



**HEALTH**  
UNIVERSITY OF UTAH



## STUDENT HANDBOOK

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# General Information

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## Introduction

The Student Handbook is the official document of policies, procedures, and resources of the University of Utah School of Medicine. All medical students must be familiar with its contents. Every effort will be made to continuously provide students accurate and current Handbook information, but the School of Medicine reserves the right to change, without notice, policies, procedures, programs, and other matters as circumstances dictate. Current policies, procedures, and standards of the Handbook will apply to all current students regardless of their matriculation date.

## Our Mission

The University of Utah School of Medicine serves the people of Utah and beyond by continually improving individual and community health and quality of life. This is achieved through excellence in patient care, education, and research. Each is vital to our mission and each makes the others stronger.

- We provide compassionate care without compromise.
- We educate scientists and health care professionals for the future.
- We engage in research to advance knowledge and well-being.

## Medical Student Code of Ethics

The medical profession has long subscribed to a body of ethical statements developed primarily for the benefit of the patient. As a member of this profession, a physician must recognize responsibility not only to patients, but also to society, to other health professionals, and to self. As future physicians, students should adhere to the Code of Student Rights and Responsibilities and the Medical Student Code of Ethics below as standards of conduct, which define the essentials of honorable behavior for future physicians.

Accordingly, academic policy extends to any case of alleged misconduct by a student in the School of Medicine whenever the alleged misconduct raises the question of the student's suitability as a member of the medical profession.

<http://www.regulations.utah.edu/academics/6-400.html>

### *Medical Student Code of Ethics*

*As a student at the University of Utah School of Medicine, I understand that it is a great privilege to study medicine. Over the course of my training, I will assume extraordinary responsibility for the health and well-being of others. This undertaking requires that I uphold the highest standards of ethical and compassionate behavior. Accordingly, I have adopted the following statement of principles to guide me throughout my academic, clinical, and research work. I will strive to uphold both the spirit and the letter of this code in my years at the University of Utah School of Medicine and throughout my medical career.*

## Honesty

- I will maintain the highest standards of academic honesty
- I will truthfully represent myself as a medical student at all times to patients and healthcare providers
- I will neither give nor receive aid in examinations or assignments unless such cooperation is expressly permitted by the instructor
- I will be truthful with patients and will report accurately all historical and physical findings, test results, and other information pertinent to the care of the patient
- I will conduct research in an unbiased manner, report results truthfully, and appropriately credit ideas developed and work done by others

## Confidentiality

- I will regard confidentiality as a central obligation of patient care
- I will limit discussions of patients to members of the health care team in settings removed from the public ear (e.g. not in elevators, hallways, cafeterias, etc.)
- I will not divulge patient information or breach patient confidentiality in any venue, including social media

## Respect for Others

- I will uphold a classroom atmosphere conducive to learning
- I will interact with instructors and peers in a considerate and cooperative manner
- I will treat patients and their families with respect and dignity both in their presence and in discussions with other members of the health care team
- I will interact with patients in a way that ensures their privacy and respects their modesty
- I will interact with all members of the health care team in a considerate and cooperative manner
- I will not tolerate discrimination on the basis of race, gender, religion, sexual orientation, age, disability, or socioeconomic status
- I will judge my colleagues fairly and attempt to resolve conflicts in a manner that respects the dignity of every person involved

## Responsibility

- I will conduct myself professionally--in my demeanor, use of language, and appearance--in the presence of patients, in the classroom, and in health care settings
- I will set patient care as the highest priority in the clinical setting
- I will recognize my own limitations and will seek help when my level of experience is inadequate to handle a situation on my own
- I will not use alcohol or drugs in any way that could interfere with my clinical responsibilities
- I will not use my professional position to engage in romantic or sexual relationships with patients or members of their families
- I will participate fully in the enforcement of this statement of principles. I realize that failure to take appropriate action is itself a violation of the principles

### Expectations of Faculty, Residents, and Fellows

- *I have the right to expect clear guidelines regarding assignments and examinations, as well as to have testing environments that are conducive to academic honesty*
- *I cannot be compelled to perform procedures or examinations which I feel are unethical or beyond the level of my training*
- *I have the right to not be harassed and to not be subjected to romantic or sexual overtures from those who are supervising my work*
- *I have the right to be challenged to learn, but not abused or humiliated*

### Medical School Tuition and Fees

Current tuition rates and a breakdown of fees per semester can be found at:

<http://fbs.admin.utah.edu/download/income/Graduate/SM.pdf>

### Medical School Courses

Only matriculated University of Utah dental students, medical students, and graduate students in approved programs that require medical school course/s are permitted to enroll in School of Medicine course offerings. No student from any other medical school, whether it is a US or international medical school, may participate in courses, or the third year core courses, or clerkships regardless of openings in individual courses or clerkships that may exist. Students from other medical schools may participate in the senior elective offerings through the AAMC Visiting Student Learning Opportunities (VSLO). For information about the School of Medicine Visiting Student Program see:

<http://medicine.utah.edu/studentaffairs/visiting/index.php>

### The Dean's Office

The Dean's Office, under the direction of the Dean of the School of Medicine, oversees all issues relating to undergraduate medical education.

### Admissions

This office, under the direction of the Assistant Dean of Admissions, is responsible for accepting the incoming class by coordinating the School of Medicine application process from initial review to final acceptance and matriculation.

<http://medicine.utah.edu/students/programs/md/>

### Curriculum

This office, under the direction of the Associate Dean of Curriculum, oversees the integrated medical education program that fully prepares students to take on their increasingly complex roles as future physicians and physician-scientists in training. This office plans and implements the educational schema of the medical school curriculum, including aspects of assessment and evaluation; collaborates with faculty, staff, and students on curricular issues; and supports the highest attainment of medical education, scholarship, and professionalism in accordance with the School of Medicine's educational mission.

<http://medicine.utah.edu/medicaleducation/>

## Inclusion and Outreach

This office, under the direction of the Associate Dean of Inclusion and Outreach (OIO), oversees the School of Medicine's community health and service learning programs. The Office is committed to enhancing medical student educational experiences and academic development, providing a hands-on community context for students' didactic and clinical educational experiences.

<http://medicine.utah.edu/outreach/>

## Student Affairs

This office, under the direction of the Associate Dean for Student Affairs, meets medical students' individual needs as they relate to wellness, matriculation, academic progress and graduation. Services offered by the Office for Student Affairs are designed to assist students in achieving their educational goals, and include student wellness activities, financial aid counseling and processing; registration and course scheduling, personal counseling, career exploration and mentoring, professional development, and residency application assistance.

<http://medicine.utah.edu/students/current-students/student-services/>

## Wellness Program

This office, under the direction of the Associate Dean for Student Affairs, aims to educate and promote knowledge and behavior that fosters the emotional and physical wellbeing of medical students, as well as provide free, timely, and confidential services to medical students, their partners, and families.

<http://medicine.utah.edu/students/current-students/wellness/>

## Academic Success Program

The Academic Success Program, under the direction of the Senior Director of the Academic Success Program, provides resources to help students maximize their academic performance. Resources include academic coaching, academic success workshops, board prep programs, tutoring services, study materials, testing accommodations, and practice exams.

<http://medicine.utah.edu/students/current-students/student-services/>

## Global Medical Education

This office, under the direction of the Associate Dean for Student Affairs, serves as a comprehensive resource to meet the global health education needs of medical students. We offer a wide array of services and education activities, including: 1) mentorship and career planning, 2) elective global health courses at the University of Utah School of Medicine, 3) elective clinical clerkships and research courses at our international partner sites (for University of Utah medical students), 4) elective clinical clerkships at the University of Utah (for medical students from our international partner sites), 5) international travel assistance & planning for medical students.

<http://medicine.utah.edu/globalhealth-education/>



# Curriculum

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## Curriculum Overview

The School of Medicine has determined that a broad-based, undifferentiated and patient-oriented curriculum is critical for developing the knowledge and skills of future physicians. The School seeks to graduate students with the tools necessary to function in wide ranging, diverse clinical settings and with the ability to render a broad spectrum of patient care. The four-year program of medical education constitutes an introduction to a continuously and rapidly changing discipline. The mastery of medical knowledge and technical skills requires a life-long commitment to self-education. The medical school curriculum is designed to optimally prepare medical students for residency training. The organization and longitudinal, integrated components of the medical school curriculum are as follows:

## Curriculum Organization

### Medical Sciences

The knowledge upon which the practice of medicine is based, including traditional basic science, organ system science, and clinical manifestations of disease. Learning modalities include lectures, laboratory experiences, team based learning, clinical case discussions, and independent study targeted to meet learning objectives.

### Medical Arts

The contextual practice of medicine taught through such topics as Medicine and Society, Cultural Competence, Professionalism, Ethics, Communication Skills, Hidden Bias, the Doctor-Patient Relationship, Physician Development, Medical Economics, Medical Systems, and Medical Humanities. Learning modalities include lecture, clinical case discussions, and clinical experiences targeted to meet learning objectives.

### Clinical Medicine

The skills of practicing medicine include history taking, physical examination, critical thinking, self-study, use of medical informatics, teaching and advocating for health promotion, working in health care teams, epidemiologic investigation and reporting. Learning modalities include the use of standardized and simulated patients, electronic resource instruction, computer-aided simulation, and participation in increasingly complex patient encounters.

## School of Medicine Dual Degree Programs

### MD/PhD Program

The dual degree MD/PhD program is designed to provide an outstanding education to prepare students for a career as physician-scientists in academic medicine at a medical school or research institute. The program is structured to provide rigorous scientific training and clinical educational experiences to develop students' clinical acumen and investigative skills. At least three additional years of work beyond the standard four year medical school curriculum are required to complete the MD/PhD program. Most medical students are

accepted into the MD/PhD program before matriculation, but interested students are invited to apply to the program during their first year or second year of medical school.

<http://medicine.utah.edu/mdphd/>

### MD/MPH and MD/MSPH Programs

The dual degree MD/MPH (Master of Public Health) and MD/MSPH (Master of Science in Public Health) degrees combine clinical training with the perspective and skills of public health and preventive medicine. The MD/MPH degree requires an additional year of study beyond the standard four year medical school curriculum with 45 credit hours of coursework. The MD/MSPH is a research-based degree and requires an additional 55 credit hours of coursework and a completion of a formal research thesis. The MSPH requires an additional 1.5 years of study beyond the standard four year medical school curriculum.

<http://medicine.utah.edu/dfpm/public-health/programs/master-public-health/>

### MD/MS BioInnovate Track

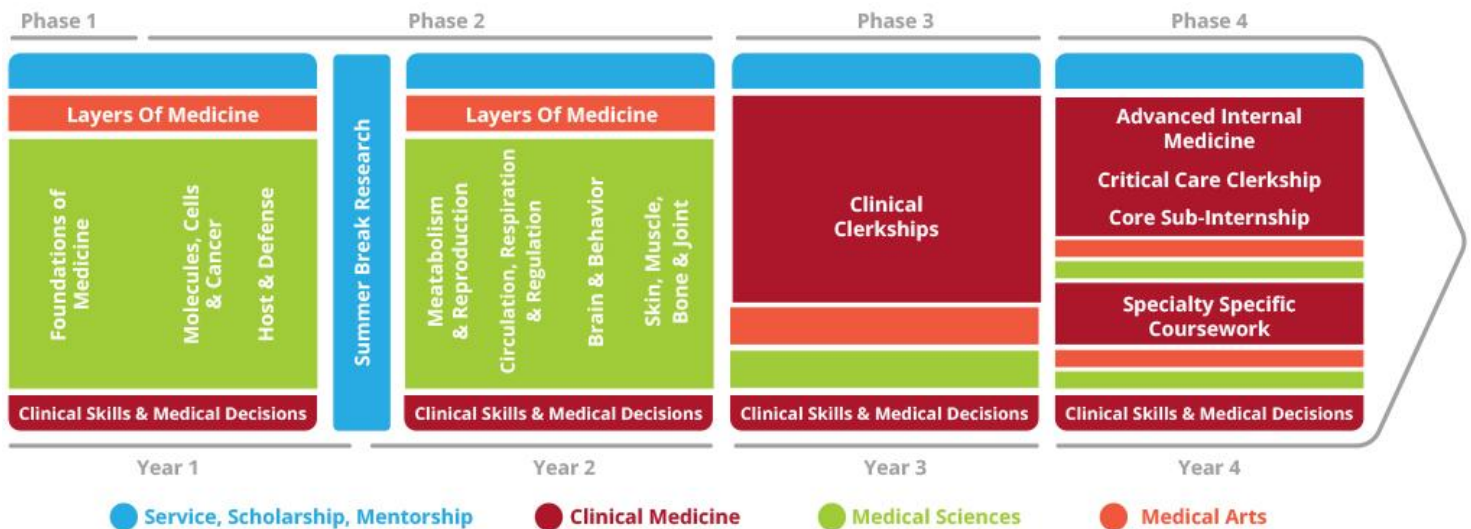
BioInnovate is a fully-accredited Master of Bioengineering degree track that aims to provide a comprehensive biomedical device design and entrepreneurship training program through the use of a multidisciplinary, hands-on teaching approach in classroom, clinical, and laboratory settings. Students will be trained in clinical problem identification, medical device innovation, and commercial translation. This track builds on a collaborative relationship between the College of Engineering, School of Medicine, and Tech Ventures and creates a unique interface that moves new ideas towards development and commercialization.

<http://www.bioinnovate.utah.edu/index.html>

### MD/MBA Program

The combined MD/MBA program is offered through a joint program with the School of Medicine and David Eccles School of Business. One year beyond the standard four year medical school curriculum is required to complete the MD/MBA program. The MBA requires 50 credit hours of coursework which is concentrated in the fourth year with additional courses integrated into the fifth year. Further information can be obtained from Dr. Brad Poss at [brad.poss@hsc.utah.edu](mailto:brad.poss@hsc.utah.edu)

# Curriculum Structure



## Educational Phases

There are four sequential phases of the curriculum with an integrated emphasis on each of the three components of medical education.

Official Academic Calendars can be found at: <http://medicine.utah.edu/students/current-students/calendars-events/>

### Phase 1 (ca. 4 months)

- **Clinical Medicine:** Students learn the basics of history taking, physical examination and other clinical skills
- **Medical Arts:** Confidentiality, professionalism, accountability, ethics, doctor patient relationship, HIPAA, medical informatics, medical record systems
- **Medical Sciences:** Overview of body systems, limited components of anatomy, biochemistry, nutrition, histology, immunology, pathology, pharmacology, and physiology to establish a foundation for Phase 2 instruction

### Phase 2 (ca. 18 months)

- **Clinical Medicine:** Ambulatory primary care continuity experiences, students' progress towards ability to make differential diagnosis
- **Medical Arts:** Learning modalities emphasize ethics, professionalism, medical informatics, medical economics, medical systems, etc.
- **Medical Sciences:** Courses emphasize the clinical application of the basic sciences

### Phase 3 (ca. 12 months)

- Students participate in inpatient and tertiary care learning activities that emphasize clinical medicine. Learning activities occur in the core clinical courses. Students rotate through Family Medicine, Internal Medicine, Obstetrics and Gynecology, Pediatrics, Psychiatry, Neurology, and General Surgery
- Medical Science and Medical Arts teaching are integrated into each Phase 3 clerkship

### Phase 4 (ca. 12 months)

- Students develop advanced skills through their core sub-internship(s), a critical care rotation, the advanced internal medicine course and elective course work relevant to their career specialty interests. The School of Medicine offers career mentoring necessary to prepare fourth year medical students for their internship

## Student Feedback

Student feedback is an important aspect of curriculum quality improvement. Student feedback on the curriculum is gathering from end-of-course surveys, instructor surveys, and periodic focus groups. Students are required to complete all assigned feedback surveys specific to a course by the due date. All surveys are administered online and student responses are anonymous. Students may be randomly selected to participate in one focus group during medical school. Any notification of a focus group is provided to students one month in advance.

Please refer to the resource section of each course Canvas page for student feedback survey due dates.

## Grading System

The official medical student transcript is a pass/fail/incomplete record maintained by the University of Utah's Registrar Office. For required courses in Phase 3 and Phase 4, the School of Medicine also assigns honors/high-pass/pass/fail/incomplete grades on the internal, unofficial transcript. The internal transcript is maintained by the Office of Student Affairs. The internal transcript will be used to compose the Medical Student Performance Evaluation (MSPE). Both the official University of Utah and the internal School of Medicine transcripts are submitted to the Electronic Residency Application Service (ERAS) when students apply for residency training positions.

Criteria for assigning grades reside with individual course directors. Each course syllabus includes grading criteria.

## Phase 1 and Phase 2

During Phase 1 and Phase 2, grade assignments are generally based on numerical scores. Course Directors will maintain records of students' numerical scores on learning activities. Only P, F, or I (pass, fail, or incomplete) grades are reported to the Registrar.

## Phase 3 and Phase 4

Students participating in Phase 3 and 4 learning experiences will be evaluated for their fund of knowledge, clinical judgment, and their ability to integrate and apply learned concepts in the context of patient care. Professional qualities being evaluated in Phase 3 and 4 include, but are not limited to, high moral and ethical standards, intellectual curiosity, concern and respect for the patient, reliability, integrity, professional relationships, professional appearance, judgment, dependability, emotional stability, ability to recognize one's own limitations, and ability to function under pressure. All of these factors are considered when assessing overall performance in Phase 3 and 4 learning experiences. Individual course syllabi specify course goals, requirements, and grading procedures.

## Appealing a Score or an Individual Assessment

Final course grades are composed of scored and pass/fail assessments in the course (e.g. quizzes, assignments, etc.). Scored components for each course are listed in each the course syllabus. Scored components may include but are not limited to assignments, log entries, presentations, OSCE, summative global assessment and/or narrative comments

If a student feels a score or an individual assessment has been decided in an arbitrary or capricious manner s/he may appeal the assessment score to the course director/s up to three business days after the grade/score is posted. The course director(s) will have three business days to respond to the appeal. If a student wishes to challenge a course director's decision, s/he may appeal to the Associate Dean of Curriculum. The student must submit a one page written appeal summary and schedule an appointment to discuss the written appeal with the Associate Dean of Curriculum within three business days of receiving the course director's decision. The Associate Dean of Curriculum will render a final decision in the matter.

## Appealing a Final Failing Grade in a Course

- See Policies and Procedures - Process for Disputing a Final Failing Grade on page 43.

## Student Attendance Intent, Goals, & Expectations

### Phases 1 and 2

- Medical students are expected to participate in the medical school curriculum
- Medical school is a professional school. Professionals are concerned about their colleagues and strive to make sure that they are successful and practicing to the highest possible standards. Students of the profession should likewise be interested in their colleagues' success and should be the first line of support and assistance during times of struggle. This is hard to do if students do not know who their colleagues are or how they are doing
- Teamwork is an essential characteristic of the health care provider of today and of the future. Attendance and participation facilitates a culture of collaboration and teamwork

- Diversity is a driver of excellence in medical education, and facilitates critical thinking and decision making, but only when people with diverse backgrounds actually have contact with one another.
- Medical school requires students to master a vast amount of content, in addition to developing critical thinking and teamwork skills. Preferred settings for mastering content differ between students; therefore, our Phase 1 and 2 curricula provide flexibility. However, most other types of learning require that students are present. Therefore, unless a student is too sick or has an emergency, s/he should be present for all activities labeled *Expected Attendance* in a course syllabus and calendar. For these activities it is students' professional responsibility to participate, just like it is a physician's professional responsibility to attend clinic when s/he is scheduled. Lack of participation in these activities will be considered a professionalism violation.

## Phases 3 and 4

The University of Utah School of Medicine has created a rigorous clinical clerkship curriculum that requires all medical students to successfully complete the seven Phase 3 Clerkships: Family Medicine, General Surgery, Internal Medicine, Neurology, Obstetrics & Gynecology, Pediatrics, and Psychiatry. The Phase 3 Subcommittee has established attendance expectations for these courses that acknowledge the critical role of physical presence, team engagement, and authentic clinical encounters in the education of medical students. The attendance expectations for the clerkships are therefore that students should expect to fully participate in clerkship activities as described in each clerkship's syllabus and consistent with Clinical and Educational Work expectations.

Students who must miss scheduled clerkship activities remain responsible for required assignments, content mastery, and completion of expected clinical experiences.

### Phase 3

In response to the approved Phase III Attendance Expectations, the Phase 3 Subcommittee developed a common approach to implementing attendance expectations across all clerkships:

- Regardless of reason, a student cannot pass a clerkship with greater than 1 day absent from Neurology, 1.5 days absent from Psychiatry/OB-GYN/Pediatrics/Family Medicine, or 2 days absent from IM/Surgery in excess of the scheduled duty free days. This maximum allowed absence criteria does not entitle students to additional 'days off' from the clerkship experience; poor student judgment in choosing to be absent from clerkship experiences would be expected to be reflected in the preceptor evaluations and MSPE paragraphs.
- Clerkship directors, coordinators, residents, and teams must all be informed by the student of anticipated absence.
- Pregnancy related concerns and major illness or personal hardship should be referred to the Associate Dean of Student Affairs for consideration of Title IX compliance and arranging potential leaves of absence.

- Absence for birth of child can often be arranged in advance where possible with the clerkship director, at a student-to-student level, and with the team if absence does not disrupt expected learning experiences or exceed the maximum allowable absences for the clerkship. Birth of child absence should not exceed three days using trades to combine clinical duty free days.
- Absence for presentation at a conference can often be arranged in advance with the clerkship director, at a student-to-student level, and with the team if absence does not disrupt expected learning experiences or exceed the maximum allowable absences for the clerkship.
- Other planned absence for major events can often be worked out in advance with the clerkship director, at a student-to-student level, and with the team if absence does not disrupt expected learning experiences or exceed the maximum allowable absences for the clerkship.
- Whenever possible, non-emergent medical care should be scheduled on days off and during calendar breaks.
- Absences for family or personal emergency may not exceed the maximum allowable absences for the clerkship. Critical or required experiences or assignments missed for family or personal emergency must be rescheduled.

#### Phase 4 Required Clinical Coursework

The University of Utah School of Medicine has created a rigorous advanced clinical curriculum that requires all medical students to successfully complete four-week experiences in each of Advanced Internal Medicine, a Core Sub-Internship, and a Critical Care Clerkship. Recognizing that most students will complete all three of these experiences during the fourth year of their curriculum that coincides with the USMLE 2 CK and CS examinations and the residency application and interview period, the Phase 4 Subcommittee has established attendance expectations for these courses that balance the need for physical presence during the courses with flexibility to accommodate exam and interview obligations. The attendance expectations for these courses are therefore that:

- Students should expect to fully participate in course activities as described in each course syllabus and consistent with Clinical and Educational Work expectations.
- Each student is allowed a maximum of three additional days away from the course to participate in residency program interviews and/or sit for USMLE Step 2 Clinical Knowledge and Clinical Skills testing. The Course Director and Clinical Site Director must approve these absences at least 48 hours in advance. Before requesting use of these additional days away from the course, students should first use the clinical and educational work free days outlined in the Clinical and Educational Work expectations for interviews and examinations.
- Regardless of absence, students remain responsible for required assignments, content mastery, and completion of required clinical experiences.

#### Outside Employment

Students are strongly counseled against outside employment during medical school. Students on probation are forbidden from participation in outside employment.

## Medical Student Documentation

### Introduction and Background

The University of Utah School of Medicine Curriculum Committee has established the vision, goals, and educational objectives that require medical student graduates of the University of Utah School of Medicine to have demonstrated knowledge and proficiency in effectively using the medical record to manage patient care and participate as contributing members of the health care team. This should include facility in documenting clinical encounters, order entry and retrieval, and managing clinical data and information.

These educational objectives are consistent with the *AAMC Core Entrustable Professional Activities of Entering Residents* (2013), the *AAMC Medical School Objectives Project* (1998), and the *AAMC Project on the Clinical Education of Medical Students* (2004, 2005, and 2008).

### General Standards for all Clinical Placement Sites

- Student Medical students should receive training on how to effectively use the medical record and should receive feedback from their supervisors on their documentation, order entry, and information management.
- Medical students should document their clinical encounters in the medical record, enter patient orders, and retrieve clinical information.
- Medical student documentation should be identifiable as such but should not be hidden or removed from the medical record.
- Clinical faculty who supervise medical students should receive training on how and where students may document their clinical encounters, how student documentation may be used or referenced in the clinical care of patients, and how to provide feedback to students on their documentation.
- Attending physicians should submit documentation for billing that accurately reflects their own services performed or those services that can be appropriately referenced according to CMS guidelines. Attending physicians should receive training on the strengths and limitations of the various methods for creating billable documentation (e.g. dictation, transcription, scribes, referencing of resident documentation, copy and edit functions, templates, preprinted forms, questionnaires, medical record macros or check lists)
- All students and providers will use their own individual logon names and passwords for clinical documentation and order entry.

### General Standards for all Clinical Placement Sites

#### Medical Students

- Medical students will receive graduated training for the Epic system prior to significant clinical experiences.
- Except where explicitly directed otherwise for specific educational objectives, medical students will enter their documentation and orders using the Epic templates and care sets specific to the care environments and encounter types of the patients to whom they have been assigned.



- Medical students will document their clinical encounters in the Student Note area of the Epic system.
- Medical students will enter orders for the patients to whom they are assigned; these orders will receive a Pending status in the Epic system until they are reviewed, edited, and initiated by their supervising residents or faculty.
- Medical students will direct supervising residents and faculty to their Student Notes and Pending Orders in the Epic system so that these residents and faculty can provide feedback on their documentation, order entry, and information management. Students will make appropriate corrections and amendments to their documentation and orders based on this feedback.

### Resident and Attending Physicians

- Supervising residents and attending physicians will receive training on accessing Student Notes and Pending Orders in the Epic system.
- Supervising residents and attending physicians will review student notes in the Epic system; they will provide feedback on required changes and may make edits, addenda, and attestations directly to the documentation. Resident and attending physicians remain responsible for ensuring that the documentation accurately reflects the services they personally performed or those services that can be appropriately referenced.
- Supervising residents or attending physicians will review, edit, provide student feedback, and as appropriate, initiate Pending medical student entered orders in the Epic system.

### Clerkship and Clinical Elective Directors

- During each Clerkship and Clinical Elective Orientation, Clerkship and Elective Directors will review the Standard Practice for Medical Student Clinical Documentation.
- Clerkship and Clinical Elective Directors will periodically review the Standard Practice for Medical Student Clinical Documentation with their Supervising Residents and Attending Physicians

### Medical Student Clinical and Educational Work

The University of Utah School of Medicine is committed to ensuring that its medical students have optimal opportunities for learning in the clinical curriculum balanced by the need for student physicians to be appropriately rested and fit to participate safely in patient care activities. To this end, the clinical duty hours expectations of Phase 3 and 4 medical students are aligned with the *2017 ACGME Common Program Requirements section VI.F. Clinical Experience and Education* for residents:

[https://www.acgmecommon.org/2017\\_requirements](https://www.acgmecommon.org/2017_requirements)

### Clinical and Educational Work Hours for Phase 3 & 4 Medical Students

- Clinical and Educational Work refers to in-house clinical and educational activities and specifically excludes independent study time necessary for success in the curriculum.
- Clinical and Educational Work hours are limited to 80 hours per week averaged over a 4-week period.
- Students must be scheduled one day free of clinical and educational work every week averaged over a 4-week period.
- Maximum continuous clinical and educational work periods should not exceed 24 hours plus a maximum of 4-hours for care transition.
- Students must have at least 14 hours free of clinical and educational work after 24 hours of in-house call.
- The minimum interval between scheduled clinical work and educational periods should be 8 hours.
- The minimum interval between in-house 24-hour call periods is every third night averaged over a 4-week period.

### Cancellation of Classes

University of Utah official class cancellations apply only to Phase 1 and 2 School of Medicine activities. Phase 3 and 4 students who have clinical responsibilities are expected to remain on service unless excused by supervisory ward or clinic personnel, or the appropriate course director. When it is necessary to cancel classes at the University of Utah, official notice will be given by the President's Office through the KUED TV (Channel 7) and KUER (FM90) and the campus alert system: <http://www.campusalert.utah.edu/>

### Phase 1 and Phase 2 Final Knowledge Exam Protocol

- Students will present ID and sign in for all course exams.
- Students must arrive on time. If a student arrives 1-9 minutes after the posted sign-in times, s/he will be allowed to sit for the exam but will be given a penalty of 10% of the exam score. Students who arrive 10 or more minutes late will not be permitted to take the exam and will receive a score of zero.
- The dress code for all exams will parallel the dress code outlined for USMLE examinations. Unauthorized personal items may not be brought into the test room. Such items include, but are not limited to: outerwear, hats, food, drinks, purses, briefcases, notebooks, pagers, watches, cell phones, recording devices, and photographic equipment. (<https://www.prometric.com/en-us/for-test-takers/prepare-for-test-day/documents/TestCenterRegulations.pdf>)
- No outside materials are allowed. This includes backpacks, cell phones, food, etc.
- All students will be assigned to a seat in the testing room.
- Students can exit the testing room once they have completed the exam.

Any student who is unable to sit for a quiz/exam due to an emergency or to extenuating circumstances must notify the Course Director(s) and Course Coordinator (see course syllabus for contact info).

# Policies and Procedures

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## Standards of Conduct

The University of Utah School of Medicine will provide an educational environment that facilitates and enforces behaviors and attitudes of mutual respect between medical school teachers (faculty, fellows, residents, and staff) and medical student learners.

Medical students have a right to support and assistance from the School of Medicine in maintaining a climate conducive to thinking and learning. University teaching reflects consideration for the dignity of students and their rights as persons. Medical student mistreatment in the course of the teacher-learner environment will not be tolerated. Examples of behaviors or situations that are unacceptable include, but are not limited to:

- Discrimination based on race, color, national origin, religion, sex, sexual orientation, gender/identity expression, protected veteran status, genetic information, age, or disability
- Sexual harassment
- Unwanted physical contact
- Verbal abuse, profanity, or demeaning comments
- Inappropriate or unprofessional criticism which belittles, embarrasses, or humiliates a student
- Unreasonable requests for a student to perform personal services
- Grading used to punish or reward a student for nonacademic activities rather than to evaluate performance
- A pattern of intentional neglect or intentional lack of communication
- Requiring students to perform tasks beyond their level of competency without adequate supervision
- Student work hour expectations that exceed resident work hour guidelines

Feedback is a necessary part of the educational process. When students fail to meet educational standards, appropriate constructive comments are necessary. An evaluation that is corrective is not, by definition, abusive. However, feedback should be given in such a way as to promote learning and avoid humiliation.

## Dissemination of the Student Standards of Conduct

The Office of Student Affairs will annually disseminate and review the Medical Student Standards of Conduct. The Standards of Conduct will be posted on the Student Affairs website, in the School of Medicine Student Handbook, discussed in detail during transition to medical school, reviewed at annual class meetings, and again at the start of each course transition.

The Office of Graduate Medical Education will include the Medical Student Standards of Conduct in all resident transition to medical school programs and sessions where instruction is provided to residents about their teaching responsibilities. The Medical Student Standards of

Conduct will be distributed to all School of Medicine faculty, University of Utah Hospital staff, and all affiliated clinical sites on an annual basis.

## Technical Standards

Prior to matriculation, all incoming students must indicate that they can perform all of the Technical Standards listed below.

### Introduction

The Liaison Committee on Medical Education, which accredits the School of Medicine, has recommended that all medical schools develop technical standards to assist them in determining whether applicants for admission to the School of Medicine or candidates seeking the degree of Doctor of Medicine are qualified to pursue a career in medicine. This document, "Qualifications for Medical School Admission, Continuation and Graduation" (Qualifications), contains the technical standards of the University of Utah School of Medicine and the procedures a candidate must follow to establish the existence of a disability and to request reasonable accommodation from the School of Medicine. The technical standards are based on guidelines produced by the Association of American Medical Colleges. This document is also published in the Student Handbook and is available to all medical students. All School of Medicine applicants who reach the interview stage are required to read the Qualifications and attest that to the best of their knowledge they are able to meet these standards, with or without reasonable accommodation, if they were to become a candidate at the University of Utah School of Medicine. The signed form is kept as a permanent part of the record of all matriculating candidates.

### Policy Statement

The School of Medicine has determined that a broad-based, undifferentiated and patient-oriented curriculum is critical for developing the knowledge and skills of future physicians. The School of Medicine seeks to graduate students with the tools necessary to function in a broad variety of clinical settings and the ability to render a wide spectrum of patient care.

Medicine is a physically and mentally demanding profession in which practitioners are asked to place the interests of their patients above their own. It requires commitment to a life of service and dedication to continuous learning. The rigorous four year medical school curriculum is where candidates begin to develop the qualities necessary for the practice of medicine. It is during this period of undergraduate medical education that the candidate acquires the foundation of knowledge, attitudes, skills, and behaviors that he or she will need throughout his or her professional career. During this period, it is critical for the School of Medicine to evaluate whether the candidate is qualified to receive the degree of Doctor of Medicine.

The School of Medicine has a responsibility to society to train physicians competent to care for their patients with critical judgment, broadly based knowledge, and well-honed technical skills. The abilities that physicians must possess to practice safely are reflected in the technical standards that follow. Thus, applicants and candidates must be able to meet these standards

and successfully complete all identified requirements to be admitted to the School of Medicine, to progress through the curriculum and ultimately, to receive the degree of Doctor of Medicine from the University of Utah School of Medicine.

The School of Medicine is supportive of the philosophy underlying Section 504 of the 1973 Vocational Rehabilitation Act, as amended, and the Americans with Disabilities Act of 2008 (collectively referred to as the "ADA"), and seeks to provide opportunities for qualified individuals with disabilities. In order to be a qualified applicant or candidate an individual must meet the below technical standards with or without reasonable accommodation. The standards have been established to ensure that an applicant or candidate has the ability to perform the requirements of the School of Medicine academic curriculum and to practice medicine safely and responsibly.

### Curriculum Requirements

In addition to the abilities specified below, candidates must be able to successfully complete, with or without reasonable accommodation, all required components of the curriculum. Candidates are expected to attend and participate in all learning experiences in classroom, hospital, clinic, and community settings.

### Tests and Assessments

In order to evaluate the competence and quality of candidates, the School of Medicine employs periodic assessments as an essential component of the medical school curriculum. Successful completion of these assessments is required of all candidates as a condition for continued progress through the curriculum. If required by the ADA, reasonable accommodation will be made in the administration of these assessments.

### Clinical Assessments

Demonstration of clinical competence is of fundamental importance to the career and curriculum progression of the candidates. Therefore, the process of faculty assessment of the clinical performance of candidates is an integral and essential part of the curriculum. If required by the ADA, reasonable accommodation will be made, however, participation in clinical experiences and the evaluation of that participation is required.

### Disability, Inclusion, and Accommodations

The University of Utah is fully committed to policies of equal opportunity and nondiscrimination. University policy prohibits any form of discrimination, harassment, or prejudicial treatment on the basis of age, race, sex, sexual orientation, gender identity/expression, color, national origin, religion, status as a person with a disability, or status as a veteran.

### Definitions and Procedures

The following are the procedures of the University of Utah School of Medicine for a candidate or student to identify a disability and seek a reasonable accommodation. In compliance with the ADA, information about an individual's disability and request for accommodation will be kept confidential and shared only as necessary to process the accommodation request.

Retaliation against an individual for requesting a reasonable accommodation for a disability or for engaging in the accommodation process is strictly prohibited. The School of Medicine can only accommodate students that have followed the outlined procedures to qualify for accommodations.

## Definitions

For purposes of this policy, a matriculated candidate becomes a medical student on the first day of class. The first day of transition to medical school week is the first day of class.

The definition of disability can be located in the Americans with Disabilities Act of 2008, with the exclusions as referenced in the Act. That definition is as follows, "an individual is disabled if he or she, 1) has a physical or mental impairment that substantially limits one or more of the individual's major life activities; or 2) has a record of such an impairment; or 3) is regarded as having such an impairment."

## Procedures

In order to establish the existence of a disability and to request a reasonable accommodation, candidates must contact the University's Center for Disability and Access ("CDA") (801-581-5020), [info@disability.utah.edu](mailto:info@disability.utah.edu) . The candidate must then follow the procedures of the CDA to document the existence and nature of the disability. The CDA will interact with the School of Medicine regarding possible accommodations but will not share the student/candidate's medical information with School of Medicine faculty or administration.

Once the need for reasonable accommodations has been established, the CDA, in consultation with the candidate and the School of Medicine, will determine the appropriate accommodations and these accommodations will be specified in a written document, signed by all parties. Documents relating to the candidate's disability will be placed in a confidential file separate from his/her academic records. The School of Medicine will then direct the appropriate course masters to provide the accommodation

## Candidate's Request for Accommodations

If a candidate refuses a reasonable accommodation that is offered through this procedure and subsequently experiences academic difficulty, the candidate will be treated as any other candidate who experiences academic difficulty.

A candidate may seek to establish a disability and request reasonable accommodation at any time before or after matriculation. A candidate should claim and establish the existence of a disability prior to the onset of academic problems. The School of Medicine shall have no obligation to remediate an academic failure resulting from a claimed disability that was not brought to the attention of the School of Medicine and addressed in a timely fashion.

University policy and state and federal law prohibit retaliation against an individual for requesting an accommodation for a disability.

All claims and proceedings under this provision will be kept confidential to the extent provided

by law and University policies. Dissemination of information related to the existence of a disability will be restricted to University administrators with a legitimate need to know this information; except as provided by law, no mention of the candidate's disability will appear in any School of Medicine correspondence with external agencies unless the candidate specifically requests such disclosure in writing.

The University of Utah has designated the following individual as its ADA/Section 504 Coordinator:

Director, Office of Equal Opportunity and Affirmative Action  
201 South Presidents Circle, Rm 135  
Salt Lake City, UT 84112  
Telephone: (801)581-8365  
Email: [oeo@uemail.utah.edu](mailto:oeo@uemail.utah.edu)

If you have questions regarding this policy or University nondiscrimination policies, please contact the Office of Equal Opportunity/Affirmative Action at 801-581-8365.

### Seeking Accommodations for a Disability

The School of Medicine seeks to educate students with the foundation of knowledge, attitudes, skills and behaviors so that they can render a wide spectrum of patient care and can function in a broad variety of clinical settings. The abilities that medical students must possess are defined in the Qualifications for Medical School Admission, Continuation and Graduation / Technical Standards above and course and course-specific technical standards published in the syllabi. Medical students must be able to meet these standards and successfully complete all curricular requirements and receive the degree of Doctor of Medicine.

Students seeking accommodations for a disability must contact the University's Center for Disability and Access (CDA). The student must follow the procedures of the CDA to document the existence and nature of the disability and to request accommodations.

<http://disability.utah.edu/>

### Core Technical Standards

#### Observation

- Observe a patient accurately at a reasonable distance and close at hand, noting non-verbal as well as verbal signals
- Visualize and discriminate findings on X-rays and other imaging studies
- Interpret digital or analog representations of physiologic phenomena, such as EKGs
- Acquire information from written documents, films, slides, videos, or other media
- Observe and differentiate changes in body movement
- Observe anatomic structures
- Efficiently read written and illustrated materials

- Observe and detect the various signs and symptoms of the disease processes that will be encountered during the training program

## Communication

- Communicate effectively and sensitively with all patients
- Communicate effectively and efficiently with all members of the health care team in oral and written English
- Communicate clearly with and observe patients and families in order to elicit information including a thorough history from patients, families, and other sources
- Accurately describe changes in mood, activity, and posture
- Perceive verbal as well as non-verbal communications, and promptly respond to emotional communications (sadness, worry, agitation, confusion)
- Communicate complex findings in appropriate terms to patients and their families
- Adjust form and content of communications to the patient's functional level or mental state
- Engage in a collaborative relationship with patients and families
- Record observations and plans legibly, efficiently, and accurately
- Complete forms according to direction in a complete and timely fashion
- Prepare and communicate precise, but complete summaries, of individual encounters
- Possess sufficient hearing for required diagnostic functions and patient care according to generally accepted community standards
- In emergency situations, understand and convey information for the safe and effective care of patients in a clear, unambiguous, and rapid fashion, including receiving and understanding input from multiple sources simultaneously or in rapid-fire sequence

## Motor

- Perform palpation, percussion, auscultation, and other diagnostic maneuvers according to generally accepted community standards
- Provide general care and emergency medical care such as airway management, placement of intravenous catheters, cardiopulmonary resuscitation, and application of pressure to control bleeding.
- Respond promptly to medical emergencies within the training facility
- Not hinder the ability of co-workers to provide prompt care
- Perform basic diagnostic and therapeutic procedures (e.g. venipuncture, phlebotomy, intravenous line placement and administration of intravenous medicines, maternity care, etc.)

## Cognitive

- Demonstrate clinical reasoning and problem solving
- Identify significant findings from history, physical exam, and laboratory data
- Perceive subtle cognitive and behavioral findings and perform a mental status evaluation
- Provide a reasoned explanation for likely diagnoses
- Construct an appropriate diagnostic plan



- Prescribe appropriate medications and therapy
- Recall and retain information
- Deal with several tasks or problems simultaneously
- Identify and communicate the limits of their knowledge to others
- Incorporate new information from peers, teachers, and the medical literature in formulating diagnoses and plans
- Show good judgment in patient assessment, diagnostic, and therapeutic planning

## Social and Behavioral

- Maintain a professional demeanor
- Maintain appropriate professional and ethical conduct
- Be able to function at a high level in the face of long hours and a high stress environment
- Develop empathic relationships with patients and families while establishing professional boundaries
- Provide comfort and reassurance where appropriate
- Protect patient confidentiality and the confidentiality of written and electronic records
- Possess adequate endurance to tolerate physically taxing workloads
- Flexibly adapt to changing environments
- Function in the face of uncertainties inherent in the clinical problems of patients
- Accept appropriate suggestions and criticisms and modify behavior
- Give and accept criticism appropriately and without prejudice

## Area Specific Technical Standards

### Internal Medicine:

#### Observation

- Possess adequate visual acuity so as to be able to perform the procedures required in an ACGME accredited internal medicine residency program

#### Motor Function

- Perform diagnostic and therapeutic procedures required in ACGME-accredited internal medicine residency programs, including advanced cardiac-life support, abdominal paracentesis, arterial puncture, arthrocentesis, central venous line placement, lumbar puncture, nasogastric intubation, Pap smear and endocervical culture, thoracentesis, etc.

### Neurology:

#### Communication

- Possess sufficient sight for required visual assessment of physical findings and function and imaging studies for required diagnostic functions and patient care according to generally accepted community standards

#### Motor

- Perform testing of muscle strength

## Obstetrics and Gynecology:

### Observation

- Observe physiologic conditions

### Motor

- Perform palpation, percussion, auscultation, speculum and pelvic examination, and other diagnostic maneuvers

## Pediatrics:

### Observation

- Interpret tympanometry
- Observe the subtle changes innate in the progression of illness

### Communication

- Recognize the importance of teamwork in healthcare

## Psychiatry:

### Communication

- Communicate independently in an unimpeded and accurate manner with patients and faculty
- 

### Motor

- Perform basic diagnostic and therapeutic procedures

## General Surgery:

### Observation

- Interpret ECHO

### Communication

- Communicate effectively and sensitively with patients and family

### Motor

- Perform diagnostic and therapeutic procedures including basic life support, suturing, knot tying, placement of a Foley catheter, nasogastric intubation, intravenous line placement, drain removal, suture removal, dressing changes, etc.
- Observe or participate in surgical procedures, as part of the aseptic team, in the operating room, which may require prolonged standing
- Wash hands and don sterile gown and gloves to participate with the aseptic team in the operating room; and maintain a sterile field in the operating or procedure room
- Endure a night float shift and be able to complete the standards as listed in this document throughout that call shift

## Promotion and Graduation Requirements

The mission of the University of Utah School of Medicine is to educate students for the practice of medicine. This mission carries with it the responsibility of assuring the public that each graduate has satisfied the requirements for the degree of Doctor of Medicine. Since graduates are required to complete programs in graduate medical education (residency training) before entering medical practice, the M.D. degree certifies that the graduated student is suitably prepared for such advanced training.

In determining that the requirements for annual promotion and eventual graduation have been met, a student's overall performance is considered and evaluated. In Phase 1 and 2 of the curriculum, a pass/fail/incomplete grading system is used. In Phases 3 and 4 of the curriculum, both pass/fail/incomplete and honors/high-pass/pass/fail/incomplete grading systems are used.

To receive the Doctor of Medicine degree from the University of Utah School of Medicine, each student is required to:

- Complete a four-year medical education curriculum in a medical school accredited by the Liaison Committee for Medical Education (LCME). Most students complete their curriculum requirements in four years. But rarely, a student may repeat a year, participate in a special program that allows more time to complete the required courses, be granted a temporary leave of absence, or participate in a dual degree program
- Be enrolled in the University of Utah School of Medicine for Phase 3 and Phase 4 of the curriculum
- Complete, to the satisfaction of the faculty, all prescribed academic requirements
- Pass United States Medical Licensing Examinations (USMLE) Step 1, Step 2 Clinical Knowledge and Step 2 Clinical Skills (see below for University of Utah USMLE registration and exam requirements)
- Meet all obligations to the School of Medicine and University of Utah including tuition, overdue library books, past dues, fines, etc. Students who have a main campus hold for more than 30 days will not be registered for, nor may they participate in their curriculum, until the hold has been addressed and resolved. If already registered and enrolled, students will be pulled from their curriculum until the hold has been addressed and resolved
- Complete the required Financial Aid exit interview

## USMLE Exam Requirements

### Step 1

- Students must register and select an exam window for their USMLE Step 1 exam by February 10 of the second year
- Students may not sit for the USMLE Step 1 exam until they have passed all elements of Phases 1 & 2
- Students must complete their USMLE Step 1 exam prior to participation in any Phase 3

courses including clerkships, clinical electives, research, or other coursework. For students with extreme extenuating circumstances (serious personal health issue, death in the family, birth of one's own child etc...), this deadline may be extended at the discretion of the Associate Dean for Student Affairs in consultation with the Senior Director and Director of the Academic Success Program

- If a student fails the USMLE Step 1 exam, s/he will be allowed to complete the clinical course in which s/he is currently enrolled. The student will not be allowed to participate in any further curricular activities or courses until s/he retakes the exam. The time-frame for retaking the USMLE Step 1 exam will be determined by the Associate Dean for Student Affairs in consultation with the Senior Director and Director of the Academic Success Program and the student
- If a student fails the USMLE Step 1 exam a second time, s/he will be removed from their current clinical clerkship or course and given no credit for their time on the clerkship or course. S/he will not be allowed to return to their curriculum until s/he has posted a passing USMLE Step 1 score. The student will be referred to the Promotions Committee and the details for potentially retaking the USMLE Step 1 exam a third time will be determined by the Promotions Committee
- If a student fails the USMLE Step 1 examination a third time, s/he will be automatically dismissed from medical school

## Step 2 - Clinical Knowledge (Step 2 CK)

- Students must register and select a test window for Step 2 CK by April 5 and select a test date by June 15 of the third year
- Students may not take the Step 2 CK exam until they have passed all Phase 3 courses and the end of third year comprehensive clinical skills assessment
- Students must take the Step 2 CK exam by October 31 of the fourth year. Students failing to take Step 2 CK by this date will be pulled from their curriculum until they have taken the exam
- If a student fails the USMLE Step 2 CK examination the first time, s/he will be referred to the Office of Student Affairs. The time-frame for retaking the failed USMLE Step 2 CK exam will be determined by the Associate Dean for Student Affairs in consultation with the Senior Director and Director of the Academic Success Program and the student
- If a student fails the USMLE Step 2 CK examination a second time, s/he will be referred to the Promotions Committee
- If a student fails the USMLE Step 2 CK examination a third time, s/he will be automatically dismissed from medical school

## Step 2 - Clinical Skills (Step 2 CS)

- Students must register and select a test window for Step 2 CS by April 5 and select a test date by June 15 of the third year
- Students may not take Step 2 CS exam until they have passed all Phase 3 courses and the end of third year comprehensive clinical skills assessment
- Students must take the Step 2 CS exam by December 31 of the fourth year. Students failing to take Step 2 CS by this date will have Spring Semester course registration and financial aid suspended until they have taken the exam

- If a student fails the USMLE Step 2 CS examination the first time, s/he will be referred to the Office of Student Affairs. The time-frame for retaking the failed USMLE Step 2 CS exam will be determined by the Associate Dean for Student Affairs in consultation with the Senior Director and Director of the Academic Success Program and the student
- If a student fails the USMLE Step 2 CS examination a second time, s/he will be referred to the Promotions Committee
- If a student fails the USMLE Step 2 CS examination a third time, s/he will be automatically dismissed from medical school

## Academic Credits

Academic credit for educational experiences offered by the School of Medicine are granted only to students currently enrolled in the School of Medicine. Students taking School of Medicine electives while enrolled as graduate students in other programs cannot use these credits to fulfill School of Medicine graduation requirements.

## Postponement of Required Phase 3 Coursework into Phase 4

Postponement of a Phase 3 coursework requirement beyond the Phase 3 academic calendar may be used for a student to participate in important non-curricular activities. However, postponement of Phase 3 requirements has significant consequences for the student's ability to complete Phase 4 coursework, especially during the time period prior to the MSPE release. Postponement of Phase 3 coursework to avoid a failure of Step 1 is done at the permission and discretion of the Senior Director of Academic Success Program (Dr. Steven Baumann) and will result in language describing such a postponement in the MSPE.

Postponement of a Phase 3 coursework requirement other than Step 1 failure mitigation will be considered only if the following conditions are met:

- The student submits to the Associate Dean for Student Affairs a written explanation about the need to postpone a Phase 3 clerkship or elective requirement
- The completed request for postponement is made at least 6 weeks prior to the start of the scheduled coursework
- Removal from the scheduled course does not violate the course's minimum required census and rescheduling of the clerkship or elective does not violate the course's maximum census of students
- A postponed clerkship must be completed prior to sitting for either USMLE Step 2 CS or CK exams and prior to enrolling/starting any other 4th year courses (including sub-internships or electives)

Decision regarding postponement of a required clerkship will be made by the Associate Dean for Student Affairs, the Assistant Dean for Clinical Curriculum, and the Assistant Dean for Assessment and Evaluation. Decisions regarding postponement of an elective requirement will be made by the Associate Dean for Student Affairs. Decisions will be communicated to affected parties.

## Leave of Absence

A Leave of Absence (LOA) is a period of non-enrollment when a student is not required to pay medical school tuition and fees and is not considered to be working toward the MD degree.

Students must complete the Leave of Absence Request form and meet with the Associate Dean for Student Affairs to request a LOA.

The decision to grant a LOA is at the discretion of the Associate Dean for Student Affairs. Students who are approved to take a LOA to pursue graduate work must complete all medical school requirements prior to initiation of the LOA. This includes passing relevant USMLE licensing examinations before the LOA starts (Step 1, Step 2 CK, Step 2 CS), successful completion of the end of third year clinical skills examination, and remediation of all outstanding coursework or components of courses.

The duration of a LOA may vary, but may not exceed one year at a time; students not returning to full-time status at the end of their LOA must reapply and be approved for another LOA before the first LOA ends.

### Possible Reasons for Requesting a LOA May Include:

- Participation in a joint degree program (MD/MPH, MD/MSPH, MD/PhD, MD/MS, MD/MBA, BioInnovate Track)
- Special Studies/Non-Research
- Academic Remediation
- Financial
- Health
- Personal

### Prior to a LOA Being Granted, the Student Must:

- Meet with Director of Student Affairs to pick up LOA form and go through process
- Meet with Associate Dean of Student Affairs to discuss LOA in relation to education plan
- Meet with the University of Utah School of Medicine Financial Aid Officer. Obtain signature in field below from Financial Aid & Scholarships on Main Campus (see contact info). Meet with Financial Aid Counselor and fill out Leave of Absence Addendum from Financial Aid & Scholarships on Main Campus
- If not enrolled at the U, online exit counseling will need to be completed
- Complete any applicable NBME Step examination(s) by August 15th of the current year
- Maintain continuous personal health insurance coverage and provide proof of coverage to the Office of Student Affairs when requested each February and September
- Maintain continuous enrollment in group disability insurance through the School of Medicine. Students granted a leave of absence will be charged a premium of \$31.50 per semester by the University of Utah Income Accounting Office during the time they

are granted a leave of absence. Payment is due by the standard University tuition deadline

- Coordinate with Associate Dean of Student Affairs Office the following equipment: Badge, Pager, iPad and Charger, and Locker Access

Students who do not enroll in the semester following the expiration of their approved leave of absence may be referred to the Promotions Committee and be required to apply for readmission to the School of Medicine.

### Leave of Absence for Dual Degree Programs

Students participating in dual degree programs may only accrue credit toward the M.D. degree while enrolled as a medical student and paying School of Medicine tuition. Credit earned for coursework done in a graduate program may not be used toward required credits for the M.D. degree.

### Additional Information on Leave of Absence

In some cases, a formal Leave of Absence will not be necessary. For example, a full year absence is not needed. At the discretion of the Associate Dean of Students, an internal leave could be recommended. This will include specific expectations that will be outlined in the form of a letter. An internal leave of Absence form will also need to be completed.

### Parental Leave

Recognizing that combining childrearing and undergraduate medical education is a unique challenge, the University of Utah School of Medicine is committed to supporting students who have children during medical school.

Medical complications for a pregnancy related condition and an attendant requested accommodation(s) require a physician's note and are covered separately by the Excused Absence Policy in conjunction with Title IX and the Americans With Disabilities Act/Section 504 of the Rehabilitation Act of 1973 (ADA/Section 504) (see "Title IX" on page 33).

### Leave of Absence for Formal Parental Leave

Students may request a formal Leave of Absence for a variety of reasons including parental leave. A Leave of Absence is a period of non-enrollment when a student is not required to pay medical school tuition and fees and is not considered to be working toward the MD degree. The duration may vary but may not exceed one year at a time. A Leave of Absence is granted at the discretion of the Associate Dean of Student Affairs. (See "Leave of Absence" on page 30).

### Additional Mechanisms for Formal and Informal Parental Leave

The structure of the School of Medicine curriculum varies across the four year program. Consequently, the approach to accommodating additional parental leave above and beyond the use of an excused absence and the parental Leave of Absence will differ

depending on the Phase of the curriculum in which students are rotating when a birth or adoption occurs.

## Phases 1 and 2

Phase 1 and Phase 2 of the School of Medicine curriculum are constructed in an integrated longitudinal fashion with each course building upon the prior courses. It is not possible for students to miss fundamental portions of a course and be prepared for subsequent curricular activities. Because of the integrated and progressively iterative nature of the curriculum, extended parental leave during Phases 1 and 2 primarily should be limited to the use of a leave of absence as described above.

Attendance in the curriculum is a professional expectation but is not mandatory. Students needing additional time away from the curriculum but are not on a formal leave of absence need to be able to balance their new parental time with the professional expectations for attendance.

## Phase 3

Phase 3 offers more flexibility in scheduling informal parental leave. In addition to the excused absence and LOA options above for formal parental leave, students may utilize the winter and summer breaks that already exist in the current Phase 3 schedule to create informal parental leave time. Students may also petition the Associate Dean of Student Affairs to postpone a Phase 3 Rotation into their 4th year (see "Postponement of Required Phase 3 Coursework into the Phase 4 Curriculum" on page 29).

## Phase 4

Phase 4 offers the greatest amount of flexibility in scheduling informal parental leave due to the large number of calendar weeks that are normally preserved for residency interviews. In addition to the excused absence and Leave of Absence options above, students may utilize this flexible scheduling of the fourth year at their discretion. Students must meet with their Phase 4 Track Director and the Associate Dean of Student Affairs to ensure that they will remain successful in the Match. Students will be responsible for meeting all graduation requirements of their Phase 4 Track.

## Parental Leave while Enrolled in another Degree Program

Students who are enrolled in another degree program at the time of childbirth (e.g. MBA, MSPH, MPH, PhD, BioInnovate or other) should follow the policies of the school/program in which they are enrolled.

## Title IX

The School of Medicine complies with Title IX of the Education Amendments Act of 1972 ("Title IX") and does not discriminate against students on the basis of sex, which includes pregnancy or pregnancy-related conditions and parental status. Pregnant students may continue to participate in class and all extracurricular activities throughout pregnancy or a pregnancy-related condition. The School of Medicine will provide pregnant students, upon request,



reasonable accommodations such as a larger desk, elevator access, or reasonable time away from class for restroom trips without requiring written confirmation from a medical provider.

### **Pregnancy and Childbirth Excused Absences and Medical Leave with Physician's Note**

The School of Medicine will accommodate excused absences for a medical illness due to pregnancy, childbirth, or pregnancy-related conditions as specified in the physician's note detailing the duration of time needed for accommodations.

Students who have a medically excused absence due to pregnancy, childbirth, or pregnancy-related conditions will be provided the same or equivalent resources provided to students with other temporary medical conditions. Resources include but are not limited to tutoring and independent study activities, if appropriate to the unit, course, or clerkship.

Reasonable accommodations for a pregnancy, childbirth, or pregnancy-related conditions and any related medical illness, as with any other medical illness, may include a leave of absence if it is determined that the fundamental nature of the course, clerkship, or unit cannot be maintained due to the limitations set forth by the physician's note.

The School of Medicine will allow a student who has been on a medical leave of absence due to pregnancy, childbirth, or pregnancy-related condition to return to the same academic status before the medical leave of absence began.

The School of Medicine will provide the appropriate training to its faculty regarding the requirements of Title IX (as well as other University non-discrimination and accommodation policies).

### **Protection from Harassment and Discrimination**

The University of Utah has adopted policies that prohibit discrimination or harassment against an individual on the basis of race, color of skin, national origin, religion, age, status as a person with a disability, sexual orientation, gender identity/expression, status as a veteran, genetic information, and sex. Sex discrimination includes sexual harassment and harassment because of pregnancy or related conditions (if the harassment is sufficiently serious that it has the purpose or effect of unreasonably interfering with an individual's employment or academic performance or environment.)

University of Utah policy and state and federal law prohibit retaliation against an individual for opposing a discriminatory practice, for participating in a discrimination complaint process, or for requesting an accommodation or academic adjustment for a disability.

To inquire about University non-discrimination policies or the grievance procedures to file complaints of discrimination, please contact:

Title IX Coordinator, University of Utah  
Sherrie Hayashi  
Director, Office of Equal Opportunity and Affirmative Action  
201 South Presidents Cr., Room 135  
Salt Lake City, UT 84112  
(801)581-8365 (V/TDD)  
Email: [oeo@uemail.utah.edu](mailto:oeo@uemail.utah.edu)

### For Further Information, Students May Reference

- [Policy 5-210, Discrimination and Sexual Harassment Complaint Policy](#)
- [Policy 5-107, Sexual Harassment and Consensual Relationships Policy](#)
- [Policy 5-106, Equal Opportunity and Nondiscrimination](#)
- [Policy 5-117, Americans With Disabilities Act \(ADA Policy\)](#)

## Academic Misconduct / Behavioral Misconduct

### Continued Enrollment in the School of Medicine

As a condition of continued enrollment in the School of Medicine, students must notify the Associate Dean of Student Affairs of a guilty plea, a plea of no contest, or conviction of any charge other than a minor traffic violation that occurs between matriculation and graduation from medical school. A guilty plea, plea of no contest, or conviction of any charge other than a minor traffic violation that occurs between acceptance to medical school and the first day of orientation must be reported to the Assistant Dean for Admissions.

Notification of the appropriate person must be made no later than five (5) calendar days after any guilty plea, plea of no contest, or conviction of any charge other than a minor traffic violation. Within thirty (30) calendar days of notification of a guilty plea, plea of no contest, or conviction of any charge other than a minor traffic violation, the School of Medicine will take appropriate action as described below.

Enrolled students who enter a guilty plea, a plea of no contest, or a conviction of any charge other than a minor traffic violation must notify the Associate Dean of Student Affairs for informal resolution or for presentation to the Promotions Committee for academic misconduct. The Associate Dean and/or Promotions Committee will conduct such investigation as it deems necessary and appropriate in accordance with the usual standards of due process. Students presented to the Promotions Committee for a matter in which s/he entered a guilty plea, plea of no contest, or conviction may be dismissed from medical school.

Students applying or accepted into medical school but not yet enrolled in medical school who enter a guilty plea, a plea of no contest, or a conviction for any matter other than a minor traffic violation must notify the Assistant Dean of Admissions for informal resolution or for

presentation to the Admissions Executive Committee. The Assistant Dean of Admissions and/or Admissions Executive Committee will conduct such investigation as it deems necessary and appropriate in accordance with the usual standards of due process.

Students who have been accepted but not yet enrolled in medical school presented to the Admissions Executive Committee for a matter in which s/he entered a guilty plea, plea of no contest, or conviction may have their offer of acceptance withdrawn. Medical school applicants presented to the Admissions Executive Committee for a matter in which s/he entered a guilty plea, plea of no contest or conviction may not be considered further in the application process.

### Academic Misconduct and/or Professional or Ethical Violations

In the School of Medicine, academic dishonesty is considered both academic misconduct and a violation of professional and ethical standards. This means that a student may, for example, receive a failing grade in a course if the faculty member determines that s/he cheated. Students accused of academic misconduct and professional or ethical violations will be referred to the Office of Student Affairs. The Associate Dean of Student Affairs will refer the matter to the Promotions Committee for action, which may result in the student's dismissal from medical school.

<http://www.regulations.utah.edu/academics/6-400.html>

### Behavioral Misconduct

Allegations of student behavioral misconduct are referred to the Associate Dean of Student Affairs, who will determine if the behavioral misconduct violates the Medical Student Code of Ethics and therefore is more appropriately treated as academic misconduct. If it is determined that the offense should be treated under student behavior misconduct proceedings, the student shall be notified by the Associate Dean for Student Affairs. Student behavioral misconduct proceedings are outlined in the University of Utah Student Code Section III: <http://www.regulations.utah.edu/academics/6-400.html>

### Student's Rights Regarding Misconduct Allegations

Students accused of academic misconduct, including violations of professional or ethical standards, or behavioral misconduct have the following rights:

- The right to access his/her academic files as provided by the University of Utah Student Code <http://www.regulations.utah.edu/academics/6-400.html>

Students with complaints, inquiries, or requests to review official records should address them to the Office of Student Affairs. Access to the student's official file in the Office of Student Affairs is subject to the following limitations:

- Reasonable and nondiscriminatory rules and regulations may be made as to time, place, and supervision
- Restrictions may be imposed with respect to materials furnished by others to which the student has waived rights of access (such as letters of reference and recommendations)

- The right to remain in scheduled courses until the decision of the appropriate person or committee, unless extraordinary circumstances exist. A student who exhibits behavior unsuitable for the practice of medicine or who poses a direct threat may be removed from courses before the decision by the appropriate person or committee. Following a sanction of dismissal, the student will not be allowed to continue in any curricular activities while appealing, including class activities course work and clinical courses and rotations
- The right to information regarding the decision of the appropriate person or committee
- The right to appeal academic sanctions as outlined in the applicable sections of the University of Utah Student Code [www.regulations.utah.edu/academics/6-400.html](http://www.regulations.utah.edu/academics/6-400.html)

## Guidelines for Use of Social Media

Use of social media is prevalent among students. Students should be aware that unwise or inappropriate use of social media can negatively impact educational and career opportunities. To avoid these negative impacts, students should consider the following:

- Post content that reflects positively on you and the University of Utah School of Medicine. Be aware not only of the content that you post, but of any content that you host (e.g., comments posted by others on your site). Content you host can have the same effect as content you post
- Though you may only intend a small group to see what you post, a much larger group may actually see your post. Be aware that your statements may be offensive to others, including classmates or faculty members who may read what you post
- You should convey a professional and ethical presence to all who might view your online information. Employers and others may use social media to evaluate applicants. Choosing to post distasteful, immature, or offensive content may eliminate job or other opportunities
- Once you have posted something via social media, it is out of your control. Others may see it, repost it, save it, forward it to others, etc. Retracting content after you have posted it is practically impossible
- If you post content concerning the University or the School of Medicine, make it clear that you do not represent the University or the School of Medicine and that the content you are posting does not represent the views of the University or the School of Medicine
- Make sure the content you post is in harmony with the ethical or other codes of your program and field. In certain circumstances, your program may have made these codes binding on you, and violations may result in action against you
- If you are in a program that involves confidential information, do not disclose this information. The University may take action against you for disclosures of confidential information
- Realize that you may be subject to action by the University for posting or promoting content that substantially disrupts or materially interferes with University activities, or that might lead University authorities to reasonably foresee substantial disruption or material interference with University activities. This action may be taken based on behavioral misconduct, academic performance, academic misconduct, or

professional misconduct, and may range from a reprimand or failing grade to dismissal from a program of the University

- Medical students must be cognizant of standards of patient privacy and confidentiality that must be maintained in all environments, including online, and must refrain from posting identifiable patient information online
- If they interact with patients on the Internet, medical students must maintain appropriate boundaries of the patient-physician relationship in accordance with professional ethical guidelines just as they would in any other context. To maintain appropriate professional boundaries, medical students should separate personal and professional content online
- When medical students see content posted by colleagues that appears unprofessional, they have a responsibility to bring that content to the attention of the individual, so that s/he can remove it and/or take other appropriate actions. If the behavior significantly violates professional norms and the individual does not take appropriate action to resolve the situation, the student should report the matter to the Associate Dean of Student Affairs
- Medical students must recognize that actions online and content posted may negatively affect their reputations among patients and colleagues, have consequences for their medical careers, and can undermine public trust in the medical profession

## Academic Performance Standards

Grading criteria are specified in each course syllabus

Students in good standing will automatically advance to the next course. Good standing is defined as having passed all courses to date, successfully completed all academic requirements, achieved required levels of competency, passed the appropriate USMLE licensing examination, demonstrated professional behavior, and upheld the Student Code of Ethics.

## Promotions Committee

The Promotions Committee has the authority to impose an academic action based on a student's performance in a course, a USMLE licensing examination, delayed course completion, and/or failures in attitude, failure to uphold the code of ethics and/or lapses in professionalism.

The Promotions Committee has the authority to consider and approve course remediation recommendations made by a Course Director, faculty member, or department in response to a student failing a course. Course Directors may not offer or implement remedial procedures without approval of the Promotions Committee.

The Promotions Committee considers a student's entire academic record, overall professional development, behavior, and attitude in deciding an appropriate academic action. The Committee has the authority to impose academic actions, including, but not limited to course remediation, additional educational activities, repeat of an academic year, extended

curriculum, leave of absence, academic probation, formal reprimand, and dismissal from medical school.

Should the Promotions Committee decide that a student's lapse in professionalism or failure to uphold the Medical Student Code of Ethics warrants action, options include, but are not limited to formal reprimand, probation, suspension, and dismissal from medical school.

## Promotions Committee Academic Actions

Some academic actions are automatic and described below. With regard to actions that are not automatic, the Promotions Committee may impose any of the following:

### Leave of Absence

Students are expected to complete their medical education in four consecutive years. However, the Promotions Committee may impose a leave of absence as an academic action so that a student may address a personal or health issue that impacts their academic success.

### Remediation

The Promotions Committee may impose a specific remediation plan at their discretion.

### Dismissal

The Promotions Committee may dismiss a student when the student:

- Has demonstrated a consistent pattern of substandard academic performance. This would include, for example, a history of delayed course completion, failure/s of a course, failure/s of NBME subject exam/s, and/or failure/s of a USMLE licensing examination
- Has demonstrated character, personality, or behavior unsuitable for the practice of medicine, lacks motivation, or is emotionally unstable. This includes but is not limited to substance abuse, aggression, abusiveness, cheating, dishonesty, etc.

## Automatic Actions

The following academic actions are automatic and shall be imposed after confirming that the facts that serve as the basis for the automatic action actually occurred, e.g., a student did in fact fail a NBME licensing exam three times.

### Phases 1 and 2

Trigger	Situation	Consequence
One (1) failed course	Any Phase 1 or 2 Course	<ul style="list-style-type: none"> <li>• Course Failure</li> <li>• Academic Probation</li> <li>• Referral to Promotions Committee</li> <li>• Course Failure Reported on MSPE</li> </ul>
One (1) failed Must-Pass final exam	Any required Phase 1 or 2 Course	<ul style="list-style-type: none"> <li>• Academic Warning</li> <li>• Not reported on MSPE</li> <li>• Student must re-take a similar final exam within the time frame noted in the course syllabus</li> </ul>
Two (2) failed Must-Pass final exams	Same Course	<ul style="list-style-type: none"> <li>• Course Failure</li> </ul>

		<ul style="list-style-type: none"> <li>• Academic Probation</li> <li>• Referral to Promotions Committee</li> <li>• Course Failure Reported on MSPE</li> </ul>
Two (2) or more failed Must-Pass final exams	Any combination of Courses	<ul style="list-style-type: none"> <li>• Academic Probation</li> <li>• Referral to Promotions Committee to determine whether or not student will be allowed to re-take a similar final exam</li> <li>• All Must-Pass Exam Failures Reported on MSPE</li> </ul>
One (1) Course Failure and (1) Failed Must-Pass Final Exam	Any Combination of Courses	<ul style="list-style-type: none"> <li>• Academic Probation</li> <li>• Referral to Promotions Committee</li> <li>• All Must-Pass Exam Failures Reported on MSPE</li> </ul>

### Phase 3

Trigger	Situation	Consequence
One (1) Failed Standardized Exam	Any Core Clerkship	<ul style="list-style-type: none"> <li>• Academic Warning</li> <li>• Not reported on MSPE</li> </ul>
Two (2) Failed Standardized Exams	Same Clerkship	<ul style="list-style-type: none"> <li>• Course Failure</li> <li>• Academic Probation</li> <li>• Referral to Promotions Committee</li> <li>• Course Failure and all standardized Exam Failures Reported on MSPE</li> </ul>
Two (2) Failed Standardized Exams	Any Combination	<ul style="list-style-type: none"> <li>• Academic Probation</li> <li>• All standardized Exam Failures Reported on MSPE</li> </ul>
Three (3) Failed Standardized Exams	Any Combination	<ul style="list-style-type: none"> <li>• Academic Probation</li> <li>• All standardized Exam Failures Reported on MSPE</li> <li>• Referral to Promotions Committee</li> </ul>
One (1) Outstanding Failed Standardized Exam	Past the Winter Break OR Past the End of Phase 3 Break	<ul style="list-style-type: none"> <li>• Academic Probation</li> <li>• Reported on MSPE</li> <li>• Withdrawn from current coursework</li> </ul>
Two (2) Outstanding Failed Standardized Exams	Any Combination Any Time	<ul style="list-style-type: none"> <li>• Academic Probation</li> <li>• All standardized Exam Failures Reported on MSPE</li> <li>• Withdrawn from current coursework</li> </ul>

### Phase 4

Trigger	Situation	Consequence
One (1) Failed Course	Any Course	<ul style="list-style-type: none"> <li>• Course Failure</li> <li>• Academic Probation</li> <li>• Referral to Promotions Committee</li> <li>• Course Failure and all standardized Exam Failures Reported on MSPE</li> </ul>

### Academic Warning Consequences

Students placed on Academic Warning may not:

- Register for any coursework other than in the required curriculum
- Participate in school-sponsored travel

- Participate in extramural training for credit
- Work for money
- Participate in volunteer activities other than those approved by School of Medicine

## Academic Probation Consequences

Students placed on Academic Probation will have the probation reported in their MSPE. In addition, students on probation may not:

- Register for any course work other than in the required curriculum
- Hold elected office in the School of Medicine or University of Utah
- Participate in School of Medicine extracurricular activities
- Participate in school-sponsored travel
- Participate in extramural training for credit
- Work for money
- Participate in volunteer activities other than those approved by School of Medicine

Students will remain on academic probation until the deficiencies have been corrected or the conditions set by the Promotions Committee have been satisfied.

## Dismissal for USMLE Licensing Exam Failures

Dismissal is automatic action imposed by the Promotions Committee if a student fails any one USMLE licensing exam (Step 1, Step 2 CK, or Step 2 CS) three times.

## Academic Due Process

### Academic Actions

Academic action includes a final grade in a course, a decision by the Promotions Committee to place a student on academic probation, require course remediation, extend a student's curriculum, impose a leave of absence, a reprimand, suspend or dismiss a student. Actions may be imposed for failure to meet relevant academic standards, lapses in professionalism and/or failure to uphold the Student Code of Ethics. Students are notified as soon as possible after a grade or other academic action is imposed. An academic action may be overturned on appeal only if the academic action was arbitrary or capricious (see below for definition).

### Assessing Academic Performance

Faculty members, when assigning a grade in a course and the Promotions Committee when imposing an academic action, are qualified to judge a student's academic performance.

### Arbitrary or Capricious

For the purpose of these policies, arbitrary or capricious means that there was no principled basis for the academic action or sanction, and/or it was not in accordance with applicable policies. With regard to course, arbitrary or capricious means:

- The assignment of a course grade on some basis other than performance in the course; or
- The assignment of a course grade by unreasonable application of standards different than those applied to other students in the same course; or



- The assignment of a course grade by a substantial, unreasonable, and unannounced departure from the instructor's previously announced standards

## Student Rights Regarding Academic Actions

The right to access his/her academic files as provided by the University of Utah Student Code (<http://www.regulations.utah.edu/academics/6-400.html>).

Students with complaints, inquiries, or requests for review of official records should address them to the Office of Student Affairs. Access to the student's official file in the Office of Student Affairs is subject to the following limitations:

- Reasonable and nondiscriminatory rules and regulations may be made as to time, place, and supervision;
- Restrictions may be imposed with respect to materials furnished by others to which the student has waived rights of access (such as letters of reference and recommendations)
- The right to remain in scheduled course until the decision of the appropriate person or committee, unless extraordinary circumstances exist. A student who exhibits behavior unsuitable for the practice of medicine or who poses a direct threat may be removed from courses before the decision by the appropriate person or committee. Following a sanction of dismissal, the student will not be allowed to continue in either class work or on clinical rotations while appealing
- The right to information regarding the decision of the appropriate person or committee
- The right to appeal academic sanctions as outlined in the applicable sections of the University of Utah Student Code ([www.regulations.utah.edu/academics/6-400.html](http://www.regulations.utah.edu/academics/6-400.html))

## Appeal of Academic Actions

The School of Medicine follows the appeals policies of the University of Utah Code of Student Rights and Responsibilities (<http://www.regulations.utah.edu/academics/6-400.html>). All references to "days" are understood to mean business days.

### Appealing an Academic Action Imposed by the Promotions Committee Consultation with the Chair of the Promotions Committee

Students who believe the academic action imposed by the Promotions Committee was arbitrary or capricious should discuss the issue with the Chair of the Promotions Committee within twenty (20) days of receiving notice of the action. The Chair may only overturn the academic action if s/he finds that it was arbitrary or capricious. If the student and Chair are unable to resolve the disagreement, or if the Chair does not take the agreed upon action within ten (10) days, the student may appeal in writing to the Dean, who may appoint a Dean's Designee.

### Appeal to Dean's Designee

Within forty (40) days of notification of the academic action, the student may appeal the academic action to the Dean. The Dean will appoint a Designee to review the appeal. Within fifteen (15) days of consulting with the student and the Chair of the Promotions Committee,

and conducting such investigation as s/he deems necessary and appropriate in accordance with due process, the Dean's Designee shall notify the student and the Chair of the Promotions Committee, in writing, of his/her determination of whether the academic action was arbitrary or capricious, and the basis for that decision. If the Dean's Designee determines that the academic action was arbitrary or capricious, s/he shall take appropriate action to implement his/her decision unless the Chair of the Promotions Committee appeals the Dean's Designee's determination. If the Dean's Designee fails to respond in fifteen (15) days, the student may appeal to the chair of the School of Medicine Academic Appeals Committee ([grant.cannon@va.gov](mailto:grant.cannon@va.gov)).

### Appeal to Academic Appeals Committee

If either party disagrees with the decision of the Dean's Designee, that party may appeal to the School of Medicine Academic Appeals Committee ([grant.cannon@va.gov](mailto:grant.cannon@va.gov)) within fifteen (15) days of notification of the Dean's Designee's decision. Academic Appeals Committee Proceedings are outlined in the University of Utah Student Code. <http://www.regulations.utah.edu/academics/6-400.html>

The Academic Appeals Committee holds a hearing if:

- The documents raise material issues of disputed fact
- The Committee Chair determines that a hearing is necessary or desirable to aid in resolving the issues
- The academic action included a dismissal from a program

To recommend overturning the original academic action, the Academic Appeals Committee must find that the academic action was arbitrary or capricious. The Committee submits written findings and recommendations to the Dean.

### Review and Decision by the Dean (or Designee)

The Dean (or Designee) may accept the Academic Appeals Committee's findings and recommendations; return the report to the Committee for reconsideration of specific matters or for clarification; or reject all or parts of the Committee's findings and recommendations, stating the reasons. The Dean (or Designee) communicates his or her decision to the parties and to the Chair of the Academic Appeals Committee within ten (10) days of receipt of the recommendation. The Dean's (or Designee's) decision is final unless appealed to the Senior Vice President for Health Sciences within ten (10) business days after receipt of the Dean's (or Designee's) decision.

### Appeal to Senior Vice President for Health Sciences

Either party may file a written appeal of the Dean's (or Designee's) decision with the Senior Vice President for Health Sciences, delivering a copy of the appeal to the other party. The other party may file a response within five (5) days. The Senior Vice President shall consider the appeal and response and solicit counsel and advice appropriate to reach a final decision. S/he may convene an ad hoc committee composed of students and faculty members from outside the college or department to determine if there were substantial defects that denied basic fairness and due process. After receiving the appeal, the Senior Vice President shall,

within ten (10) business days, or within twenty (20) business days if an ad hoc committee was formed, accept the decision of the Dean (or Designee); return the report to the Dean (or Designee) asking for clarification; or reject all or parts of the Dean's decision, stating the reasons. The Senior Vice President provides written notification of the decision to the parties, to the chair of the Academic Appeals Committee, and to the Dean. The decision of the Senior Vice President is final. At the conclusion of the appeals process, the Dean shall take appropriate action to implement the final decision.

## Process for Disputing a Final Failing Grade in a Course

### Consultation with Course Director

Students who believe the assignment of a final failing grade was arbitrary or capricious should discuss the issue with course director within twenty (20) days of receiving notice of the grade. If the student and faculty director are unable to resolve the disagreement, or if the faculty director does not take the agreed upon action within ten (10) days, the student may appeal in writing to the Associate Dean for Curriculum (for course grades). For interdisciplinary courses, the student should appeal to the Dean, who will appoint a Dean's Designee to review the dispute.

### Appeal to the Associate Dean for Curriculum (for course grades), or Dean's Designee (for interdisciplinary courses)

Within forty (40) days of notification of the failing grade, the student shall appeal the failing grade to the Associate Dean of Curriculum, (for course grades), or the Dean's Designee (for interdisciplinary courses). Within fifteen (15) days of consulting with the student, the Associate Dean of Curriculum or Dean's Designee shall notify the student and the faculty course director, in writing, of his/her determination of whether the academic action was arbitrary or capricious and the basis for that decision. If the Associate Dean of Curriculum or Dean's Designee determines that the grade assignment was arbitrary or capricious; s/he shall take appropriate action to implement his/her decision unless the course director assigning the grade appeals the decision. If the Associate Dean of Curriculum or Dean's Designee fails to respond to the student in fifteen (15) days, the student may appeal to the Chair of the Academic Appeals Committee. (Dr. Grant Cannon - [grant.cannon@va.gov](mailto:grant.cannon@va.gov))

### Appeal to Academic Appeals Committee

If either the student or the course director disagrees with the decision of the Associate Dean or Dean's Designee, that party may appeal to the School of Medicine Academic Appeals Committee within fifteen (15) days of notification of the decision of the department chair, Associate Dean, or Dean's Designee. The Academic Appeals Committee Proceedings are outlined in the University of Utah Student Code. The Academic Appeals Committee holds a hearing if it determines that:

- The documents raise material issues of disputed fact
- The Committee Chair determines that a hearing is necessary or desirable to aid in resolving the issues.

To recommend overturning the original academic action, the Committee must find that the academic action was arbitrary or capricious. The Chair of the Academic Appeals Committee submits written findings and recommendations to the Dean.

<http://www.regulations.utah.edu/academics/6-400.html>

### **Review and Decision by the Dean (or Designee)**

The Dean (or Designee) may accept the Academic Appeals Committee's findings and recommendations; return the report to the Committee for reconsideration of specific matters or for clarification; or reject all or parts of the Committee's findings and recommendations, stating the reasons. The Dean communicates his or her decision to the parties and to the Chair of the Academic Appeals Committee within ten (10) days of receipt of the recommendation. The Dean's (or Designee's) decision is final unless appealed to the Senior Vice President for Health Sciences within ten (10) business days after receipt of the Dean's decision.

### **Appeal to Senior Vice President for Health Sciences**

Either party may file a written appeal of the Dean's (or Designee's) decision with the Senior Vice President for Health Sciences, delivering a copy to the other party. The other party may file a response within five (5) days. The Senior Vice President shall consider the appeal and response and solicit counsel and advice appropriate to reach a final decision. S/he may convene an ad hoc committee composed of students and faculty members from outside the college or department to determine if there were substantial defects that denied basic fairness and due process. Upon receipt of the appeal, the Senior Vice President shall, within ten (10) business days, or within twenty (20) business days if an ad hoc committee was formed, accept the decision of the Dean (or Designee's); return the report to the Dean (or Designee's) asking for clarification; or reject all or parts of the Dean's (or Designee's) decision, stating the reasons. The Senior Vice President provides written notification of the decision to the parties, to the chair of the Academic Appeals Committee and to the Dean. The decision of the Senior Vice President is final. At the conclusion of the appeals process, the Department Chair or Dean shall take appropriate action to implement the final decision.

### **Procedures to Address Mistreatment**

Any student who feels that s/he may have been subjected to abuse, illegal discrimination, harassment, or mistreatment of any kind has the right to seek remedy through any one of multiple options. The University of Utah will ensure that this process shall be free of retaliation. The student has both informal and formal options available. Whenever possible, the student is encouraged, but not required, to seek remedy at the most informal level that will adequately and appropriately address the student's concerns.

- Students may meet with the Associate Dean of Student Affairs or Senior Director of the Academic Success Program. The Associate Dean of Student Affairs and the Senior Director routinely review the process for reporting mistreatment in student debriefings, class meetings, and the Student Handbook

- Students may meet with the individual involved in the complaint and come to an informal mutually agreed upon resolution of the problem. The student may wish to bring a representative of the hospital, School of Medicine, Dean's Office, or the University to aid in dispute resolution. These representatives may include chief residents, student program directors, department chairs, nurse managers, the Associate Administrator for Patient Care Services, Senior Director of Academic Success Program or, a School of Medicine Dean. Unless required by law or University policy, there will not be a written record made concerning a matter that is resolved directly between the complainant and the alleged offender
- Students may meet with the Associate Dean of Student Affairs, the Associate Dean of Curriculum, or the Vice Dean for Education to formally report an alleged infraction. Allegations of illegal discrimination or sexual harassment should be referred to the Office of Equal Opportunities and Affirmative Action (OEO/AA) at (801) 581-8365. In all other incidents, once the student has provided the Associate or Vice Deans with a written claim of mistreatment, the Associate Dean of Student Affairs will conduct a timely investigation of the facts and will assist in any intervention deemed necessary for resolution of the problem. If so desired, the Associate Dean may form an ad hoc advisory board consisting of faculty, residents, and students who are not involved in the incident. The majority of complaints against faculty and residents can be dealt with on a departmental basis, with feedback to the faculty member or resident from the department chair or residency director. Most complaints against a staff member can be handled with feedback to the individual from their supervisor
- Students may meet with a hospital representative such as a nurse manager or the Associate Administrator for Patient Care Services, or department representatives, such as chief residents, course directors, chairs, or School of Medicine officials, such as the Associate Dean of Student Affairs, to informally discuss a complaint and to develop a plan for resolution of the problem
- Disciplinary actions or academic sanctions will be assessed in accordance with the following:

Violations of the Standards of Conduct by a faculty member shall be the basis for disciplinary action in accordance with Code of Faculty Rights and Responsibilities

### Disciplinary Actions or Academic Sanctions Will Be Assessed in Accordance with the Following:

- Violations of the Standards of Conduct by a faculty member shall be the basis for disciplinary action in accordance with Code of Faculty Rights and Responsibilities and the School of Medicine Professional Conduct Policy for Faculty
- Violations of the Standards of Conduct by a staff member shall be the basis for disciplinary action in accordance with University of Utah Human Resources and the University of Utah Hospitals and Clinics Professional Conduct Policy
- Violations of the Standards of Conduct by a resident shall be the basis for disciplinary action in accordance with the Graduate Medical Education policy and procedures
- <http://medicine.utah.edu/gme/policies/GME%208.4%20Resident%20Professional%20Conduct%20Policy.doc>

- Violations of the Standards of Conduct by a medical student shall be the basis for disciplinary action in accordance with the School of Medicine Handbook (for medical students), the appropriate College policy (for U of U graduate students) and the University of Utah Code of Students Rights and Responsibilities

Students should report alleged incidents of illegal discrimination or sexual harassment to the University's Office of Equal Opportunities and Affirmative Action (OEO/AA) at (801) 581-8365, a representative from OEO/AA, will explain available grievance options to the student. The student is encouraged to discuss an alleged incident of illegal discrimination or sexual harassment with the appropriate course director, department chair, the Associate Dean of Student Affairs. These individuals are obligated to report any such incidents to the OEO/AA and will encourage the student to contact that office for assistance.

## Information Resources Policy

This excerpt from the University of Utah Information Resources Policy covers acceptable use of computer/information resources made available to medical students.

<http://www.regulations.utah.edu/it/4-002.html>

### Purpose

To outline the University's policies for students, faculty, and staff, concerning the use of the University's computing and communication facilities, including those dealing with voice, data, and video. This policy governs all activities involving the University's computing facilities and information resources, including electronically or magnetically stored information. Every user of these systems is required to know and follow this policy.

### Scope

This policy applies to all members of the University of Utah community, and governs all storage and communications systems owned by the University, whether individually controlled or shared, stand alone or networked.

Individual departments and colleges serve diverse purposes and diverse constituencies; therefore, they have broad discretion in establishing reasonable and appropriate policies and "conditions of use" for facilities under their individual control. Departmental policies shall be consistent with this policy although they may provide additional detail, guidelines, and/or restrictions.

### Definitions

Information Resources include any information in electronic, audio-visual or physical form, or any hardware or software that makes possible the storage and use of information. This definition includes but is not limited to electronic mail, phone mail, local databases, externally accessed databases or cloud based data, CD-ROM, motion picture film, recorded magnetic media, photographs, digitized information, or microfilm. This also includes any wire, radio, electromagnetic, photo optical, photo electronic, or other facility used in transmitting electronic communications, and any computer facilities or related electronic equipment that electronically stores such communications. User includes anyone who accesses and uses the University of Utah Information Resources.

## Policy

The University of Utah makes available Information Resources which may be used by University students, faculty, staff, and others. These resources are intended to be used for educational purposes and the legitimate business of the University and in a manner consistent with the public trust. Appropriate use of the resources includes instruction, independent study, authorized research, independent research, and the official work of the offices, departments, recognized student and campus organizations of the University.

Access to computer systems and/or networks owned or operated by the University of Utah impose responsibilities and obligations on its Users. Access is granted subject to University and Board of Regents policies, and local, state, and federal laws. Appropriate use is ethical, reflects academic honesty, and shows restraint in the utilization of shared resources. Appropriate use is consistent with intellectual property rights, ownership of data, system security mechanisms, and rights to privacy and to freedom from intimidation, harassment, and annoyance.

It is the University's policy to maintain access to local, national, and international sources of information, and to provide an atmosphere that encourages access to knowledge and sharing of information. The University also strives to create an intellectual environment in which students, staff, and faculty feel free to create individual intellectual works as well as to collaborate with other students, staff, and faculty without fear that the products of their intellectual efforts will be violated, misrepresented, tampered with, destroyed, stolen, or prematurely exposed. Nothing in this policy guarantees that violations of this policy will not occur or imposes liability on the University for any damages resulting from such a violation.

The personal use of University resources is covered in the University's Conflicts of Interest policy, [Policy 1-006](#) and in [Policy 6-316](#) and [Policy 5-207](#). The University retains the right to allocate its information resources and to control access to its electronic communications systems.

## Privacy

Electronic communications systems have inherent limitations. No computer security system can absolutely prevent a determined person from accessing stored information that he/she is not authorized to access. Moreover, electronic documents may be disclosed pursuant to public records law or in the discovery process.

Users shall respect the legitimate expectations of privacy of others. However appropriate administrators and network managers may require access to records and data typically taken to be private. In particular, individuals having official computer or network responsibilities, such as system administrators, network supervisors, system operators, postmasters or others who cannot perform their work without access to documents, records, electronic mail, files or data in the possession of others, may access such information as needed for their job responsibilities. Whenever practical, prior notice should be given for other than trivial intrusions on privacy.

The University reserves the right to concurrently monitor its students' and employees' electronic communications when such monitoring is necessary to the evaluation of his/her job

performance quality. The University will notify employees when such monitoring or surveillance may occur. This monitoring will comply with the following restrictions:

- All monitoring will be relevant to work performance
- Employees will be given access to information about their work gained through monitoring
- Disclosure and use of resulting data will be restricted to University-related purposes

### Individual Responsibilities

Users shall respect the privacy and access privileges of other users both on the University campus and at all sites accessible through the University's external network connections.

Users shall treat institutional data, files maintained by other Users, departments, or colleges as confidential unless otherwise classified pursuant to state or federal statutes, regulation, law, or University policy. Users shall not access files or documents belonging to others, without proper authorization or unless pursuant to routine system administration.

Users shall not knowingly falsely identify themselves and will take steps to correct misrepresentations if they have falsely or mistakenly identified themselves.

In making appropriate use of Information Resources users must:

- Use Information Resources only for authorized purposes
- Protect their user ID from unauthorized use
- Be considerate in their use of shared resources and refrain from monopolizing systems, overloading networks with excessive data, or wasting computer time, connect time, disk space, printer paper, manuals, or other resources
- 

Users must respect the integrity of computing systems and networks, both on the University campus and at all sites accessed by the University's external network connections. As such, in making appropriate use of Information Resources Users must NOT:

- Gain, attempt to gain, or help others gain access without authorization
- Use or knowingly allow other persons to use University Information Resources for personal gain, for example, by selling access to their User-ID, or by performing work for profit or contrary to University policy
- Destroy, damage, or alter any University Information Resource or property without proper authorization
- Waste computing resources, for example, by implementing or propagating a computer virus, using destructive software, or inappropriate game playing, or monopolizing information resources for entertainment or personal use
- Harass or intimidate others in violation of law or University policy
- Violate laws or University policy prohibiting sexual harassment or discrimination on the basis of race, color, religion, gender, national origin, age, disability, sexual orientation, or veteran status



- Attempt to monitor or tamper with another user's electronic communications or copy, change, or delete another user's files or software without the explicit agreement of the owner(s)
- Violate state and federal laws pertaining to electronic mailing of chain letters and other unauthorized use of computing resources or networks
- Make or use illegal copies of copyrighted or patented software, store such copies on University systems, or transmit such software over University networks
- Attempt without authorization to circumvent or subvert normal security measures, engage in any activity that might be harmful to systems or information stored thereon, or interfere with the operation thereof by disrupting services or damaging files. Examples include but are not limited to: running "password cracking" programs, attempting to read or change administrative or security files, attempting to or running administrative programs for which permission has not been granted, using a telnet program to connect to system ports other than those intended for telnet, using false identification on a computer or system or using an account assigned to another, or forging mail or news messages
- Transfer software, files, text, or pictures in violation of copyright and/or pornography laws, or transfer software or algorithms in violation of United States export laws

### Enforcement and Sanctions

A violation of the provisions of this policy or departmental policy is a serious offense that may result in the withdrawal of access and in addition may subject the User to disciplinary action or academic sanctions consistent with University policies and Procedures.

Incidences of actual or suspected non-compliance with this policy should be reported to the appropriate authorities. Disciplinary actions or academic sanctions will be assessed in accordance with the following: Violations of this policy by a faculty member shall be the basis for disciplinary action in accordance with Policy 6-316, Code of Faculty Responsibility.

Violations of this policy by a staff member shall be the basis for disciplinary action in accordance with Policy 5-111, Disciplinary Actions and Dismissal of Staff Employees, and Policy 5-203, Staff Employee Grievances and Appeals.

Violations of this policy by a student shall be the basis for disciplinary action in accordance with School of Medicine Handbook and the University Student Code, Policy 6-400.

A systems administrator may immediately suspend the access of a User when the administrator reasonably believes:

- The User has violated University policies or law
- The User's continuing use of Information Resources will result in: (1) damage to the Information Resources systems, (2) further violations of law or policy or (3) the destruction of evidence of such a violation
- The User shall be informed of his/her right to immediately appeal such a suspension to the cognizant head of the department or course. Permanent revocation of privileges

shall be imposed solely through the disciplinary processes set forth in paragraph 2 above. (Section V.D.2)

Users who are not faculty, staff, or students may have their access to Information Resources unilaterally revoked if they violate this policy.

## Drug-Free Environment

### Purpose

To provide the policy, procedures, and programs for the maintenance of a drug-free workplace and educational environment that applies to all medical students, and to provide for compliance with federal law regarding prevention of illicit use of drugs and the abuse of alcohol, and to provide for compliance with federal law requiring a program to prevent the illicit use of drugs and the abuse of alcohol.

### References

Federal Law, Drug-Free Workplace Act of 1988 Federal Law, Drug-Free Schools and Communities Act Amendments of 1989

[UU Policy 5-113: Drug-Free Workplace](#)

[UU Policy 6-400: Code of Student Rights and Responsibilities](#)

### Definitions

#### Educational Environment

A classroom, clinical location, or other educational setting in which medical education or other medical school activity is conducted under the auspices of the University of Utah School of Medicine.

#### Medical Student

Any student who has accepted an offer of admission or who is matriculated in the University of Utah School of Medicine.

#### Controlled Substance

Any controlled substance in schedules I through V of Section 202 of the Utah Controlled Substance Act (21 U.S.C. 812). All substances listed in the federal Controlled Substances Act, Title II, P.L. 91-513, are considered controlled. A copy of these schedules is available for review by any member of the University community in the Office of Personnel and Benefits and Student Counseling.

#### Criminal Drug Statute

Criminal drug statute involving the manufacture, distribution, dispensation, use or possession of any controlled substance or alcohol.

#### Conviction

Finding of guilt for a crime by a court of competent jurisdiction, including a "No Contest" plea.

## Policy

It is the policy of the University of Utah School of Medicine to establish, promote, and maintain a drug free, safe and healthy working and educational environment for medical students.

It shall be a violation of this policy for any medical student to engage in the unlawful manufacture, distribution, dispensation, possession, and/or use of a controlled substance. This includes being under the influence or impaired in activities anywhere in the educational environment of the School of Medicine or University of Utah, or in any manner that violates criminal drug statutes. Unauthorized use or possession of alcohol anywhere in the educational environment of the School of Medicine or University of Utah is also prohibited.

As a condition of continued enrollment in the School of Medicine, students must notify the Associate Dean of Student Affairs of a guilty plea, a plea of no contest, or conviction of any charge other than a minor traffic violation that occurs between matriculation to and graduation from medical school. This notification must be made no later than five (5) calendar days after any guilty plea, plea of no contest, or conviction of any charge other than a minor traffic violation. Within thirty (30) calendar days of notification of a guilty plea, plea of no contest, or conviction of any charge other than a minor traffic violation, the School of Medicine will take appropriate actions as described below.

Policy violations and/or convictions will be referred to the Office of Student Affairs for informal resolution or presentation to the Promotions Committee as academic misconduct, and may result in disciplinary action. The Promotions Committee will conduct such investigation as it deems necessary and appropriate in accordance with the committee's usual standards of due process.

In appropriate cases, students may be referred to local substance abuse experts for evaluation and/or treatment. In these cases, compliance with evaluation and treatment protocols may be established as a precondition to continued enrollment in the School of Medicine. If a student fails to follow the established evaluation or treatment protocol, the case will be re-examined by the Promotions Committee and appropriate sanctions, including disciplinary measures or dismissal, may ensue.

Students are encouraged to self-identify to the Associate Dean of Student Affairs when they have problems with drug or alcohol abuse. Students who self-identify may be granted a leave of absence to secure treatment without prejudice to their academic standing. In such cases, confidentiality will be maintained, to the extent possible, by the School of Medicine administration.

The Office of Student Affairs will undertake such educational initiatives as it deems advisable to acquaint the medical school community, including students and faculty, with the problems and characteristics of drug and alcohol abuse.

## Drug Testing

### Purpose

To provide the policy, procedures, and programs for the maintenance of a drug-free workplace and educational environment that applies to all medical students, and to provide for compliance with federal law regarding prevention of illicit use of drugs and the abuse of alcohol, and to provide for compliance with federal law requiring a program to prevent the illicit use of drugs and the abuse of alcohol.

### References

[Policy 5-113](#), Drug-Free Workplace

[Policy 5-111](#), Disciplinary Sanctions and Termination of Staff Personnel

[Policy 5-210](#), Non-Discrimination and Staff Employee Grievance

[Policy 6-316](#), Code of Faculty Responsibility

[Policy 6-400](#), Code of Student Rights and Responsibilities

Federal Law Drug-Free Workplace Act of 1988

Federal Law Drug-Free Schools & Communities Act Amendments 1989

### Definitions

#### Controlled Substance

Any controlled substance in schedules I through V of Section 202 of the Controlled Substance Act (21 U.D.V. 812).

#### Criminal Drug Statute

Any criminal drug statute regarding the manufacture, distribution, dispensation, use, or possession of any controlled substance.

#### Drug Recognition Coordinator

A person trained to identify and recognize drug and alcohol impairment.

#### Drug Test

Urine testing, oral swab, or other similarly minimally invasive test for the presence of controlled substances or their metabolites; breath-testing for alcohol.

#### Medical Review Officer (MRO)

A licensed physician with knowledge of substance abuse disorders employed or utilized to interpret drug test results.

#### Patient Sensitive Position

A position involving patient contact, patient diagnostic or therapeutic functions, or a position in which the individual works in or has job-related access to patient care areas.

### Grounds for Testing

#### Applicant Testing

A drug test may be administered to any medical school applicant once s/he accepts an offer of admission to the University of Utah School of Medicine. Medical students transitioning to or

working in a patient sensitive position may be tested prior to transfer.

### Reasonable Suspicion

A drug test may be administered to a medical student when supervisor and/or designee, after consulting with a Drug Recognition Coordinator, concludes, after reviewing the facts and circumstances, that it is more likely than not the medical student has engaged in conduct that violates this policy. Reasonable suspicion of drug and/or alcohol use may be based on: (1) observable phenomena, such as direct observation of drug use or possession and/or the physical symptoms of being under the influence of a drug or alcohol; (2) a pattern of abnormal conduct or erratic behavior; (3) information provided by reliable and credible sources regarding the student's violation of this policy; or (4) newly discovered evidence that the student tampered with a previous drug test. All medical school applicants who have accepted a position and medical students tested under this provision shall be relieved from patient care and clinical service pending the results and review of the drug test by the designated management official.

### Drug Loss or Diversion Event

A drug test may be administered when a drug loss and/or diversion event occurs (identified and/or unexplained controlled substances and/or alcohol missing or diverted from the workplace). A supervisor may, in consultation with the Drug Recognition Coordinator, require any medical student who had reasonable access to the controlled substances or alcohol during the time of the drug loss or diversion event to submit to a test.

### Return to Medical School Curriculum Agreement

Random drug and/or alcohol tests may be required for a medical student returning to medical school after engaging in conduct prohibited by this policy. Medical students in patient sensitive positions may be tested at random as part of a return to work agreement at the discretion of the MRO.

### Agency Directives

Individuals may be tested as required or requested by state or federal agencies.

### Testing Process

At the time a position in medical school is accepted by the prospective student, s/he shall be informed about the University Drug-Free Workplace Policy and the University of Utah Health Sciences Center Drug Testing Policy. Students may be drug tested as a condition of admission. Drug testing will be performed as a condition of participation in patient care activities of the curriculum and prior to beginning Phase 3 courses.

Once a medical student is scheduled for a drug test, s/he must report to a designated collection site at the scheduled time. Students who fail to report or to provide a specimen suitable for testing will be referred to the Associate Dean of Student Affairs.

Upon arriving at the collection site, the medical student will be asked to sign a waiver consenting to the test. Refusing to consent to a test will be grounds for student discipline, up to and including revocation of an acceptance offer and/or dismissal from medical school.

The procedure for sample collection shall allow privacy for the subject of the test. Storage and transportation shall be performed so as to reasonably preclude sample contamination or adulteration. Reasonable efforts will be made to respect the dignity of the individual tested.

The School of Medicine shall designate a certified laboratory to perform the testing. Testing will conform to scientifically acceptable collection, identification, handling, and analytical methods, including confirmation of any positive test by a method consistent with industry standards.

Once the sample has been analyzed, the MRO will review and interpret each confirmed positive test to determine if there is an alternative medical explanation for the positive result. The MRO may conduct any investigation s/he deems necessary, including but not limited to interviewing the individual testing positive; reviewing the individual's medical history and medical records to determine if the positive result was caused by a legally prescribed medication, requiring proof of a legal prescription; requiring a re-test of the original specimen; and/or verifying that the laboratory report and the specimen are correct. The MRO will be required to conduct him or herself in accordance with guidelines published in the Medical Review Officer's Manual published by the Department of Health and Human Services.

### Drug Test Results

A test is positive and the individual has therefore failed the test if the sample contains drugs and/or metabolites for which the MRO concludes there is no legitimate explanation other than the use of a prohibited drug or alcohol. In addition, refusing to take a test, failing to report to the designated area for testing, failing to provide a sample suitable for testing, and/or attempting to alter or tamper with the specimen will be interpreted as a failed test.

Drug test results will be reported to the Associate Dean of Student Affairs only as pass or fail.

All information relating to the MRO's investigation, test results, and subsequent substance abuse treatment shall be treated confidentially and will be placed in a file maintained by the MRO and physically separate from the student's academic file. The student's academic file will include only the pass/fail result from the test and the prohibited substance resulting in a failed test.

Within 72 hours after the covered individual has received notice of a failed test, the covered individual may request, in writing a retest of a split sample at a certified laboratory of his or her choosing. The University shall pay half of the cost of the retest. The results of the retest shall be interpreted by the MRO.

### Disciplinary Action

Applicant/Transfers: Any offer of acceptance to medical school or transfer to patient sensitive areas will be revoked if a medical student fails a drug test.

Students failing a drug test pursuant to this policy shall be directed to the Office of Student Affairs and processed in accordance with University Code of Student Rights and

Responsibilities. A failed test may result in dismissal from the academic program in accordance with University of Utah Student Code.

## Educational Records and Privacy Rights

The University of Utah School of Medicine student records are governed by the Family Educational Rights and Privacy Act (FERPA). FERPA grants to all University students, including medical students, the following basic rights:

- The right to request access to your education records
- The right to have your education records protected from disclosure except in certain limited circumstances
- The right to designate basic directory information (e.g., name, address, telephone number, dates of attendance, etc.) as part of your private education records
- The right to seek an amendment to education records that are inaccurate, misleading, or in violation of your privacy rights
- The right to complain to the U.S. Department of Education should you feel that your FERPA rights have been violated

For more information about each of these rights and about the processes for exercising these rights, please refer to the website of the University's Registrar at the following link:

<http://registrar.utah.edu/handbook/ferpa.php>

For access to your School of Medicine records and/or to seek an amendment to your records, please follow the procedures outlined below:

### Requesting Access to your Educational Records

Medical students who wish to review their education records should submit a written request to the Associate Dean of Student Affairs.

### Requesting an Amendment to your Educational Records

Students who believe their education records contain information that is inaccurate, misleading, or in violation of the student's rights of privacy should first attempt to resolve the issue with the relevant faculty member(s). Students may also present their request to the Associate Dean of Student Affairs who will work with the student and faculty member(s) to attempt informal resolution of the issue. Students who are not satisfied with the result of the informal resolution process may submit a formal request for amendment pursuant to the procedures outlined on the University's Registrar link:

<http://registrar.utah.edu/handbook/ferpa.php>

### Request for Release of Records

Because the University generally will not disclose your education records to anyone other than you, you must complete the online Consent to Release Form should you wish to provide a third-party access to your records. The Consent to Release Form is located at the following link:

<http://registrar.utah.edu/handbook/ferpa-consent.php>

# Infectious, Environmental and Bloodborne Pathogen Exposures Policy

## Purpose

To provide a comprehensive plan to eliminate and/or reduce occupational exposure to infectious, environmental, and/or bloodborne pathogens and to ensure compliance with federal regulations.

## Definitions:

### Airborne Pathogen

Infectious disease transmitted via aerosolized particles including tuberculosis, chicken pox, (Varicella), and measles.

### Biohazard Label

A fluorescent orange label with the biohazard symbol.

### Blood

Human blood, blood products, or blood components.

### Bloodborne Pathogen

Microorganisms present in human blood and can cause disease in humans, which include Hepatitis B Virus (HBV), Hepatitis C Virus (HCV), and Human Immunodeficiency Virus (HIV).

### Body Substance Precaution (BSP)

Isolation precautions that consider all blood, body fluids visibly contaminated with blood, body fluids, substances, unfixed tissues, organs, or cultures from living or dead human sources as potentially infectious.

### Clinical Work Area

Any area involving exposure/potential exposure to blood or other potentially infectious materials, such as patient care rooms, treatment rooms, exam rooms, laboratories, dirty utility rooms, specimen holding areas, etc.

### Contaminated

The presence or the reasonably anticipated presence of blood or other potentially infectious materials on an item or surface.

### Decontamination

The use of physical or chemical means to remove, inactivate, or destroy bloodborne pathogens on a surface or item to the point where the surface or item is rendered safe for handling, use, or disposal.

### Engineering Controls

Controls that isolate or remove a bloodborne pathogen hazard from the work place such as blades or needles that retract after use, needleless devices, or sharps disposal containers.



### Environmental Hazard

Any exposure which may have health repercussions, such as chemical spills or radiation.

### Exposure Determination

Based on the definition of occupational exposure without regard to personal protective clothing and equipment.

### Exposure Incident

A specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials, or an exposure to an environmental hazard that results from an activity related to education or employment.

### Occupational Exposure

Skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials that may result from an activity related to education or employment.

### Other Potentially Infectious Materials

All body fluids, tissues, or cultures from living or dead human sources, other than blood (e.g. semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, peritoneal fluid, amniotic fluid, concentrated viruses, aerosolized particles, saliva, etc.)

### Personal Protective Equipment (PPE)

Specialized clothing or equipment worn by an employee for protection against exposure to bloodborne pathogens and other body fluids/substances. General work clothes (e.g. uniforms, pants, shirts, or blouses) not intended to function as protection against a hazard is not considered to be personal protective equipment.

### Regulated Waste

Any liquid or semi-liquid blood or other potentially infectious materials; contaminated items that would release blood or other potentially infectious materials in a liquid or semi-liquid state if compressed; items that are caked with dried blood or other potentially infectious materials and are capable of releasing these materials during handling; contaminated sharps; and pathological and microbiological wastes containing blood or other potentially infectious materials.

### Student

An individual currently enrolled in medical school at the University of Utah School of Medicine.

### Work Practice Controls

Practices that reduce the likelihood of exposure by altering the manner in which a task is performed, such as prohibiting recapping, removing, or bending of needles (unless required by a specific medical procedure).

## Universal Precautions

A method of infection control in which all human blood and other potentially infectious materials are treated as if known to be infectious for HIV and HBV. It does not apply to feces, nasal secretions, sputum, sweat, tears, urine, or vomitus unless they contain visible blood

## Policy

The School of Medicine supports a comprehensive exposure control plan for infectious, environmental, and bloodborne pathogens, as required by OSHA, which delineates who is at risk, the methods for preventing and reducing exposures, the steps to take in the event of an exposure, and procedures for training and record-keeping.

The Office of Student Affairs will coordinate HIPAA certification training and training in risk prevention practices and body substance precautions to ensure compliance with OSHA requirements and federal regulations. Annual training and recertification will be required of all medical students.

## Universal Precautions

Universal Precautions policies are in place to protect students and patients from unnecessary health risks. Universal Precautions will be used by all students who may be subjected to blood or body fluids. All students are required to follow appropriate infection control procedures, including body substance precautions, where there is a risk of parenteral, mucous membrane, or cutaneous exposure to blood, body fluids, or aerosolized secretions from any patient, irrespective of the perceived risk of exposure. Students will wear appropriate personal protective equipment (e.g., gloves, goggles, mask, and gown) in situations where exposure to blood, body fluids, or environmental hazards is possible.

Students with needle sticks or other training-related injuries or illness, environmental or bloodborne pathogen exposures will follow regulations and protocols established by the federal Occupational Safety and Health Administration (<http://www.osha.gov/index.html>) and the University of Utah Department of Environmental Health and Safety (<http://oehs.utah.edu/>).

## Patient Non-Discrimination

Medical students shall provide competent and compassionate care to all patients, irrespective of their known or suspected HIV, TB, or other infection status.

## Medical Students with Bloodborne and/or Airborne Infections

Medical students infected with bloodborne or other pathogens shall not, solely because of such infection(s), be excluded from participation in medical school life, including educational opportunities and extracurricular activities except as otherwise required by applicable federal, state, or local law, or unless the health of the student presents a direct threat to the health and safety of others. Students infected with airborne pathogens may be excluded from participation in such activities during the infectious stage of their disease.

Medical students who know or who have a reasonable basis for believing that they are infected with bloodborne or airborne pathogens are expected to seek expert medical advice

regarding their health circumstances to have a clear understanding of the medical issues presented by these infections. Students are expected to seek advice from their health care provider and/or the School of Medicine Employee Infection Control Office (University Hospital Room AA217). Phone 801-581-2706.

### In the Event of an Occupational Exposure Incident

- Notify your senior resident or attending physician immediately
- Seek medical treatment as directed by your resident or attending physician as soon as possible. If possible, utilize a University provider, such as the Work Wellness Center (AC 147 University Hospital, 801-581-2227) or the University of Utah Emergency Department.
- If you are rotating in a healthcare setting outside of the University, utilize the services of the Emergency Department services at your location. Indicate to your health care provider that this incident will be covered by the Workmen's Compensation Fund of Utah (WCFU)
- Notify the Absence Management Team in Human Resources about any changes or updates in your mailing address, treatments, and contact information
- Obtain a copy of the Employers First Report of Injury or Illness form from your health care provider, the Emergency Department, your course or elective coordinator, the Student Affairs Office, or the University of Utah Human Resources website (<http://www.hr.utah.edu/forms/lib/E1.pdf>). Fill in the "Employee" portion of the form using your name as it appears on your School of Medicine ID badge. Have your senior resident or attending physician complete the "Occurrence" portion of the form. The Emergency Department or your care provider should complete the "Treatment" portion of the form. Within 24 hours, submit the completed form to the Workers Compensation Fund of Utah [www.wcfgroup.com](http://www.wcfgroup.com) (1-800-446-2667 or 1-385-351-8010) and the University of Utah Absence Management Team (located at 420 Wakara Way Suite 105 Salt Lake City, UT 84108, phone 801-581-2169, fax 801-581-5571)
- If the work related injury or illness is potentially infectious, you must follow up with the Work Wellness Center (AC 147 University Hospital, 801-581-2227) within one business day. If you are rotating in a healthcare setting outside of the University, utilize the Employee Health services at your location
- If the work related injury or illness is not infections, but involves overnight hospitalization, broken bones, loss of limb, or a fatality, you or your attending physician must contact Environmental Health and Safety (EHS) immediately of the accident (University of Utah Bldg. 605 125 South Fort Douglas Blvd. Salt Lake City, Utah 84113, phone 801-581-6590. After hours use University Police Dispatch: 801-585-2677. You will need to request the dispatch operator notify EHS of an industrial accident requiring investigation)
- Inform your resident and attending physician of the outcome of your treatment(s). You must submit any physician note releasing you from work to your attending physician and the Office of Student Affairs
- Be aware that additional medical services may need pre-authorization. Check with the Absence Management Team. Be sure to tell professionals providing these services that you are insured by the Workmen's Compensation Fund of Utah WCFU

In the course of testing required by occupational exposure incident protocols, Occupational Health must report communicable infectious diseases (including HIV/AIDS, tuberculosis, viral hepatitis) to the State Health Department.

### Confidentiality and Testing

The School of Medicine shall respect the confidentiality of individuals with bloodborne or airborne pathogens to the extent permitted by state and federal law. Medical students will not be tested for HIV, or other bloodborne or airborne pathogens without their knowledge or consent, except in circumstances when testing may be required by occupational exposure protocols. In cases of non-occupational exposure, confidential testing is available through the Salt Lake County Health Department, the University of Utah Student Health Service, or your primary care physician.

### Research Environment Exposure Control

All research and laboratory directors, principal investigators, and laboratory workers shall recognize their responsibility for preventing transmission of bloodborne and other pathogens when handling human blood and other potentially infectious materials in the laboratory. Researches must comply with the University of Utah Biosafety Manual and the Bloodborne Pathogen Exposure Control Plan available from the Environmental Health and Safety Department (<http://ehs.utah.edu>). Environmental hazards are present in the research setting and all research and laboratory directors, principle investigators, and laboratory workers must be familiar with and follow the established guidelines of the Chemical Safety (<http://ehs.utah.edu/research-safety/chemical-safety>), also available from the Environmental Health and Safety Department (<http://ehs.utah.edu>).

### University of Utah Office of Equal Opportunity Reporting

Medical students who believe they have been the victim of discrimination because of actual or perceived infection with HIV, viral hepatitis, tuberculosis, or other communicable pathogen should contact the Office of Equal Opportunity/Affirmative Action (801-581-8365, 135 Park Building, 201 South Presidents Circle, SLC, UT 84112).

### HIPAA / Bloodborne Pathogen / OSHA / Compliance Training

The Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule provides federal protections for personal health information and gives patients an array of rights with respect to that information. At the same time, the Privacy Rule is balanced so that it permits the disclosure of personal health information needed for patient care and other important purposes. A major goal of the Privacy Rule is to assure that individuals' health information is properly protected while allowing the flow of health information needed to provide and promote high quality health care and to protect the public's health and wellbeing. The Rule strikes a balance that permits important uses of information, while protecting the privacy of people who seek care and healing.

Medical students must be trained, certified, and remain in compliance with current policies in order to participate in patient care activities. The Office of Student Affairs oversees HIPAA, bloodborne pathogen, OSHA, compliance training modules, and competency testing.

Matriculating medical students must complete required HIPAA, bloodborne pathogen, OSHA, and, compliance online training through Canvas before Transition to Medical School.

HIPAA training and certification must be renewed annually. The Office of Student Affairs will notify students of required HIPAA training modules and deadlines for completion of annual training/recertification.

A HIPAA violation by a medical student is considered a breach of professional responsibility. Academic policy extends to any case of alleged misconduct, including lapses in professionalism. As such, medical students who violate HIPAA will be referred to the Associate Dean for Professionalism, Evaluation and Learning. If informal resolution is not possible, the Associate Dean of Student Affairs for Professionalism, Evaluation and Learning will refer the matter to the Promotions Committee.

### Student Group Fundraising Policy

Students from the colleges of Nursing, Pharmacy, Health, and the School of Medicine must obtain written approval from their Dean or designee in Student Affairs and from the development office for any fundraising activity before proceeding.

The full-time development staff is authorized to conduct fundraising activities in the University's name in accordance with these guidelines and with the University of Utah Policies and Procedures. Development or fundraising activities campus-wide are to be coordinated with the Health Sciences Development Offices.

Students seeking private funding for any amount must complete and submit a Request for Fundraising Approval form to the Health Sciences Development Office (540 Arapeen, Suite 120, SLC, UT. phone 801-585-7709). The form must have all approval signatures, including the Dean's, before the request will be considered. No solicitations of donors may take place without an approved Fundraising Approval form in hand.

- Solicitation of an approved donor must take place within two months of the date of approval. During that time, no other University of Utah entity can solicit that donor unless approval is obtained from the Vice President of Development
- A list of all donor prospects must be submitted to the Health Sciences Development Office prior to soliciting any gifts
- A list of all donors solicited and amounts given must be submitted to the Health Sciences Development office at the completion of the fundraising in order to record the gifts appropriately
- No students may solicit gifts from any donor whose name appears on the President's reserve list that is on file in the Student Affairs Office

Students will be personally responsible and liable for the collection and safe keeping of the gift. Ultimate use of any funds raised will be overseen by a department or college administrator.

Raised funds must be deposited through the Health Sciences Development Office into student accounts overseen by the Dean or a faculty/staff designee.

Gifts-in-kind (furniture, food, etc.) must be receipted for the amount specified by the donor(s).

Medical students and medical student interest groups may not solicit money or in-kind support from pharmaceutical or medical device industry representatives for any purpose, and may not accept gifts or incentives in any form.

In order to sell T-shirts or other paraphernalia with any U of U logos or marks on it, prior approval must be obtained through the U of U Health Sciences Marketing Office by emailing: [brand@hsc.utah.edu](mailto:brand@hsc.utah.edu).

## School of Medicine Industry Relations Policy

The University of Utah School of Medicine is committed to outstanding education, research, and patient care that are free from inappropriate external influences. We recognize the important partnership between industry and academia in advancing all of these missions. The purpose of this policy is to set standards of education and interaction between School of Medicine faculty, staff, trainees, students, and industry entities or representatives. This policy applies to all faculty, staff trainees, and students within the School of Medicine, including medical students, part-time faculty, with regular (tenure track), or auxiliary (clinical, research, or lecturer) faculty appointments. It also applies to faculty with adjunct appointments whenever they are acting in their capacity as a faculty member (such as interacting with students or trainees or representing themselves as faculty members). Conflict of interest issues regarding research, human subjects, and the interaction between industry and University of Utah Hospitals and Clinics ("UUHC") personnel are addressed in separate policies.

### Definitions

#### Business Entity

A sole proprietorship, partnership, association, joint venture, corporation, limited liability company, firm, trust, foundation, or other organization or entity used in carrying on a trade or business.

#### Consulting

Any relationship where a University employee is retained by an industry business entity to provide professional advice or services outside of their University employment.

#### Family

Includes spouse/domestic partner and/or dependent children.

#### Gifts

Includes money, food, any other non-pecuniary item (e.g. entertainment, flowers, notepads, pens, etc.), excessive compensation, and non-commercial loans.

## Industry

Includes all pharmaceutical manufacturers, biotechnology, medical device, and hospital equipment supply industry entities and their representatives.

## Intellectual Property

Any ideas, inventions, technology, creative expression, and embodiments thereof, in which a proprietary interest may be claimed, including but not limited to patents, copyrights, trademarks, know-how, and biological materials.

## Other Industry Financial Relationships

Includes any of the following:

- Any equity ownership interests (e.g. stock, partnership interest, member interest) in an industry business entity, excluding ownership in mutual funds and/or pension funds
- Any leadership position (e.g. officer, director, partner) in an industry business entity
- Any intellectual property ownership in the products of an industry business entity

## University of Utah Healthcare/UUHC

University of Utah Healthcare and/or UUHC shall include all health care delivery and educational programs of the University of Utah, to include hospitals, clinics, centers, teaching locations, and providers.

## Promotional Material and Gifts from Industry Representatives

### Promotional materials

Industry representatives are not permitted to distribute, post, or leave any printed or handwritten materials, advertisements, signs, or other such promotional materials anywhere on the School of Medicine premises, unless otherwise specified in this policy. Moreover, unsolicited educational, promotional, or informational materials may not be given to physicians, trainees, and staff unless explicitly requested. Any distribution of promotional or informational materials to trainees must be done under the direct supervision of a faculty member and with approval of the department chair (or designee).

### Patient Educational Materials

Industry representatives are strictly prohibited from providing educational materials of any kind directly to patients or their families, or leaving these materials in areas accessible to patients or trainees. Educational Materials must be given to a faculty member for review. There can be no company/industry promotional message on educational materials. The source of the materials may be acknowledged, but product promotion will not be permitted. The department chair or division chief may, at their sole discretion, distribute educational materials that are useful to our patients. All materials distributed in University of Utah Healthcare clinical sites must also comply with UUHC policies

### Public Areas

All public areas, including faculty, staff, or trainee lounges, in the School of Medicine must be free of any materials that bear the name of a particular product or company. See also UUHC policy entitled Vendor Gifts Policy and Other Vendor Policies.

### Gifts to Individuals

Utah Law and University of Utah Policy prohibit employees from receiving gifts that may improperly influence employees in the conduct of their responsibilities

[\(Policy 1-006, Conflict of Interest Policy\)](#)

The School of Medicine prohibits industry representatives from giving gifts of any kind to School of Medicine faculty, staff trainees, or students. School of Medicine faculty, staff, trainees, and students are prohibited from accepting gifts of any kind from industry representatives. More specifically:

- Individual industry representatives are not allowed to bring food into the organization
- Faculty/Staff/Trainees/Students are not allowed to have meals paid for by industry representatives, except in circumstances described elsewhere in this policy
- Faculty/Staff/Trainees/Students are not allowed to receive gifts, regardless of value and regardless of where the gifts are given (e.g., within School of Medicine facilities, within physician offices, at conferences, etc.)

### Gifts to Departments

Except as specifically provided below, industry representatives are prohibited from providing gifts to individual departments. This prohibition applies to educational events, but also other professional activities such as administrative, academic or clinical meetings, sales calls, employee or patient social events, staff planning sessions or retreats.

### CME Donations

Industry representatives may provide funding for educational events administered by University of Utah Office of Continuing Medical Education ("UUCME"). School of Medicine events receiving industry support must be compliant with ACCME Standards for Commercial Support regardless of whether CME credit is awarded. Commercial support shall not be conditioned to other actual or potential business relationships. The UUCME will maintain a record of contributions and the programs supported from the fund in accordance with ACCME Standards for Commercial Support [www.accme.org](http://www.accme.org)

### Site Visits

Industry representatives may fund site visits by faculty or staff necessary for evaluating products and equipment. However, industry representatives may only pay for the reasonable and actual cost of travel, food, and lodging. The department chair (or designee) must approve site visits in advance.

### Industry Sponsored Scholarships and Educational Funds

Industry representatives may provide funding for scholarships and educational opportunities but only in accordance with the requirements set forth below in Section III.C of this Policy.

### Philanthropic Gifts

School of Medicine departments may receive philanthropic donations from industry or businesses as outlined in University policies. However, such funding must be arranged through



a development officer in the School of Medicine and must be provided pursuant to an approved pledge agreement or gift agreement. Departments that receive such funding shall not be subject to any implicit or explicit expectation of providing something in return for the support (i.e., a *quid pro quo*). Moreover, the name of the School of Medicine and/or the department may not be used by the business entity to imply endorsement of a product or service by the School or the department.

### Incentives

There can be no reward for prescribing any industry representative's device or medication, or for referring or listening to sales promotions. Personnel may not accept payment for evaluating any health care product. Scientific studies funded by industry should be specified by contract that contains specific deliverables and dates.

### Applicable Hospital Policies

School of Medicine faculty, staff, trainees, and students are also subject to all applicable UUHC policies regarding industry representative gifts.

### Industry-Sponsored Scholarships and Educational Funds for Trainees

Departments may only accept industry funding for scholarships and other educational events as provided below. The funding mechanisms relevant to this policy include grants for educational initiatives, scholarships, reimbursement of travel expenses, or other non-research funding in support of scholarship or training. Specifically, the industry funding must comply with all of the following:

- Fellowships directly from industry, whether merit-based or not, must be approved by the Dean's office for compliance with this policy
- Students and/or trainees who receive industry sponsored scholarships or other educational funding must go through the same selection process as other students/trainees supported by School of Medicine or departmental funds. The School of Medicine department, program, or division must select the student or trainee
- Industry will not have any input in selection of students/trainees, except in cases of competitive industry-sponsored awards that are open to trainees of multiple institutions based on merit
- The funds are provided to the department, division, or program and not directly to student or trainee
- The department, division, or program has determined that the funded conference or program has educational merit
- The educational activity for which this scholarship applies must not be limited to a single industry representative's products
- Neither the department, nor the recipient, shall be subject to any implicit or explicit expectation of providing something in return for the support (i.e., a *quid pro quo*)
- The name of the School of Medicine or the attendee's affiliation with the School of Medicine may not be used to imply endorsement of a product or service by the school

- These provisions do not apply to educational programs for trainees at national or professional society meetings, awards, or travel grants presented by professional societies, or refereed competitive awards that are free of commercial influence

### Industry-sponsored non-ACCME Accredited Events

Attendance at meetings sponsored by industry based on relationships as expert consultants, collaborating investigators, or for education about specific products or their uses is permitted as long as attendance legitimately pertains to those activities, and as long as such meetings are not marketed or conducted as CME. Such participation is permitted only if all of the conditions below are met:

- The event addresses a bona fide scientific, education, or business purpose
- Participation and payment for participation must be approved by the division or department chair (or designee) (for medical students, the Associate Dean of Student Affairs) in advance
- Attendance is either for the purpose of participation as an educator, learner, investigator, or consultant in a fair and objective exchange of information, or for learning about new products or uses of products directly relevant to the participant's research or practice
- Honoraria are reasonable and reimbursements limited to actual costs of travel, meals, and fees for faculty acting as organizers, presenters, or panelists. Faculty may not accept payment for attendance only
- There can be no compensation beyond reasonable reimbursements and honoraria as defined above. Compensation in the form of gifts, event tickets, fees for social or recreational activities or expenses at vacation resorts is prohibited
- Meals or receptions attended during such programs are modest and conducted to further the scientific, educational, or business purpose of the meeting

School of Medicine sponsored events must comply with the standards of industry support for CME programs (section III.B.2.a, above), even in the absence of CME accreditation.

### Student and Trainee Education and Expectations Regarding Professionalism

Educational programs will be included in the curricula for students and trainees that address the issues of professionalism and relationships with industry.

- Specific educational objectives will be developed as part of these curricula
- Assessment methods for meeting the educational objectives will be part of the assessment of all students and trainees
- Existing curricula, such as that developed by the National Faculty Education Initiative ([www.nfeinitiative.org](http://www.nfeinitiative.org)) may be used to meet these educational objectives
- The content and success of these programs will be regularly reviewed and updated as part of ongoing curriculum management

Unless related solely to laboratory research students and trainees will not interact with industry representatives unless it is in the presence of a faculty member as part of the educational curriculum.

Industry support for educational activities of students and trainees is prohibited, except as expressly permitted in this document.

All prohibitions on food, gifts, travel, and other industry interactions addressed in this policy also apply to students and trainees.

- Prohibitions for students and trainees remain in force when students or trainees are involved in approved educational activities outside of the University of Utah

### Industry Research Support

Industry-academic collaboration is usually necessary to bring drugs, devices, and other technologies to fruition.

Industry-academic collaboration in the form of industry-sponsored research may give rise to conflicts of interest when faculty or staff has an external financial relationship with the industry sponsor. These relationships require reporting and management in compliance with the University's conflict of interest policy, [Policy 1-006](#). The conflict management process ensures transparency of all financial conflicts, adherence to ethical research principles, and compliance with applicable state and federal law. The Institutional Review Board (IRB) and the Office of Sponsored Projects (OSP) assist faculty in documenting their compliance with applicable University policy during the IRB review and research grant contracting processes to maintain transparency.

Faculty financial conflict management relating to research support must comply with applicable state and federal law.

### Speakers Bureaus

Presentations that promote a vendor, a product, or a service are prohibited by this policy.

Serving on speakers' bureaus or speaking with industry support is strongly discouraged.

Participation on speakers' bureaus is permitted only if presentations are unbiased and do not promote a product/service of the sponsor. This would include meeting all of the following conditions:

- Participants must comply with the requirements of the University consulting policy, [Policy 5-204](#) and the consulting provision of this policy, Section III.F.
- Presentations must comply with all applicable FDA regulations
- Participation and payment for participation must be approved by the department chair (or designee) in advance
- Industry support meets the ACCME Standards for Commercial Support ([www.accme.org](http://www.accme.org))
- Payment is at fair market value for work done including preparation of presentations. Payment cannot include gifts, entertainment, or other perquisites of any kind
- Financial support is fully disclosed to the audience

- Faculty is solely responsible for presentation content, do not use industry-provided educational materials, and are responsible for evidence-based and objective presentation of information
- Industry support for faculty participation is not contingent upon any other relationship or agreement between the industry supporter and the presentation organizer
- Industry support for non-promotional community education programs is permissible

### Oversight, Noncompliance and Enforcement

School of Medicine Dean Oversight - The Dean of the School of Medicine shall have oversight responsibility for this policy. The Dean shall periodically review chair (or designee) decisions under this policy to assure a reasonable level of consistency and integrity in the application of this policy.

Industry Representative Non-Compliance - School of Medicine faculty, trainees, staff, and students shall report noncompliance by industry representatives with this policy to the appropriate office/department.

Employee and Student Non-Compliance - Suspected violations of this policy by School of Medicine faculty, staff, trainees, or students will be referred to the individual's Dean and department chair, who shall determine what actions, if any, shall be taken. Violations of this policy may result in various levels of sanction including but not restricted to: reprimands, fines, probation, suspension, and/or dismissal pursuant to 1) the Code of Faculty Rights and Responsibilities, [Policy 6-316](#), 2) staff disciplinary policies and procedures, [Policy 5-111](#), and 3) the Code of Student Rights and Responsibilities, [Policy 6-400](#), and the School of Medicine Student Handbook.

# Government

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Student voices and perspectives are essential to the School of Medicine and the broader University community. Medical students represent their peers on the following standing School of Medicine and University committees:

## Student Government

Every college and department has representation in Associated Students of the University of Utah (ASUU) through the student-run ASUU Advisory Council. All registered students are automatically members of ASUU. Each academic year, enrolled medical students are eligible to participate in ASUU as the School of Medicine representative to the ASUU Assembly, or as an ASUU Senator. Additional information regarding ASUU elections and ASUU services can be found at <http://asuu.utah.edu>

The Student Government Organization (SGO) is an advisory board composed of class presidents and student body officers. The SGO liaises between medical students and the Dean's Office. The SGO meets regularly with the Deans of the Medical School to address medical student issues and concerns. Additionally, SGO members coordinate student run activities and manage medical student funds.

Student body officers coordinate and run student officer elections yearly. The entire student body participates in the election of student body officers for the academic year. These students are traditionally senior students in good academic standing. Each academic year, classes elects two co-presidents for the year. Student body officer and class president elections are held in the spring for the upcoming academic year. Student body officers and class presidents must be active enrolled members of their respective classes and must be in good standing.

## College Council

The University of Utah School of Medicine College Council formulates policies and makes decisions relating to College and department affairs to the extent authorized by University Regulations and under the guidance of the School of Medicine Executive Committee. It advises the administration of the University and the College of the views of the faculty and students of the School of Medicine, and receives and disseminates information to the faculty and students of the School of Medicine, directly and through their elected representatives on the Council. Student representation on the School of Medicine College Council includes: the School of Medicine's representative to the ASUU Student Senate and the School of Medicine's FARA resident member.

## Student Participation on Committees

The following committee have standing student membership as part of the committee structure:

## Faculty Appointment, Review, and Advancement Committee

The School of Medicine Faculty Appointment, Review, and Advancement Committee (FARAC) considers all matters pertaining to the appointment and advancement (promotion) of faculty in tenure, clinical, lecturer, and research tracks. Elected student representatives on the FARAC include a fourth year medical student and a graduate student, resident, or postdoctoral fellow.

## Admissions Committee

There are four subcommittees of the Admissions Committee: a) Review Committee: determines which applicants are invited for an interview; b) Interview Committee: conduct interviews to explore applicants' motivation for seeking a medical degree; awareness and understanding of the medical profession; leadership; problem solving skills; understanding of medical ethics; and interpersonal skills; c) Selection Committee: discusses and ranks applicants; d) Executive Committee: Reviews and resolves discrepancies, as needed. Student representatives included selected volunteers from the fourth year medical school class.

## Curriculum Committee

The Curriculum Committee is responsible for creating, overseeing, and managing the medical student education program, and ensuring compliance with all LCME accreditation standards. Student representation on the Curriculum Committee includes up to two members of each medical school.

Medical Student Representatives to the Curriculum Committee and Subcommittees below serve important roles in representing their peers in ongoing curriculum development, delivery, and evaluation. As such they should:

- Solicit input from peers regarding specific committee topics of discussion
- Propose relevant agenda items to the Committee Chair
- Provide representative perspective over personal thoughts during a meeting discussion
- Relay discussion items and decision back to peers after meetings

## Subcommittees of the Curriculum Committee

- Phases 1-2 Subcommittee
- Phase 3 Subcommittee
- Phase 4 Subcommittee
- Curriculum Evaluation Subcommittee - This Subcommittee is responsible for evaluating all required course (including clerkships) and required educational experiences. Student representation on the Curriculum Evaluation Subcommittee includes up to one to two members from each medical school class.

## Promotions Committee

This committee monitors medical students' academic performance, ethical conduct, and progress through the medical school curriculum. Student representation on the Student Promotions Committee includes two medical students from each class year (voting) and one

resident (voting).

### Graduate Medical Education Committee

The Graduate Medical Education Committee (GMEC) oversees and monitors all aspects of resident education in accordance with ACGME Institutional, Common, and specialty-specific Review Committee Requirements. The GMEC is responsible for establishing and implementing policies and procedures regarding the quality of education and the learning and work environment for residents in all University of Utah ACGME-accredited and non-accredited graduate medical education programs to assure that residents achieve the ability to practice the highest standard of care in their specialties as independent physicians upon graduation. Student representation on the GME Committee includes one medical student and eight residents.

### Student Advisory Committee

Composition of the Student Advisory Committees (SAC) is determined annually at the department level. The SAC reviews the educational contribution of faculty candidates as defined by the faculty review criteria. The SAC are convened annually as part of the formal faculty review and advancement process, including formal retention and reappointment reviews, promotion, and award of tenure. Student representatives include medical students, other professional students, graduate students, residents, and fellows.

### Health Sciences Safety Committee

The interdisciplinary Health Sciences Safety Committee was initiated to help achieve and maintain a culture of safety with a focus on the educational corridor that includes the Schools of Medicine and Dentistry, Spencer S. Eccles Health Science Library, Health Sciences Education Building (HSEB) and the Colleges of Nursing, Health, and Pharmacy. Student Representatives include two medical students from each class who serve as formal safety officers. Student safety officers are appointed by Student Body Officers and Class Officers. Students are encouraged to identify or report to student safety officers or School of Medicine staff or faculty on the committee any safety issues of concern.

# Student Life

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## Campus Alert System

The Campus Alert system is the University of Utah's mass notification system to provide information to students, faculty, and staff of emergencies (snow closures, blocked roads, power outages, gas leaks, etc.). The Campus Alert System will notify students via email, text message, or telephone voice message. Students must opt in to this alert system to receive campus alert messages. To register for campus alerts go to:

<http://www.campusalert.utah.edu/>

## Student Safety

The interdisciplinary Health Sciences Safety Committee was initiated to help achieve and maintain a culture of safety with a focus on the educational corridor that includes the Schools of Medicine and Dentistry, Spencer S. Eccles Health Sciences Library, Health Sciences Education Building (HSEB), and the Colleges of Nursing, Health and Pharmacy. Every School of Medicine class has two student safety officers that are members of this committee. Students are encouraged to identify or report to student safety officers or School of Medicine staff or faculty on the committee any safety issues of concern.

Medical student safety in all learning environments is a priority. Students should observe the following guidelines to avoid becoming a victim of crime:

- Be aware of your surroundings at all times. Know where you are, where you are going, and what to expect. Use well-lit walkways at night
- Avoid walking alone. Walk in pairs/groups, or call for a police escort to your car after dark. Students are encouraged to call the University Police at 801- 585-2677 (801-585-COPS) for after-hours police escort to their vehicle
- Be aware of emergency blue light telephones around campus that ring directly to the University Police. All campus and pay phones can access emergency services by dialing 9- 911
- Report suspicious activities or persons to University Police at 801-585-2677 (585-COPS)
- Do not leave personal items (computer, keys, purse, backpack, etc.) unattended
- Register your personal property with the Department of Public Safety  
<http://dps.utah.edu/services/property-registration/>
- Secure your computer/laptop. Computer savvy thieves can access your files and personal information. Password-lock your equipment or log off when your computer is unattended
- Lock your bicycle in racks outside campus buildings (not to trees or railings). Take easy-to-steal items (helmet, pump, bottles, quick release seat, etc.) with you
- Lock the outside door of secured buildings and do not allow unauthorized people in after-hours <http://dps.utah.edu/>



## Student Identification Badge

During Orientation week, medical students will be issued a School of Medicine photo identification name badge through the U Card Office. Students must wear their name badge at all times when they participate in clinical activities, including outpatient and School of Medicine sponsored community service learning activities. Institution specific photo identification name badges will be issued to students rotating through the VA Medical Center, Primary Children's Hospital, and the Intermountain Medical Center. Students rotating through the Huntsman Cancer Institute must wear their School of Medicine ID badge.

Identification (ID) badges are a regulatory requirement and an important tool to help ensure a safe environment for workforce members, non-staff members, patients, and other visitors to University Health Care sites. Only the U Card Office, in conjunction with Hospital Security, may approve the attachment of necessary pins and stickers to the ID badge.

The ID badge must be worn so that it is easily readable by patients and hospital personnel. The badge may not be clipped to a waistband or belt, put inside a pocket, or otherwise obscured by clothing.

The student's School of Medicine photo ID badge provides cafeteria and library privileges, after-hours entry to the Health Sciences Center buildings, bookstore discounts and use of recreational facilities. The Student ID Badge is issued to medical students for free. If the card is lost or damaged, or if a name change is required, there will be a replacement cost.

## Guidelines for Professional Dress

Medical student professional dress and conduct should at all times reflect the dignity and standards of the medical profession. It is important that medical students dress in a manner that is respectful to their professors, classmates, patients, and staff. Student dress will present a professional appearance to patients, staff, and the public, and comply with Joint Commission on the Accreditation of Healthcare Organizations and Occupational Safety and Health Administration standards where applicable.

Guidelines for professional dress are listed below. Course directors have the authority to set dress code requirements at their discretion. These dress codes may be more specific or less rigorous than the guidelines outlined herein. Students should refer to course syllabi for specific details. These guidelines include medical student attire on days that do not involve patient care responsibilities. Maternity clothes are not exempt from these guidelines.

### ID Badge

Proper identification as required by each training site must be worn and clearly displayed at all times. The ID badge must be worn so that it is easily readable by patients and hospital personnel. The badge may not be clipped to a waistband or belt, put inside a pocket or otherwise obscured by clothing.

## White Coats

Only white coats that meet the School of Medicine standards are allowed, and coats must be clean and neat. If wearing scrubs outside the operating area, a clean white coat should be worn over scrubs.

## Scrubs

Scrubs should not be worn outside of the hospital. Scrubs are expected to be clean when worn in a public area, and should be covered with a white coat. The ID Badge must be worn outside the white coat. Scrubs may be worn only as delineated by individual departmental policy.

## Shoes

Footwear must be clean, in good condition, and appropriate. For safety reasons, open-toed shoes and sandals are not allowed in patient care areas.

## Style

No tank or halter tops, midribs or tube tops. No sweatshirts or shirts with messages, lettering or logos (except UUMC, LDS/IMC or VAMC). No shorts or jeans. A tie is recommended for men, unless described as optional in specific department policy.

## Fragrance

No colognes, perfumes, or scented hairspray.

## Hands

Fingernails must be clean and short to allow for proper hand hygiene, use of instruments, to prevent glove puncture and prevent injury to the patient. Artificial nails and nail polish are prohibited.

## Hygiene

Daily hygiene must include clean teeth, hair, clothes, and body, including use of deodorant. Clothing should be clean, pressed, and in good condition.

## Hair

Mustaches, hair longer than chin length, and beards must be clean and well-trimmed. Students with long hair who participate in patient care should wear their hair tied back to avoid interfering with performance of procedures or coming into contact with the patient.

## Head Wear

Hats, caps, and sunglasses should not be worn in the classroom or in the clinical setting.

## Jewelry

Jewelry should not be functionally restrictive or excessive. Stud-type earrings are acceptable. Wearing more than one earring in each ear is discouraged. There should be no visible jewelry in body piercings, with the exception of stud earrings. Nose piercings which have religious significance are acceptable. No other facial jewelry (e.g., tongue, eyebrow piercings etc.) is allowed.

## Tattoos

All tattoos shall be appropriately covered so as not to be visible

Students in violation of course specific dress codes or the guidelines above may be asked to change into appropriate attire. Repeated violations will result in referral to the Office of Student Affairs and presentation of the student to the Promotions Committee.

## Immunizations

To protect the health of patients, students and the community, medical students are required to meet School of Medicine immunization requirements for health care workers at all times during their medical education. Admitted students must complete and submit the [AAMC Standardized Immunization Form](#) to Student Health Services along with primary documentation that immunization requirements have been met. Additionally, prior to and while working in patient care venues, students must submit to Student Health Services annual documentation of seasonal influenza immunization and, when required by the State or as a result of patient contact, tuberculosis testing. Immunization requirements must be met and all immunizations must be current as a condition of ongoing enrollment and prior to participating in School of Medicine learning activities.

## Student Interest Groups

School of Medicine Student Interest Groups must register with ASUU and the School of Medicine Office of Student Affairs. Per ASUU guidelines, Student Interest Groups must have a constitution and a faculty advisor. Registration for each group or organization must be submitted annually and approved by the Associate Dean of Student Affairs before the group can hold formal activities, events or meetings during the academic year. Registration forms must be completed on a date to be determined prior to Freshman Orientation in August of the current academic year. The interest group advisor must be a School of Medicine faculty member. Membership must be open to all medical students. Interest Group membership cannot be denied on the basis of race, color, sex, sexual orientation, religion, national or ethnic origin, veteran status, or physical disability.

Medical students and medical student interest groups or organizations/associations may not solicit monetary or in-kind support from pharmaceutical or medical device industry representatives, and may not accept gifts or incentives in any form. Medical students and medical student interest groups or organizations/ associations are expected to adhere to the Industry Relations Policy in addition to the policy prohibiting pharmaceutical and medical device industry relationships.

The Associate Dean of Student Affairs may terminate an approved student interest group if the group fails to abide by University of Utah rules and regulations or state law.

Further information and registration information can be found on the ASUU website *Student Groups* tab at: <http://www.asuu.utah.edu/>

## Honor Societies

### Alpha Omega Alpha (AΩA) Honor Medical Society

Alpha Omega Alpha (AΩA) is an academic honor society comprised of the top performing medical students in the nation. Election to AΩA signifies a lasting commitment to scholarship, leadership, professionalism, and service. Membership in the society confers recognition for medical students' dedication to the profession and art of healing.

Approximately 15% of each medical school class may be nominated to AΩA. Eligible University of Utah School of Medicine AΩA applicants will have scholastic qualifications placing them in the upper twenty-five percent of their class. Additionally, the nominees' leadership skills, ethical standards, fairness in dealing with colleagues, demonstrated professionalism, potential for achievement in medicine, and a record of service to the school and community at large shall be considered.

Students may be nominated for election to the AΩA Society at two points in their medical education; at the start of Phase 3 and the start of Phase 4. Medical students wishing to be considered for AΩA must sign and submit an AΩA release of information form to the Office of Student Affairs.

Names of the top AΩA applicants in this ranking group (on average, 5% of the class) will be forwarded to the AΩA chapter Councilor (Robert Hoffman, M.D.) and the Associate Dean of Student Affairs for review. Upon approval of the Councilor and the Associate Dean of Student Affairs, qualified applicants will be nominated to the Society.

Names of the top AΩA applicants in this ranking group (on average, 10% of the class) will be forwarded to the AΩA Councilor (Robert Hoffman, MD) and the Associate Dean of Student Affairs for review. Upon approval of the Councilor and the Associate Dean of Student Affairs, qualified applicants will be nominated to the Society.

Nominated candidates will be declared, elected, and inducted into the Society only after registration with the national AΩA office is completed and first year dues have been paid.

### Gold Humanism Medical Society

The Gold Humanism Honor Society (GHHS) recognizes students, residents, and faculty who are exemplars of compassionate patient care and who serve as role models, mentors, and leaders in medicine. GHHS members are peer nominated and are the ones that others say they want taking care of their own family.

Membership in GHHS goes beyond selection and induction into an honor society. Its members have a responsibility to model, support, and advocate for compassionate, patient-centered care throughout their careers. The creation of a GHHS chapter signifies to the medical community that an institution places high value on the interpersonal skills and attitudes that are essential for the highest level of patient care.

## The Spencer S. Eccles Health Sciences Library

The Spencer S. Eccles Health Sciences Library provides access to the published literature through licensing electronic journals that is the “version of record”, replacing print journals as the industry standard. For items not locally available, the Library obtains needed items on demand at no charge to students through interlibrary loan. <http://library.med.utah.edu/lib/>

## Learning Resource Center and Resource Library

The School of Medicine Learning Resource Center includes a Student Resource Library and a Learning Enrichment Center housed in the Academic Success Program. The Resource Library houses hard copy references, study aids for shelf and board exams, standard reference texts, academic resources, student computers and match and residency training information. The library is located in School of Medicine 1C-103.

## Student Study Space

Modular, individual, and group study space is available in the Health Science Education Building and Eccles Health Sciences Library. Additional group and individual study space is available for medical students in the hallway rooms on the A level of building 521

## The Office of Equal Opportunity and Affirmative Action

The Office of Equal Opportunity and Affirmative Action (OEO/AA) provides information and training to the University community regarding their equal opportunity and affirmative action rights and responsibilities. OEO/AA encourages outreach and recruitment of diverse students, faculty, and staff in programs and activities and acts as a resource for students regarding projects and assignments. In addition, this office consults with any member of the campus community regarding equal opportunity and affirmative action issues and possible violations.

Complaints may be filed by employment applicants, faculty, students, staff, and participants in University programs or services who feel they may have been discriminated against on the basis of race, color, religion, national origin, sex, sexual orientation, age, status as a disabled individual, disabled veteran, or veteran. Cognizable allegations of discrimination, including sexual harassment and retaliation, will be investigated by OEO/AA.

The Office of Equal Opportunity and Affirmative Action  
201 South Presidents Circle  
John R. Park Building, Room 135  
Phone: (801) 581-8365  
FAX: (801) 585-5746  
<http://www.oeo.utah.edu/>

Satellite Office:

School of Medicine, Room 1C041

Limited hours; make appointment by contacting main office.

## Disability Services

The School of Medicine seeks to provide equal access to its programs, services and activities for all medical students. The Center for Disability and Access (CDA) provides accommodations and support for the educational development of medical students with disabilities. Medical students with a documented disability and students seeking to establish the existence of a disability and to request accommodation are required to meet with the CDA Director for recommended accommodations. The CDA will work closely with eligible students and the Academic Success Program to make arrangements for approved accommodations. The School of Medicine and CDA maintain a collegial, cooperative, and collaborative relationship to ensure compliance with federal and state regulations for students with disabilities.

Steve Baumann PhD, School of Medicine Senior Director of Academic Success Program, serves as the liaison between the School of Medicine and the CDA.

Steve Baumann, Senior Director of Academic Success Program  
1C047 School of Medicine Office: 801-587-9797  
Email: [Steven.Baumann@hsc.utah.edu](mailto:Steven.Baumann@hsc.utah.edu)

University of Utah Center for Disability and Access  
Olpin Student Union Building, Room 162  
Phone (Voice/TDD): (801) 581-5020  
Email: [info@disability.utah.edu](mailto:info@disability.utah.edu)  
<http://disability.utah.edu>

## Financial Aid

### Main Campus Financial Aid

The University of Utah Financial Aid and Scholarships Office is located in the Student Services Building, Room 105 (105SSB). Staff members are available to assist medical students between 8:00 am.to 5:00 pm Monday, Wednesday, Thursday, and Friday, and Tuesday from 12pm to 5:00 pm on Tuesday. Students may contact the office at (801) 581-6211.  
<http://financialaid.utah.edu/>

### School of Medicine Financial Aid

The School of Medicine Internal Financial Aid Administrator assists medical students with the financial aid application process (FAFSA), manages medical student scholarships and institutional loans, advises students on their debt management and on loan repayment options, conducts exit interviews, reviews and monitors cost of attendance calculations, and liaises with the University Financial Aid Office. Students may arrange appointments with the School of Medicine Financial Aid Administrator, Wendy Clark.

Wendy Clark, School of Medicine Financial Aid Officer  
1C255 School of Medicine Office: (801)-581-6499  
<http://medicine.utah.edu/financialaid/>  
Email [wendy.clark@hsc.utah.edu](mailto:wendy.clark@hsc.utah.edu)

Students awarded financial aid will receive notification at the beginning of the academic year. Financial aid awards must be officially accepted by each student. If a student receives a Federal Unsubsidized Stafford Loan, a Master Promissory Note and Entrance Counseling needs to be completed prior to receiving the loan, and only needs to be completed once. A promissory note for institutional loans, which include Primary Care Loan, and any loans from the medical school, must be signed at the beginning of each academic year along with the completion of the Loan Entrance Counseling. Once this has been done, funds are processed through the Income Accounting Office, where tuition and fees are deducted. If the award exceeds the cost of tuition and fees, the student will receive a remainder check for the balance or the balance can be direct deposited to a designated personal bank account. If the award does not fully cover tuition and fees, the balance must be paid by the tuition due date or a late fee will be assessed and classes may be dropped.

### Income Accounting and Student Loan Services

The Income Accounting Office is located at 165 Student Services Building. This Office assists medical students with tuition bills, tuition account refunds, third party tuition bills, tuition reductions, graduate tuition benefits, and all other student tuition issues. Medical students may pay tuition and fees and purchase insurance at the Income Accounting Office.

Bills are generated for institutional charges, federal and short term loans, and dishonored checks, and are sent to students and borrowers from this office. This office counsels student loan borrowers with payment issues, federal loan deferments and cancellation requirements, loan entrance and exit counseling, and credit reporting issues.

<http://fbs.admin.utah.edu/income/>

### University Registrar

The University's Registrar Office provides assistance to medical students and School of Medicine staff with registration, graduation, grading, academic calendars, transcripts, verifications, veteran services, scheduling, FERPA, policy, procedures, and student information. The Registrar Office is located at 250 Student Services Building. Infractions (academic, financial, health, etc.) that result in withholding of registration and/or withholding of release of the transcript must be addressed department placing the hold and the Registrar Office.

<http://registrar.utah.edu/>

### School of Medicine Registrar

The School of Medicine Internal Registrar ensures the accuracy of medical student records, coordinates student registration, and certifies candidates for graduation from medical school. The School of Medicine Registrar liaises with the University Registrar.

Helen Anderson, School of Medicine Registrar  
1C349 School of Medicine  
Office: (801) 585-7610  
Email: [helen.anderson@hsc.utah.edu](mailto:helen.anderson@hsc.utah.edu)

## Policy and Procedure for a Member of the Faculty/Administration to Gain Access to a Medical Student's File.

Access to the OnBase platform for electronic student files is granted by the School of Medicine Registrar. The only individuals with access are the School of Medicine Registrar's Office, who can upload and view all documents, and School of Medicine Admissions Office, who can only upload and view admissions application documents.

Access to our School of Medicine Tools Application is granted by the Director of Student Affairs and Director of Medical Education.

Access to our SOM Tools Application is granted by the Director of Student Affairs and Director of Medical Education.

For faculty/administration access outside of OnBase or School of Medicine Tools, a formal request must be submitted to the School of Medicine Registrar's Office. The School of Medicine Registrar determines if the school official has a legitimate educational interest.

- If yes, copies of requested documents or reports are provided and the school official is reminded that the documents are FERPA-protected and cannot be distributed without the student's consent.
- If no, the request is denied, and the school official is informed that the request can be granted once a student's written consent is received.

## Withdrawal Policy

After a course has begun, students have the option to withdraw until the midpoint of the course. Requests to withdraw are submitted to the School of Medicine Registrar to process, and a grade of "W" is placed on the course. Students are encouraged to meet with the Associate Dean of Student Affairs and/or the Academic Advisor to discuss potential issues of withdrawing from courses (course repeats, delay of graduation, etc.).

After the midpoint of the course through the last day of the session, students may petition to withdraw from their class(es) for a non-academic emergency. Petition forms are obtained from the School of Medicine Registrar's Office and must be turned in by the last day of the course. Petitions to withdraw after the midpoint require a letter of support from the Associate Dean of Student Affairs.

## University Courses

With the exception of noncredit courses offered through Academic Outreach and Continuing Education, currently enrolled medical students may only register for nonmedical credit courses at no additional cost with the approval of the Associate Dean of Student Affairs. Non-medical school courses may not interfere with the medical school curriculum as attendance in all medical school learning activities is expected.

Medical students on a Leave of Absence and students between their first and second years of medical school are not eligible for this benefit. All students must pay full price for Continuing Education courses. Medical students engaged in the graduate portion of a dual degree



program (MD/MPH, MD/MSPH, MD/MBA, MD/PhD) seeking to enroll in University courses outside of those required for their graduate work must follow the policies and practices of the graduate program in which they are enrolled.

### University Housing

The University of Utah Housing and Residential Education Department assists medical students with housing needs, and provides information regarding single student/family accommodations on campus. For housing inquiries please contact the Housing and Residential Education Department at 801-587-2002.

<http://housing.utah.edu/>

### Campus Recreation

Medical students are entitled to free use of the facilities at the George S. Eccles Student Life Center. Medical students who are between their first and second year of medical school must pay a nominal fee for summer use of the Student Life Center.

<http://web.utah.edu/campusrec/>

### Parking

The Department of Commuter Services requires students who drive to campus to register their vehicles and purchase annual parking permits. Vehicles are cited under a University citation system for rule infractions. Parking citations may be appealed. Complete campus parking regulations are listed in the Parking Regulations Brochure available from Parking Services. More information can be found at the website noted above.

<http://commuterservices.utah.edu/>

### Utah Transit Authority (UTA) Pass

Medical students have a UTA Ed Pass embedded in their School of Medicine ID. The ID badge can be used on all UTA vehicles. Students must use their ID for the electronic reader, tap on/tap off system. Card readers are located at all doors on UTA busses and near the entrances to all TRAX and FrontRunner platforms. Be sure to tap on when boarding and tap off when exiting to validate your fare.

### Health Insurance

All students are required to have continuous health insurance coverage from medical school matriculation through graduation. Options include University of Utah Student Health Insurance, private individual insurance, Medicaid, coverage on parents' or spouse's insurance, or enrollment in a group policy such as Utah Medical, American Medical, or American Medical Student Associations. Medical students will be regularly and randomly audited for proof of ongoing health insurance coverage. If an audited student is found to be without health insurance, s/he will be pulled from their curriculum until s/he can provide documentation that his/her health insurance policy is active.

## Disability Insurance

Medical students are automatically enrolled in group disability insurance through the University of Utah School of Medicine Sponsored Group Disability Program underwritten by *The Guardian*. Insurance premiums are included in the cost of attendance. Students may not opt out of the disability insurance policy, nor may they further expand their coverage within the policy. This plan includes a conversion privilege to continue disability insurance coverage under an individual plan after graduation.

<http://medicine.utah.edu/students/programs/md/groupdisabilityprogram.pdf>

## Student Travel Funds

### Dean's Office Funds

The Dean's Office allocates funds annually to each medical school class and to the student body to support school related activities. Class funds are allocated by class presidents. General student body funds are allocated by the student body officers. Dean's Office funds must be used in accordance with University of Utah and School of Medicine guidelines and approval by the School of Medicine Office of Student Affairs and Office of Finance.

### ASUU Funds

School of Medicine Student Interest Groups may apply for funding in support of Interest Group activities through ASUU. The ASUU medical student senator and/or Interest Group member may submit requests for ASUU funds. The request should include an explanation of how the monies would benefit the student body.

<http://asuu.utah.edu/funding>

### Support for Student Travel to National or Regional Conferences

Medical students invited to present research results at regional or national conferences are encouraged to seek funding for travel expenses from their sponsoring department. Requests for funding support from the Dean's Office fund will be considered by the student body officers on a case by case basis.

### Support for School of Medicine sponsored International Travel Experiences

Medical students participating in international travel programs through the School of Medicine may be eligible for travel fund support through the University of Utah Office of International Education and Study Abroad Office (200 Central Campus Drive, Rm 159, SLC, UT 84112, Phone 801-581-5849). For additional information regarding funding support for University of Utah approved international experience see:

<http://internationaleducation.utah.edu/study-abroad/>

# HANDBOOK UPDATES

## Distribution of Updates

Updates to the University of Utah School of Medicine Student Handbook will be denoted and distributed electronically to the official class listservs. The most up-to-date version of the handbook can be found at <http://medicine.utah.edu/students/current-students/>

## 2018-19 List of Updates

Updates in chronological order: