrollment at the School of Medicine is 4 years (4 academic terms). For customary academic progress a student will complete satisfactorily:

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• After the first academic term – 50 credit hours (Year 1)

• After the second academic term – 100 credit hours (Years 1 and 2 combined) and pass USMLE Step 1

• After the third academic term – 150 credit hours (Years 1 through 3 combined)

• After the fourth academic term – 200 credit hours (Years 1 through 4 combined) and pass USMLE Step 2CK and USMLE Step 2CS

Since the Promotions Committee may give approval for an individual student to repeat a portion or all of a school year, the required number of credit hours to be completed at the end of each enrollment period will vary in these cases.

A student registering for less than full-time enrollment, due to a decelerated program or a leave, is allowed additional time of eligibility based on a proportion of the actual registered hours.

Title IV Disbursement Issues and Financial Aid Probation

Students who are required to repeat failed coursework are deemed to not be making SAP and will be placed on financial aid probation as a condition of being allowed to repeat coursework. In the academic term immediately following the term where a student does not make SAP, Title IV funds may be disbursed under the following conditions:

1. The student submits a formal appeal form to the Financial Aid, along with a personal statement explaining the extenuating circumstances which caused the failure to meet SAP and detailing what has changed that will ensure success in the future Office (forms are available at the Financial Aid website);

2. The School of Medicine develops and submits a written academic plan that, if followed, will ensure that the student is able to meet SAP by a specific point in time (to be submitted along with the appeal).

Compliance with the academic plan is monitored on an ongoing basis. A student who does not comply with each remediation standard at any point during the probationary period will be suspended from Title IV financial aid eligibility at the conclusion of the probationary period.

Students re-establish financial aid eligibility by successfully completing each remediation requirement.
III. ASSESSMENT OF TUITION AND FEES

Per Credit Hour Assessments

Students are assessed tuition and fees based on a per credit hour system. The typical student is assessed for 50 credit hours. Students participating in the School’s health insurance will also have health insurance assessed on their student account. The table of the following page summarizes the per credit hour course assessment.

Payment Due Dates

Payment of the upcoming academic year is due in full during the scheduled registration times. Specific dates will be provided. The approximate registration periods are listed below:

- New matriculates – End of July/Beginning of August during Year 1 Orientation
- Rising Year 2 students – Middle of May (at the end of Year 1 classes)
- Rising Year 3 students – Middle of May (at the end of Year 2 classes)
- Rising Year 4 students – Middle of June (at the end of Year 3 clerkships)

Students approved by the Financial Aid Office and those enrolled in an approved payment plan will be given a waiver at the time of registration. Students on scholarship are responsible at the time of registration for paying all assessments NOT covered by the scholarship. Students are responsible for monitoring and accepting scholarships and all financial aid packages.

By completing registration for the academic term, students become financially responsible for payment of all applicable fees by the published due dates. Payments not received by the due dates are subject to collection, attorney, and litigation costs as well. Students should familiarize themselves with their electronic bill (eBill) including billing and payment dates.
### WSUSOM Courses and Credit Hours

<table>
<thead>
<tr>
<th>Year 1 Courses</th>
<th>Course Number</th>
<th>Course</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>5000</td>
<td>Gross Anatomy</td>
<td>12</td>
</tr>
<tr>
<td></td>
<td>5100</td>
<td>Histology/Embryology</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>5200</td>
<td>Biochemistry</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>5300</td>
<td>Physiology</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>5400</td>
<td>Medical Genetics</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>5500</td>
<td>Clinical Nutrition</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>5600</td>
<td>Neurosciences</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>5700</td>
<td>Clinical Medicine I</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>5720</td>
<td>Translational Medicine 1</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>5800</td>
<td>Directed Study</td>
<td>1-12</td>
</tr>
<tr>
<td><strong>Total = 50</strong></td>
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<table>
<thead>
<tr>
<th>Year 2 Courses</th>
<th>Course Number</th>
<th>Course</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>6000</td>
<td>Immunology/Microbiology/ID</td>
<td>10</td>
</tr>
<tr>
<td></td>
<td>6100</td>
<td>Pharmacology</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>6200</td>
<td>Psychiatry</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>6300</td>
<td>Pathobiology</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>6400</td>
<td>Pathophysiology</td>
<td>18</td>
</tr>
<tr>
<td></td>
<td>6500</td>
<td>Clinical Medicine II</td>
<td>7</td>
</tr>
<tr>
<td></td>
<td>6520</td>
<td>Translational Medicine 2</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>6610</td>
<td>Independent Study (Step 1 preparation)</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>6600</td>
<td>Directed Study</td>
<td>1-12</td>
</tr>
<tr>
<td><strong>Total = 50</strong></td>
<td></td>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>Year 3 Courses</th>
<th>Course Number</th>
<th>Course</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>7000</td>
<td>Continuity Clinic Clerkship</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>7100</td>
<td>Family Medicine</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>7200</td>
<td>Internal Medicine</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>7300</td>
<td>Pediatrics</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>7400</td>
<td>Surgery</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>7500</td>
<td>Psychiatry</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>7600</td>
<td>Ob/Gyn</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>7700</td>
<td>Neurology</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>Various*</td>
<td>Elective 1 (Year 3)</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>7800</td>
<td>Directed Study (Special Matriculation)</td>
<td>1 to 12</td>
</tr>
<tr>
<td></td>
<td>7815</td>
<td>Elective Placeholder for assessment</td>
<td>3</td>
</tr>
<tr>
<td><strong>Total = 50</strong></td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Year 4 Courses</th>
<th>Course Number</th>
<th>Course</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>8270</td>
<td>Ambulatory</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>8160</td>
<td>Emergency Medicine</td>
<td>7</td>
</tr>
<tr>
<td></td>
<td>Multiple</td>
<td>Sub-Internship (Medicine 8470, Surgery 9490, Family Med 8210, and Pediatrics 9210)</td>
<td>7</td>
</tr>
<tr>
<td></td>
<td>Various*</td>
<td>Elective 2</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>Various*</td>
<td>Elective 3</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>Various*</td>
<td>Elective 4</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>Various*</td>
<td>Elective 5</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>Various*</td>
<td>Elective 6</td>
<td>6</td>
</tr>
<tr>
<td><strong>Total = 50</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Electives are at the 8000 or 9000 level
**Tuition Cancellation Guidelines**

The School of Medicine uses a per-credit-hour method of assessing tuition. The following tuition cancellation guidelines will apply for students who drop courses due to leaves of absence, dismissals, or withdrawals. The deadlines are relative to the scheduled first session of the course, where “Week 1” refers to the first week of the course. **Courses dropped by the deadlines will receive 100% tuition cancellation, and 0% tuition cancellation thereafter.** For leaves of absence, the start date of the leave (and the date of last attendance) will determine the date the course was dropped. For dismissals and withdrawals, the date of the dismissal (or withdrawal) determines the date the course was dropped.

<table>
<thead>
<tr>
<th>Drop By End of</th>
<th>Year 1 Courses</th>
<th>Year 2 Courses</th>
<th>Year 3 Courses</th>
<th>Year 4 Courses</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1st Week</strong></td>
<td>Clinical Nutrition Genetics</td>
<td>Pathobiology Pharmacology Psychiatry</td>
<td>All 1-month and 2-month clerkships and the Year 3 elective</td>
<td>All required clerkships and electives</td>
</tr>
<tr>
<td><strong>2nd Week</strong></td>
<td>Anatomy Biochemistry Histology Neurosciences Physiology</td>
<td>Immuno/Micro/ID</td>
<td>None</td>
<td>None</td>
</tr>
<tr>
<td><strong>3rd Week</strong></td>
<td>None</td>
<td>Pathophysiology</td>
<td>Continuity Clinic Clerkship</td>
<td>None</td>
</tr>
<tr>
<td><strong>6th Week</strong></td>
<td>Clinical Med 1 Translational Medicine 1</td>
<td>Clinical Med 2 Translational Medicine 2</td>
<td>None</td>
<td>None</td>
</tr>
</tbody>
</table>

**Exceptions:** Full tuition cancellation will apply for dropped courses due to: 1) Year 1 students approved to change from a full course load to the Modified program; and 2) Year 3 students who enter Special Matriculation due to USMLE Step 1 failure. Dropped courses will not show on the transcript.

**Special Adjustments and Appeals**

The Registrar for the School of Medicine is authorized to make adjustments in the application of tuition assessments when unusual circumstances warrant per university policies. Circumstances which may warrant special tuition cancellation are a complete withdrawal for medical reasons, or serious illness or death of an immediate family member. Tuition cannot be cancelled for insufficient funds, undocumented reasons, or reasons within the control of the student. Students who wish to have their requests reviewed must submit a written request to the Registrar, School of Medicine, 318 Mazurek Medical Education Commons, 320 E. Canfield, Detroit, MI 48201. Please provide a comprehensive statement of the facts and a complete description of the resolution you are requesting.
Assessment for Repeated Coursework

Students who are allowed to repeat coursework will be assessed a maximum of $2500 tuition per repeated course. Year 3 students will have their assessment reduced if only required to repeat a portion of the clerkship. Students will be placed on financial aid probation and the eligibility for federal financial aid will be determined per our Satisfactory Academic Progress policy.

Mandatory Directed Study for Students Repeating Coursework

Students who are repeating coursework in Years 1 or 2 must also enroll in and complete a directed study course. This is a mandatory requirement of the Promotions Committee. The directed study course is designed to enhance a student’s study and test-taking skills with the goal of successful completion of remediation and to provide an educational foundation for advancement to the next level of training. The ongoing review of courses already completed successfully is an important component of the directed study. Students will be assessed a minimum of 1 credit hour of directed study and must maintain a minimum of 12 credit hours. Students will receive a grade (Satisfactory or Unsatisfactory) for the course. Students repeating coursework will be placed on financial aid probation for the academic year per the Satisfactory Academic Progress (SAP) policy.

Assessment for USMLE Step 1 Extended Examination Preparation

Students who are required to take extended preparation time before taking USMLE Step 1 will be enrolled in a directed study for two (2) credit hours for the months of July and August and given a status of Special Matriculation. Students in situations that extend the directed study beyond the first two months of the academic year will be required to pay for 1 additional credit hour per month of additional preparation.

Students who fail USMLE Step 1 are enrolled in a directed study for twelve (12) credit hours for the academic year and also given a status of Special Matriculation. If a student is able to pass the exam and return to Year 3 in January, the directed study will be reduced to six (6) credit hours. Students in Special Matriculation have an enrolled status.
IV. ASSESSMENT OF STUDENT PERFORMANCE

WSUSOM Examination Policies

Examination Policies

1. Exam materials both written (test booklet, scantron, images, envelope) and electronic are property of Wayne State University School of Medicine. Students are not allowed to possess these materials outside of a secure testing facility nor are students allowed to transmit information regarding these materials. Such behavior is considered irregular test taking behavior and may result in a referral to the Professionalism Committee.

2. During the examination process, testing facilities are considered secure, which means that students are not allowed to possess non-permitted items on their person, at their seat, or in the testing facility. All non-permitted items are to be stored in a student’s locker. Items are NOT to be stored in the examination facility or adjacent hallway during the examination process. Storage of these materials on the floor constitute a fire hazard and are not allowed. Permitted and non-permitted items include the following:
   a. Permitted Materials
      i. Exam packet (envelope, exam booklet, scantron, images), if applicable
      ii. A non-alarmed watch
      iii. Pencils
      iv. Erasers
      v. WSU student ID
      vi. Earplugs
      vii. Beverage
      viii. Wallet or Purse - However, these items must be stored in your pocket or under the seat.
   b. Non-Permitted Materials
      i. Large/bulky coats
      ii. Backpacks, satchels, luggage or briefcases
      iii. Food – Students are not allowed to consume food in the testing facility during an exam.
      iv. Reference materials (e.g., books, notes, papers)
      v. Scrap paper or paper for taking notes.
      vi. Electronic devices that can transmit, store or receive information including but not limited to cellular phones, pagers, cameras, video recorders, laptops, ipads, ipods or electronic organizers.
      vii. Hats and hoods – Students wearing brimmed hats must remove them or turn them backwards. Students wearing hoods must remove them. Students are permitted to wear religious or cultural head attire (e.g., turban, hijab, yarmulke) as long as it does not interfere with the examination process.

3. The length of all WSUSOM faculty created exams is based on the number of items (i.e., questions). For each item, 1.5 minutes is allotted. The total length of the exam is rounded up to the next half hour. For instances in which the rounding adds four minutes or less, the exam length is rounded to the next half hour and five minutes is added on to
accommodate the time to read instructions. The length of non-WSUSOM exams (e.g., NBME sponsored exams) and laboratory exams might be different. Students will be notified of these differences via the examination logistics emails (see below).

4. The official start and end time of all WSUSOM exams is defined in the logistics emails sent out prior to each exam. Students will be allowed into the testing facility 10 minutes prior to the start of each exam. The exam will begin with the reading of instructions at the designated start time and will take no longer than 5 minutes.

5. Students that show up after the designated start time are not allowed to sit for the exam at that time. Proctors are to inform the student that they must report to the Office of Student Affairs to request an excused absence. If the counselor grants an excused absence, the student will take the exam on the next scheduled make-up date, which is posted on the logistics memo sent out by Testing Services. This policy applies to students taking exams under regular testing conditions and to those receiving testing accommodations.

Types of Examinations

There are two types of examinations: non-promotional and promotional. Non-promotional examinations are used solely to allow students to assess their understanding of the material. The purpose of promotional examinations is to determine whether students have acquired the necessary knowledge and skills to pass the course. The School uses protected exams for promotional examinations, which will not be returned to students. Students are not permitted to copy and/or share information regarding the content of protected examinations.

Examinations could include items from material covered in lecture notes, required readings, laboratories, and online assignments. The examinations may be purchased or developed by the course director. There will be promotional examinations in:

Year 1: Gross Anatomy, Histology, Biochemistry, Physiology, Clinical Nutrition, Neurosciences, Medical Genetics, Clinical Medicine 1

Year 2: Immunology/Microbiology/Infectious Disease, Psychiatry, Pathobiology, Pharmacology, Pathophysiology, Clinical Medicine 2

Year 3: Family Medicine, Medicine, Pediatrics, Neurology, Obstetrics/Gynecology, Pediatrics, Psychiatry, Surgery

Year 4: Emergency Medicine

The examination schedule, including make-up examinations, and remedial examinations is determined by the Director of Assessment and Medical Education Research in consultation with the Assistant Dean for Basic Science Education (Years 1 and 2) or the Assistant Dean for Clinical Education (Year 3 and 4).
Absence from an Exam

In some instances it might not be possible for a student to be present for an examination due to either a serious health problem or other unavoidable circumstances. It is at the discretion of the student’s counselor in the Office of Student Affairs to grant or deny an excused absence for an examination. An excused absence permits the student to take a make-up examination at the scheduled make-up date. See section on Excused Absences for further information.

Make-Up Examinations

An examination of comparable content is administered to students who have an excused absence. The examination is not returned to the student. At the time of the make-up or re-examination, the item citation process has concluded, therefore students taking these exams cannot participate in the item citation process.

For Years 1 and 2 there are scheduled make-up examinations times approximately on a monthly basis. Refer to the Curriculum Guide for the specific dates. All make-up examinations must be completed in a timely manner. Once a new course has started, missing exams from a previous course must be prioritized and taken first in the exam make-up schedule. Students are automatically scheduled for the next make-up examination time, but may be given a customized make-up exam schedule to complete courses in a timely manner.

Academic Dishonesty Regarding Examinations

Disruptive Behavior

A student interfering with the testing conditions of other examinees will receive a verbal warning. If the disruptive behavior continues the student will escorted to the Office of Student Affairs.

Irregular Behavior

Irregular behavior includes all actions or attempted actions on the part of a student that would or could subvert the examination process. Examples of irregular behavior include, but are not limited to:

- Failing to comply with any testing policy, procedure, rule, and/or instruction of a proctor
- Providing specific information regarding the content of examination to any other student
- Seeking and/or obtaining specific information about the content of an examination from another student
- Seeking and/or obtaining access to examination materials prior to the administration of an examination
- Theft of examination materials
- Impersonation of a student or engaging a proxy to take the examination
- Copying answers from another student
- Allowing another student to copy your answers
• Possessing unauthorized materials during an examination
• Making notes of any kind during the examination except in the test booklet
• Taking photos of test materials
• Reconstruction of test content through memorization
• Altering or misrepresenting examination scores
• Continuing to bubble in or erase an answer sheet after time is called
• Failure to report suspected or actual irregular test-related behavior or cheating of fellow students

A student whose behavior gives the appearance of cheating (e.g., who appears to be looking at another student’s answer sheet, examination booklet, or computer monitor) may be moved to a different seat for the remainder of the examination. Failure to move when requested will result in the collection of the examination and a zero for the exam.

A student observed to be cheating during the examination will be escorted to the Office of Student Affairs and reported to the Assistant Dean for Basic Science Education or the Assistant Dean for Clinical Education, as appropriate. Other forms of academic dishonesty (e.g., plagiarism) will also be reported. Academic dishonesty may lead to a referral to the Professionalism Committee and could lead to dismissal from Medical School.

**Excused Absences**

The authority to grant or deny an excused absence is the responsibility of the Assistant Dean for Student Affairs, and by delegation to the student’s counselor. An excused absence does not mean that a student is excused from an activity (examinations and other required activities), but rather the student will be allowed to make-up the activity without penalty. Excused absences are granted based upon both unforeseen circumstances and for events known in advance as described below.

Students cannot be granted a retroactive excused absence to set aside the results of an examination, nor can the result of an objective examination be appealed to a course or clerkship director. Students who get sick during an examination, and bring it to the attention of a testing proctor, will be handled on an individual basis.

**Illness**

A student who is ill on the day of an examination or other required activity, and who is unable to participate in the activity is required to contact the Office of Student Affairs prior to the start of the activity. The nature of the illness needs to be specified and an excused absence requested. Report to any treating physician, urgent care clinic, Campus Health Center at the Helen DeRoy Apartment Building, 5200 Anthony Wayne Dr., Ste 115 Detroit, MI, or the Detroit Medical Center. The medical report must include a statement that the severity of the illness is such that the student is physically unable to participate in the examination or activity. The statement must be signed by the physician or health care provider and submitted within 24 hours. All fees will be billed to the student’s health insurance provider or directly to the student. Please note that you
may not obtain an evaluation from a physician or healthcare provider who is a member of your family.

A student who is too ill to drive to a clinic, and who is unable to find someone to drive him or her, should take a taxi to the clinic. Turn in the taxi fare receipt to the Office of Student Affairs for reimbursement.

Other Absences

Personal emergencies (e.g., car problems, expressway traffic jams, family emergencies) will be handled on an individual basis and require appropriate documentation. Students may be granted an excused absence in order to attend a professional conference to present research findings. The School of Medicine recognizes and appreciates the diverse cultural and religious background of its students. Requests for an excused absence from an exam must be made through the Office of Student Affairs. Requests for time away from clerkships and electives for religious holidays during Years 3 and 4 must be submitted in writing to the clerkship or elective director on the first day of the clerkship, with a copy of the request forwarded to his/her counselor.

Additional Student Responsibilities for Absences During the Clinical Years

Students report their absence to their Attending Physician, Chief/Supervising Resident and Site Coordinator in addition to Students Affairs. The counselor will notify the Clerkship Director and Coordinator of the excused absence.

Unexcused Absences

Failure to take a scheduled examination or required activity, without being granted an excused absence, will result in a score of zero (0) for the examination or activity. The consequences of all absences (unexcused as well as excused absences) from non-examination activities are determined by course directors as specified in the course syllabi. Students can appeal their zero score to the Associate Dean for Undergraduate Medical Education, who will ensure that the excused absence policy has been appropriately applied. There is no additional appeal.

Limit on Number of Excused Absences

Excused absences will be monitored and students who fall 3 exams behind will be placed on a leave of absence and their status to return to course work will be evaluated by the Assistant Dean for Student Affairs

Completion of Courses in a Timely Manner

It is expected that courses will be completed in a timely manner. If a student misses the opportunity to makeup an exam at the regularly scheduled makeup date, a customized exam schedule will be developed. For example, students with missing examinations from the beginning of the academic year through December must complete all missing exams by the end
of the first week of January in order to continue with coursework. Students not complying with the policy will be referred to Promotions Committee.

Test Accommodations for Students with Disabilities

Services for students with disabilities are coordinated by the Student Disability Services (SDS) Office located on the first floor of the David Adamany Undergraduate Library at 5155 Gullen Mall. Detailed information about SDS, the Americans with Disability Act (ADA), SDS policies and procedures, documentation guidelines, and types of accommodations can be found on the SDS website [http://studentdisability.wayne.edu/index.php](http://studentdisability.wayne.edu/index.php). The medical school encourages you to refer to the SDS website if you have a documented disability or suspect you have a disability that will impact your medical school performance. The SDS office can be contacted at 313-577-1851. Office hours are Monday-Friday 8:30-5:00 with extended evening hours on Monday and Thursday evenings until 7:00 during the fall and winter.

The Student Disability Services office provides reasonable accommodations for disabilities in the following categories:

- Physical or medical disabilities
- Deafness or hard of hearing
- Blindness or low vision
- Traumatic brain injury
- Learning disabilities
- Attention deficit/hyperactivity disorder
- Psychological or psychiatric disabilities

Required Documentation

Sufficient documentation for the disability is required to register with the SDS office and receive accommodations. Documentation guidelines for specific disabilities can be found on the SDS website. In order to establish that an individual is covered under the guidelines of the ADA and ADAA, documentation must indicate that the disability substantially limits a major life activity. Examples of major life activities include walking, sitting, standing, seeing, hearing, speaking, breathing, learning, working, caring for oneself, communicating, thinking, concentrating, and other similar activities. Quality disability documentation has the following essential elements:

- Testing should be recent, relevant, and comprehensive, and, if appropriate, documentation must also contain test scores and interpretation (ex. learning disability report, audiogram, etc.)
- Documentation must show a substantial impact on one or more major life activities
- Indicate whether the impact is current and stable or fluctuating (fluctuations may require updated documentation of the condition)
- Documentation must effectively confirm the nature and extent of the disability based on current professional standards and techniques
- Documentation must effectively validate the need for accommodations
- Evaluation must be provided by a licensed clinical professional familiar with the history and functional implications of the impairment(s) and must **not** be member of the student’s family
- Evaluation must show the official letterhead of the professional describing the disability with the name, title and professional credentials of the evaluator
- Report must be dated and signed by the evaluator
- Report should include all documentation for multiple disabilities disclosed

If you suspect that you have an undiagnosed learning disability, attention deficit disorder, psychological disability, or other type of disability, you are encouraged to consult with a disability specialist in the Student Disability Services office. Resources for diagnostic evaluations will be provided.

If a student submits insufficient documentation of a disability for determining reasonable accommodations, Student Disability Services has the right to request further documentation with the student bearing the cost of the evaluation. SDS does not do diagnostic evaluations but can provide students with testing resources.

Confidentiality

Student Disability Services (SDS) follows strict standards of confidentiality in the management of student disability information. SDS is the sole holder of disability documentation and this documentation is kept separate from other records such as the student’s permanent educational record. Accommodations provided by Student Disability Services do not appear on the academic transcript and there is no marker on the transcript to indicate that a student is registered with SDS.

It is important to be aware of the responsibility that SDS bears in a “need-to-know” student case. In the case of disclosure of any information to a faculty or staff member, it is decided on a case-by-case basis. When students request accommodations, it may be necessary to discuss with a faculty or staff member the nature of the disability and the relationship of the disability to the course in order to implement the appropriate accommodations without making a full disclosure of the disability to the faculty or staff member.

How to Register with Student Disability Services

1. To register with SDS you must first be admitted to the WSU SOM.
2. Call the SDS office at 313-577-1851 or TTY 313-577-3365 to schedule an intake appointment with a disability specialist. Intake appointments generally require 2 hours.
3. At your intake appointment you will provide the disability specialist with documentation.
4. SDS intake forms will be completed and a history will be taken. Accommodations will be determined and accommodation letters will be issued to the student. Accommodations are reviewed annually.
5. Once accommodations have been granted, students must notify the Office of Student Affairs at Wayne State University School of Medicine by providing the OSA with a copy of the accommodations letter received from SDS.

Testing Accommodations

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1. Once accommodation letters have been presented to the Office of Student Affairs at Wayne State University School of Medicine they will then be forwarded to testing services at the School of Medicine.

2. Testing services will be responsible for fulfilling the recommended accommodation.

3. Students with accommodations will be notified by testing services regarding their testing environment.

4. If a student opts not to use their accommodations during any exam they must provide written notice to testing services at least 1 week in advance. Students should contact the Director of Assessment.

Summary

1. Student Disability Services has an obligation to confirm disability status in order to issue appropriate accommodations.

2. Students have a right to privacy and not to have confidential information freely disseminated throughout the university.

3. When students register with SDS and sign the accommodation form, they are acknowledging that some level of disclosure to a faculty or staff member may be necessary in order to implement requested accommodations.

4. Disability documentation records are not shared directly with any faculty or staff member outside the Student Disability office.

Accommodations and services are individualized and based upon the student’s documentation. It is for this reason that students should insure that they have sufficient documentation that supports the need for appropriate and reasonable accommodations. **Accommodations and services cannot be guaranteed if students choose not to follow the procedures for registering with Student Disability Services in a timely manner.** Accommodations and services can be revisited as needed, but they are not retroactive and cannot be guaranteed if procedures are not followed with reasonable, advanced notice.

Student Rights and Responsibilities

Students with disabilities have the right to:
- Full and equal participation in the services and activities of Wayne State University
- Reasonable and effective accommodations, academic adjustments and /or auxiliary aids as determined on a case-by-case basis
- Maintain confidentiality regarding disability information including the right to choose to whom the disclosure of disability is made except as required by law
- Information readily available in accessible formats as long as request deadlines are met to ensure availability

Students with disabilities have the responsibility to:
- Meet Wayne State University School of Medicine’s qualifications including essential academic, technical, and institutional standards
• Identify as an individual with a disability and request accommodations in a timely manner and to seek information, counsel and assistance as necessary
• Provide documentation from an appropriate professional source verifying the nature of the disability, functional limitations, and the rationale for specific accommodations being recommended
• Follow specific procedures for obtaining reasonable and appropriate accommodations, academic adjustments, and/or auxiliary aids as outlined by disability services.

University Rights

The University, through faculty and staff, has the right to:
• Maintain the University academic standards, which include establishing essential functions, abilities, skills, knowledge and standards for courses, programs, services, jobs and activities or facilities and to evaluate students on this basis
• Confirm disability status and request and receive current, relevant documentation that supports requests for accommodations, academic adjustments and /or auxiliary aids and services
• Select among equally effective/appropriate accommodations, academic adjustments, and/or auxiliary aids and services
• Have appropriate staff discuss students and the nature of their disabilities given signed consent in order to implement requested accommodations, particularly instructional accommodations
• Deny requests for accommodations, academic adjustments, and/or auxiliary aids when disability documentation does not identify a specific disability, fails to verify the need for the requested services, or is not provided in a timely manner
• Deny requests for accommodations, adjustment, and/or auxiliary aids that are inappropriate or unreasonable based on disability documentation

Other Year 1 and Year 2 Examination Issues

Posting Exam Scores

Draft scores are posted to MYSOM after each written examination, consisting of a student’s raw score, percentage, standardized score, and items missed. Scores are posted no sooner than the afternoon of the second business day after the examination to allow for scoring, verification of results, and for students to complete required evaluations. Access to examination scores is a privilege and access to scores is restricted due to failure to complete course/clerkship evaluations. Individual exam scores will remain restricted for evaluations not completed and only final grades will be posted for the course.

Final scores are available after Course Directors and course faculty use available psychometric information and students’ question citations to make decisions about whether to change the answer key.

Interpreting Scores
The percentage allows a student to ascertain his/her mastery of the material, and at the end of the course, to determine whether his/her performance is sufficient to pass the course. The standardized score is provided to allow a student to ascertain his/her performance relative to their class cohort, and at the end of the course, to determine honors performance. An end-of-course standardized score of 600 or above guarantees honors for the course. Course directors have the option of lowering the minimum required standardized score to signify honors performance.

The standardized score used for reporting examination performance is derived by setting 500 equal to the mean performance on the examination and setting 100 equal to the standard deviation. Thus, a standardized score of 600 indicates that a student is performing one standard deviation above the average performance of the class.

For a course with multiple examinations, a “danger” line of 70% is provided for each exam, whose purpose is to alert a student that continued performance at that level places the student at risk for failing the course. The danger line was developed using historical examination scores and is used to alert students, but should not be interpreted as the likely pass rate for the course.

Citing Examination Questions

Students are given one opportunity to identify examination questions which they feel are flawed or poorly written. At the completion of an examination, students may cite up to five questions for course directors and faculty to review as they make decisions to “drop” questions or to accept alternate answers. Ten minutes is allotted for citing questions at the end of the examination. Students are not permitted to contact individual faculty or course directors directly to lobby for changes to the answer key. Students taking make-up or remedial examinations cannot cite exam questions.

Requests for Hand Scoring of Examinations

Students who feel there is an error in their examination score may request a hand scoring of the examination by contacting the Director of Assessment. The hand scoring will insure that the electronic scoring through scanning has worked properly. Students are responsible for submitting an answer sheet that is complete (including all bubbling and erasure of changed answers). The examination booklet is not the source of information regarding a student’s intended answer. Please note that none of the following reasons will result in a change of score:

- Mis-bubbling (bubbling a series of answers with the wrong item number)
- Two answers bubbled for a question
- Missing answers
- Incomplete bubbling
- Incomplete erasures.

In these cases, the hand scoring would confirm the student’s score and that the electronic scoring worked as intended. The results of all objective examinations cannot be appealed, other than having the score verified through the hand scoring process. Students must report any testing irregularity at the time the examination is turned in to the proctors and prior to leaving the examination area.
Year 3 Examinations

There are three types of examinations, which the student may encounter while on required clerkships in the third and fourth year curriculum:

- Oral, practical or objective structured clinical examinations (OSCEs) administered by the department or school.
- Those that are written by School of Medicine faculty and are not returned because the faculty designates them as "protected" examinations.
- Those that are "copyrighted" examinations developed by an external body and purchased for administration to medical students during the clerkship.

Unless specifically designated as an examination that will be returned to the student, written examinations during the clinical curriculum are either protected or copyrighted examinations. As such, the student has no right to retain these examinations, and possession of current copies of these examinations outside the testing room would violate School of Medicine Professionalism guidelines and University policy.

All Year 3 Clerkships use the Subject Examinations available from the National Board of Medical Examiners (NBME) as the end of clerkship examination. These examinations are the property of the NBME. They are scored by the NBME with results then reported to the School of Medicine. Because they are "copyrighted" examinations governed by NBME policies, students do not have the right to either retain or review them. For a fee, a student can request hand-scoring of a failed examination. Requests for hand-scoring should be directed to the Director of Assessment.

Objective Structured Clinical Examination (OSCE)

Each Year 3 student, who has completed a minimum of 5 months of Year 3 coursework, participates in the Objective Structured Clinical Examination (OSCE) during Year 3. The OSCE is used to assess a student’s clinical skills. The OSCE consists of a series of simulated clinical encounters during which students perform clinical tasks under the direct observation of faculty, proctors, and standardized patients. Examples of OSCE clinical stations include focused organ-system or regional examination; obtaining a history from a patient with a particular chief complaint; interpretation of x-rays, or other clinical data; construction of a management plan, writing a chart note, etc.

The OSCE is graded to provide feedback about a student’s clinical skills. The School of Medicine reserves the right to alter some, or all, of a student’s senior program based upon OSCE deficiencies. Participation in the OSCE, and the completion of any prescribed OSCE remediation, is a degree requirement. The MD degree may be withheld until all prescribed OSCE remediation is completed.
V. GRADING

Transcript Grades

For each course, one of the following grades will be placed in the transcript:

**I** = Incomplete will be entered if circumstances beyond the student’s control have prevented completion of assigned activities.

**U** = Unsatisfactory will be entered if the student fails to achieve a satisfactory grade and is ineligible for an Incomplete. Failed courses that are repeated will retain the original grade of U on the transcript. Once the student has passed the repeated course the grade of S will be entered on the transcript for the course (2nd listing of the course on transcript) even if performance the second time would have otherwise resulted in a higher grade.

**S** = Satisfactory will be entered if the student completed all requirements for passing the course. The highest grade possible for a student repeating a course is Satisfactory.

**S+** = Satisfactory with Commendations is only available for use with the Year 3 clerkships (except Continuity Clinic Clerkship) and Year 4 Emergency Medicine. A student remediating a course or clerkship is ineligible for a grade of Satisfactory with Commendations.

**H** = Honors will be entered if the student’s performance is determined to be meritorious. A student remediating a course or clerkship is ineligible for a grade of Honors.

**S** = Satisfactory upon Remediation will be entered for failed courses once they have been successfully remediated by re-examination.

Year 1 and Year 2 Course Grading

Course directors determine the grading requirements for an individual course, including the number of examinations, the number of questions per exam, and the relative weight of all components of the course grade.

End of Course Grading

Mastery of the content of courses is defined as achieving at least 75 percent of the available points (or the mean percent, whichever is lower), and all students at or above that level are guaranteed to pass. A confidence interval is then placed around the mastery level percent to account for confounders impacting the reliability of examinations. The confidence interval indicates the degree of certainty that a student’s score would always fall within the established interval and is expressed as a percentage. A confidence interval of 99.6% is used, indicating the degree to which the School is confident that percentages below this level indicate that a student has failed to master the material covered by the examination. The confidence level is used to establish a guaranteed minimum pass rate. For example, if the confidence interval is 5.00%, the guaranteed minimum pass rate would be 70.00% (subtracting the confidence interval of 5.00%
from 75.00%). In this example, students achieving a percentage of 70% or better pass the course. Students are not permitted to contact course directors to lobby for a lowered pass rate.

Course pass rates are established by course directors, in consultation with the Director of Assessment. Course directors have the discretion to lower the pass rate.

Course honors are guaranteed with standardized scores of 600 and higher, however, course directors have the option of lowering the honors rate.

The Year 2 Pathophysiology course is different from other courses in that there are two ways to fail the course. The first way to fail is the usual way of achieving a percentage below the pass rate (like all other courses). The second way is to fail is to fail three or more units of the course. The course is divided into a number of units (e.g., cardiovascular, respiratory) and an examination is given at the end of each unit. Pass and honors rates are established in the usual manner after each unit. The overall course pass and honors rates are the average of the individual unit rates. An additional difference is that a student who fails Pathophysiology, and permitted by the Promotions Committee to take re-examinations in the units, must successfully pass each of the failed unit examinations in order to successfully remediate (pass) the course. Students who are required to repeat Pathophysiology must successfully repeat the entire course, not only the failed units.

Year 3 and Year 4 Clerkship and Elective Grading

Overview

The evaluation of Year 3 students is the responsibility of the School of Medicine Clerkship Committee, which delegates that authority to the individual Year 3 Clerkship Directors. In turn, Clerkship Directors and Departmental Medical Student Education committees determine the clerkship grades for each student and recommends grades to the Clerkship Committee. The Clerkship Committee reviews and approves grades on a monthly basis. Grades are then disseminated to students through the Office of Student Affairs.

Guidelines for evaluation of cognitive skills and clinical abilities are established for each clerkship by the respective clerkship director and departmental education committee. These guidelines are detailed elsewhere in department-specific clerkship policies and procedures. At the beginning of each clerkship, students are informed about the specifics of the evaluation and grading policy. Each clerkship uses subject examinations purchased from the National Board of Medical Examiners. Course grades, at a minimum, are determined by written examinations and completion of clinical performance evaluations by supervising attending physicians and/or supervising residents. In some clerkships oral examinations, objective structured clinical exams, defined clinical exercises and/or research papers may also be a component of a grade.

Students should direct questions regarding the evaluation and grading system of a specific clerkship to that clerkship director. If further clarification is needed, contact the office of the Assistant Dean for Clinical Education.

Mid-Clerkship Evaluations
Clinical Supervisors (Faculty, Attending Physicians, or Senior Residents) provide students with a mid-clerkship evaluation. It is the student’s responsibility to solicit a mid-clerkship evaluation from those physicians with whom he/she has worked. The evaluation should detail your strengths, weaknesses and any recommendations for improvement during the remainder of the clerkship. A form for accomplishing this evaluation will be given to you during each clerkship with instructions on when they are due to be returned to the clerkship director.

In particular, the clerkship director must be notified by the student’s supervising physician if (1) a student is not performing as expected at the time of the mid-clerkship evaluation, and (2) there is a concern that the student will not satisfactorily complete the clerkship. If such a mid-clerkship evaluation is received, the clerkship director or his or her designee will offer to meet with the student to discuss his or her progress and plan for remediation to help the student improve his or her performance. It is recommended that copies of these written evaluations be kept by the student for future reference.

Grading Written Examinations

Exams written by School of Medicine faculty are graded based on established departmental criteria. The NBME provides each clerkship director with individual examination scores and the mean and the standard deviation for the NBME Subject Examination for the WSU School of Medicine group administered that examination. Each Department through its clerkship director and departmental medical education committee decides how passing scores and honors scores for the written examinations are determined. The results of these objective examinations cannot be appealed, other than having the score verified.

Clinical Performance Evaluation

At the completion of each clerkship, the student’s clinical performance is evaluated using the Clinical Performance Evaluation form by those faculty and/or residents who have worked with him or her. Students are evaluated as ‘Below Expectations’, ‘Satisfactory’ or ‘Outstanding’ on eleven different competencies.

<table>
<thead>
<tr>
<th>Clinical Competencies in Year 3 Clerkships</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Application of knowledge in the clinical setting*</td>
</tr>
<tr>
<td>2. Taking a history*</td>
</tr>
<tr>
<td>3. Performing a physical exam or mental status exam*</td>
</tr>
<tr>
<td>4. Communication and relationships with patients and family*</td>
</tr>
<tr>
<td>5. Professional attributes and responsibilities*</td>
</tr>
<tr>
<td>6. Overall knowledge base</td>
</tr>
<tr>
<td>7. Written and oral case presentations</td>
</tr>
<tr>
<td>8. Record keeping</td>
</tr>
<tr>
<td>9. Facility with technical skills and procedures</td>
</tr>
<tr>
<td>10. Communication and relationships with the health care team</td>
</tr>
<tr>
<td>11. Self-improvement and adaptability</td>
</tr>
</tbody>
</table>

*The five critical competencies
Additional comments by the evaluator, along with suggestions for additional development are solicited. A student is not given a grade on the Evaluation form, but faculty or residents in their opinion can recommend what they believe the student should earn in the comments section. A student’s overall clinical performance is determined by the department medical education committee and clerkship director.

Evaluation forms are completed by individuals who have directly observed the student during the course of his/her training on the clerkship. This could include faculty, senior residents, or faculty/resident teams. Exactly who evaluates each student is determined by departmental policy, as is the number of evaluations expected for each student at the completion of the clerkship. This will vary from clerkship to clerkship based on the educational structure and curriculum of each clerkship and each site.

Each of the completed Clinical Performance Evaluation forms is submitted to the School of Medicine as a part of the student’s grade report from that clerkship. While these documents are available to the student for his or her review, students are not allowed to retain a copy of the individual Clinical Performance Evaluations.

Each department has discretion as to how to interpret the individual Clinical Performance Evaluations on a final Clerkship Grade Report form, e.g., assigning more weight to certain evaluations, simply averaging the evaluations, etc. The Clerkship Grade Report form is a summary of a student’s performance in a clerkship, and includes the number of Clinical Performance Evaluations used and summarized on the Grade Report Form, an averaged summary of how they were completed, and written exam and other assessment scores. Also provided on the Clerkship Grade Report form is the student’s written exam score, the overall clinical assessment (Outstanding, Satisfactory, Unsatisfactory), and the final clerkship grade. These Clerkship Grade Report forms are a “report card” of performance during a clerkship. Students will be sent a copy of the grade report via email, or may obtain a copy of each Clerkship Grade Report form from the Office of Student Affairs.

Determination of Clerkship Clinical Grades

Although each clerkship is responsible for determining criteria for written examination grades, as well as final course grades, the mechanism of how clinical grades are assigned is the same for all clerkships. This process is as follows:

1. The evaluations of all faculty, residents and teams that have worked with the student are summarized on the Clerkship Grade Report form. The process of summarizing these evaluations, e.g., weighting certain evaluations, etc., is determined by and at the discretion of each clerkship director.

2. The Final Clinical Evaluation for the clerkship is reported on the Clerkship Grade Report form. Generally an ‘Outstanding’ Clinical Evaluation is needed for Course Honors, although this is at the discretion of each clerkship director.

3. Five competencies are identified as critical competencies: Application of Knowledge; Taking a History; Physical/Mental Status Examination; Communication with Patients; and Professional Attributes. The final clinical evaluation of Outstanding will be given when the student is rated as ‘Exceeding Course Expectations’ in at least 3 of the 5 critical core competencies AND when at least a total of 7 of competencies are rated as ‘Exceeding Course Expectations’. The final clinical evaluation of Unsatisfactory will be
given when the student is rated as ‘Failed to Meet Course Expectations’ in any one of the five Critical Competencies, OR the student is rated as ‘Failed to Meet Course Expectations’ on any three of the non-critical competencies.

Achieving a Grade of Honors

- Performance on both components of the student’s grade (clinical evaluation and written examination) must be at least satisfactory for a student to be given a passing grade. Honoring clinical performance does not compensate for a failing exam score, nor does an Honors exam score compensate for unsatisfactory clinical performance. Failure in one or the other category results in an unsatisfactory grade.

- Performance on both components of the student’s clinical and written examinations must be Honors for a student to be given an Honors grade for the clerkship. In addition, the student must meet all clerkship deadlines to be eligible for an Honors grade.

Achieving a Grade of Unsatisfactory

Students will be given a grade of Unsatisfactory for the clerkship for any of the following reasons:

1. Scoring below the minimum passing score on the NBME subject exam
2. Achieving a clinical Unsatisfactory (as described above)
3. Failing any other clerkship examination requirement

Remediating Unsatisfactory Clerkship Grades. At the discretion of the clerkship director, certain failing students may be offered the opportunity to repeat examinations (written or oral). Please note that if performance was notably poor, an Unsatisfactory grade may be given without offering a re-examination, and the student will then be required to repeat some or all of the clerkship. There is no presumption that each student will automatically be given the opportunity to repeat an unsatisfactory examination without being required to complete additional clinical time. Plans to remediate an Unsatisfactory grade or complete missing assignments must be made in writing by the student to his or her counselor.

If the student passes the re-examination, the grade will be recorded as S* (Satisfactory upon remediation). If the student fails the re-examination, the grade remains "U", and the student will then be required to repeat some or all of the clerkship (including both clinical time and all examinations). The clerkship director determines the amount of clinical time required to remediate for an unsatisfactory grade.

Achieving a Grade of Incomplete

Incomplete will be entered if verified circumstances have prevented completion of assigned work by the student before the end of the Clerkship. Incomplete work resulting in an Incomplete grades MUST be completed within 30 days of the end of the clerkship. Failure to complete the assigned work within that time could be cause for either cessation of the student’s academic progress until the work is completed, and/or change to an Unsatisfactory grade.
Achieving a Grade of Satisfactory with Commendations

All clerkships (and Year 4 Emergency Medicine) have criteria for listing a student’s grade as “Satisfactory with Commendations”. Refer to each clerkship’s section of the Curriculum Guide for further information.

Completion of Clerkship Assignments

Students are required to complete all clerkship assignments before the end of the clerkship. The deadline for logging all PxDx cases is midnight of the Wednesday of the last week of the rotation. The clerkships will establish the deadlines for other assignments. If assignments are not completed by the respective deadlines, the student will be considered Incomplete. The Incomplete will change to a final grade as detailed below.

Consequences for Noncompliance

- Completion of assignments after the deadline, but before two weeks after deadline:
  - Students will receive their earned grade if they complete the requirement within the two-week grace period.
- Completion of assignments after the two-week grace period and before four weeks after the deadline:
  - Students will receive a grade of S* (Satisfactory upon remediation). This grade will show on the transcript and indicate an initial failure of the clerkship.
- Failure to complete the assignments by 4 weeks after the deadline:
  - Students will receive a grade of Unsatisfactory and must repeat the entire clerkship. The clerkship will be listed twice on the transcript, once with a grade of Unsatisfactory and once with a grade of Satisfactory (the highest grade that can be achieved after remediating a failed course).

Reporting Clerkship Grades

Grades are reported to the Clerkship Directors Committee and copies of evaluation forms are delivered to the School of Medicine for processing. Evaluation forms are then placed in the student’s folder located in Student Affairs. Clerkship grades are only reported to students through the Office of Student Affairs. Students are emailed the Clinical Performance Evaluation and Clerkship Grade Report form but must come to the office in person to review evaluation comments. No grade will be reported over the telephone to the student by the staff of the Office of Student Affairs. A copy of the summary Clerkship Grade Report form, but not the Clinical Performance Evaluation forms, is sent to the Student Affairs Office as a “report card” of a student’s performance during a clerkship. The summary grade report will be emailed to the student upon receipt from the clerkship, but a hardcopy is also available in the Student Affairs Office.

Timing of Make-Up and Remedial Examinations
**Make-Up Examinations.** Students who miss Year 3 NBME subject examinations with an excused absence will be scheduled for the next make-up examination date, approximately one week after the missed examination. Students will be excused for a half-day from their subsequent clerkship for purposes of taking a make-up examination.

**Remedial Examinations.** Repetition of failed examinations will generally be limited to one of two opportunities: 1) Either at the time of a regularly scheduled examination; or 2) At one of two special examination sessions in early January and in early July. Special examination sessions take advantage of an approximately two week study period that is available between the completion of clerkships and the start of the next clerkship. The exact dates for scheduled repeat examinations will be established by the Assistant Dean of Clinical Education in consultation with the Director of Assessment. Once a student fails a written clerkship examination, the student and his or her counselor develop a written plan (exam order) for examination remediation. Students must attempt to remediate failed clerkship examinations as early in the academic year as possible. In general, students with written examination failures during the months of July through November will re-examine at the early January special test date, while students with examination failures between December and June will repeat their failed exams in July or thereafter (at the regularly scheduled date for one month clerkships or at the established special examination date). Clerkship directors have been instructed to release students for the purpose of re-examination. **No student is allowed to take a repeat examination while enrolled in another clerkship or elective.**

For rising “senior” students, who have outstanding deficiencies at the end of June of their third year, no senior course and elective credit will be given until they complete all outstanding Year 3 work. A student may be allowed to complete an elective already started in the fourth year at the time the additional Year 3 unsatisfactory grade is reported, but will not be allowed to begin any additional Year 4 course work.

**Repetition of Clerkships Due to Failed Clinical Work or Multiple Exam Failures**

Clerkship grading committees may require students to repeat clerkship clinical time either for clinical failure of a clerkship or after an NBME subject examination is failed for a second time. Students will be assessed for all repeated coursework. The highest grade possible for repeated courses is a grade of Satisfactory (even if a student had initially achieved clinical outstanding). If a student fails an exam a third time they will be administratively academically dismissed. If a student fails twice clinically (either two different clerkships or failing a single clerkship twice) they will be administratively academically dismissed.

Students must satisfactorily complete all Year 3 requirements and pass all Year 3 Clerkships before starting and receiving credit for Year 4 course work.

**Special or Restricted Year 3 and Year 4 Programs**

The Assistant Dean for Clinical Education is empowered to alter junior and senior programs to guarantee the highest possible academic achievement and knowledge of the graduates of the
Wayne State University School of Medicine. This includes, but is not limited to, alterations to help remediate academic difficulties and clinical weakness.

Possible actions may include being required to:
- Revise a previously approved Year 3 or 4 program to make up a deficiency
- Take a prescribed program during their senior year
- Take all electives or clerkships at the Detroit Medical Center or Henry Ford Health System.

Grades in Senior Courses

Students must receive a grade of Satisfactory and/or Honors in all senior required and elective courses, even if the student elects to take more than five elective courses. In other words, you must satisfactorily pass every course taken in the senior year.

An incomplete will be entered if verified unforeseen circumstances have prevented completion of assigned work by the student before the end of the Clerkship. An incomplete grade MUST be completed within 30 days of the end of the clerkship. Failure to complete the assigned work within that time could be cause for either cessation of the student’s academic progress until the work is completed, and/or reversion to an Unsatisfactory grade.

If a student receives a grade of Unsatisfactory or Incomplete in a senior elective, it is reported to the Assistant Dean for Clinical Education for disciplinary or remedial action. The student must meet with appropriate administrative officials such as the Assistant Dean of Student Affairs or the Assistant Dean for Clinical Education before the elective is repeated.

A grade of Unsatisfactory received in an AWAY clerkship must be made up in the corresponding department at the WSU School of Medicine. All makeup work for unsatisfactory senior courses will be completed at the Detroit Medical Center or the Henry Ford Health System. No remedial course work may be done as an AWAY elective. A failed clerkship or elective may lead the Assistant Dean for Clinical Education modifying a student’s schedule. Any unsatisfactory clerkship/elective must be repeated successfully before May of the academic year.

A grade of Unsatisfactory in a clerkship or elective may result in a delay of graduation, withdrawal from the National Residency Matching Program (NRMP), dismissal from medical school or other disciplinary action as determined by the Promotions Committee of the Medical School.

Appealing Grades

Summary of Basic Principles

1. Instructors are expected to evaluate student work according to sound academic standards. Course expectations should be clearly specified and grades should be assigned without departing substantially from announced procedures.
2. It is the instructor's prerogative to assign grades in accordance with his/her
academic/professional judgment, and the student assumes the burden of proof in the appeals process.

3. Grounds for appeals are: (1) the application of non-academic criteria in the grading process, as listed in the university's non-discrimination and affirmative action statute: race, color, sex, national origin, religion, age, sexual orientation, marital status, or handicap; (2) sexual harassment; or (3) evaluation of student work by criteria not directly reflective of performance relative to course requirements. **Students cannot appeal the results of an objective written or computerized examination, other than to have the score verified.**

4. These policy guidelines do not apply to allegations of academic dishonesty. Academic dishonesty matters should be addressed under the Student Code of Conduct Policy.

5. For Year 3 clerkship appeals students are strictly prohibited from contacting anyone (including site directors, attending physicians, rounds, residents, preceptors, or other faculty) other than the clerkship director with questions, concerns, or grade appeals related to the evaluation of their performance in the clerkship. A student found to violate this prohibition will have their appeal automatically voided.

**Appeal of Grades**

1. Students should raise formal grade appeals in writing within 30 calendar days following official notification of grades. The student’s first appeal is to the Course/Clerkship Director with a copy of the written appeal submitted to the Assistant Dean for Basic Science for students in Year 1-2 or Assistant Dean for Clinical Science for students in Year 3-4. Prior to the student being informed of the decision, the course director will review the decision with the appropriate assistant dean to ensure that the policies and procedures guiding the School of Medicine have been followed. Further appeals shall be directed to the Course Directors’ committee for students in Year 1-2 or Clerkship Directors’ committee for students in Years 3-4, and then to the Vice Dean for Medical Education or her/his designee.

2. The decision by the Course/Clerkship Director and Assistant Dean shall be sent to the student in writing within ten days of receiving the appeal, with a copy of the decision sent to the appropriate assistant dean. If the issue is unresolved, the student may within ten business days appeal in writing to the Course Directors’ committee for students in Years 1-2 or Clerkship Directors’ committee for students in Years 3-4.

3. Students shall be notified in writing of the decision by the Course Directors’ committee or Clerkship Directors’ committee regarding the appeal within thirty days of its receipt.

4. Students who are dissatisfied with the decision by the Course Directors’ or Clerkship Directors’ committee as stated in writing may write a formal appeal to the Vice Dean for Medical Education or her/his designee within ten business days of having received the Course or Clerkship Directors’ committee decision. This decision is final at the medical school level.
5. Students shall be notified in writing of the Medical School decision regarding the appeal within 30 days of its receipt.

6. When the appeal procedures within the School have been exhausted, the student may request the Provost to review the decision on the record. Procedures for requesting a Provost review are published in the University Graduate Bulletin.

Academic Probation

Purpose

Academic probation is utilized to assure that all students whose academic performance places them at additional risk for additional course failure are continuously advised and counseled by the Office of Student Affairs staff and the Director of the Academic Success Program. No record of the probationary status appears on the student’s transcript. Academic probation is determined separately at each program level (i.e., M1, M2, M3, M4). Once a student on academic probation has satisfactorily completed all coursework at a program level, he/she comes off of probation.

Students in Year 1 or Year 2

Any Year 1 or Year 2 student with two or more course failures at a program level is placed on academic probation and formally notified by the Assistant Dean for Basic Science Education. In addition, a student is placed on academic probation upon a second course failure even if the first failure at a given program level occurred in a prior year and has been remediated (e.g., as a modified student). Any student repeating coursework is placed on academic probation by the Promotions Committee.

Students in Year 3

Any Year 3 student with two clerkship exam failures will be placed on academic probation and be formally notified by the Assistant Dean for Clinical Education. This includes two different clerkship exam failures or the double failure of a single clerkship exam. In addition, a student will be placed on probation for a clinical failure in a clerkship.

At the beginning of academic probation, the student will meet with a subcommittee of the Promotions Committee. The Subcommittee will consist of the Assistant Dean for Clinical Education (Chair), the Assistant Dean for Student Affairs, the student’s Counselor, an appointed Promotions Committee member.

Academic probation during Years 3 and 4 can result in any of the following actions:

- Monitoring of progress without alteration in the student’s program
- Alteration of the student’s program, including a change in clinical site, the order of coursework, or the denial of permission to do away electives
- Requiring additional course completion beyond the usual curriculum to remediate clinical inadequacy.

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Duration

Academic probation remains in effect until the student satisfactorily completes all coursework at that program level. The student begins the next program level with a clean slate, although he/she is encouraged to continue to make use of medical school resources and maintain contact with his/her counselor.

Requirements of Probation

A written specification of the requirements of probationary status will be provided to the student. A student on academic probation is required to meet regularly with his/her assigned Counselor and the Director of the Academic Success Program for advising and counseling with respect to factors that might have had or are having a negative impact on academic performance. The frequency of the meetings is determined by the counselor (not by the student). The student will be required to meet with the Assistant Dean for Student Affairs should he/she fail to comply with the terms of probation and be reported to the Promotions Committee. The Promotions Committee may deny a non-compliant student’s privilege to take summer re-exams, resulting in the student being required to repeat the failed course(s).

Students on academic probation will be required to meet with the Assistant Dean of Student Affairs under the following circumstances:

1. Failure of a third course/clerkship
2. Non-compliance with the requirements of academic probation
3. Poor performance (likely failure) of a course being repeated

End of Year Comprehensive Grades

In addition to grades for individual courses, students receive comprehensive grades at the end of Years 1, 2, and 3. A comprehensive grade of Satisfactory is awarded after a student has successfully passed each course and met all other requirements for the year. Students cannot achieve comprehensive honors if any course or clerkship is failed.

Comprehensive Honors for Year 1 and Year 2 students is determined by the weighted average of the standardized score for each course. The Promotions Committee has the discretion to determine additional honorees by lowering the honors rate below 600. A student with an overall year-end standardized score greater than 600, but with course failure, is ineligible for comprehensive Honors. Only students taking a full load of courses while enrolled will have a standardized score computed in Years 1 or 2. This means that students who modify or whose leave results in less than a full load will not have an end of year standardized score. The standardized score a student receives on a remedial examination, or when repeating a course, does not replace the original standardized score achieved in a failed course, nor is the year-end standardized score recomputed.

Comprehensive Honors in Year 1
For Year 1, a student’s standardized score for Gross Anatomy, Histology/Embryology, Physiology, Biochemistry, and Neurosciences, and 25% of the standardized scores of Clinical Nutrition and Genetics, are added together and divided by 5.50. A student, whose average standardized score is 600 or above, receives comprehensive Honors. Clinical Medicine 1 and Translational Medicine 1 are pass/fail courses.

Comprehensive Honors in Year 2

For Year 2, a student’s standardized score for Immunology/Microbiology, Pathobiology, and Pharmacology, 25% of the standardized score of Psychiatry, and 200% of the standardized score of Pathophysiology, are added together and divided by 5.25. A student, whose average standardized score is 600 or above, receives comprehensive Honors. Clinical Medicine 2 and Translational Medicine 2 are pass/fail courses.

Comprehensive Honors in Year 3

There are two different ways to receive comprehensive honors in Year 3. The first uses the number of months of clerkship honors (e.g., honoring Internal Medicine results in two months of honors whereas honoring Family Medicine results in one month of honors). Any student with a minimum of 6 months of Honors in Year 3 clerkships receives Year 3 Comprehensive Honors. The second uses the overall ranking system (described elsewhere). Any student who achieves Superb Clinical Skills (a score of 35 or greater), but has less than 6 months of Honors also receives Year 3 Comprehensive Honors. Comprehensive Honors are recorded on the student’s transcript. Grades for the Elective and Continuity Clerkship do NOT count toward Year 3 honors. A student who fails any Year 3 clerkship is ineligible for Year 3 Comprehensive Honors.

Overall Medical School Performance Evaluation (MSPE) Ranking

Students are not ranked at the end of Years 1 and 2, although relative performance information will be made available.

The ranking system used for the MSPE contains information about an individual student’s overall performance over the first three years of medical school. A system was developed to present our students in a positive way during an increasingly competitive residency application process. The system uses two dimensions—Academic Performance Basic Science and Clinical Performance—plus end of year Comprehensive Honors, to arrive at an overall descriptive term (Exceptional, Outstanding, Excellent, Very Good, Good, and Satisfactory) for each student.

<table>
<thead>
<tr>
<th>Performance Descriptor</th>
<th>Approximate Percentage</th>
<th>Level of Academic Performance and Clinical Performance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exceptional</td>
<td>5%</td>
<td>Outstanding academic performance and Superb clinical performance PLUS Comprehensive Honors for all 3 Years</td>
</tr>
<tr>
<td>Outstanding</td>
<td>25%</td>
<td>Outstanding academic performance and Superb clinical performance</td>
</tr>
</tbody>
</table>

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<table>
<thead>
<tr>
<th>Excellent</th>
<th>30%</th>
<th>Outstanding academic performance and Proficient clinical performance OR Very Good academic performance and Superb clinical performance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very Good</td>
<td>20%</td>
<td>Very Good academic performance and Proficient clinical performance OR Good academic performance and Superb clinical performance</td>
</tr>
<tr>
<td>Good</td>
<td>20%</td>
<td>Good academic performance and Proficient clinical performance</td>
</tr>
</tbody>
</table>

ACADEMIC PERFORMANCE BASIC SCIENCE (Average Standardized score over Years 1-2)

\[
\text{[(Year 1 Standardized score plus Year 2 Standardized score) divided by 2]}
\]

<table>
<thead>
<tr>
<th>Academic Performance Level</th>
<th>Percentage</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Outstanding Academic Performance</td>
<td>≥ 485</td>
<td>(approximately 60%)</td>
</tr>
<tr>
<td>Very Good Academic Performance</td>
<td>= 431 to 484</td>
<td>(approximately 20%)</td>
</tr>
<tr>
<td>Good Academic Performance</td>
<td>≤ 430</td>
<td>(approximately 20%)</td>
</tr>
</tbody>
</table>

CLINICAL PERFORMANCE (Year 3 Grades Converted to Scores)

Clinical Performance is based on the grades achieved in Year 3 clerkships, which reflect a combination of clinical knowledge (NBME Subject examination) and clinical performance (evaluations). Clerkship grades are converted to scores, where Honors = 4 points, Satisfactory with Commendations = 3 points, Satisfactory = 2 points, and Unsatisfactory = 0 points. Each clerkship (grade) score is then multiplied by the appropriate number of months (e.g., honoring Surgery would be 4 x 2 = 8 points versus honoring Psychiatry would be 4 x 1 = 4 points). Clerkship scores are summed across all clerkships. The maximum possible score is 44 (which would result if a student honored all 11 months of Year 3 clerkships). Getting Satisfactory for all clerkships would result in a score of 22. Students who have failed a clerkship will get a score of zero for the clerkship even after the clerkship has been remediated.

<table>
<thead>
<tr>
<th>Clinical Performance Level</th>
<th>Percentage</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Superb Clinical Performance</td>
<td>≥ 35 points</td>
<td>(approximately 25%)</td>
</tr>
<tr>
<td>Proficient Clinical Performance</td>
<td>= 14 to 34 points</td>
<td>(approximately 73%)</td>
</tr>
<tr>
<td>Competent Clinical Performance</td>
<td>≤ 13 points</td>
<td>(approximately 2%)</td>
</tr>
</tbody>
</table>

Students who do not have a standardized score in either Year 1 or Year 2, due to being modified or going out on leave of absence that results in less than a full load while enrolled, will have their single available year’s standardized score serve as their academic performance. For off-track students, their earned standardized score will be used regardless of when they earned it and the fact that it is from a different academic year from most other students being ranked.
VI. PROMOTION AND GRADUATION

Each student is responsible for knowing all promotional and graduation requirements, and to adhere to all policies and deadlines of the School of Medicine.

Attendance

Participation in instructional activities reveals a student’s attitude toward his/her professional preparation. Course and clerkship directors determine which activities are mandatory and the consequences for non-attendance at required activities.

Assignments

Course and clerkship directors determine all required assignments, and any make-up assignments if necessary. It is expected that all assignments be completed by the end of the course/clerkship, unless other arrangements have been made between the course/clerkship director and the student. Failure to complete any or all assignments by established deadlines could result in any of the following consequences:

- Being excluded from participation in any scheduling process for the next academic year
- Being prevented from registering for the next academic year
- Cancellation of registration for the next academic year

Promotion to Year 2

In order to be promoted to Year 2 each Year 1 student must:

- Achieve a satisfactory or honors grade for all prescribed courses.
- Complete all required assignments.
- Meet all attendance requirements and satisfactorily complete all make-up provisions.
- Meet professional guidelines during interactions with patients, fellow students, faculty, staff, and Standardized Patients.

Students may be allowed an opportunity to remediate unsatisfactory coursework at the discretion of the Promotions Committee. Some students may be required to repeat failed courses, while others may be allowed to take a comparable re-examination at the end of the year. Courses that are remediated by re-examination will show a grade of S* (Satisfactory upon remediation). Courses that need to be repeated will list twice on the transcript. The initial grade will be Unsatisfactory and the second listing will be Satisfactory (assuming the course is successfully remediated). Students repeating courses are ineligible of a grade of Honors.

Students who complete all Year 1 requirements are promoted to Year 2 by approval of the Promotions Committee.
Promotion to Year 3

In order to be promoted to Year 3 each Year 2 student must:

- Achieve a satisfactory or honors grade for all courses.
- Complete all required assignments.
- Meet all attendance requirements and satisfactorily complete all make-up provisions.
- Act professionally toward patients, fellow students, faculty, standardized patients and staff.
- Pass USMLE Step 1

Students may be allowed an opportunity to remediate unsatisfactory coursework at the discretion of the Promotions Committee. Some students may be required to repeat failed courses, while others may be allowed to take a comparable re-examination at the end of the year. Courses that are remediated by re-examination will show a grade of S* (Satisfactory upon remediation). Courses that need to be repeated will list twice on the transcript. The initial grade will be Unsatisfactory and the second listing will be Satisfactory (assuming the course is successfully remediated). Students repeating courses are ineligible of a grade of Honors.

Students who complete all Year 2 requirements are promoted to Year 3 by approval of the Promotions Committee, contingent upon passing USMLE Step 1. In certain situations, students may be required to post a passing score on the USMLE Step 1 examination prior to beginning Year 3 coursework.

All students are required to take the USMLE Step 1 exam prior to start of Year 3 orientation, which occurs toward the end of June. Students are provisionally registered as Year 3 students as they await the results of the Step 1 examination. Provisional Year 3 status is not a right, but a privilege, as some students may be required to post a passing score, not just take the examination, prior to beginning Year 3 coursework. For all students, full Year 3 status is dependent upon passing Step 1.

Students who have been away for more than a year from the completion of Year 2 (and the end of the Physical Diagnosis portion of Clinical Medicine 2) must take and pass a Clinical Readiness course prior to beginning Year 3 coursework.

Promotion to Year 4

In order to be promoted to Year 4, each Year 3 student must:

- Achieve a satisfactory or honors grade for all prescribed clerkships.
- Complete all required assignments.
- Successfully complete the Year 3 OSCE examination and its remediation, if necessary.
- Meet all attendance requirements and satisfactorily complete all make-up provisions.
- Act professionally toward patients, fellow students, faculty, standardized patients and staff.
Students who complete all Year 3 requirements are promoted to Year 4 on the recommendation of the Clerkship Committee and by approval of the Promotions Committee.

It is important to note that students are not officially promoted to Senior (Year 4) status until all requirements of Year 3 are met. This includes remediation of any and all Year 3 clerkships and examinations, completing all assignments. This is an extremely important issue, since senior electives taken without clearing all Year 3 deficiencies means that those electives will not be credited toward graduation. It is the student’s responsibility to make sure that this rule is followed and that all deficiencies and requirements are met.

**Promotions Committee**

**Structure and Function**

The medical school has the responsibility to assure that its graduates possess the knowledge, skills, attitudes, and behavior patterns that will enable them to function satisfactorily as licensed physicians. The Promotions Committee is the WSUSOM’s decision-making body with regard to the promotions and graduation process and has the responsibility of determining the student’s fitness and suitability for the study and practice of medicine. The Promotions Committee makes decisions relative to the retention and promotion of students and determines whether a student is making Satisfactory Academic Progress for federal financial aid eligibility. It also has the responsibility of assuring that due process and the rules and policies of the Medical School are followed.

The Promotions Committee is chaired by the Vice Dean for Medical Education, or designee, and consists of eight voting faculty members, four who are nominated by the Faculty Senate and four who are nominated from the Council of Departmental Chairs. Faculty members serve three-year terms. Four students (including four alternates), one from each class, are selected by and from the student body. Student members serve for three years, have full privilege of discussion, but do not have formal voting rights. Additional administrative and counseling personnel participate in the discussion but do not have formal voting rights.

The Promotions Committee can be convened at any time to review a student whose academic or behavioral performance is inconsistent with the School’s academic and professional standards. A quorum of at least five voting members is required for a Promotions Committee meeting. Decisions will be based on a majority of the voting members present at the time of the vote. In the case of a tie vote, the Chair can exercise his/her option of either breaking the tie, reopening the case for further deliberation, or tabling the vote if further information is desired by the voting committee members.

The Promotions Committee meets to:

- Certify the promotion of students who have met all of the promotional requirements of a given year (and are making Satisfactory Academic Progress to remain eligible for federal financial aid).
- Determine those students whose overall performance merits awarding comprehensive year-end honors.
• Determine the disposition of students who fail to meet the requirements for promotion (and are found NOT to be making Satisfactory Academic Progress).
• Determine the disposition of students whose behavior is inconsistent with the School’s professional standards.

Potential Actions

The options available to the Promotions Committee for disposition of a particular student prior to promotion to the next academic year include, but are not limited to the following:

• Require a student to successfully complete all non-examination deficiencies
• Allow a student to take re-examination in a failed course(s)
• Require a student to repeat selected failed courses or clerkships
• Require a student to appear before the Promotions Committee for a hearing
• Suspend a student and place him/her on an administrative leave of absence pending further investigation
• Dismiss a student from medical school

Hearings

Students who face the possibility of dismissal will be invited to a hearing with the Promotions Committee to ensure that all relevant data is available when the Committee makes its decision. A student can bring a support person to a hearing. The student will be introduced to the voting members of the committee. Members of the Committee may ask questions of the student. The student is permitted to summarize his/her situation. Deliberations occur without the student being present. The Promotions Committee can decide to postpone action pending receipt of additional information. An official letter of the decision will be provided to the student.

In the process of making decisions regarding students, the following information will be provided:

• Pre-entry data and medical school transcript information
• Performance data from the current academic year
• Information regarding any student issues which appear to have impaired academic or professional performance

Appealing Promotions Committee Decisions

Students have the right to appeal decisions of the Promotions Committee. In order to appeal a decision, a student must present a written statement to the Chair of the Promotions Committee within 10 business days from the time the decision has been communicated to the student. The appeal letter must clearly state the specific nature of the appeal. Appeals must contain new information not originally brought before the Committee in order for the appeal to be considered by the Chair of the Promotions Committee. The lack of new information in the appeal will result in the denial of the appeal by the Chair without taking the appeal to the full Committee.

If the appeal is denied, the student can appeal the decision to the Provost of the University by writing a letter to the Provost, and by providing a copy to the Dean of the Medical School.
Pre-Approval for Summer Re-Examinations Versus a Requirement to Repeat Failed Courses

Students who have completed the academic year with a minimum of two course failures may be pre-approved by the Promotions Committee to take summer re-examinations. Students can elect to repeat a failed course rather than taking a summer re-examination.

Students with three course failures, or who have any course failure prior to going out on a leave of absence, are required by the Promotions Committee to repeat the failed course(s) the following academic year. This decision is non-appealable. Students cannot petition to take any summer re-examinations for any of the failed courses. Students who fail a repeated course are not allowed to re-examine in the repeated failed course and will be administratively dismissed.

Students who fail more than three courses, or who have multiple course failures (more than one) prior to going out on a leave of absence, may be called before the Promotions Committee for a hearing regarding their academic performance and failure to make satisfactory academic progress. The Promotions Committee will determine the status for these students.

Pathophysiology Unit Failure Limitation. Due to the nature of the Pathophysiology course, Year 2 students are pre-approved to take up to 4 examinations (as long as there are no more than two total course failures). For example, a student is pre-approved to take re-examinations if the only failure is Pathophysiology with 4 unit failures, or where the student has failed another course along with Pathophysiology with only 3 unit failures. Students who are required to repeat Pathophysiology must successfully repeat the entire course, not just the failed units.

Notification of Summer Re-Examination Results

A student is notified by Student Affairs of the results of re-examinations only AFTER the individual student has completed all of his/her re-examinations.

Students Required to Repeat Coursework

Students who are allowed to repeat coursework are given one final chance to progress through the medical program of study. A summer re-examination at the end of the year (if the course is failed a second time) is no longer an option. Failed coursework must begin and be completed in the next academic year. Each course must be completed and passed in the order taken. A leave of absence will not generally be granted to delay or interrupt remediation.

A student will be dismissed if any of the following occurs:

- Achieve a grade of Unsatisfactory for a repeated course
- Fail to begin remediation as scheduled
- Fail to complete remediation as scheduled

Graduation

In order to graduate from WSUSOM, each Year 4 student must:
- Achieve a satisfactory or honors grade for all prescribed clerkships and electives.
- Complete all required assignments.
- Complete any OSCE remediation.
- Meet all attendance requirements and satisfactorily complete all make-up provisions.
- Act professionally toward patients, fellow students, faculty, standardized patients and staff.
- Pass USMLE Step 1
- Pass USMLE Step 2CK
- Pass USMLE Step 2CS

Deadline for Graduation Requirements

**May 1st of each year is the deadline for completion of all Year 4 requirements**, including coursework and passing USMLE examinations. Students who have not passed USMLE Step 2CK or 2CS examinations by May 1st will not be allowed to participate in graduation activities, including commencement. Students who only owe course work after May 1 may be allowed to participate in graduation activities on a case by case basis, as determined by the Vice Dean for Medical Education or his/her designee.

It is the student’s responsibility to know the requirements for completion of the senior program and the requirements for the awarding of the medical degree/graduation.

Graduating with Distinction

Students who earn comprehensive honors in Years 1, 2, and 3 will have the wording “With High Distinction” added to the diploma.

Students who earn comprehensive honors in Year 3, AND either Years 1 or 2, will have the wording “With Distinction” added to the diploma.
VII. USMLE EXAMINATION REQUIREMENTS

Overview

Medical students at the WSUSOM are required to:

- Pass USMLE Step 1 after completion of Year 2 coursework and prior to promotion to Year 3
- Pass USMLE Step 2CK prior to being granted the MD degree
- Pass USMLE Step 2CS prior to being granted the MD degree

School of Medicine deadlines supersede the end dates of a student’s USMLE eligibility period, which may extend past the School’s deadline. The fact that the School certifies your eligibility to take the exam does not imply an extension to a deadline.

National Board of Medical Examiners (NBME) Guidelines

The National Board of Medical Examiners (NBME) sets the passing scores required for each of the USMLE examinations and can change them at any time. In addition, the timing, frequency, and location of all USMLE examinations is determined the NBME. Students are responsible for knowing all NBME regulations for taking Step examinations. For example, the NBME states that it may take up to 6 weeks from the time of the examination until a score is posted. Students should plan according to the published reporting schedule when facing School of Medicine deadlines. For Step 1 also note that there is always a delay in reporting scores for examinations taken from the middle of May through the end of June.

The NBME has established limits on the number of examinations per year, the time between examinations, and the total time to complete all steps of the licensing examinations. Refer to the NBME website for their current policies: [www.usmle.org/bulletin](http://www.usmle.org/bulletin)

USMLE Step 1

Deadline for Taking the Examination

Students are required to take USMLE Step 1 at the end of Year 2 and a passing score is required prior to promotion to Year 3. The deadline for taking Step 1 is prior to the start of the Year 3 Orientation. The deadline remains in effect even where a student is due to go out on any type of leave of absence, rather than continuing directly to Year 3. Students whose July month is taken as a vacation month, rather than as an elective must still meet this deadline.

Students identified by the school as being at risk for a low (perhaps failing) USMLE Step 1 score will be given two-months of extended preparation time (July and August) and enrolled in a directed study for 2 credit hours, with a status of Special Matriculation. There is no self-selection into this group. Other students with personal circumstances that feel they require additional preparation time may be given the option of taking an approved two- or six-month leaves of absence. A student needs permission from the Associate Dean Undergraduate Medical
Education to extend the Step 1 deadline beyond the end of June, and permission from the Assistant Dean for Students for a leave of absence.

A student eligible to take Step 1, but who delays taking the examination without prior approval, may be subject to any of the following:

- Cancellation of their registration
- Adjustment of their schedule
- Be placed on an administrative leave of absence
- Be required to post a passing score before being allowed to begin Year 3 course work

Provisional Year 3 Registration Status

Students are enrolled in an independent study course that begins after the last WSUSOM examination for Year 2 and ends before the start of Year 3 Orientation. The independent study course is preparation to take the USMLE Step 1 examination. Students are provisionally registered as full-time Year 3 students before the results of the examination are known. Registration eligibility may require proof that the student took the examination. In some situations, a student may be required to pass USMLE Step 1 prior to beginning Year 3 coursework.

Students who pass the examination officially become Year 3 students. Students who fail Step 1 remain as Year 3 (provisional) students and are given the status of Special Matriculation for the remainder of the academic year.

Deadline for Posting a Passing Score for USMLE Step 1

Students are given one year in which to report a passing score on Step 1, or are academically dismissed from medical school. The one-year Step 1 “clock” begins on June 30, after the end of Year 2, and extends to July 1 of the following calendar year. An Incomplete grade for any Year 2 course does not delay the start of the Step 1 “clock”.

In addition, the Step 1 clock begins regardless of whether a student has been granted additional preparation time for Step 1 or has been placed on a leave of absence. Leaves of absences neither delay the start of the “clock” nor suspend the “clock.” Students going on educational leaves of absence prior to Year 3 must take and pass Step 1 as a precondition of the educational leave of absence.

Note that this is a “report a passing score” deadline and not a “take by” deadline. Due to the normal reporting schedule, students will need to take the exam no later than the middle of May to have a score reported before the July 1 deadline. Students who have not passed Step 1 within the one year deadline are automatically dismissed. Only the Chair of the Promotions Committee can grant extensions to this one-year deadline.

Extended Preparation for USMLE Step 1 – Special Matriculation
The WSUSOM identifies groups of students who would benefit from additional preparation for USMLE Step 1 beyond what is typically required. Students who fail a Year 2 course during the academic year in which they take the examination are considered to be at risk for a low USMLE Step 1 score (including the possibility of failure) and are required to delay Step 1. The School also identifies additional students that may not have failed a course, but have had some academic difficulties and who would benefit from additional preparation time. They are recommended to delay. Both types of students are enrolled in a directed study for two months to prepare (July and August) and given a status of Special Matriculation. For students given two months of additional preparation time, the first clerkship would begin during the September rotation (which typically begins the last week of August). Special Matriculation can be extended beyond August in special cases, on a month to month basis. The Director of the Academic Success Program must agree that additional time is necessary in order for the student to succeed. The Director of the Academic Success Program will notify the Associate Dean for Undergraduate Medical Education on any extensions being approved.

Students granted extended preparation time must register for Year 3 at the regular registration time, prior to the beginning of Year 3, in order to be eligible for the extended preparation time. Failure to register prior to the start of Year 3 Orientation may result in any or all of the following: 1) deletion from directed study; 2) deletion of the entire Year 3 schedule; and/or being placed on an administrative leave of absence.

A written plan of study must be approved by the Director of the Academic Success Program, and will include the frequency of meetings with the student. Each student granted extended preparation time must attend Year 3 Orientation.

All Extended Preparation students may take an approved preparatory course. The School will reimburse a student for the cost of commercial courses/materials, up to $800. Upon completion of the course, all receipts with proof of payment (a copy of the cancelled check or credit card charge AND a receipt from the course) should be taken to the office of Academic and Student Programs. Reimbursement may take up to 8 weeks. A student can only receive reimbursement once for Step 1.

Prior to beginning the first clerkship of the student’s remaining original schedule, each student is required to present proof that he/she took the examination no later than the 1st of the month and before an expected return (e.g., taking the exam by September 1 could allow an “October” return that actually begins the end of September). A certificate is provided at the testing center upon completion of the examination. For a January return a student is required to present proof of taking the exam by December 1. After December 1 the student’s remaining January to June schedule will be deleted and he/she will remain in Special Matriculation for the remainder of the academic year. The next available return to Year 3 would be the next academic year (end of June), assuming that a Step 1 passing score is received by June 1.

Students granted extended preparation time participate in the same Year 3 scheduling process as other students. The only difference is that their July/August clerkships will be moved to the following academic year. The expected date of graduation will remain the same, assuming that
Step 1 is passed on the first attempt and they are able to begin a first clerkship no later than October.

Students, who have already scheduled a June test date when they accept extended preparation, will need to reschedule their test date to August.

**Students Requesting Additional Preparation Time Beyond the End of June.** Only students identified by the School participate in the extended preparation as Special Matriculation students. However, if the Director of the Academic Success Program and student agree that additional time is needed, a student may be granted additional preparation time prior to taking USMLE Step 1 and be placed on a leave of absence. The formal request for additional time should be made to the Assistant Dean for Student Affairs. The length of the leave of absence will be either two or six months, as it needs to conform to the permissible entry times into Year 3 (other than beginning in July):

1. A two-month leave, where the student takes Step 1 prior to beginning the September clerkship (typically beginning the end of August).
2. A six-month leave, where the student takes Step 1 prior to beginning the January clerkship.

**Special Matriculation for Students Failing USMLE Step 1**

**Registration and Enrollment.** Passage of USMLE Step 1 is required before students officially progress to Year 3 status, and all students begin Year 3 coursework with the presumption that they will pass USMLE Step 1. They are provisionally registered as Year 3 students. Students who fail USMLE Step 1 are enrolled as half-time students with a status of Special Matriculation. Special Matriculation status eligibility is only available for the academic year following the completion of Year 2 coursework. Special Matriculation status is applied retroactively to the beginning of academic year, and can only remain in effect for a single academic year. While on Special Matriculation, a student is enrolled in a directed study as a half-time Year 3 (provisional) student, and may be eligible for financial aid per current policies of the Financial Aid Office. Twelve credit hours will be assessed. Special Matriculation status remains in effect until either (1) the student passes Step 1 and resumes Year 3 coursework, or (2) the end of the academic year.

**Coursework and Credit.** While on Special Matriculation, students cannot begin any additional Year 3 coursework (including the Continuity Clinic Clerkship) until a passing score is recorded.

Students who have begun a clerkship or elective at the time a failing score is posted will be removed from the clerkship/elective, and do not have the option of completing the clerkship. There are no exceptions to this policy.

**Returning to Year 3.** A passing Step 1 score must be received by the 1st of the month prior to a desired return. For example, for a January return the score must be available by December 1, for a July return the score must be available by June 1. Students who post a passing score on Step 1 will generally only be released from Special Matriculation status and resume Year 3 coursework.
in January (mid-year) or July (the next academic year), unless permission for an alternate entry date is granted by the Assistant Dean for Clinical Education. Students who desire a return other than those two times may submit a written request, after receiving a passing score. Students are not guaranteed their original Year 3 schedule or clinical site.

Preparing for Re-Examination. During Special Matriculation, students prepare for a re-examination of Step 1 by enrolling in a directed study course. Students are required to submit a written plan of work to be approved by the Director of the Academic Success Program, and required to attend regular meetings. The frequency of the meetings is determined by the Director of the Academic Success Program. The foci of the meetings includes, but are not limited to, the following topics:

- Study skills assessment and enhancement
- Study techniques
- Time management
- Test taking strategies
- Effective reading and use of notes, texts, and other resources
- Practice examinations

Students may enroll in a school-approved USMLE Step 1 course in order to prepare for the re-examination. The WSUSOM will reimburse a student for the cost of the course/materials up to $800. Upon completion of the course, receipts with proof of payment (a copy of the cancelled check or credit card charge AND a receipt from the course) are turned into the Office of Academic and Student Programs. Reimbursement may take up to 8 weeks.

Prohibition from Participation in School Activities. To ensure success on USMLE Step 1 re-examination, students who have failed Step 1 are not permitted to participate in Student Senate, service as class officers, sit on medical school committees, hold leadership roles in student organizations, participate in school activities requiring registration, participate in co-curricular programs, represent the school at any conferences or participate in extra-curricular international travel projects or programs. At the discretion of the Assistant Dean of Student Affairs, students may be prohibited from participation in other activities not specified here.

USMLE Step 2CK (Clinical Knowledge)

Year 3 students are not permitted to take USMLE Step 2CK or USMLE Step 2 CS prior to completing all Year 3 coursework.

All senior students must take Step 2CK by the end of December in the academic year they expect to graduate, and post a passing score by May 1. Students who have not taken the exam by the end of December will be contacted by the Assistant Dean for Clinical Science to discuss noncompliance. Students without a passing score by May 1 will be removed from the list of students participating in graduation. If a student has obtained a residency position, the residency program will be alerted to the fact that the student will be unable to begin the residency.

Students must post a passing score by the date the medical degree is conferred or will be placed on administrative leave. The deadline for students posting a passing score is May 1 of the
academic year following the academic year in which the first attempt was made or they will be dismissed. The clock/deadline for a student begins once they begin Year 4 coursework. Students who then choose to decelerate Year 4 coursework do not change the final deadline for passing the Step 2 exams if either Step 2CK or Step 2CS has been taken.

**USMLE Step 2CS (Clinical Skills)**

Year 3 students are not permitted to take USMLE Step 2CK or USMLE Step 2 CS prior to completing all Year 3 coursework.

**All senior students must take Step 2CS no later than the end of October**, and post a passing score by May 1. Students who have not taken the exam by the end of October will be contacted by the Assistant Dean for Clinical Science to discuss noncompliance. Students without a passing score by May 1 will be removed from the list of students participating in graduation. If a student has obtained a residency position, the residency program will be alerted to the fact that the student will be unable to begin the residency on July 1.

Students must post a passing score by the date the medical degree is conferred or they will be placed on administrative leave. The deadline for students posting a passing score is May 1 of the academic year following the academic year in which the first attempt was made or they will be dismissed. The clock/deadline for a student begins once they begin Year 4 coursework. Students who then choose to decelerate Year 4 coursework do not change the final deadline for passing the Step 2 exams if either Step 2CK or Step 2CS has been taken.
VIII. PROFESSIONALISM

Overview

The development of ideal professional values, attitudes, skills, and behaviors during the passage from medical student to practicing physician involves a number of processes that begin on the first day of medical school and continue throughout a physician’s career. The processes which shape a medical student’s professional growth are numerous. Some are explicit, and others implicit; they include aspects of the formal and informal curricula of medical school. Specific contributing factors include both positive and negative role models, classroom learning, and complex interactions with faculty, residents, patients, patients’ families, other health care providers, clerical personnel, and peers. All these factors influence students who enter medical school with diverse personal and cultural backgrounds. Although these multiple influences are complex, the academic environment, which defines a medical school, must attempt to control them so as to positively direct the medical students’ professional development. Wayne State University School of Medicine must create an environment which fosters the professional development of its students, correcting and remediating behaviors deemed to be unprofessional. Appropriate and mature behavior is expected by the student both on and off campus.

Physicians are held in high esteem by society and they are expected to exhibit professional behavior. Professionalism at the Wayne State University School of Medicine is a longitudinal curriculum that promotes professional growth across the four years of medical school. Wayne State University medical students are expected to model those behaviors during their education and training. On those rare occasions Wayne State Medical Students violate the code of conduct they will be referred to the School of Medicine Professionalism Committee.

Professional Values and Attributes. Appropriate, law-abiding behavior is expected, as is adherence to the general policies regarding behavior and conduct enumerated elsewhere by Wayne State University Listed here are the values and attributes that are at the core of Professionalism at the School of Medicine:

- Professional Responsibility
- Competence and Self-Improvement
- Respect for others and professional relationships
- Honesty including academic integrity
- Personal responsibility
- Social responsibility

Promotions Committee Functions and Procedures

The School of Medicine Professionalism Committee will conform to the policies and procedures of the Wayne State University Student Code of Conduct [http://www.doso.wayne.edu/Student-conduct/index.html] and the guideline for implementing the Student Code of Conduct as adopted by the School of Medicine.

The Vice Dean for Medical Education will appoint the Chair of the Professionalism Committee.
The Professionalism Committee composition will be as follows:

- Chairperson appointed by the Vice Dean for Medical Education (who serves as the Chair of the Promotions Committee).
- Eight faculty members appointed by the Executive Committee of the Faculty Senate. Faculty members are appointed for 2 or 3 year terms.
- Four students, one from each the four classes appointed by the Student Senate. Student Senate shall appoint an alternate from each of the four classes.

The faculty must comprise the majority of the quorum. A majority vote of the faculty members is required to pass all motions. Student committee members cast an advisory vote. The Chair will cast a deciding vote in the event of a tie. The Associate Dean for Undergraduate Medical Education will serve in the capacity of Professionalism Committee Chair in the event that the Chair must be recused from a case.

The Chair of the Professionalism Committee shall direct and coordinate matters involving student discipline and shall be available to answer questions concerning the procedure to be followed in implementing these Guidelines or the Student Code of Conduct.

The Office of Student Affairs for the School of Medicine shall maintain disciplinary files in the name of the student respondents. Except where litigation or administrative proceedings are pending regarding the matter, if a student is found not to be in violation of the charges, his/her files shall be destroyed. The files of students found in violation of any of the charges against them will be retained as a disciplinary record for the duration of time specified in the sanction, but no less than five years. If the sanction includes a Transcript Disciplinary Record pursuant to Section 5.10 of the Student Code of Conduct, disciplinary records shall be retained permanently if the transcript entry is permanent; or, if the entry is for a specified period of time, for five years after the end of that period. Disciplinary records may be retained for as long as litigation or administrative proceedings are pending regarding the matter.

Prohibited Conduct

In addition to the Prohibited Conduct set forth in the Wayne State University’s Student Code of Conduct, as set forth in Section 4.0, the following are instances of conduct that may be deemed a violation of the School of Medicine’s Professionalism Curriculum:

a) Unmet professional responsibility;

b) Lack of effort toward self-improvement, adaptability, and learning;

c) Lack of respect for others; and

iv) Dishonesty - Students are expected to provide truthful information to the medical school, beginning at the admission process and continuing through graduation.

Charges
Any person may initiate charges against one or more students believed to have violated the School of Medicine’s Professionalism Curriculum, by filing charges with, and by providing information pertinent to the case, to the Chair of the Professionalism Committee, both in writing. The charge must be made within a reasonable time after the alleged misconduct has occurred.

The Chair of the Professionalism Committee will coordinate the adjudication of both academic and non-academic misbehavior violations of the Professionalism Curriculum pursuant to WSU’s Student Code of Conduct and the Guidelines for Implementing the School of Medicine Professionalism Curriculum. In all cases, the charge may be withdrawn only by the charging party. It may be withdrawn at any time prior to the notice provided for in the Guidelines but may not be withdrawn thereafter.

Sanctions

In addition to the Disciplinary Sanctions that may be imposed under Section 5.0 of the Student Code of Conduct, the School of Medicine’s Professionalism Committee may impose the following sanctions:

- Notification of a national organization with Wayne State School of Medicine chapter membership of a student’s Loss of Privileges.
- Referral to the School of Medicine Promotions Committee with a recommendation for dismissal from the medical school.
- A notation of disciplinary action may be included in the Medical Student Performance Evaluation letter.

Communicating Notices to Students

All notices to students regarding charges for violation of the Professionalism Curriculum shall be sent by e-mail to the student. Copies of written notices may also be hand-delivered to the student.

Appearances by Students

Pursuant to Section 6.0 of the Student Code of Conduct, a student may bring an advisor or an attorney to a formal hearing, and a student may bring an advisor or attorney to an Informal Disciplinary Conference. The student must notify the Chair of the Professionalism Committee at least five (5) school days prior to the hearing if he/she desires the presence of an advisor or attorney.

Interim Suspensions

In addition to the circumstances set forth in Section 7.0 of the Student Code of Conduct for an Interim Suspension, whenever there is evidence that the continued presence of a student at a clinical training site poses a substantial threat to that student or to others, or to the stability and continuance of normal clinical training site functions, the provisions of Section 7.0 of the Student Code of Conduct may be applied.
Code of Conduct may be invoked.

Hearing Panels

Pursuant to Section 8.0 of the Student Code of Conduct for Hearing Committee Panels, the Hearing Committee Panel for the School of Medicine shall be the Professionalism Committee. The Professionalism Committee will conduct the formal hearing pursuant to the procedures set forth in Section 15.0 of the Student Code of Conduct.

The Informal Disciplinary Panel for the School of Medicine will be convened by the Assistant Dean of Student Affairs and will be appointed on a per case basis. The student will be notified of the panel composition 48 hours before the informal disciplinary conference. The student must notify the Assistant Dean of Student Affairs of their decision to proceed with the Informal Disciplinary Conference or have a Formal Hearing before the Professionalism Committee. The decision of the informal disciplinary panel is final with no opportunity for appeal.

The Chair of the Professionalism Committee shall keep a list of the Informal Disciplinary Panels and shall provide the report to the Dean or his/her designee.

Fact-Finding Procedures

Upon receipt of the charges, the Chair of the Professionalism Committee shall initiate an investigation pursuant to the procedures set forth in Section 11.0 of the Student Code of Conduct, except that all procedures will be handled by the Chair of the Professionalism Committee rather than the Student Conduct Officer of the University.

Any notices sent to the student pursuant to these fact-finding procedures and section 11.0 of the Student Code of Conduct, will also be sent to the Assistant Dean of Student Affairs for the School of Medicine.

In addition to the Fact Finding Procedures set forth in Section 11.0 of the Student Code of Conduct, the Chair of the Professionalism Committee may take any of the following additional actions:

Within ten school days following the fact-finding conference, the Chair of the Professionalism Committee shall decide:

   a) no further action will be taken;
   b) recommend remediation; or
   c) convene a formal hearing by the Professionalism Committee.

If remediation is recommended, the student may accept or decline the recommended remediation. If the student elects to accept the recommended remediation, he/she must do so in writing within ten (10) school days. If the student accepts the recommended remediation, the Chair of the Professionalism Committee will notify the Assistant Dean of Student Affairs of the remediation, and no further proceedings will be had. If the student declines the recommended
remediation, the student may choose between an informal disciplinary conference or a formal hearing with the Professionalism Committee.

Procedure For Informal Disciplinary Conference

The Assistant Dean of Student Affairs shall notify the student that he/she may either meet with him/her in an Informal Disciplinary Conference pursuant to Section 13.0 of the Student Conduct Code or choose to have the decision and/or sanction of the Chair of the Professionalism Committee heard by a formal Hearing Committee pursuant to Section 14.0 of the Student Conduct Code.

If the Assistant Dean of Student Affairs is the charging party, the Associate Dean for Undergraduate Medical Education will convene the Informal Disciplinary Conference.

Students or student organizations subject to, or electing to participate in, an Informal Disciplinary Conference before the Assistant Dean of Student Affairs shall be accorded all of the procedures provided for in Section 14.0 of the Student Code of Conduct.

Appeal Process

If as the result of a formal hearing process, a sanction is imposed, the student or representative(s) of the organization may request the Chair of the School of Medicine Promotions Committee review the decision on the record. A written Request for Review must be signed and submitted by the student or representative himself/herself (not by an advisor or an attorney) to the Chair of the Professionalism Committee within twenty (20) school days of the Professionalism Committee’s final decision. The Chair of the Professionalism Committee will forward the appeal, with the record, to the Chair of the Promotions Committee.

The Chair of the Promotions Committee may affirm, reverse or modify the decision or may convene the Promotions Committee to review the case. The Chair of the Promotions Committee shall notify the student and the Chair of the Professionalism Committee of the decision in writing, within a reasonable time.

Reporting Medical Student Unprofessional Behavior

If you believe that a medical student has exhibited behaviors or attitudes that are contrary to the expectations of Wayne State School of Medicine and the community then you may file a report with the appropriate Course Director or Clerkship Director. The Course or Clerkship Director will investigate and report their findings to the Assistant Dean for Basic Sciences, Assistant Dean for Clinical Sciences, or Assistant Dean for Student Affairs.

Examples of Prohibited Conduct may be found in section 4.0 of the Wayne State University Student Code of Conduct: http://www.doso.wayne.edu/codeofconduct.pdf

Content of the Unprofessional Behavior Report

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Include in your report:

1. Name of the charged student
2. Charging party and relationship to the student
3. Date and location of the incident(s)
4. A description of the unprofessional behavior(s) that includes a citation of the prohibited conduct from the WSU Student Code of Conduct
5. Names and contact information of individuals who can provide supporting information
6. Name and contact information of any student who was accessory or witness to the unprofessional behavior(s)
7. Documentation of any communication with the charged student(s). This includes but is not limited to e-mails and meeting notes.
8. Any supporting documentation pertinent to the case

You will be contacted by the appropriate Assistant Dean for additional information. If the case is forwarded to the Professionalism Committee then you will be contacted by the Chair of that Committee.

Direct any questions to the Chair of the Professionalism Committee:
Assistant Dean for Basic Sciences
Academic and Student Programs
mpjacks@med.wayne.edu
313-577-1450 (Office)
313-577-1457 (FAX)

Oath of Academic Integrity

Entering students recite the following oath prior to beginning coursework.

As a part of a community of medical students, I know that my instructors and fellow students have placed their trust in my academic and professional integrity. I recognize the importance of helping each other as we struggle. Dishonesty within a medical school, however, affects not only the student, but also the reputation of the institution, and potentially our future patients.

In view of this, I hereby vow to pursue my studies with integrity and conscience. I will not accept dishonesty among my peers and pledge to honor that trust that my instructors and fellow classmates have placed in me.

As a future physician, my patients and colleagues will entrust to me matters of a sensitive and confidential nature. In some circumstances, their very lives will depend upon my integrity. I will respect their faith in me and will maintain the level of dignity and honesty that medicine demands. From this day forward, I will keep honor in this profession.
Declaration of Commitment

Entering students recite the following declaration at the White Coat ceremony, prior to beginning coursework.

*I solemnly pledge myself to consecrate my life to the service of humanity;
I will give to my teachers the respect and gratitude which is their due;
I will develop my skills with conscience and dignity;
The health of my patients and myself will be my first considerations;
I will respect those things that are confided in me;
I will maintain by all the means in my power, the honour and the noble traditions of the medical profession;
My colleagues will be my comrades;
I will not permit considerations of religion, nationality, race, party politics, sexual orientation or social standings to intervene between my duty, my peers, and my patients;
I will maintain the utmost respect for human life and I will not use any medical knowledge contrary to law;
I make these promises solemnly, freely and upon my honor.

Adopted from Declaration of Geneva and the International Code of Medical Ethics.

Oath of Commitment

Graduating senior students recite the following oath at commencement.

*I do solemnly swear by all that I hold most sacred that according to my ability and judgment I will in every particular this my oath and covenant:

I pledge to dedicate myself to the service of humanity and to honor the noble traditions of the medical profession. To hold them who have taught me this art as equal to my parents and to live my life in partnership with them. To give to my teachers the respect and gratitude which is their due; to regard my colleagues equally with my brethren; and to teach this art by precept, by lecture, and by every other mode of instruction, to those who practice the healing arts.

As a physician, I will maintain the ultimate dignity of life while guiding its arrival, protecting its course, and easing its natural passage from this world; I will offer to those who seek my aid not only my knowledge and skills, but my warmth and compassion as well; whatever the lives of those I shall see or hear, either in my practice or outside of my practice, which should not be made public, this I hold in silence, believing that such things should not be spoken.
I will conduct myself with honesty and virtue; with conscience and dignity will I live my life and practice my art. In all circumstances, I will consider every individual as equal without regard to race, creed, or gender, refusing no one my help. I will abstain from every act of injustice and corruption. Above all else, I will do no harm (Primum Non Nocere).

I freely take this oath and will maintain the noble traditions of my profession, always tempering my science with the warmth and humility of the true physician.

**Code of Conduct in Gross Anatomy Laboratories**

The Uniform Anatomical Gift Act of the State of Michigan permits the dissection of the human body for educational purposes. The Body Bequest Program of Wayne State University provides bodies for a student’s education, prior to the body’s final interment. The following code of conduct will apply at all times in the Human Gross Anatomy laboratories:

- Dissection of the human body will be performed with dignity and respect.
- Students assigned to a cadaver will be responsible for the proper conduct of the dissection according to the dissection guide and faculty instruction.
- All identifying information about the cadaver is confidential.
- Students may not dissect or alter cadavers assigned to other students.
- Human tissues, including prosections, bones, and skeletons, may not be removed from the laboratories.
- Neither the cadaver nor any part thereof may be photographed, videotaped, or digitized.
- Neither the cadaver nor any part thereof may be positioned or displayed in an inappropriate, comical, or obscene manner.

**Dress and Grooming Standards**

The WSUSOM does not have an explicit dress code for classroom activities. A student is expected to have an appearance that inspires confidence in one’s self and one’s medical school when interacting with patients and the public.

On the other hand, a set of dress and grooming standards have been developed for medical students while in clinical settings. Unless stated otherwise, students should dress professionally and wear a clean white lab coat during all patient encounters (including standardized patients). All students are expected to maintain personal appearance standards that are consistent with the image of a health care professional, and comply with all infection control, legal, and safety requirements.

**Objective**

To promote a neat, clean, professional, and business like appearance consistent with preserving and enhancing the image of the Wayne State University School of Medicine, while assuring that attire is not hazardous or offensive to patients and employees.

**Scope**
All Wayne State University School of Medicine students assigned to inpatient or outpatient (including ambulatory sites, private offices, etc.) patient care areas.

Policy

All students shall maintain personal appearance standards that are consistent with the image of a health care professional, and comply with all infection control, legal, and safety requirements.

Universal Personal Appearance Standards

1. Clothing should be of appropriate size and fit permitting freedom of movement. All personal clothing should be clean, neat, and of appropriate length with finished hems. Thighs, breasts and cleavage must be covered. Tucking pant legs into socks is not permitted.

2. Undergarments must be worn at all times, and color and/or design must not be visible through clothing. Socks or hosiery must be worn. Bare legs and feet are not acceptable.

3. A short white coat with appropriate School of Medicine identification (embroidery) is to be worn at all times during patient care activities, unless the student’s duties require wearing other items such as scrub clothing in the operating or delivery room.

4. Hair is to be neat and clean. Long hair must be so styled and/or restrained so as not to interfere with work performance, safety and infection control. Hair may not obscure vision or come in contact with patient or other surfaces. Head coverings mandated by religious beliefs are acceptable. Mustaches and beards must be clean and neatly trimmed.

5. Fingernails must be kept short (i.e., not to exceed 1/4 inch past the fingertip) and clean. Chipped nail polish or enhancements such as jewels may not be worn. Nail enhancements of any kind (e.g., wraps, acrylics, gels and stones) may not be worn in the Operating Rooms, Same Day Surgery, Intensive Care Units (for example, ICU, BMT, Burn unit, NICU, PICU, pheresis), step-down ICU units, or other areas where invasive procedures are routinely performed or when procedures require a surgical scrub. (CDC Guideline for Hand Hygiene in Health-Care Settings. MMWR 51(RR16); 1-44: 2002).

6. Jewelry must not create a hazard to self or others, and should be kept to a minimum. Visible adornment with tattoos or body paint is not acceptable. No visible ornamental piercing except for ears. No bracelets are to be worn by students while engaged in patient care activities.

7. School of Medicine and/or appropriate Hospital Identification (Badges) must be worn at all times, on the upper chest or shoulder area, while on duty. Full name and photo must be visible. Badge holders/lanyards must not interfere with patient care activities and be worn above waist level.

8. Shoe covers, where required, must be removed when leaving the patient care area.
9. Makeup should be appropriate for office daytime wear. Perfume and scented after-shave lotion must not be worn due to the health risk to others.

10. Personal headphones or personal cell phones are not to be used or worn while on duty in direct care of patients. Personal beepers may be worn, but must be on vibrating (non-audible) mode and must not be visible.

11. Non-Direct Care Activities: Unless otherwise directed, casual business wear may be worn while in orientation, or at other educational offerings. This includes appropriate shoes/hose. However, if a portion of the day is spent in the clinical area, the above guidelines regarding dress and grooming then apply.

12. Off-Site Functions: Wayne State University School of Medicine Clinical Student Dress and Grooming Standards must be adhered to when employees or contract employees represent the DMC at any outside conferences, community outreach functions, and other professional/educational events.

13. The following types of clothing are not permitted:
   - Jeans or clothing of denim-like material
   - T-shirts (without hospital approved design or logos)
   - Sweatshirts, sweatpants, or jogging suits
   - Exception: Staff may wear sweatshirts with hospital approved logo-site specific. Personal Trainers at RIM wear RIM Logowear warm-up suits.
   - Shorts or Capris
   - Tank or tube tops
   - Military fatigues
   - Stretch pants, spandex, stir-up pants
   - See-through or revealing clothing
   - Exercise apparel
   - Mini-skirts or mini-dresses (mid-thigh) or slit above mid-thigh
   - Leather
   - Excessive or inappropriate jewelry
   - Sunglasses
   - Open toe shoes or sandals

Specialty Areas

1. Approved hospital-provided and laundered scrubs are to be worn in designated areas only. These include, but are not limited to, the Burn Center (DRH), Labor and Delivery, LDRP, Dialysis and Perioperative areas.

2. Refer to site or department policy for students assigned to the Rehabilitation Institute of Michigan, and Psychiatric or Chemical Dependency areas.
When Standards Are Not Met

1. Each student is responsible for maintaining an appearance consistent with this policy. It is the responsibility of School of Medicine Administration, in conjunction with resident and attending faculty along with administration of all assigned health care institutions, to assure compliance with these guidelines.

2. Resident and Faculty, or the student’s counselor from the Office of Student Affairs, are expected to counsel students who wear inappropriate or unsafe clothing.

3. Students repeatedly arriving at work in apparel deemed unacceptable or unprofessional will be sent home for more appropriate attire. Students may then be required to make up time missed from clinical activities.

4. If the student does not respond to counseling, he or she may be suspended and referred to the Professionalism Committee for further action.

5. Faculty and resident physicians to whom students are assigned may make exceptions to the above policy for specific purposes and events.
Student Mistreatment

I. Purpose

The purposes of this policy are to outline expectations of behaviors that promote a positive, supportive, learning environment for Wayne State University School of Medicine medical students and other learners and to identify grievance procedures to address alleged violations. This policy offers a definition of appropriate expectations, provides examples of unacceptable treatment of medical students, and describes the procedures available to report incidents of mistreatment in a safe and effective manner.

II. Policy

Wayne State University School of Medicine is committed to maintaining an educational and professional environment that is free of all forms of harassment and discrimination. The School of Medicine strives to create a safe and supportive learning environment that reflects the Institution’s values: professionalism, respect for individual rights, appreciation of diversity and differences, altruism, compassion and integrity. Mistreatment of medical students is unacceptable and will not be tolerated.

The policy applies to all members of the School of Medicine community including all students, administrators, faculty, staff, clinical teaching faculty, medical personnel, guest lecturers, and volunteers. All members of the School of Medicine community must adhere to this mistreatment policy and report violations. Mistreatment of students can occur by other medical students, university employees and non-university employees. All three types of mistreatment will be addressed in this policy.

III. Procedures

a. Distribution by the Office of Student Affairs

This policy is available in the Student Policy Handbook http://asp.med.wayne.edu/pdfs/policies_and_procedures_manual_1213.pdf. It will also be reviewed with the medical students in the Year 1, 2, 3 and 4 Orientation sessions and will be distributed to the faculty, course/clerkship directors, and clinical site medical education directors annually. Students will also receive education on the University Student Code of Conduct Policy as well as the LCME standards as it pertains to student mistreatment at http://medicine.osu.edu/students/life/handbook/Documents/13-Abuse%20Policy12-13v1.pdf

b. Examples of Mistreatment

Students should use this Mistreatment Policy to address discriminatory, unfair, arbitrary or capricious treatment by faculty, staff, students, clinical teaching faculty and medical personnel. The school adheres to the professional standards of
behavior established by the Association of American Medical Colleges and the Wayne State University Nondiscrimination Policy (referenced in III.c.) http://oeo.wayne.edu/pdf/affrm_actn_policy.pdf. Students are expected to report behavior which interferes with the learning process. Students should consider the conditions, circumstances and environment surrounding the behavior. Examples of discriminatory, unfair, arbitrary or capricious treatment include, but are not limited to: *

1. Physical
   a. Physically mistreated causing pain or potential injury
   b. Pushed/slapped hand (“get out of the way communication”)
   c. Exposed to other forms of physical mistreatment used to express frustration, make a point or get attention

2. Verbal
   a. Accused
   b. Threatened/intimidated
   c. Yelled at/snapped at
   d. Degraded/ridiculed/humiliated/sworn at/scolded/berated
   e. Exposed to inappropriate conversation/comments (of nonsexual and nonracial nature)

3. Sexual harassment
   a. Making unwelcome sexual comments, innuendo, jokes, or taunting remarks about a person’s protected status as defined in the University’s Nondiscrimination Policy Statement. (referenced in III.c.)
   b. Making unwelcome and unwanted sexual advances, requests for sexual favors, and other verbal or physical conduct or communication of a sexual nature as per the University Sexual Harassment Policy, http://bog.wayne.edu/code/2_28_06.php.
   c. Ignored because of gender
   d. Stalking of a sexual nature; i.e. persistent and unwanted contact of any form whether physical, electronic or by any other means.

4. Ethnic
   a. Exposed to racial or religious slurs/jokes as defined in the University’s Nondiscrimination Policy Statement. (referenced in III.c.)
   b. Stereotyped
   c. Neglected/ignored (because of student’s ethnicity)

5. Power
   a. Dehumanized/demeaned/humiliated (nonverbally)
   b. Intimidated/threatened with evaluation or grade consequences
   c. Asked to do inappropriate tasks/scut work
   d. Forced to adhere to inappropriate work schedules
e. Neglect/ignored

*list adapted from Fried et. al, Academic Medicine, Sept 2012

Please note: When one party has any professional responsibility for another’s academic or job performance or professional future, the university considers sexual relationships between the two individuals to be a basic violation of professional ethics and responsibility; this includes but is not limited to sexual relationship between faculty and student or between supervisor and student, even if deemed to be mutually consenting relationships. Because of the asymmetry of these relationships, “consent” may be difficult to assess, may be deemed not possible, and may be construed as coercive.

c. Medical students who themselves experience or observe other students experiencing possible mistreatment are encouraged to discuss it with someone in a position to understand the context and address necessary action. Those who believe they have experienced mistreatment, sexual harassment or discrimination by an administrator, faculty, staff member, student or a teaching hospital or clinic employee can pursue one or more avenues for resolution. Suggested options for medical students include:

1. DISCUSS it with a Wayne State University School of Medicine (WSUSOM) Counselor in the Office of Student Affairs, the Assistant Dean of Student Affairs, the Assistant Dean of Basic Science, the Assistant Dean of Clinical Education, the WSUSOM clerkship/course director, hospital system clinical site Director of Medical Education, or the Office of Ombuds on main campus. These staff will meet with the student and hear the details of the alleged incident. Students are encouraged but not required to try to resolve the matter by involving a WSUSOM counselor and the Assistant Dean of Student Affairs.

2. FILE a School of Medicine Report:
   a. File a report with the Assistant Dean of Student Affairs using the http://studentaffairs.med.wayne.edu/form-mistreatment.php

3. Formally REPORT it:
   i. If the event involves another student, the Office of Student Affairs at the School of Medicine will assist the student in filing charges under the University Student Code of Conduct Process.
http://doso.wayne.edu/student-conduct/suit/carereport.htm as per University Policy.

ii. If the event involves a WSU administrator, faculty or staff, and involves sexual harassment or discrimination the student must also report the incident to the Office of Equal Opportunity http://oeo.wayne.edu/pdf/discrimination_and_complaint_process_final_old.pdf who will investigate and respond accordingly. Refer to University Policy 2005-03 Discrimination and Harassment Complaint Process.

If the event involves a WSU administrator, faculty or staff, and does not involve sexual harassment or discrimination the student may also report the incident to the Office of Equal Opportunity.

iii. If the event involves clinical faculty/medical personnel (non-university employee) at a clinical site, the student may also report the event to the Human Resources Department of that Hospital.

All complaints should be filed within 30 business days of the event. A School of Medicine Care Report includes the following:

- Your name (optional)
- Your email (optional)
- Your phone number (optional)
- Date of the event
- Time of the event
- Location
- Statement and description of the alleged event
- Name(s) of person(s) involved
- Witnesses, if any
- Other facts considered to be relevant

Rights of the Accuser and Accused:
- To confidentiality
- To have the allegations investigated in a thorough and timely manner
- To be informed of the outcome of the process
- To modify a schedule as indicated

If the student is not satisfied with the outcome of their complaint, the student should meet and discuss the issue with the Vice Dean for Medical Education.
Medical Students requesting complete anonymity should be made aware that doing so may interfere with the University’s ability to investigate the concern and their ability to receive information about the follow up investigation.

The University’s Nondiscrimination Policy Statement is:

“The University, as an equal opportunity/affirmative action employer, complies with all applicable federal and state laws regarding non-discrimination and affirmative action. In furtherance of this policy, the University is also committed to promoting institutional diversity to achieve full equity in all areas of University life and service and in those private clubs and accommodations that are used by University personnel. No off-campus activities sponsored by or on behalf of Wayne State University shall be held in private club facilities or accommodations which operate from an established policy barring membership or participation on the basis of race, color, sex (including gender identity), national origin, religion, age, sexual orientation, familial status, marital status, height, weight, disability, or veteran status. Affirmative action procedures, measures, and programs may be used to the extent permitted by law to establish, monitor and implement affirmative action plans for all budgetary units and the University as a whole.”

d. Responding to Concerns of Mistreatment

All complaints will be considered thoroughly and promptly. Every effort will be made to resolve complaints in an expeditious, discreet and effective manner. The University, including the School of Medicine, will attempt to maintain confidentiality to the extent possible within legitimate conduct of an investigation and/or as required by law. Every effort will be made to avoid negative repercussions as a result of discussing an alleged offense and/or filing a complaint.

If a student reports mistreatment through the School of Medicine Student Care Report, the Assistant Dean of Student Affairs will automatically be provided with written notice of reported concerns of mistreatment and will conduct an initial inquiry into the circumstances of the alleged mistreatment. The Assistant Dean of Student Affairs will assist the student in filing a report with the appropriate office. When another student is involved and the Student Code of Conduct Policy has been activated, the University Student Conduct Officer will render a corrective action plan after discussion and collaboration with the Chair of the Professionalism Committee and/or the SOM Assistant Dean of Student Affairs.

Aggregate and de-identified data on reports of mistreatment of Medical Students will be shared with the Vice Dean for Medical Education, The Student Senate, and the WSUSOM Curriculum Committee on an annual basis.

IV. No Retaliation
Retaliation is strictly prohibited against persons who in good faith report, complain of, or provide information in a mistreatment investigation proceeding. Retaliation includes behavior on the part of the accused or the accuser and other related persons, including, but not limited to, acquaintances, friends and family members. Individuals who believe they are experiencing retaliation should immediately contact the Assistant Dean of Student Affairs or a WSUSOM counselor so that prompt remedial action can be taken.

V. References

Student Confidentiality and Access to Sensitive Information

Purpose

The purpose of this policy is to outline the approach of Wayne State University School of Medicine towards the handling of sensitive information such as academic records, health information and evaluation of students who seek medical/psychological care.

Confidentiality

Wayne State University School of Medicine follows appropriate standards of confidentiality in the management of private student information. Wayne State University School of Medicine’s policies pertaining to student access to records and the protection of confidentiality comply with Wayne State University (parent institution) and the Family Educational Rights and Privacy Act of 1974 (FERPA), governing access to, and confidentiality of, student educational records. For more information regarding Wayne State University’s Privacy of Academic Records Policy, please refer to: http://reg.wayne.edu/students/privacy.php

Rights under FERPA for Postsecondary Institutions

The Family Educational Rights and Privacy Act (FERPA) affords students certain rights with respect to their education records:
(1) The right to inspect and review the student's education records.
(2) The right to request the amendment of the student’s education record that the student believes is inaccurate, misleading, or otherwise in violation of the student’s privacy rights under FERPA.
(3) The right to provide written consent before the University discloses personally
identifiable information from the student's education records, except to the extent that FERPA authorizes disclosure without consent.

(4) The right to file a complaint with the U.S. Department of Education concerning alleged failures by the University to comply with the requirements of FERPA. The name and address of the Office that administers FERPA is:

Family Policy Compliance Office  
U.S. Department of Education  
400 Maryland Avenue, SW  
Washington, DC 20202

Student Information and Academic Records

With certain defined exceptions, under FERPA, an academic record is: *Any record, maintained by an institution or agent of the institution where a student can be personally identified.* A student has right to expect that educational records will be kept confidential and will be disclosed only with his or her permission or as allowed by law (including electronic records). Information regarding an individual’s academic performance, external examination results (e.g. USMLE) and financial status will be kept confidential and handled carefully to prevent it from becoming known to unauthorized individuals.

The Wayne State University School of Medicine uses various secure electronic information systems, such as MySOM, Banner, STARS, E*Value, etc. for storing information regarding student academic performance, course registration, academic performance, biographical data, appointment information and financial aid and student account information regarding charges and payments. Paper files kept at Wayne State University School of Medicine include the academic file and the health file.

Health Information

Health information is stored separately from a student’s academic records and kept in a locked area in the Registrar’s Office. Access to the health files is limited to authorized Student Affairs personnel.

Review and Amend Records

Students have the right to inspect and review their educational records, seek amendment of the records they believe to be inaccurate or in violation of their privacy rights, and consent to disclosures of personally identifiable information contained in their records (except to the extent that the law authorizes disclosure without consent). Students who wish to amend an inaccurate or misleading record may:

1) Discuss any changes with the School of Medicine Assistant Dean for Student Affairs or Office of Records & Registration
2) Request that records are reviewed by Wayne State University Registrar (main campus). The school is required, by law, to respond within 45 days of the request receipt. Requests through this channel should be addressed to:

Wayne State University Academic Records  
Wayne State University  
5057 Woodward, Fifth Floor  
Detroit, MI 48202

Grade Appeal Process

For information on appealing a grade, please refer to the grading policies available on the Academic and Student Programs website:  
http://asp.med.wayne.edu/grading.php# Appealing Grades

Exceptions and Disclosure without Consent

FERPA identifies a category of information as “directory information” that institutions may usually release without student permission. Wayne State University has designated the following items as Directory Information: Name, address, phone number, age or date of birth, E-mail address, major field of study, degrees, honors, and awards received, and participation in sports and activities. In addition, under the FERPA exceptions, Wayne State University may disclose a student’s educational records without consent under the following instances:

- To school officials with a legitimate educational interest. A school official is a person employed by the university in an administrative, supervisory, academic or support staff position (including law enforcement personnel & health system staff) or a person or company with whom the university has contracted as its agent to provide a service instead of using university officials. (Examples of this include collection agencies and the National Student Clearinghouse.)
- To comply with judicial order or lawfully issued subpoena (after appropriate notice to the student)
- To appropriate parties in a health or safety emergency, such as Wayne State Public Safety.
- To officials of another school, in which a student seeks or intends to enroll
- In connection with financial aid for which the student has applied or received, if the information is necessary to determine eligibility for aid, the amount of the aid, the conditions for the aid, or to enforce the terms and conditions of the aid
- To certain government officials in connection with state or federally supported education programs
- To accrediting organizations
- To attorneys representing Wayne State University
- To organizations conducting certain studies for or on behalf of the University (with certain conditions)

Releasing Information
Release of Health Records: The student provides the authorization for release of Immunization/Immunity/Health Test Records by signing off on the appropriate form.

Student Records: Students may authorize specific people or entities to have access to their education records by filling out an Authorization to Release Academic Records form and returning it to the Records and Registration Office: [http://reg.wayne.edu/pdf-forms/ferpa.pdf](http://reg.wayne.edu/pdf-forms/ferpa.pdf)

Conflict of Interest - Faculty or Staff Providing Medical Care to Students

Wayne State seeks to avoid actual and perceived conflicts of interest in accordance with the LCME standards: MS-27-A and MS-26. Faculty or staff members who provide any medical care including but not limited to psychiatric, psychological and/or professional counseling to students should take care not to assess student academic performance or take part in the decisions regarding student advancement and/or graduation, and should not attend meetings where student grades are discussed. Students are to report any conflict of interest issues to the Assistant Dean of Student Affairs and Career Development.
IX. MISCELLANEOUS POLICIES

Official Communication

Official School information is communicated through the use of electronic computer messaging sent to each student’s assigned WSUSOM email address (studentname@med.wayne.edu). Students are responsible for checking and reading their emails on a regular basis. Failure to read an official email communication is not a basis for not complying with or being up to date with medical school policies and procedures.

For communication from Wayne State University on emergencies or weather closures students can register for automatic alerts. If you wish to receive emergency alerts from Wayne State via text to your cell, register your cell phone number and select your Broadcast Messaging preferences. Click on the link below for further instructions. http://www.med.wayne.edu/elab/ElabWeb_09/accessidinnewststdnts.pdf

Appropriate Use of Electronic Communication

Listserves for each of the four program years have been created to facilitate official communication between the School administration and faculty and medical students. Guidelines for use of the listserves shall be limited to information relevant to the educational mission of the School. Professionalism is expected. Appropriate communication includes examination logistics, schedule changes, meeting and event information, and questions and answers related to coursework. Inappropriate communication includes personal communication, product endorsements, and messages that insult, malign, or are disrespectful to individuals.

Within the WSUSOM email directory, groups have been created for each class (e.g., Class of 2015). These email groups are to be used for student-to-student communication. The appropriate use of the email groups is expected.

Student Evaluation of the Curriculum

Evaluation of the curriculum by students is considered a School requirement, and is considered both a privilege and a responsibility. The University requires that students evaluate all faculty using a standard question form. All students are required to evaluate each course. School of Medicine course directors, instructors, and administrators are provided summary data which is devoid of any identifying information.

Failure to complete evaluations could result in restricted access to test scores. Repeated failure to complete evaluations is considered unprofessional behavior and may be referred to the Professionalism Committee.

The School recognizes that a student may not attend a live lecture (or listen to the audiotape, or view the streaming video), but it is still expected that the appropriate evaluation items can be
completed on each faculty in a course (e.g., lecture notes). Enrollment in a course entails the obligation to evaluate all teaching faculty as required.

Course Waivers

Course waivers for prior coursework may be granted at the discretion of the Department responsible for the course. Generally course waivers are restricted to the basic science courses. A student must apply in writing to the Assistant Dean for Basic Science Education or the Assistant Dean for Clinical Education, requesting that a particular course be waived. The request should include appropriate documentation (e.g., transcripts, course syllabi, etc.). Once received, the request will be forwarded to the appropriate department. The Department determines the method by which a student is granted a waiver, whether due to the completion of a certain level of training (e.g., having a doctorate in Anatomy), or due to passage of a comprehensive examination.

Students who are granted course waivers are ineligible for either tuition reduction or reimbursement. Students who are waived from courses may be asked to serve as tutors for their peers. Tutors are compensated for their services.

Basic Science Structured Activity Hours

Structured educational activities during Years 1 and 2 are to average less than 30 hours per week and are not to exceed 40 hours in any single week.

Duty Hours and Working Environment

The following was adapted from the ACGME Duty Hours and Working Environment recommendations and apply to WSUSOM medical students doing clinical training at all of our clinical sites.

Duty Hours

1. Duty hours are defined as all educational activities in clerkships and electives during the third and fourth years of the medical school curriculum, including inpatient and outpatient care, administrative activities related to patient care (charting, discharge planning, transfer planning, etc.), and scheduled educational activities such as conferences, rounds, etc. Duty hours do not include reading and preparation time spent away from the duty site.

2. Both students and their supervising attending faculty and residents are reminded that medical students are here in an educational capacity. They are not on the floors, clinics, etc. to provide indispensable patient care. Consequently, there may be times when the educational requirements of the program dictate that patient care time be curtailed; in order to allow students to attend scheduled conferences, lectures and other required educational activities. An example of this would be to provide students the opportunity to sleep at night to allow them to attend scheduled required lectures the next day. It is also
emphasized that the 16 hour continuous duty rule (see below ‘On-Call Activities’) allows for up to 20 continuous hours of duty as long as 16 are limited to patient care, with the other 4 hours only for educational activities. There must be 10 hours between shifts.

3. It is a violation of duty hours for any student to volunteer to exceed the duty hours limits described in this policy.

4. Duty hours must be limited to 80 hours per week, averaged over a four week (one month) clerkship or elective. These 80 hours include in-house call activities.
   a. For example, a student may work 90 hours in one week, 60 hours in the next week, and two 75 hour work weeks during a 4 week (one month) clerkship. The average of 75 hours per week satisfies the above rule.
   b. Two 90 hour work weeks and two 70 hour work weeks also satisfy the above rule.

5. Students must be provided with 1 day off in 7, free from all educational and clinical responsibilities, averaged over a four week (one month) clerkship or elective, inclusive of call.
   a. For the purposes of this Policy, four week periods of a clerkship are treated the same as a one month elective.
   b. For two month clerkships, the rules stated herein apply to each of the four-week (one month) portions of the clerkship.
   c. One day is defined as one continuous 24-hour period free from all clinical, educational and administrative activities.
   d. For example, a student is required to work from Monday through the following Friday 12 days and then gets the entire following weekend is off. The two days off that weekend satisfies the requirement that the student has one day off in 7.

6. Adequate time for rest and personal activities must be provided. This should consist of a 10 hour time period provided between all daily duty periods and after in-house call.

On-Call Activities

The objective of on-call activities is to provide medical students with continuity of care experiences and additional patient care experience that would not be available during a regular work day. On-Call activities that do not meaningfully provide for this objective should be critically evaluated and terminated from the medical school schedule.

1. In-house call is defined as those duty hours beyond the normal work day (7am-6pm) when students are required to be immediately available in their assigned institution.

2. In-house call must occur not more than every third night, averaged over a four-week (one month) clerkship or elective.

3. Continuous on site duty, including in-house call, must not exceed 16 consecutive hours. Students may remain on duty for up to four (4) additional hours after this 16 hour period to participate in didactic or other educational activities.
   a. No new patients may be assigned after 16 hours of continuous duty.
4. If students’ educational programs demand that they be available later in the day (e.g., lectures that begin in the afternoon), they must have at least four hours of uninterrupted sleep during their call shift. The four hour sleep ‘resets’ the 16 hour clock and allows students to stay through the conclusion of these late afternoon didactic or other educational sessions.

Reporting Violations of Duty Hours

Violation of duty hours includes a student being required or coerced to work more hours than allowed in the duty hour policy. Note that a student volunteering to stay longer is also considered a violation of duty hours.

If a student feels they are exceeding the policy, these steps should be followed:

1) Contact the Site Clerkship Director and inform her/him of the duty hour violation. If you prefer to be anonymous in your reporting, you can complete a student mistreatment report at: http://studentaffairs.med.wayne.edu/form-mistreatment.php.

2) If the Site Clerkship Director does not address the duty hour violation, email both the Wayne State University Clerkship Director and the Assistant Dean for Clinical Education.

3) If the duty hour violations continue, contact the Associate Dean for Undergraduate Medical Education.

Responsibility for Monitoring and Enforcing

The primary responsibility for monitoring and enforcing these regulations rests with the Clerkship Directors and Elective Coordinators/Preceptors and reviewed through the Clerkship Directors Committee. These physicians, in turn, are expected to promulgate these Duty Hours to all faculty and resident physicians who supervise and interact with medical students. At each clinical site, the site coordinators in the clerkship have this responsibility on a day-to-day basis. The Assistant Dean for Clinical Education has ultimate responsibility for all aspects of these regulations.

Mandatory Attendance at Clerkship and Clinical Site Orientations

Students are required to attend all clerkship and clinical sites orientations. Any student who does not attend may be prohibited by the Clerkship Director from participating in the clerkship and may have their entire schedule revised by the Assistant Dean for Clinical Education.

Clinical Readiness Course

The Clinical Readiness Course (CRC) was created to ensure that students who have been away from Physical Diagnosis training for more than two months before beginning a Year 3 clerkship
will perform equal to or above the clinical skill level of students who proceeded directly to Year 3 clerkships after finishing Year 2.

A student is required to participate and pass the CRC if the following two conditions are true:
1. If more than two months has elapsed since the end of Year 2 in June and the start of the clerkship (e.g., cannot begin a Year 3 clerkship by the September rotation)
   **AND**
2. If he/she scored below the mean on the Physical Diagnosis practical examination

For Condition #1, the amount of time away from Year 2/Physical Diagnosis, would apply to the following situations:
1. A student on a leave of more than two months duration after completing Year 2
2. A student who has been given extra Step 1 preparation time and who is unable to begin a Year 3 clerkship by the September rotation
3. A student who successfully completed Physical Diagnosis in a prior year but who is repeating Year 2 coursework

Further, any MD/PhD student returning from the PhD portion of training is required to complete the CRC prior to beginning a Year 3 clerkship, regardless of how they did on the Physical Diagnosis practical.

**Snow Day Policy**

**Year 1-2 Students**

In the event of a University Closure because of a snow day Year 1 and 2 students observe all snow day closures posted by the University. If the University is closed, Year 1 and 2 students do not come to school.

**Year 3-4 Students**

In the event of a University Closure because of a snow day Year 3 and 4 students observe all snow day closures posted by the University. If the University is closed, Year 3 and 4 students do not report to their clinical site.

**Scott Hall Fitness Room Guidelines**

1. Observe all posted signs and equipment warnings.
2. Safe and proper use of equipment is required at all times.
3. Actions that threaten the safety and well-being of yourself or others will not be tolerated.
4. Shirt and athletic shoes must be worn at all times. For health and safety reasons sandals, spiked shoes, work boots, flip flop shoes, belts, jeans, clothing with rivets and wallet chains are not permitted.
5. Neither Wayne State University (WSU) nor the School of Medicine (SOM) is responsible for personal belongings lost in or stolen from the fitness room.

6. Use of the Fitness Room is restricted to WSU SOM students who have completed the WSU SOM waiver form on file in the Office of Medical Education.

7. Please report any equipment problems to: Scott Nelsen @ 7-1431 or snelsen@med.wayne.edu.

8. Absolutely no food is allowed in the Fitness Room.

**International Travel**

The administration of the Wayne State University School of Medicine (WSUSOM) has the ultimate decision-making authority regarding all international clinical experiences. Participation in international clinical experiences, including international electives and student organization sponsored trips, require the approval of the Director of Global Health and Education. Refer to Student Affairs website for further details about international clinical experiences.

[http://studentaffairs.med.wayne.edu/international.php](http://studentaffairs.med.wayne.edu/international.php)

**Prohibition from Participation in International Clinical Experiences.** Students who are on academic probation, on leaves of absence, or in special matriculation cannot participate in school-approved clinical experiences.

**Professionalism.** All students on school-approved international travel are expected to adhere to the Professionalism standards as outlined elsewhere in the Policies and Procedures manual. In addition, students are expected to adhere to all local laws and customs when travelling in foreign countries.

The WSUSOM takes seriously the health, safety and security of all students. The Office of Student Affairs and the Director of Global Health and Education monitor health, safety and security issues of students traveling abroad utilizing the U.S. Department of State’s travel alerts and warnings, and the Center for Disease Prevention and Control’s (CDC) travel health precautions and travel health warnings.

With the exception of the WSUSOM program in Israel and the West Bank and approved travel to Haiti, **international experiences in locations under a Travel Warning or a Travel Health Warning will be suspended for the duration of the warning.** This includes the possibility that an international experience in progress would be cancelled. Decisions regarding Travel Alerts and Travel Health Precautions will be made on a case by case basis, in consultation with our foreign sponsors, the U.S. Department of State, the CDC, and appropriate WSUSOM administrators.
Co-Curricular Credit. Co-Curricular credit for international clinical experiences for Years 1 and 2 students will be evaluated on a case by case basis in collaboration with the Director of the Co-Curricular program.

Important Wayne State University Policies

All students should be aware of the following university policies, located at the websites listed below.

Student Code of Conduct (formerly Student Due Process)

http://doso.wayne.edu/student-conduct/PDF-Documents/Student%20Code%20of%20Conduct%20Brochure.pdf

Computing Policies

http://computing.wayne.edu/about/policies.php

Sexual Assault

http://fisopsprocs.wayne.edu/policy/01-5.htm

 Discrimination and Harassment

http://www.deo.wayne.edu/pdfs/discrimination_and_complaint_process_final_old.pdf