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I. SCHOOL OF MEDICINE INFORMATION

At the time of this publication, the medical school curriculum is in the midst of reform and processes, procedures, and policies are under review to ensure congruence in the medical education program. Necessary revisions will be communicated with all parties via official School of Medicine (SOM) channels. The SOM continuous programmatic and curricular evaluation system, under the direction of the Curriculum Committee, may recommend and implement changes prior to the next publication cycle when, in the interest of accreditation compliance and student success, change is deemed necessary.

A. Brief History

In April 1959 Texas Governor Price Daniel signed House Bill 9 to establish the South Texas Medical School, the first component of the institution that would soon become the UT Health Science Center at San Antonio. In July 1968 the medical school, now known as The UT School of Medicine at San Antonio (SOM), and the Bexar County Teaching Hospital, now known as University Hospital, were dedicated. Thirty-three medical students graduated with the Doctor of Medicine degree in the first medical school commencement in June 1970. In 1998 the Texas State Legislature authorized the creation the Regional Academic Health Center (RAHC) in the Lower Rio Grande Valley, to be administered by the SOM, and in June 2002 the RAHC opened its doors to train medical students and residents. Today there are nearly 900 medical students receiving their education at the SOM.

B. Mission Statement

The mission of the UT School of Medicine at San Antonio is to provide responsive and comprehensive education, research and service of the highest quality in order to meet the health-related needs of the citizens of Texas. In all aspects of fulfilling this mission, the School of Medicine is committed to fostering the broadest diversity and inclusion that ensures successful achievement of the institutional priorities to:

• Cultivate a pervasive, adaptive and respectful environment promoting diversity, inclusion, equity, professionalism, humanism and opportunity
• Provide exemplary medical education and training to a diverse body of health career professionals at all levels while fostering a commitment to scholarship, leadership and life-long learning across the educational continuum
• Build and sustain recognized leadership, and advance scholarship excellence across the biomedical and health-related research spectrum
• Deliver exemplary and compassionate health care to enhance every patient's quality of life
• Serve as a responsive resource to address community health needs whether local or global
• Attain health equity for the diverse patient population of South Texas

C. **Accreditation**

The UT School of Medicine at San Antonio is fully accredited by the Liaison Committee on Medical Education (LCME), the nationally recognized body for the accreditation of medical education programs leading to the Doctor of Medicine degree in the United States.

D. **Confidentiality**

The SOM and HSC will, to the extent possible, maintain the confidentiality of information received as a result of the charges and investigation.

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II. STUDENT DIVERSITY

The UT School of Medicine at San Antonio (SOM) offers programs that create and sustain a spirit of diversity and inclusion that will further shape undergraduate medical education by fostering an environment of cultural competency, sensitivity and awareness. All student diversity efforts are fundamentally and comprehensively rooted in intellectual vitality and cross-cultural understanding that allow our student physicians to embrace and celebrate unique perspectives and life experiences that enrich students, faculty and staff in the SOM. Attention to cultural competence and cultural sensitivity throughout medical education both in and out of the classroom has the potential to alleviate or at least ameliorate systemic disparities in access to and quality of health care. All members of the SOM uphold the principles of the SOM Diversity Policy below.

A. SOM Diversity Policy

Based on the growing body of evidence that inclusion of all factors that expand diversity in perspective and action adds to the richness of an academic community and is essential to building and sustaining leadership in academic medicine, and eminence in advancing health and health care, the SOM has established and strives to uphold its Diversity Policy, as follows:

To demonstrate its commitment to diversity and inclusion, it is the SOM policy to...

- Cultivate and ingrain throughout the academic environment a culture that values and respects diversity, thereby demonstrating the profound belief that diversity and inclusion add unique, enduring and motivating value to the pursuit and achievement of each part of the SOM mission

- Support the appointment of Dean(s) and Office(s) for Diversity to address faculty and student diversity and inclusion across all employee and trainee needs in conjunction with institutional leadership and policy guidance

- Support a Diversity Committee, representing faculty, staff, students and trainees; advisory to the Dean of the SOM and the Medical Faculty Assembly

- Maintain representation to the AAMC Group on Diversity and Inclusion, AAMC Group on Faculty Affairs, the AAMC Group on Women in Medicine and Science, and work with the representation from related AAMC entities

- Employ continuous quality improvement methods to assess SOM diversity and inclusion needs over time in order to insure delineation of those specific group whose members the institution seeks to enroll in its student body and trainee classes as well as employ among its faculty and staff because those
specific groups are the source of 'added value' for all participants in our SOM learning environments. Devise and employ a responsive diversity action plan, including feasibility and anticipated outcomes.

- Uphold all equity policies and practices for faculty recruitment and non-discrimination, and employ best practices for insuring broad outreach and conducting inclusive searches. Follow the standards detailed in the institution's Resource Guide for Faculty and Executive Committee Recruitment.

- Uphold all equity policies and practices for faculty retention, professional development, advancement, and transitions across the faculty career 'life-span,' incorporating best practices to provide effective mentoring and a respectful, inclusive and supportive environment.

- Establish valid and reliable metrics to gauge diversity accomplishments; ensure accuracy of required reports and other data management.

- Uphold all UTHSCSA EEO/AA and Human Resources' policies and practices for non-discrimination in recruitment and employment of any administrative and profession employee, classified staff and other employees, as well as trainees.

B. SOM Diversity Definitions

Through extensive collaboration and deliberation, the Group on Diversity and Inclusion of the AAMC established the below-listed definitions of Diversity, Inclusion and Health Equity, which have become operable formal definitions at our SOM. In regard to our own faculty, as well as for students and staff, the SOM values diversity that entails mindfulness across the spectrum of human differences, yet is specific to those characteristics that will best serve the needs of South Texas when accomplishing the SOM mission of excellence in teaching, research, service and community engagement.

Diversity

- Diversity as a core value embodies inclusiveness, mutual respect, and multiple perspectives and serves as a catalyst for change resulting in health equity. In this context, we are mindful of all aspects of human differences such as socioeconomic status, race, ethnicity, language, nationality, sex, gender identity, sexual orientation, religion, geography, disability and age.
School of Medicine

Inclusion
• Inclusion is a core element for successfully achieving diversity. Inclusion is achieved by nurturing the climate and culture of the institution through professional development, education, policy, and practice. The objective is creating a climate that fosters belonging, respect, and value for all and encourages engagement and connection throughout the institution and community.

Health Equity
• Health equity is when everyone has the opportunity to attain his/her full health potential and no one is disadvantaged from achieving this potential because of his/her social position or other socially determined circumstance.
III. DOCTOR OF MEDICINE (M.D.) ADMISSIONS REQUIREMENTS

Information about specific admission requirements is detailed online under Admissions at the UT School of Medicine at San Antonio website. Applicants must have at least 90 semester hour credits from a United States or Canadian college or university with no grade lower than a C in required course work (see http://SOM.uthscsa.edu/Admissions/prerequisites.asp). Applicants must take the Medical College Admissions Test (MCAT) no later than the first week of September the year preceding anticipated matriculation. Web-based applications are available through the Texas Medical and Dental Schools Application Service (TMDSAS) in Austin (http://www.utsystem.edu/tmdsas). Starting with the entering class of 2014, applicants will be able to apply to both the San Antonio Clinical Education Campus and the South Texas Clinical Education Campus through the TMDSAS website. MCAT scores should be forwarded no later than October 15 of the year preceding matriculation. All MCAT scores must be reported to the TMDSAS through the AAMC. MCAT scores are not automatically forwarded to TMDSAS. Applicants must release their MCAT scores to TMDSAS as soon as they are known to the applicant. Scores from later administrations of the MCAT may be considered for purposes of selecting students from the alternate pool.

Acceptance Considerations

The Admissions Committee evaluates each candidate's application to make an assessment of the individual's academic background, performance on the MCAT, the recommendation of the premedical advisor, and the nonacademic achievements. Preparation for medical school as reflected in clinical experiences and demonstration of integrity, maturity, motivation, judgment, and resourcefulness are also evaluated. Further evaluation of the most promising candidates is made by means of personal interviews, invitations for which are issued by the Admissions Committee. Only applicants who are permanent U.S. residents or American citizens will be considered for interview and acceptance. The same criteria for evaluation are applied to all candidates. Applicants are encouraged to read the Factors Considered for Applicant Interview and Acceptance at http://SOM.uthscsa.edu/admissions/index.asp. Although certain disabilities or combination of disabilities might prevent a candidate from meeting required technical standards, this institution is committed to avoiding discrimination against an otherwise qualified individual with disabilities (see Essential Abilities for Completion of the Medical Curriculum or http://SOM.uthscsa.edu/Admissions/essentialabilities.asp). The UT School of Medicine at San Antonio will announce its initial acceptances on November 15. Acceptances will continue on a rolling basis until December 31. Those interviewed applicants not accepted may be offered positions in the entering class through the TMDSAS medical school match, the results of which are available on February 1. Candidates whose applications are rejected by the Admissions Committee with or
without personal interviews shall be notified as soon as possible after the committee’s action. An applicant receiving an acceptance of admission will be requested to file a letter of intent to enroll within two weeks of receipt of acceptance. The acceptance is contingent upon clearance through a criminal background check (see Student Background Check Policy) and satisfying all coursework prerequisites.

Because some of the medical schools in Texas begin their academic year earlier than September, all LCME-accredited medical schools in Texas have agreed not to offer acceptances to candidates already enrolled at another medical school in the state after July 1.

A. Essential Abilities for Completion of the Medical Curriculum

Essential abilities are academic performance requirements that refer to those physical, cognitive, and behavioral abilities required for satisfactory completion of all aspects of the medical curriculum and the development of personal attributes required by the student at graduation.

The essential abilities required by the curriculum are in the following areas: intellectual (conceptual, integrative, and quantitative abilities for problem solving and diagnosis), behavioral and social, communication, motor, and sensory. These essential abilities are represented by the SOM’s three educational competencies: altruism, knowledge, and skills.

In addition, the medical student must demonstrate ethical standards and a professional demeanor in dealing with peers, faculty, staff, and patients.

i. Intellectual Abilities (Knowledge)

The medical student must be able to comprehend and learn factual knowledge from readings and didactic presentations, gather information independently, analyze and synthesize learned material, and apply information to clinical situations.

ii. Behavioral, Social, and Professional Abilities (Altruism)

The medical student must possess the emotional maturity and stability to function effectively under the stress that is inherent in medicine and to adapt to circumstances that are unpredictable or that change rapidly. He or she must exhibit compassion, empathy, altruism, integrity, responsibility, and tolerance, as well as demonstrate the ability to exercise the requisite judgment in the practice of medicine.
iii. **Communication Skills (Skills)**

The medical student must be able to communicate effectively with patients orally and in writing, including gathering information appropriately; explaining medical information in a patient-centered manner; listening effectively; recognizing, acknowledging, and responding to emotions; and exhibiting sensitivity to social and cultural differences. He or she must be able to communicate effectively and work cooperatively with all other health care team members.

iv. **Motor Skills (Skills)**

The medical student must have sufficient physical dexterity to master technical and procedural aspects of patient care. He or she must have sufficient strength to perform the essential duties and must have adequate physical stamina and energy to carry out taxing duties over long hours.

v. **Sensory Abilities (Skills)**

The medical student should have sufficient sensory abilities of sight, hearing, smell, and touch in order to obtain a medical history, perform a physical examination, and to diagnose and deliver patient care.

B. **Facilitated Acceptance to Medical Education (FAME) Program**

As a result of the UT System Transformation in Medical Education (TIME) initiative, the UT at San Antonio (UTSA) and UT School of Medicine at San Antonio (SOM), have partnered to create the Facilitated Acceptance to Medical Education (FAME) Program. The FAME Program is an educationally innovative dual degree (B.S./M.D.) program designed to train and graduate primary care physicians. To meet degree requirements set for all college graduates in Texas, core courses have been interwoven into a collaborative seven-year curriculum. This shared project uses traditional lectures, small group sessions, team taught courses, and innovative seminars structured on disease-related experiences. The FAME Program recruits and admits highly qualified students. These students benefit from an accelerated degree program, an innovative curriculum, early immersion into medical education and professional identity formation, and a decreased overall student debt. The FAME Program will play a positive role in helping address the healthcare needs of Texas.

To apply for the FAME Program, student will apply to UTSA online at applytexas.org and complete the UTSA and FAME application process. Applications for the FAME Program will be accepted August 15 – December 1, and invited interviews will be held in January and February of each academic year.
Once accepted in the FAME program the student must:

- Achieve a minimum overall GPA of 3.5 and a minimum science GPA of 3.5 in pre-determined course work
- Complete a minimum of 12 hours per semester at UTSA
- Complete a minimum of 72 hours within 3 years at UTSA
- Meet with his/her FAME Program coordinator every semester for academic and career advising
- Take the Medical College Admissions Test (MCAT) at the program-designated time during the third year at UTSA. Students scoring less than a 10 on Biological and Biochemical Foundations of Living Systems will be required to complete additional biology coursework which may extend time on the undergraduate campus.
- Demonstrate satisfactory performance on all UT System TIME initiative competencies in the areas of:
  - Communication Skills and Collaboration
  - Professionalism
  - Medical Knowledge and Scholarship
  - Patient Care
  - Practice-based Learning and Improvement
  - Systems-based Practice and Management

Students who fulfill all program requirements will be guaranteed admission to the SOM. Upon successful completion of the first year of the SOM curriculum with minimum course grades of “C,” a Bachelor of Science in Biology from UTSA will be awarded. Upon successful completion of SOM curriculum, a Doctor of Medicine (M.D.) degree will be awarded.

C. Dual Degree Programs

Dual degree programs of study provide a mechanism for a medical student to obtain a Master in Public Health (M.P.H) or a Doctor of Philosophy (Ph.D.) degree in addition to a Doctor of Medicine (M.D.) degree at The UT Health Science Center at San Antonio. The purpose of these programs is to offer students the opportunity to become trained as clinical scientists who have not only depth of knowledge in clinical medicine but also experience in research planning and execution.
i. **M.D./Ph.D. Program**

The goals of the M.D./Ph.D. Program are:

- to prepare physician-scientists to become accomplished health care providers and investigators with problem-solving knowledge and skills
- to train physician-scientists in the conduct of clinical and translational research in culturally diverse settings
- to develop future leaders in academic health care and biomedical research

To apply for the M.D./Ph.D. program, applicants must use the American Medical College Application Service (AMCAS) website. Applicants who seek the M.D. program at UT School of Medicine at San Antonio (SOM) must use the TMDSAS application system. The deadlines for these applications vary.

The M.D./Ph.D. Program is seven to eight years in length. Students usually begin with two years of the curriculum in the SOM. After successful completion of the USMLE Step 1, they enter a three to four year Ph.D. program in the Graduate School of Biomedical Sciences (GSBS), following which they return to the SOM for two years of clinical rotations. With the guidance and approval of the M.D./Ph.D. Program Director and M.D./Ph.D. Program Advisory Committee, students select laboratory rotations, graduate program affiliation in one of many tracks, and Supervising Professors from a list of distinguished graduate faculty throughout the institution. Enrichment activities include a monthly “Bench-to-Bedside” course, and a 6-week clinical refresher course to provide smooth transition from graduate school into the remaining clinical years. Opportunities exist for student research during the fourth year of medical school. With completion of this program, M.D./Ph.D. graduates are well prepared for careers as dual-degree physician-scientists.

The GSBS provides oversight for M.D./Ph.D. students via the Committees on Graduate Students (COGS) and the Graduate Faculty Council. The COGS is responsible for supervising the didactic curriculum, and the academic and research progress of M.D./Ph.D. students enrolled in their respective tracks. COGS is responsible for assuring that meetings of the student’s dissertation research supervising committee are held to monitor student progress, for approval of the dissertation proposal, and for final approval of the written dissertation and oral defense.

An independent M.D./Ph.D. Program Promotions Board reviews the progress of M.D./Ph.D. students every 6 months throughout medical and graduate school enrollment. Progress is assessed on the basis of academic performance, USMLE Step 1 and 2 scores, research rotation reports, research and scholarly activities, evaluations from the Supervising Professor (during Ph.D. portion), and student self-assessments (during Ph.D. portion).
The M.D./Ph.D. Program expects students who are pursuing the dual degree to maintain standards of academic excellence, to progress in a timely fashion toward both the M.D. and Ph.D. degrees, and to maintain professionalism. Students will be primarily subject to the academic guidelines of the medical school or graduate school in which they are primarily engaged at each stage of the M.D./Ph.D. Program. However, they will be subject to additional requirements as specified by the M.D./Ph.D. Program in order to remain members of that program.

Students in the M.D./Ph.D. Program are subject to satisfactory achievement of a series of milestones and criteria established by the M.D/Ph.D. Program Advisory Committee. Failure to meet or achieve the established standards will result in denial of advancement and dismissal from the M.D./Ph.D. Program. A student's academic standing with respect to either the medical school or the graduate school is administered through the appropriate dean’s office. M.D./Ph.D. students shall have the right to appeal a decision of dismissal from the program. The appeal will be heard by the M.D./Ph.D. Program Advisory Committee. Solely on procedural concerns can a student appeal to a higher institutional administration.

ii. **M.D./M.P.H. Program**

The M.D./M.P.H. Program prepares physicians to treat individuals and populations via training in biostatistics, epidemiology, behavioral science, public policy, and environmental health. This program allows for students to accomplish the M.D. and the M.P.H. in four years; however, students may decide to take 5 years to complete both degrees. Candidates must first be accepted to the SOM and then apply to the School of Public Health at the UT Health Science Center-Houston. If accepted into the dual degree program, students will begin coursework for the M.P.H. with online courses in the summer before starting medical school. The M.P.H. requires completion of 46 credit hours, some of which will be shared with the SOM credit hours.

D. **M.D. with Distinction Degrees**

i. **M.D. Degree with Distinction in Research**

The M.D. with Distinction in Research Program provides medical students with an opportunity to enrich their medical school career through sustained work in basic, clinical, translational or social sciences. This program exposes students to life as a physician-scientist. The distinction helps students shape their career goals by building an academic track record viewed favorably by residency selection committees. Students must apply for the M.D. with Distinction in Research Program before the start of the third year. M.D./Ph.D. students are not eligible to apply. Under the supervision of their research mentor, students engage in a research project.
culminating in a manuscript suitable for submission to a peer-reviewed medical journal. The application includes a project description, a timeline for project completion and a mentoring plan by the faculty mentor. Students commit a minimum of four months (640 hours) during medical school to the program. Students must present a poster at an annual UTHSCSA Student Research Day. Additional requirements for completion of the program include maintaining a research log and maintaining a minimum 3.25 grade point average through medical school. If the M.D. with Distinction in Research Committee deems the submission appropriate, and the student has completed all administrative requirements, he/she will be awarded the M.D. degree with Distinction in Research.

ii. **M.D. Degree with Distinction in Medical Education**

The M.D. with Distinction in Medical Education Program provides medical students with an opportunity to spend part of their medical school career participating in activities focused on different components of teaching and educational research. The application for the M.D. with Distinction in Medical Education Program must be submitted by January 15th of the second year. The application includes a project description, a timeline for project completion and a mentoring plan by the faculty mentor. Requirements for completion of the program include working as a teaching assistant for a current course or preparation course, giving learning sessions to assess teaching style, presenting the project to the M.D. with Distinction in Medical Education Advisory Committee and submitting the project for publication to a medical educational journal or for presentation at a medical educational conference. An additional requirement includes maintaining a minimum 3.25 grade point average throughout the program. If the M.D. with Distinction in Medical Education Advisory Committee deems the project submission appropriate, and the student has completed all administrative requirements, he/she will be awarded the M.D. degree with Distinction in Medical Education.
IV. DOCTOR OF MEDICINE (M.D.) CURRICULUM

The acronym CIRCLE (Curricular Integration, Researchers, Clinicians, Leaders, Educators) represents the integrated four-year medical school education program which is described briefly below.

A. Preclinical Curriculum (“Years 1-2”)

The foundational 20 month curriculum is taught in ten sequential learning modules (nine organ systems) and two longitudinal modules (language of medicine and clinical skills training). Within each module there is progression of knowledge in a systematic fashion as follows: normal structure and function, pathogenesis and pathophysiology of the condition or disorder, clinical manifestations of the condition or disorder, pharmacotherapeutic interventions for the condition or disorder, clinical and translational research and evidence-based medicine approach for the condition or disorder, epidemiology or prevention of the condition or disorder, and interpretation of diagnostic tests. Each module has a weekly thematic content which is synthesized via a small group interactive patient case.

i. Learning Modules:

1. Medicine, Behavior, and Society
2. Molecules to Medicine
3. Attack and Defense
4. Circulation
5. Respiratory Health
6. Renal & Male Reproductive Disorders
7. Mind, Brain, and Behavior
8. Endocrine/Reproductive
9. Digestive Health and Nutrition
10. Musculoskeletal and Dermatology

ii. Longitudinal Modules:

1. Clinical Skills
2. Language of Medicine
B. Clinical Curriculum (“Year 3”)

The third year curriculum is "guided by the contemporary content from and the clinical experiences associated with the disciplines and related subspecialties that have traditionally been titled family medicine, internal medicine, obstetrics and gynecology, pediatrics, psychiatry, and surgery" (Liaison Committee on Medical Education Standards 2011). In the 2013-14 academic year, students will rotate in 6 week blocks for family medicine, obstetrics and gynecology, pediatrics, psychiatry and in 10 week blocks for internal medicine and surgery, assuming increasing patient care responsibility commensurate with achievement of specific milestones and competencies defined by the Curriculum Committee. The introduction of third year elective experiences will allow students to explore other specialties and subspecialties or engage in research before fourth year while still consolidating core knowledge and skills. Clerkships can be completed in San Antonio, the Regional Academic Health Center, McAllen and/or Edinburgh depending on the medical student's selection.

Beginning with the 2014-15 academic year, students will rotate in 6-week blocks for family medicine, obstetrics and gynecology, pediatrics, psychiatry and in 8-week blocks for internal medicine and surgery. There will be the addition of 4 week
blocks of core clerkships in emergency medicine and neurology. A longitudinal educational experience will be weaved through the entire academic year to address curricular items that are common to all clerkships. The longitudinal block of time will provide a venue for introduction of interprofessional experiences with other health care professionals on campus, further integration of basic and clinical sciences, cultural competencies, patient safety and quality improvement, health economics and policy, and incorporation of cutting edge technology such as basics of ultrasonography. Shortened experiences in some mandatory core clerkships will allow flexibility in the schedule for students to customize an educational plan to suit their long term career goals.

**Clinical Curriculum (“Year 3”) in 2013-2014**

**YEAR 3 Path 1**

<table>
<thead>
<tr>
<th>July</th>
<th>May</th>
</tr>
</thead>
<tbody>
<tr>
<td>10 Weeks</td>
<td>10 Weeks</td>
</tr>
<tr>
<td>Internal Medicine or Surgery</td>
<td>Internal Medicine or Surgery</td>
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</table>

**YEAR 3 Path 2**

<table>
<thead>
<tr>
<th>July</th>
<th>May</th>
</tr>
</thead>
<tbody>
<tr>
<td>6 Weeks</td>
<td>6 Weeks</td>
</tr>
<tr>
<td>Ob/Gyn, Psychiatry, Pediatrics, or Family Medicine</td>
<td>Ob/Gyn, Psychiatry, Pediatrics, or Family Medicine</td>
</tr>
</tbody>
</table>

**C. Clinical Curriculum (“Year 4”)**

The fourth year curriculum exposes students to additional medical specializations and/or allows the student to return to a core specialty with advanced duties and responsibilities. The schedule includes 8 weeks of selectives (inpatient and ambulatory care rotations), 18 weeks of electives, and 5 weeks of didactics. During the year, ample time is allotted for students to travel or residency interviews.
V. DOCTOR OF MEDICINE (M.D.) SAMPLE PLANS OF STUDY

The tables below represent courses the students will take in their pre-clinical and clinical years 2013-14.

### YEAR 1

<table>
<thead>
<tr>
<th>Course</th>
<th>Units</th>
</tr>
</thead>
<tbody>
<tr>
<td>CIRC 5001 Medicine, Behavior &amp; Society</td>
<td>0 (Longitudinal)</td>
</tr>
<tr>
<td>CIRC 5003 Language of Medicine</td>
<td>5.4</td>
</tr>
<tr>
<td>CIRC 5005 Clinical Skills</td>
<td>0 (Longitudinal)</td>
</tr>
<tr>
<td>CIRC 5007 Molecules to Medicine</td>
<td>9.0</td>
</tr>
<tr>
<td>CIRC 5009 Attack &amp; Defense</td>
<td>9.0</td>
</tr>
<tr>
<td>CIRC 5011 Circulation</td>
<td>5.0</td>
</tr>
<tr>
<td>CIRC 5013 Respiratory Health</td>
<td>4.0</td>
</tr>
<tr>
<td>CIRC 5015 Renal &amp; Male Reproductive</td>
<td>5.0</td>
</tr>
<tr>
<td>CIRC 5017 Hematology</td>
<td>3.0</td>
</tr>
<tr>
<td><strong>Total Units</strong></td>
<td><strong>40.4</strong></td>
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### YEAR 2

<table>
<thead>
<tr>
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<tbody>
<tr>
<td>CIRC 5001 Medicine, Behavior &amp; Society</td>
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<tr>
<td>CIRC 5005 Clinical Skills</td>
<td>14.75 (Continued from Year 1)</td>
</tr>
<tr>
<td>CIRC 6007 Mind, Brain &amp; Behavior</td>
<td>9.0</td>
</tr>
<tr>
<td>CIRC 6009 Endocrine, Female Reproductive</td>
<td>7.0</td>
</tr>
<tr>
<td>CIRC 6011 Digestive Health &amp; Nutrition</td>
<td>7.0</td>
</tr>
<tr>
<td>CIRC 6013 Musculoskeletal &amp; Dermatology</td>
<td>7.5</td>
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<tr>
<td><strong>Total Units</strong></td>
<td><strong>51.25</strong></td>
</tr>
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### YEAR 3

<table>
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<tr>
<th>Course</th>
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<td>INTD 3030 Clinical Foundations</td>
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<tr>
<td>SURG 3005 Surgery Clerkship</td>
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<tr>
<td>MEDI 3105 Medicine Clerkship</td>
<td>14.0</td>
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<tr>
<td>OBGY 3005 Obstetrics/Gynecology Clerkship</td>
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<td>PSYC 3005 Psychiatry Clerkship</td>
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<td>PEDI 3005 Pediatrics Clerkship</td>
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<td>FAPR 3005 Family Medicine Clerkship</td>
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<td>1 Four-Week Elective</td>
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<tr>
<td><strong>Total Units</strong></td>
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</tr>
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<tr>
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<td>1 Four-Week Selective (Inpatient Service)</td>
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<td></td>
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<tr>
<td>1 Four-Week Selective (Ambulatory Care)</td>
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<td>18 Weeks of Electives</td>
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<tr>
<td><strong>Total Units</strong></td>
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VI. DOCTOR OF MEDICINE (M.D.) POLICIES AND REGULATIONS

A. Medical Student Background Check Policy

i. Applicability

This policy applies to applicants who have received an offer of admission to or current students not checked on admission and anticipating clinical assignments. Visiting students assigned placements in an affiliated clinical facility are also subject to the policy.

ii. Policy

Applicants who have received an offer of admission must submit to and satisfactorily complete a background check review as a condition to matriculation to the UT School of Medicine at San Antonio (SOM). An offer of admission will not be final until the completion of the criminal background check(s) with results deemed satisfactory. Admission may be denied or rescinded based on a review of the criminal background check.

Additionally, students who are currently enrolled and who do not have a valid criminal background check must submit to, and satisfactorily complete, a background check review as a condition to enrolling or participating in education experiences at affiliated clinical sites as required. Students who return from a leave of absence may also require a criminal background check. Students who refuse to submit to a criminal background check or do not pass the criminal background check review may be dismissed from the program.

iii. Rationale

a. Health care providers are entrusted with the health, safety, and welfare of patients, have access to controlled substances and confidential information, and operate in settings that require the exercise of good judgment and ethical behavior. Thus, an assessment of an applicant’s or current student’s suitability to function in these settings is imperative to promote the highest level of integrity in health care services.

b. Clinical facilities are increasingly required by accreditation agencies, such as the Joint Commission of Healthcare Organization, to conduct background checks for security purposes on individuals who provide services within the facility and especially those who...
supervise care and render treatment. To facilitate this requirement, educational institutions have agreed to conduct these background checks for students and faculty.

c. Clinical rotations are essential components of the medical school curriculum. Students who cannot participate in clinical rotations due to criminal or other adverse activities that are revealed in a criminal background check are unable to fulfill the requirements of medical school. Additionally, many health-care licensing agencies require individuals to pass a criminal background check as a condition of licensure or employment. Therefore, it is important to resolve these issues prior to a commitment of resources by the applicant, the current student or the SOM.

d. The SOM is obligated to meet the contractual requirements contained in affiliation agreements between the SOM and the various clinical facilities.

iv. Background Check Report

a. The SOM will designate approved company(ies) to conduct the criminal background checks and issue reports directly to the SOM. Results from a company other than those designated by the SOM will not be accepted. Applicants who have received an offer of admission and current students must contact a designated company and comply with its instructions in authorizing and obtaining a criminal background check. Applicants who have received an offer of admission and current students are responsible for payment of any fees charged by a designated company to provide the criminal background check.

b. Criminal background checks include the following and cover at least the past seven years:

1. Criminal history search, including convictions, deferred adjudications or judgments, and pending criminal charges involving felonies, Class A, Class B, and Class C violations
2. Social Security Number verification
3. Violent Sexual Offender and Predator Registry search
5. General Services Administration (GSA) List of Parties Excluded from Federal Programs
6. U.S. Treasury Office of Foreign Assets Control (OFAC), List of Specially Designated Nationals (SDN)
7. Applicable State Exclusion List

c. Applicants who have received an offer of admission and current students have the right to review the information reported by a designated company for accuracy and completeness and to request that a designated company verify that the background information is correct. Prior to making a final determination that will adversely affect the applicant or current student, the SOM will provide the applicant or student a copy of or access to the background check report in order to question the accuracy of the report. The designated company is not involved in any decisions made by the SOM.

v. Procedure

Applicants

a. Applicants must complete the required criminal background check review following the offer of admission but prior to matriculation.

b. The criminal background check report will be submitted to and reviewed by the Background Check Review Committee. The Background Check Review Committee includes the Dean for Admissions, the Dean for Student Affairs and the Vice Dean for Undergraduate Medical Education. If the report contains negative findings, the committee may request that the applicant submit additional information related to the negative finding, such as a written explanation, court documents, and/or police reports. The committee will review all available relevant information and determine appropriate action.

c. The committee has authority to refuse the admission of the applicant to the SOM. The committee decisions are final and may not be appealed.

Current Students

a. Students who did not have a valid criminal background check at the time of their admission into the medical education program must complete the criminal background check review prior to commencement of an assignment to a clinical facility. Students who return from a leave of absence may require a criminal background check. It is the obligation of current students to report all non-traffic related legal violations to the Office for Student Affairs within 30 days; these students may also require satisfactory completion of a criminal background check.
School of Medicine

b. Criminal background check reports will be submitted to the Background Check Review Committee for its review. If the report contains negative findings, the committee may request that the student submit additional information related to the negative finding, such as a written explanation, court documents and/or police reports. The Background Check Review Committee will review all available relevant information and make decisions related to the student's participation in clinical activities.

c. If the Background Check Review Committee has sufficient information from the background check to decide adverse action, the student may appeal to the Student Promotions Committee (SPC).

vi. Committee Review Standards

a. In reviewing the background check reports and any submitted information, the Background Check Review Committee may consider the following factors in making its determinations: the nature and seriousness of the offense or event, the circumstances surrounding the offense or event, the relationship between the duties to be performed as part of the medical education program and the committed offense, the age of the person when the offense or event occurred, whether the offense or event was an isolated or repeated incident, the length of time that has passed since the offense or event, past employment and history of academic or disciplinary misconduct, evidence of successful rehabilitation, and the accuracy of the information provided by the applicant who has received an offer of admission or student in the application materials, disclosure forms, or other materials. The committee will bear in mind both the safety interests of the patient and the workplace, as well as the educational interest of the student. In reviewing background checks and supplementary information, advice may be obtained from UT Health Science Center of San Antonio (HSC) or UT System counsel, HSC police, or other appropriate advisors.

vii. Confidentiality and Record Keeping

a. Criminal background check reports and other submitted information are confidential and may only be reviewed by HSC officials and affiliated clinical facilities in accordance with the Family Educational Records and Privacy Act (FERPA).
School of Medicine

b. Students: Criminal background check reports and other submitted information will be maintained in the Office for Student Affairs in accordance with the HSC’s record retention policy for student records.

c. Applicants Denied Matriculation: Criminal background check reports and other submitted information of applicants denied matriculation into the program will be maintained in accordance with the HSC’s record retention policy.

viii. Other Provisions

a. The SOM shall inform the student who has negative findings in his/her criminal background check report. The SOM’s decision to allow the student to enroll in the medical education program is not a guarantee that every clinical facility will permit the student to participate at its clinical sites, or that any state will accept the individual as a candidate for registration, permit, or licensure. An assigned clinical facility may require a repeat criminal background check. The Office for Student Affairs will attempt to prevent unnecessary repeated criminal background checks at clinical sites. The student must recognize the potential for an inability to complete medical educational degree requirements if the student is denied participation at a clinical facility fulfilling an essential irreplaceable clinical experience. Clinical affiliates may adopt more stringent requirements to which the rotating student must comply.

b. The SOM may require repeat criminal background checks for continuously enrolled students. A student who has a break in enrollment such as a leave of absence may be required to complete a re-entry criminal background check.

c. Falsification of information, including omission of relevant information, may result in denial of admission or dismissal from the medical education program.

d. Criminal activity that occurs while a student is in attendance at the SOM may result in disciplinary action, including dismissal, and will be addressed through the charge of the SPC.

ix. Policy for Sharing Student Background Checks

a. Authorization to share information: Student background check reports maintained by educational institutions are records subject to FERPA. FERPA prohibits the release of educational records without

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the student's written authorization unless there is a specific FERPA exception authorizing the release. Given that an affiliated clinical facility is offering educational services that would otherwise be provided by the educational institution, FERPA can be reasonably interpreted to permit the institution to release the information to the clinical facility without the student’s authorization. NOTE: HIPAA is not applicable to this scenario.

1. A general notice will be provided to students that background check reports may be provided to affiliated clinical facilities at which students will attend as part of their required course of study.
2. A general release will be obtained from students at the time of the criminal background check that authorizes the release of reports or results to any affiliated clinical facility to which students may be assigned.
3. Information will be released to the affiliated clinical facility upon its request.

b. Requests for Information: Request for criminal background check reports must be submitted in writing by the affiliated clinical facility and state the reason why the information is needed. All requests will be handled by the Office for Student Affairs. Requests for information records will be maintained for as long as the background check reports are maintained.

c. Transmission of Information: Educational records will be sent to the clinical facility in a confidential manner. This can be achieved either by mailing the information and marking the outside of the envelope confidential, or scanning and e-mailing the records directly to the secure e-mail address for receipt of confidential information as identified by the clinical facility, preferably in the affiliation agreement.

d. Confidentiality of Information: In releasing educational records to a clinical facility, FERPA requires that the clinical facility maintains the confidentiality of the educational records while the records are in its possession. The affiliated clinical facility will be informed in writing that:

1. the information is confidential and subject to FERPA;
2. the information may only be viewed by individuals who have a legitimate need to view the information to verify or audit the qualifications of the student to participate in the educational program at the clinical facility;
3. the information may not be disclosed to other entities without the student’s written authorization;
4. the information must be destroyed when it is no longer needed for the purposes for which the information was provided to the clinical facility; and
5. improper disclosure of personally identifiable information contained within the report may result in the HSC being prohibited from providing the clinical facility access to this information for at least five years.

e. Affiliation or Program Agreements: Affiliation agreements may include a reference for requirements of criminal background checks. If criminal background check reports are shared with the clinical facility, the clinical facility is subject to the requirements of FERPA as to any documents received by the clinical facility from the SOM regarding a student.
B. Advanced Standing

The acceptance of students with advanced standing is dependent upon the availability of clinical and academic facilities. Each year the UT School of Medicine at San Antonio (SOM) considers class size and the imperative of maintaining high quality training in deciding whether additional students with advanced standing will be admitted. In such rare cases, only students currently enrolled in an LCME-accredited medical school in good academic standing can be considered. Given the scarcity of spaces, preference is given to those who must move to San Antonio for reasons of personal hardship and who have not only the consent but also the active support of their schools for the proposed move. The SOM will determine in each case the viability of the proposed transfer from an academic viewpoint and establish the necessary courses and other requirements and level at which the transfer would take place. No transfers for advanced standing will occur prior to the end of traditional pre-clinical curricula. Application forms and inquiries concerning advanced standing admission should be obtained from and addressed to the Vice Dean for Undergraduate Medical Education. A nonresident of the state of Texas cannot be enrolled with advanced standing if the result of that enrollment would cause the percentage of nonresidents enrolled in the class of interest to rise above ten percent.
C. Grades/Promotions/Graduation

The UT School of Medicine at San Antonio Curriculum Committee (CC) is the body that provides central oversight and makes recommendations to the Dean of the SOM and Dean delegates for the overall design, management and evaluation of a coherent and coordinated curriculum. The Student Promotions Committee (SPC) is charged with review of the academic progress and professional development of each student during all components of the four year medical education program, making recommendations to the Dean of the SOM and Dean delegates. The SPC has primary responsibility for recommending for graduation only those candidates who have satisfactorily completed all graduation requirements and demonstrated the professional conduct appropriate for a physician.

For purposes of the policy, the “pre-clinical years” include modules taught from fall of year 1 through mid-spring of year 2. The “clinical years” include all core clerkships and clinical courses including clinical selects and electives. The academic standards for successful completion of a pre-clinical module are determined by the module director, adhering to a grading rubric approved by the CC, but may be appealed to the SPC. In the clinical years, academic standards for successful completion of a clerkship or clinical course are determined by the clerkship or course director, remaining within the bounds of applicable CC standardization and subject to SPC appeal.

i. Grades

Grades are based on an A, B, C, F system for all pre-clinical modules and core clerkships. Grades for clinical courses will mostly be based on a pass/fail system. Grades of A, B, and C are considered passing. A=outstanding performance, B=very good performance, C=satisfactory performance and F=indicates failing performance. No grade of D will be issued. The grade of Incomplete (I) is reserved for circumstances in which academic work is not attempted or completed due to illness, family emergency, or other non-academic extenuating circumstances. A grade of I is disallowed for substandard academic performance.

For purposes of class rank, each letter grade is assigned a point value as follows:

<table>
<thead>
<tr>
<th>Grade</th>
<th>Points</th>
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<tbody>
<tr>
<td>A</td>
<td>4</td>
</tr>
<tr>
<td>B</td>
<td>3</td>
</tr>
<tr>
<td>C</td>
<td>2</td>
</tr>
<tr>
<td>F</td>
<td>0</td>
</tr>
</tbody>
</table>

Remediation grades (as described below) will be classified as “Pass” or “Fail”. For purposes of class rank, a course that is remediated to a “Pass” will be given the same point value as a “C.”
Beginning with the Class of 2016, class rank will be calculated twice during the 4 year curriculum as follows: 1) at the conclusion of the pre-clinical curriculum 2) at the date that the core clerkships must be completed during the clinical years as specified by the academic calendar.

**Grades for clinical courses (including selectives and electives)**

For students in the Class of 2014 and 2015:

Students are assessed using the clinical course grading policy in place at the outset of that student’s fourth year of medical school.

For students in the graduating class of 2016 (and beyond):

Clinical course student assessment is based on pass/fail competency and professionalism demonstration as per the elective’s grading rubric.

Process of distribution of grades:

In the pre-clinical curriculum, final grades are calculated by the Office of Undergraduate Medical Education, approved by the module co-directors, ratified by the SPC, and then released to the students.

In the core clerkships, final grades will be calculated by Clerkship Directors and made available to the students no later than 6 weeks after completion of the clerkship. In selectives and electives, final grades will be calculated by Course Directors and made available to the students no later than 4 weeks after completion of the course. Final grades in the clinical curriculum will be submitted to the Office of Undergraduate Medical Education and ratified by the SPC.
ii. Promotion

The Student Promotions Committee (SPC) monitors the progress of students throughout the four year medical education program. Students must satisfactorily complete the pre-clinical modules in order to be promoted to the clinical curriculum. Remediation guidelines are set by the Curriculum Committee (CC), but the SPC makes final remediation and progression decisions after a thorough review of the individual student’s performance in modular components and previous modules, when applicable. (Certain curricular component remediation guidelines state that demonstration of competency in the domain of concern during the next module is sufficient.)

In the clinical curriculum, the grading standard is set by the clerkship or course director within the bounds of applicable CC policy. Clerkship or course directors assess student performance independent of considerations of the student’s performance in other clerkships or courses.

Students must satisfactorily complete all required modules in the pre-clinical years and all required clerkships and courses in the clinical years, as well as meet predetermined requirements for additional selectives and electives, to progress through the medical education program and be recommended for graduation.

a. Deficiencies

The SPC considers a variety of approaches to deficiency removal. These approaches may include Remediation, Repetition, and/or Dismissal.

Remediation is an academic activity designed to remove a deficiency in the pre-clinical years or a clerkship or course in the clinical years. Because module grades are derived from different components, students who fail to meet passing standards in any component will receive a failing grade. Module remediation guidelines are set by the CC and prescribed to the SPC by the Assistant Deans for Curriculum. Only students who have not failed another module in the same academic year or two prior modules are eligible for remediation. When remediation is approved for a deficiency in the pre-clinical or the clinical years, the nature of the remediation activity will be determined by the SPC, after consideration of module, clerkship or course director recommendations, an assessment of a student’s overall academic performance, a student’s written request, and other factors as deemed appropriate by the SPC.

Students successful in remediation activities continue to the next academic level. Successful remediation of any failed module component in the pre-clinical years or a clerkship or course in the clinical years will be transmitted to the registrar and recorded on a student’s official transcript as “F-
Remediated to Pass”. Also, students who remediate deficiencies may not receive concurrent credit for any other curricular activity.

Repetition is the act of repeating part or all of an academic year due to substandard academic performance, usually following unsuccessful deficiency remediation. Students unsuccessful in deficiency remediation are required to repeat all modules of the academic year; similarly, students unsuccessful in deficiency remediation in a clerkship or course in the clinical years are required to repeat the clerkship or course. The SPC will determine if previously passed courses are based on integration such that repetition of one course requires concurrent or sequential repetition of others. The SPC, following its review of the student’s academic status, will determine the most appropriate approach to facilitate the student’s acquisition of fundamental knowledge.

Dismissal means permanent separation from the SOM and will be warranted in some instances, as outlined below.

b. Procedures to address failures

The student falling outside of usual guidelines may request that the SPC grant an opportunity to remediate grade deficiencies or repeat the academic year. This request must be in writing, delineating both academic and non-academic factors for the SPC to consider. The SPC may grant such a request subject to determination that the request is likely to facilitate student learning and progress. The criteria, as stated below, apply to each year of the UT School of Medicine at San Antonio (SOM) curriculum. In addition, no more than two (2) years may be taken to complete any one (1) year of the curriculum. No more than six (6) years may be taken to complete the medical education program without permission from the SPC.
c. Student Promotions Committee Guidelines

SPC Guidelines in Year 1

1. Policy on failure of modules:
   a. 1 module failed in Year 1: Remediation activity
   b. 2 modules failed in Year 1: Repetition of all modules in Year 1
   c. 3 or more modules failed in Year 1: Dismissal from the SOM

2. Policy on failure of a remediation activity:
   a. remediation activity failed in Year 1: Repetition of all modules in Year 1

SPC Guidelines in Year 2

1. Policy on failure of modules:
   a. 1 module failed in Year 2: Remediation activity
   b. 2 modules failed in Year 2 (excluding longitudinal courses): Repetition of all modules in Year 2 including portion of longitudinal course in Year 2
   c. 1 module failed and 1 non-longitudinal module failed: Remediation for each module
   d. 3 or more courses failed in Year 2: Dismissal from the SOM

2. Policy on failure of a remediation activity:
   a. remediation activity failed in Year 2: Repetition of all modules in Year 2

3. Policy on failure across Year 1 and 2:
   a. 3 or more modules failed across Year 1 and 2 (for any reason): Dismissal from the SOM
SPC Guidelines in Year 3 and Year 4

1. Policy on failure of NBME exams:
   a. 1 or 2 exams failed: Remediation at the end of the academic year (if no previous courses failed for any reason)
   b. 3 exams failed: Dismissal from the SOM

2. Policy on failure of clinical portion of clerkship:
   a. Remove student from clerkship and remediate skills: Repetition of clinical portion of clerkship

3. Policy on failure across academic years:
   a. 3 or more courses failed across Year 3 and 4: Dismissal from SOM

SPC Guidelines Year 1 through Year 4

1. Policy on failure Year 1 through Year 4:
   a. 3 or more courses failed Year 1 through Year 4: Dismissal from SOM

Other SPC Guidelines Year 1 through Year 4

1. The SPC can mandate a Leave of Absence for a student in difficulty, if the SPC determines that this is in a student’s best interest

2. Process for appeals: Refer to the SOM Grievance Policy

3. Mandatory meetings with SPC: The SPC can mandate that a struggling student be required to present to the SPC, the Deans for Student Affairs and the Deans for Curriculum

4. Restrictions on activities for students in academic difficulty:
   a. A student with one or more failures is restricted from his/her UT Health Science Center of San Antonio (HSC) extracurricular activities. Activities include holding a class office, participating in research which has no credit assignment, participating in intramural sports, applying for/serving as Office of Student Life Peer Advisor, and receiving international/service/conference funding until satisfactory completion of a full academic year
   b. The range of possible sanctions for a professionalism violation is in the Handbook of Operating Procedures (HOP) and in the Code of Professional Conduct for Students

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iii. United States Medical Licensing Examination

The United States Medical Licensing Examination (USMLE) is jointly sponsored by the National Board of Medical Examiners and the Federation of State Medical Boards. A passing score on each portion of the USMLE is accepted by medical boards in every state as evidence of core competency to practice medicine. The current required exams are USMLE Step 1, USMLE Step 2 CK (Clinical Knowledge), USMLE Step 2 CS (Clinical Skills), and Step 3. Step 3 is taken after medical school graduation.

It is essential that medical students meet required benchmarks that lead to medical licensure. Although designed for the purpose of licensing physicians, scores on USMLE Step 1 and USMLE Step 2 CK are often used by graduate medical education programs in decisions to interview and rank medical students for residency positions. It is therefore incumbent upon the SOM to establish policies pertaining to the timing and passage of the USMLE in order to optimize career outcomes for students and to ensure that graduates meet at least minimal licensing requirements.

Policy on Failure of USMLE Step 1

1. For students in the Class of 2014:
   - Students must have taken USMLE Step 1 in order to begin the clinical curriculum.
   - Students must pass USMLE Step 1 in order to be promoted to the fourth year
   - Students who are unsuccessful will be allowed to complete the clinical clerkships
   - Students will not be allowed to begin either fourth year selectives or electives until they have retaken the examination
   - Three (3) failures of the USMLE Step 1 meet criteria for dismissal from the SOM

2. For students in the Class of 2015:
   - Students must take USMLE Step 1 prior to the start of Clinical Foundations in June 2013. The Office for Student Affairs may grant an exception to this requirement for individual students.
   - If a student does not achieve a passing score on the first attempt, he/she will be allowed to complete third year coursework
   - Fourth year coursework will not begin until the student has completed a second attempt on USMLE Step 1. A student is permitted to begin fourth year coursework while he/she awaits the score from a second attempt on USMLE Step 1.
   - A student who receives a second failure on USMLE Step 1 will be placed on a mandatory Leave of Absence until he/she completes and
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receives a passing score on a third attempt on USMLE Step 1, after which time course work can resume. Graduation may be delayed.

- A student who receives a third failure on USMLE Step 1 meets criteria for dismissal from the SOM

3. For students in the Class of 2016 (and beyond):

- Students must take USMLE Step 1 prior to December 15 of the chronological third year of the medical curriculum
- If a student does not achieve a passing score on the first attempt, he/she will have the option to immediately make a second attempt to pass USMLE Step 1 or to complete additional coursework
- An unsuccessful student must complete a second attempt on USMLE Step 1 by July 1 of the chronological fourth year of the medical curriculum. Failure to do so by this date will result in the imposition of a mandatory Leave of Absence until the exam is taken.
- A student may resume clinical coursework while he/she awaits the score from a second attempt on USMLE Step 1
- A student who receives a second failure on USMLE Step 1 will be placed on a mandatory Leave of Absence until he/she completes and receives a passing score on a third attempt on USMLE Step 1, after which time course work can resume. Graduation may be delayed.
- A student who receives a third failure on USMLE Step 1 meets criteria for dismissal from the SOM

Policy on Failure of USMLE Step 2 CK

1. For students in the Class of 2014:

- Medical students must take the USMLE Step 2 CK in order to qualify for graduation from the SOM.

2. For students in the Class of 2015 (and beyond):

- Students must take and pass USMLE Step 2 CK in order to graduate from the SOM.
- Students must take USMLE Step 2 CK following these established rules:
  - Students are strongly encouraged to take USMLE Step 2 CK by September of the chronological fourth year of the medical curriculum
  - Students must take USMLE Step 2 CK by December 15 of the chronological fourth year of the medical curriculum
  - If a student has not taken USMLE Step 2 CK by December 15 of the chronological fourth year, he/she will be placed on mandatory Leave of Absence until the exam is taken
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- If a student does not achieve a passing score on the first attempt, he/she will be placed on a mandatory Leave of Absence until the exam is taken a second time.
- A student may resume clinical coursework while he/she awaits the score from a second attempt on USMLE Step 2 CK.
- A student who receives a second failure on USMLE Step 2 CK will be placed on a mandatory Leave of Absence until he/she completes and receives a passing score on a third attempt on USMLE Step 2 CK, after which time coursework can resume. Graduation may be delayed.
- If a student has not passed Step 2 CK by the graduation date, he/she will not receive a diploma for the M.D. degree with his/her class. The student will remain a fourth year student until the exam is taken and passed.
- If a student has not taken and passed the USMLE Step 2 CK by one year after the student's original graduation date or by six years after matriculation into medical school (whichever comes first), a student meets criteria for dismissal from the SOM.
- A student who does not achieve a passing score on USMLE Step 2 CK within three attempts meets criteria for dismissal from the SOM.

Policy on Failure of USMLE Step 2 CS

1. For students in the Class of 2014:
   - Medical students must take the USMLE Step 2 CS in order to qualify for graduation from the SOM.

2. For students in the Class of 2015 (and beyond):
   - Students must take and pass USMLE Step 2 CS in order to graduate from the SOM.
   - Students must take USMLE Step 2 CS following these established rules:
     - Students are strongly encouraged to take USMLE Step 2 CS by October of the chronological fourth year of the medical curriculum.
     - Students must take Step 2 CS by November 1 of the chronological fourth year of the medical curriculum.
     - If a student has not taken USMLE Step 2 CS by November 1 of the chronological fourth year, he/she will present the reason for the deficiency to the SPC at the next scheduled meeting and advise the committee of the scheduled exam date. The student may continue with coursework while awaiting the scheduled exam date.
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- If a student does not achieve a passing score on the first attempt, the student will schedule a second attempt at the earliest time available. The student will be allowed to continue coursework while he/she awaits the scheduled exam date.
- A second failure on USMLE Step 2 CS may delay graduation
- If a student has not taken USMLE Step 2 CS by December 15 of the chronological fourth year, he/she will be placed on mandatory Leave of Absence until the exam is taken
- If a student has not passed USMLE Step 2 CS by the graduation date, he/she will not receive a diploma for the M.D. degree with his/her class. The student will remain a fourth year student until the exam is taken and passed.
- If a student has not taken and passed the USMLE Step 2 CS by one year after the student’s original graduation date or by six years after matriculation into medical school (whichever comes first), the student meets criteria for dismissal from the SOM
- The student who does not achieve a passing score on USMLE Step 2 CS within three attempts meets criteria for dismissal from the SOM
iv. **Academic Dismissal**

Dismissal from the SOM for academic reasons may be considered for:

a. Students unable to meet the promotion standards to a given academic level or after one additional repeat/remediation year are ineligible for graduation

b. Students requiring more than one repeat/remediation year to meet promotion standards

c. Students receiving a grade of F in a module or course being repeated

d. Students unable to achieve a passing score on USMLE Step 1 within three attempts and students in the Class of 2015 (and beyond) unable to achieve a passing score on USMLE Step 2 CK and CS within three attempts each

e. Students exhibiting egregious or a pattern of unprofessionalism:

Dismissal for academic reasons will be the decision of SPC. The decision of the SPC is final, pending further appeal to the Dean of the SOM. The decision of the Dean of the SOM is final. Solely on procedural concerns, the student may appeal to a higher administrative institutional official (see “Student Academic Grievance Procedures” for details).
v.  **Graduation**

The degree of Doctor of Medicine is awarded by the Board of Regents upon a student’s successful completion of the graduation requirements, recommendation of the Faculty Council to the Dean of the SOM, and certification by the Dean of the SOM to the President. Candidates must:

a. be at least 18 years of age at the time the degree is awarded

b. present evidence of good moral character

c. offer evidence of having satisfactorily fulfilled all academic requirements of the four year medical education program

d. comply with all necessary legal and financial requirements

Degrees will be conferred once a year on Commencement Day in the spring.

Students completing requirements for a degree earlier in the year will be conferred the degree on the following Commencement Day, but may request the Registrar to provide a Certification of Completion on the date of graduation.
D. Scholastic Honors

Alpha Omega Alpha (AOA) Honor Medical Society is a national professional organization whose aims are the “promotion of scholarship and research in medical schools, the encouragement of a high standard of character and professionalism among medical students and graduates, and the recognition of high attainment and service in medical science, patient care, and related fields”. Election is based on academic excellence, and on activities and achievements that promote the values of AOA. The top 25 percent of the medical school class is eligible for nomination to the society. From this top quartile of students, up to one-sixth of the class may be elected to the society based on academic achievement, leadership, character, community service, and professionalism. Students may be chosen in the junior or senior year.

The Gold Humanism Honor Society, sponsored by the Arnold P. Gold Foundation, recognizes students who best exemplify and manifest humanism in their interaction with patients, peers, faculty, and community. Additionally, elected students demonstrate excellence in clinical care, leadership, compassion and dedication to service. Society membership participates in a community service project that is formulated by the group. Election is limited to no more than twenty-five students from the graduating class.
E. Code of Professional Conduct

i. Preamble

Because practicing medicine is an honor earned every day, we—the faculty and students of the UT School of Medicine at San Antonio (SOM) —subscribe to the highest standards of conduct. Our aim is professional behavior beyond reproach. In particular, we subscribe to the following points of conduct:

ii. Code

I will promote and maintain an honest and effective learning environment. I will:

- do my part to ensure that the environment promotes acquisition of knowledge and mastery of skills;
- not tolerate harassment, flagrant disruption of the learning process, demeaning language or visual aids, disrespectful behavior, or lack of respect for life and living things;
- exhibit the highest standards of conduct, honesty, and professionalism;
- identify and report those who exhibit academic or professional misconduct; and
- appreciate each individual as a person of value and help maintain dignity during the learning process.

I will place primary emphasis on the health and welfare of patients. I will:

- attain and maintain the most current knowledge in the healing arts and the skill to apply that knowledge;
- display respect and compassion for each patient;
- foster and preserve the trust that exists between professional and patient;
- respect and maintain the confidentiality of the patient; and
- let no patient in whose care I participate suffer physically or emotionally as a consequence of unprofessional behavior by myself or others.

I will conduct myself at all times in a professional manner. I will:

- exhibit honesty, openness, and evenhandedness in dealing with others;
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- maintain my personal hygiene and appearance in such a way that it does not interfere with my ability to communicate with patients, colleagues, or community;
- not engage in language or behavior which is disrespectful, abusive, or insulting;
- take responsibility for my actions, acknowledge my limitations, and ask for assistance when needed;
- assure the welfare of others is not compromised as a result of my inadequacy or impairment;
- not be deceitful or self-serving;
- achieve satisfactory balance in personal, community, and professional activities;
- not allow personal conflicts to interfere with objectivity in relationships with colleagues or patients;
- accommodate a fellow professional’s request for my knowledge and expertise;
- refrain from the manifestation of bias, including sexual, marital, racial, ethnic, or cultural harassment;
- support my fellow professionals if they should falter; and
- identify colleagues whose ability to provide care is impaired, support them as they seek rehabilitation, and help them to reintegrate into the medical community.

iii. Administration of the Code of Professional Conduct for Students

As part of the SOM’s recent Professional Identity Development initiatives, and recognizing that professionalism is a critical physician competency, this policy is under review for congruence with professionalism goals. However, any policy modifications will respect the principles of the current policy: reports from complainant(s) and person(s) charged, witness verification of events when possible, due process (decision-making through Student Promotions Committee-SPC), and timely resolution.

Medical students are expected to maintain the highest standards of professional and ethical conduct. Medical students are expected to conduct themselves in a professional manner in interaction not only with patients, but also with peers, faculty, and staff of the UT Health Science Center at San Antonio (HSC) and the broader community. The SOM, HSC and UT System have written expectations of professional conduct. Medical students are governed by the above Code of Professional Conduct in the SOM. Each module, clerkship or course director may also develop written expectations of professional conduct. These expectations are distributed to students, or posted for each module, clerkship or course.

A report of professional misconduct is investigated in accordance with previously established policies and procedures within the SOM, HSC and the UT System:

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At present a potential violation of professional conduct is reported to a Dean for Student Affairs who meets with the complainant to determine the charges and to explain the investigative process. If the charges are not in writing, the Dean for Student Affairs will prepare a statement of the charges and obtain verification of the charges from the complainant. The Dean for Student Affairs will be responsible for ensuring that no retaliation is made against the complainant. The Dean for Student Affairs will interview the accused student, allowing the accused student the opportunity to respond to the charges and to review the available evidence supporting the charges. The Dean for Student Affairs will interview others as indicated. All HSC personnel and students must cooperate with the investigation. The investigation will be conducted in a timely manner. At the conclusion of the investigation, the Dean for Student Affairs will prepare a written report detailing the charges, the investigative process and the results of the investigation. The Dean for Student Affairs will present the written report to the SPC for recommendations. Any disciplinary action/sanction(s) recommended by the SPC shall be in accordance with applicable SOM and HSC policies (see “sanctions” below). The decision of the SPC is final, pending further appeal to the Dean of the SOM. The sanctioned student may file a written appeal to the Dean of the SOM within five business days from receipt of the SPC written decision. Within 30 calendar days from receipt of the student’s appeal, the Dean of the SOM will provide a written decision to the student, the Vice Dean for Undergraduate Medical Education and the Chair of the SPC. The decision of the Dean of the SOM is final. Within 5 business days of the Dean of the SOM’s decision, the student may file a written appeal to a higher administrative institutional official, but only on procedural concerns (See “Medical Student Academic Grievance Procedures” for details).

The following sanctions may be assessed by the SPC or the Dean of the SOM:

a. Warning
b. Probation
c. Withholding of grades, official transcript, and/or degree
d. Bar against readmission
e. Restitution or reimbursement for damage to or misappropriation of UT System or HSC property
f. Suspension of rights and privileges deriving in whole or in part for the SOM, including participation in extracurricular activities
g. Suspension of eligibility for any student office or honor
h. Cancellation of credit for scholastic work done
i. Failing grade or reduction of a grade for an examination, assignment, or course
j. Suspension from the HSC for a specified period of time
k. Dismissal

Reviewed and updated: 7/1/2013
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1. Denial of degree
m. Revocation of degree and withdrawal of diploma
n. Formal letter of reprimand in the academic file
o. Other sanction(s) as deemed appropriate under the circumstances
F. Medical Student Grievance Procedures

i. Academic Grievance

An academic grievance is a complaint regarding an academic decision or action that affects the student’s academic record. Academic grievances in the UT School of Medicine at San Antonio (SOM) may be handled by informal resolution or formal resolution.

a. Procedure for Informal Resolution in the Pre-Clinical Curriculum

A student who feels that he/she has an academic grievance in the pre-clinical curriculum, usually regarding an examination score or module grade, may attempt to informally resolve the concern by contacting the Dean of Curriculum in writing within five business days from the date the student knew or should have known of the academic concern. Within 30 calendar days from receipt of the student’s written communication, the Dean for Curriculum will investigate the concern and provide the student a written decision.

b. Procedure for Informal Resolution in the Clinical Curriculum

A student who feels that he/she has an academic grievance in the clinical curriculum may attempt to informally resolve the concern by contacting the Clerkship Director/Course Director in writing within five business days from the date the student knew or should have known of the academic concern. The student will contact the Clerkship Director/Course Director to discuss the academic concern, usually related to narrative evaluation comments, overall evaluation, an examination score or a course grade. The Clerkship Director/Course Director will investigate the student’s concern, employing departmental education processes such as committee review, as per departmental practice. Within 30 calendar days from receipt of the student’s written communication, the Clerkship Director/Course Director will investigate the concern and provide the student a written decision.

c. Procedure for Formal Resolution (“Appeal”) in the Pre-Clinical and Clinical Curriculum

The process and procedures for formal academic grievance ("appeal") resolution are sequenced below. Academic grievance applies to concerns adversely influencing the student’s academic status. Examples include, but are not limited to, examination score, module, course or clerkship grades, remediation, repetition, suspension, probation, professionalism sanctions, and dismissal.
1. A student must file written notice of grievance with the Dean for Student Affairs and the Chair of the Student Promotions Committee (SPC) within five business days from the date the student knew or should have known of the concern unless the student first pursues an informal grievance process. In that instance, the student must then file the formal grievance within five business days of the written decision for the informal grievance.

If the student chooses not to attempt informal resolution of a grievance, he/she must file a formal written appeal not more than five business days from the date the student knew or should have known of the academic concern.

2. The aggrieved student must meet with the Dean for Student Affairs to ensure factual accuracy of the basis for appeal, review the processes and procedures, and anticipate preparation of documentation for the SPC meeting. In the written appeal, the student must describe the rationale for the grievance in detail and propose a resolution. An ad hoc group of the SPC, including the Dean for Student Affairs, the Chair of the SPC and one member of the SPC, will investigate the grievance, meeting with the student as necessary to ensure a comprehensive review. The Chair of the SPC will present the student’s written statement and any supporting documentation, as well as the ad hoc investigatory summary to the SPC at the next scheduled SPC meeting. The SPC may defer a decision if more information/documentation is required to make a responsible decision, and may request a face-to-face meeting with the student prior to rendering a decision. The SPC will provide the student a written decision within five business days after the meeting. The decision of the SPC is final, pending appeal to the Dean of the SOM. The student continues in the curriculum until the appeal process is exhausted unless the student’s continuance poses a safety concern.

3. The student may file a written secondary appeal to the Dean of the SOM within five business days from receipt of the SPC written decision. The student must also inform the Dean for Student Affairs of the intent to appeal, also within the same the five business days. The student’s appeal portfolio must include a justification statement for secondary appeal and all documentation provided to the SPC. Upon review of the student’s record and appeal portfolio, the Dean of the SOM may elect to:
a) take no action, allowing the SPC decision to stand
b) modify the SPC decision
c) make an alternate decision
d) impanel an ad hoc committee to re-examine the grievance and make recommendations

The ad hoc committee will be composed of three SOM faculty members appointed by the Dean of the SOM. Faculty disallowed include members of the SPC, UME professional leadership, and module/clerkship/course directors. The committee will have full investigative authority and make recommendations directly to the Dean of the SOM. At the discretion of the Dean of SOM and/or the ad hoc committee, a face-to-face meeting with the aggrieved student may be required. The Dean for Student Affairs will accompany the student in any/all face-to-face meetings with the Dean of SOM and/or ad hoc committee. Within 30 calendar days from receipt of the student’s appeal, the Dean of the SOM will provide a written decision to the student, the Vice Dean for Undergraduate Medical Education and the Chair of the SPC. The decision of the Dean of the SOM is final. The Dean for Student Affairs will meet with the student to inform about the Dean of SOM's decision. At the next scheduled SPC meeting, the Chair of the SPC will present the Dean of the SOM’s decision for entry into the minutes.

4. Within five business days of receipt of the Dean of SOM’s decision, the student may file a formal written appeal to a higher administrative institutional official but only for procedural concerns. In rare circumstances the Texas Higher Education Coordinating Board (THECB) will investigate student complaints. Please refer to the THECB website for more information.
ii. **Nonacademic Grievance**

A student who has a nonacademic grievance concerning perceived violation of her/his student rights; discrimination based on age, color, disability*, family status, gender, national origin, race, religion, veteran status, sexual orientation; or sexual harassment/sexual assault** may seek grievance resolution. The student may file a nonacademic grievance against another student, faculty, staff or official publication of the UT Health Science Center at San Antonio (HSC) via a written statement to the Dean for Student Affairs. Nonacademic grievances in the UT School of Medicine at San Antonio (SOM) may be handled by informal resolution or formal resolution.

a. **Procedure for Informal Resolution**

A student pursuing an informal nonacademic grievance resolution must contact the Dean for Student Affairs, in writing, within five business days of the alleged grievance. (If the grievance involves staff, faculty, student(s) from the broader HSC community, the Dean for Student Affairs will liaison with other appropriate authorities, as indicated.) The Dean for Student Affairs will assist the student in the informal resolution of the grievance, to be completed within 30 calendar days from the grievance stimulus. If an informal resolution is not achieved, the aggrieved student has an additional five business days to file a formal written grievance.

b. **Procedure for Formal Resolution**

The process and procedure for formal nonacademic grievance resolution are sequenced below.

1. A student considering pursuit of a formal nonacademic grievance must contact the Dean for Student Affairs for review of applicable policies and procedures. (Specifics unique to the grievance, and persons may require involvement of additional institutional representatives).

2. A formal grievance must include the following information: relevant name(s), date(s), location(s), witness(es) and complete description(s) of the grievance and a proposed resolution, if possible.

3. The student must file the formal grievance, in writing, with the Dean for Student Affairs within five business days from the alleged grievance stimulus. A student initially attempting informal grievance must file the formal grievance, in writing, within five business days of the 30 calendar days allowed for informal resolution.
4. If the grievance involves/accuses HSC non-medical students or employees, the Dean for Student Affairs will facilitate engagement with appropriate advocacy/supervisory institutional authorities to ensure that coordination of investigatory and resolution processes transcend interschool and student/employee boundaries.

5. Copies of the written grievance will be made available to named parties and the appropriate advocacy/supervisory institutional authorities.

6. The Dean for Student Affairs (and appropriate institutional authorities noted above) may, at her/his discretion, hold discussions with or without the involved/accused individual(s) to hear and resolve the grievance, schedule a meeting between the student and the involved/accused individual(s) and/or involve other parties in facilitating a resolution of the grievance. This process will be afforded 30 calendar days from receipt of the formal written grievance to resolve the grievance, providing the aggrieved student a written summary of resolution.

7. If the aggrieved student is dissatisfied with the resolution, he/she may file a formal written appeal with the Dean of the SOM within five business days of receipt of the decision. The Dean of the SOM has 30 calendar days to provide a written decision to the student and to the Dean for Student Affairs. The decision of the Dean of the SOM is final.

8. Within 5 business days of receipt of the Dean of the SOM’s decision, the student may file a formal written appeal to a higher administrative institutional official, but only for procedural concerns.

9. In rare circumstances the Texas Higher Education Coordinating Board (THECB) will investigate student complaints. Please refer to the THECB website for more information.

*see additional related HSC policies/procedures: "Nondiscrimination Policy and Complaint Procedure" at www.uthscsa.edu/eeo/non-discrimination.asp.

**see additional related HSC policies/procedures: "General Regulations and Requirements, Sexual Assault Policy" at www.uthscsa.edu/eeo/harassment.asp.
G. Student Mistreatment

Mistreatment of students will not be tolerated. Mistreatment, intentional or unintentional, occurs when behavior shows disrespect for the dignity of others and interferes with the learning process. Student mistreatment may take many forms all of which impact student performance. Sexual harassment and assault, which are defined by policy through the UT Health Science Center at San Antonio (HSC)’s Equal Employment Opportunity/Affirmative Action Office, are included in this section as forms of student mistreatment. Student access to personnel and processes for resolution without retaliation are detailed below.

Examples of behavior that are unacceptable to the UT School of Medicine at San Antonio (SOM) and HSC include:

- Physical or sexual harassment/assault
- Discrimination or harassment based on race, gender, age, ethnicity, religious beliefs, sexual orientation, or disability
- Disparaging or demeaning comments about an individual or group
- Loss of personal civility including shouting, displays of temper, public or private abuse, belittling, or humiliation
- Use of grading or other forms of evaluation in a punitive or retaliatory manner
- Sending students on inappropriate errands

Medical students who feel they have been mistreated may report such perceptions to any of the following:

- Dean for Student Affairs
- Director, Equal Employment Opportunity/Affirmative Action Office
- Counseling Services
- Office of Student Services
- Course/Clerkship Director

These school representatives are empowered to informally discuss a student’s perceptions related to mistreatment, providing guidance. These school representatives should refer the student immediately to the Dean for Student Affairs for further instructions.

A grievance involving perceived mistreatment can be resolved in an informal or a formal manner. A student pursuing an informal nonacademic grievance resolution must contact the Dean for Student Affairs, in writing, within five business days of the alleged grievance. (If the grievance involves staff, faculty, student(s) from the broader HSC community, the Dean for Student Affairs will liaison with other
appropriate authorities, as indicated.) The Dean for Student Affairs will assist the student in the informal resolution of the grievance, to be completed within 30 calendar days from the written grievance. If an informal resolution is not achieved, the aggrieved student has an additional five business days to file a formal written grievance.

A student considering a formal nonacademic grievance must contact the Dean for Student Affairs for review of applicable policies and procedures. If the allegation is one of sexual harassment/assault, the Dean for Student Affairs will engage the HSC’s Director of Equal Employment Opportunity/Affirmative Action Office. (Please see additional related policies “General Regulations and Requirements, Sexual Assault Policy” at www.uthscsa.edu/eeo/harassment.asp).

The student must file a formal written grievance with the Dean for Student Affairs within five business days from the alleged incident. A student initially attempting informal grievance must file the formal grievance, in writing, within five business days of the 30 calendar days allowed for informal resolution. The formal grievance must include a detailed description of the grievance and a proposed resolution, if possible. If the grievance involves/accuses HSC non-medical students or employees, the Dean for Student Affairs will facilitate engagement with appropriate advocacy/supervisory institutional authorities. Copies of the written grievance will be made available to named parties and the appropriate advocacy/supervisory institutional authorities. The Dean for Student Affairs (and appropriate institutional authorities noted above) may, at her/his discretion, hold discussions with or without the involved/accused individual(s) to hear and resolve the grievance, schedule a meeting between the student and the involved/accused individual(s) and/or involve other parties in facilitating a resolution of the grievance. This process will be afforded 30 calendar days from receipt of the written grievance to resolve the grievance, providing the aggrieved student a written summary of resolution.

If the aggrieved student is dissatisfied with the resolution, he/she may file a formal written appeal with the Dean of the SOM within 5 business days of the decision. The decision of the Dean of the SOM is final. The Dean of the SOM has 30 calendar days to provide a written decision to the student and to the Dean for Student Affairs. Within 5 business days of the Dean of the SOM’s decision, the student may file a written appeal to a higher administrative institutional official, but only for procedural concerns (See “Medical Student Nonacademic Grievance Procedures” for details).
H. Scholastic Dishonesty

As part of the UT School of Medicine at San Antonio (SOM)’s recent Professional Identity Development initiatives, and recognizing that professionalism is a critical physician competency, this policy is under review for congruence with professionalism goals. However, any policy modifications will respect the principles of the current policy: reports from complainant(s) and person(s) charged, witness verification of events when possible, due process (decision-making through Student Promotions Committee-SPC), and timely resolution.

Medical students are expected to maintain the highest standards of professional and ethical conduct. Medical students are expected to conduct themselves in a professional manner in interaction not only with patients, but also with peers, faculty, and staff of the UT Health Science Center at San Antonio (HSC) and the broader community. The SOM, HSC and UT System have written expectations of professional conduct. Medical students are governed by the Code of Professional Conduct in the SOM. Each module, clerkship or course director may also develop written expectations of professional conduct. These expectations are distributed to students, or posted for each module, clerkship or course.

A student who commits an act of scholastic dishonesty is subject to discipline, after thorough investigation by a Dean for Student Affairs. Scholastic dishonesty includes but is not limited to cheating, plagiarism, collusion, signing a classmate’s name for an activity or attendance, submission for credit of any work or materials that are attributable in whole or in part to another person, taking an examination for another person, any act designed to give unfair advantage to a student or the attempt to commit such acts. Any such act may also constitute a violation of professionalism by the student.

Students should report such acts to a Dean for Student Affairs, the module/clerkship/course director, or other faculty. If the reporting is not made directly to the Dean for Student Affairs, then it will be the module/clerkship/course director’s or faculty’s responsibility to report to a Dean for Student Affairs.

The conduct of the investigation of a report of scholastic dishonesty is in accordance with previously established policies and procedures within the SOM, HSC and UT System:

At present a potential act of scholastic dishonesty is reported to a Dean for Student Affairs who meets with the complainant to determine the charges and to explain the investigative process. If the charges are not in writing, the Dean for Student Affairs will prepare a statement of the charges and obtain verification of the charges from the complainant. The Dean for Student Affairs will be responsible for ensuring that no retaliation is made against the complainant. The Dean for Student Affairs will interview the accused student, allowing the accused student the opportunity to respond to the charges and to review the available evidence supporting the charges.

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The Dean for Student Affairs will interview others as indicated. All HSC personnel and students must cooperate with the investigation. The investigation will be conducted in a timely manner. At the conclusion of the investigation, the Dean for Student Affairs will prepare a written report detailing the charges, the investigative process and the results of the investigation. The Dean for Student Affairs will present the written report to the SPC for recommendations. Any disciplinary action/sanction(s) recommended by the SPC shall be in accordance with applicable SOM and HSC policies (see “sanctions” below). The decision of the SPC is final, pending further appeal to the Dean of the SOM. The sanctioned student may file a written appeal to the Dean of the SOM within five business days from receipt of the SPC written decision. Within 30 calendar days from receipt of the student’s appeal, the Dean of the SOM will provide a written decision to the student, the Vice Dean for Undergraduate Medical Education and the Chair of the SPC. The decision of the Dean of the SOM is final. Within 5 business days of the Dean of the SOM’s decision, the student may file a written appeal to a higher administrative institutional official, but only on procedural concerns (See “Medical Student Academic Grievance Procedures” for details).

The following sanctions may be assessed by the SPC or by the Dean of the SOM:

- Warning
- Probation
- Withholding of grades, official transcript, and/or degree
- Bar against readmission
- Restitution or reimbursement for damage to or misappropriation of UT System or HSC property
- Suspension of rights and privileges deriving in whole or in part for the SOM, including participation in extracurricular activities
- Suspension of eligibility for any student office or honor
- Cancellation of credit for scholastic work done
- Failing grade or reduction of a grade for an examination, assignment, or course
- Suspension from the HSC for a specified period of time
- Dismissal
- Denial of degree
- Revocation of degree and withdrawal of diploma
- Formal letter of reprimand in the academic file
- Other sanction(s) as deemed appropriate under the circumstances
I. Standards of Conduct for the Teacher-Learner Relationship

The UT School of Medicine at San Antonio (SOM) is committed to creating an environment that promotes academic and professional success in learners and teachers at all levels. The institution strives to create an environment free of behaviors that can adversely affect the Teacher-Learner Relationship. Both teachers and learners share the responsibility in creating and maintaining this environment of respect, fairness, and trust.

i. Responsibilities in the Teacher-Learner Relationship

   a. Responsibilities of teachers:
      Treat all learners with respect, fairness, and equality regardless of age, gender, race, ethnicity, national origin, religion, disability, or sexual orientation

   b. Responsibilities of learners:
      Treat all fellow learners and teachers with respect, fairness, and equality regardless of age, gender, race, ethnicity, national origin, religion, disability, or sexual orientation

ii. Behaviors Inappropriate to the Teacher-Learner Relationship

Behaviors that demonstrate disrespect for others or lack of professionalism in interpersonal conduct are inappropriate and will not be tolerated by the institution. These include, but are not limited to, the following:

- unwanted physical contact (e.g. hitting, slapping, kicking, pushing) or threat of the same
- unwanted verbal contact including loss of personal civility such as shouting, personal attacks, insults, or displays of temper (such as throwing objects)
- sexual harassment (including romantic relationships between teachers and learners in which the teacher has authority over the learner’s academic progress) or harassment based on age, gender, race, ethnicity, national origin, religion, disability or sexual orientation
- discrimination of any form including in teaching and assessment based upon age, gender, race, ethnicity, national origin, religion, disability, or sexual orientation
- requests for others to perform inappropriate personal errands unrelated to the didactic, investigational, or clinical situation at hand
- grading/evaluation on factors unrelated to performance, effort, or level of achievement
These inappropriate behaviors are presented to new UT Health Science Center at San Antonio (HSC) employees in the form of a mandatory educational module through the Knowledge Center, and the information can also be found in the Handbook of Operating Procedures. HSC employees review these standards of conduct in the form of a mandatory educational module through the Knowledge Center bi-yearly. Interns in all medical and surgical disciplines review policies regarding standards of conduct between teacher and learner during mandatory house staff orientation; interns, residents and faculty members review these standards of conduct during department-specific presentations designed to address ACGME core competencies.

Medical students receive education on standards of conduct between teacher and learner during orientation, including an on line EEO/AA module addressing topics such as sexual harassment and sexual misconduct and actions taken if victimized. Many clerkship orientations also review these standards of conduct as important ACGME core competencies.

If such inappropriate behaviors occur, the student is encouraged to state that to the behavior instigator. If the student is uncomfortable doing this, the next course of action is to report the inappropriate behavior to any of the following:

- Dean for Student Affairs
- Director, Equal Employment Opportunity/Affirmative Action Office
- Counseling Services
- Office of Student Services
- Course/Clerkship Director

These school representatives are empowered to informally discuss the student’s perceptions related to inappropriate teacher-learner behavior, providing guidance. These school representatives should refer the student immediately to the Dean for Student Affairs for further instructions.

A grievance involving an inappropriate teacher-learner relationship can be resolved in an informal or a formal manner. A student pursuing an informal nonacademic grievance resolution must contact the Dean for Student Affairs, in writing, within five business days of the alleged grievance. (If the grievance involves staff, faculty, student(s) from the broader HSC community, the Dean for Student Affairs will liaison with other appropriate authorities, as indicated.) The Dean for Student Affairs will assist the student in the informal resolution of the grievance, to be completed within 30 calendar days from the written grievance. If an informal resolution is not achieved, the aggrieved student has an additional five business days to file a formal written grievance.
A student considering a formal nonacademic grievance must contact the Dean for Student Affairs for review of applicable policies and procedures. If the allegation is one of sexual harassment/assault, the Dean for Student Affairs will engage the HSC’s Director of Equal Employment Opportunity/Affirmative Action Office. (Please see additional related policies “General Regulations and Requirements, Sexual Assault Policy” at www.uthscsa.edu/eeo/harassment.asp).

The student must file a formal written grievance with the Dean for Student Affairs within five business days from the alleged incident. A student initially attempting informal grievance must file the formal grievance, in writing, within five business days of the 30 calendar days allowed for informal resolution. The formal grievance must include a detailed description of the grievance and a proposed resolution, if possible. If the grievance involves/accuses HSC non-medical students or employees, the Dean for Student Affairs will facilitate engagement with appropriate advocacy/supervisory institutional authorities. Copies of the written grievance will be made available to named parties and the appropriate advocacy/supervisory institutional authorities. The Dean for Student Affairs (and appropriate institutional authorities noted above) may, at her/his discretion, hold discussions with or without the involved/accused individual(s) to hear and resolve the grievance, schedule a meeting between the student and the involved/accused individual(s) and/or involve other parties in facilitating a resolution of the grievance. This process will be afforded 30 calendar days from receipt of the written grievance to resolve the grievance, providing the aggrieved student a written summary of resolution.

If the aggrieved student is dissatisfied with the resolution, he/she may file a formal written appeal with the Dean of the SOM within 5 business days of the decision. The decision of the Dean of the SOM is final. The Dean of the SOM has 30 calendar days to provide a written decision to the student and to the Dean for Student Affairs. Within 5 business days of the Dean of the SOM’s decision, the student may file a written appeal to a higher administrative institutional official, but on for procedural concerns (See “Medical Student Nonacademic Grievance Procedures” for details).
J. Academic Advising

Academic, career and personal advising resources for medical students include: the Vice Dean for Undergraduate Medical Education, Deans for Student Affairs, Module, Clerkship and/or Course Directors, Veritas Career Advising Leaders/Groups, the UT Health Science Center at San Antonio (HSC)'s Counseling Services and the Office of Student Life Peer Advising Team. Additionally, academic and career advising activities are planned at specific junctures over the four year medical education program and delivered in many different formats.

Veritas is the School of Medicine’s student advising system. Each incoming student is randomly assigned to one of 20 Veritas Groups. Each Veritas Group is led by a clinical faculty member and three 4th year medical students (“Mentors in Medicine=MiMs”) and two 2nd year medical students (Veritas Peer Advisors=VPA”). The groups are clustered into five societies. The structure of Veritas allows a cohesive interclass system in which students receive consistent academic, career and personal advising in the same Veritas groups over the four years of medical school. For career advising one resource accessed heavily is the AAMC “Careers in Medicine” program.

For students who encounter academic difficulty, the module, clerkship or course director is typically the first line of consultation. Deans for Student Affairs, in consultation with the Vice Dean for Undergraduate Medical Education, monitor students’ progress through centralized processes in order to identify problems as early as possible and provide guidance accordingly.

A primary mission of the medical education program is to promote the retention and advancement of medical students throughout the four year curriculum. As such, student services and support include a pre-matriculation program, individual and group tutoring, large-group review sessions for pre-clinical courses, a USMLE preparation course, consultation services for study skills, time management issues, test-taking assistance, and more. The HSC’s Counseling Services provides aid, support and counsel to students dealing with the complex personal, social and academic demands of medical school. The Office of Student Life Peer Advising Team helps new students transition socially and academically into the HSC’s community.
K. Guidelines for Clinical Activities by Medical Students

Medical students rotate in the clinical setting to achieve competencies in all aspects of patient care to include the following: obtaining patient histories, performing thorough physical examinations, formulating differential diagnoses, learning to make decisions based on appropriate laboratory and radiological studies and procedures, interpreting results of special studies and treatment, communicating with patients on all aspects of disease and prognosis and collaborating with members of the health care team.

To this end, the medical student may participate in activities which include the following:

- Patient contact for obtaining a medical history, performing a physical exam, and following the inpatient and/or outpatient course
- Patient medical record review, including laboratory reports, x-ray reports, etc.
- Performance of appropriately supervised procedures as authorized by the patient’s attending physician. The student may perform procedures (such as venipuncture) for which the student is trained and deemed competent, without direct supervision.
- Performance of basic laboratory studies such as urinalysis, under appropriate supervision and review
- Writing orders for specified patients, based on student clinical preparedness and graduated responsibility. All of the orders written by a medical student must be reviewed and countersigned by the responsible resident or attending physician before forwarding to the nursing service.
- Writing patient progress notes in the medical chart which must be reviewed and countersigned by the responsible resident or attending physician

Medical students CANNOT write orders independently, without review and countersignature by the responsible resident or attending physician. Medical students CANNOT give verbal orders. Medical students CANNOT be in the primary lines of communication in the critical value reporting process. Medical students CANNOT have primary responsibility for communication of vital patient related information to the patient or their family members.
L. Medical Student Duty Hours Policy

Duty Hours Policy for Clinical Years

i. Students will have a limit of 80 duty hours per week, with in-hospital hours during call from home counted

ii. In recognition that many rotations end on a Friday and there is a weekend off between rotations, the following are minimum days off on rotations, with the distribution of the scheduled days off at the discretion of the clerkship or course director:

- 1 day off on a 2 week rotation
- 2 days off on a 3 week rotation
- 3 days off on a 4 week rotation
- 5 days off on a 6 week rotation
- 7 days off for an 8 week rotation
- 9 days off on a 10 week rotation
- a day off is one full (24-hour) day
- a day absent counts as a day off

iii. Call will be scheduled no more than every third night

iv. There is a limit of 30-hours on continuous duty

v. There must be a 10-hour minimum rest between duty periods (this does not apply to night or weekend call)

vi. Students will be educated about fatigue and fatigue management

vii. Students may report duty hour violations to the 24/7/365 hour hotline: 1-800-500-0333. (All calls are treated confidentially and no self-identification is necessary)

viii. Clerkship directors and course directors are responsible for the enforcement of this policy

Policy adopted by the Curriculum Committee August 2007 and appended in May 2013.
M. **Required Attire**

During the pre-clinical curriculum, students spend most of their time in lectures, small group sessions, laboratories, or other activities that do not involve patient contact. At such times, students are expected to dress comfortably, but without detracting from attentiveness and learning. When patients are present, either in a clinical setting or in the classroom, students are expected to dress professionally and to wear the white jacket with the school logo and the required student badge. Module directors should be consulted about proper attire in specific circumstances.

In the clinical setting, students are expected to dress as health care professionals, wearing both the white jacket with the school logo and the required student badge. On clinical rotations footwear must be professional; open toe footwear is never appropriate because it does not offer adequate protection from biohazards. Clerkship and course directors should be consulted if there is a question about appropriate attire.

All students are required to wear the student badge at all times in a visible manner in all pre-clinical and clinical settings.
N. Providers of Care to Medical Students

i. Purpose:

a. To assure that academic evaluation/progression are independent from confidential or protected health information.

b. To ensure that individuals charged with academic evaluation/progression base their decisions on agreed upon performance measures.

c. To assure that medical students can obtain and receive private and confidential medical care from the Student Health Center and/or psychological/psychiatric care from the Counseling Services, and that health care providers of sensitive medical or psychological/psychiatric care to medical students have no role in evaluation/progression of medical students through the academic curriculum.

ii. Policy:

The UT School of Medicine at San Antonio (SOM) is committed to providing an educational environment that is supportive and respectful to its faculty, staff and students. This policy is established to ensure that students are evaluated based on common agreed upon performance measures that are independent of confidential or protected health information. This is essential to ensure that student academic performance is evaluated properly and to ensure that students are not discouraged from seeking medical and/or psychological/psychiatric care that is held in the strictest standards of patient privacy and confidentiality, without concern for consequent adverse actions or repercussions.

Students and health care providers should follow these procedures to make certain that the appropriate care is sought and provided.

*Health care professionals who provide medical and/or psychological/psychiatric care to medical students must:*

a. have no role in the formal academic or professionalism evaluation of medical students at the present or future time.

b. have no role in advancement/progression/graduation of medical students at the present or future time.

c. recuse himself/herself from the formal academic or professionalism evaluation of medical students and from academic or professionalism decisions of advancement/progression/graduation of medical
students, if a dual relationship with medical students is anticipated or is discovered, and, when appropriate and without breaching confidentiality, alert a Dean for Student Affairs immediately.

_Students should:_

a. seek medical care through the Student Health Center (Room 1.422 Nursing Building). This medical care is usually provided by Registered Nurses or Advanced Nurse Practitioners under the supervision of the Student Health Center Medical Director. The health care providers in the Student Health Center may refer medical students to other academic or community health care providers for further/follow-up care.

b. seek psychological/psychiatric care through the Counseling Services (Room 101F Medical School). A multidisciplinary staff, who is not involved in academic or professionalism evaluation and/or decisions of advancement/progression through the curriculum, provides evaluation and short-term treatment including counseling, psychotherapy, and medication management when necessary to medical students with mental health, situational, social, or academic concerns. The health care providers in the Counseling Services may refer medical students to other academic or community health care providers for further/follow-up care.

c. inform staff in the Student Health Center and the Counseling Services that they are students at the SOM.
O. Student Employment

Because of the intensity of the medical curriculum, students are encouraged to refrain from outside employment during the academic year. Students who feel employment is essential are advised to consult with a Dean for Student Affairs before accepting employment offers. Some opportunities for employment are available for students in good academic standing such as tutoring through the Office of Undergraduate Medical Student Education.
P. Student Governance

Class officers are responsible for the management of class activities and are the official class representatives in interaction with the administration of the UT School of Medicine at San Antonio (SOM) and UT Health Science Center at San Antonio (HSC). In addition to the usual slate of officers, two students from each class are elected as representatives to the Student Government Association.

Elections are held in the spring to choose officers and representatives for the next academic year. In the case of the first year class, elections occur in October. Elections are supervised by the Office of Student Affairs.

Committees of the SOM and the HSC (both standing and ad hoc) have student representation. Appointments to SOM committees are approved by the Deans in the Office of Undergraduate Medical Education and those to HSC committees by the Vice President for Academic, Faculty and Student Affairs upon recommendation from the Deans for Student Affairs.

The following committees have student representation:

- SOM Committees:
- Admissions
- Curriculum
- Student Affairs Advisory Committee
- HSC Committees:
- Campus Health and Wellness
- Computing Resources
- Infection Policy and Education
- International Relations
- Library
- Parking & Traffic Safety
- Student Governance Association
- Student Health Advisory
Q. **Organization of Student Representatives**

The Organization of Student Representatives (OSR) is the organizational entity of the Association of American Medical Colleges (AAMC) which deals specifically with medical student issues. This is a national organization that addresses issues common to students from all medical schools. Individual input from each school is through the class representative to the OSR. That representative is selected through the Office of Student Affairs. The selection of each class representative will occur during the second semester of the first year. Each representative serves through the fourth year.
R. Medical Student Organizations

Medical Student Organizations must be approved by the Office of Student Affairs and managed by the Office of Student Life in Student Services. Contact the Office of Student Life for more information on the varied organizations in which students can participate.
S. Scholarships

Scholarship assistance may be available within the UT School of Medicine at San Antonio (SOM). Scholarships are awarded based on need, merit, or a combination of both. The SOM determines the selection of scholarships based on criteria established by the donor. Scholarships may be renewable depending upon academic performance and/or stated scholarship conditions.

The student will apply for scholarships online through the student portal. The student must have filed the Free Application for Federal Student Aid in order to be considered for scholarships. The SOM Scholarship Committee will make recommendations for selection of candidates for scholarships; these recommendations will be forwarded to the Office of Financial Aid and Veterans Affairs for processing to student accounts. If the student receives a scholarship, after he/she has been fully awarded, the Office of Financial Aid and Veterans Affairs may need to reduce other aid on the account in order to prevent an over-award of federal funds.