COLLEGE OF MEDICINE

University of Arkansas for Medical Sciences

Office of Academic Affairs

2012-2013
STUDENT HANDBOOK

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ALL INFORMATION, POLICIES, AND PROCEDURES IN THIS HANDBOOK
ARE SUBJECT TO CHANGE WITHOUT NOTICE
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**EMERGENCY TELEPHONE NUMBERS**

UAMS MEDICAL CENTER EMERGENCY DEPARTMENT – 526-2000  
POISON CONTROL CENTER - 686-6161  
POLICE - 686-7777  
FIRE - 686-5333  
INFORMATION - "0" OR 686-7000

**CODE BLACK**

In the event of a violent occurrence on Campus, special procedures are needed to ensure maximum safety and prevention of injury / loss of life. As a result, multiple responses are necessitated by all components of UAMS. Law enforcement is paramount in securing the situation, but the rest of the campus must work to ensure patient, student, visitor, and staff safety. Violent actions on campus could include an active shooter, hostage situation, terroristic threatening and other scenarios not depicted here. While this is primarily a law enforcement operation; incident management, sheltering in place and crisis communications are integral to the safety and security of the Campus. Please familiarize yourself with the CODE BLACK plan which can be found in Appendix Q on page 190.

**CODE RED FIRE PLAN**

*Purpose and Procedures*

The fire plan for the University of Arkansas for Medical Sciences and the University Hospital is referred to as CODE RED. CODE RED will be put in effect when fire and/or smoke are reported within the University Hospital (E, F, and H wings, Central Building, and other buildings on campus.

The purpose of this plan is to outline the general procedures to be followed in the event of a fire so that all staff, employees, and students will know what is expected of them in a fire and/or smoke situation. Remember that patient safety is an integral part of patient care. It is your responsibility to understand CODE RED.

Code Red: The phrase shall be used as the code for announcing a fire emergency or a fire drill. Under no circumstances should anyone shout “Fire!”

Reporting Fire or Smoke

City and state fire codes require that any fire and or smoke be promptly reported. The following steps are to be followed when fire and/or smoke are discovered within University Hospital or the Ward Bed Tower:
1. Activate the nearest FIRE ALARM PULL STATION.

2. Dial 686-5333 and tell the Control Center that there is a CODE RED situation in your area. Also, tell the Control Center which building, floor, room, and, if possible, what is burning. Tell other personnel of the situation.

   NOTE: Only the moving of a patient from immediate danger shall take priority over reporting fire and/or smoke.

When advised of a CODE RED situation, the Control Center will alert the Little Rock Fire Department. The Control Center will then repeat the following announcement three times over the public address system:

"ATTENTION ALL PERSONNEL - CODE RED"
(Location)

The word “RACE” can be used as a reminder of the four primary steps to taken in the event of a fire. Steps to be taken in case of fire or smoke are as follows:

**RESCUE:** Help anyone in immediate danger from the fire. This should be carried out before sounding the alarm, closing doors, or attempting to extinguish a fire.

**ALARM:** Pull the nearest fire alarm pull station and report by phone (Control Center - 686-5333). Time is critical. Always sound the alarm before attempting to extinguish a fire.

**CONTAIN:** Close doors where the fire/smoke is located to isolate and contain. Smoke is the biggest killer in the event of fire. Be sure no one is inside the area.

**EXTINGUISH:** Attempt to extinguish the fire. Use whatever means available: fire extinguishers, water, blankets, pillows, etc. Do not put yourself at risk. Remember that help is on the way.

**Fire Extinguishers**

All fires are classified A, B, and C according to the combustible product involved:

- **Class A**  Ordinary solids such as wood, paper, textiles, rubber, etc.
- **Class B**  Flammable and combustible solvents such as gasoline, acetone, alcohol, grease, xylene, etc.
- **Class C**  Electrical such as motors, fuse boxes, appliances, etc., anything energized with electrical current.

The two types of fire extinguishers in common service on the UAMS campus are the all-purpose A-B-C dry chemical and the carbon dioxide (CO2).

The all-purpose dry chemical extinguisher is effective on Class A, B, and C fires. The carbon dioxide extinguisher is effective on class B and C fires only and is generally placed in laboratories where flammable solvents and electrical equipment are used.

Knowledge of extinguisher locations in your area is essential. In a fire emergency valuable time is lost if you have to hunt for an extinguisher. Each lost moment gives the fire a chance to grow.
To operate all types of portable extinguishers, remember the word PASS:

- Pull the metal pin.
- Aim the nozzle
- Squeeze the handle
- Sweep the fire area from a distance of five to fifteen feet.

**Fire Prevention**

Smoking – UAMS is a tobacco-free campus.

Space Heaters – Space heaters are a fire hazard if all safety precautions are not followed. The Department of Occupational Health and Safety (OH&S) must approve use of all space heaters in all UAMS facilities. Space Heaters are not allowed in any patient care areas.

Microwave Ovens – Food, popcorn, etc., that is over-cooked seldom produce flames but do emit smoke which is the immediate danger in case of fire. Use the correct timer setting. Do not leave food unattended.

Decorations – UAMS policy limits the type allowed on campus. Lighted candles and any heat generating decorations are prohibited. Decorations must not obstruct an exit. [Ref. UAMS Policy 11.4.03]

Electrical Safety – Check coffee pots and other appliances before the end of the day. Place coffee pots, when in use, on a non-combustible surface. Use of extension cords is prohibited. [Ref. UAMS Policy 11.4.07]

Reporting Hazards – Report potential fire and safety hazards promptly. Call the Control Center at 686-5891 or OH&S at 686-5536

**General Safety Precautions**

Obstructions – Keep corridors, halls, aisles, doors, and stairs free of obstructions. Never block an emergency exit.

Fire Doors – As a general rule, doors in and along corridors, stair doors, and doors to the outside are fire rated. These doors must not be left propped open. Do not place anything in the swing of these doors because most are self-closing. Call 686-5891 to report inoperable doors immediately.

Fire Exit Stairways – Exit stairs are designed to provide safe passage in a fire emergency. Stairs must be kept free of obstructions at all times and exit doors must remain closed when not in use. Do not prop doors open.

Elevators – Do not use elevators in a fire emergency. Use the exit stairs. In the hospital and bed tower, activation of a fire alarm automatically returns all elevators to the first or alternate floor. Elevators are considered an unreliable means for exiting the building:

(a) They are electrically operated and fire can affect their power source.
(b) The elevator shafts are similar to a chimney and can draw smoke and heat into them causing probable asphyxiation to elevator passengers.

**Fire Drills**

Fire drills are carried out as if there were a real fire. Refer to the campus fire plan policy for specific instructions for your building. To qualify as an accredited and licensed hospital, The
Joint Commission, and the Arkansas State Health Department require fire drills. Each drill is to be evaluated and documented, and all personnel are required to participate.

**Area Specific Instructions:**

Residence Hall: Evacuate the building.

Hospital and Bed Tower: Patients must be moved to or kept in their room. Close patient room doors. If evacuation becomes necessary your first move is lateral [horizontal]. Move patients down the hall through at least one set of fire doors. Fire department personnel will decide when evacuation of the entire building is necessary. Evacuate as a last resort.

Outpatient Clinics: OPC, WPRCI, Jones Eye Institute, Center on Aging, Stephens and MRI/GAMMA Knife; upon initial notification, evacuate the floor of fire origin. All other floors continue patient care until further instructions are received (i.e., "all personnel evacuate the building immediately").


**Generic Instructions for All Areas:**

The magnitude of a fire, heat, or smoke will determine the need for evacuation as to area, floor, or the entire building. In the event that more than one floor needs to be evacuated, it will be announced over the paging system.

It should be remembered that our patients are not familiar with the building exits and will need direction from our personnel if evacuation becomes necessary.

The "ALL CLEAR" will be given over the paging system, only by direction of the Fire Department or Campus Fire Marshal.

**OTHER EMERGENCY CODES**

There are several other Emergency Codes that you may hear while on campus. In general, unless you are a student on the third and fourth year clinical services and are given a specific assignment by the service on which you are rotating, you should not come into the hospital, and you should definitely not go to the Emergency Room. If you find yourself in the hospital and don’t know what to do, go to the cafeteria. A Labor Pool of undesignated individuals will mass in the cafeteria and can then be dispatched to any area in which they are needed.

Here are some specific codes and what you need to do:

**A MEDICAL EMERGENCY is called a Code Blue** – If you are in the UAMS Medical Center Hospital, the Central Building, the Shorey Building, the MRI building, or the Bridge to the VA Hospital up to the VA doors, call a Code Blue by dialing 686-7333 and give the location (Building, floor, and room number). If you are in the Out-Patient Building, the Jones Eye Clinic or the Arkansas Cancer Research Center, you should call 686-7333 to alert our Code Blue Team,
and also call “911” to notify the community “911” Paramedics. For medical emergencies that occur outdoors and in all other buildings not listed above, call the community “911” number to obtain emergency assistance, and notify UAMS Polices at 686-7777.

A **MASS CASUALTY INCIDENT** is reported as a **Code Green**. If you hear the announcement for a Code Green, do not go to the emergency room, as confusion will ensue. As noted above, unless you are a third or fourth year student and are given a specific assignment by the service on which you are rotating, you should proceed to the Labor Pool, located in the cafeteria. A pool of undesignated individuals will mass in the cafeteria and can then be dispatched to any area in which they are needed. If you are at home and hear the announcement of a Code Green, do not come to the hospital unless a media announcement is made “Recalling University Hospital employees, staff and students.”

A suspected bioterrorism event is designated as a **Code Pathogen**. It will not be announced overhead. If you become aware of a Code Pathogen in progress, do not report to the Emergency Room. Those individuals with responsibility for this Code will be notified by the hospital operator.

When victims are received who are contaminated with chemical or biological agents that require decontamination, a **Code Yellow** may be activated. It will not be announced overhead, but if you become aware of it, do not go to the Emergency Room. The employees with direct responsibility will be notified through the Emergency Notification System.

A **Code Gray** is called for severe weather. If you are on campus, you should proceed to the basement, or to a protected internal hallway and away from windows. If you are working in a patient care area, you should close windows, doors, and drapes in patient care and visitor areas and direct visitors and patients away from windows to a protected internal hallway. If patients cannot be moved to safe areas, they should be moved as far from windows as possible and covered with blankets and pillows, at the direction of the medical and nursing staff.

If you become aware that it may be necessary to evacuate a location for any reason, you should contact the Hospital Administrator on Duty, or the supervisor of the location (if these individuals cannot be located, then call the UAMS Police). That individual will determine if the area should be evacuated. If so, the UAMS police will then be called (686-7777) for assistance. They will assist in the evacuation of those in immediate danger and then activate a **Code Exodus**. It will be announced overhead. Obviously, if you are not in the area being evacuated, you should sit tight and await further instructions.

Every precaution is taken to protect infants and children in our facility. However, if an infant or child cannot be located, the **Code Pink** Plan is activated. It will be announced overhead and the police will be called. All staff and students should abandon non-urgent tasks and place themselves in hallways, stairwells, exits and entrances to watch for a potential abductor. You should check containers, empty rooms, or any other spot where a baby or child could be hidden or abandoned. If a potential abductor is observed, you should attempt to delay or detain them in a non-threatening manner, such as asking if they need help and informing them that a Code Pink is in effect and asking them to remain until it is cleared. UAMS police should be informed of the description of the individual and their location. If possible, a staff member should follow at a safe distance to determine where they are going should they continue to leave. Do not attempt to physically hold or stop the person. The abductor may panic and harm the infant or child if they feel cornered. Based on national statistics, child abductors are usually: female, in the middle thirties in age, often appear heavyset, are usually the same race as the baby being taken, may use a duffel bag, baggy clothes or a coat to hide the baby, and often pose as an employee to gain access.
A bomb threat is called a **Code Amber**. In most cases, Code Amber will not be announced overhead. UAMS Police and other personnel will assist with evacuation and isolation of the area, if needed. However, if you hear a Code Amber overhead in your building, listen for specific instructions to follow. If you actually receive a bomb threat call, signal someone nearby to call the UAMS Police at 686-7777. Attempt to keep the caller on the line.

**MEDICAL POLICIES**

**TUBERCULOSIS CONTROL PROGRAM AT UAMS**

Working in a hospital entails an occupational hazard of contracting tuberculosis due to inadvertent exposure to a person with unrecognized tuberculosis. Such a new infection has a 5-10% chance of progressing to actual tuberculosis. For this reason, all new students must be tested and those who give a reaction of greater than 9 mm must be re-tested in 10-14 days with the same dose in order to detect all positive reactors. All reactors must have a chest x-ray to confirm active tuberculosis. If not confirmed, persons should be referred to a Chest Clinic for consideration of treatment with isoniazid (INH). "Tuberculin positive persons" do not have to be X-rayed annually, but a film should be made if a cough persists longer than 3 weeks or there is unexplained weight loss or fever. "Tuberculin positive persons" are required to obtain a health card annually from Student and Employee Health, or from the Pulaski County Health Unit.

All tuberculin negative persons must be re-tested annually, but this time with a single test. This is done at registration in order to detect any new infections that may have occurred. All new reactors found on the annual test must be referred to an appropriate physician or county health unit for prophylaxis with INH.

Because of the importance placed on the TB skin test, the Executive Committee of the College of Medicine has placed the following policy into effect:

**TB SKIN TEST**

All Students in the College of Medicine must be tested annually with a TB skin test. These tests are applied at registration each year for student convenience. Each student must complete the TB testing process by October 1st of the academic year or the student will be removed from class until such time as the requirement is met. (Approved-Executive Committee, September 15, 1994)

Obviously, the above policy will not apply if you are "exempt" from the test by virtue of having already had a positive test. In that case, you must obtain a health card by October 1st.

**NEEDLE STICK/SHARP INJURIES AND BODY FLUID EXPOSURES**

Students who receive needle stick or other sharp injuries or certain body fluid exposures will, on many occasions, need laboratory monitoring for a period of time. The cost of this monitoring will be paid by the College, not the student, assuming that the student has health insurance as is required by the Board of Trustees. This monitoring, and the
appropriate billing, will be handled through Student/Employee Health. Students should contact Student/Employee Health immediately after such an injury occurs (or contact the Emergency Room if Student/Employee Health is not open). Students must also inform their resident and/or attending of the exposure, but don’t delay seeking care to do so. The nurse manager for the area may be the most knowledgeable about the policy.

Here is the UAMS policy on exposures (policy HR.4.01):

All faculty, employees, residents, or students, who suffer a parenteral (e.g. needlestick or cut) or mucous membrane (e.g., splash to the eye or mouth) exposure to blood or other body fluids, or who have a cutaneous exposure involving large amounts of blood or prolonged contact with blood—especially when exposed skin is chapped, abraded, or afflicted with dermatitis—shall:

1. Report the incident immediately to their supervisor or instructor.
2. Call immediately to EMPLOYEE HEALTH/STUDENT PREVENTIVE HEALTH SERVICES (EH/SPHS), 686-6565, if it is during regular business hours OR the EMERGENCY DEPARTMENT (ED) 686-7925, if it is after business hours.
3. The amount of risk incurred as a result of the exposure must be evaluated and prophylactic treatment should be started within 2 hours to be most effective.
4. Complete the UAMS Incident and Injury (I&I) Report form

Information about the source patient shall be documented on the Employee Incident and Injury (I&I) report form by the nursing supervisor or his/her designee from which the source patient is receiving care. All employees and students who have a blood/ body fluid exposure are to be evaluated either by the EH/SPHS or the ED regardless of the type of exposure or risk status of the source patient.

The I&I form shall accompany the employee/student to EH/SPHS or the ED at the time of the initial evaluation.

It is the responsibility of the employee’s supervisor or student’s instructor to make sure that all information relevant to the I&I has been completed and the involved employee or student has called either EH/SPHS or the UAMS ED, for triage. It is the responsibility of the Nursing Supervisor or designee to record all information regarding the source patient on the I&I, notify either EH/SPHS or the ED with the risk factors for HIV, and ensure that orders are written for lab work on the source patient’s chart.

Since our students do rotations at many, many different sites, especially in the third and fourth years of the curriculum, it is impossible to state exactly what to do and where to go in every situation of a needle stick or mucosal splash injury. Nevertheless, it is possible to state some generalities: If you are doing a rotation at some other location, such as an AHEC or another hospital or school, you will generally be told about local procedures for
needle sticks and splash injuries when you start the rotation. If you are not, please ask. In general, regardless of where you are, if you receive a needle stick or other sharp injuries or have a body fluid exposure, you should go to the nearest Emergency Room for evaluation and possible treatment. Students must also inform their resident and/or attending of the exposure, but don’t delay seeking care to do so.

**POLICY ON TESTING PATIENTS FOR HIV (Policy HR 4.05):**

No student, employee or member of the medical or affiliate staff shall test a UAMS Medical Center patient for Human Immunodeficiency Virus (HIV) except in accordance with this policy.

Procedures:

Documentation in the medical chart of patient consent (verbal or written) of the patient to testing shall be obtained in advance of testing, unless the patient's attending physician orders testing without consent in one of the two following circumstances:

A. A student, employee, staff member, or other person providing health care at UAMS Medical Center has been exposed to a patient's bodily fluids, in which case testing shall be done in compliance with UAMS Medical Center Policies and Procedures.

B. In the judgment of the patient's attending physician, such testing is medically indicated to provide appropriate diagnosis and treatment to the patient, provided that the patient has otherwise provided his or her consent to such physician for medical treatment, if able to do so.

**POSTEXPOSURE PROPHYLAXIS WITH ANTIRETROVIRAL AGENTS**

Under certain circumstances, it is recommended that individuals exposed to HIV through injury, etc., be offered combinations of anti-HIV medications for four weeks while surveillance laboratory monitoring is taking place. If this is recommended for a student, it is the policy of UAMS that the cost will be borne by their respective College, not the student, assuming that the student has health insurance as required by the Board of Trustees policy. This will be handled through Student/Employee Health. It is important that any such exposure be reported to them immediately, since the medicines are more effective if begun within two hours of the exposure. If Student/Employee Health is not open, the student should go immediately to the Emergency Room.

**STUDENT PARTICIPATION IN INVASIVE PROCEDURES**

The University Of Arkansas College Of Medicine has an official policy concerning the involvement of medical students in the care of HIV positive patients (HR 4.02):
"Since medical history and examination cannot reliably identify all patients infected with HIV, Hepatitis B, or Hepatitis C, or other blood borne infections, "Universal/Standard Precautions" when handling blood and body fluids shall be consistently used for all patients. Students, residents and employees (hereafter known as health care worker) shall not be permitted by their supervisors to draw blood or perform invasive procedures until their skills have reached a satisfactory level of proficiency."

The College of Medicine has taken this to mean that freshmen, sophomore, and junior students are not permitted to draw blood or perform invasive procedures on patients who are known to be positive for HIV, Hepatitis B, or Hepatitis C. However, the greatest risk to students is probably from patients who are positive for one of the above, but are not yet known to be so. This is why we stress Universal Precautions. Information on Universal Precautions will be presented to you at several times in the course of the curriculum, but if you ever have any doubts, ask! It is up to the clerkship director, and/or the student's direct supervisor on a rotation to determine if a senior student has reached the appropriate "level of proficiency" to allow the student to perform invasive procedures on patients with known HIV, Hepatitis B, or Hepatitis C infection.

POLICY ON STUDENTS KNOWN TO BE INFECTED WITH A BLOOD BORNE PATHOGEN

Policy of Non-Discrimination in Admission and Retention of Students who are known to be infected with a Blood Borne Pathogen (with or without symptoms)

Purpose
To provide management of students at the College of Medicine (COM) of UAMS who are infected with a blood borne pathogen ("infected students"). These agents include, but are not limited to Human Immunodeficiency Virus (HIV), Hepatitis C (HCV) and Hepatitis B (HBV).

Policy
The COM has a commitment to provide the following:

- Protection of the individual rights of all members of the COM.
- Education for all students and the COM community about blood borne diseases.
- A humane response to those with a blood borne disease.
- Reasonable precautions in order to maintain a safe environment on campus.

This policy is consistent with state and federal laws and has been developed with guidance from various national organizations and academic health care institutions, such as the Centers for Disease Control; the American College of Health Associations; and the American Public Health Association.
Definitions:
1. Blood Borne Pathogen is an agent that is transmitted via blood and body fluid route. Most often HIV, HBV, and HCV are involved but other pathogens might include malaria, human lymphotrophic viruses, certain viral hemorrhagic fever viruses, or leptospirosis.

2. Blood Borne Disease is an infection known to be transmitted by blood, including but not limited to organisms as HBV, HCV, and HIV.

General Guidelines and Procedures
1. Non-discrimination: In compliance with Sections 503 and 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990, students living with blood borne diseases are to be treated like anyone else having a "disability" for purposes of admission and retention by the COM. The COM is committed to non-discrimination of disabled individuals and makes reasonable accommodations to enable them to complete their medical education. The COM has determined that reasonable accommodations may be made in the M.D. degree program for infected students so that they will not necessarily be prevented by their blood borne disease status from completing an M.D. degree. Infected students, like all students, must meet the "Technical Standards for Admissions" outlined in the Annual Announcements and Curriculum (Bulletin) of the COM.

2. Screening for Blood Borne Pathogen Infections: The COM does not mandate testing for any student. However, the COM does encourage voluntary testing\(^1\), because early identification of infection may minimize its transmission and allow early treatment which may prolong life expectancy and enhance quality of life.

3. Retention: Students with a blood borne disease will not be excluded from regular classroom attendance as long as they meet the “Technical Standards” as noted above. If a student's personal health status deteriorates to the point where he/she is no longer capable of fulfilling the "Technical Standards,” he or she will be dismissed from the COM.

4. Health of the Student: A student with a blood borne disease must report the infection to the Executive Associate Dean for Academic Affairs (or designee) for an evaluation. Reason being, while students infected with a blood borne pathogen can continue to attend classes and participate in educational settings, a case-by-case evaluation of each infected student should be made in order to determine the student’s ability to perform educational functions, i.e. “Technical Standards”. Therefore, it is the responsibility of the student to notify the Ex. Assoc Dean for Academic Affairs (or designee) of his/her status to ensure proper evaluation. Six month follow-up evaluations by the student’s private physician or Medical Director of Student/Employee Health (or designee) are required to provide a

\(^1\) which may be obtained through confidential and anonymous testing facilities,
written health clearance to ensure the student’s educational capabilities have not been limited by the progression of the blood borne disease.

The student must waive physician/patient confidentiality and permit his/her private physician or Medical Director of Student/Employee Health (or designee) to provide a report to the Executive Associate Dean for Academic Affairs of the COM (or designee) containing information pertinent to the appropriateness of the student's continued enrollment in the College.

5. **Treatment and Counseling Services:** Students with blood borne diseases will be informed of the availability for voluntary and confidential treatment and counseling services through the COM. The COM encourages these students to seek regular counseling services, as well as regular appropriate health care treatments.

6. **Confidentiality:** The student's blood borne disease status will be provided on a “need to know” basis to insure proper supervision. Those persons who would need to know” will include the following: Department Chairmen, Course and Clerkship directors, Dean of the COM, the Executive Associate Dean for Academic Affairs, and other faculty and staff that the above persons, in their best judgment, believe have a need to know. The student should be aware that, even though the COM administration will limit disclosure to the above named individuals with a need to know, other students (and even persons who are not students or staff of the University) may become aware of the student's blood borne disease status due to the restrictions placed upon the student's activities.

7. **Protection of other students, faculty, staff, and patients:** Reasonable efforts will be made to provide an appropriate medical education leading to the M.D. degree for the infected student. However, to comply with other existing campus policies, the following accommodations must be made:

A. **Classroom Activities:** In general, classroom activities will not require a change in curriculum for the student with a blood borne disease. However, the student must not take part in any activity that could expose another individual to potentially infectious material. As one example, a student infected with a blood borne pathogen in the pathology course will not be allowed to take part in drawing blood or having blood drawn as part of the Hematology/Oncology section of the course. The student is not allowed to use a scalpel, needle or any other sharp instrument.

B. **Clinical Activities:** Infected Students may assist in performing invasive procedures only under the following conditions:

1. Students shall be double-gloved.
2. The status of the infected student shall be provided in writing to his/her supervisor (Department chairmen, Course or Clerkship Director, or designee) and the supervisor must be present during any invasive procedure for which the student is assisting.

3. The infected student is not permitted to use a scalpel, needle or any other sharp instrument.

4. If the glove of an infected student or any other part of his/her body is entered or nicked by a needle, scalpel, or sharp instrument, that instrument shall be removed and discarded or cleaned and the student shall retire for appropriate medical management.

C. Departments or Divisions of the COM may place more restrictive standards on the student only with prior permission of the Dean of the COM (or designee) but in no event shall any of these standards be lessened.

In order to remain enrolled in the COM, the student must sign the Statement of Agreement form stating that they have received, read, understand, and agree to abide by this policy, as well as the policies of the Campus and of the Hospital. (See Appendix A on page 131) (Approved by the Executive Committee of the COM – April 3, 2007)

Rescission
This policy replaces the COM “Policy on Students known to Be HIV-Positive (with or without symptoms).”

HEPATITIS B IMMUNIZATIONS

It is the policy of the College of Medicine that all medical students should be immune to Hepatitis B (as much as medically possible) prior to any contact with patients. For that reason, Hepatitis B immunizations (a series of three shots) are given to freshmen in the College (the entering freshman should have had the first of the three, and the second and third will be given at UAMS by SEHS). There is no charge for these two shots. If a student does not wish to take the immunizations, he/she must either show proof of immunity, or fill out the appropriate paperwork, including a waiver stating that they understand the risks but do not wish to take the injections. After the semester has started, the class officers will work with the Dean's office, as well as the Student/Employee Health service, to set-up immunization schedules for the class. Students are given the hepatitis B immunizations in group sessions. Students who miss a group session may be charged an additional administration fee for the Hepatitis B immunization given in the Family Medical Center clinic. Students who have questions regarding this policy should call the Student/Employee Health Service coordinator at 686-6565.
OTHER IMMUNIZATIONS

Other immunizations are available in Student/Employee health, some free and some for a fee. The need for these immunizations will be noted in the initial health assessment required of all entering freshman medical students. If a student has any doubts about whether additional immunizations are required or suggested, he/she should discuss this issue with Student/Employee health either at registration or in the Student/Employee health clinic. In addition, students who are going to travel, especially internationally, should consult with the Travel Clinic in the Student/Employee Health department. All personnel with patient contact (including all medical students at all levels, must take an influenza vaccine each year)

UAMS SUBSTANCE ABUSE POLICY

It is the goal of the University of Arkansas for Medical Sciences (UAMS) to provide the highest quality health care, education and services available. To achieve this goal it is important that administrators, faculty, staff, and students be able to fulfill their respective roles without the impairment caused by intoxication or addiction to alcohol or other drugs.

POLICY

1. No employee or student of UAMS may report for their assignments and/or classes impaired by the use of alcohol or following the use of controlled substances.

2. Nothing in this policy will preclude the medical or research use of alcohol or controlled substances. Violators of this policy will be disciplined up to and including termination.

3. It is the underlying philosophy of UAMS that addiction to alcohol and/or other drugs represents a disease state, and treatment such problems is a legitimate part of medical practice. Employees or students with an addiction to drugs or alcohol are encouraged to seek help through the UAMS Employee Assistance Program or Student/Employee Health Service. Individuals who seek help through the UAMS EAP or Student/Employee Health Service will not be punished for seeking such help. However, appropriate disciplinary procedures linked to performance criteria are not precluded by this policy.

4. Students may also seek help through the Student Wellness Program.

COLLEGE OF MEDICINE POLICY ON KNOWN SUBSTANCE ABUSERS

It is the goal of UAMS to provide the highest quality healthcare, education and services available. To achieve this goal, our staff and students must not be impaired by
intoxication or addiction to alcohol or other drugs. UAMS provides a drug-free environment. (See Administrative Guide 4.4.06) Any student known to the College of Medicine Dean’s Office to have a substance or alcohol abuse problem must abide by the following conditions in order to remain a student in the College of Medicine:

1. The student must consent to evaluation, counseling, treatment, and follow-up by the UAMS Student Wellness Program or referral to another caregiver (such as: other sections of the UAMS Department of Psychiatry, private caregivers, or any other entity felt appropriate for the student’s situation by the UAMS Student Wellness Program or the Dean and/or Dean’s Designee.) Any caregiver must be approved by the UAMS Student Wellness Program. Monitoring, for the student’s adherence with prescribed treatment, will be performed by the caregiver or the Arkansas Medical Foundation (the arrangement for monitoring must be approved by the UAMS Student Wellness Program or the Dean and/or Dean’s Designee). All treatment and follow-up will be the financial responsibility of the student and/or the student’s insurance.

2. The student must follow the recommendations of his/her caregiver, which will include, at a minimum, an evaluation of the student’s substance abuse problem and treatment (if deemed necessary).

3. The student must consent to the release of his/her records (or authorization to discuss his/her condition) from any caregiver related to the substance or alcohol abuse condition to both Dean or designee and/or the Arkansas Medical Foundation regarding the nature of the substance abuse, the prescribed treatment, the recommendations for on-going care, and prognosis. Further, the student must agree to allow the Dean or designee to receive periodic updates of his/her condition, to comply with the recommendations of the caregiver and/or the Arkansas Medical Foundation, and to monitoring by the caregiver and/or the Arkansas Medical Foundation.

4. To insure compliance with this policy, the student must agree to random drug or alcohol screens (testing) at times chosen by the Dean or designee, and/or the student’s caregiver and/or the Arkansas Medical Foundation. The drug screens will be continued until the student's graduation from the College. In the event a drug screen is positive, or if the student is not compliant with the prescribed treatment and follow-up, this fact will be reported to the Dean or designee and the student will receive an inadequate Scholastic Non-Cognitive Evaluation. The matter will then be referred to the student's Promotions Committee under Academic Procedures as outlined in the Student Handbook. The Committee will act in accordance with the options available for managing an inadequate Scholastic Non-Cognitive Evaluation as outlined in the Student Handbook, up to and including dismissal from the College.
5. The student must consent to release of records related to the student’s history of substance abuse to the program director of the residency program he/she enters following graduation. This information will include the nature of the substance abuse issue, information on treatment and follow-up (to include compliance with prescribed treatment), results of drug screens obtained during and after treatment, and any recommendations for ongoing treatment by the student’s caregiver, the UAMS Student Wellness Program, the Dean/Dean’s designee, or the Arkansas Medical Foundation. Additionally, in the student's dean's letter, the following statement will appear: "This student had a medical issue during medical school. The student will provide details of this medical issue."

6. Any student not agreeing to and abiding by the above conditions will be subject to dismissal from the College of Medicine (pursuant to the Academic Procedures as detailed in the UAMS College of Medicine Student Handbook)

Approved – Executive Committee and Dean 6/11/2008
(See Appendix B – Substance Abuse Policy Agreement Form on page 132)

**DRUG TESTING AND CRIMINAL BACKGROUND CHECKS**

A critical part of medical education involves learning experiences in hospitals and other health care facilities. Use of these facilities in training is essential, and students must be able to complete their assigned rotations. Many hospitals and health care facilities have policies requiring drug testing and/or criminal background checks for employees, students and volunteers. Facilities that provide instruction to College of Medicine students may have, or may adopt in the future, drug testing and/or criminal background check policies. Some facilities provide that students who test positive for drugs, or who have certain types of information in their criminal background checks, are ineligible to work in that facility.

Because the use of these health care facilities is a part of the curriculum and essential to medical education, students should be prepared to comply with the policies and procedures at any facility where they engage in rotations or learning experiences. Students may not request facility assignments in an effort to avoid criminal background checks or drug screening requirements. Students may not refuse to participate in training in these facilities because they do not want to submit to drug testing/criminal background checks. Failure to attend assigned training or students who are terminated from training in these facilities because they violate the drug testing or drug use policies of the facilities, or are found to have objectionable information in their criminal background checks, will be unable to complete the college requirements for graduation and will be subject to dismissal from the College of Medicine on academic grounds.

In compliance with a recommendation from the Association of American Medical Colleges, the College of Medicine performs Criminal Background Checks (CBC’s) on all
accepted applicants. Specific policies related to the use of these CBC’s are available from the Office of Admissions in the College of Medicine Dean’s office.

**UAMS SMOKING POLICY**

Smoking is forbidden on the UAMS campus. See Policy on page 185. Violations of this policy by students in the College of Medicine will be handled by our Disciplinary Actions Procedure as detailed in other sections of this Handbook.

**POLICY ON PREGNANCY AND THE GROSS ANATOMY LABORATORY**

Women taking the Gross Anatomy course who are pregnant, or could be pregnant, are not required to wear a respirator while in the Gross Anatomy dissecting laboratory, but are advised to do so. It is also advised to avoid skin contamination with embalming fluid as much as possible. Faculty members in the course can suggest how this can be done. If you are a student who is pregnant or could be pregnant, it is your responsibility to determine, in consultation with your personal physician, the precautions you should take. If it is determined that a respirator, or other protective device(s) is needed, the faculty in the Gross Anatomy course will be happy to help you contact our Occupational Health and Safety office to determine the best devices to use. The expense of any such equipment or devices will be paid for by the student.

**UAMS CONFIDENTIALITY POLICY**

When you become a clinical student in the third and fourth years, you will be asked to sign a specific confidentiality policy prior to being issued computer access into patient information systems (see the confidentiality policy on page 168 in Appendix J). However, even as a first and second year student, you will, at times, have access to confidential patient information, and are therefore required by the College of Medicine to abide by the University of Arkansas for Medical Sciences Information Management Confidentiality Policy from your very first day as a student at UAMS. You will be asked to sign the confidentiality agreement. The important point to make is that as a student in the College who has agreed to abide by the policies contained in this handbook, you are bound to maintain patient information, as well as other types of information, in strict confidence. Quoting the policy, “Each individual allowed by UAMS to have access to Confidential Information must maintain and protect against the unauthorized access, use or disclosure of Confidential Information. Any access use or disclosure of Confidential Information in any form – verbal, written, or electronic – which is inconsistent with or in violation of this Policy may result in disciplinary action, including but not limited to, immediate termination of employment, dismissal from an academic program, loss of privileges, or termination of relationship with UAMS.” Anyone disclosing protected health information against HIPAA policy (see below), may be subject to sanctions including criminal penalties of up to 10 years imprisonment and a $250,000 fine for each
violation, as well as UAMS disciplinary action up to and including dismissal from the College of Medicine.

**HIPAA Policy**

UAMS is committed to protecting the privacy of our patients’ information. While privacy and confidentiality have always been a priority for health care providers, it has heightened importance in this era of electronic information, with increased speed of information flow and the risks associated with protecting this information. The standards for protecting patient health information are described in the federal law known as the Health Insurance Portability and Accountability Act (HIPAA).

You will receive HIPAA training at Orientation and refresher training annually, which is a requirement of continued enrollment in your program. Failure to abide by UAMS HIPAA policies will result in disciplinary action, up to an including dismissal from your program and carries with it a possibility of criminal penalties. Access to UAMS medical record systems is allowed only for authorized purposes and is audited. UAMS has detailed policies regarding mobile devices, using outside systems such email and cloud computing, taking patient data off campus, patient photography, and safeguarding measures that must be taken when discussing or otherwise handling patient information. All of these policies can be found at the UAMS HIPAA Homepage at [http://hipaa.uams.edu](http://hipaa.uams.edu). It is your responsibility to know and follow these policies.

You may direct questions to the UAMS HIPAA office at 501-603-1379 or to the Office of Academic Affairs within the College Dean’s Office.

**Social Media**

Social Media, like Facebook, Linked-In, etc., are great places to share “the human experience” with friends, families, and the like. Some of us in the College of Medicine Administration enjoy using these media sites as well. However, there are a couple of situations where folks like us in medicine can get into big trouble: 1) the biggest problem is with the release of personally identifiable patient information. It is easy to make a mistake and release identifiable patient information even when you don’t think you are doing so. Just releasing the fact that someone had a particular procedure done in a certain period of time may be enough to identify the patient. Date of service is legally a “patient identifier” under HIPAA, as is the city the patient lives in, the name of the patient’s employer, and other data elements that you may not realize. **Putting identifiable patient information on Facebook, or similar social media sites, is grounds for dismissal from the College of Medicine, and possible criminal prosecution, as noted above.** DON’T DO IT!!! Avoid any possibility of getting into trouble for this simply by not putting anything patient related on Facebook, etc. You may think that you have your postings locked down to “Friends Only”, but our experience is that someone always finds out! 2)
Don’t put anything unprofessional or embarrassing on Facebook. One of the Residency program directors in our College of Medicine takes the list of applicants to his program and checks each one on Facebook to see if there is anything embarrassing or unprofessional. If so, the student doesn’t make it to the program’s match list AND they never even know why. It can ruin your career, so why take that chance. 3) Many physicians avoid “friending” patients. This isn’t as black and white as the two above, but at least some physicians feel that by “friending” a patient, it hurts the professional relationship they need to take optimal care of him/her. The official UAMS policy on using Social Media can be found in Appendix P on page 188

**UAMS SEXUAL HARASSMENT POLICY**

**PURPOSE**

The University of Arkansas for Medical Sciences (UAMS) is committed to its mission of providing an academic and employment environment that fosters excellence. Sexual harassment violates the trust and respect essential to the preservation of such an environment, and threatens the education, careers, and well being of its community members. University members have the right to work and study in an environment free of harassment. This right is protected by Title VII of the 1964 Civil Rights Act for employees and Title IX of the Educational Amendments of 1972 for students, which view sexual harassment as a form of sexual discrimination. For these reasons, harassment of any kind will not be tolerated at UAMS. In both obvious and subtle ways, the very possibility of sexual harassment is destructive to individual students, faculty, staff, and the UAMS community as a whole.

Sexual harassment is particularly serious when it threatens relationships between teacher and student, or supervisor and subordinate, because it unfairly exploits the power inherent in these relationships. When, through fear of reprisal, a student or employee submits or is pressured to submit to unwanted sexual attention, the ability of UAMS to carry out its mission is undermined. UAMS strongly encourages all UAMS community members to report incidents of sexual harassment. To that end, reporting and investigating procedures are supportive of and sensitive to the alleged victim. At the same time, they adequately safeguard the rights of the alleged offender.

For the complete policy, see Appendix C on page 134
COLLEGE OF MEDICINE GOVERNANCE

Several Councils and Committees are important to students in the College of Medicine. These Councils and Committees are outlined below:

1. Dean’s Executive Committee

This committee is the senior advisory body to the Dean on all major policy decisions of the Medical College, including but not limited to budgetary allocations, space and personnel actions including initial faculty appointments, program development, and affirmative action. It is responsible for faculty affairs between semiannual meetings of the General Faculty. Membership is made up of nine faculty members. The committee is constituted as follows: four members elected for staggered three year terms by the Council of Departmental Chairs, the Chair of the Research Council, the Chair of the Curriculum Committee and the Chair of the Academic Standards Committee, the Executive Associate Dean for Academic Affairs, one member representing the VA and one member representing Arkansas Children's Hospital.

2. Council of Departmental Chairs (CDC)

The Council of Departmental Chairs, whose membership includes the Chair of each established Department and free-standing Division within the College of Medicine, directs its deliberations primarily to program formulation and implementation in the College of Medicine. The committee advises the Dean on all matters that it considers significantly related to the efficient and effective function of the College's administrative and academic missions. A primary goal of the CDC is to keep its members informed about college-level, campus, and University events of importance.

3. Research Council

The primary mission of the UAMS College of Medicine Research Council is to serve as an advisory body to the Executive Associate Dean for Research and the Dean of the College of Medicine by assisting in the strategic development of research in the College. The Council considers the interests of all College of Medicine faculty engaged in research and has ~20 members with broad representation across College of Medicine departments and divisions. The Research Council reviews applications from faculty for intramural pilot and bridging grant support, and conducts the annual Core laboratory and Core Service assessments for the College of Medicine Dean. In addition, the Research Council fosters medical student research through the Honors Program.
4. **The Rural Medical Practice Student Loan and Scholarship Board**

The Board, which is established by statute, is composed of the Dean of the College of Medicine (Chair), the Chancellor of UAMS, the Executive Associate Dean for Finance and Administration (Secretary), three members appointed by the Arkansas Medical Society (one of whom serves as Vice-Chair), and two members appointed by the Arkansas Hospital Association. The Board is responsible by legislative act for promulgating rules and regulations, for determining the eligibility of applicants, for fiscal and administrative responsibility for disbursements and collections, for granting special provisions and making compliance determinations.

5. **College of Medicine Appeals Board**

This Board represents a formal mechanism whereby any person (faculty, housestaff, or student) may obtain a review of a complaint by an impartial group. This procedure shall not be used to question a rule, procedure or policy established by an authorized faculty or administrative body. Rather it shall be used for a hearing and due process for those who believe that a rule, procedure or policy has been applied in an unfair or inequitable manner or that there has been unfair or improper treatment by a person or persons. Attempts shall be made to resolve the complaint through informal means before it is submitted to the College of Medicine Appeals Board. If unsuccessful and deemed advisable by the Dean, a Board will be convened to hear the appeal using guidelines described in the By-laws of the Faculty of the College of Medicine, and later in this Handbook.

6. **Minority Recruitment and Retention Committee**

The members of this committee serve as a collective body and as individuals in contacting minority students to encourage interest in medicine and health related fields. Once identified, such students are counseled and assisted in the preparation for health careers. Committee members also serve in an advocacy role for students enrolled in the College programs and assist the Departmental Chairmen to identify qualified minority candidates for vacant faculty positions.

7. **Medical Student Promotions Committee**

This Committee is described in detail elsewhere in this Handbook (see page 31).

8. **Medical Student Honors Council**

This Council is described in detail elsewhere in this Handbook (see page 42).
9. Committee on Academic Standards

This committee shall evaluate the official documents of the College of Medicine pertaining to medical student progress, promotion, non/promotion and dismissal, and leaves of absence and shall make recommendations to the general faculty about the need for change. The Committee will work closely with the Promotions Committee and will assist it in delineating all approved policy options for any given student. The Committee reports all of its recommendations directly to the Dean; he or she in turn decides whether to implement the recommendations directly, refer the matter to other committees, councils or the General Faculty for consideration, or return the issue to the Committee for further deliberation and development.

10. Curriculum Committee

The Curriculum Committee monitors the curriculum for the College of Medicine. This committee is charged to: 1) define issues relating to curriculum that need to be addressed, 2) route these issues for study to appropriate working committees of the college or to create ad hoc committees as required, 3) analyze and deliberate on the findings of the various working committees, and 4) monitor a system for evaluation of instruction and faculty teaching development in the College of Medicine.

Members of the Curriculum Committee are elected by vote of departmental faculty with the approval of the Chair and the Dean of the College of Medicine. Each basic science department will elect one member (Neurobiology and Developmental Sciences, Biochemistry and Molecular Biology, Physiology, Medical Humanities, Pathology, Pharmacology and Toxicology, and Microbiology). Each clinical department that plays a major role in a required clerkship will elect one member (Family and Preventive Medicine, Geriatrics, Medicine, Obstetrics and Gynecology, Pediatrics, Psychiatry and Surgery). Clinical departments that do not play a major role in a required clerkship will elect a shared representative according to the following schedule: One member elected by the faculty of departments forming Specialties Group A (Neurosurgery, Neurology, Ophthalmology); One member elected by the faculty of departments forming Specialties Group B (Orthopedic Surgery, Urology, Otolaryngology, Anesthesiology); Group C - One member will be elected by the combined vote of the faculty of the following departments: Dermatology, Radiology, Rehabilitation Medicine, Emergency Medicine.

The Associate Dean for Undergraduate Medical Education will be an ex-officio member without vote and is the Chair of the Curriculum Committee. Membership on the Curriculum Committee for all other non-student members will be for a term of three years. Election of faculty members will be staggered with 1/3 of the
membership being elected each. A faculty member may be elected to serve more than one three-year term as a representative.

To represent the Northwest Arkansas Campus of the University of Arkansas for Medical Sciences, the Regional Dean of the Northwest Arkansas Campus shall appoint one representative to the Curriculum Committee with full voting rights.

The M1-M4 medical student Curriculum Committee representative will be determined by a vote of their respective classmates. For the M2, M3 and M4 years, the officers of each class will ask for nominations and a vote during April of each year. The Chair of the Curriculum Committee will be notified of the winner, and the winner in each class will start their one-year term during the first Curriculum Committee meeting of the new academic year. For the M1 year, the call for nominations will take place during the month of fall break, and the vote will occur within two weeks after fall break. The Chair of the Curriculum Committee will be notified of the M1 winner who will start their term at the next regularly scheduled Curriculum Committee meeting of that academic year. A medical student may be elected by their classmates to serve more than one term on the Curriculum Committee. Each medical student has voting rights. The nomination to the College of Medicine Curriculum Committee is subject to the approval of the Chair of the Curriculum Committee.


The purpose of this Advisory Committee is to assist the Office of Student Financial Aid for the College of Medicine in the recommendation and selection process of medical students for scholarship awards. In addition, the committee serves as an appeals panel for students who have a grievance with the Office of Student Financial Aid.

12. Criminal Background Check Committees

Two Committees exist within the College of Medicine to deal specifically with Criminal Background Checks (CBCs) done on medical students. The first, the CBC Preliminary Review Committee, reviews all reports and determines if there is need for a more formal review on any checks with adverse findings. If it is determined that a more formal review of a CBC is needed, a meeting of the Criminal Background Check Review Committee is called to review the details surrounding the adverse findings on the CBC.
FUNDAMENTAL EDUCATIONAL EXPECTATIONS

The UAMS College of Medicine has established a set of competencies that the faculty believes are essential for graduates of the College to master before graduation. Each of the competencies, along with the listed knowledge, skills, and attitudes, comprise outcomes required of each student before graduation.

These competencies, which are consistent with those established nationwide for graduate medical education, guide the development of objectives for attaining the stated competencies along with assessment methodologies to ensure that the competencies are being achieved by, our courses and clerkships. These competencies not only assess student knowledge, skills and attitudes they also offer forms of remediation should students fail to achieve a required course/clerkship objective. The seven competencies listed below address the key elements of becoming a physician and set the stage for our students to transition into their graduate medical education programs. To this end, the College of Medicine, Curriculum Committee, University of Arkansas for Medical Sciences, with the unanimous approval of the faculty, established the medical student competencies listed below.

Undergraduate Medical Education Competencies

1. Medical Knowledge
2. Patient Care
3. Professionalism
4. Interpersonal and Communication Skills
5. Lifelong Learning (Medical Informatics)
6. Population Health and Preventive Medicine
7. Practice-Based and Systems-Based Medical Care

1. Medical Knowledge

Medical students must demonstrate as measured by internal and national-based examinations and skills assessments that they have a firm grasp of the clinical sciences and the basic sciences that underpin medicine; and as well the ability to apply that knowledge appropriately in the clinical setting. Medical students are expected to:

A. Demonstrate a working knowledge of the basic and clinical sciences
B. Demonstrate proficient clinical skills in the taking of a patient history and in carrying out a physical examination
C. Demonstrate an analytic thinking approach to clinical situations
D. Demonstrate cultural competence in dealing with patients and their families
2. Patient Care:

Medical Students must be able to provide supervised patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health. Medical Students are expected to:

A. Communicate effectively and demonstrate caring and respectful behaviors when interacting with patients and their families
B. Gather essential and accurate information about their patients
C. Develop patient treatment and management plans
D. Counsel and educate patients and their families
E. Perform competently those medical procedures considered essential for their education
F. Provide health care services aimed at preventing health problems or maintaining health
G. Work with health care professionals, including those from other disciplines, to provide patient-focused care

3. Professionalism:

Medical students must demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population. Medical Students are expected to:

A. Demonstrate respect, compassion, and integrity; a responsiveness to the needs of patients and society that supersedes self-interest; accountability to patients, society, and the profession; and a commitment to excellence and on-going professional development
B. Demonstrate a commitment to ethical principles pertaining to the provision of clinical care, confidentiality of patient information, and informed consent
C. Demonstrate sensitivity and responsiveness to patients’ culture, age, sexual orientation, gender, and disabilities
D. Dress in a manner consistent with that of a medical professional

4. Interpersonal and Communication Skills

Medical Students must demonstrate interpersonal and communication skills that result in effective information exchange and teaming with patients, their patients’ families, and professional associates. Medical students are expected to:

A. Create a therapeutically and ethically sound interaction with patients
B. Use effective verbal and non-verbal listening skills to elicit appropriate information and communicate effectively in writing
C. Work effectively with others as a member of a health care team
D. Effectively communicate with a patient’s family and other health care professionals

5. Lifelong Learning (Medical Informatics):

Medical students must be able to efficiently consult the scientific literature as a means of optimizing patient care. Medical students are expected to:

A. Perform computerized medical literature searches as a means of learning about patients’ diseases, and the most sound and proven effective therapeutic interventions grounded in evidence-based medicine
B. Determine what information is usable based on various patient findings
C. Convey their findings in a coherent manner to their attending physicians and residents
D. Use information technology to manage information and support their own education
E. Stay current with the latest information technology as it relates to medicine

6. Population Health and Preventive Medicine

Medical students must be cognizant of the association between the health of their patients and that of the population at large and this understanding must be grounded in a solid knowledge base and appreciation of the principles of disease prevention. Medical students are expected to:

A. Understand the importance of preventive medicine in disease avoidance and convey to their patients the central importance of prevention as a preference to treatment of disease
B. Extrapolate the disease findings of their patients with disease prevalence locally and nationally
C. Understand the impact of complementary and alternative medical practices on their patients
D. Understand and importance of diet and exercise on disease prevention and health maintenance and be able to take a “nutrition history” of their patients

7. Practice-Based and Systems-Based Medical Care

Medical students must demonstrate an awareness of the larger context and system of health care. Medical students are expected to:

A. Obtain and use information about their own population of patients and the larger population from which their patients are drawn
B. Understand how patient care practices impact on the larger society and how elements of the larger system may impact on their future practice
C. Participate in the education of their patients regarding their health care
D. Know how types of medical practice and delivery systems differ from one another
E. Understand the importance of providing cost effective health care that does not compromise quality

Approved by the College of Medicine Curriculum Committee, the College of Medicine Council of Departmental Chairpersons, February 2, 2004; and by the College of Medicine Faculty, December 7, 2004

POLICIES AND PROCEDURES DETERMINING ACADEMIC STATUS

ACADEMIC REQUIREMENTS FOR PROMOTION OF MEDICAL STUDENTS

INTRODUCTION

The guidelines for probation and dismissal for students in the freshman year are different from those for succeeding years. While most freshman medical students successfully complete the courses within the first academic year, a few students require two years to do so. These latter students may have rather weak academic backgrounds, may have difficulty in adjusting to medical school, or may have a number of problems that contribute to what is a weak, but not totally inadequate academic performance. Therefore, it is the philosophy of this College of Medicine, as well as of many other colleges across the country, to provide the Freshman medical student the opportunity, under certain circumstances that are felt by the Student Promotion Committee to be consistent with our other Academic Standards, to complete the academic requirements of the Freshman year in two years instead of one (see below under the section on “Rules Specific for a Given Year – Freshman year”). In subsequent years, the student is required to compete at a level expected of all medical students.

Certain personal characteristics as set forth on the form, Scholastic Non-Cognitive Performance, are important to individuals preparing for a career in medicine. Therefore, scholastic non-cognitive evaluations are requested as appropriate, in addition to the scholastic cognitive evaluations, and are designed to point out the outstanding or the inadequate personal characteristics of students. While the majority of students accepted to medical school will possess these characteristics, it is important to have a method to recognize either outstanding students or that unusual student who does not possess the character traits necessary to practice medicine. For this reason, scholastic non-cognitive grades are given. A grade of "Outstanding" or "Inadequate" will be accomplished by appropriate form(s) and/or letter(s). The lack of a scholastic non-cognitive grade will be interpreted as meaning either that the student has been judged to possess the proper
characteristics or that there has been inadequate contact with the student on which to base an evaluation. Scholastic Non-Cognitive Performance is considered an academic requirement by the College.

The consequences of a failing (F) grade, with respect to recommendations for promotion, probation or dismissal, are the same irrespective of the number of credit hours designated for the course in which the failing (F) grade was received. All courses in the medical school curriculum are considered to be of equal importance in the education of a future physician; the differences in the assignment of credit hours is due to the number of hours and the type of contact (e.g., lecture vs. laboratory) with the student. Grade point averages are calculated in two ways. One of these, the grade point average for a given academic year (Freshman, Sophomore, Junior), is based on grades received in courses taken during that year and is used to determine promotion, probation, and dismissal. When it is necessary to repeat a course or courses, the grade(s) received in the repeated course(s) only is (are) used to determine the grade point average for promotion. The second type of grade point average is calculated to determine class rank. One rank is based on the course work within a given year; the other is based on performance in all courses of all years completed to date of computation, i.e., the cumulative grade point average. Since the class rank is important in obtaining postgraduate training positions, it is felt that all grades, including failing (F) grade(s), should be used in this calculation in order to be fair to the student who successfully completed all courses the first time and who did not have to repeat any course(s).

The options for the timing of repeated courses differ as stated below. Again, the requirements placed on students who have to repeat a course or courses differ according to the academic year involved:

Freshman Year: When the Promotions Committee requires a student to repeat a single course, it may authorize the student to take that course at UAMS or at another medical school during the summer, since most of the courses are available at that time. Only if a summer course at a U.S. medical school is of equivalent length and content to the course at UAMS (as determined by the course faculty) will the student be authorized to take the course. If successfully accomplished, the student can generally return to the normal sequence of sophomore course work (on or off probation, as determined by the Promotions Committee). If the Promotions Committee determines that more than one course must be repeated, the student will have to take those courses at UAMS during the next regular academic year unless the Promotions Committee authorizes the student to take one of the repeat courses during the summer session and the remaining repeat course(s) during the next regular academic year. Two courses usually cannot be taken during the summer session. If no summer course is available, the student will have to take the repeat course(s) the next academic year at UAMS.

Sophomore Year: When the Promotions Committee requires a student to repeat a course, it may or may not be possible to authorize the student to take the course in
a summer session. Only if a summer course at a U.S. medical school is of equivalent length and content to the course at UAMS (as determined by the course faculty) will the student be authorized to take the course. If the course is not available during the summer session, the student must wait and repeat the course during the next regular academic year at UAMS. The student may enroll in a Junior clerkship only after successful completion of the repeated course.

Junior Year: Three situations are unique to this academic year. First, a student who fails a junior clerkship at UAMS cannot repeat it at another institution since U.S. medical schools do not accept students other than their own into junior clerkships. Therefore, the Promotions Committee must require a student who has failed a clerkship to repeat that clerkship at UAMS. Second, since the scholastic cognitive grading systems of the junior and the senior year are different, a student cannot be promoted into the senior year on probation. All inadequacies of the junior year must be removed before a student can be promoted into the senior year. Third, every attempt is usually made to provide the student with the option to complete all requirements within a time frame that does not delay his/her anticipated date of graduation. However, if more than one junior clerkship must be repeated, the student will usually not have sufficient time to complete all requirements of the senior year. Therefore, that student's graduation will be delayed. Such students may be admitted to take senior-level courses immediately following the junior year, prior to grade tabulation and to the meeting and actions of the Promotions Committee. If a student is not promoted, he/she must drop the senior course work and will receive no credit for that work.

Senior Year: There is no probationary status during the senior year. A student may fail an elective course in the senior year and still graduate as long as all other requirements of the senior year have been met (33 hours of passing credit, a passing grade in all required courses, etc.). The failing grade will, of course, be included on the student's transcript. Since the senior year is the final year of medical school and since probationary status resulting from a failure requires performance improvement for the following year, it is not possible to place a student on probation for failing a senior course. As in all other years, failing two courses (the same course twice or two different courses) in the senior year will result in immediate dismissal. (Modified by the Executive Committee - August 1992)

I. General Regulations

A. Types of Grading or Evaluation

1. Scholastic cognitive grades: These grades are based on the academic performance in a course or clerkship. The notation of grades described below was adopted by the College of Medicine Faculty, 19 August, 1987, and shall be employed for reporting the performance of freshman, sophomore, and junior students:
"A" represents outstanding achievement, 
"B" represents very good achievement, 
"C" represents satisfactory achievement, 
"D" represents poor achievement, less than satisfactory, and is considered in the College of Medicine to be a marginal academic performance, 
"F" represents unsatisfactory achievement and failure in the course, 
"I" or "incomplete" indicates that some portion of the course work has not been completed. The incomplete or "I" is a temporary grade that must be removed by a date set by the Course director and the Executive Associate Dean for Academic Affairs in consultation with the student. The course work must be completed by the beginning of the following academic year unless the above officials set a different date, in which case the student shall be notified of that date in writing.

The performance of a senior student shall be reported as: 
"Pass" representing satisfactory performance, and "Fail" representing unsatisfactory performance with no credit given. Faculty members are encouraged to document truly exceptional (superior) performance in detail for the student's record.

2. Scholastic non-cognitive grades: These grades are based on scholastic non-cognitive performance whether on campus, or away from UAMS. They are evaluations of certain characteristics that are important to individuals preparing for a career in medicine. Included in these evaluations are attentiveness, demeanor, maturity, cooperation, inquisitiveness, responsibility, respect for authority, etc. Students shall receive a grade of "Outstanding" or "Inadequate", when appropriate. The lack of either grade indicates that the student has been judged to possess the demonstrated characteristics or that contact with the student has been insufficient to allow evaluation. Evaluations will be made by faculty members of each medical school course in which the student is enrolled and will be submitted to the Executive Associate Dean for Academic Affairs. In addition, the Dean of the College of Medicine or his designee may submit such an evaluation to the Executive Associate Dean for Academic Affairs at any time.
B. Reporting and Releasing Grades

1. At the termination of a course or a clerkship, the responsible department shall submit the following for each student to the office of the Executive Associate Dean for Academic Affairs:

   a. A scholastic cognitive grade of A, B, C, D, F, I, or P, F, as appropriate, to be entered on the student's official record.
   b. A scholastic non-cognitive grade of Outstanding or Inadequate shall be submitted when appropriate. This scholastic non-cognitive grade will be made a part of the student's official record. When such a grade is submitted, it must be accompanied by the form, Scholastic Non-Cognitive Performance, and/or a letter or statement explaining the assignment of that grade. Such forms, letters, and/or statements will be placed in the student's file.

2. Concurrent with submission of grades to the Office of the Executive Associate Dean for Academic Affairs, the final grades of each student will be posted through secure electronic means, or using the student's coded ID numbers on the appropriate departmental or course bulletin board, or on the ground floor bulletin board in EdII. Grades can also be released by means of a self-addressed card or envelope if agreed upon by the faculty. In addition, grades may also be released by means of a transcript authorized by the student, or on an interim grade report released to the student by the Dean’s Office. Final course grades are also available on the internet using a double password protected site when technology allows. Telephone calls cannot be honored except under unusual circumstances, and then only if the student is able to supply his/her UAMS ID number. The student's copies of narrative evaluations are kept in the Departments for distribution.

C. Grade Point Average

1. Method of Calculation - Weighted grade point averages shall be used as criteria for promotion. Grade point averages are calculated by multiplying the semester hours for a course by the unit designation for the grade (A=4.0, B=3.0, C=2.0, D=1.0, F=0.0) and dividing the total points obtained by the total semester hours for the year. The grade point average shall be calculated to the second decimal point; e.g., 2.55. For purposes of calculations, a semester hour is defined as an hour of lecture or two hours of laboratory per week for a semester of 18 weeks (regardless of the actual length of
the course). Semester hours of credit will be calculated to the nearest half-hours.

For clerkships of the third year and the senior electives, responsibilities of the student are not limited or defined by a class schedule. Credit of 1 semester hour for one full week's involvement in these programs is a reasonable approximation.

2. Types of Grade Point averages calculated

a. Grade Point Averages for a given year (freshman, sophomore, junior) - this grade point average is determined as explained above. This grade point average shall be used in making recommendations for promotion, non-promotion, probation and dismissal.

b. Grade Point Averages for Class Rank (rank in a given year; cumulative grade point average). The rank in class for a given year shall be determined on the basis of all grades attained within that designated year (freshman, sophomore, junior). The Cumulative Grade Point Average is determined on the basis of all courses completed and all grades attained by the student to the date the computation is made. This average is used to determine the student's rank or position within his/her class. The Cumulative Grade Point shall be calculated for students through the completion of the junior year, i.e., during the period when scholastic cognitive grades are reported as A, B, C, D, F, or I. Seniors are graded "Pass" or "Fail" and no rank-in-class is computed for that year. These two systems of cognitive grading are not compatible for determining a single class ranking at the end of the senior year. Rank or position with the Senior class shall not be computed or assigned for the reason that the different methods of assigning cognitive grades in the Senior year does not permit such computation.

II. Promotions Committee

A. Responsibilities and Duties: The Promotions Committee shall evaluate and make recommendations for each student in accordance with the guidelines established and approved by the faculty and included in this Student Handbook. It shall evaluate unusual problems and assure that the guidelines are applied in a fair and equitable manner. It shall recommend promotion, non-promotion, probation or dismissal for scholastic cognitive
and/or scholastic non-cognitive reasons. The Promotions Committee also has the special responsibility for reviewing the entire academic records of senior medical students in order to ascertain that each student has met all requirements for the degree of Doctor of Medicine. Following this review, the Promotions Committee shall make appropriate recommendations to the Council of Departmental Chairmen, which is responsible for certifying that each student has met all requirements for the degree of Doctor of Medicine. This certification serves as the validation presented by the Dean of the College of Medicine to the Chairman of the Board of Trustees during the Commencement ceremony. The Promotions Committee shall also participate on the Trial council, when necessary, as requested by the students and defined in the document, Constitution of the Honor System.

B. Composition of the Promotions Committee: In August of each year, the Office of Academic Affairs shall select twelve faculty members to constitute the Promotions Committee for the next academic year. These twelve faculty members shall be selected from a pool made up of all freshman, sophomore, and junior Course and Clerkship directors, as well as the Senior Primary Care Selective Course directors in Little Rock. Initially, four members shall be selected by random drawing from each of three groups: (Group A) the freshmen course directors, (Group B) the sophomore course directors, and (Group C) the remaining course and clerkship directors. Each member shall be randomly assigned to the Committee for a term of one, two, three, or four years. Subsequently, one person from each of these three groups shall rotate off of the Committee each year, and be replaced by another faculty member from the same group, selected by the Executive Associate Dean for Academic Affairs by random drawing. The individuals from this pool not assigned to the Committee that year will be alternates. If the faculty member’s Department Chair wishes to do so, he/she can substitute another faculty member from the Department for the course or clerkship director assigned as a member or alternate. If, a course or clerkship is eliminated or added, or other unusual circumstances occur to change the makeup of the Committee or the pool of faculty eligible to be on the Committee, the Executive Associate Dean for Academic Affairs, or designee, shall have the right to assign any faculty member to the Committee in order to ensure a twelve member Committee and sufficient alternates. The Executive Associate Dean for Academic Affairs shall serve as Chairman of the Committee without vote. If a member of the Committee cannot attend a meeting, he/she will be asked to contact a member of the alternate pool to arrange for a substitute. If he/she is unable to arrange for a substitute, the Executive Associate Dean for Academic Affairs shall appoint an alternate from the full time faculty for that particular meeting. All Promotion Committee members must be members of the full-time faculty.
C. Meetings of the Promotions Committee: The Promotions Committee shall meet at least once each academic year, as soon as possible after the close of the academic year. In addition, the Committee may meet at any time at the request of the Chairman in order to be advised of or to evaluate specific issues bearing on promotion. Information bearing on promotional factors will be presented at the meetings of the Committee by 1) the Chairman in conjunction with the course directors of the respective courses taken during the academic term or 2) any faculty member who has documented information believed to be germane to the promotion process. A quorum shall consist of at least 8 members. Recommendations of the Promotions Committee to the Dean of the College of Medicine or designee require a 3/4 vote of the members present for a motion to dismiss (6 if 8 members present; 7 if 9 members present, 8 if 10 members present; 9 if 11 members present, and 9 if 12 members present), and a simple majority for all other motions.

D. Replacement or Dismissal of Members of the Promotions Committee: If a Course or Clerkship Director is replaced in that position by his/her Department Chair, the replacement will assume his/her position with the Promotions Committee (either member or alternate) and will continue that faculty member’s term. If a member fails to carry out his/her responsibilities, especially by being absent from meetings repeatedly, the Executive Associate Dean for Academic Affairs shall notify his/her Department Chair by letter.

III. Requirements for Promotion: Both Scholastic Cognitive and Scholastic Non-Cognitive requirements will be considered in evaluating each student in recommending promotion, non-promotion, probation or dismissal.

A. Scholastic Cognitive Requirements

1. Grade Point Ranges Action Required

   1.5 - 4.0 Promotion (see below)
   1.0 - less than 1.5 Probation (see below)
   0.0 - less than 1.0 Dismissal (see below)

2. Grading Categories

   a. Promotion: Students with a grade point average of 1.5 or above for a given year and who have passed all courses shall be promoted.

   b. Probation: Probation indicates marginal academic performance and can lead to dismissal unless grades
improve. During the seven academic years allowed for attainment of the degree of Doctor of Medicine, a student may be placed on probation one time only. A student, having been on probation one time, who fails thereafter to make passing grades and a grade average during an academic year of at least 1.5 shall be dismissed. Students shall be placed on academic probation under the following circumstances.

(1) Students with a given year grade point average in the range from 1.0 to less than 1.5 shall be placed on academic probation for the following year.

(2) Students with a given year grade point average of 1.5 or above who have failed one course shall be permitted to repeat the course once permission, in writing, has been obtained from the Promotions Committee. The student shall be promoted following completion of the repeated course if he/she has earned a grade of "C" or better therein. The two grades earned will be used in calculating the grade point average for class rank.

c. Dismissal:

(1) A student whose given year grade point average is less than 1.0 shall be dismissed from school. (See exception under freshman year)

(2) Students earning two failing "F" grades in one academic year shall be dismissed from school. (See exception under freshman year)

(3) A student shall be subject to dismissal at any time during the academic year when failing "F" grades have been earned in a sufficient number of credit hours to preclude promotion or when other policies of the College call for dismissal. The Dean's office will notify the student. An Administrative Dismissal will then be initiated, and/or the Promotions Committee will then take action leading to the dismissal.

(4) Students who receive a "D" or an "F" in a course being repeated shall be dismissed at the time that
grade is received. This also applies to a student receiving a grade of "D" or "F" in a course in which the student had a preliminary grade of "D" or "F" at the time a leave of absence was granted (see Leave of Absence Policy).

(5) A student who has been placed on probation for a given academic year must complete that year with a grade point average of 1.5 or above and with no failing grades; otherwise the student shall be dismissed from school.

(6) A student failing to pass the USMLE Step 1 examination in three tries according to the USMLE Step 1 policy of the College shall be dismissed.

(7) Other policies of the College of Medicine faculty may state conditions under which a student shall be dismissed. These policies shall have the same validity as if noted in this section of the Academic Standards.

3. Rules Specific to a Given Year:

a. Freshman Year:

(1) Students receiving only 1 failing "F" grade shall repeat the course in which that grade was received upon the recommendation of the Promotions Committee. The grade earned in the repeated course and the grade attained initially will be used in determining the grade point average for class rank. For promotion purposes, the grade received in the repeated course only will be used in calculating the grade point average for the freshman year.

(1B) Students receiving 1 failing “F” grade and one or more “D” grades, may be required by the Promotions Committee to repeat all courses in which a grade of “F” or “D” was obtained, along with any additional courses the Committee feels appropriate.

(2) Students who receive 2 or more failing "F" grades but fail 50% or fewer of the credit hours registered
for during the first freshman year may repeat the year with the permission of the Promotions Committee. Under these circumstances the student must repeat all courses in which a grade of "D" or "F" was earned. If the year is repeated successfully (III,A,4,a), the student will be promoted in good standing into the Sophomore year. At the end of the second freshman year, all grades earned in the repeated courses will be averaged with all grades attained initially in order to determine class rank. Grades earned in repeated courses will be averaged with the grades of courses in which a "C" or better was attained during the first Freshman year for the purpose of determining the grade point average for the freshman promotion.

(3) Students failing more than 50% of the credit hours registered for during the first freshman year shall be dismissed from school.

b. Sophomore Year:

(1) During ICM 1 and ICM 2 all students must take the Objective Structured Clinical Examinations (OSCE). These are tests that consist of several stations like those described above. Detailed information about the OSCE is included in the syllabus for ICM 1 and ICM 2. **A student must have a passing grade on the OSCE in ICM 2 in order to advance to the junior year.**

If the student has not met this requirement by the end of the first twelve weeks of the junior year, the student must go before his/her Promotions Committee to determine appropriate action.

(2) A passing composite score on the USMLE Step 1 examination is required before final promotion into the junior year.

c. Junior Year:

(1) Junior students with a given year grade point average of 1.5 or above who have failed one course shall be required to repeat that course and to attain a
grade of "C" or better prior to promotion into the senior year. Upon successful completion of this requirement, the student shall be promoted into the senior year in good standing.

(2) Junior students attaining, for the first time, a given year grade point average of 1.0 to less than 1.5, with or without a single grade of "F", shall be required by the Promotions Committee to repeat the course(s) in which the "D" and/or the "F" grade(s) was/were attained. The grades attained in the repeated courses must be a "C" or better; failure to complete this requirement successfully will result in dismissal. Upon successful completion of these requirements, the student shall be promoted into the senior year in good standing.

d. Senior Year:

(1) The Senior year is considered as officially begun when the student has been promoted into that year by the appropriate Promotions Committee. Credit for courses begun following the end of classes in the junior year, but before the regular end-of-year meeting of the Promotions Committee, will be officially transferred into the senior year following promotion as described above.

(2) To be eligible for graduation a senior student must pass all required courses taken in the senior year and complete at least 33 semester hours of courses in the senior year.

(3) To be eligible for graduation, students must be ACLS certified.

(4) To be eligible for graduation, students must pass the USMLE Step 2 examination (both the CK component and the CS component).

(5) Additional rules exist for the senior year and are listed in detail in the Senior Electives Handbook. It is the responsibility of all senior students to be familiar with this handbook, and the policies and regulations noted in it.
4. Repetition of Course(s) or Year

a. Repetition of Course(s): A course or courses shall be repeated only upon recommendation of the appropriate Promotions Committee in accordance with the guidelines stated above (III,A,2,b,(2) and III,A,3,a,(2)). Written permission from the Promotions Committee must be obtained prior to repetition of such course or courses. The student must attain a grade of "C" or better in all repeated courses. The repeated grade and the grade attained originally shall be used in calculating the grade point average for class rank. For the purposes of promotion, non-promotion, probation and dismissal, only the repeated grade shall be used in calculating the grade point average for a given year.

b. Repetition of Year:

(1) A first year freshman student failing 2 or more courses but 50% or fewer of the credit hours of that year may repeat the year upon recommendation of the Promotions Committee. The specific requirements are stated above (III,A,3,a,(2)).

(2) A student shall be permitted to repeat only one year of medical school, including the repetition stated above (III,A,3,a,(2)). This repetition must be recommended by the Promotions Committee. Repetition of two or more courses of a given year will be considered as repeating the entire year.

(3) At the discretion of the Promotions Committee, a student may be requested to repeat an academic year in full or in part and can be placed on academic probation during that time.

B. Scholastic Non-Cognitive Requirements

1. Grading Categories:

   a. Outstanding
   b. Inadequate
2. Actions to be Taken:

a. If the student receives a grade of Outstanding, the Associate Dean for Student/Academic Affairs:

   (1) Will mail a copy of the grade to the student, and;

   (2) Will place a copy in the student's file.

b. If the student receives the grade of Inadequate in two (2) or more separate situations or incidents, the Executive Associate Dean for Academic Affairs will undertake the following action, (In the case of a serious violation, a single grade of Inadequate will suffice):

   (1) Notify the student in writing that he/she has received an excessive number of Inadequate grades;

   (2) Require the student to arrange an informal interview within one week with the Associate Dean for Student/Academic Affairs;

   (3) Forward to the appropriate Promotions Committee the results of this interview, including the student's explanation for his/her behavior.

The Promotions Committee may choose any or several of the following:

   (1) To take no further action;

   (2) To counsel the student in writing only;

   (3) To interview and counsel the student;

   (4) To interview and counsel the student and to place him/her on leave of absence for an interval to be recommended by the Executive Associate Dean for Academic Affairs and approved by the Promotions Committee;

   (5) To interview and counsel the student and to place him/her on scholastic non-cognitive probation for an interval to be recommended by the Executive
Associate Dean for Academic Affairs and approved by the Promotions Committee;

(6) To interview the student and recommend that the student repeat the course;

(7) To interview the student and recommend the student to repeat the entire academic year; or

(8) To interview the student and recommend his/her dismissal from the College.

IV. Dismissal From School: Dismissal of a student for academic performance failing to meet academic requirements, cognitive and/or non-cognitive, as herein outlined, may be recommended. All students whose dismissal has been recommended by the Promotions Committee will be informed of the fact, in writing, by the Executive Associate Dean for Academic Affairs.

V. Administrative Dismissal: Under certain circumstances, when an Academic Standard calls for an action of dismissal, or when a motion is passed by a Student Promotions Committee calling for an action of dismissal, the action may be applied administratively without the need for a Student Promotions Committee meeting unless one is specifically requested by the affected student or the Administration feels a Promotions Committee meeting is warranted. The following are examples of times when an action of dismissal may be applied administratively:

1. A motion is passed by a Student Promotions Committee stating that a student must pass a repeat course with a grade of “C” or better or be dismissed, and the student fails to earn a grade of “C” or better in the repeat course.

2. A student fails to pass the USMLE Step 1 examination within the number of attempts allowed by the USMLE Step 1 policy, or fails to take or pass the examination within the time frame allowed by the College.

3. A student fails to satisfy all requirements for the MD Degree within the time limit of the “seven year rule” of the College.

4. A student earns two failing grades in one academic year, other than the freshman year.

If an action of dismissal is to be applied administratively, the student will be notified by certified letter. The student will have seven (7) working days from the date of the notification letter to ask for a Promotions Committee meeting. (Approved by the Dean and the Executive Committee of the College of Medicine, Summer 2005)

VI. Student Grievance Procedure: A student who has a complaint of unfair treatment may request an informal hearing as described in the UAMS document on
Academic, Disciplinary, Administrative Actions and Grievance Procedures (see below).

VII. Leave of Absence: As stated in the document, Leave of Absence, the Executive Associate Dean for Academic Affairs may grant or deny a request for a leave of absence with or without the recommendation of the Leaves of Absence Committee.

A complete and detailed description of Academic, Disciplinary, Academic Actions, and Grievance Procedures (including Grievance Procedures for Alleged Discrimination) can be found in Appendix D on page 134.

**APPROPRIATE TREATMENT OF MEDICAL STUDENTS**

It is the basic philosophy of the UAMS College of Medicine that optimal learning occurs in an atmosphere of mutual respect. The medical learning environment is expected to facilitate students’ acquisition of the professional and collegial attitudes necessary for effective caring and compassionate health care. The development and nurturing of these attitudes requires mutual respect between teachers (including faculty, residents, fellows, nurses, staff, and students in a teaching role) and students at all levels, and between each student and his or her fellow students. While it is the responsibility of the Faculty and the College to provide a proper atmosphere for education, it is also the responsibility of the student to develop and maintain personal honor and integrity, as well as compassionate and ethical behavior. Students must pledge their utmost effort to acquire the knowledge, skills, attitudes, and behaviors required to fulfill all educational objectives established by the faculty. A faculty policy on the appropriate treatment of medical students has been established and implemented by the College to assist in the maintenance of an optimal learning environment, but it is not meant to be used as an excuse for students to disregard their own responsibilities in the educational process. The complete policy can be found in Appendix L on page 180.
HONOR SYSTEM

CONSTITUTION OF THE HONOR SYSTEM

University of Arkansas for Medical Sciences
College of Medicine

All academic work in the University of Arkansas for Medical Sciences College of Medicine will be conducted under the honor system. Medical students and graduate students enrolled in Medical College courses are expected to show appreciation of the trust placed in them by conscientiously adhering to the rules and regulations which the honor code entails.

The Honor Code applies to all activities and all behaviors that pertain to the academic and clinical work of medical students. All academic assignments, all laboratory and research work, all examinations, and all clinical work are encompassed as is the professional character and conduct of students in the College of Medicine.

It is the responsibility of each student to conduct himself/herself in a manner that complies with the Honor Code guidelines. These guidelines include but are not limited to the following:

The student will not:

1. Give or receive aid in quizzes, examinations, and/or individual class assignments;
2. Plagiarize any source;
3. Falsify any clinical report, experimental results, and/or research data;
4. Violate the principles of the Code of Professional Conduct of the College of Medicine

If an individual fails to uphold any of these standards it is the responsibility of fellow students, University faculty, and UAMS staff to report this misconduct to a member of the Honor Council.

The Honor Council is an organization of students elected by the student body, who will function to insure that any student accused of misconduct will receive a fair and impartial arbitration on any proceeding relating to the Honor Code, against him or her. The purpose of the Honor Council is not to police the honor system, nor enforce its rules but rather to promote, encourage, and ensure the fulfillment of the standards of the Honor System.

HONOR PLEDGE

By enrolling in the College of Medicine, each student agrees to be bound by the College’s Honor Code. A reminder of this obligation should be placed on the cover sheet of each
major examination (the lack of such notification does not remove the underlying responsibility from the student):

Please be reminded that all academic work in the College of Medicine is conducted under the auspices of the Honor Code. Among other responsibilities, students must not give or receive aid in quizzes or examinations.

PROCEDURES PRELIMINARY TO HEARINGS

An accuser, whether faculty, administrator, staff or student who has witnessed an act or has evidence that such has been committed, which is believed to violate academic and/or professional ethics, must report the alleged violation to one of the Honor Council Representatives of the accused's class. One or both Honor Council members shall inform the accused of the alleged violation and seek reconciliation between the accused and the accuser. The identity of the accuser shall/shall not be divulged to the accused at the discretion of the accuser.

The accused may or may not admit that he or she has violated the Honor Code and may or may not accept the proposed reconciliation.

If all parties involved accept the terms of reconciliation, the matter is resolved. If multiple accusations occur, there will be an attempt to consolidate the demands. If consolidation is not possible, the accused may have to respond to each demand for reconciliation. The Honor Council Representatives will reduce the terms of the reconciliation to writing to be signed by both the accused and accuser. In order to protect the anonymity of the accuser, the accused should be asked to sign first. If the agreement contains matters about which the Honor Council representatives believe course faculty need to know (e.g., sitting for examinations away from an assigned seat), the advisor to the Honor Council should convey the information to the faculty. The signed agreement shall be maintained in the Honor Council file until terms of the agreement expire.

If the terms of reconciliation are not accepted by the accused, the Honor Council Representative(s) shall present the accusation to the President of the Honor Council.

The President of the Honor Council shall contact the accused and notify him/her of an impending investigation. The President shall inform the Chairman of the Investigation Committee of the accusation. The Chairman shall call a meeting of the Investigation Committee to inform the members of an impending hearing, and to organize an investigation of the charges. The Committee shall investigate charges as rapidly and discreetly as possible, obtain witnesses for the hearing, and procure all documents necessary for the hearing.
HEARINGS BEFORE THE HONOR COUNCIL

The President of the Honor Council shall set a hearing before the Honor Council to determine the facts. The Chairman or a member of the Investigation Committee shall prepare and present the case against the accused. If the Honor Council finds that a student has violated the Honor Code, his/her disciplinary action becomes an academic matter, and the case shall be referred to the appropriate faculty Promotions Committee for determination of disciplinary action using the Academic Procedures. If the Honor Council finds that no violation of the Honor Code occurred, all records related to the accusation, including the investigation and hearing, shall be destroyed. The accused may not be subjected to more than one hearing per incident.

DISCIPLINARY HEARING PROCEEDURES

A simple majority shall pass all formal motions.

Reasonably in advance of a hearing by the Honor Council, the student will be provided notice in writing of the specific allegations, a list of witnesses and any sworn statements or exhibits which will be used as evidence against him/her. The student will be given a list of the members and alternates of the Honor Council. The student may request that the designated alternate replace any member(s) of the Honor Council for the hearing.

The hearing will be conducted in private. Witnesses will be admitted for testimony only and then asked to leave. The testimony will be tape-recorded, but the final deliberations of the Honor Council will not be recorded.

The student may have one (1) person present during the hearing, who may be an attorney, to advise him/her. This person may not address the Honor Council, speak on behalf of the student, question witnesses, or otherwise actively participate in the hearing. If the complainant chooses to have an attorney present, a University attorney may also attend the hearing. The student may appear in person, make an oral statement, and answer questions from members of the Honor Council. Should the student choose to remain silent, no adverse inference will be raised against him/her. The student may submit sworn written statements and other exhibits and witnesses in his/her behalf. The student may hear and question all witnesses.

During the period of time prior to the disciplinary hearing, the Dean or Dean's designee may remove a student from his/her academic place (courses, clerkship, or elective) if the student materially and substantially disrupts the educational process or constitutes a clear and present danger to the health and safety of any other persons, themselves, or property, or infringes on the rights of others.

The Honor Council shall make its determination in writing based upon the evidence presented at the hearing that is relevant to the issue or issues before the Council. The
student may not be present during the Council deliberations. The student shall be notified in writing of the determination.

Within seven (7) working days of the date of the determination notice the student may contest, in writing, to the President of the Honor Council that a substantial mistake of fact occurred, a fundamental misinterpretation of official policies is evident, or a significant procedural defect took place. These are the only bases for contesting the determination. If a student contests the determination of the Honor Council, the Honor Council will reconvene to review the student's contentions. If the Honor Council concurs with the student, it will correct the procedural defect, re-interpret the policy as appropriate, or review the fact which was originally presented in error, and then review its determination and revise it if appropriate. There shall be no appeal from a final determination by the Honor Council.

A determination by the Honor Council that a student violated the Honor Code shall be referred to the Student Promotions Committee for consideration as a failure to meet academic standards under the academic procedures.

The by-laws of the Honor System can be found in Appendix E on page 157.

**CODE OF PROFESSIONAL CONDUCT FOR MEDICAL STUDENTS**

**MEDICAL STUDENT OATH**

In order to contribute to a spirit of moral and intellectual development; affirming that honor, integrity, and compassion are my highest ideals; and endeavoring to create a community of sensitivity and commitment. I (Name) pledge to my future patients, my colleagues, and my mentors the following:

That in all instances I shall maintain a state of sensitivity and compassion; realizing always that my greatest commitment is to my patients. I will henceforth preserve the confidentiality of my patients and I will render to them the highest possible standard of care. In short, I will conduct myself with unquestionable integrity in all of my professional relations.

Realizing the power of cooperation and the common bond between the practitioners of the healing arts, I will respect the contributions of my brothers and sisters in medicine, pharmacy, nursing, and in the health related professions. I will in no way breach this bond of respect, and I will strive to realize our collective commitment to heal and comfort the poor of body and spirit.
I will honor the rich tradition embodied in learning the art and the science of medicine. I will always seek to learn from the knowledge, wisdom, and experience of my mentors. May I never forget that medical education is a privilege bestowed on me by those who have entrusted their well-being and the well-being of others to me. Further, let me never forget that it is my responsibility to learn the science and the art of medicine; and that my learning within the noble profession of medicine is a life-long process. May I be worthy of this trust and may I always remember that henceforth I must put others before myself.

I affirm this day before my future colleagues in medicine that I (Name) will be true to this pledge.

The **Code of Professional Conduct** is a series of principles and attendant rules that govern professional interactions. The Code consists of two complementary sections: professional obligations and professional ideals. "Obligations" refer to necessary professional behaviors that are required by the ethical foundation of medical practice, teaching, learning, and research. "Ideals" refer to desirable professional behaviors that professionals at all levels should make every effort to acquire because they enhance professional excellence. Please see the full Code of Professional Conduct in Appendix F on page 160.

**White Coat Award** - Mindful that medical education is a privilege, the members of the Honor Council wish to publicly acknowledge classmates who consistently embody the ideals set forth in our medical student oath. Details about the White Coat Award can be found in Appendix O on page 187.

**ILLUMINE**

Professionalism is not only expected of students, but of the faculty as well. Because of the importance the College places on professionalism, especially in dealing with patients, the following policy and procedures are in place to allow the reporting of unprofessional conduct of clinical faculty members, interns, residents, and fellows:

ILLUMINE - Professional behavior on the part of all physicians who practice medicine in association with the UAMS College of Medicine, whether faculty physicians or residents, is critically important for effective teamwork on which all good medical care and research depends. It is vital for the cultures of all the institutions affiliated with UAMS, the morale of that board community, the role-modeling and education of our students, and the safety of our patients.
ILLUMINE and the Dean’s Senior Advisory Council are mechanisms established by the UAMS College of Medicine to support the professional conduct of its clinical faculty members and residents, in accordance with the UAMS College of Medicine Faculty Professionalism Guideline. The purpose of ILLUMINE and the Council are to provide constructive feedback to physicians who, repeatedly, behave unprofessionally. The intent of the feedback is to support reflection and learning about what it takes to behave professionally, consistently.

ILLUMINE is a confidential reporting system that can be found on the UAMS Intranet and the Arkansas Children’s Hospital Intranet. All members of the UAMS, ACH and AHEC communities who have access to those intranets can access and use ILLUMINE. Reports should be made to ILLUMINE by any individual who feels s/he has witnessed or been the victim of behavior on the part of a physician that significantly breeched the Professionalism Guideline. These reports are considered by the Council to be “staff complaints.” Complaints made by patients or their families about unprofessional behavior manifested by a physician are forwarded to ILLUMINE. These reports are considered by the Council to be “patient complaints.”

The Dean’s Senior Advisory Council is a standing committee of the College of Medicine. Council members are appointed by the Dean for 3-year terms that are renewable. Council members are known widely in the UAMS, ACH and AHEC communities as individuals who are fair-minded and of good judgment. The Council meets, typically quarterly, to review reports made to ILLUMINE. If reports indicate that a physician is repeatedly behaving unprofessionally, an individual Council member will arrange a confidential visit with the physician of concern to share and discuss the information that has accumulated in ILLUMINE (an Awareness Intervention). The Council member may recommend resources to the physician that may aid reflection and learning. The Council member will arrange follow-up meetings with this physician after subsequent meetings of the Council to inform him/her as to whether any further reports have been made to ILLUMINE. If reports of unprofessional behavior continue to be made to ILLUMINE, the Council may determine that the individual’s department chair or director must be made aware of the reports, and participate in the creation of a remediation plan (an Authority Intervention). If this becomes necessary, a report about the plan will be submitted to the Dean and the Medical Directors of the hospitals at which the individual physician practices (UAMS and ACH; to the appropriate AHEC Center Director and Executive Director of the AHEC for AHEC-based physicians). If the physician is a resident, the report will also be shared with the Associate Dean of Graduate Medical Education, (Associate Director for Education for AHEC’s) and the individual’s residency program director. If, subsequently, reports to ILLUMINE indicate a continued pattern of unprofessional behavior, the Dean (or Executive Director for AHEC’s) will be asked to take appropriate disciplinary actions.

Accountability for professional behavior is the overarching goal of ILLUMINE and the Dean’s Senior Advisory Council. These processes will operate confidentially and will
serve to buttress the “chains of command” that exist within UAMS, ACH, and AHECs to take prompt action when seriously unprofessional behaviors are evident.

**PLAGIARISM IN THE COLLEGE OF MEDICINE**

Plagiarism is defined as adopting, appropriating for one’s own use and/or incorporating in one’s own work, *without acknowledgement*, passages, tables, photographs, models, figures, and illustrations from the writings or works of others; presenting parts of passages of other’s writing as products of one’s own mind. The concept of plagiarism also extends to the copying of quiz, written, or lab practical examination questions, OSCE cases, or clinical case scenarios used in the classroom or small group sessions, in any form or manner, including memorizing the material so it can be written down and passed on to others at a later time. Plagiarism of testing materials is cheating, and constitutes an activity that is unprofessional and against the ethical tenets of the medical profession.

Plagiarism will be taken very seriously in the College of Medicine and could lead to action up to and including dismissal. This notice is to inform students that the College of Medicine reserves the right to utilize, with or without the students’ knowledge, plagiarism detection services or software. Written work is compared to a database of texts, journals, electronic and web sources including web sites that sell or distribute pre-written essays or term papers. The College reserves the right to use this plagiarism detection system at any time, on any work submitted by a student in any course or clerkship.

**NATIONAL BOARDS**

**USMLE STEP 1 POLICY**

All students of the College of Medicine are required to take the United States Medical Licensing Examination (USMLE) Step I examination within twelve weeks after the successful completion of their sophomore year. A passing composite score is required before final promotion into the junior year. All students, including MD/Ph.D. students and other students seeking combined degrees, must pass the USMLE Step 1 examination within three tries and by 14 months following the completion of their sophomore year. Students failing to take the USMLE Step 1 examination within twelve weeks after the successful completion of their sophomore year, students failing the USMLE Step 1 examination three times, and students not passing the USMLE Step 1 examination by 14 months following the completion of their sophomore year will be dismissed from the College of Medicine for failure to maintain academic standards. The passing composite score shall be the score set as the national passing composite score by the USMLE program.
Students who fail the USMLE Step 1 examination on the initial or second attempt are not automatically pulled from their rotations and may register for, and proceed into, the M3 and, even occasionally, the M4 curriculum, while attempting to pass the Step 1 examination in the three tries and 14 month window allowed in the policy above, although they remain officially M2 students since their promotion by the Promotions Committee into the junior year is contingent upon passing the Step 1 examination within three tries and within 14 months following their sophomore year. Any student in this situation wishing to arrange time to prepare for the second or third administration can work this out individually with the Executive Associate Dean for Academic Affairs. (Time taken off during clerkships to study, or even an official Leave of Absence, does not stop the clock on the 14 month time limit to take and pass the Step 1 examination. Even if a student takes time off to study, or takes a Leave of Absence, they must still pass the USMLE Step 1 examination within three tries and by 14 months following the completion of their sophomore year, as stated in the policy above.) Time taken out of the clerkships specifically to study for the USMLE examination is not considered a leave of absence, since the student is preparing for a requirement of the College. Time taken out of the junior year for personal reasons unrelated to preparation for Step 1, will be considered a leave of absence, and a student requesting such a leave must follow all rules concerning a leave of absence. In general, if a student misses more than twelve weeks of the junior year, he/she will not be able to graduate with his/her class. Students missing more than \( \frac{1}{2} \) of the junior year must repeat the entire junior year. (Approved by the Dean and the Executive Committee of the College of Medicine on April 9, 1998 – Explanation (second paragraph) modified by Dean and Executive Committee on September 10, 2010 – Policy (first paragraph) unchanged)

**USMLE STEP 1 PRE-TESTING POLICY**

All sophomores students are required to take the National Board of Medical Examiners’ (NBME) Comprehensive Basic Science Examination near the end of their sophomore year, the cost of which will be passed on to the students through a student fee (date of the examination will be announced yearly). (Approved, Executive Committee 10/25/01 – Modified, Dean 7/02 – Modified by the Curriculum Committee, April 2011)

**USMLE STEP 2 POLICY**

Students are required to obtain a passing score on the United States Medical Licensing Examination (USMLE) Step 2 examination as a requirement for graduation. The USMLE Step 2 examination consists of two parts: a written examination (USMLE Step 2-CK), and a clinical skills component (USMLE Step 2-CS). It is necessary to pass both the written and the clinical skills component to successfully pass the USMLE Step 2 examination. Therefore, passing both components is a requirement for graduation from the UAMS College of Medicine. The passing composite score shall be the score set as the national passing composite score by the USMLE program on both sections. It is highly recommended that these examinations be taken for the first time shortly after the
end of the student’s junior year in order for scores to be available in time for residency applications. Students who fail to pass the USMLE Step 2 examination are strongly urged to meet with their advisor and the Executive Associate Dean for Academic Affairs to discuss their situation and potentially modify the remainder of their senior elective program in such a way as to eliminate their deficiencies and optimize their ability to pass the examination when they take it again. (Approved by General Faculty, June 1989. Revised by the College of Medicine Executive Committee on November 21, 1991, November 19, 1992, August 19, 1993, and September 17, 1998. Revised General Faculty, December 1998. Revised by the College of Medicine Executive Committee on April 7, 2003) Revised by the College of Medicine Executive Committee on October 8, 2008.

POLICY FOR SENIORS NOT PASSING STEP 2 BY GRADUATION

1. Students in the University of Arkansas for Medical Sciences (UAMS) College of Medicine (the College) are required by faculty policy to pass the United States Medical Licensing Examination (USMLE) Step 1 examination in order to be promoted into the junior year. They are also required to pass the USMLE Step 2 examination (both components) as an academic requirement for graduation.

2. A senior student who has completed all requirements for the degree “Doctor of Medicine”, by his/her class graduation date, but who has not passed the USMLE Step 2 examination will be allowed to remain in student status in the College until such time as he/she has passed the examination, or until he/she has exhausted the seven years of student eligibility, as defined in the College’s faculty policy entitled, “Limit on Years in Medical School.” To maintain student status during this period of time, the student must register each year during senior registration, pay full student fees as required by the campus or the College each year (currently, the student health fee, the technology fee, and disability insurance – the malpractice fee is not required unless the student will participate in College of Medicine sanctioned clinical activities during this time period), and must keep the Office of Student and Academic Affairs apprised of their activities and whereabouts. As long as the student complies with all provisions of this policy and remains in student status, the College will continue to certify to the National Board of Medical Examiners (NBME) that the individual is a student up to the seven year limit as noted above.

3. Because of the likelihood of a student passing the examination in a reasonable number of tries, the College will consider that the student is making satisfactory progress toward their degree for one additional year following their normal class graduation date, as long as the student maintains “student status”. During this one-year extension, the student will be eligible for financial aid. During this period of time, he/she may utilize all resources of the College to study, take advantage of help in the Office of Educational Development, and audit any classes of the College he/she feels would be helpful in preparing for the examination. The student must pay any additional fees required for preparation courses or for any expendable resources used at UAMS. His/her financial aid budget can not be
increased to cover non-UAMS associated expenses of any type. Specifically, the budget will not be increased to cover non-UAMS board preparation courses.

4. Because the likelihood of a student passing the USMLE Step 2 examination decreases if he/she is not able to pass within the above referenced one additional year, the College will continue to consider him/her a student until the seven year eligibility period has expired, as defined in paragraph 1 above, but will not extend certification for financial aid more than one year past his/her normally scheduled class graduation date. The student will be required, as noted above, to continue to register each fall at senior registration (and pay fees as above).

5. If a student has not passed the USMLE Step 2 examination by their normal graduation date, the UAMS College of Medicine will attempt to notify the residency program into which the student matched and inform the program that the student has not yet fulfilled all requirements for the M.D. degree.

6. A student who passes the USMLE Step 2 examination following their normal graduation date will receive their degree in compliance with University of Arkansas policies. The graduation date on the student’s diploma will reflect their “normal” graduation date if the student has completed all requirements for their degree other than the Step 2 requirement prior to graduation, AND the student has taken the Step 2 examination before graduation, even if the passing score is not known for several weeks. If the student has completed all requirements for their degree except the Step 2 requirement prior to their normal graduation, but takes the Step 2 examination (and passes it) after their normal graduation date, the date on the student’s diploma (the date of graduation) will reflect the date on which the President of the University certifies their degree, in compliance with University of Arkansas policies.

POLICY FOR SENIORS NOT PASSING STEP 2 BY GRADUATION TAKING PART IN GRADUATION CEREMONIES

Students who have completed all requirements for the degree, Doctor of Medicine, prior to their normal class graduation date, except for passing the USMLE Step 2 examination, may take part in their class’s graduation ceremonies if they desire. This does not in any way constitute a certification or granting of their degree. Before the College of Medicine certifies to the Chancellor and the Board of Trustees that an MD degree has been earned by a student, each student must complete all individual requirements of the College of Medicine for the degree. (Approved by the Dean of the College March 20, 2001)

USMLE SCORE POSTING POLICY

USMLE Step scores are usually released on Wednesdays. The National Board of Medical Examiners sends each student his/her score via e-mail as soon as it is released.
Therefore, the UAMS Office of Academic Affairs will not post or otherwise release the scores to students on a routine basis. If, for any reason, a student does not receive his/her scores directly from the National Board, the Office of Academic Affairs will release the information to the student on request, but only in person, with appropriate identification, or by e-mail or telephone if the student identifies him/herself by USMLE ID# or UAMS secret ID#. This also applies to the release of any other confidential information, such as NRMP match results, grades, etc.

**USMLE STEP 1 REVIEW POLICY**

Given the past history of performance on the USMLE Step 1 examination by those members of the sophomore class in the bottom 25% of the class rank, the faculty of the College strongly recommends that anyone in that portion of the class rank take a Board Preparation Course prior to sitting for the Step 1 examination following their sophomore year regardless of their score on the NBME Comprehensive Basic Science Examination. (Approved by the College of Medicine Executive Committee on May 15, 1997)

**SPECIFIC CLINICAL SKILLS EXPECTATIONS**

**SOPHOMORE LEVEL OBJECTIVES FOR CLINICAL SKILLS**

At the end of the sophomore year, students have completed two clinical courses: Introduction to Clinical Medicine 1 (ICM 1), a two-semester course in the freshman year, and Introduction to Clinical Medicine 2 (ICM 2), a two-semester course in the sophomore year. By that time, students should have developed clinical skills in several broad task areas. The following is a listing of reasonable expectations for all medical students at the end of the sophomore year.

The Patient Encounter

When encountering a patient, the student should be prepared to:

1. Demonstrate an understanding of the patient/doctor relationship and show consideration for the multi-facets of the patient encounter- the psychological, physical and social aspects of the individual;
2. Demonstrate basic interviewing techniques to obtain the patient history;
3. Correctly perform the techniques that are used to physically examine the patient;
4. Begin to formulate a general problem list based on information from the interview and examination;
5. Recognize and interpret common abnormal findings on the physical examination.
Patient Case Presentation/Communication

Following a patient encounter, the student should be prepared to:
1. Give an oral presentation of the patient that is readily understandable, well organized, concise, and correct;
2. Produce a written report of the encounter that is understandable, well organized, and concise.

Interpersonal Skills

The student should have developed appropriate interpersonal skills to permit him/her to:
1. Interact effectively with patients, caregivers, and other healthcare professionals;
2. Effectively communicate with a patient and a patient's family during the interview process.

Patient Care Skills

Although it is understood that a student at this level of training is not prepared to provide comprehensive patient care, a student should have sufficiently mastered appropriate skills that permit him/her to:

1. Treat the patient as a person, not a disease, realizing that the person who is ill is more important as an individual and as a member of his or her social group than is the illness that person has;
2. Respect the patient's rights and privacy and be cognizant of HIPAA regulations;
3. Adopt a professional manner in each patient encounter such that the patient feels that he or she has received a satisfactory, empathetic, and professional service;
4. Recognize the following issues that could affect the appropriate management of the patient:
   a. conflict of values between the patient and the physician;
   b. conflict of values between the patient and the community;
   c. psychosocial issues;
   d. spiritual and cultural issues;
   e. economic issues;
   f. sexual orientation.

Professional Manner

Professional attitude and demeanor are hallmarks of the medical professional and an important part of medical training. By the end of the sophomore year, a student is expected to have developed a professional attitude that will permit him/her to:

1. Behave in a responsible, reliable, and dependable manner;
2. Demonstrate personal integrity, honesty, and self-discipline;
3. Project a professional image in manner, dress, grooming, speech, and interpersonal relationships that is consistent with the medical profession’s accepted contemporary standards in the community;
4. Recognize his/her personal biases whether they are intellectual, physical, or emotional and how they might confound appropriate patient care;
5. Demonstrate sound judgment and function appropriately under pressure.

Standardized Patients

A standardized patient (SP) is a lay-person trained to accurately and consistently portray a patient for purposes of teaching and evaluation. During ICM 1 and ICM 2 courses, students interact with SP’s to learn and practice interviewing techniques, the communication process, interpersonal interactions of a meaningful manner, and physical examination skills. SP’s also participate in practical skill tests and are trained to assess students in their performance of defined clinical tasks. Students are expected to treat SP’s with the same standard of professional conduct as they would a patient.

Objective Structured Clinical Examinations

The clinical skills noted above are assessed through a series of practical tests referred to as Objective Structured Clinical Examinations (OSCE) in ICM 1 and ICM 2. In general, these tests include several stations at which the student interacts with a SP or real patient to perform a specific clinical task in a designated amount of time. For example, the student may be asked to interview a patient about a headache (focused history), examine a patient’s abdomen (focused physical examination), or conduct several other tasks associated with the patient’s clinical problem (e.g. read an x-ray or interpret a slide). Detailed information about each OSCE is provided in the ICM 1 and ICM 2 course manuals. In order to advance to the junior year, a student must achieve a passing grade on the final OSCE in ICM II.

All practical clinical examinations are conducted in the Clinical Skills Center. Occasionally, SP-student interactions are videotaped. These videotapes are used to assess the quality of the SP performance and are not to be used in any way to assess student performance.

SENIOR CLINICAL SKILLS OBJECTIVES

At the beginning of the senior year, students have completed all of the following junior clerkships: Internal Medicine, Psychiatry, Obstetrics/Gynecology, Pediatrics, Surgery, Family Medicine, Neurology/Neurosurgery/Ophthalmology and the Surgical Sub-specialties. The following is a list of reasonable expectations of all medical students at the beginning of their senior year. During the senior year, students will complete the Geriatrics clerkship; these expectations also apply to this clerkship.
When encountering a patient, the student should be capable of the following:

Patient Encounter

1. Make appropriate introductions and explanation of his/her role and plans for the interaction.
2. Carry out an appropriate, focused inquiry when taking a medical history and while performing a physical examination.
3. Correctly perform the techniques of taking a medical history and performing a physical examination.
4. Accurately interpret the responses or objective results obtained from or about the patient.
5. At the conclusion of the inquiry develop working diagnoses.
6. Synthesize the findings into a database that effectively and succinctly communicates the nature of the patient’s problem.
7. List the patient’s findings not explained by the working diagnoses.
8. Develop a cost-effective plan for further investigation (if necessary) to rule in or rule out the working diagnosis under consideration by selecting appropriate diagnostic procedures and laboratory tests.
9. Design an appropriate and comprehensive treatment and management plan for the patient.
10. Accurately interpret the results of laboratory and diagnostic tests ordered in light of the diagnoses or problem formulations and treatment plans under consideration.
11. Refine working diagnoses or treatment plans using information obtained from investigation to provide as accurate a diagnosis or problem formulation as possible with the data available, to include the organic, psychological, and social dysfunctions that may be responsible for the patient’s problems.
12. Arrange for follow-up on all problems identified
13. Explain in a way that is understandable to the patient any problems that involve on-going medical management, health risk management, and counseling.
14. Obtain written and informed consent as needed
15. Consider the patient’s potential for compliance and undertake any educational steps for follow-up care that may be needed to improve compliance.

Patient Case Presentation/Communication

1. Produce a legible written report of the encounter, as well as present an oral presentation of the encounter that is understandable, well organized and concise.
2. Provide follow-up notes, progress notes, physician’s orders or discharge orders as indicated.
Interpersonal Skills

1. Interact effectively with patients, caregivers and other healthcare professionals.
2. Effectively communicate with a patient or the patient’s family or representative, when the patient has the following problems:
   a. Unable to speak English or is hearing impaired or deaf
   b. confused, obtunded
   c. hostile
   d. withdrawn
   e. mentally retarded
   f. from a different ethnic, racial or cultural background
   g. a very young or pre-verbal child
   h. a geriatric patient presenting with communication difficulties

Patient Care Skills

1. Adopt a professional manner in each patient encounter such that the patient feels he/she has received satisfactory, empathetic and professional service.
2. Recognize the following issues that could effect the patient’s management and modify management as appropriate:
   a. legal issues
   b. ethical issues
   c. conflict of values between the patient, the patient’s family, the physician, and the community
   d. psychosocial issues
   e. religious issues
   f. psychiatric issues

Risk Management/Health Maintenance

1. Identify persons at risk for common and important health problems and carry out risk assessment and educational procedures appropriate to the patient’s:
   a. age
   b. gender and sexual orientation
   c. genetic predisposition for certain diseases
   d. health status
   e. occupation
   f. exposure to risk factors
   g. lifestyle
2. Provide appropriate health maintenance and disease prevention strategies.

Medical Informatics

1. Utilize electronic databases to obtain clinically relevant information.
Students are required to pass the USMLE Step 2 CS examination, which is a summative examination on clinical skills in order to graduate from the College of Medicine. The Center for Clinical Skills Education offers practice OSCE exams late in the junior year or early in the senior year to allow students to practice their skills.

**LEAVE OF ABSENCE**

The leave of absence provides a mechanism whereby a student encountering serious nonacademic difficulty may be relieved temporarily of his/her responsibilities. Such leaves, which are usually for the duration of the academic year during the first and second year, but may be for shorter periods of time in the third and fourth years of the curriculum, are granted for medical (physical and/or emotional) causes or in extenuating circumstances such as family emergencies, financial crisis, or other similar circumstance. The leave of absence is not a mechanism whereby a student experiencing academic difficulties can withdraw from classes and then re-enter at a later time with that academic record expunged. The Executive Associate Dean for Academic Affairs, or designee, may require the student to provide appropriate documentation to substantiate the reasons for the request. All leaves of absence, regardless of their length, MUST be requested in writing with a signature and a date (e-mail will not suffice).

When a student is granted a leave of absence during the freshman or sophomore years, the timing of all courses in which the student is currently enrolled will be examined. If one half or more of the course(s) (in weeks) has (have) been completed at the time the leave takes effect, that (those) course(s) will be polled by the Dean’s Office for a preliminary grade. When the student returns from the leave of absence, he/she will be required to obtain a grade of “C” or better in any course in which he/she had a preliminary grade of “D” or “F”. If he/she does not obtain a grade of “C” or better in every such course, he/she will be dismissed from the College for failure to maintain academic standards.

The leave of absence is a serious matter. Since each case is unique, the formulation of extensive guidelines is difficult. Therefore, the student requesting the leave may be asked to appear before a committee whose charge is to evaluate such requests. The Executive Associate Dean for Academic Affairs or designee may waive the appearance before the committee under certain circumstances. The Committee, consisting of four faculty members, shall meet when called to do so by the Executive Associate Dean for Academic Affairs or designee. In the case of a leave due to medical reasons, the student's physician may be present and/or may submit a letter as to the nature of the problem and the anticipated length of the leave of absence. After hearing the request, the Committee will make its recommendation to the Executive Associate Dean for Academic Affairs or designee. If recommending a leave, the Committee may also recommend the conditions
of the leave and the mechanism for its termination. The final decision regarding the leave shall reside with the Executive Associate Dean for Academic Affairs, or designee.

As noted above, the leave is usually for the duration of the academic period in which the leave is taken. However, on occasion, the leave may be extended up to a total of three academic periods (the initial one and two extensions). When a leave of absence is granted, the Executive Associate Dean for Academic Affairs, or designee, will write the student informing him/her. In the letter, there will be a deadline for requesting a termination or extension of the leave. Failure to request a termination or extension of the leave by the deadline stated in the letter will be interpreted to mean that the student has abandoned his/her place in the College of Medicine and the student will be permanently withdrawn.

Certain regulations exist with regard to the financial impact of a leave of absence. Anyone contemplating a leave is advised to look into these regulations and discuss them with the Student Financial Services Office. See the discussion in this handbook under the section "Student Financial Aid" (Page 79).

THE ADVISORY COMMITTEE ON LEAVES OF ABSENCE

This committee shall evaluate requests for leaves of absence from medical students when called upon to do so by the Executive Associate Dean for Academic Affairs or designee. This group shall consist of four members of the faculty selected by the Executive Associate Dean for Academic Affairs or designee. The Committee shall recommend for or against the leave and may set forth conditions as to duration and the procedure for termination of the leave.

Revised, 1984 - Effective Academic Year, 1984-85; Revised, 1985 - Effective Academic Year, 1985-86; Revised, Executive Committee, May 16, 1996 - Effective Academic Year, 1996-97; Revised, Executive Committee, February 5, 1998 – Effective Academic Year, 1998-99

LIMIT ON YEARS IN MEDICAL SCHOOL

Understanding the rigors of the practice of medicine, and acknowledging that the practice of medicine requires an individual to understand the material presented in medical school as an integrated whole, rather than in isolated blocks of information, the College of Medicine faculty feels that one of the requirements for the M.D. degree is the ability to assimilate the material and skills presented within a reasonable period of time. Therefore, a student, once enrolled as a freshman medical student, must graduate from the College of Medicine with the M.D. degree by the spring graduation ceremony concluding the seventh year following the initial enrollment. This “clock” is not stopped for any reason, including leaves of absence, failure to pass internal examination requirements (such as
the OSCE exam), repeat years required by the Promotions Committee, or additional time required for USMLE testing. The only exception is that the clock will stop during the time a student officially in the M.D./Ph.D. program is out of the College of Medicine pursuing the Ph.D. portion of their degree. A student who has not completed all degree requirements within the time frame noted above will be dismissed. (Approved by the Executive Committee of the College on 9/17/98)

**SENIOR YEAR TIMING POLICY**

Students in the UAMS College of Medicine are required to complete a series of courses in the senior year. Because of the balance between the number of students and the number of sites and patients available for rotations, the faculty has determined that students may not deliberately extend their senior year. The senior year must be completed in a continuous manner by the normal graduation date of the student (unless extended by delays in completing the junior year, or because of the need to repeat a failed course). Students who complete all other requirements for graduation except the USMLE Step 2 examination by their normal graduation date are covered in a special Step 2 policy.

**EDUCATIONAL RESOURCES AND ISSUES**

**LIBRARY**

Library Web Site: [www.library.uams.edu](http://www.library.uams.edu)
Library Mobile Web site: [www.library.uams.edu/m](http://www.library.uams.edu/m)

**Library Hours**

<table>
<thead>
<tr>
<th>Regular Hours:</th>
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<tbody>
<tr>
<td>Monday through Thursday</td>
<td>7:30 a.m. to 10:00 p.m.</td>
</tr>
<tr>
<td>Friday</td>
<td>7:30 a.m. to 6:00 p.m.</td>
</tr>
<tr>
<td>Saturday</td>
<td>9:00 a.m. to 6:00 p.m.</td>
</tr>
<tr>
<td>Sunday</td>
<td>2:00 p.m. to 10:00 p.m.</td>
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Special library hours during holidays and breaks will be posted in advance in the Library and on the Library website. When the Library is closed, materials may be returned to the book drop near the Library entrance in the Education II lobby or the outdoor book drop on Campus Drive.

The Library Learning Resource Center (LRC) and Historical Research Center may be open fewer hours than the rest of Library during the summer and when classes are not in session.
After Hours Study Access
An after-hours study area is available on the 1st floor of the Library. Students and residents may enter this area after regular library hours via a UAMS ID card swipe in the north lobby on the 1st floor of EDII.

Study Areas
Study areas on every floor of the Library offer a variety of services and accommodate all types of study needs. Amenities include computers, printers/scanners, open areas for quiet group study, an Active Learning Center for collaborative work, rooms for group study, individual study carrels, a silent study room, and a lounge area with seating & vending machines. Study areas are monitored with security cameras, panic buttons, and emergency phones.

Group Study Rooms
The UAMS Library has seven group study rooms, equipped with white boards and wall monitors. There are three on Level 2 and four on Level 3. These rooms may not be reserved but are available on a first-come-first-served basis, and are intended for use by groups of 2 or more persons. Two additional group rooms on the 3rd floor have audiovisual and computer equipment for use by small groups of students.

Lounge and Food in the Library
The Library allows foods and covered drinks in the Library. An area on the 1st level is a mini lounge with vending machines for coffee, bottled drinks, and snacks. ‘Big time’ eating should take place in the lounge area; however, food may be eaten throughout the Library. It is up to individuals to pick up after themselves and to keep a clean environment in the Library. Please notify Library Staff if a spill or area needs additional attention.

Computers
Computers are located on all floors of the Library and are accessed via a UAMS Username and Password. Library computers provide access to the Library catalog, online resources, Microsoft Office suite, and the Internet. All computers in the Library are covered by the Acceptable Use Guidelines - Student Use of UAMS Network and Computer Resources policy.

Wireless Connectivity
Wireless connectivity is available throughout the Library. Wireless enabled devices can connect to the Internet via the UAMS Guest wireless network by entering an email address and signing on as “Guest”. Contact the IT HELP desk (501) 686-8555 to configure your wireless-enabled devices or for wireless assistance.
Printing, Photocopying, and Print Cards
Printing and photocopying costs 10¢ per page for black and white copies and 20¢ per page for color copies. Print cards are sold at the Circulation Desk. Print cards range in price, with a minimum card cost of $1.00 for 10 copies. Print cards can also be recharged for any amount in increments of 10¢. The Library accepts cash, checks, credit and debit cards.

Library Web Site
The UAMS Library web site (http://www.library.uams.edu) serves as the gateway to all of the Library’s resources, services, and information. You must go through the web site in order to gain online access to all of the Library’s subscription products such as research databases, electronic journals, and ebooks.

The Library provides a mobile web site (www.library.uams.edu/m) for your convenience. It includes information about the Library, access to selected mobile resources, the library catalog, and your individual library account.

Remote Access
Most of the Library’s online collection can be accessed from off campus. You will be asked to provide your UAMS Username and Password when accessing the Library’s subscription resources from off campus or through the Library’s mobile web site.

Checkout of Materials
The UAMS Student ID badge functions as the UAMS Library card.

Up to 10 books may be checked out concurrently. The loan period is for two weeks with two renewals, for a total of six weeks checkout. (If a book is on ‘hold’ for another customer, it cannot be renewed.) AVs and CD-ROMs may be checked out for three working days unless the material is restricted.

Print copies on classroom reserve may be checked out for two hours use (and renewals) in the Library.

Headphones are also available for checkout at the Circulation Desk on the 1st floor.

Reminders of Checked Out Books
Courtesy notice reminders that books are coming due are sent via e-mail three days prior to the due date. Renewals may be made online through the Library Catalog, by phoning the Circulation Desk (686-5980) or replying to the courtesy notice. The first overdue notice is sent the day after the book is due. Two subsequent notices are sent followed by an invoice if materials are not returned within 30 days.
Charges for Overdue or Lost Books
Overdue fines for late books are $1.00 per day/per book. There is a $100.00 overdue fine limit. Borrowing privileges are suspended until all bills and fines are settled. Prior to graduation all students are required to pay any outstanding fines or invoices before they are ‘cleared’ by the Library.

Special Collections
eReserves: Digital materials, such as images, PowerPoint presentations, and documents, placed on reserve for students are available via ‘eReserves’ on the Library web site. These materials are password protected to restrict access only to students enrolled in the courses.

Reference Collection: Non-circulating reference materials are housed on the first floor of the Library. Ask at the Reference Office or Circulation Desk for help in locating items or information. The Robert Watson Room houses older reference materials such as earlier editions of directories, biographies, and statistical documents. Older drug and toxicology reference materials are located in off-site storage. To request these items please contact the Circulation Desk.

History of Medicine Collection: General works pertaining to the history of medicine are located on the second floor in the Historical Research Center. The Archives Collection, also located in the Historical Research Center, contains materials documenting the history of UAMS and the health sciences in Arkansas.

Core Collection: Core collection materials are heavily used gold standard books covering all areas of the health sciences. The collection is located behind the Circulation Desk on the 1st floor of the Library.

Reference Resources and Services
Reference Services staff are available on the first floor of the Library Monday through Friday, 7:30 a.m. - 6 p.m. to help students make efficient and effective use of Library resources and services. Reference staff can help get students started with their research by providing assistance with subject research guides, database searching, online journals and full text access, electronic books, and citation styles and bibliographies.

You can contact the Reference Department in a variety of ways: phone 686-6734, email libraryreferencedesk@uams.edu, Twitter https://twitter.com/uamslibrary, Facebook http://www.facebook.com/uamslibrary, or come by the Library.

Mobile Resources
The UAMS Library provides access and assistance with the mobile versions of numerous research databases, clinical resources, and reference sources. Technical support with
mobile devices is available in the Learning Resources Center on the 5th floor of the Library. Check the Library web site or the mobile web site for more details.

**Interlibrary Loans**
The Interlibrary loan staff obtains materials not available in the UAMS Library from other libraries and commercial document suppliers. Interlibrary Loan requests are submitted through the ILLiad section of the Library website after a one-time registration (https://www.library.uams.edu/illiad/firsttime.aspx). There is a $5.00 charge for each item obtained. Customers are notified if they will be responsible for additional copyright fees or other document delivery charges. For more information, please call 686-6744 between the hours of 7:30am and 5:00pm, Monday through Friday, or email libraryinterlibraryloan@uams.edu.

**Learning Resource Center**
The LRC is located on the 3rd and 5th floors of the Library. The LRC webpage (http://www.library.uams.edu/lrc/) contains information about services and resources of importance to COM students, including a list of many Web-based educational programs.

Audiovisuals: Audiovisual materials and equipment are available for student use in the LRC at the north end of the 3rd floor of the Library. The audiovisual collection includes slide sets, videotapes, and models. Audiovisual materials not on reserve for classes or restricted by licensing agreements are available for 3-day checkout. The LRC does not lend equipment.

Computer Labs: All LRC student computer labs provide access to a wide variety of computer-based educational resources as well as Microsoft Office applications, the Internet, and the Library’s electronic resources. Some programs on CD-ROM may be checked out and some of the programs are available over the Internet from locations off-campus. Check with the LRC staff on availability. There is a 10¢ charge for printing from the computers in the LRC computer labs.

The computer labs are located on the 3rd and 5th floors of the Library. In addition to the above mentioned resources, the 5th floor lab computers provide scanning and image manipulation programs to assist students in preparing presentations. Mobile device assistance is available on the 5th floor from 8:00am-6:00pm Monday-Friday.

**Copyright**
UAMS promotes the educational and research use of copyrighted materials (Appendix A. Basic Copyright Law) through the appropriate application of the provisions provided in copyright law for fair use (Appendix B. Fair Use) and for specific exemptions granted for educational and research purposes (Appendix C. Exemptions). The Library assists students with understanding fair use rights and compliance with copyright laws through the campus-wide distribution of the Guidelines for UAMS Faculty, Staff, and Students Using Copyrighted Materials. See the Library web site for detailed guidelines, laws, and resources regarding copyright.
Copyright infringement is the act of exercising, without permission or legal authority, one or more of the exclusive rights granted to the copyright owner under section 106 of the Copyright Act (Title 17 of the United States Code). These rights include the right to reproduce or distribute a copyrighted work. In the file-sharing context, downloading or uploading substantial parts of a copyrighted work without authority constitutes an infringement.

Penalties for copyright infringement include civil and criminal penalties. In general, anyone found liable for civil copyright infringement may be ordered to pay either actual damages or "statutory" damages affixed at not less than $750 and not more than $30,000 per work infringed. For "willful" infringement, a court may award up to $150,000 per work infringed. A court can, in its discretion, also assess costs and attorneys' fees. For details, see Title 17, United States Code, Sections 504, 505.

Willful copyright infringement can also result in criminal penalties, including imprisonment of up to five years and fines of up to $250,000 per offense.

For more information, see the web site of the U.S. Copyright Office at www.copyright.gov, and especially their FAQs at www.copyright.gov/help/faq/.

OFFICE OF EDUCATIONAL DEVELOPMENT (OED)

The pace and amount of learning in Medical School is considerably different from other pre-professional courses. Students often say they have more to learn in one course in medical school than in an entire semester of pre-professional coursework. Medical School is “learning on steroids”.

Just as you take stock of your health during annual physicals, the beginning of medical school is a good time to take stock of your study and learning skills. Some Educational Development resources to help you check your study skills and kick your learning up a notch are:

- **Learning skills assessments**: Helps you check skills such as identifying relevant information, making the best use of practice test questions, and condensing/organizing lecture and text information. Additional information about these assessments will be provided at orientation.

- **‘Learning in Medical School’ sessions**: Although these sessions are available at any time and to any student, they are most helpful during the first few weeks of the semester for non-science majors or anyone who's been out of school for awhile. The purpose of these sessions is to help you examine your study methods for current course material. The focus of these informal sessions – which are often held during lunch breaks to accommodate busy schedules – is often on identifying and condensing relevant information, type of learning (application vs. rote memory) and on strategies for retaining and applying information. To schedule one of these sessions, call 686-7349 or 686-5720.
- **Peer tutoring**: This program is designed for students who may need more in bridging the gap between pre-professional and COM courses and may need help throughout the semester beyond the ‘Learning Skills’ sessions with exam grades below a C. Since it is staffed by students who have completed a course but still have their own coursework, this program is small – usually 2-3 tutors each in courses which historically have been difficult for students. There is no charge to students for peer tutoring. However due to the limited number of tutors, a referral from the Course Director is needed.

Regular Educational Development office hours are from 8:00 am to 4:30 pm, but appointments may be scheduled at other times to accommodate student schedules.

**ACADEMIC ASSISTANCE AND ADVISEMENT**

The Executive Associate Dean for Academic Affairs, the Associate Dean for Undergraduate Medical Education, and the Assistant Dean for Undergraduate Medical Clinical Education welcome students seeking academic assistance, advice regarding program selection, placement within residency programs, or any other special information. They may refer students to other academic or personal services available on campus.

**OFFICE OF ACADEMIC SERVICES**

1. **Administrative Offices (ext. 686-5575)**

   The Office of Academic Services (OAS) is located in Education II, Rooms 8/141 and 8/145 and is responsible for the logistic support of curriculum delivery for the various Colleges at UAMS. Such functions include:

   1. Scheduling of all meetings/classes held within the ED II, COPH, I. Dodd Wilson Education, Biomedical Research Centers, Winthrop P. Rockefeller Cancer Institute, Jackson Stephens Spine and Neurosciences Institute and Reynolds Institute on Aging buildings.
   2. Assignment of student lockers within the ED II Building.
   3. Support of the teaching laboratories through personnel, supplies and equipment.
   4. Rental of microscopes
   5. Management of teaching computer labs

**EDUCATION BUILDINGS (EDII, COPH AND IDW)**

Most freshman and sophomore classes are held in the education buildings called ED II, College of Public Health (COPH) and I. Dodd Wilson Education (IDW).
The I. Dodd Wilson Education Building (IDW) is located on the west side of Hooper Drive immediately across from the COPH. A bridge joins the COPH to the west side of Hooper Drive.

The floors (stories, levels) in ED II and COPH are numbered in a slightly unusual manner. The numbering system is designed to make various levels in ED II and COPH have the same numbers as the floors in the Shorey Building. Since the individual floors in the buildings do not have exactly the same height, two floor numbers (4 and 7) had to be omitted in ED II and COPH.

ED II has two levels (containing the Lecture Center) below ground. The lowest is labeled "B" and the next level (corresponding to the lowest level in Shorey) is labeled "G".

The ground level entry into ED II on the south (library entrance) is labeled "1". The next two floors, going up, are "2" and "3" (both are occupied by the library). There is no 4th floor in ED II or COPH so that the floor above "3" is the 5th floor and it is occupied by the College of Nursing in both buildings and the Library Learning Resource Center (LRC) in ED II. (The Library is accessible only through the main entrance on the 1st floor or through the LRC entrance on the 5th floor of ED II). The next floor, still going up, is "6" and, in both buildings is occupied by the College of Pharmacy. There is no 7th floor. The 8th and 9th floors of ED II are occupied by the teaching laboratories, student lounges, classrooms, and the administrative offices of the Office of Academic Services (Rooms 8/141 and 8/145) and the Office of Academic Computing (Rooms 8/147 and 8/102). There is no 9th floor in the COPH. The sit-down "damp" labs are on the 8th floor (laboratories 8A - 8D), while the "wet" labs are on the 9th floor (laboratories 9A - 9D). The "damp" labs, 8A, B, C and D, as well as room 8/105 have been equipped to serve as computer labs for scheduled computer-based classes and exams. These computer classrooms are supported by Academic Services. They are equipped with security provisions including card-swipe door access devices, door alarms and monitored security cameras. The 8th floor of COPH contains the UAMS Fitness Center, auditorium 8240 and the Center for Clinical Skills Education.

The floors in ED II & COPH are, then (from the bottom up): B, G, 1, 2, 3, 5, 6, 8, and 9 (ED II only).

The ground level entry into IDW on the south (closest to the bridge) is labeled “1”. The second level will have room numbers beginning with “2”.

The room numbering system in ED II, COPH and IDW is as follows:

The first two or three characters of the number indicate the building (E2 in the case of ED II, no letter designations in the case of COPH and IDW in the case of I. Dodd Wilson Education).
The third character indicates the floor.

The final three or four (if alphabetical designators are required) characters designate the individual rooms. For example:

E2/G/131A is one-half of one of the amphitheaters, the main entrance of which is on the floor immediately below ground level.

E2/B/108A&B would mean both halves of one of the seminar/conference rooms on the lowest level of ED II.

G/232 would indicate one of the classrooms on the G level of COPH.

IDW/116 would indicate room 116 on the first floor of IDW.

AUDITORIA AND CONFERENCE ROOMS

Various auditoria and rooms around UAMS are available for student use. Students are permitted to reserve the facilities for student affiliated and/or educationally affiliated nonprofit use by calling the Office of Academic Services at ext. 686-5575. University wide policies for use of the facilities by student organizations are described in the following paragraphs.

“Any recognized student organization may use University facilities for open or closed meetings or performances subject only to local campus scheduling regulations.”

“If an off-campus speaker or performer is to be invited to address an open meeting of a recognized student organization, the faculty advisor must give his approval prior to the time that an invitation is extended and publicity is released. In the event that the group does not currently have an official advisor, the approval of a tenured faculty member is required. The University administration may properly inform an organization concerning its views on any proposed meeting to which an off-campus speaker or performer has been invited but will leave the final decision concerning the meeting to the organization and its faculty advisor.”

“Publicity and communications concerning any meeting shall clearly identify the sponsoring organization and shall carefully avoid any stated or implied University sponsorship. In all open meetings, at which an off-campus speaker will speak, a tenured faculty member shall serve as moderator and a reasonable period shall be reserved for questions from the audience.”

“An invitation to a speaker does not necessarily imply approval or disapproval of the speaker or his views by either the University or the student organization. In case a request for the use of a University facility by a recognized student organization
cannot be granted, it is the responsibility of the University officer to whom the request was made to notify promptly in writing the organization making the request, stating the reasons for denial.”

“Speakers may be invited to the campus to discuss political issues. Recognized student organizations may solicit membership and dues at meetings. However, political party membership may not be solicited, political candidates may not be supported or opposed, money may not be raised for projects not directly connected with a University activity, and private business may not be conducted in University facilities.”

LOCKER ASSIGNMENTS

The Office of Academic Services is charged with the responsibility of all lockers within the Education II Building. Assignment of lockers is as follows:

**Freshman** All Freshman Medical students are assigned lockers as per the class roster received from the College of Medicine office. **Freshman students will retain these lockers until the end of their sophomore year.**

**Sophomore** All Sophomore Medical students must clean their lockers of all articles no later than the last day of the sophomore year. These lockers will then be reassigned.

**Junior** All Junior Medical students must request a locker by signing a locker assignment list in the Office of Academic Services in the ED II Building, room 8/145 or through the online request form: OASlockers@uams.edu. Please provide the following information:

Name; College and Class Year (Jr., Sr.).

These lockers are assigned on a first come, first served basis. Junior Medical students will retain these lockers until the end of their senior year.

**Senior** If you do not already have a locker assigned from the previous year, you may request a locker assignment from the Office of Academic Services (ED II, room 8/145). Unless you notify the Academic Services office at the end of the Spring semester that you wish to continue using the assigned locker, this locker will be reassigned. You must clean out your locker of all articles if you do not wish to retain your locker.

In all cases where lockers are reassigned, the combinations are changed. At the end of a school year, the ED II staff cleans out the lockers. Items are donated to local charitable groups.
SYSTEM FOR DISTRIBUTION OF UAMS LOCKERS AND LAB MATERIALS

During the academic year, teaching materials may be required in courses. Such materials will be checked out to students in the respective laboratories. The following system for distribution of UAMS lockers will be implemented for the 2010-2011, Academic Year:

1. Freshman will be given their locker number and combination in their registration packets. Sophomores will retain the same locker as their Freshman year.

2. Junior medical students requesting a locker will receive their locker number and combinations in their registration packets.

3. Lab material return policy:
   A. All materials are due on the day of the laboratory final exam or other specified date.
   B. A one-week grace period (7 days) following the due date is allowed to return materials without penalty.
   C. After the grace period, students will be notified by e-mail or U.S. mail. Materials returned within two weeks of notification receipt will be subject to a $25 late fee/student.
   D. All materials returned after the two-week partial penalty period are subject to a $50 late fee/student.

LAB COATS AND INSTRUMENTS

Specific types and numbers of lab coats and equipment may be required by the faculty who teach Gross Anatomy and Introduction to Clinical Medicine. Freshmen are advised not to purchase any of this type of equipment until the topic is covered in Orientation. They should bring dissection equipment purchased as an undergraduate and be prepared to purchase additional items from sophomores or from the bookstore.

ADMISSION OPTION TO DEFER

Arkansas Residents:
Any Arkansas resident applicant who is offered a position in the freshman medical class can enter the next class as customary, or can elect to defer the start of medical studies for one year, knowing that a position is guaranteed in the next subsequent class. Notification to the Dean's Office should be given as soon as the student has reached a decision to defer admission. However, notice must be received no later than May 15 in the year for which the applicant has been accepted for admission. Applicants offered positions in the freshman class after May 15 must provide notice of their intent to defer no later than July 15.
Request to extend deferment for an additional year: If an applicant who is approved for a one-year deferment has a compelling reason to request an additional one-year deferment, the applicant must submit a detailed letter to the Office of Admissions by January 31 asking the Admissions Committee to consider his/her request. The Admissions Committee will review the request at its February meeting and will notify the applicant by February 20 if the request to extend the deferment will or will not be approved. A deferment extension will only be granted for compelling reasons. If the Admissions Committee denies the applicant’s request to extend the deferment for an additional year, the applicant will be expected to complete all pre-matriculation requirements and matriculate in the next subsequent class or relinquish his/her position in the class. An applicant may only request to defer up to a maximum of three (3) years pending approval by the Admissions Committee.

Arkansas Rural Medical Practice Student Loan and Scholarship recipients: Alternates interviewed and approved for the Arkansas Rural Medical Practice Student Loan and Scholarship program, who subsequently gain admission to medical school by virtue of being advanced to the top of the alternate list, do not have the option to defer.

**NON-ARKANSAS RESIDENTS:**
Non-Arkansas residents accepted for admission do not have the option to defer.

**THE PATH TO THE M.D. DEGREE**

**FIRST TWO YEARS**

The curriculum for the first two years consists largely of integrated basic science material that is intended to lay a foundation for the understanding of clinical medicine. Completion of the standard core courses in the first two years will satisfy the course requirements for promotion to the clinical years. The College is constantly moving clinical activity into the first two years and one of the criteria for material in the first two years is that it must be clinically relevant.

The exact breakdown of courses and course hours changes each year. General information is available in the "University of Arkansas for Medical Sciences Announcements and Curriculum" for a given year. Exact information on courses and course hours can be obtained immediately prior to that academic period from the Office of the Assistant Dean for Housestaff Affairs and Registrar or from the Executive Associate Dean for Academic Affairs.
THE CLINICAL YEARS

The second two years of Medical School are different from the first in that students are involved day and night with patients and medical staff. Junior clerkships provide the students with clinical involvement in most every major aspect of medicine.

Standard junior clerkships are Medicine (8 weeks), Psychiatry (6 weeks), Obstetrics and Gynecology (6 weeks), Pediatrics (8 weeks), Surgery (8 weeks), Surgical Sub-Specialties (4 weeks), Neurology/Neurosurgery/Ophthalmology (4 weeks), and Family Medicine (4 weeks).

Many of these standard clerkships are primarily in-patient oriented, and students are assigned as members of patient care teams with residents and an attending physician. Emphasis is on bedside teaching and students are expected to assume significant responsibility for their patients.

Another major difference between the first two years of medical school and the clinical years is the way students are evaluated. Evaluations during the first two years are based largely on objective data, although subjective evaluations are turned in when sufficient student/faculty contact allows it. During the clinical years, however, much of your grade will be determined by subjective evaluations. That is, you will be evaluated on how you approach things, how you interact with other members of the health care team and the patients, etc. Each of the clerkships and senior electives will have their own unique rules concerning subjective grading. However, subjective grades are just that - subjective. It is not possible to set forth rigid criteria and, therefore, there will naturally be some variation in subjective grading. Depending on the circumstances, any faculty member or resident on any service may, if they feel it appropriate, turn in a subjective evaluation of your performance. For this reason it is important during the clinical years to concentrate on doing your best on whichever service you are assigned, rather than worrying about exactly who is going to evaluate you.

The last year of Medical School is largely elective. The student, in conjunction with his/her advisor, plans the year. Each department offers a variety of clinical and research electives as compiled in the "Senior Electives Catalog" available in the Office of the Executive Associate Dean for Academic Affairs.

WHEN STUDENTS ARE ON CLINICAL ELECTIVES, THEY MUST WEAR NAME TAGS AT ALL TIMES.

STATEMENT ON PROFESSIONAL RESPONSIBILITY

Physicians are, and always have been, exposed to a certain amount of personal risk while engaged in the practice of medicine. To understand this risk, one needs only to view the experience of the profession with the likes of tuberculosis, poliomyelitis, and influenza.
While scientific advances have tended to lower consciousness of these continuing risks, HIV infections brought up this issue again. Several groups, including the American Medical Association (AMA) and the Association of American Medical Colleges (AAMC) have drafted statements concerning physician responsibility in situations like these. This first paragraph of the "Statement on Professional Responsibility" from the AAMC serves to remind us of the basic principles and the fundamental responsibilities of those who aspire to the practice of medicine:

"Medical students, residents, and faculty have a fundamental responsibility to provide care to all patients assigned to them, regardless of diagnosis. A failure to accept this responsibility violates a basic tenet of the medical profession -- to place the patient's interest and welfare first."

RESIDENCY

The next step down the road is your first year of residency. This year, which used to be called the internship year, is now usually referred to as the PGY1 (postgraduate training year one) year. A given residency program (Internal Medicine, Pediatrics, Surgery, etc.) may have a first year program that rotates through various services, rotates only within its own specialty area, or somewhere in between. After the first year of residency, almost all study is devoted towards work in the given specialty. A residency program typically lasts three to five years. Information about duration, type, and description of residency programs is contained in a publication called the Directory of Graduate Medical Education Programs (commonly called “the Green Book”). Copies are available for inspection in the Dean’s Office. Even more detail is available through a computer database called FREIDA, which is essentially a computerized version of the Green Book. FREIDA is available through the American Medical Association Web site (www.ama-assn.org/ama/pub/category/2997.html). Obviously, the hardest part of this process is deciding what area of medicine you want to go into “when you grow up”. We will begin in your freshman year with a program called “Careers in Medicine”, to present information to you that should help in your decision making.

Many details about picking and getting a residency position will be presented to you in various forms during your medical school career. When you are a junior, you will receive a Residency Selection Handbook that covers these processes in detail. For now, we will simply present a few generalities, but if you have specific questions, you are always welcome to come by the office and discuss them with Dr. Wheeler, Dr. Graham, or Dr. Tariq.

When you are in your junior year, you will begin to sample many of the specialties. It is usually during this time that students begin to narrow down their career selection choices. Around the middle of the junior year, the Office of Academic Affairs begins to present information on exactly how the residency selection process works. This coincides with the scheduling process for the senior year. At the beginning of the senior year, students
sign up for the National Residency Matching program, a type of computerized lottery system in which the vast majority of our students obtain their post graduate training positions.

During the summer and fall of the senior year, students apply to various residency programs, request that the Dean’s office write a Dean’s Letter (also called an MSPE, a sort of a formal letter of introduction), and start requesting letters of recommendation. A few applications are done on paper, but most are done using the Electronic Residency Application Service (ERAS) provided by the Association of American Medical Colleges. Interviews begin in the fall of the senior year. In February of the senior year, students enter their “match list” into the NRMP computer via the internet. This is just a list of the programs to which the student has applied, entered in rank order. The programs do the same with a list of students. These files are matched up so that the students and the programs get their top choices. The results are announced in mid-March of the senior year.

This explanation of residency selection, and the process by which it occurs, is grossly oversimplified. It ignores issues like surgical specialties that match outside the NRMP, the couples match, the Urology match, and other variations. It is hoped, however, that it will serve as a rough guide. As noted above, more detailed information is always available in the Dean’s office.

It is also very important to note that simply graduating from the College of Medicine with an MD degree does not guarantee that a student will be able to obtain a residency position.

**LICENSURE EXAMS**

Each state requires a prescribed performance on an examination in order to qualify as a licensed physician. There is currently a single pathway to licensure called the USMLE (United States Medical Licensing Examination). Our students take the first step of this examination following their second year in medical school, the second step of the examination in the senior year (in two parts), and the final step at the end of the first post-graduate year. Successful completion of this examination sequence (along with any other requirements of the Board) then allows the student to apply to the state for a license to practice medicine.

It is very important to note the difference between graduating from the College of Medicine with an M.D. degree and being able to practice medicine. Licensure to practice is a function controlled by state law and is under the purview of the Arkansas State Medical Board. Successful graduation from the College of Medicine does not in any way guarantee that the Medical Board will grant you a license to practice or that you will be able to obtain a residency training program position.
The Area Health Education Centers (AHEC) Program is an integral component of the overall mission of the University of Arkansas for Medical Sciences. Unlike the other UAMS programs, however, the AHECs are all off-campus, strategically located around the state in Batesville, El Dorado-Magnolia, Fayetteville, Fort Smith, Helena, Jonesboro, Pine Bluff, and Texarkana. Thus, the AHEC Program represents an extension, or outreach, of UAMS into all regions of the state.

Since its inception in 1973, the program has focused principally on the state's primary health care needs, particularly in medically underserved areas. The AHECs seek to retain graduates of the College of Medicine for practice in Arkansas; to educate primary care physicians, particularly family physicians, for the state; and to improve the geographic distribution of these physicians within the state. The AHEC mission is partially achieved through Family Medicine residency programs located at six of the eight sites. The AHECs in Batesville and Helena, the sites without Family Medicine residencies, are dedicated to improving the health of their region’s residents through public education, health education, and continuing education programs.

For medical students who have completed their first or second year, during the summer months the AHEC offers 4-week preceptorships with family medicine physicians in their regions. Rising sophomore students may also elect to complete an additional 4-week service learning project with a family medicine physician giving the student the opportunity to learn in the physician’s practice while giving to the community in some way. While not required and not for credit, although students do receive a stipend, these preceptorships offer an excellent opportunity to students to experience the practice of medicine in a community setting. The faculty of the College encourages you to take advantage of the preceptorship program. First- and second-year students may attend monthly sessions sponsored by the AHEC that provide information and updates to students about issues surrounding rural practice and primary care and training in basic clinical skills. The AHECs also support a family medicine mentorship program for first-year students that pairs a student with a family physician to provide support and an opportunity to learn about community-based family medicine practice. Students have the opportunity to interact with AHEC faculty and private practice community physicians through the medical student organization, the Family Medicine Interest Group (FMIG).

A required 4-week junior year clerkship in Family Medicine may be taken at six of the AHECs. All of the AHECs offer senior year medical school electives, as well as the Primary Care selective and Acting Internship in Family Medicine. Select AHECs also have offerings in Pediatrics and Internal Medicine. Senior medical students may choose one of the 4-week electives, selectives or acting internships. The AHECs provide a medical student with the opportunity to study medicine in a setting that may be similar to where he or she may practice in the future. Students may work in the AHEC family medical center, in affiliated community hospitals, or under the supervision of a practicing physician from the community. The AHEC director selects a physician supervisor for the
student based on the field of medicine that the student wishes to study during the elective course. Experiences provided through AHEC elective courses include: primary medical care in a community away from the main campus; programs which supplement prior training and are best suited to assist the development of career goals; and comprehensive and continuous patient care in a private practice setting. Participating students receive full academic credit from all AHEC rotations.

In addition to the Family Medicine residents in the AHEC programs, UAMS residents in other specialties may rotate from the Little Rock campus to the AHECs. Within each AHEC, there is a weekly schedule of teaching conferences, with regular participation by faculty from the Little Rock campus. Two-way interactive video is frequently utilized for student orientation, lectures, class and officer meetings, and resident conferences. For more information about the AHEC Programs call 501-686-5260 or visit the AHEC website (http://ruralhealth.uams.edu/AHEC-Programs or http://ruralhealth.uams.edu/forstudents).

**DIAGNOSTIC KITS, ETC.**

Students need diagnostic equipment for their Introduction to Clinical Medicine course and, of course, for their junior and senior courses and clerkships. This equipment should include a stethoscope, oto-opthalmoscope, penlight, percussion hammer, and tuning fork. A presentation on the type of equipment needed will be presented during orientation.

**LESS FORMAL ACADEMICS**

Regardless of how much you study, your medical textbooks can tell you only so much. There are ways of obtaining knowledge other than cramming your brains full of anatomy texts. Put your books down once and awhile. Open your eyes to what is going on around you. The UAMS Campus is a storehouse of valuable information; the place is bursting with skilled scientists, many of whom are willing to assist the medical student when they can. It only makes sense then, to take advantage of the facilities. Below we have listed just a few of the opportunities of which students can take advantage:

**Conferences:** The Clinical Departments have numerous conferences open to medical students. Many students in the basic science years find that by attending some of the major conferences, especially "Grand Rounds" in their areas of interest, it helps them keep what they are learning in perspective (don't let the term "Grand Rounds" put you off - they are just big lectures). These schedules, along with the topics and locations, are posted on the UAMS Web site (http://calendar.uams.edu/day.php).
Most of these conferences occur at the same time each week (for example, Internal Medicine Grand Rounds is always on Thursday at noon in EdII G141), so once you find out when your favorites are going to occur, you won't need the web site unless you want to look up the title to see if it is of interest to you that week. All medical students are welcome to attend these "Grand Rounds" and any other conferences you see posted on this web page. You don't have to dress up to go to these conferences, and it isn't essential to wear your white coat, but your attire should be "business appropriate" (no shorts, tank tops, etc.) You should wear your UAMS nametag.

**Autopsies:** Medical students are welcome to observe clinical pathology procedures including autopsies, processing of surgery specimens, etc., at the pathology lab on the fourth floor of Shorey building and in the far north portion of the Hospital basement (morgue). Autopsies are not amenable to precise scheduling; however, they are typically performed in the morning. Students should go first to the pathology office or call the pathology morgue at ext. 686-6414 to find out if an autopsy is scheduled and for clearance to attend.

**Emergency Room:** Freshman and sophomore students are welcome to observe in the Emergency Room in the evenings and on weekends. Since space is limited, you should contact the Emergency Room office in advance at ext. 686-5515 and sign-up for an available time. Elective clerkships are available for seniors.

**Private Doctors:** Preceptorship electives may be taken formally or the student can contact area doctors for observation or assistant opportunities. It is important to note, however, that following the sophomore year; preceptorships may not be taken until after the National Boards. It is also important to note that unless you are on an official UAMS rotation, you are not covered by medical student malpractice insurance, although coverage can sometimes be obtained through the office of the Executive Associate Dean for Academic Affairs.

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**THE HONORS PROGRAM**

The Faculty of the College of Medicine has created an Honors Program for academically superior medical students who desire to do original research in an area of the health sciences. The Honors Program consists of a research project requiring the equivalent of six months’ research, preparation of a manuscript describing the results in a style acceptable for submission to a peer reviewed journal, and a poster presentation of the results (usually at Student Research Day). The time required may be spent discontinuously and may include time expended in the analysis of data and in manuscript preparation. Students who satisfactorily complete the requirements will be designated as Honors Graduates on their College of Medicine transcripts, and their diplomas will include the phrase **“With Honors in Research”.** Entrance into the program is open to all
students (except seniors) who are in the upper one-half of their class. Students in the freshman year who have already participated in research in the College of Medicine during the summer prior to matriculation, and who otherwise have satisfied the academic requirements for entry may request credit for their prior research work. Qualified students who have identified an area of special interest are encouraged to seek a faculty sponsor to assist them in defining an area of study and completing a proposal. Acceptance of the proposal by the Research Council admits the student to the Honors Program. Each student will be expected to remain in the upper one-half of the class at the end of the junior year to fulfill requirements.

Support consists of a $3,000 stipend payable in two installments during the first summer of participation in the Honors Research Program. No additional stipend is provided after the first summer. A student cannot receive an Honors stipend and additional funding from a second source for the same project.

The faculty sponsor will supply research space and supplies for the student’s research project.

**Summary of Requirements for completion:**

Student must be in the upper one-half of their class at the end of the junior year;

and

The research project must be presented at Student Research Day, generally no later than the spring semester of the junior year. The Research Council must approve the completed work as fulfilling the requirements of the program;

and

The student must prepare a manuscript describing the results in a style acceptable for submission to a peer reviewed journal and must submit the manuscript to the Research Council by the end of the first semester of his/her senior year.

**The Project**

There are no restrictions on the type of project that may be undertaken. The only requirement is that each project be original research. In those cases where a student participates in an ongoing research project, he/she must assume responsibility for carrying out the portion to which he/she is assigned. The project can be pursued during the summer months and 12 weeks of senior elective time (first semester only), as well as during any time released by prior exemption of the student from formal course work. Work during the first summer will be supported by a stipend.
The Proposal

A proposal describing the project to be conducted must be written by the student with the aid of his/her faculty sponsor and submitted to the Research Council. The proposal should present a clearly defined topic for study that can be completed in six month’s time. Approval is based primarily on the scientific merit of the proposal.

Activities of the Honors Program

Public presentation of the results (usually at Student Research Day) is required. Writing of the manuscript must be completed by the end of the first semester of the senior year. This is necessary because of the time needed to prepare the appropriate diploma after certification to the Dean that the student has completed the requirements for graduation with honors.

Outline of the Honors Program Project

The following guidelines should be followed in submitting a proposal. The face sheet (see below) accompanies the proposal. The maximum length indicated for the proposal must not be exceeded.

The proposal should be typewritten double-spaced. Other than the first page, blank paper should be used. It is expected that most proposals will be approximately five pages in length but should not exceed eight pages. The proposal should be submitted to the Office of the Executive Associate Dean for Research, Biomedical Research Center II, Room 159-2, 686-5347. Freshman must apply by April 1st, and Sophomores and Juniors by March 1st.

A. Application Form - The Application Form must be fully completed by student and sponsor and submitted by April 1. (See Appendix G on page 164)

The following items (B – F) are due by June 15.

B. Title
C. Summary (abstract of less than 200 words)
D. Background: A review of pertinent work done by others (not more than three pages).
E. Objective: Statement of the question or hypothesis to be answered.
F. Specific Aims: A list of what will be done to achieve the objective.
G. Method of procedure: Details of the project including the statistical design and analysis of experiments or other work that will be done, numbers and species of animals, etc., techniques, and a tentative schedule of work.
H. Significance: A short paragraph (less than one-half page) detailing the importance of the project.

I. A complete list of references.

J. Approval by the following University Committees if required (attach copy of approval letter(s):
   - Human Research Advisory Committee
   - Institutional Animal Care and Use Committee
   - Biosafety Committee
   - Radiation Safety Committee

APPLICATION PROCEDURES

Prior to submission of the application students should have a faculty mentor and a project title. If the student does not have a faculty mentor they should contact the Office of the Executive Associate Dean for Research for assistance at 686-5347 or e-mail laneylindac@uams.edu

SERVICES IMPACTING STUDENTS

STUDENT FINANCIAL AID INFORMATION

Information concerning Student Financial Aid is published annually in the College's Catalog (Announcements and Curriculum). Information on financial aid, including eligibility criteria, types of loans and scholarships, awards, etc. are listed in this source. Also, information is available in the office of Student Financial Services:
   http://www.uams.edu/studentfinancialservices/

Tuition may be paid in two installments, the first half at registration and the second half at the mid-point of the academic year (no later than January 15 of each academic year). Students who fail to pay tuition by the established due dates will be placed on an administrative leave and will not receive credit for any classes attended until tuition is paid. The Student Financial Services Office will not send tuition due notices for payment of the second installment of tuition. It is the student’s responsibility to pay the second installment of tuition by January 15 of each academic year.

IMPACT OF A LEAVE OF ABSENCE ON FINANCIAL AID

A leave of absence may have a serious impact on a student’s financial aid. Any student considering requesting a leave of absence should consult with the Student Financial Services Office – Awards Division to determine how their financial aid will be affected. Schools may neither credit a student’s account nor deliver loan proceeds to the student borrower while the student is on an approved leave of absence. A student who is
approved for a leave of absence after receiving financial aid for the semester may be required to return a portion of the aid previously received.

Due to the schedule of classes in the College of Medicine, most leaves of absence will require a return date of at least one year from the date the leave was granted in order for the student to return to the same semester of class in which they left. Federal educational loan regulations state that when a student borrower ceases to be enrolled at least half-time for 180 days (6 months) in any 12-month period, the borrower will be considered as withdrawn from school for loan repayment purposes. At that point, the school is required to calculate the amount of financial aid the student earned and the amount of financial aid that must be returned. These calculations are based on the time the student was enrolled. The percentage of the semester the student completed is the percentage of aid the student has earned. The percentage of the semester the student did not complete is considered the percentage of unearned aid and must be returned to the lender. However, once a student completes 60% of the semester, the student has earned 100% of the aid they received for that semester.

Student borrowers are given a six month grace period on most types of federal loans starting at the date enrollment ceases. During this time, lenders will treat the borrower’s loans as if the borrower were still enrolled in school full-time. Once a grace period is used on a specific loan, it will not be given again. At the end of this six month grace period, the student will be required to enter repayment on their federal educational loans until they return to school; however, deferment or forbearance options are available if the student makes a request and it is approved by their lender.

**IMPACT OF A WITHDRAWL, DISMISSAL AND LEAVE OF ABSENCE REGARDING TUITION PAID**

The following institutional and federal policies will apply for those students who withdraw, are dismissed or granted a leave of absence (that is expected to last 180 days or more) after paying for the semester’s tuition.

1. **College of Medicine Tuition Refund Policy**
   When a student ceases enrollment from the College of Medicine, tuition will be refunded on a prorated basis according to the official date of separation (whether withdrawal, dismissal, or leave of absence) until the student has completed 60% of the semester. The percentage of the semester the student did not complete will be the percentage of tuition refunded. Once the student has completed 60% of the semester, no amount of tuition will be refunded.

   This refund policy applies to tuition charges only; it does not apply to fees. No amount of fees will be refunded after the day of registration.
2. **Federal Policy for Returning Federal Student Financial Aid**

A Federal Title IV Return of Funds calculation will be processed if a student received federal student aid before withdrawing, being dismissed, or being granted a leave of absence.

Federal regulations mandate that the percentage of the semester the student did not complete will be the percentage of federal aid the student did not earn. If the student received more federal student aid than they earned, the school must return the unearned funds to the student’s lender. However, once the student has completed 60% of the semester, the student has earned 100% of their aid and no federal return of funds is required.

The amount of the student’s aid that the school is required to return to the student’s lender is determined by multiplying the amount of the student’s tuition and fees by the percentage of the semester the student did not complete. The amount of the return will be allocated to the following federal programs in the following order:

1. Unsubsidized Stafford Loan
2. Subsidized Stafford Loan
3. Perkins Loan
4. Graduate Plus Loan
5. Any other type of loan

The student will be responsible for repaying UAMS the amount of federal aid that the Student Financial Services Office returned to his/her lender. Once the federal return is processed, the student will be required to pay any remaining balance due the school within 30 days.

Students should contact the UAMS Student Financial Services Office or check with their loan servicer(s) regarding various repayment terms/options to repay their student loans.
TUITION AND FEES FOR STUDENTS WITH IRREGULAR COURSE SCHEDULES

Students who must take an irregular schedule of course work will be required to pay tuition and fees as follows:

1. Repeat of a course(s) at UAMS is at the consent of the Promotions Committee: full tuition will be prorated, based on the number of hours to be taken. Full fees will be assessed if repetition of the course(s) will force the student to graduate with the next class. In addition, if tuition has increased, the increase would have to be paid.

2. Completion of a course(s) in which an incomplete (I) grade was assigned the preceding year: no tuition. Full fees will be assessed if repetition of the course(s) will force the student to graduate with the next class. In addition, if tuition has increased, the increase would have to be paid on any repeat course.

3. Return from Leave of Absence: Full fees will be assessed, and the student will be charged only the increase in tuition. However, if the Leave of Absence was granted early enough in the semester that a portion of tuition was refunded (see IMPACT OF LEAVE OF ABSENCE ON TUITION PAID), the balance of tuition UAMS retained will be applied to the semester the student returns, and the student will be charged the remainder of tuition.

4. When a departmental faculty exempts a student from a course, the student will pay prorated tuition for the courses in which he/she is enrolled. Full annual fees will be charged.

SPECIAL HONORS AND AWARDS

Each year, selected students are recognized for their scholastic achievement, professional potential, and personal attributes. Individual departments give some of these awards, the College as a whole gives some, and some are restricted to certain groups of students (only women, for example). The awards noted in this section of the handbook are the awards that are given annually by the College of Medicine to graduating seniors, and for which all students are eligible:

Faculty Key - Awarded to the graduating senior who, in the opinion of the full-time faculty, is the single most outstanding student for the full four-year period of study. Criteria include scholarship, inquiry, initiative, leadership, ethical standards, and other personal qualifications.

Senior Buchanan Key - Awarded to a top student in the senior year as determined by vote of the class, using a roster of candidates with superior academic achievement.
Winston K. Shorey Award - Awarded to the graduating senior who, in the view of classmates, most closely reflects the qualities of an ideal physician in such characteristics as compassion, warmth and kindness.

H. Elvin Shuffield, M.D. Medical Leadership Award - Awarded to a senior student for outstanding leadership.

The Leonard Tow Humanism in Medicine Award – Presented by the Arnold P. Gold Foundation for the purpose of recognizing humanism and compassion in the delivery of medical care. The recipient is elected by his/her peers. Criteria include empathy, sensitivity, ethical standards, and concern for the welfare of the community.

College of Medicine Alumni Association Community Service Award - Awarded to a graduating senior who, in the opinion of classmates, best fulfills the ideals of humanitarian public service as demonstrated by superior awareness of and achievement in civic and community programs.

Roberts Key - Awarded to the graduating senior with the highest scholastic grade point average for the full four years of medical school.

White Coat Award - Mindful that medical education is a privilege, the members of the Honor Council wish to publicly acknowledge classmates who consistently embody the ideals set forth in our medical student oath. A complete description of this award can be found in Appendix N on page 185.

**STUDENT HEALTH SERVICES**

The Arkansas Board of Trustees Policy 1260.1 requires all students enrolled in the Colleges of the University of Arkansas for Medical Sciences to be covered by hospitalization/surgical/medical insurance.

**Student and Employee Health Services (SEHS)**

SEHS is located on the ground level of the Family Medical Center (FMC) at 6th and Jack Stephens Drive, across from the Jones Eye Institute Building. SEHS has a separate entrance at the back of the FMC adjacent to the parking lot.

SEHS provides the following services at no cost to the student:
- Establishment and maintenance of an immunization record
- Annual Tuberculosis screening
- Annual Influenza vaccine
- Care of needle sticks and blood/body fluid exposures
- Infectious disease exposure management
- Completion of vaccine series initiated at pre-enrollment.
The main clinic is open from 8:00 AM to 4:30 PM, Monday through Friday. You may contact the clinic by calling (501) 686-6565.

A satellite clinic is located on the ground floor of the Central Building room G 605, across from HR, off the corridor leading to the parking deck (Parking 2). This clinic is open 7:00 AM to 4:00 PM, Monday through Friday and that phone number is 686-8810. Both locations are closed on holidays. An appointment is not necessary at either clinic for TB screening or vaccines.

**Student Health Clinic**

The Student Health Clinic, a part of SEHS, provides basic medical needs to all UAMS students. Students are required to have health insurance; however, their health insurance will not be billed for any services provided in the Student Health Clinic. Students may be referred to the FMC clinic (which is housed on the 1st floor of the Family Medical Center) for additional diagnostic testing and/or to establish a primary care provider. Deductibles and co-pays will be waived for these visits as well. No appointment is necessary for students seeking routine medical care in the Student Health Clinic. See website for details on covered services.

Please note that even though the SEHS (ground level) and FMC (1st floor) are housed within the Department of Family and Preventive Medicine building, they are not the same clinic. FMC does perform pre-enrollment student exams. To schedule an appointment with the FMC you may call 686-6560.

**Family Medical Center (FMC)**

The FMC is located on the UAMS campus on the corner of 6th and Jack Stephens Drive. The FMC offers medical care to students and their families who choose one of the Family Practice Physicians as their Primary Care Physician (PCP). The FMC offers a full range of Primary Care including women’s health, newborn, pediatric, and adult care.

Appointments may be made by calling (501) 686-6560. When calling, **please identify yourself as a UAMS student to receive preference in scheduling.**

Call (501) 686-6560 and ask to speak with a manager if you have questions regarding service or billing.
STUDENT COUNSELING

See the section below on UAMS Student Wellness Service, page 86.

POLICY ON STUDENT HEALTH INSURANCE

A policy approved by the Board of Trustees (Policy 1260.1) requires that all full time students enrolled in Colleges of the University of Arkansas for Medical Sciences shall be covered by hospitalization-surgical-medical insurance coverage. The Campus will arrange for a policy to be available for purchase, or the student may obtain his/her own health insurance coverage. Each student will be required to purchase the campus sponsored policy or prove that they are already covered by appropriate health insurance. If it is discovered, at any time, that a medical student is not covered by health insurance, as required, they will be pulled from class or their rotation and considered for dismissal from the College of Medicine.

At the time of this writing, it is the policy of the College of Medicine Faculty Group Practice (called the Medical College Physician’s Group, or MCPG) that if a medical student (including the spouse and children of a medical student) is seen by a UAMS or ACH physician for a reason that is medically necessary, and if the student has health insurance coverage as required, the student should not pay any co-pay at the clinic, and any physicians charges will be written off after insurance pays what it will. However, hospital charges (the bill would come from University Hospital, sometimes called “Patient Accounts”) incurred by medical students and their families are NOT written off after insurance. Discounts and payment plans for hospital charges can sometimes be arranged if the student contacts the hospital very soon after the charge is generated (don’t wait for insurance to respond to the charge before applying for the discount). Also, as noted at other places in this handbook, any charges (physician and hospital) incurred by a medical student because of a needle stick or mucosal splash injury while on duty as a medical student will be paid for by the College of Medicine IF the student has the required health insurance. Please be aware that this policy is outside the control of the Academic Affairs office, and could be changed at any time, as can any provisions in this Handbook.

UAMS STUDENT HEALTH INSURANCE PLAN

The Student Health Insurance Plan sponsored by the University of Arkansas for Medical Sciences is the responsibility of the office of the Vice-Chancellor for Academic Affairs at UAMS. He/she puts the contract out for bid when appropriate and consults with the Associated Student Government when choosing the carrier. Because of the changing nature of the insurance from year to year, no details of the plan are presented here. Student health insurance requirements benefit information, and enrollment instructions can be found on the Student Activities and Housing website: www.uams.edu/studentlife.
All questions concerning student health insurance should be directed to the Office of Student Activities at (501) 686-5850.

POLICY ON STUDENT DISABILITY INSURANCE

The College of Medicine has arranged for all medical students to be covered by disability insurance. The fee is nominal and is included in student fees. Our accreditation agency mandates that we make disability insurance available for all students. In order to get a reasonable price, the insurance company requires that all students be covered. Therefore, you cannot “opt out” of this coverage, even if you have other disability insurance coverage. Details of the coverage are available in the Office of Academic Affairs. This policy is “portable” into residency, and may be continued without submitting medical evidence of your insurability. Upon completion of your residency, you will have an option to purchase an individual, non-cancelable disability policy from the company, without submitting medical evidence of insurability. When you leave College of Medicine full-time student status (in other words, when you go on a leave of absence, graduate, etc.), it is your responsibility to contact the insurance agency handling the insurance to determine if you are still eligible, and if so, to arrange for continuation of the coverage. The Office of Academic Affairs will be happy to provide you with the name and telephone number of the agent.

UAMS, COLLEGE OF MEDICINE, STUDENT WELLNESS PROGRAM

Clinical Team: Angela Shy, MD, Barbara Baldwin, LCSW, & Janice Summerhill, LPC
Program Manager/Assistant: Ms. Meshelle Helms & Ms. Sherry Bullard

Introduction: The UAMS Student Wellness Program (student mental health program) is a preventative service created to provide short term, confidential assistance for students who are actively enrolled at UAMS (Little Rock Campus). The purpose of this service is to provide the necessary tools for students to achieve their fullest potential.

Students seek help for depression, anxiety, grief, relationship conflicts, academic difficulties and numerous other issues interfering with their maximal functioning. Seeking care through the service is absolutely confidential. The only exceptions to the strict code of confidentiality (as required by law) include homicidality (planning to kill someone else, or being so severely impaired that patients in your care are in jeopardy), suicidality (planning to kill self) and child abuse. Record keeping is also strictly confidential within the student wellness program and does not go into the campus wide electronic UAMS medical record.

For short term treatment, there is no financial cost to students seeking care. The service is made possible through the support of the Dean of the College of Medicine, the Chancellor of UAMS, and a portion of the student health fee. A utilization report is generated annually to justify continued funding for the service. This report may contain
the number of students utilizing the service and describe the types of problems students seek help for. Specific identifying information about students is not released.

Due to the high volume of utilization, students are urged to keep an appointment once it is made or cancel as far as possible in advance to allow other students timely access to services.

**Referrals for Long Term Difficulties:** Students suffering from major mental illnesses and/or severe substance addiction requiring inpatient hospitalization and/or intensive long term care will be referred to a community mental health center, the UAMS PRI Walker Clinic, or to appropriate resources in the community. The cost for this level of care is the responsibility of the student (it is important to maintain health insurance coverage without lapse through medical school).

**Hours:** The Student Wellness Program can be reached by telephone at *(501) 686-8408* between **7:45 AM to 4:30 PM Monday through Friday.** Students are seen by appointment only. To schedule a confidential appointment, telephone Ms. Meshelle Helms or Ms. Sherry Bullard at *(501) 686-8408.* Help us know the type of problem you are having and how urgently you need help. This will help us triage urgent situations immediately and/or schedule you with the most skilled clinician for your particular problem. For an **after hour emergency, telephone the UAMS operator at (501) 686-7000** identify yourself as a medical student with an emergent problem and request the operator to page the UAMS Department of Psychiatry resident on call.

**Location:**
The Student Wellness Program is located at 201 Jack Stephen’s Drive, in a two story grey building. The office suite is on the street level. Ring the doorbell for entry. Parking is available immediately out front in reserved parking spaces #15, 17, 19 and 20 for the duration of the appointment (only).
SAC - STUDENT ADVOCACY COUNCIL

Purpose of the UAMS College of Medicine Student Advocacy Counsel (SAC):
It is the purpose of SAC to help maximize the potential of all future physicians,
intervening early to head off potentially life threatening/career destroying substance abuse
or other serious difficulties.

Goals of the SAC Program:
• To provide an accessible safety net to all medical students who experience a wide
array of difficulties
• To have trained SAC representatives who understand and recognize the warning signs
and symptoms signaling that a peer is in trouble
• To have SAC leaders who reach out to peers having difficulties, and offer support and
confidential early intervention. At times, they may facilitate peer entry into an
appropriate level of care
• To develop preventative educational programs to meet the evolving needs of the
student body
• To maintain a supportive presence to peers throughout medical school during times of high stress
• To serve as a liaison/link to the UAMS Student Wellness Program

Safety Net Function of the SAC:
The most important role of the Student SAC leaders is to be available to peers when they feel the need to reach out for support and help. These leaders are trained to serve as a resource to answer questions when peers are concerned about classmates. SAC leaders intervene with peers when concerns arise regarding warning signs of difficulties (under the close supervision of faculty leaders). When students are having significant difficulties beyond the scope of peer assistance, students are encouraged to seek the confidential services of the UAMS Student Wellness Program. SAC student leaders reassure students in this process and at times assist with making a rapid referral. In emergencies, the SAC student leaders facilitate getting the student to the Clinic or to the Emergency room to obtain immediate care when necessary.

Code of Ethics:
The SAC abides by a strict code of ethics. Early recognition and confidential intervention are practiced in an effort to maximize the potential of all future physicians. Students seeking help are cared for with compassion, understanding and respect for their privacy and confidentiality.

FOOD SERVICE

CAFETERIA

The cafeteria is located on the ground floor of the Central Building. The Cafeteria offers a wide variety of menu options including, entrees, vegetables, salads, sandwiches, burgers, pizza, and more. The hours are:

**Breakfast**
Monday - Friday
6:30 a.m. to 10:00 a.m.

**Lunch**
Monday- Friday
10:30 a.m. to 3:00 p.m.

**Dinner**
Monday- Friday
4:30 p.m. to 7:30 p.m.
DOC JAVA

The Doc Java Coffee Shop offers gourmet coffee and espresso based drinks. It also offers express meals, made to order sandwiches, assorted muffins, bagels, yogurt, cookies and a variety of cold beverages. It is open Monday-Friday from 7:00 a.m. until 4:00 p.m. It is located on the first floor of the Ward Tower.

THE LOBBY CAFÉ

The Lobby Café is open 24/7 providing breakfast, lunch, and dinner. This facility is located in the main lobby of the University Hospital. It provides fabulous sandwiches, salads, gourmet coffee and pizza.

CODE MOO

Code Moo is a self-serve yogurt shop located next to the Cafeteria. It is open Monday-Friday from 11:00 a.m. until 4:30 p.m.

STUDENT COMPUTER AND EMAIL RESOURCES

A. Network access - Access to the UAMS network, including access to the Internet via the UAMS network, on-line reference and information resources provided through the UAMS Library, and other UAMS computing resources is, generally speaking, restricted to persons having a UAMS network account, i.e. a UAMS network domain logon id and password. All active UAMS students receive UAMS network accounts. Information about network accounts is provided to new students during the registration or orientation sessions.

Everyone granted access to the UAMS network must review and sign the UAMS Confidentiality Agreement (http://www.uams.edu/AdminGuide/PDFs/3.1.15.pdf). This requirement will also be dealt with during registration or orientation.

Your UAMS network account is to be used only by you. Do not share your UAMS network logon identification and password. This is one of the provisions of the Confidentiality Agreement.

B. Network access passwords

- Passwords for UAMS network accounts must contain a minimum of eight characters and include three of the following four types of characters - lower case, upper case, numeric, and special characters (!@.,#$% etc.).
- Network passwords may include spaces.
- Passwords should not be overtly based on personal information such as family members' or pets' names, birth dates, or similar information.
- Your UAMS network account password expires every 120 days. As the expiration of your password approaches you will receive warnings when you log onto the UAMS network. You can change your password at that time. You can
also change your password at any time by clicking on "Reset Your UAMS Domain Password" at http://webmail.uams.edu/.

- Sharing your logon information or using someone else's logon information to gain access to the UAMS network or information systems violates UAMS policy and the UAMS Confidentiality Agreement.
- Change your password if you suspect any problems. If you suspect someone else has used your account notify the IT Security Department at 501-686-6207.

C. Acceptable Use Guidelines for student use of UAMS network and computer resources

The UAMS network, computer labs, and other computing resources support the teaching, research, clinical care, and service missions of UAMS. Faculty, staff, and students are encouraged to use these resources as tools for work, learning, communication, and research. It must be recognized, however, that these resources serve a large number of users for a variety of purposes. The following guidelines describe acceptable and unacceptable uses of these resources. They are intended to foster use of these resources which is consistent with their intended purposes and which is responsible, appropriate, efficient, and in accord with legal and ethical standards.

Appropriate and acceptable uses include:
- Use for UAMS course assignments or any project assigned by a UAMS faculty member.
- Use to facilitate UAMS research projects or other UAMS work-related projects.
- Communication with faculty, staff, and students at UAMS to share information.
- Communication with faculty, staff, and students at other universities for the purpose of exchanging educational or general information.
- Use of Internet access for personal information research and personal communication with others at UAMS and elsewhere is acceptable if such use is not excessive, does not interfere with use of resources for education or research, and does not violate any other acceptable use provisions or UAMS policies.

Unacceptable uses include but are not limited to:
- Use of Internet access or other resources for mass transfers of personal files or other materials or for any other personal purpose which consumes a large amount of network bandwidth or other network or computing resources is unacceptable.
- Unauthorized use of these resources by non-UAMS personnel.
- Use for any purpose that violates U.S. or state laws, including copyright laws. (See the Guidelines for UAMS Faculty, Staff, and Students Using Copyrighted Materials at http://www.library.uams.edu/policy/copyguide.aspx.)
- Use which violates any other applicable UAMS policy.
- Downloading information from Internet sites to be used in committing a crime or for any purpose which can result in harm to others.
• Use for any commercial enterprise or for outside employment.
• Creation or propagation of computer viruses.
• Unauthorized entry into other computers or information systems.
• Use in a manner that interferes with or disrupts other users, services, or equipment.

Use of these resources for course assignments, education, research, and UAMS work-related projects has precedence over all other uses. Additional rules governing their use may apply in particular facilities.

D. As a member of the UAMS community you are also obligated to observe all UAMS policies relating to the use of network and computer resources. Consult the UAMS Administrative Guide at http://www.uams.edu/AdminGuide/index.html to review UAMS policies. See in particular...

• Confidentiality Policy: http://www.uams.edu/AdminGuide/PDFs/3_1_15_Confidentiality_Policy.pdf
• Email Access and Usage: http://www.uams.edu/AdminGuide/PDFs/7_1_12_Email_and_Access_Usage.pdf
• Wireless Networking http://www.uams.edu/AdminGuide/PDFs/7.1.13.pdf
• Access to Internet http://www.uams.edu/AdminGuide/PDFs/7.2.11.pdf

E. Revocation of access - Violation of the Acceptable Use Guidelines or other UAMS policies may result in loss of your privileges to use the UAMS network and computing resources and/or disciplinary action by your department or college.

F. Internet access - Access to the Internet is provided through the UAMS network. Other than in particular cases, such as the public access PC’s in the UAMS Library or guest access through the UAMS wireless network, you must log onto the UAMS network using your own UAMS network account in order to gain access to the Internet. Moreover, further restrictions may be enforced in clinical work areas or other areas in which more stringent security requirements apply.

G. Email - All students receive UAMS email accounts. You will receive information about your email account during the registration or orientation process. Email services for UAMS students, faculty, and staff are provided through Microsoft Exchange and Outlook. You can access your email account via the web at http://webmail.uams.edu/. This requires that you have an active UAMS network logon id and password

H. Emergency Notification Listserv - UAMS provides an email messaging process (a listserv) which is used to send emergency alerts to UAMS students in circumstances on campus which pose an imminent and serious threat. It is expected that such alerts will very rarely, if ever, occur. You can designate (subscribe) email addresses and any other email-enabled messaging services to which you subscribe (text messaging, paging, etc.) to be included in the listserv. You will receive more information about the listserv at registration or orientation. To subscribe visit https://online-apps.uams.edu/info/Home.aspx. Click on the To Do tab.

I. Clinical Information Systems - Access to clinical information systems is only available after appropriate training. Logon ids and passwords for access to clinical
information systems will be made available to students when training has been completed.

J. Technical Support - For resolution of issues related to your UAMS network or email accounts, access to clinical information systems, and computer security provisions contact the UAMS Technical Support Center at 686-8555 or techsupportcenter@uams.edu. Technical Support Center staff will answer your questions or direct your call or request to the appropriate support personnel.

K. Computer labs - Computers for student use are available in several areas in the UAMS Library. Two of these areas are available for student use 24 hours every day. After-hours entry into these facilities is controlled by card-swipe controlled entrances. A current UAMS student id badge is required to enter. These facilities also incorporate door alarms and security cameras for additional security.

The computers in the Library provide access to the Library resources, the Internet, and Microsoft Office applications. A wide variety of computer-based educational resources and other software are also available through the Library Learning Resource Center.

L. Computer classrooms - UAMS educational facilities include several computer classrooms used for scheduled computer-based classes and exams. These computer classrooms are equipped with security provisions including card-swipe door access devices, door alarms, and monitored security cameras. Use of these facilities is scheduled through the Office of Academic Services and is ordinarily restricted to UAMS curricular activities or other UAMS-sponsored activities.

M. Use of Social Networking Sites – The use of Social Networking Sites, such as Facebook, MySpace, etc., can be important for communication. However, posting certain information, especially in health care settings, can be illegal and/or personally detrimental. Therefore, UAMS has instituted a policy on the Use of Social Networking sites. This information can be found in Appendix P on page 188.

**Clinical Computing Passwords**

As a junior and senior student, you will be assigned an ID and password to access the clinical computing systems in the various hospitals in which you will work. You will also be asked to sign a confidentiality agreement. It is imperative that you use your own ID and password when using these systems and it is likewise essential that you not give your ID and/or password to anyone else. As far as the law is concerned, signing onto the clinical database under someone else’s ID/password is the same thing as signing someone else’s name in a patient’s record. It is a very serious breach of ethics, not to mention the laws governing clinical records. If you sign into these systems with someone else’s password/ID, it is grounds for dismissal from the College of Medicine.
**NOTARY**

Notary services are available to students in the Office of Academic Affairs at no charge.

**CADUCEUS YEARBOOK**

The Caduceus is the UAMS yearbook and is published annually. A portion of each student's tuition is directed toward publication and entitles the student to a yearbook.

**UAMS BOOKSTORE**

The UAMS Bookstore serves in providing books, supplies, medical equipment, and any other items necessary to meet the needs of all UAMS students, faculty and staff. Our goal is to provide excellent customer service with the highest urgency, efficiency, and professionalism.

In addition to textbooks and medical equipment (authorized Welch Allyn and Littman dealer), the Bookstore offers a large selection of apparel, accessories, and gift items with the UAMS logo as well as a large selection of scrubs. Students and employees receive a 10% discount on all UAMS merchandise and scrubs. We also carry a wide range of convenience items such as candy, cold beverages, over-the-counter medications, stamps, and the Arkansas Democrat-Gazette.

Unable to find what you are looking for? No need to worry. The friendly Bookstore staff is happy to accommodate special order requests for any title that is not in stock (including general interest books).

Need an energy boost before class? Stop by the Choco-Latte Café, and try one of our fabulous, flavored coffee drinks or indulge in our homemade fudge. Hot chocolate and smoothies are also available. There is truly something for everyone, so please come see us. The Choco-Latte Café is open Monday – Friday, from 8:00 a.m.- 4:00 p.m.

The Bookstore has six convenient, thirty-minute parking spaces reserved for our customers.

The UAMS Bookstore is located at 200 Hooper Drive across from the College of Public Health and is open Monday – Thursday, from 8:00 a.m. - 5:00 p.m., Friday, 8:00 a.m. - 4:00 p.m. The Bookstore accepts cash, personal checks with proper I.D., Visa,
MasterCard, American Express, and Discover as well as our “UAMS Bookstore Advance Purchase Program” for students awarded financial aid.

Telephone: (501) 686-6160, (877) 266-5550  
Fax: (501) 686-7209  
Email: uamsbookstore@uams.edu  
Website: www.uamsbookstore.com  
Facebook: www.facebook.com/UAMSBookstore

**UAMS POLICE DEPARTMENT**

The UAMS Police Department and UAMS Department of Parking Operations welcome you to the University of Arkansas for Medical Sciences Campus.

This information has been designed to provide you with guidelines for parking and driving on Campus. These guidelines have been established to best utilize our facilities and maintain orderly parking and safe traffic flow. We appreciate your cooperation in observance of these guidelines and wish you the best in your UAMS endeavor.

By authority of the Board of Trustees, and in accordance with Act 328 of 1967, the rules and regulations for the operation and parking of motor vehicles on the Campus of UAMS, Little Rock, are binding on all members of the faculty, staff, student body, and others utilizing the lands owned or controlled by the University of Arkansas.

For the purpose of these regulations, the term motor vehicle includes public or private automobiles, trucks and buses, motorcycles, motor scooters, motor bicycles and any other motor powered vehicle operating on land.

**UAMS Police Department**

The UAMS Police Department is focused on providing quality service and protection to all on or about the UAMS Campus. Officers of the UAMS Police Department are Certified Police Officers of the State of Arkansas under Act 328 of 1967 and possess full investigative and arrest powers.

The UAMS Police Department, in compliance with the “Student Right-to-Know and Campus Security Act of 1991”, compiles and distributes an annual security report. These reports are available and can be obtained by request from the UAMS Police Department. For current crime statistics please refer to the UAMS Police Department website: www.uams.edu/police to view the annual security report.
The UAMS Police Department provides 24 hour, 7 days a week service and can be contacted at 686-7777

Emergency Phones
Assistance from the police department can also be summoned by pushing any call button on the numerous Emergency phones located throughout the campus. The Emergency phones are indicated with Solid blue or blue flashing lights and provide a direct line to the police dispatcher. If you see anything suspicious or need assistance from an officer, please use one of these phones.

Driving Regulations
All drivers on and about the UAMS campus area shall observe all the rules of the State of Arkansas pertaining to motor vehicle registration and operation including the special rules and regulations as stated below:

1. Yield the right of way to all pedestrians in campus crosswalks.
2. Maintain a safe speed at all times and at no time drive faster than posted limits.
3. Obey regulatory signs and barricades established by the UAMS Parking and Police Departments.
4. No vehicle will be operated on the campus without required safety equipment prescribed by the vehicle code of the State of Arkansas.
5. All drivers will observe and obey orders of the UAMS Police Officers while such officers are engaged in the performance of their respective duties. This includes rendering and producing identification and permits as requested.
6. All campus vehicle accidents will be reported to the UAMS Police Department, 686-7777.

UAMS Department of Parking Operations
Whether you are a student, staff member, faculty, patient or visitor, we are glad you are here. UAMS Parking Operations is committed to providing safe parking and quality assistance. Parking is a limited resource and to ensure that this resource can efficiently serve as many people as possible, we ask that you observe all parking regulations on campus.

- The Department of Parking Operations can be contacted at 526-PARK (7275).
- We are located on the 2nd level of the Distribution Center - Room 204
- Parking Office hours are 7:30 a.m. to 4:00 p.m. Monday through Friday.
- Additional information can be found on the Parking Operations Web Site www.uams.edu/parking

Enforcement of Parking Regulations
The parking regulations apply on the streets, roads, alleys, sidewalks, walkways, parking spaces, parking areas, and parking lots on or about the UAMS Campus. Penalties for violations include ticketing and fines, booting, towing, and revocation of parking privileges. Drivers are advised to not rely on hearsay or other unofficial sources when parking a vehicle on campus. If any doubt in legally parking a vehicle, contact the UAMS Department of Parking Operations.
The UAMS Department of Parking Operations, along with the assistance of the UAMS Police Department, is directly responsible for the enforcement of the regulations. Any person who refuses to accept a notification of violation issued by a duly constituted authority shall be in violation of these regulations. For questions regarding citations, please call UAMS Parking Operations at 526-PARK (7275).

**Appeals**
An independent Parking and Traffic Committee has been delegated to serve as an advisory and appeals group supplementing the enforcement responsibilities of UAMS Parking Operations. Any person charged with a parking violation shall have the right to appeal to the UAMS Parking and Traffic Committee within seven (7) calendar days of the date of violation. An official Appeal form can be found on the UAMS Parking Operations web site. The administrative charge for the parking violation will be postponed until the complaint has been heard and acted upon. The Appeal form must be completed in its entirety and received within the Department of Parking Operations within 7 days or it will not be reviewed.

**Parking Regulations**
1. Vehicles are considered parked when left unattended for any period of time.
2. Lack of space is not a valid excuse for a parking violation.
3. Parking lots are signed and parking in designated lots is allowed only to those vehicles with a current parking decal or an authorized parking permit for that particular lot.
4. Vehicles will be parked within designated parking boundaries and in no case overlapping into or onto a roadway or crosswalk. Parking in any manner to impede the normal flow of vehicular or pedestrian traffic is not allowed.
5. The University does not assume the responsibility for the care and protection of any vehicle or its contents while said vehicle is operated or parked on the campus area.
6. The fact that a vehicle may not receive a violation notice while the vehicle is parked or operated in violation of any regulation does not mean or imply that the regulation is no longer in effect.

**No Parking Zones**
1. All posted areas.
2. All areas marked with red or yellow paint -- solid or intermittent.
3. All driveways; these will not be posted.
4. Any part of a traveled roadway.
5. Within 15 feet of any fire hydrant.
6. Within 20 feet of any major intersection.
7. Double parking is prohibited on any street and/or lot. Authorized service vehicles of the University are exempt from this rule provided such parking does not constitute a hazard to traffic.
8. All commercial load zones. (These zones will be utilized by commercial vehicles.)
9. All sidewalks and/or crosswalks.
10. All cultivated areas, grass or other growth.

**ADMINISTRATIVE CHARGES**

The responsibility for charges incurred shall rest with the registrant, and in the event of the lack of registration, with the owner and/or operator of the vehicle in all cases (NOTE: These charges are subject to change without notification):

1. For failure to accomplish vehicular registration, and obtain proper permit within authorized period - $10.00
2. Permits must be permanently affixed (per violation) - $10.00
3. For moving violations (per violation) - $10.00
4. For parking in a handicapped space (marked) (per violation) - $25.00
5. For all other violations (per violation) - $10.00
6. Failure to remit or appear within seven (7) calendar days from date of notification of violation will subject the person receiving the notification of violation to an additional $1.00 administrative charge.
7. Habitual violators of these regulations will be referred to a Dean or other administrative official for action deemed appropriate.
8. An accumulation of ten (10) tickets without proper payment will result in the vehicle being booted. An additional $60 boot removal fee will be assessed in addition to unpaid fines.
9. Failing to adhere to parking regulations could result in the vehicle being towed. Towing fees will be the responsibility of the registrant.
10. Visitors to the Campus are subject to these regulations. Persons operating a motor vehicle on this Campus in violation of institution rules and regulations or State Law may be summoned to appear before the Municipal Court of Pulaski County.

**Student Parking**

1. There are currently 2 student dedicated parking lots located at West 7th Street across from the VA Hospital and on Cottage Drive. Currently, there is no charge for this parking, but a decal is required.
2. Students can purchase an evening decal that allows them to park on A-level of Parking 2 deck after 4:30 p.m. during the week, and anytime on weekends for $21.00 per year. NOTE: Students may not enter A-level prior to 4:30 p.m. and must be off A-level of the deck by 7:30 a.m.
3. Free parking is available on Lot 1 (located on Markham Street with access off Hooper Drive) between 5:00 p.m. and 10:30 pm Monday through Thursday and on weekends (Friday at 5:00 pm through Sunday 10:30 pm.)

4. Free parking is also available any time at the War Memorial Stadium and additional overflow lots. Please see the Parking Operations website for maps of lots.

5. Students are subject to all Parking regulations, enforcement and administrative charges. Failure to comply with regulations or to settle outstanding traffic penalties may result in the withholding of academic records.

Patient and Visitor Parking
Students, faculty, and staff are not permitted to park in patient/visitor designated areas. If you are a UAMS student or employee and have a clinic appointment as a patient or are visiting a friend or relative receiving inpatient care, call 526-PARK (7275) or email parking@uams.edu and provide the information referenced below prior to parking in a patient/visitor area. Following this process will prevent you from receiving a ticket.

1. Time of your appointment.
2. Which patient area you will be parking.
3. Make and model of the car.
4. License plate number.

There are three main parking areas for patients and visitors at UAMS.

1. Parking 1 is located under the hospital.
2. Parking 2 is located on the north side of the UAMS complex.
3. Parking 3 is located on the east side of campus across the street from the Outpatient Clinics, Cancer Institute and Stephens Spine Institute.
4. Free parking is available at War Memorial stadium and area overflow lots.

All decks require customers to pay as they leave for the time they were parked. The prices are $1.25 the first hour, 75 cents each additional hour, with the maximum of all day parking at $7.00. Patients and their visitors may purchase parking authorization by the week at a discount of 7 days for $10.00. The weekly passes may be purchased in the Department of Parking Operations or at any of the cashier booths on the decks.

Patient Pick Up
Patient pick-up will be allowed in front of the hospital, but persons picking up patients must first park in a visitor's area to do the paperwork, to get the patient released, etc. No parking will be permitted at the front of the hospital longer than to load the patient.

Handicapped Parking
Vehicles parked in Handicapped parking spaces must display a current disability license plate or placard issued by the State Department of Finance and Administration. A UAMS parking permit will also be required to park in handicapped spaces located in controlled lots.
To apply for a parking permit, the information referenced below is required and should be submitted to the UAMS Parking Office.

1. A completed UAMS Parking Application.
3. Official hanging handicap placard or card.
4. Driver’s license.
5. License plate number on car.

Motorcycles and Bicycles
Bicycles must obey all rules of the road. Bicycles parked in access ways, on sidewalks, in areas that may obstruct access, or any other improper locations will be subject to a citation and/or impounded.

Bicycles racks are available at Residence Hall, Ed II and Bio Med II Buildings. Motorcycles and Mopeds can be parked on D-level of Parking 2, and east of the Family Medical Center. An appropriate decal must be displayed. If you have questions regarding bicycle or motorcycle parking, please contact the Parking Office.

Free Shuttle Service
Free Shuttle services are provided from/to the War Memorial Stadium and Overflow lots to and from various locations around campus. Please see the Parking Operations website for current Shuttle Times and Routes.

EXTRACURRICULAR ACTIVITIES

Regardless of how much you study, your medical textbooks can tell you only so much. There are ways of obtaining knowledge other than reading. Put your books down once in a while. The organizations and activities listed in these sections offer opportunities to students for some rewarding experiences that can bring color and excitement to the daily rigors of professional school studies.

RURAL MEDICINE STUDENT LEADERSHIP ASSOCIATION

The Rural Medicine Student Leadership Association (RMSLA) promotes the recruitment and retention of medical students with an interest in rural practice and works to build strong relationships with rural communities and practitioners. Subcommittees follow legislative activities related to rural health and also sponsor activities for pre-med majors in Arkansas colleges and universities. RMSLA meets quarterly and hosts speakers from Arkansas rural communities and medical practices. For more information, contact Ms. Trishia Edstrom, RMSLA Sponsor, 501-686-6557.
**SAC – STUDENT ADVOCACY COUNCIL**

The Student Advocacy Council sponsors activities to reduce stress among medical students and seeks ways to make the lives of medical students easier. SAC members also watch for signs of student impairment due to drugs, alcohol, and depression, and intervene, when necessary, through confidential peer counseling and professional referrals. See the more complete description on page 88.

**ORGANIZATION OF STUDENT REPRESENTATIVES**

Organization of Student Representatives (OSR) of the Association of American Medical Colleges (AAMC). OSR representatives are elected by their class. The purpose of the OSR is to facilitate the interchange of ideas and concerns about medical education among students on both regional and national levels.

**STUDENT NATIONAL MEDICAL ASSOCIATION**

The Edith Irby Jones Chapter of the Student National Medical Association is primarily concerned with the needs and interests of students from groups underrepresented in medicine. The SNMA is dedicated to the development of a diverse student body through its support of recruitment and retention activities that increase the number of minority students entering and completing medical school and through its promotion and enhancement of medical education and services that are culturally sensitive to the needs of a diverse population. Membership is voluntary and open to everyone regardless of race or ethnicity.

**OTHER ORGANIZATIONS**

There are many other organizations available for students who are interested. These organizations are not officially part of the College, nor are they sanctioned by the College or supported financially by the College of Medicine, but students are free to join them and organize within them if they wish: the American Medical Association Medical Student Section, the Arkansas Medical Society Medical Student Section, the American Medical Student Association, the Christian Medical Association, etc. Current medical student members will usually make these organizations known to incoming freshmen students.
STUDENT GOVERNANCE

The Associated Student Government (ASG) encompasses all students in good standing in the five colleges of the University of Arkansas for Medical Sciences, with the Director of Student Activities as an advisor. The ASG includes two medical students elected as representatives from each of the four classes.

The Student Council of the College of Medicine consists of two elected representatives from each of the four classes. The objectives of the Council include encouragement of social interchange among students and the promotion of good will between students, faculty, and administration (see the Constitution and by-laws of the College of Medicine Student Council in Appendix I on page 164).

INTRAMURAL SPORTS

Depending on interest, intramural sports are frequently organized on campus. For information, contact Student Activities at 686-5850.

PASTORAL CARE SERVICES

Chaplain George Hankins Hull is the Director of the Department of Pastoral Care and Clinical Pastoral Education Training Programs at the University Hospital of Arkansas. This department offers pastoral care and counseling services primarily directed toward patients, their families, and staff persons. Students may call on the department for short term personal counseling and guidance needs.

The department also offers training in pastoral care and counseling in the form of a twelve month residency program and a part-time internship. These Programs of Clinical Pastoral Education begin the first week of September each year.

A non-denominational chapel is open every day from 6:00 a.m. to 8:30 p.m. for quiet prayer and meditation, and the hospital chaplains offer a morning worship opportunity each Sunday from 10:00 to 10:30 a.m. The chapel is located on the first floor of the Ward Tower in University Hospital. The Pastoral Care office, also on the first floor (Room 1E50) near the chapel, is open from 8:00 a.m. to 4:30 p.m. Monday through Friday. You may reach the Pastoral Care office at extension 686-5410.
ADDITIONAL RULES AND POLICIES

ACADEMIC POLICIES

GUIDELINES FOR EXAMINATIONS

I. On the day of the examination:

   A. Faculty member will:

   1. Set a time and place at which all students are to arrive for the examination. Note: all examination dates and times are listed on the master freshmen and sophomore calendars prior to when the exam is administered. Although unlikely, any changes in the posted date or time will be announced far in advance of the administration of the examination.

   2. Set a time at which the examination is to be completed.

   3. Announce this time at the beginning of the exam. The time for completion will not be changed after the examination has begun.

   4. Warn students at reasonable intervals, i.e., approximately 30 and 10 minutes before the end of the exam.

   5. Approximately thirty minutes before the end of the exam students will be reminded either verbally, or via the computer-based exam, that all responses must be recorded on their answer sheet (if applicable) or saved on the computer in order to receive credit. **Emphasize that no additional time will be allowed for transferring answers from the test book or scratch paper to an answer sheet or the computer-based exam.** Indicate that they may leave when finished and tell them where to leave their tests, answer sheets or scratch paper.

   6. If it is a National Board exam, at the end of the exam, say: "Stop. Put down your pencil, close your test booklet (or turn it over), and stay seated until all papers are collected."

   Please note that same fundamental process applies to computer-based testing (CBT) which is used almost exclusively in the freshman and sophomore years.

   B. It is the students' responsibility to be present at the beginning of the examination to hear any instructions given and to follow the above
guidelines. If a student arrives after the exam has started and after any specific instructions have been given, it is up to the discretion of the exam proctor/steward to provide those instructions to the late-arriving student(s).

1. Students are not allowed to have anything at their desks except their pencils (unless otherwise instructed by the course or clerkship director). Students must avoid bringing books, book bags, etc., to the testing room. However, if these items are brought, they must be put to the side of the room before the student goes to his/her seat.

2. No food or drink can be brought into the computer testing lab.

3. No test materials will be collected until all students have ceased writing.

4. In the event a student continues to work on the examination after time has been called, he or she will be designated by the faculty member(s) in charge that he or she is "in violation." If a student is found to be in violation, a penalty will be assessed equal to 25% of the total points possible on the examination. The 25% reduction in points will apply before the examination has been graded. For example, on a test where 100 points are possible, a student "in violation" will have 25 points subtracted "up-front" and will then have any questions missed subtracted from that value.

5. Further defiance of warnings to stop working will be considered to be a violation of the Honor Code and appropriate measures as outlined in the Honor Code will be taken in addition to the 25% penalty.

6. Currently, all freshman and sophomore courses use CBT rather than a paper and pencil format. The Honor Code still applies and students are responsible for knowing the rules and regulations governing CBT in such courses.

II. Procedures to be followed in cases of possible cheating:

A. Cheating in medical school is a very serious offense and will not be tolerated by other students or by faculty of the College of Medicine.

B. Tests will be proctored at the discretion of the course or clerkship director. Proctoring of an examination does not relieve students of the responsibilities placed on them by the Honor Code.
C. An individual (student, faculty, or departmental observer) who believes they have observed cheating will report this to an Honor Council representative.

D. The Honor Council representatives will handle the situation using procedures described in the Honor Constitution.

III. The Honor Constitution addresses only policies and procedures regarding cheating observed during examinations. Honor Council Representatives should only be involved in issues related to the Honor Constitution. Other problems are strictly the concern of the individual student, the class president, the faculty, and the Dean's office.

IV. Responsibility for implementation of the College policy for missed examinations lies with the Associate Dean for Undergraduate Medical Education for freshman and sophomore courses. The clerkship directors are responsible for missed examination in their respective clerkship. The Executive Associate Dean for Academic Affairs may be contacted if questions arise related to this policy, but students (e.g. class president, Honor Council representatives, etc.) should not be involved.

V. In the freshman and sophomore years it is the current College policy that an examinee must be present at the scheduled start time for the examination. Students who are late must first contact the Associate Dean for Undergraduate Medical Education (or other designated individual) before they receive permission to sit for the examination. A valid reason must be given, and accepted by the Associate Dean for Undergraduate Medical Education (or other designated individual), before the student is admitted to the examination any time after the test has started. However, once the examination has started no extra time will be permitted for the late student to complete the examination. **Note that in accord with NBME policy for NBME examinations, after the examination has been in session for more than 30 minutes, students will not be allowed to sit for that examination.**

Students should note that if they are repeatedly late to tests, they may receive a negative Scholastic Non-Cognitive Evaluation report, and that the report will be sent to the Dean's office.

VI. Queries regarding examination questions will not be addressed during basic science examinations. Approved by the General Faculty, June 1987; Amended by the COM Curriculum Committee, April, 2010.
BONUS POINTS
No bonus points shall be awarded to any freshman or sophomore student for filling out evaluations, nor can bonus points be awarded as an extra credit assignment. Furthermore, no bonus points shall be awarded on freshman or sophomore examinations or quizzes. If an examination or quiz question has three or more valid/alternative answers, that question is considered flawed and will be deleted from the examination or quiz. If the examination or quiz question has two valid/alternative answers, then credit shall be given to any student who has either of the two correct answers. If an examination or quiz question has no correct answer, then that question is considered flawed and will be deleted from the examination or quiz.

Remediation for Students in Academic Jeopardy
Students in academic jeopardy are strongly encouraged to meet with the course director of any course in which they are in jeopardy to discuss ways to improve their performance. In addition, tutoring and study skills assistance is available through the Office of Educational Development.

Approved by the College of Medicine Executive Committee, September 5, 2003; Amended by the College of Medicine, Dean’s Executive Committee, November 13, 2007; Amended by the College of Medicine Curriculum Committee, April 27, 2009 and again in October 2011.

LEARNING AGREEMENTS
In cases where a freshman or sophomore student is in academic jeopardy in two or more courses, the Associate Dean for Undergraduate Medical Education may arrange a meeting with the student for the purposes of constructing and signing a learning agreement. The Associate Dean for Undergraduate Medical Education will discuss with the student various methods to potentially increase performance on examinations. The student will provide insight into their learning difficulties and can provide suggestions on improving performance. Once a course of action to help solve the learning problems are agreed upon by both parties, they will sign the learning agreement. A copy will be provided to the student and the appropriate course directors. It is the responsibility of the student to execute the action plan in the learning agreement. Course directors will provide the Associate Dean for Undergraduate Medical Education with student performance data after each examination so that the Associate Dean for Undergraduate Medical Education can follow-up and suggest alternative solutions if necessary.

Approved by the College of Medicine, Curriculum Committee, October 29, 2007. Approved by the College of Medicine, Dean’s Executive Committee, November 13, 2007
POLICY FOR MISSED EXAMINATIONS FOR FRESHMEN AND SOPHOMORES

Students are required to be present, and on time, for all quizzes and examinations.

There are occasions when a student is unable to sit for a quiz or exam due to extreme circumstances. Under such conditions, excused absences from quizzes and exams will be granted. Conditions which warrant excused absences are: 1) illness to the extent that a student is unable to sit for an quiz or exam; 2) accident or injury severe enough to prevent the student from sitting for the quiz or exam; 3) death, sudden serious illness, accident, or other catastrophic event involving an immediate family member, e.g., parents, sibling, spouse, children. Excuses, other than those listed, are not acceptable for missing a quiz or exam, except for very unusual and extenuating circumstances.

If a student is seriously ill, or has a valid emergency situation, the Associate Dean for Undergraduate Medical Education, in accordance with College policy, must be notified IN ADVANCE of the scheduled examination time, if possible, or in the case of an emergency, as soon after the event as possible, to determine whether or not the student is allowed to take a make-up examination. If necessary, the Associate Dean for Undergraduate Medical Education can obtain advice for the validity of an excuse from the course directors and/or the Executive Associate Dean for Academic Affairs.

If it should be necessary to miss an examination or quiz, freshman and sophomore medical students must notify the Associate Dean for Undergraduate Medical Education (or other designated individual) PRIOR TO THE EXAMINATION (if possible) by email and/or phone. Junior and senior medical students must notify the clerkship director or rotation coordinator. If, due to the nature of the problem, it is not possible to notify the aforementioned individuals prior to an examination, such notification must take place as soon as possible following the examination. An acceptable reason for not notifying the Course Director prior to an exam would involve circumstances which make it IMPOSSIBLE for communication to occur, not merely an inconvenience.

If the excuse is for an illness or injury to the student, the student must provide a physician’s statement providing a detailed explanation of why the student should be excused from the quiz or exam. The physician’s statement must be given to the Associate Dean for Undergraduate Medical Education as soon as possible after the excused quiz or examination.

If a student has an unexcused absence from a quiz or examination, or if the student does not appropriately notify the Course Director, a zero grade for that examination or quiz will be given.

Please note that clerkships may have different policies regarding excused absence from exams or quizzes as to whether or not a make-up will be given.
Special promotion rules apply to freshmen, one of which is a waiver of the rule that prescribes dismissal if a student fails two or more courses. However, students in the first year do not have the prerogative of deciding to discontinue studying and taking exams in a course because of previous failing test scores. Even if a failing grade is anticipated, the student must make every effort to master the material at a level that will convince the Promotions Committee that a second chance to be successful in freshman courses is warranted. (Approved by the Executive Committee, August 8, 1994)

**PROTOCOL FOR MISSED EXAMS AND QUIZZES IN THE FRESHMAN AND SOPHOMORE YEARS**

- Students may only re-take missed examinations or quizzes if they have an excused absence, as outlined by the College of Medicine Missed Examination Policy.

- Students who miss an examination or quiz must contact, via email and/or phone, the Associate Dean for Undergraduate Medical Education, to arrange for a make-up.

- For freshmen and sophomores, make-up examinations will occur at several scheduled times throughout each semester. Many times, these make-up exams will occur on a weekend. All make-up quizzes will be administered by the respective course director in consultation with the student.

- Students who have an unexcused absence from an in-house examination or quiz or who miss a make-up examination or quiz will receive a grade of zero for that examination/quiz.

- Students who have an unexcused absence from an in-house examination (excluding quizzes) will receive a negative scholastic non-cognitive evaluation. Two such negative evaluations will require the student to come before the Student Promotions Committee to determine their continuing status with the College of Medicine.

- Questions on make-up examinations and quizzes cannot be appealed.

**Guidelines and Protocol for the Freshman and Sophomore Appeals Committee**

1. The Class is responsible for establishing an Appeals Committee and determining its structure (i.e., size of the committee, selection of members, length of service of each member, etc.).

2. The Appeals Committee has sole authority to establish guidelines for what constitutes a “reasonable and appropriate appeal.” The Committee will receive and review any appeal and can either reject or accept it. If accepted, the appeal will be formally submitted to the respective Course Director for consideration.
3. The Appeals Committee will decide the format of the Class’s appeals petition (i.e., Excel doc, Word doc, etc.).

4. The Appeals Committee must submit a formal appeals petition to the Course Director within 72-hours after an examination is made available for review (see diagram).

5. Disagreements with the appeals process can only be addressed to the Appeals Committee - NOT THE COURSE DIRECTORS OR THE ASSOCIATE DEAN FOR UNDERGRADUATE MEDICAL EDUCATION

6. Students will not be allowed to review the exam for appeals during class/lecture times.

Petition Timeline

<table>
<thead>
<tr>
<th>Exam Closes</th>
<th>Petition Process</th>
</tr>
</thead>
<tbody>
<tr>
<td>PHASE 1:</td>
<td>Exam Results to course Directors for review/ validation Begins ~ 24 hrs after exam closes</td>
</tr>
<tr>
<td>PHASE 2:</td>
<td>72-hours allotted for students to prepare/submit appeals to the Course Director via the Appeals Committee.</td>
</tr>
<tr>
<td>PHASE 3:</td>
<td>Appeals received by Course Director are reviewed</td>
</tr>
<tr>
<td>Phase 4:</td>
<td>Course Director Responds to Appeals</td>
</tr>
</tbody>
</table>

ABSENCE FROM CLASSES

Class attendance records are not routinely maintained by the College of Medicine. However, each course and clerkship is allowed by College policy to have its own rules with regard to absenteeism. **It is up to you to know and follow the rules for each educational experience.** For example, in some basic science courses, various lectures, examinations, and laboratories have required attendance. If you have an unexcused absence from one of these events, you may receive a negative scholastic non-cognitive evaluation. The consequences of this action are covered in another section of this handbook, and can be quite severe. Rotations in the clinical years are frequently even stricter. Please see the Absentee Policy for the Junior Year, which follows this section. When it is impossible for you to attend class be sure you understand the rules for that particular course or clerkship, and check with the director.
POLICY ON RECORDED M1 AND M2 LECTURES OR LABS

In the 2009 – 2010 academic year, the College of Medicine permitted the recording of M1 and M2 lecture and/or lab sessions that could be downloaded as MP3 or MP4 files. These recordings are not to be shared outside the confines of the M1 or M2 classmates. It is expressly forbidden to place these recordings on the internet or other media for use outside of the respective UAMS classmates. During Freshmen orientation, all entering M1 students are required to sign and adhere to the regulations described within the “Student Attestation on Lecture and Lab Recordings Placed on UAMS COM Web Sites Student Agreement Form” (see below)

Student Attestation on Lecture and Lab Recordings Placed on UAMS COM Web Sites Student Agreement Form

I am aware that lecture and lab presentations are the intellectual property of the faculty. I am also aware that the faculty who teach in the M1 and M2 years must give permission for their lecture/lab to be recorded and placed on UAMS COM approved sites. I acknowledge that some lectures/labs will not be recorded.

If the lecture/lab is recorded, I agree that I will not copy, display, reproduce, post or distribute these materials or links to these materials to those outside of my M1 or M2 class in any format either written or electronic.

I acknowledge that failure to abide by this policy may constitute a copyright infringement and may subject me to legal consequences. Furthermore, I understand that failure to abide by this policy may result in my dismissal from the UAMS COM.

Approved at the BSCD Meeting, October 19, 2010

Approved by the COM Curriculum Committee, October 26, 2010

ABSENTEE POLICY FOR THE JUNIOR YEAR

The UAMS College of Medicine recognizes that students are not, and cannot be, legally responsible for patient care. Regardless, the College, as an academic requirement, demands that its students develop a sense of responsibility toward patient care. That means that the College considers students to be responsible for the care of assigned patients just as if the students were physicians. Students must be present to carry out these duties. It is for that reason that this Absentee Policy for the Junior Year has been developed:
It is the prerogative of each clerkship director in the junior year to determine which activities within the clerkship are essential for the fundamental understanding of the clerkship material and are, therefore, mandatory. The following rules apply to those activities that the student has been informed are mandatory.

A. Any absence from a mandatory activity must be approved IN ADVANCE (before the planned absence) by the clerkship director. Any absence that is not approved in advance will be considered an unexcused absence. Pre-approval may be granted with certain stipulations that other requirements be fulfilled. In that case, failure to complete these additional requirements will result in the absence being considered unexcused.

B. In the case of a personal or family illness/emergency causing the student to be absent from a mandatory activity, the service needs to be notified along with the clerkship director at the earliest time possible. Appropriate documentation (physician’s note, written explanation of the emergency, etc.) needs to be provided to the clerkship director. If the service and clerkship director are not notified in a timely manner, or if the clerkship director (at his/her sole discretion) deems the documentation unacceptable, this absence will also be considered an unexcused absence.

C. The number of unexcused absences is determined by the number of days on which mandatory activities are missed. Absence for two separate days without permission would count as two unexcused absences. Absence for one two-day period would also count as two unexcused absences. One unexcused absence will result in an inadequate scholastic non-cognitive evaluation being turned into the Dean’s Office. A second unexcused absence will result in the lowering of the clerkship grade by a letter. A third unexcused absence will result in failure of the clerkship. In the case of a pass/fail course, one unexcused absence will result in a warning letter. The second unexcused absence will result in an inadequate scholastic non-cognitive grade being turned into the Dean’s office, and a third unexcused absence will result in failure of the clerkship. (Approved by Clerkship Directors and the Executive Committee May, 2002)

WARNING STUDENTS OF MARGINAL PERFORMANCE

Faculty must inform a student of marginal or failing performance prior to assigning a failing grade for a course or clerkship if possible. As soon as a student is identified as performing unsatisfactorily in a course or clerkship, a letter stating this fact must be sent to the student. This warning must be in writing with a copy to the office of Academic Affairs. This policy is necessary in all courses, even four-week electives. An appropriate time is approximately halfway through the course or as soon as information indicating failure in a portion of the course (e.g. a single exam) becomes available. Occasionally, a student cannot be warned in advance because the reason for failure occurs at the end of the course. In this situation, a written explanation of the circumstances of the failure and the lack of a warning letter must be provided to the Office of Academic Affairs at the time the failing grade is assigned. (Approved, Executive Committee - 1/18/90)
POLICY ON CHANGING GRADES

Once the final grades for a course or clerkship have been sent to the Dean's office, an alteration in a student's grade will not be accepted by the Dean's office unless the Course Director or Chairman certifies in writing that the original grade was given in error (mistake in calculation, student's names mixed-up, etc.). Specifically, the change of a subjective evaluation will not normally be a sufficient reason to change a grade. 
(Approved by the College of Medicine Executive Committee, 12/20/90)

STUDENT WORK HOURS

It is the position of the College of Medicine that students in their third and fourth years of medical school must “experience medicine” through a large number of clinical encounters. Adequate exposure to patients is essential in order to learn both the art and science of medicine. However, it is the opinion of many that excessive work hours can diminish the impact of training by inducing excessive fatigue, and by decreasing the time students have to read, consider, and assimilate the information and situations they encounter. Therefore, the Curriculum Committee of the College of Medicine, working through the Clinical Subcommittee has implemented the following work hour policy for junior and senior students:

1) Duty hours should not exceed 80 hrs/week averaged over 4 weeks.
2) The amount of time a student spends in the hospital should not exceed 30 consecutive hours (and the last six of these hours must not include taking new patients).
3) If the student works 30 hours, they must receive a minimum of 10 hours outside the hospital between shifts.
4) All students must get 4 days (24 hours) off averaged over a 4 week period of time. 
(Reviewed and approved by the Curriculum Committee in 2011)

RURAL PRACTICE CURRICULUM

Purpose

The purpose of the Rural Practice Curriculum, as developed by the Rural Practice Curriculum ad hoc Committee of the College of Medicine, University of Arkansas for Medical Sciences, in consultation with the Dean of the College of Medicine, the Executive Associate Dean for Academic Affairs, and the Associate Dean for Undergraduate Medical Education, is to give our students participating in the Arkansas Rural Practice Student Loan and Scholarship Program a sound exposure to rural medicine in the context of primary care medicine. To that end, the curriculum affords our students multiple exposures to rural medicine in a variety of primary care specialties: notably, Family Medicine, General Internal Medicine, General Pediatrics, Internal
Medicine/Pediatrics, Obstetrics and Gynecology, General Surgery, Emergency Medicine and Geriatrics. The Office of Area Health Education Centers (AHEC) will assist in much of the logistics of student assignment to rural practice sites throughout the State. Additionally, the experiences of our students are monitored by comprehensive evaluations by both students and faculty. Reports of these evaluations are sent from the Office of the Associate Dean for Undergraduate Medical Education to the Curriculum Committee of the College of Medicine for critique and suggestions for improvement in the curriculum. It is anticipated that the Rural Practice Curriculum will change with time as we strive to ever improve the educational experience of our students.

**Curriculum**

1. All students in the Rural Practice Program must join a primary care interest group in Family Practice, Pediatrics, Internal Medicine, General Surgery, Ob/Gyn, Emergency Medicine, Geriatrics and/or the Rural Medicine Student Leadership Association, and are encouraged to actively participate in these organizations.

2. All students in the Rural Practice Program must take at least one preceptorship between their freshman and sophomore year and/or between their sophomore and junior year. This preceptorship should be done in a rural community if possible. The AHEC Office assists with this component of the Rural Practice Curriculum.

3. All students in the Rural Practice Program are encouraged to participate in the Day with a Doctor Program their Freshman Year. The Day with a Doctor Program is sponsored and directed by the Arkansas Caduceus Club.

4. All students in the Rural Practice Program should have an element of Rural Medicine in their Family Medicine Clerkship their Junior year of medical school. This will be the responsibility of the Department of Family and Preventive Medicine.

5. All students in the Rural Practice Program must take one of their Primary Care Selectives or Acting Internships at an AHEC. The College of Medicine will work with the AHEC’s to ensure that at least part of the rotation will be a rural experience.

**ADMINISTRATIVE POLICIES**

**ADDRESS AND RESPONSIBILITY FOR MAIL AND E-MAIL**

It is the responsibility of each Student to make sure the Office of Academic Affairs of the College of Medicine always has his/her most up-to-date home address and telephone number. Students are responsible for all official mailings from the College. Likewise, all students are provided with a UAMS e-mail address and e-mail listservs and/or conferences are set up by the College as a mechanism to send notifications to students. Students are responsible for information sent out to them via their UAMS E-mail address.
or through these listservs and/or conferences. It is your responsibility to check your e-mail account and/or conferences frequently. Campus policy on e-mail use is covered in Appendix K on page 172.

REGISTRATION

All full or part-time medical students are required by University policy to register prior to beginning an academic year. The registration process is a campus-wide function that includes participation by the Treasurer's Office (payment of tuition and fees), UAMS Police (registration of vehicles and distribution of parking stickers), Student Health Service (TB Skin Tests), Photography (Caduceus Yearbook), Student Health Insurance, the administrative staff from the College of Medicine, and others. Due to the involvement of many departments and business representatives, attendance at registration is rather inflexible. If you have any questions concerning the registration requirements listed below, please contact the office of the Executive Associate Dean for Academic Affairs.

FRESHMAN - As stated in the UAMS College of Medicine Bulletin, "Applicants accepted into the freshman class must appear for registration at the place and time prescribed. Failure to appear for registration at the appointed time will result in forfeiture of that individual's place in the class, they will be permanently withdrawn, and their position will be given to the next eligible alternate."

SOPHOMORES, JUNIORS AND SENIORS - All students must attend formal registration as above. If personal circumstances preclude attendance, special requests may be made to register at another time. If you wish to request to register at another time, the request must be made to the Assistant Dean for Housestaff Affairs and Registrar of the College (Ms. Dwana McKay).

A $30 “late” registration fee may be assessed if you register at any time other than the normal registration period (early or late).

WITHDRAWAL

A. A student wishing to withdraw voluntarily from the College of Medicine shall submit a formal request to that effect, in writing, addressed to the Executive Associate Dean for Academic Affairs. Notification of withdrawal will be sent to the directors of the courses in which the student is enrolled with the effective date given. Withdrawal is a permanent separation from the College. Further matriculation in the College would require readmission by the Admissions Committee. A completed UAMS Clearance Form should be submitted at the time of withdrawal.
B. A student withdrawing shall receive one of the following notations on his/her transcript for each course in which he/she is enrolled at the time of withdrawal:

1. "W" if he/she withdraws during the first half of the course.
2. "WP" if he/she withdraws during the second half of the course and is passing at the time of withdrawal.
3. "WF" if he/she withdraws during the second half of the course and is failing at the same time of withdrawal.

C. Any student who officially withdraws from the University of Arkansas for Medical Sciences College of Medicine shall be entitled to a refund of tuition and fees under the following refund policies (or as dictated by any changes in UA policy, or laws governing financial aid):

1. **College of Medicine Tuition Refund Policy**
   When a student ceases enrollment from the College of Medicine, tuition will be refunded on a prorated basis according to the official date of separation (whether withdrawal, dismissal, or leave of absence) until the student has completed 60% of the semester. The percentage of the semester the student did not complete will be the percentage of tuition refunded. Once the student has completed 60% of the semester, no amount of tuition will be refunded.

   This refund policy applies to tuition charges only; it does not apply to fees. No amount of fees will be refunded after the day of registration.

2. **Federal Policy for Returning Federal Student Financial Aid**
   If a student received federal student aid before withdrawing, being dismissed, or being granted a leave of absence, any tuition refund calculated will be returned to the federal aid programs first.

   Federal regulations mandate that the percentage of the semester the student did not complete will be the percentage of available federal aid the student did not earn. If the student received more federal student aid than they earned, the school, the student, or both must return the unearned funds to the student’s lender in a specified order. Once the student has completed 60% of the semester, the student has earned 100% of their aid, and no federal refund is required.

   When a refund is required, the amount of the student’s aid that the school is required to return to the student’s lender is determined by multiplying the amount of the student’s tuition and fees by the percentage of the semester
the student did not complete. The amount of the refund will be allocated to the following federal programs in the following order:

1. Unsubsidized Stafford Loan
2. Subsidized Stafford Loan
3. Perkins Loan
4. Graduate Plus Loan
5. Any other type of loan

The remaining portion of aid that must be returned to the student’s lender will be processed by the UAMS Student Financial Services Office and the student will be responsible for repaying UAMS. Once institutional and federal refunds are processed, the student will be required to pay any remaining balance due the school within 30 days.

Students should contact the UAMS Student Financial Services Office or check with their loan servicer(s) regarding various repayment terms/option(s) to repay their student loans.

VACATIONS

Preclinical students (freshmen and sophomores) - Classes are not scheduled on official UAMS holidays and the Friday after Thanksgiving. In addition, preclinical students receive a fall, spring, and winter break.

Junior Students - All juniors receive winter break and spring break. In addition, they receive Thanksgiving Day and the Friday and weekend after Thanksgiving. Other holidays are at the discretion of the supervisor of the clerkship, or may be delegated to the responsible Resident on the service. The student is expected to assume in many respects, the role of a physician, and in so doing, to recognize the needs of patients for attention and the need of the service for coverage, regardless of weekends and holidays.

Senior Students - All seniors receive winter break. They are also off on NRMP Match day (a Friday, usually around the middle of March). If they do not obtain a position in the NRMP Match, they also receive the four days off before Match day, so called "scramble (SOAP) days", until they have obtained a residency position. Other holidays are at the discretion of the supervisor of the elective or selective, or may be delegated to the responsible Resident on the service. The student is expected to assume in many respects, the role of a physician, and in so doing, to recognize the needs of patients for attention and the need of the service for coverage, regardless of weekends and holidays.
INCLEMENT WEATHER POLICY

Medical students are expected to assume, in many respects, the role of a physician, and in so doing to recognize the needs of patients regardless of weather conditions. Even though freshmen and sophomores do not have clinical responsibilities, they must learn to anticipate poor weather conditions and make necessary arrangements to assure that they can be present for required class participation. Therefore, classes (including preclinical classes) and examinations are rarely canceled. However, the College recognizes the difference between attending a patient and attending a class and realizes that transportation problems result from inclement weather and hazardous road conditions. Therefore, the following policy shall be in effect on those days that inclement weather makes it very difficult to get to UAMS:

1. The UAMS campus, including the College of Medicine, has an inclement weather policy. If this policy is implemented by the Chancellor, local radio and television stations will be notified. Be sure to check with the Academic Affairs Office or the UAMS Human Resources web site at the beginning of “bad weather” season each year for an up-to-date list of radio and television stations.

2. When the inclement weather policy is in effect, all classes and examinations for College of Medicine freshmen and sophomores will be canceled for the remainder of that day.

3. Junior and senior students are not required to report for duty when inclement weather is declared unless the student has direct patient care responsibilities (serving as an Acting Intern on a service, for example). If there is any question as to whether a junior or senior student should report, the student should contact his/her attending physician or supervising resident. Patient care should never be compromised.

4. Classes, examinations, and/or clinical duties that are missed due to weather may be rescheduled at the discretion of the course or clerkship director. These activities may be rescheduled at any time, including nights and weekends.

5. Probably the most important thing about being a physician is the ability to exercise judgment and to accept personal responsibility for your actions. You must exercise judgment with regard to the inclement weather policy. We can't predict every possible situation. If the inclement weather policy hasn't been put into place, and yet you still feel it would be dangerous for you to come to school, you should stay home. **HOWEVER, UNDER THOSE CIRCUMSTANCES, YOU MUST MAKE EVERY EFFORT TO CONTACT THE COURSE/CLERKSHIP DIRECTOR OR HIS/HER REPRESENTATIVE AND DISCUSS YOUR SITUATION.** You will need to work with the course/clerkship director to make up what you miss. If you have direct patient care responsibilities, you must ensure that your patients receive care.
STUDENT INSPECTION OF THEIR PERSONAL RECORDS

STUDENT RIGHTS UNDER THE FAMILY EDUCATIONAL RIGHTS AND
PRIVACY ACT

The Family Educational Rights and Privacy Act (FERPA, 20 U.S.C. § 1232g) and University of Arkansas policy require an annual notice that informs students of their rights regarding education records. A student at UAMS has the following rights with regard to his/her education records:

1. The right to inspect and review the student’s education records, with some exceptions under the Act, within 45 days of the day the University receives a request for access.
   - Students should submit to the appropriate official written requests that identify the record(s) they wish to inspect. The appendix to University-wide Administrative Memorandum 515.1 provides a list of the types and locations of education records, the custodian of those records, and copying fees for each individual campus. The University official will make arrangements for access and notify the student of the time and place where the records may be inspected. If the records are not maintained by the University official to whom the request was submitted, that official shall advise the student of the correct official to whom the request should be addressed.

2. The right to seek amendment of the student's education records that the student believes to be inaccurate, misleading, or otherwise in violation of the student’s privacy rights.
   - Students may ask the University to amend a record that they believe is inaccurate, misleading or otherwise in violation of the student’s privacy rights. Students should submit to the appropriate University official a written request that clearly identifies the part of the record they want changed and specifying why it is inaccurate, misleading, or in violation of the student’s privacy rights. A sample from which may be used in making this request is contained in the appendix to University-wide Administrative Memorandum 515.1.
   - If the University decides not to amend the record as requested by the student, the University will inform the student of the decision and of his or her right to a hearing regarding the request for amendment. Additional information regarding the hearing procedure will be provided to the student when notified of the right to a hearing and is also contained in University-wide Administrative Memorandum 515.1.
3. The right to consent to disclosures of personally identifiable information contained in the student’s education records, except to the extent FERPA authorizes disclosure without consent.

- One exception which permits disclosure without consent is disclosure to school officials with legitimate educational interests. A school official is a person employed by the University in an administrative, supervisory, academic, or research role, or support staff position (including law enforcement unit personnel and health staff); a person or company with whom the University has outsourced institutional services or functions (such as an attorney, auditor, or collection agent); a person serving on the Board of Trustees; or a student serving on an official committee, such as a disciplinary or grievance committee, or assisting another school official in performing his or her tasks.

- A school official has a legitimate educational interest if the official needs to review an education record in order to fulfill his or her professional responsibility.

- The University forwards education records to other agencies or institutions that have requested the records and in which the student seeks or intends to enroll or is already enrolled so long as the disclosure is for purposes related to the student’s enrollment or transfer.

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

   Family Policy Compliance Office  
   US Department of Education  
   400 Maryland Avenue, SW  
   Washington, DC 20202-4605

5. The right to withhold consent of disclosure of directory information. This information will be subject to public disclosure unless the student informs the Registrar in writing by one week following registration that the student does not want any or all of directory information disclosed (use form in Appendix M on page 184 – these forms will be available at registrations).

Even if you choose to withhold the public disclosure of your “Directory Information” using the form on page 184, your picture and name will appear in the Caduceus (the UAMS yearbook), the UAMS global e-mail list, class schedules, match lists, and graduation materials unless you contact the Dean’s office personally and arrange with the Executive Associate Dean or Designee to exclude your information from these areas.
• Directory information includes, but is not limited to, the student's name; address; telephone listing; electronic mail address; photograph; date and place of birth; major field of study; grade level; enrollment status (e.g., undergraduate or graduate, full-time or part-time); dates of attendance; participation in officially recognized activities and sports; weight and height of members of athletic teams; degrees, honors and awards received; and the most recent educational agency or institution attended.

• Directory information also includes a student ID number, user ID, or other unique personal identifier used by the student for purposes of accessing or communicating in electronic systems, but only if the identifier cannot be used to gain access to education records except when used in conjunction with one or more factors that authenticate the user's identity, such as a personal identification number (PIN), password, or other factor known or possessed only by the authorized user.

Directory information does not include a student's social security number.

UAMS College of Medicine Specific Policy

The specific policy for student inspection of their personally identifiable records in the office of the College of Medicine is as follows. Should you have questions concerning this policy, please contact this office.

1. Academic records directly related to, and personally identifiable with, students are maintained in the College of Medicine Student Records Office. These records include transcripts, grade records, records of academic progress and records of achievement.

2. Maintenance of the educational records is a responsibility of the Director of Student Records (Registrar) under the authority of the Dean of the College of Medicine. The Dean, Executive Associate Deans, Associate Deans, Assistant Deans and administrative staff have access to these records for administrative purposes.

3. Students may examine their academic records by requesting an appointment with Ms. Dwana McKay, Assistant Dean for Housestaff Affairs and Registrar. The appointment will be set at a mutually convenient time but usually within two weeks of the date of the request for an appointment.

4. Students may challenge the content of their records by submitting to the Dean of the College a petition requesting a review of the records. Such petition shall designate the part of the records to be challenged with reasons for the challenge.
5. Upon receipt of a request by a student for amendment of the records, the Dean of the College of Medicine, or designee, will review the requested amendment along with supportive information furnished by the student. The student will be notified of the decision as well as subsequent rights of the student should the request for amendment be denied.

6. Copies of a student's medical school transcript will be provided only at the written request of a student and will be provided free of charge. Reproduction of other academic records at the student's request can be reproduced for $0.10/page. (This does not include pre-med transcripts).

7. Disclosure of Directory type information will comply with the policy described above.

**USE OF STUDENT DATA FOR EDUCATIONAL RESEARCH**

Many UAMS faculty members and staff are engaged in on-going efforts to monitor and improve the undergraduate and graduate medical school curriculum. In addition, our accrediting agencies expect the College to assess itself on an on-going basis and participate in the community of scholars, sharing what has been learned. The public dissemination of knowledge is one of the responsibilities of our profession. To this end, such things as test scores, faculty and preceptor ratings, clinical skills and other performance-based assessments, and follow-up surveys and evaluations will be analyzed to address such questions. If the information is released publicly, it is only released in an aggregated form to maintain confidentiality. Individual students and residents are not identified. Personally identifiable information is kept confidential, and the privacy of students and residents is protected to the maximum extent allowed by law, as noted in the preceding sections of this Student Handbook. If you have any questions concerning this policy, please contact the College of Medicine Dean’s Office.

**WITHolding OF GRADES AND TRANSCRIPTS**

University of Arkansas Policy: The Registrar is authorized to withhold grades and transcripts and refuse registration to any student or former student who fails to return athletic, military, library or other University property entrusted to his or her care, or who fails to comply with rules governing the audit of student organization accounts, or who has failed to pay any fees, tuition, room and board charges, fines or other charges assessed against him or her by a University official or by the campus judicial system.

This policy does not apply to students or former students if the University has received from a bankruptcy court a notice and order that a bankruptcy petition has been filed in their behalf or that the debt has been discharged in bankruptcy. In the event that the notice for bankruptcy has been dismissed, the policy applies.
CARDIOPULMONARY RESUSCITATION (CPR)

Medical students are required to take the American Heart Association Basic Life Support for Healthcare Providers course and maintain a current CPR certificate while enrolled. **Only training by the American Heart Association will be accepted.** Proof of this training (a photocopy of the card) must be turned in at Freshman Orientation. If one does not turn in the copy of their CPR card at orientation, they must turn it in to the Associate Dean for Undergraduate Medical Education before the end of the first semester.

American Heart Association CPR certification is normally good for two years. Therefore, most students will have to recertify in CPR during their time in the College of Medicine in order to maintain CPR certification.

No formal classroom contact hours are included in the curriculum for instruction in CPR. Instead, it is the responsibility of each student to maintain CPR certification.

ADVANCED CARDIAC LIFE SUPPORT (ACLS)

Each student is required to be ACLS certified to graduate. A necessary prerequisite for the course is proof of current training in Basic Life Support by the American Heart Association (see above). For the convenience of the students, ACLS is included in the one-week senior “residency preparation course”, required of all seniors. However, some students may wish to become ACLS trained earlier. For example, some students may want to do a visiting senior elective at a school that requires ACLS training in advance of the elective. Students who must have ACLS training earlier in the year will have to make their own arrangements to take it early. The College's Department of Emergency Medicine offers several courses each year of 2 1/2 to 3 days in length. For the purposes of the graduation requirement, written documentation from an approved course off-campus will also be accepted. If a student wishes to take time off of a senior course to take the ACLS course, he/she must first obtain permission of the course director. There is no expense for a senior student to take the ACLS course here at UAMS, however, if he/she wishes to take it somewhere else, the student will be responsible to pay for the course.

OFF-CAMPUS COURSES

Senior students must take a four-week Primary Care Selective, a four-week Acting Internship, a four week Geriatrics rotation, and a one week “end of the year internship survival course” immediately after the 10th senior block. Remaining course work may be taken off-campus (in-state or out-of-state) with approval of the student's advisor, the appropriate departmental chair, and the Executive Associate Dean for Academic Affairs.
Junior, sophomore, and freshman students must take all required courses at the UAMS College of Medicine (except for the junior rotation in Family Medicine, for which some students will go to AHEC sites). The Promotions Committee has the option of allowing a student to take a course at another medical school when the student has failed a course at UAMS, but the student must have written permission from the Committee prior to taking the course.

The majority of students in the College of Medicine will be assigned to mandatory rotations requiring them to live away from Little Rock for between four to twelve weeks, and sometimes longer, depending on individual circumstances and faculty decisions regarding curriculum. These off-campus experiences usually take place in the third and fourth year of the curriculum.

The College of Medicine uses UAMS Northwest, our regional medical campus in Fayetteville, Arkansas, for student training during the M3 and M4 years. The minimum number selected for the NW campus will be based on the increase in number of students admitted for this purpose and the maximum is dependent on capacity at UAMS NW. Students will be selected in the M1 year through a process of open enrollment for volunteers, followed by a lottery system to either fill the list to the minimum, or reduce the list to the maximum, whichever may be necessary. Students selected for the NW campus will complete the first 2 years in Little Rock at the main campus and then move to Fayetteville for the M3 and M4 years. A budget modification will be allowed to receive financial aid for moving expenses.

**International Electives**

Recently, several students from U.S. medical schools have been injured while doing international electives. Normal health insurance that covers you while in the US can be pretty worthless while traveling to a foreign country. Even if it covers your medical expenses, it usually won't cover things like flying you to the nearest hospital that can care for you properly, bringing you back to this country if you are injured (repatriation), etc. While UAMS students doing international electives are not required to do so, if you are going on such a trip, we strongly urge you to purchase some type of medical assistance coverage. There is an organization called International SOS that sells such coverage. Many medical colleges around the country use them, and in fact, many medical colleges require students going on overseas rotations to purchase coverage from them. You can buy a one-month policy that not only covers you for things like emergency evacuations, but also covers you with special medical insurance for somewhere in the neighborhood of $150. You can get more information from their web site at http://www.internationalsos.com/. Also, there is a more general web site that gives you access to multiple insurance plans, as well as links to the state department, etc. It includes references to International SOS. That web site is http://insuremytrip.com/.

It is unfortunate that the world has become a dangerous place. As citizens or permanent residents of the United States, it is your right to travel from the US to any country as long
as you comply with the laws of the United States and the country to which you will travel. However, the College of Medicine does not feel that it can endorse or encourage travel by our students to unsafe parts of the world. Therefore, the College of Medicine will not give academic credit for rotations taken in countries on the State Department’s “Travel Warnings” or “Travel Alerts” list (http://travel.state.gov/). If you go to one of these countries, you are going on your own, against the advice of the UAMS College of Medicine, and any medical rotations you take there will simply be for your own “enjoyment” because no academic credit will be given (an exception can be arranged for someone who is from one of these countries and is willing to sign a waiver of liability – See the Academic Affairs Office). It should also be pointed out that this same web site is an extremely good resource for students traveling to any country and we encourage all students to check the web site any time they are traveling outside of the United States.

Students should also check the CDC web site for infectious disease information on the country to be visited. Any student traveling to another country should consult with the UAMS Travel Clinic (housed in the Family Medicine Clinic) to discuss infectious disease risks, immunizations, and other issues about health concerns. If the student is going to a high risk area for HIV, then they should consult with someone in the Infectious Disease Division in the Department of Medicine about whether or not to carry prophylactic medication on the trip. The Office of Academic Affairs in the Dean’s office will be happy to assist students in contacting physicians in the Infectious Disease Division.

Credit for Academic Course Work not Taught by UAMS Faculty

Students must take all required and elective courses from UAMS faculty at UAMS, ACH, LRVAH, AHEC’s, the NW campus, or other affiliated institutions unless given prior written permission to take a course elsewhere. Requests for other courses must be approved as evidenced by signature of the appropriate Departmental Chair and/or the Executive Associate Dean for Academic Affairs before the student begins the course. The document is placed in the student’s file for validation of credits earned, should such verification be requested by any accrediting agency at a subsequent time. Many elective sites in the US now use the Visiting Student Application Service (VSAS) provided by the AAMC. Request for retroactive approval of a course will not be accepted.

THE AMERICANS WITH DISABILITIES ACT

The College has policies in place for students with disabilities. If you would like to discuss this information, please inquire in the College of Medicine Academic Affairs Office. Richard Wheeler, M.D., the Executive Associate Dean for Academic Affairs, is the designated individual in the College of Medicine to contact. All students must be able to comply with the “Technical Standards” of the College.
POLICY ON ACTIVE DUTY STATUS

Students enrolled in the UAMS College of Medicine, who are members of military reserve or National Guard units and who are called to active military duty as a result of the activation authorized by the President of the United States may elect one of the following options:

A. The student can officially withdraw from the College and receive a full adjustment and refund of tuition and non-consumable fees for the term involved. A copy of the activation orders must be attached to the official withdrawal form for the student to obtain the full tuition and fee adjustment and refund. Students electing this option will not receive credit for any courses for the semester involved; however, the academic record will indicate enrollment until the official date of withdrawal.

B. The student can request a military leave of absence from the College. Students electing this option will not receive credit for any courses for the semester involved. When the student returns, he or she will re-enter school at the beginning of the semester from which he/she left. No tuition would be refunded; however, tuition paid for the year in which the leave is taken would be applied to the year in which the student returns. Therefore, if tuition had been paid for the entire year, the student would only be charged any increase in tuition plus fees.

C. If the student must leave the College after the third test round of a semester, at the discretion of the course director (that is, if the course director feels that sufficient information has been obtained about the student to allow a final grade to be assigned), the student may be assigned a final grade in the course(s). This grade would then be reported on the transcript as the final grade and the student would not have to repeat the course when he/she returns.

Approved December 2, 1990 by the Executive Committee

COMBINED M.D./PH.D. PROGRAM

Physicians who do research fill an important niche in academic medicine, combining research and patient care. Specialized training in biomedical research and in clinical medicine prepares the student for this highly rewarding career. The M.D./Ph.D. program at the University of Arkansas for Medical Sciences has been developed to respond to the need for biomedical scientist-clinicians trained in multiple medical and scientific arenas. M.D./Ph.D. scientists differ from basic scientists in that their in-depth clinical training, combined with biomedical research training gives them a unique perspective with which to view medical problems.
PROGRAM DESCRIPTION

Six to eight years of academic study are essential to complete the rigorous requirements of the M.D./Ph.D. program. Admitted students become part of the Interdisciplinary Biomedical Sciences Graduate Program. Students in the program complete the first two preclinical years of the College of Medicine program. Summer research rotations to identify a research mentor and laboratory are required. As early as possible, students select a mentor-advisor and select to take specialized training in an IBS Interdisciplinary Track. Any faculty member of the UAMS Graduate Faculty is eligible to serve as a major advisor as long as the faculty member is a member of an IBS Interdisciplinary Track and has an active, funded research program, subject to approval by the M.D./Ph.D. Director and the Dean of the Graduate School.

Credits earned in most of the preclinical basic science courses in the College of Medicine are eligible to be accepted toward the Ph.D. program. Although there may be additional track-specific course requirements and the student’s major advisor and/or doctoral advisory committee may require additional courses, the emphasis during Ph.D. portion of training will be on research training. Students spend two to four years in research training before completing the last two clinical years of the Medical College curriculum. Both M.D. and Ph.D. degrees are conferred on graduation.

The research-training portion of the program is individually tailored to personal career goals and includes advanced course work, original research under the direction of a faculty advisor, the Ph.D. candidacy examination, a dissertation, and defense of the dissertation. Before re-entering the Medical College for the last two years of the M.D. portion of the curriculum, permission from the dissertation committee must be obtained. The curriculum for the final two years of the program includes required and elective clinical courses. Senior research electives may also be taken to complete graduate work.

ELIGIBILITY

The M.D./Ph.D. program is offered to a limited number of qualified students who have an exceptional potential for research. Any student applying to the College of Medicine may apply for this program. In addition, freshman or sophomore medical students may apply. Enrollees are required to pass Step 1 of the United States Medical Licensing Examination at the conclusion of the sophomore year in order to begin full-time study in the Graduate School. Graduate Record Examination (GRE) scores will not be required for admission to the Graduate School. MCAT scores will be submitted for evaluation purposes.

FINANCIAL SUPPORT

Each year, institutional scholarships/loans will be awarded by the College of Medicine to students entering the combined M.D./Ph.D. program. This scholarship/loan will be equal to the amount of tuition for each year of the medical school curriculum. Year to year renewal of the scholarship/loan will be contingent upon satisfactory academic progress.
Satisfactory academic performance includes maintaining a grade point average of 3.00 or better and passing of Step 1 of the USMLE. During the graduate phase of the program, a stipend and graduate tuition will be provided for each student.

Freshman and sophomore medical students applying to this program will similarly be eligible to receive a scholarship/loan for the remaining years of the medical school curriculum, as well as graduate tuition and a stipend during the graduate portion of the program.

Scholarships/loans awarded under this program are converted to grants and are forgiven upon successful completion of the M.D./Ph.D. program. If a student fails to complete the program (e.g., due to poor scholarship or a change in career choice), the scholarships/loans will become payable 6 months after the completion of the Residency/Fellowship program or 6 months after termination of enrollment in the College of Medicine. Interest on these funds, which will be delineated on the appropriate promissory notes, will not exceed 5% above the federal discount rate.

HOW TO APPLY
Contact Dr. William D. Wessinger, Director, M.D./Ph.D. Program at 501-686-5514 or wdwessinger@uams.edu or the College of Medicine Admissions Office. An M.D./Ph.D. application form should be completed and submitted before November 1 for entry the following year.

POLICY ON PREJUDICE AND DISCRIMINATION

It is the policy of the College of Medicine that all individuals should be treated with dignity, worth and respect. This policy applies equally to faculty, staff, employees, students, patients, and visitors. Discrimination and/or harassment of any type are inappropriate and will be dealt with using various policies on campus depending on the nature of the offense.

POLICY ON APPEARANCE/DRESS

The College of Medicine does not have a dress code of its own. We believe it is enough to point out that our students are in a professional school to become physicians, and the need for appropriate dress and appearance should be self-evident. Patients and standardized patients expect professional attire to be worn by physicians and medical students. In some freshmen and sophomore courses, professional attire will be required during certain classes. In these instances, the course director or course coordinator will provide the students with reminders when professional attire is required. Each clerkship director will inform the students of the appropriate attire during their rotation on the clerkship.
As stated above, the College does not have a separate dress code. However, in order to train students to become physicians, it is necessary to assign them to various clinical sites, such as hospitals, physician’s offices, clinics, etc. These health care facilities may have dress codes or policies on appropriate appearance (such as the prohibition of certain types of tattoos, piercings, clothing, etc). Because the use of these health care facilities is a part of the curriculum and essential to medical education, students should be prepared to comply with the policies and procedures at any facility where they engage in rotations or learning experiences. Students may not request facility assignments in an effort to avoid such dress/appearance policies. Students may not refuse to participate in training in these facilities because they do not want to comply with the facility’s dress/appearance policies. Students who fail to attend assigned training or who are terminated from training in these facilities because they violate dress/appearance policies will be unable to complete the college requirements for graduation and will be subject to dismissal from the College of Medicine on academic grounds. – Approved 1/28/2008

PROHIBITION AGAINST HAZING - AN ACT

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:

SECTION 1. No student of any school, college, university, or other educational institution in Arkansas shall engage in what is commonly known and recognized as hazing, or encourage, aid, or assist any other student in the commission of this offense.

SECTION 2. Hazing is defined as follows:

(1) Any willful act on or off any school, college, university, or other educational institution in Arkansas by one student alone or acting with others, directed against any other student done for the purpose of intimidating the student attacked by threatening such student with social or other ostracism, or of submitting such student to ignominy, shame, or disgrace among his/her fellow students, and acts calculated to produce such results; or

(2) The playing of abusive or truculent tricks on or off any school, college, university, or other educational institution in Arkansas by one student alone or acting with others, upon a student to frighten or scare him; or

(3) Any willful act on or off any school, college, university, or other educational institution in Arkansas by one student alone or acting with others, directed against any other student done for the purpose of humbling the pride, stifling the ambition, or impairing the courage of the student attacked, or to discourage any such student from remaining in such school, college, university, or other educational institution or reasonably to cause him to leave the institution rather than submit to such acts; or
(4) Any willful act on or off any school, college, university, or other educational institution in Arkansas by one student alone or acting with others, in striking, beating, bruising, or maiming; or seriously offering, threatening, or attempting to strike, beat, bruise, or maim, or to do or seriously offer, threaten, or attempt to do physical violence to any student of any such educational institution or any assault upon any such students made for the purpose of committing any of the acts, or producing any of the results, to such student as defined in this Section.

(5) The term hazing as defined in this Section does not include customary athletic events or similar contests or competitions, and is limited to those actions taken and situations created in connection with initiation into or affiliation with any organization.

SECTION 3. No person shall knowingly permit, encourage, aid, or assist any person in committing the offense of hazing, or willfully acquiesce in the commission of such offense, or fail to report promptly his/her knowledge or any reasonable information within his/her knowledge of the presence and practice of hazing in the State to an appropriate administrative official of the school, college, university, or other educational institution in Arkansas. Any act of omission or commission shall be deemed hazing under the provisions of this Section.

SECTION 4. The offense of hazing is a Class B misdemeanor.

SECTION 5. Upon conviction of any student of the offense of hazing, he shall, in addition to any punishment imposed by the court, be expelled from the school, college, university, or other educational institution he is attending.

SECTION 6. Nothing in this Act shall be construed as in any manner affecting or repealing any law of this State respecting any other criminal offense.

**PROMOTION INTO THE SENIOR YEAR**

Students must successfully complete all junior clerkships before receiving senior credit in the senior year. Students who fail a single junior clerkship are usually allowed to take the clerkship over at the beginning of their senior year. Students, who have not completed all junior clerkships as a result of a leave of absence, or for any other reason, must take their remaining junior clerkships at the beginning of their senior year.
SENIOR YEAR GRADUATION REQUIREMENTS

The minimum senior year requirement for graduation is satisfactory completion of 33 credit hours. In addition, the faculty requires that part of this 33-hour requirement be made up of specific required courses. Details of these requirements, and other requirements for the senior year, are given to all junior students in a “Senior Electives” catalog, and are available at any time in the Office of Academic Affairs.

CLEARANCE FORM FOR GRADUATING SENIORS

It is the responsibility of the senior student to contact a number of offices prior to graduation and to complete any unfinished matters. After all course work is complete and prior to graduation, signatures from authorized checkout personnel must be obtained. A checkout form will be available from the Registrar. The checkout form will indicate the required signatures. The Registrar will retain the form after Student Records has cleared the student. The Student Records Office cannot release a transcript, diploma, or any other document indicating graduation and the receipt of the degree “Doctor of Medicine” until the student has completed all requirements of the College for graduation, and has obtained all necessary signatures on the check-out form.

HONORS CONVOCATION AND COMMENCEMENT

The faculty of the College of Medicine has determined that attendance at Honors Convocation and Commencement is required of all graduating students. Any student having what they feel to be a sufficient reason to miss either of these events must present a petition in writing to the Executive Associate Dean for Academic Affairs. If the events are missed due to illness or accident, documentation will be required.
APPENDICES

Appendix A – Blood Borne Disease Policy Agreement Form

UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES COLLEGE OF MEDICINE

Statement of Agreement and Waiver of Physician/Patient Confidentiality

I have received, read, understand, and agree to abide by the UAMS COM Policy on Students who are known to be infected with a blood borne pathogen (with or without symptoms), the University of Arkansas for Medical Sciences General Policy on Aids and Students, and the guidelines on HIV infected student/employees in The University Hospital of Arkansas Policy and Procedures Manual.

I understand that this agreement means I must obtain medical evaluation from a private physician or the Medical Director of Student/Employee Health (or designee) if I have or become infected with a blood borne pathogen, in order to show that I meet the “Technical Standards” of the COM. I, also, understand that I must receive further evaluation and treatment no less frequently than every six months from a private physician or the Medical Director of Student/Employee Health (or designee in order to provide written health clearance as to my ability to perform educational functions under the COM’s standards. I further recognize the availability of counseling, treatment, and evaluations provided by the COM for students infected with a blood borne pathogen.

I hereby waive physician/patient confidentiality. The Medical Director of Student/Employee Health (or designee) or my private physician is hereby asked to provide a report of my health status to the Executive Associate Dean for Academic Affairs of the COM (or designee) and to include any information pertinent to my continued enrollment in the College, in order to show that I meet the “Technical Standards” of the COM.

I understand that if I do not abide by the UAMS COM Policy on Students who are known to be infected with a blood borne pathogen (with or without symptoms), or with the University of Arkansas for Medical Sciences General Policy on Aids and Students, or with the guidelines on HIV infected student/employees in The University Hospital of Arkansas Policy and Procedures Manual, I will be dismissed from the College. I further understand that as knowledge of blood borne diseases evolves; this policy may be altered as appropriate. I agree that I will abide by the altered policy as soon as I am notified of the change.

Name ________________________________________________
(Please Print)

Signature: _____________________________ Date: _____________

Witness: _____________________________ Date: _____________
(Signature)

Approved by the Executive Committee of the College of Medicine April 3, 2007
Appendix B – Substance Abuse Policy Agreement Form

UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES
COLLEGE OF MEDICINE

Statement of Agreement

COLLEGE OF MEDICINE POLICY ON KNOWN SUBSTANCE ABUSERS

I have received, read, understand, and agree to abide by the **UAMS COLLEGE OF MEDICINE POLICY ON KNOWN SUBSTANCE ABUSERS**.

By my signature on this Agreement, I understand and consent to the terms within this Agreement and specifically release the Board of Trustees of the University of Arkansas, its trustees, officers, and employees, from liability related to the release of my medical/substance abuse information as described below. Specifically, I understand and agree that this Agreement means that I will be referred by the Dean or his/her designee to the UAMS Student Wellness Center. I must follow the recommendations of the UAMS Student Wellness Center or my caregiver, as defined in the policy, which will include, at a minimum, an evaluation of my substance abuse problem and treatment from a care giver approved by the UAMS Student Wellness Center. I understand that I will be monitored by the Arkansas Medical Foundation for adherence with prescribed treatment and follow-up on an ongoing basis while I remain a student in the College of Medicine unless other arrangements are made by the UAMS Student Wellness Center. I consent to allow the Dean, or his/her designee, to receive information from my caregiver and/or the Arkansas Medical Foundation regarding the nature of my substance abuse, the treatment I am receiving, the recommendations for on-going care, and my prognosis. Further, I consent to allow the Dean, or his/her designee, to receive periodic updates regarding my condition and compliance with the recommendations as noted above. I consent to random drug or alcohol screens at times chosen by the Dean or designee, the UAMS Student Wellness Center or designee, the Arkansas Medical Foundation, and/or my care giver. I understand that the drug screens will be continued until my graduation from the College. In the event that I have a positive drug screen, or if I am not compliant with the prescribed treatment and follow-up, I understand that this fact will be reported to the Dean or designee and I will receive an inadequate Scholastic Non-Cognitive Evaluation. I further understand that the inadequate Scholastic Non-Cognitive Evaluation will be referred to the Student Promotions Committee, which will determine the correct course of action under Academic Procedures, as detailed in the Student Handbook, and that the consequences may be any of the outcomes as noted in the Student Handbook, up to and including dismissal from the College of Medicine. I understand and agree that information concerning my history of substance abuse will be forwarded to the program director of the residency program I enter following graduation. This information will include the nature of the substance abuse issue, information on treatment and follow-up (to include compliance with prescribed treatment), results of drug screens obtained during treatment, and any recommendations for ongoing treatment felt appropriate. Additionally, the following statement will appear in my Dean’s letter (MSPE): "This student had a medical issue during medical school. The student will provide details of this medical issue."

I understand that if I do not agree to and abide by the **COLLEGE OF MEDICINE POLICY ON KNOWN SUBSTANCE ABUSERS**, I will be dismissed from the College of
Medicine. I further understand that this policy may be altered at any time and I agree that I will abide by the altered policy as soon as I am notified of the change. A copy of this document and/or my signature shall serve as the original.

Name:______________________________________________________
(Please Print)

Signature:_________________________________________________

Date:______________________________________________________
Appendix C - UAMS Sexual Harassment Policy

PURPOSE

The University of Arkansas for Medical Sciences (UAMS) is committed to its mission of providing an academic and employment environment that fosters excellence. Sexual harassment violates the trust and respect essential to the preservation of such an environment, and threatens the education, employment, and well being of its community members. University members have the right to work and study in an environment free of any form of sexual harassment. This right is protected by Title VII of the 1964 Civil Rights Act for employees and Title IX of the Educational Amendment of 1972 for students. Sexual harassment is destructive to students, faculty, staff, and the UAMS community as a whole, and it will not be tolerated.

This policy may not be used to infringe upon academic freedom. Students, faculty, staff, and guests must be aware of the need for freedom of inquiry and openness of discussion in its educational and research programs, and must strive to create and maintain an atmosphere of intellectual seriousness and mutual tolerance in which these essential features of academic life can thrive. No university can or should guarantee that every idea expressed in its classrooms or laboratories will be inoffensive to all; pursued seriously, education and scholarship necessarily entail raising questions about received opinions and conventional interpretations. If, however, UAMS determines that credible accusations of inappropriate sexual remarks or actions have been made, UAMS shall investigate such accusations promptly, thoroughly, and fairly.

Sexual harassment is particularly serious when it threatens relationships between teacher and student, or supervisor and subordinate, because of the potential to exploit the power inherent in these relationships and to undermine the ability of UAMS to carry out its mission. UAMS strongly encourages all community members to report incidents of sexual harassment. To the extent possible, reporting and investigating procedures are supportive of and sensitive to the alleged victim, while adequately safeguarding the rights of the alleged offender.

POLICY

UAMS opposes all forms of sexual harassment, whether subtle or direct, and is committed to a thorough, timely, and confidential investigation, in a fair and impartial manner, of all complaints from its students or employees. The sexual harassment of UAMS faculty, staff, and students by non-university employees and guests doing business or providing services on campus (for example, contractors, vendors, delivery persons) is also prohibited by this policy. Incidents of sexual harassment involving visitors should be reported directly to the Office of Human Resources. During non-business hours, sexual harassment complaints may be reported to the UAMS Police Department, who will then refer the complaint to the Office of Human Resources for review and action. UAMS will take appropriate actions within the scope of its legal authority to prevent, correct, and discipline behavior that violates this policy.

A. Definition of Sexual Harassment

Sexual harassment generally includes any unwanted or unsolicited sexual gesture, physical contact, or statement which, when viewed from the perspective of a reasonable person similarly situated, is offensive, threatening, humiliating, or interferes with a person’s ability to perform his or her job, educational pursuit, or participation in campus life.

B. Prohibited Acts

For the purpose of this policy, sexual harassment may take many forms — subtle or indirect, or blatant and overt. It may consist of repeated actions or may even arise from a single incident if sufficiently extreme. In assessing whether a particular act or acts constitute sexual harassment under this policy, the standard shall be the perspective of a reasonable person similarly situated.
Sexual harassment includes any behavior of a sexual nature where:

- Submission to or rejection of the conduct is made either explicitly or implicitly a term or condition of employment or status in a UAMS-sponsored course, program, or activity;
- Submission to or rejection of the conduct is used as a basis for employment or academic decisions affecting that individual; or
- Such conduct unreasonably interferes with an individual’s work or academic performance, or creates an intimidating, hostile, or offensive environment for work or learning.

Sexual harassment may occur within a variety of relationships. It may occur between individuals of the opposite sex – male against female, or female against male – or, between individuals of the same sex. Incidents may occur between supervisor and subordinate, faculty member and student, or between fellow employees and fellow students; they may also take place between employees and campus visitors and between employees and those who do business with UAMS. Especially injurious, however, is harassment in relationships characterized by an imbalance of power and authority. Typically, such relationships are found between:

a. employer and employee (usually, supervisor and subordinate)
b. administrator and faculty
c. administrator and student or medical resident
d. employee and student or medical resident
e. senior and junior faculty
f. graduate assistant and student
g. faculty and student, whether medical student, graduate student, or undergraduate student
   [Examples are when the student is enrolled in a faculty member’s class, or when the student is in a continuing position to require evaluation of work or letters of recommendations from faculty. Such relationships can be immediate, or based upon future expectations, e.g., the need for future evaluations and references.]
h. faculty and medical resident
i. resident/fellow and student

C. Examples of Sexual Harassment

The perception of conduct which constitutes sexual harassment may vary from individual to individual; what is offensive to one person may be less so to another. The following examples are intended as illustrations only; they do not cover all possible situations.

a. Physical assault;
b. Suggestions that submission to or rejection of sexual advances will influence decisions regarding an individual’s employment or educational status;
c. Repetitive remarks or actions of a sexual nature (including, but not limited to, statements, questions, jokes, and anecdotes) which constitute a pattern where actions unreasonably cause discomfort or humiliate an individual;
d. Unwelcome visual contact or body language that communicates a sexual message;
e. Whistling, cat calls, leering, or other improper gestures;
f. Persistent, unwelcome flirtations, and outright advances or propositions of a sexual nature;
g. Unwelcome remarks or actions about an individual’s appearance;
h. Unwelcome repetitive touching, such as patting, pinching, hugging, or brushing against an individual’s body;
i. Unwarranted displays of sexually suggestive objects or pictures;
j. Unwelcome exposure to sexually explicit music, letters, or written notes;
k. Unwelcome descriptions of sexual activity or speculation about previous sexual experiences.

Investigative steps should be taken as outlined in this policy and appropriate action will be taken if harassment is found to have occurred.

D. Anonymous Complaints

All members of the UAMS community may contact the Office of Human Resources at any time to ask questions about sexual harassment or complaint procedures without disclosing their names and without filing a complaint. However, because of the inherent difficulty in investigating and resolving allegations from unknown persons, individuals are discouraged from making anonymous complaints of sexual harassment. Although anonymous complaints are discouraged, UAMS will respond reasonably to all allegations of sexual harassment. In order to determine the appropriate response to an anonymous allegation, UAMS will weigh the following factors:

- The source and nature of the information;
- The seriousness of the alleged incident;
- The specificity of the information;
- The objectivity and credibility of the source of the report;
- Whether any individuals can be identified who were subjected to the alleged harassment; and
- Whether those individuals want to pursue the matter.

If, based on these factors, it is reasonable for UAMS to investigate the matter, the Office of Human Resources will conduct an investigation and recommend appropriate action to address substantiated allegations. However, a reasonable response would not include disciplinary action against an alleged harasser if an accuser insists that his or her name not be revealed, if there is insufficient corroborating evidence, and if the alleged harasser could not respond to the charges of sexual harassment without knowing the name of the accuser.

E. Consensual Relationships

The basic function of a university is the discovery and the transmission of knowledge, which is founded upon the free and open exchange of ideas. In order for productive learning and the work that supports it to occur, members of the campus community (faculty, staff, and students) should pursue their responsibilities guided by a strong commitment to principles of mutual trust, confidence, and professional codes of conduct.
Consenting romantic relationships between faculty members and students, supervisors and subordinates or fellow employees are strongly discouraged. Faculty members exercise power over students as do supervisors over subordinates, whether in promotions, raises, evaluations, recommendations, study, job duties, grades, assignments, or other benefits. This difference in power increases the opportunity for abuse of power, thus endangering the professional environment. Employees and students involved in a consenting relationship in the actual or equivalent context of educational/employment supervision and evaluation should be and are deemed to be aware of the possible costs of even an apparently consenting relationship, including the possible difficulty in defending a future sexual harassment charge on the grounds of mutual consent. The element of power implicit in sexual relationships occurring in the supervisory context has the potential to diminish a subordinate’s freedom of choice. It is incumbent upon those with authority not to abuse, or appear to abuse, the power with which they have been entrusted.

F. Disciplinary Actions for Violations of the Sexual Harassment Policy

Disciplinary actions for violations of the Sexual Harassment Policy may include, but are not limited to, the following: oral or written warning, reassignment, counseling, demotion, termination, or any combination thereof. Sanctions for sexual harassment depend upon the circumstances in each case.

In addition to disciplinary action, those who engage in sexual harassment may be subject to legal consequences, including civil and criminal penalties and monetary damages.

All individuals accused of sexual harassment shall be given the opportunity to respond to the complaints prior to any final employment and academic decisions.

G. Confidentiality

UAMS understands that some individuals may be reluctant to tell anyone about harassment or to have their names disclosed. Every reasonable effort will be made to maintain confidentiality of all parties, all conversations, and all documents concerning a sexual harassment complaint. However, UAMS’s obligation to stop sexual harassment means that it cannot fail to take appropriate action and, as such, confidentiality cannot always be guaranteed. The appropriate administrative officials will be kept informed on a “need to know” basis. All persons involved should maintain confidentiality to the greatest extent possible, except to the extent needed for processing complaints under this Policy.

H. Retaliation

Reprisals or retaliatory action against an individual who, in good faith, reports or provides information in an investigation about behavior that may violate this policy will not be tolerated. Such action should be regarded as a separate and distinct cause for disciplinary action.

I. Malicious Allegations/Complaints; False Information

UAMS is committed to protecting the due process rights it provides to the accused as well as the accuser. Allegations of sexual harassment that are malicious, intentionally false, or without foundation are very serious with potential for great harm to all persons involved and are prohibited by this policy. Such actions constitute grounds for disciplinary action that may include, but is not limited to, written warning, demotion, transfer, or dismissal. Further, repeated filing of frivolous complaints is considered a malicious action and may be grounds for disciplinary action.

The failure to substantiate a sexual harassment complaint does not automatically constitute a malicious or frivolous complaint. In the event that allegations are not substantiated, every reasonable effort will be made and all reasonable steps taken to restore the reputation of the accused if it was damaged by the proceedings.
J. Record Keeping

Each complaint should be documented and kept in a confidential file separate from the personnel or student files normally maintained by the offices of Human Resources or Student Affairs. Documentation should include the name of the complainant, the name of the accused, the nature of the complaint, date(s), witnesses, the name(s) of the person(s) who received the complaint, the name(s) of the person(s) who prepared the written documentation and the date of the written documentation, and any other information relevant to the case. If some of this information is not available, the reason(s) for unavailability, if known, should be documented. Such file will be maintained as provided by law.

PROCEDURE

Complaints of sexual harassment, submitted in writing or accepted orally, are taken seriously and will be dealt with promptly. Allegations of sexual harassment shall be judged on the facts of the particular case and the context in which the alleged incident(s) occurred. The complainant has the responsibility of providing evidence to substantiate the alleged sexual harassment. The specific action taken in any particular case depends on the nature and gravity of the conduct reported and may include intervention, mediation, investigation and the initiation of disciplinary action as described above. Where a violation of the Sexual Harassment policy is found to have occurred, UAMS will act to stop the harassment, prevent its recurrence, and discipline those responsible.

UAMS recommends that all reports of suspected sexual harassment be made within 180 days of the alleged incident to assist in the investigation process.

Reporting Procedures

Employees

Employees with complaints of sexual harassment are encouraged to notify their immediate supervisor, department head, or the UAMS Office of Human Resources. If the alleged harasser is the employee’s supervisor, the employee may contact someone outside his or her chain-of-command.

Employees who need to report an incident of sexual harassment after regular business hours should report the incident to the UAMS Police Department if the employee’s supervisor is unavailable or other administrative offices are closed. The UAMS Police Department will take appropriate action and will notify the Office of Human Resources at the beginning of the next business day, i.e., Monday through Friday, excluding holidays. Individuals who witness possible sexual harassment should report their concerns to the Office of Human Resources.

When a UAMS employee receives a report of sexual harassment, he or she must immediately notify their Department Head or the Office of Human Resources prior to taking any action to investigate or resolve the matter informally and must act only on direction from such office.

Students

Students should report incidents of sexual harassment to his or her college’s Office of Student Affairs. A designated individual in each college’s Office of Student Affairs will handle all complaints from students. If assistance is needed, please contact the Employee Relations Manager in the Office of Human Resources at 686-5650.

Students who need to report an incident of sexual harassment after regular business hours should report the incident to the UAMS Police department if no one from the appropriate Student Affairs Office is available. The UAMS Police Department will take appropriate action and will notify the Office of Human Resources at the beginning of the next business day, i.e., Monday through Friday, excluding holidays. Students who witness possible sexual harassment should report their concerns to the designated student affairs official in their college.
B. Informal Complaint Process

Employees

1. In the event that an individual believes that sexual harassment has been or is occurring, he or she is encouraged, but not required, to communicate clearly, preferably in writing, to the alleged harasser and state the conduct is not acceptable. The individual is also encouraged to maintain careful written records of the harassment and to continue to maintain current records throughout the process.

2. The individual should consider meeting with their Department Head or the office of Human Resources to discuss the sexual harassment allegation. If an individual cannot decide whether to initiate a formal complaint or is reluctant to discuss the matter with the alleged harasser, he or she may seek the advice of the Employee Relations Manager who, with the individual’s permission, may seek to resolve the issue informally through discussions with the individual, the accused, and the accused’s supervisor.

If the individual does not wish to prepare a signed, written complaint, written documentation shall be prepared by the Office of Human Resources. Such written documentation shall include the nature of the complaint, the date(s) on which the alleged incident(s) occurred, and any witness(es) to the incident(s). The complaining individual shall be asked to read the written documentation to acknowledge its accuracy; a written acknowledgment will be preferred and may be made in a separate document.

Written documentation shall be prepared before any informal discussions are held with the accused and the accused’s supervisor. The accused shall be given an opportunity to read the written documentation that may be edited to protect the anonymity of the complaining individual and any other collateral witnesses to the process.

3. If the parties are unable to reach a mutually satisfactory agreement after an informal discussion, the option of filing a formal complaint is available.

4. The Informal Complaint Process may also include referral of either or both parties to confidential counseling through UAMS' Employee Assistance Program (EAP).

5. The complainant or the Office of Human Resources may elect to refer the complaint to the Formal Complaint Process at any time as deemed necessary to resolve the complaint in an appropriate and timely manner.

Students

1. In the event that a student believes that sexual harassment has been or is occurring, he or she is encouraged, but not required, to communicate clearly, preferably in writing, to the alleged harasser and state the conduct is not acceptable. The student is also encouraged to maintain careful written records of the harassment and to continue to maintain current records throughout the process.

2. The student should consider meeting with the appropriate student affairs official in his or her college to discuss the sexual harassment allegation. If the student cannot decide whether to initiate a formal complaint or is reluctant to discuss the matter with the alleged harasser, he or she may seek the advice of the Employee Relations Manager who, with the individual’s permission, may seek to resolve the issue informally through discussions with the individual, the accused, and the accused’s supervisor.

If the student does not wish to prepare a signed, written complaint, written documentation shall be prepared by the Employee Relations Manager of the Office of Human Resources or a college’s designated individual within the Office of Student Affairs. Such written documentation shall include the nature of the complaint, the date(s) on which the alleged incident(s) occurred, and any witness(es) to the incident(s). The student shall be asked to read the written documentation prepared by the appropriate representative to acknowledge its accuracy; a written acknowledgment will be prepared and may be made in a separate document. If the student refuses to sign the written documentation, the Employee Relations Manager or college’s designee
shall note such on the documentation and forward it to the Office of Human Resources for determination of whether the complaint will be investigated despite the student’s refusal to acknowledge the written documentation.

Written documentation shall be prepared before any informal discussions are held with the accused and the accused’s supervisor. The accused shall be given an opportunity to read the written documentation that may be edited to protect the anonymity of the complaining individual and any other collateral witnesses to the process.

3. If the parties are unable to reach a mutually satisfactory agreement after an informal discussion, the option of filing a formal complaint is available.

4. The Informal Complaint Process may also include referral of either or both parties to confidential counseling through UAMS’ Employee Assistance Program (EAP).

5. The complainant, the Office of Human Resources, or a college’s Office of Student Affairs may elect to refer the complaint to the Formal Complaint Process at any time as deemed necessary to resolve the complaint in an appropriate and timely manner.

C. Formal Complaint Process

Employees

1. When the Informal Complaint Process fails to resolve the complaint, or in instances where the Office of Human Resources determines the nature of the allegations requires formal investigation, the Formal Complaint Process will be used. The Employee Relations Manager in the Office of Human Resources may assist the complainant in preparing his or her complaint, in writing, as necessary.

2. If an individual wishes to file a formal complaint, he or she must submit a signed, written statement alleging harassment to the Employee Relations Manager of the Office of Human Resources. The written statement should include the name of the complainant, the name of the accused, the nature of the complaint, date(s), witness(es), and any other information relevant to the complaint. If some of this information is not available, the reason(s) of unavailability, if known, should be documented.

Upon receipt of the written complaint, the Employee Relations Manager will notify the Assistant Vice Chancellor of Human Resources, who will appoint two investigators to conduct an investigation of the complaint.

The Employee Relations Manager will meet with the accused and allow him or her to view the complaint and present a copy of the sexual harassment policy. The accused will be given an opportunity to respond to the complaint orally and in writing, and may provide evidence and witnesses. The Employee Relations Manager will also explain that there is to be no contact with or retaliation against the complainant.

The investigators will gather relevant evidence by interviewing the complainant, the victim (if different from the complainant), the accused, and any witnesses or other individuals deemed appropriate to conduct a thorough investigation.

Every effort will be made to ensure a thorough and timely investigation of the complaint.

3. Following completion of the investigation, the investigators will present their written findings to the Assistant Vice Chancellor of Human Resources. The Assistant Vice Chancellor of Human Resources will prepare a written report, containing a recommended course of action for the employee’s Division Head and may provide further consultation when necessary. It is the responsibility of the division head to take action consistent with the written findings. Once a final determination is made by the appropriate Division Head, both the complainant and the accused will be notified of the action to be taken.
4. Employees may appeal any employment decision made subsequent to a finding of sexual harassment through the campus grievance procedure.

5. Complainants may not appeal administrative decisions regarding sexual harassment complaints through the UAMS grievance process.

Students

1. When the Informal Complaint Process fails to resolve the complaint, or in instances where the college’s Office of Student Affairs determines the nature of the allegations requires formal investigation, the Formal Complaint Process will be used. The Employee Relations Manager in the Office of Human Resources may assist the complainant in preparing his or her complaint, in writing, as necessary.

2. If a student wishes to file a formal complaint, he or she must submit a signed, written statement alleging harassment to the Employee Relations Manager of the Office of Human Resources. Documentation should include the name of the complainant, the name of the accused, the nature of the complaint, date(s), witness(es), and any other information relevant to the complaint. If some of this information is not available, the reason(s) of unavailability, if known, should be documented.

Upon receipt of the written complaint, the Employee Relations Manager will notify the Assistant Vice Chancellor of Human Resources, who will appoint two investigators to investigate the facts of the complaint.

The Employee Relations Manager will meet with the accused and present him or her with a copy of the complaint and a copy of the sexual harassment policy. The accused will be given an opportunity to respond to the complaint orally and in writing, and may provide evidence and witnesses. The Employee Relations Manager will also explain that there is to be no contact with or retaliation against the complainant.

The investigators will gather relevant evidence by interviewing the complainant, the victim (if different from the complainant), the accused, and any witnesses or other individuals deemed appropriate to conduct a thorough investigation.

Every effort will be made to ensure a thorough and timely investigation of the complaint.

3. Following completion of the investigation, the investigators will present their written findings to the Assistant Vice Chancellor of Human Resources. The Assistant Vice Chancellor of Human Resources will consult with the student’s appropriate student affairs official regarding the written findings for purposes of resolving the complaint. It is the responsibility of the student affairs official to take action consistent with the written findings. Once a final determination is made by the appropriate student affairs official, both the complainant and the accused will be notified of the action to be taken.

4. Pursuant to FERPA (Family and Educational Rights to Privacy Act), student disciplinary records will remain confidential unless the accused consents to release of information.

5. Students who are found to have violated the sexual harassment policy may grieve any decision affecting their educational status through the grievance procedure of their respective college.

6. Complainants may not appeal administrative decisions regarding sexual harassment complaints through the UAMS grievance process.

Questions regarding this policy may be directed to the Office of Human Resources at (501) 686-5650.
Appendix D - Academic, Disciplinary, Administrative Actions, and Grievance Procedures

The vast majority of medical students will pass through the medical education system without any difficulty. Most students never become well known to their Promotions Committee except as they are routinely promoted to the next level of study. A few students, however, will have problems that bring them before the Honor Council or their Promotions Committee. These problems fall into two major categories, academic (marginal or inadequate academic performance) and disciplinary (cheating or serious breach of appropriate behavior). Since the procedures used to handle these problems differ, they will be described separately. There may also be students who believe that a rule, procedure or policy was applied to them in an unfair or inequitable manner, or that they had been treated unfairly by a faculty member or administrator. The Student Grievance Procedure is used to review the complaint of unfair treatment. It is possible that a student's allegation (e.g., unfairness of an assigned grade) could impact on two of the three procedures. In a situation such as an allegation of unfair assignment of a grade, the Grievance Panel must review the allegation first and make a recommendation to the Dean. The Promotions Committee can make a recommendation on progress and promotion of a student only after receipt of final, uncontested grades.

ACADEMIC PROCEDURES

The Promotion Committee meets regularly to review the records of all students approximately two weeks after final grades are assigned by the faculty. When a student does not meet scholastic cognitive or minimal scholastic non-cognitive standards as defined in the "Academic Requirements for the Promotion of Medical Students," the Promotions Committee will review that student's record in detail and make a recommendation to the Dean or the Dean's designee. The Promotions Committee may meet anytime during the calendar year upon receipt of a finding by the Honor Council that a student has violated the Honor Code, or for other reasons described in the "Academic Requirements."

The members of the Promotions Committee and student(s) whose situation(s) will be considered in detail will be notified, in writing, of the meeting by the Chairman of the Promotions Committee. The notice will be hand delivered to the student(s) or delivered by Certified Mail to his/her last known address. The notice will include the date, time, and place of the meeting, the issues which will be considered, and the possible consequences.

The student may submit a written statement to the Chairman of the Promotions Committee prior to the meeting which sets out reasons why the determination of the Committee should be in his/her favor. The student may also submit written statements from others in his/her behalf, and may appear in person, make an oral statement, and answer questions from members of the Committee. This interaction shall be in the nature of an informal give-and-take rather than a formal evidentiary hearing. Legal counsel may not be present. The student may not present witnesses without prior consent of the Chairman.

The recommendation of the Promotions Committee will be made after careful and deliberate discussion, based upon the professional judgment of the committee members. The Promotions Committee shall not reconsider a determination that a violation of the Honor Code or a serious breach of appropriate behavior has occurred. Students may not be present during the committee deliberations. The student shall be notified of the recommendation in writing.

Within seven (7) working days of the date of the recommendation notice, the student may contest, in writing, to the Chairman of the Committee that a (1) substantial mistake of fact occurred, (2) a fundamental misinterpretation of official policies is evident, or (3) a significant procedural defect took place. These are the only bases for contesting the decision. If the decision of the Promotions Committee is contested by a student, the Promotions Committee will reconvene to review the student's contentions. If the Committee concurs with the student, it will correct the procedural defect, reinterpret the policy as appropriate, or
review the fact which was originally presented in error, and then review its recommendation and revise it if appropriate.

The final recommendation will be forwarded to the Dean or Dean's designee after the seven (7) day period for contest has passed or at the conclusion of a contest.

**DISCIPLINARY ACTIONS**

Cases involving disciplinary actions can arise from alleged infractions of the Honor Constitution or an alleged serious and significant breach of appropriate behavior. Examples - by way of illustration, not by way of limitation - of possible actions which would lead to initiation of disciplinary procedures include accusations of:

- cheating
- stealing
- fraud
- other violations of law

After receipt of an allegation of infraction of the Honor Constitution, a hearing before the Honor Council will be conducted to determine the facts. The Chairman or a member of the Investigation Committee shall prepare and present the case against the student. If the student is found guilty of a violation of the Honor Code by the Honor Council, his/her disposition becomes an academic matter. The case shall be referred to the appropriate faculty Promotions Committee for determination of disposition using the Academic Procedures. If the student is found innocent by the Honor Council, all records will be destroyed.

If it is alleged that a student has failed to meet minimal scholastic non-cognitive performance standards as defined in the Academic Requirements for the Promotion of Medical Students", the Promotions Committee will review the student's record in detail using the Academic Procedures. However, if in the opinion of the Dean or Dean's designee a serious and significant breach of appropriate behavior is alleged (e.g., arrested for stealing, fraud or other violations of law), the Promotions Committee will hold a disciplinary hearing to evaluate the evidence and make a determination. The Dean or Dean's designee will appoint a faculty member to prepare and present the case before the Promotions Committee. (In general, if the fact of guilt has been determined, (the student confesses, the Honor Council or Promotions Committee has determined guilt, etc.), the Academic Procedure is used. The Disciplinary Procedure is used if the determination of guilt is still in question. As described below, if guilt is established, the Academic Procedure is used to decide disposition.)

**DISCIPLINARY HEARING PROCEDURES**

Reasonably in advance of an Honor Council hearing or a meeting of the Promotions Committee, the student will be provided notice in writing of the specific allegations, a list of witnesses and any sworn statements or exhibits which will be used as evidence against him/her. The student will be given a list of the members and alternates of the Promotions Committee or Honor Council. The student may request that the designated alternate replace any member(s) of the Promotions Committee or Honor Council for the hearing.

The hearing will be conducted in private. Witnesses will be admitted for testimony only and then asked to leave. The testimony will be tape recorded, but the final deliberations of the Committee or Council will not be recorded.

The student may have one (1) person present during the hearing, who may be an attorney, to advise him/her. This person may not address the Promotions Committee or Honor Council, speak on behalf of the student, question witnesses, or otherwise actively participate in the hearing. If the complainant chooses to have an
attorney present, a University attorney may also attend the hearing. The student may appear in person, make an oral statement, and answer questions from members of the Committee or Council. Should the student choose to remain silent, no adverse inference will be raised against him/her. The student may submit sworn written statements and other exhibits and witnesses in his/her behalf. The student may hear and question all witnesses.

During the period of time prior to the disciplinary hearing, the Dean or Dean's designee may remove a student from his/her academic place (courses, clerkship, or elective) if the student materially and substantially disrupts the educational process or constitutes a clear and present danger to the health and safety of any other persons, themselves, or property, or infringes on the rights of others.

The Promotions Committee or Honor Council shall make its determination in writing based upon the evidence presented at the hearing which is relevant to the issue or issues before the Promotions Committee or Honor Council. The student may not be present during the Promotions Committee or Honor Council deliberations. The student shall be notified in writing of the determination.

Within seven (7) working days of the date of the determination notice the student may contest, in writing, to the Chairman of the Promotions Committee or President of the Honor Council that a substantial mistake of fact occurred, a fundamental misinterpretation of official policies is evident, or a significant procedural defect took place. These are the only bases for contesting the determination. If the determination of the Promotions Committee or the Honor Council is contested by a student, the Promotions Committee or Honor Council will reconvene to review the student's contentions. If the Promotions Committee or Honor Council concurs with the student, it will correct the procedural defect, reinterpret the policy as appropriate, or review the fact which was originally presented in error, and then review its determination and revise it if appropriate. There shall be no appeal from a final determination by either the Promotions Committee or Honor Council.

If the Promotions Committee finds a serious breach of behavior occurred, the Promotions Committee will use the "Academic Procedures" to recommend disposition to the Dean or Dean's designee.

A determination by the Honor Council that a student violated the Honor Code shall be referred to the appropriate Promotions Committee for consideration as a failure to meet academic standards under the academic procedures.

**FINAL DECISION BY THE DEAN OR DEAN'S DESIGNEE**

After receipt of a recommendation from the Promotions Committee resulting from either an academic or disciplinary procedure the Dean or Dean's designee may accept the recommendation, reverse it, or refer it back to the Promotions Committee for reconsideration. The decision of the Dean or the Dean's designee shall be final and there shall be no appeal. The student shall be notified in writing of the decision.

**POLICY ON ADMINISTRATIVE ACTIONS**

In the College of Medicine, certain individuals have the authority to impose interim administrative actions in order to protect the safety and welfare of members of the University community. These "authorized individuals" include the Dean and/or his/her designees. As defined below, the Deans and their designees are permitted, when necessary, to take the following interim administrative actions: (A) interim actions; (B) interim suspensions; and/or (C) referrals for psychological or psychiatric evaluations.
A. Interim Actions

In special circumstances the authorized individuals named above may impose "interim actions" to ensure the safety and welfare of members of the University community, including, but not limited to, student restrictions from certain activities or locations and changes in class schedules. Any restrictions outlined in the interim action will be clearly presented in a written notice to the student.

1. Appeal of Interim Administrative Action: In the event that interim action is invoked, the student may appeal the action through the College's non-discriminatory grievance policy as further explained in the “Grievance Procedure” which is detailed in this Appendix of this Student Handbook. During the grievance process, a hearing will be provided. At this hearing, the student will be given the opportunity to explain why he/she does not constitute a threat to the safety, health, or welfare of members of the University community.

2. Violation of Interim Action: Any violation of an interim action will result in an inadequate Scholastic Non-Cognitive Evaluation. The Promotions Committee will then meet using the “Academic Procedure” as detailed in this same Appendix of this Student Handbook, to consider the student’s status with the College of Medicine.

B. Interim Suspension

Notwithstanding any other provision of this Code, an "interim suspension" may be imposed upon a student by the Dean and/or his/her designees when there is reasonable cause to believe, based on available facts, that the student is an immediate threat to the safety of himself or herself, other members of the University community or University property, or is persistently disruptive to the University community. When an "interim suspension" action is imposed, a student will be given a written notice containing the reasons for suspension, the duration, and any conditions that apply, along with a copy of this interim suspension policy. After receiving such notice, a student is required to leave the campus and University property immediately and make no future visits to any University property unless invited by his/her college Dean, the Dean’s designee, or the Vice Chancellor for Academic Affairs. Following notice of an interim suspension, the student will be suspended from participation in all classes and all other University activities.

1. Appeal from the Interim Suspension: In the event that interim suspension is invoked, the student may appeal the action through the College's non-discriminatory grievance procedures as further explained in the “Grievance Procedure” in this same Appendix of this Student Handbook. During the grievance procedures, a hearing will be provided to afford the student with an opportunity to explain why he/she does not constitute an immediate threat to the safety, health or welfare of himself or herself, or other members of the University community or University property, or is not persistently disruptive to the University community.

2. Violation of Interim Suspension: Any student who is suspended on an interim basis and returns to the campus and University property without proper authorization to do so or otherwise violates the terms of the interim suspension will receive an inadequate Scholastic Non-Cognitive Evaluation. The Promotions Committee will then meet using the “Academic Procedure” as detailed in this same Appendix of this Student Handbook, to consider the student’s status with the College of Medicine. Further, the student may be treated as a trespasser. Permission to be on campus for a specific purpose (e.g., to consult with the Vice-Chancellor for Academic Affairs, the student’s college Dean or his/her designees, or to participate in the disciplinary procedures against him/her) may be granted in writing by the Vice-Chancellor for Academic Affairs, the student’s college Dean or his/her designee.

C. Referral for Psychological Evaluation

The authorized individuals may determine that a student should undergo a psychological or psychiatric evaluation prior to an administrative action or a Grievance Committee hearing. When such determination
has been made, the student should be administratively referred to the appropriate agency for such evaluation according to the guidelines outlined below:

1. Referral to The Student Wellness Center: When an authorized professional staff member has reasonable cause to believe that a student has severe emotional problems, and when there is reasonable cause to believe that a student's continued presence on campus would present a danger to himself/herself and/or others, or to university property, the staff member may direct the student to consult with the Director of Counseling and Psychological Services (The Student Wellness Program). In the event of a student's refusal to obtain such consultation in a timely manner, interim action may be invoked.

2. Procedure: Whenever possible, the student who is being administratively referred to the Center for Counseling and Psychological Services (The Student Wellness Program) will be accompanied by an appropriate professional staff or faculty member from his/her respective College.

3. Recommendations: Following an evaluation, the Director of The Student Wellness Program may recommend that the student be placed on an administrative leave of absence from the University to seek psychological/medical treatment if:

   a) The student has violated institutional regulations and appears to lack the capacity to respond to the disciplinary process, or did not appear to know the nature and wrongfulness of the alleged violation; or

   b) The student has threatened or attempted harm to himself or herself or another individual, or to University property, and is suffering from a serious mental disorder that is being exacerbated in the campus environment; or

   c) A student is engaged in behavior exacerbated in the academic setting, which places him or her in serious medical jeopardy producing conditions that cannot be treated effectively without leaving the University.

4. Report: The Director of The Student Wellness Program will send a report summarizing the results of the evaluation and any recommended action to the student's Dean or his/her designee. Other appropriate personnel will be notified of any action taken regarding a change in the student's status by the student's Dean's Office (e.g., the University Housing staff member if the student is living in a residence hall).

5. Administrative Leave of Absence: If an administrative leave of absence is recommended, the Director of The Student Wellness Program will notify the student's Dean or designee. If the Dean or designee accepts the Director's recommendation, the student shall be immediately placed on a leave of absence from the College of Medicine.

   a) Return from Leave of Absence: If a student has been placed on an administrative leave of absence from the College of Medicine based on recommendations from the Director of The Student Wellness Program, prior to ending the leave and returning to school, the student will be required to submit a report to his/her Dean or designee from a licensed mental health practitioner stating that he/she is capable of participating in the College's academic/disciplinary/grievance processes, and/or that the student has received sufficient treatment to be capable of returning safely to the University community. The College of Medicine may require further evaluation by the Director of The Student Wellness Program or by another licensed practitioner.

   b) Appeal from Administrative Leave of Absence: After the Dean or designee has received a report from the Director of the Student Wellness program stating that the student is capable of participating in the College’s academic/disciplinary/grievance
processes, the student may appeal any disciplinary charges through the College's nondiscriminatory grievance procedures in the “Grievance Procedure” in this same Appendix of this Student Handbook to determine the appropriateness of sanction(s).

6. Dismissal: If the Interim Action, Interim Suspension, or Leave of Absence extends for a period of time making it impossible for the student to complete all requirements for the degree, Doctor of Medicine, in the seven years allowed by the College of Medicine’s academic policy, “Limit on Years in Medical School”, then the student will be dismissed from the College of Medicine using the normal Academic Procedures of the College. (Approved by the Executive Committee of the College of Medicine on 1/11/2008)

GRIEVANCE PROCEDURE

Purpose

A grievance procedure shall not be used to question a rule, procedure, or policy established by an authorized faculty or administrative body. Rather, it shall be used as due process by a student who believes that a rule, procedure, or policy has not been followed or has been applied in an inequitable manner.

Definitions

College of Medicine Appeals Board: A group of faculty members appointed by the Dean of the College of Medicine (COM) to hear formal grievances.

Grievance: An expression of dissatisfaction when a student believes that a rule, procedure, or policy has been applied in an unfair or inequitable manner, or that there has been unfair or improper treatment by a person or persons. Alleged situations not covered by this policy include discrimination because of race, national origin, gender, religion, age, disability, or status as a disabled or Vietnam-era veteran, or issues of sexual harassment, all of which are handled in accordance with other specific published policies of the University of Arkansas for Medical Sciences.

Grievance Panel: Those members of the College of Medicine Appeals Board selected, by a drawing, to hear a grievance, in accordance with Step II of the grievance procedure.

Grievant: Any student submitting a grievance as defined above.

Respondent: A person or persons alleged to be responsible for the violation(s) alleged in a grievance. The term may be used to designate persons with direct responsibility for a particular action or those persons with supervisory responsibility for procedures and policies in those areas covered in the grievance.

Working Days: Monday through Friday, excluding official UAMS holidays.

Policy

When an incident forming the basis for a grievance arises, the grievant must follow the procedure outlined below. Each grievance shall be handled promptly and impartially, without fear of coercion, discrimination, or reprisal. Each participant in a grievance shall do his or her part to protect this right.

No student, resident, faculty member, member of the Grievance Panel or College of Medicine Appeals Board, administrator, or witness shall suffer loss of compensation or leave time for the time spent in any step of this procedure.
Records shall be kept of each grievance process. These records shall be confidential to the extent allowed by law, and shall include, at a minimum: the written grievance complaint filed by the grievant, the written response filed by the respondent, the recording and documents of the hearing, the written recommendation of the Grievance Panel, the results of any appeal, the decision of the Dean, and any other material designated by the Dean or the Dean’s designee. A file of these records shall be maintained in the office of the Executive Associate Dean for Academic Affairs.

For purposes of the dissemination of grievance precedents, separate records may be created and kept which indicate only the subject matter of each grievance, the resolution of each grievance, and the date of the resolution. These records shall not refer to any specific individuals, and they may be open to the public in accordance with the Arkansas Freedom of Information Act or pertinent Federal laws.

**Procedure**

**Step I: Initial Attempt of Resolution**

A. The grievant must submit a written statement to the Course or Clerkship Director and/or his/her Chair or another appropriate administrative official specifying the violation(s) alleged, the reason for the grievant’s belief that he or she is aggrieved, and the remedy sought. This written statement must be received by the appropriate official within fourteen (14) working days following the incident which forms the basis for the grievance.

B. Within ten (10) working days of receipt of the written statement, an attempt will be made to resolve the grievance by a discussion with the grievant. The Course or Clerkship Director, Departmental Chair, or appropriate administrative official have the discretion, after discussion with the grievant, to discuss the grievance with the respondent in an effort to resolve the grievance.

C. If the grievance is satisfactorily resolved by this discussion, the terms of the resolution shall be reduced to writing and shall be signed by the grievant, the Course or Clerkship Director, Departmental Chair, or appropriate administrative official, and the respondent (if the respondent has participated in any discussions in an effort to resolve the grievance and is affected by the resolution).

D. This initial attempt of resolution must conclude within ten (10) working days of the initial discussion with the grievant. At the end of this ten-day period, if the grievance cannot be resolved, the grievant can immediately proceed to Step II, presentation of a formal grievance to the Dean of the COM.

**Step II: Formal Grievance to the Dean**

A. Filing a grievance:

1. Grievances submitted to the Dean of the COM shall be in writing and shall provide the following information: name and address of the grievant; nature, date, and description of the alleged violation(s); name(s) of person(s) responsible for the alleged violation(s); requested relief for corrective action; and any background information the grievant believes to be relevant.

2. A grievance must be submitted to the Dean within ten (ten) working days of the completion of the initial attempt of resolution, outlined in Step I above.
B. Immediately upon receipt of a formal grievance, the Dean will give the respondent a copy of the grievance and will direct the respondent to submit to the Dean a written response to the charges within ten (10) working days. The respondent will be specifically warned not to retaliate against the grievant in any way. Retaliation will subject the respondent to appropriate disciplinary action.

C. Following receipt of the written response, the Dean may elect to review and decide the issue, or the Dean may refer the issue to the Appeals Board for a hearing. If the Dean decides the issue, the decision shall be final, and there shall be no appeal. If the Dean refers the issue to the Appeals Board, the grievance will be heard pursuant to the Pre-Hearing Procedures and Hearing Procedures listed below.

D. Pre-Hearing Procedures:

1. Selection of Grievance Panel: When a grievance is referred to the Appeals Board, a Grievance Panel, composed of six faculty members shall be selected as follows: The Dean, or the Dean’s designee, and the grievant will review the membership of the College of Medicine Appeals Board. The Dean, or the Dean’s designee, in that person’s sole discretion, shall remove any member who may be considered inappropriate for the hearing (e.g., a faculty member directly involved in the issue being appealed should not sit on the panel for that complaint). The names of the remaining members will then be written on tabs of paper, folded, and randomized by mixing. The grievant will draw names from the container. The first six names will constitute the Grievance Panel, provided they are available to attend the Hearing. The seventh name drawn is the first alternate, the eighth name drawn is the second alternate, respectively, etc., until all faculty names are listed in a sequence of priority.

2. Scheduling of Hearing: The Hearing will be conducted no sooner than ten (10) working days and no later than twenty (20) working days after the drawing unless the Dean, or the Dean’s designee, determines there is a specific reason why another time must be selected.

3. Representation: The grievant and the respondent may have one (1) person, who may be an attorney, to assist in the initiation, filing, processing, or hearing of the formal grievance. However, this person may not address the Grievance Panel, speak on behalf of the grievant or respondent, question witnesses, or otherwise actively participate in the hearing. The Grievance Panel may also be assisted and advised by University counsel at its discretion.

4. Evidence: No later than five (5) working days prior to the hearing, the grievant and the respondent shall provide the Dean, or the Dean’s designee, with all documents to be used and relied upon at the hearing and, also, with the name, address, and telephone number of any representative and witnesses. There will be a simultaneous exchange of this information between the parties, which will be facilitated by the Dean, or the Dean’s designee, five (5) working days before the date of the hearing.

5. Information to the Grievance Panel and Election of Chairperson: No later than three (3) working days prior to the Hearing, the Dean, or the Dean’s Designee, shall assemble the six members of the Grievance Panel. The Grievance Panel will be supplied with the documents and information submitted by the parties (as specified in paragraph 4 above), the date of the hearing will be confirmed. The Dean or the Dean’s Designee will then withdraw from the room. The Grievance Panel should convene briefly for the sole purpose of electing a faculty member
as chairperson and deciding whether the Grievance Panel requests the assistance of University counsel. The substance of the grievance shall not be discussed at this initial meeting, and neither the grievant, the respondent, nor their respective representatives are permitted to attend.

E. Hearing Procedures:

1. Record of the Hearing: The hearing will be recorded by recording devices supplied by UAMS. These recordings shall be maintained for a period of four (4) years after resolution of the grievance. The grievant or respondent may obtain a copy of the tapes from any recorded hearing, at the requesting party’s expense. The deliberations of the Grievance Panel will not be recorded.

2. Dean’s Announcement: At the beginning of the hearing, the Dean, or his/her designee, will announce the date, time, place, and purpose of the hearing, and will ask the members of the Grievance Panel to identify themselves by name and department. The grievant and the respondent will then identify themselves by name and department. Finally, any representative accompanying the grievant or the respondent shall identify himself or herself by name and title. The Dean or his/her designee will then give the Grievance Panel its charge. Following the charge, the Dean (or designee) will withdraw from the room.

3. Private Hearing: The hearing shall be conducted in private. Witnesses shall not be present during the testimony of any party or other witness. Witnesses shall be admitted for testimony only and then asked to leave. The grievant and the respondent may hear and question all witnesses testifying before the Grievance Panel.

4. Presentation of Case: The grievant and respondent shall be afforded reasonable opportunity for oral opening statements, closing arguments, their own testimony, and presentation of witnesses and pertinent documentary evidence, including written statements.

5. Grievance Panel Rights: The Grievance Panel shall have the right to question any and all witnesses, to examine documentary evidence presented, and to summon other witnesses or review other documentation as the Grievance Panel deems necessary. The Grievance Panel has the right to limit testimony and presentation of other evidence to that which is relevant to the violation(s) alleged and to further limit testimony and other evidence that is cumulative and unnecessary.

6. Grievance Panel Deliberation: After the hearing is concluded, the Grievance Panel shall convene to deliberate in closed session and arrive at a majority recommendation. The Grievance Panel shall make its determination of whether or not a rule, procedure or policy was not followed or was applied in an inequitable manner based upon the evidence presented at the hearing, which is relevant to the issue(s) before the Grievance Panel. The Grievance Panel may make recommendations for resolution of the dispute. Neither the grievant, the respondent, nor their representatives may be present during the Grievance Panel deliberations.

7. Transmittal of the Recommendation: Within four (4) working days after the hearing is concluded, the Grievance Panel shall transmit a written copy of its recommendation to the Dean (or Designee). The Dean (or Designee) will then mail, by certified mail, return receipt requested, a copy of the written document.
to the grievant and respondent at addresses previously provided by the grievant and the respondent.

8. Appeal of Recommendation of the Grievance Panel:

If either the grievant or the respondent wish to appeal the recommendation of the Grievance Panel, the grievant or respondent shall, within five (5) working days of the receipt of the recommendation, appeal the grievance recommendation to the Dean. The appeal shall be in writing, and it shall be based on one of the following: a substantial mistake of fact occurred, a fundamental misinterpretation of official policies is evident, or a significant procedural defect took place. These are the only grounds for contesting the determination of the Grievance Panel. Within five (5) working days of this appeal, if deemed appropriate by the Dean, the Grievance Panel will reconvene, in private, to consider whether there is merit to the appeal, review its previous determination, and revise it if appropriate. No new evidence or testimony shall be introduced at this time. Neither the grievant, the respondent, nor their representatives may be present during this panel deliberation. Within two (2) working days of its having reconvened, the Grievance Panel will present its determination, revised or unchanged, in writing to the Dean. Within five (5) working days of receipt of the determination from the Panel, the Dean may accept it, amend it, reverse it, or refer it back to the Panel for reconsideration. The grievant and the respondent shall be notified in writing of the Dean’s decision by certified mail, return receipt requested. The decision of the Dean shall be final, and there shall be no appeal.

If the Dean receives no appeal, by either the grievant or the respondent, within the five (5) working day period described above, the Dean may consider the recommendation at the end of that time period. The Dean may accept the Grievance Panel recommendation, amend it, reverse it, or refer the grievance back to the Grievance Panel for reconsideration. The decision of the Dean shall be final, and there shall be no appeal.

Approved – College of Medicine Executive Committee April 2003

GRIEVANCE PROCEDURE FOR ALLEGED DISCRIMINATION

The University of Arkansas is committed to the policy of providing educational opportunities to all qualified students regardless of their economic or social status, and will not discriminate on the basis of disability, race, color, sex, creed, veteran’s status, age, marital or parental status, or national origin. The Office of Human Relations acts on a campus-wide basis for all students, faculty, and employees regarding such matters, and within each college or school there is an associate or assistant dean designated to assist students of that college in utilizing a special grievance procedure.

Any student who alleges the existence of any policy, procedure, or practice prohibited by Titles VI and VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Executive Order 11246, the Rehabilitation Act of 1973 (Sections 503 and 504), Titles I and II of the Americans with Disabilities Act of 1990, and Section 402 of the Vietnam Era Veterans Readjustment Assistance Act of 1974, which prohibit discrimination on the basis of race, sex, color, national origin, religion, age, marital status, ethnic origin, disability and/or disabled veterans and veterans of the Vietnam Era, and their implementing regulations, should contact Dr. Richard Wheeler, Executive Associate Dean for Academic Affairs in the College of Medicine Dean’s Office (501-686-5348) for assistance in addressing such grievances. The specific UAMS grievance procedure for issues such as this as follows:
GRIEVANCE PROCEDURES RELATING TO SECTION 504,  
TITLE II, TITLE IX AND OTHER DISCRIMINATION COMPLAINTS  
BROUGHT BY STUDENTS AT THE UNIVERSITY OF ARKANSAS  
FOR MEDICAL SCIENCES (UAMS)

I. PURPOSE AND SCOPE

A. Policy Statement: UAMS prohibits discrimination on the basis of race, color, national origin, disability, sex, or age.

B. Purpose: The purpose of this procedure is to provide the process for addressing student grievances alleging discrimination based on race, color, national origin, disability, sex, or age.

II. DEFINITIONS

A. Grievance: Grievance means a complaint of a student alleging any policy, procedure, or practice prohibited by Title VI of the Civil Rights Act of 1964 (Title VI), Title IX of the Education Amendments of 1972 (Title IX), the Age Discrimination Act of 1975, Section 504 of the Rehabilitation Act of 1973 (Section 504), and Title II of the Americans with Disabilities Act of 1990 (Title II), and their implementing regulations.

B. Procedure: The steps set out in this procedure shall constitute the grievance procedure for discrimination complaints brought by students based on race, color, national origin, disability, sex, or age.


D. UAMS: UAMS means any college, department, subunit, or program operated by the University of Arkansas for Medical Sciences. When used in this Agreement, the term "college" shall be deemed to include the Graduate School.

E. Coordinator: The person serving as the designated Title IX and/or Section 504/Title II Coordinator.

F. Respondent: Respondent means a person alleged to be responsible for the violation alleged in a grievance. The term may be used to designate persons with direct responsibility for a particular action or those persons with supervisory responsibility for procedures and policies in those areas covered in the grievance.

G. Associate Dean Responsible for Student and Academic Affairs: Refers to the Associate Dean in the college where the grievant is enrolled as a student. Since there is no Associate Dean for the Graduate School, reference to Associate Dean shall be deemed to include the Assistant Dean for Graduate Studies and Institutional Reporting, where applicable.

H. Dean: Refers to the Dean of the college where the grievant is enrolled as a student.

III. FILING OF GRIEVANCE

A. Eligibility for Filing: Any UAMS student may file a grievance alleging discrimination on the basis of race, color, national origin, disability, sex, or age.
B. Pre-Grievance Meeting: Prior to the filing of a written grievance, the grievant(s) should first consult with the appropriate Associate Dean responsible for student and academic affairs, who shall attempt to resolve the grievance informally by agreement between the grievant and the respondent alleged to be directly responsible for the possible violation, and/or persons with immediate supervisory authority related to the grievance.

If the matter cannot be resolved at this level, a written grievance should be submitted to the appropriate Associate Dean responsible for student and academic affairs for subsequent processing in accordance with the procedures for formal grievances outlined below.

C. Filing a Grievance: Grievances filed with the appropriate Associate Dean shall be in writing and shall provide the following information:

- name and address of the grievant(s);
- nature, date and description of alleged violation;
- name(s) of persons responsible for the alleged violation;
- requested relief for corrective action; and
- any background information that the grievant believes to be relevant.

D. Time Limit for Grievance Filing: A grievance must be filed within twenty (20) calendar days of the occurrence of the alleged violation or within twenty (20) calendar days of the date the grievant became aware of the alleged violation. If the last day for filing a grievance falls on a Saturday, Sunday, or a day on which the University is closed for business, then the grievance may be filed on the first day following the Saturday, Sunday, or date when the University is closed.

E. Notification of Respondent(s): Immediately upon receipt of a formal grievance, the appropriate Associate Dean will give the respondent a copy of the grievance, and will direct the respondent to submit a written response to the charges within (10) calendar days. If the last day for filing a response falls on a Saturday, Sunday, or a day on which the University is closed for business, then the response may be filed on the first day following the Saturday, Sunday, or date when the University is closed. The respondent will be specifically warned not to retaliate against the grievant in any way. Retaliation will subject the respondent to appropriate disciplinary action.

F. Response: The response should include any denial, in whole or in part, of the charges. Failure to respond may subject the respondent to disciplinary action by the Dean of the appropriate college or other appropriate UAMS official.

G. Notification of Appropriate Administrative Officers: The appropriate Associate Dean will notify the appropriate administrative officers to whom the respondent reports of the existence of the complaint. However, all administrative officers will attempt to maintain the confidentiality of the information during the grievance process.

H. Role of the Associate Dean Responsible for Student and Academic Affairs in Discrimination Grievances Filed by Students: The appropriate Associate Dean responsible for student and academic affairs must conduct a preliminary investigation of the complaint, and take one of the following steps, within thirty (30) calendar days after its receipt:

1) dismiss the grievance on the grounds that the evidence submitted in support of the complaint or developed in the preliminary investigation does not warrant a detailed investigation or a formal hearing (for example: grievant failed to articulate the factual basis for his or her belief that discrimination occurred; the grievance is so weak, attenuated, or insubstantial that it is without merit, or so replete with incoherent statements that the grievance, as a whole, cannot be considered to be grounded in fact; the grievance anticipates discrimination that has not yet occurred);
(2) refer the grievance to a hearing before the Grievance Panel; or

(3) allow the parties to sign a written statement resolving the grievance. It should be understood that without the approval in writing by the appropriate Associate Dean, any agreement between the parties does not preclude further action by the University against either party.

It is the responsibility of the Associate Dean responsible for student and academic affairs of each College to insure the effective implementation, maintenance, processing, record keeping, and notifications required by the grievance procedures.

If an appeal of a dismissal of a grievance is filed, (see Section I below), the Associate Dean will forward a copy of the investigative report and determination to the Dean. If the Associate Dean refers a grievance to a hearing before the Grievance Panel, the Associate Dean will forward a copy of the investigative report to the Panel.

I. Appeal of Grievance Dismissal: A student may appeal the dismissal of his/her grievance by submitting a written request for review with his/her Dean. The request for review must be submitted within five (5) calendar days of receipt of the decision to dismiss. Upon receipt of an appeal of the dismissal of a grievance, the Dean shall carefully consider the relevant information contained in the appeal as well as the investigative report and determination of the Associate Dean, to ascertain that the evidence either submitted in support of the complaint or developed in the preliminary investigation did not warrant a detailed investigation or a formal hearing. The Dean will notify the student of his/her decision in writing within ten (10) calendar days of receipt of the request for review. The decision of the Dean will be final.

J. Notification of Dean: Upon receipt of a formal grievance from a student, the appropriate Associate Dean shall send a copy of the grievance to the Dean of the appropriate College. The Associate Dean or his/her designated representative shall be notified of any hearing and shall be required to attend all student grievance hearings pertaining to alleged discrimination on the basis of race, color, national origin, disability, sex, or age to serve as a University resource person. This individual shall not have a vote at the hearing, nor be present during deliberations of the Grievance Panel.

IV. PREHEARING PROCEDURES

A. Selection of Grievance Panel: When a grievance is referred to the Grievance Panel, the appropriate Associate Dean shall forward a copy of his/her investigative report to a six member Grievance Panel. The Grievance Panel shall be selected as follows: A Grievance Committee will be appointed by each College Dean, consisting of nine (9) faculty and nine (9) students. For every hearing held under this procedure, the person filing the grievance and the appropriate Associate Dean or designee jointly will meet within ten (10) calendar days after the decision to refer the grievance to the Grievance Panel, and review the members of the Grievance Committee, removing from consideration any member who may with reason be considered inappropriate for the hearing (e.g., a faculty member directly involved in the issue being grieved should not sit on the Panel for that grievance). The names of the remaining members will then be written on tabs of paper, folded, placed into separate containers for faculty and students, and randomized by mixing. The grievant will draw three names from each container. The first six names will constitute the Grievance Panel, which shall be composed of three faculty and three students. The remaining name shall be drawn alternatively from each container until all names are drawn in order to develop a list of alternate members. Should a Panel member be removed for any reason during the process, that member shall be replaced by an alternate having the same status (faculty or student).

B. Scheduling of Hearing of Grievance: Hearings before the Grievance Panel will be conducted no sooner than ten (10) calendar days and not later than twenty (20) calendar days after the selection of the Grievance Panel. The date of the hearing must be adhered to except for unusual circumstances which must be reported in writing as soon as possible to the appropriate Associate Dean. The hearing shall be conducted in accordance with the procedure set forth in Section V, A through G of this procedure.
C. Representation: The grievant and the respondent have the right to be assisted by no more than two representatives, including attorneys, at any point during the initiation, filing, processing, or hearing of the formal grievance; however, no representative may examine witnesses or otherwise actively participate in a hearing. The Panel may also be assisted and advised by an attorney or other representative at its discretion.

D. Evidence: The grievant and respondent shall provide the appropriate Associate Dean with all documents to be used and relied on at the hearing, and with the name, address and telephone number of their representative(s) and witnesses no later than seven (7) calendar days prior to the date of the hearing. There will be a simultaneous exchange of this information between the parties, which will be facilitated by the Associate Dean five (5) calendar days before the date of the hearing.

V. HEARING PROCEDURES

A. Record of Hearing: The hearing will be recorded by recording devices supplied by UAMS. These recordings shall be maintained for a period of three years after resolution of the grievance. The grievant or respondent may obtain a copy of the tapes from any recorded hearing, at the requesting party's expense. The deliberations of the Grievance Panel will not be recorded.

B. Counsel: The grievant and respondent shall have the right to advice of counsel of his/her choice; however, counsel may not examine witnesses or otherwise actively participate in any hearing.

C. Private Hearing: The hearing shall be conducted in private. Witnesses shall not be present during the testimony of any party or other witness. Witnesses shall be admitted for testimony only and then asked to leave. The parties may hear and question all witnesses testifying before the Grievance Panel.

D. Presentation of Case: The grievant and respondent shall be afforded reasonable opportunity for oral opening statements and closing arguments and/or presentation of witnesses and pertinent documentary evidence, including sworn, written statements.

E. Grievance Panel Rights: The Grievance Panel shall have the right to question any and all witnesses, to examine documentary evidence presented, and to summon other witnesses or review other documentation as the Panel deems necessary.

F. Grievance Panel Deliberation: After the hearing is concluded, the Grievance Panel shall convene to deliberate in closed session and arrive at a majority recommendation.

G. Transmittal of the Recommendation: Within five (5) calendar days after the hearing is concluded, the Grievance Panel shall transmit a written copy of its recommendation to the appropriate Associate Dean responsible for student and academic affairs, who will then mail, by certified mail, return receipt requested, a copy of the written document to the grievant and respondent at addresses previously provided by the grievant and the respondent.

H. Appeal of Recommendations of the Grievance Panel: If no appeal is received by the appropriate Associate Dean within seven (7) calendar days of receipt of the recommendation by the grievant and the respondent, any recommendations by the Grievance Panel shall be forwarded to the appropriate Dean for consideration. The Dean may accept the Grievance Panel recommendation, reverse it, or refer the grievance back to the Panel for reconsideration. If the last day for filing an appeal falls on a Saturday, Sunday, or a day on which the University is closed for business, then the appeal may be filed on the first day following the Saturday, Sunday, or date when the University is closed.

If the grievant or respondent wishes to appeal the recommendation of the Grievance Panel, the respondent and/or grievant shall, within seven (7) calendar days of the receipt of the recommendation,
appeal the grievance recommendation to the Dean through the Associate Dean. The appeal shall be in writing.

If an appeal is submitted, it will be transmitted to the appropriate Dean. The Dean shall review the appeal and notify the parties of his/her determination within ten (10) calendar days from the date of his/her receipt of the appeal. The decision of the Dean is final and may not be appealed further.

The Dean's review is the final institutional step in matters of discrimination grievances. However, nothing precludes the grievant or respondent from filing a complaint with any external agency that handles discrimination complaints.

VI. OTHER

A. Grievances Involving a Grievant and Respondent from Different Units of UAMS: Whenever a grievance is instituted by a student grievant in one college against a respondent in another college or unit, the grievance shall proceed through the Associate Dean, Dean and Grievance Committee from the college in which the student is enrolled.

B. Maintenance of Written Grievance Records: Records shall be kept of each grievance process. These records shall be confidential to the extent allowed by law, and shall include, at minimum: the written grievance complaint filed by the grievant, the written response filed by the respondent, the investigative report of the Associate Dean, the recording and documents of the hearing, the written recommendation of the Grievance Panel, the results of any appeal, the decision of the Dean, and any other material designated by the Associate Dean responsible for Student and Academic Affairs. A file of these records shall be maintained in the Office of the Associate Dean responsible for Student and Academic Affairs for each college.

For purposes of the dissemination of grievance precedents, separate records may be created and kept which indicate only the subject matter of each grievance, the resolution of each grievance, and the date of the resolution. These records shall not refer to any specific individuals and they may be open to the public in accordance with the Arkansas Freedom of Information Act or pertinent Federal laws.

C. Retaliation: No person shall be subjected to retaliation for having utilized or having assisted others in the utilization of the grievance process.

Adopted by UAMS Deans on 4/9/97
Appendix E – By-laws of the Honor System of the UAMS COM

Article 1: Structure and Elections

HONOR COUNCIL

The Honor Council shall consist of two members and one alternate from each class of the College of Medicine and one representative and one alternate from the Graduate School.

INVESTIGATION COMMITTEE

The Investigation Committee shall consist of one member from each class of the College of Medicine and one member from the Graduate School. The representative of the Graduate School shall act as the Investigation Committee Chairman. Members shall not be members of the Honor Council.

ELECTIONS

The freshman members and alternate of the Honor Council and Investigation Committee will be elected early in the fall. The other members and alternates of the Honor Council and the Investigation Committee will be elected near the end of an academic year and shall take office upon their election. The term of office for each member will be one year. In case of a vacancy for any reason, the class concerned will elect another member or alternate within one month of the time the vacancy occurs. If it is not possible to elect a replacement within that time frame, the Class President may appoint a representative to serve until such time as a class meeting can be held or until the absent member or alternate becomes available.

Article 2: Officers

The officers shall be elected annually at a meeting following class elections each spring. They shall take office immediately.

PRESIDENT - The President shall be elected from among the two Honor Council members of the Junior Class.

VICE-PRESIDENT - The Vice-President shall be elected from among the two Honor Council members of the Junior Class. The Honor Council may decide to elect Co-Presidents instead of a President and Vice-President.

SECRETARY - The Secretary shall be elected from among the members of the Honor Council.

Article 3: Duties of Officers and Members

PRESIDENT (or Co-Presidents)

It shall be the duty of the President (or one of the Co-Presidents) to contact the accused and inform him/her of an impending investigation. The President shall preside at all meetings and hearings of the Council, act as interpreter of the constitution, arrange for hearings, personally notify the accused of an impending hearing, and perform all duties common to this office. Each fall the President shall review the Honor Council file for the purpose of updating and maintaining them.

VICE PRESIDENT

It shall be the duty of the Vice President to carry out the duties of the President in his/her absence.
SECRETARY

The Secretary shall keep a record (minutes, notes, tape recording, etc.) of all meetings and proceedings of all hearings.

The members of the Honor Council shall act as voting members at all meetings and hearings. Alternates shall vote at regular meetings but not at hearings, unless they are temporarily substituting for a member in his/her absence.

INVESTIGATION COMMITTEE CHAIRMAN

It shall be the duty of the Chairman of the Investigation Committee to call a meeting of the Committee when informed by the President of an accusation. The Chairman shall preside at all meetings of the Committee, oversee all the proceedings of the Committee, and, prepare a typewritten report of the findings of the investigation for each hearing. This report is to be made an official part of the proceedings of the hearing. The report must be witnessed and signed by all members of the Committee and must be presented to the President at the beginning of the hearing.

The Chairman of the Investigation Committee shall prepare and present the case against the student at a hearing. If the Chairman is unable to perform these duties he or she will appoint, in writing, one of the Committee members to do so.

Article 4: Meetings

The Honor Council shall meet early in the fall after preclinical classes begin. Special meetings may be called at any time. The Honor Council shall meet in the spring to elect officers. The Chairman, upon notification of an accusation, must call a meeting of the Investigation Committee. All meetings shall be conducted according to parliamentary procedures.

Article 5: Quorum

Seven voting members shall constitute a quorum of the Honor Council for hearings and for meetings. Officers of the Honor Council shall vote. If a member of the Honor Council is unable to attend a hearing, the alternate from the same class shall serve as a voting member for that hearing.

Article 6: Honor Council File

The official Honor Council File shall be kept under lock in the office the Associate Dean for Student/Academic Affairs of the College of Medicine. The file shall be kept in loose-leaf binders. With the exception of files concerning hearings (see below), these files shall be exclusively for the educational use of the Honor Council members and shall not be used for any other purpose; including honor council hearings or legal proceedings, unless approved for this use by the Honor Council President and the Honor Council Advisor.

The record of meetings will be typed separately from the record of hearings. The tape recording made at a hearing may be reduced to writing at the discretion of the President. Records from hearings shall be kept in permanent locked file cabinets and shall only be available to the Dean of the College of Medicine, the Advisor to the Honor Council, and the President of the Honor Council for use during meetings or hearings, or for official Honor Council business.

In the fall of each year the President will review the file for the purpose of destroying outdated records and updating the file. An outdated record shall be defined as one older than six years, or the record of a hearing in which only a reprimand was given and the accused has since either graduated from the College of Medicine or Graduate School or has otherwise left school.
Destruction of any part of the file shall require the presence and witness of both the President of the Honor Council and the Advisor to the Honor Council.

**Article 7: Advisor**

The Executive Associate Dean for Academic Affairs of the College of Medicine shall, if willing, serve as Advisor to this Council. If he/she is unable or unwilling to do so, the Honor Council shall elect an Advisor from the faculty. The Honor Council Advisor may advise the Honor Council, its members, accusers, and the accused of procedures dictated by the Constitution of the Honor System.
Appendix F – Code of Professional Conduct

Preface

The Code of Professional Conduct is a series of principles and attendant rules that govern professional interactions. The Code consists of two complementary sections: professional obligations and professional ideals. "Obligations" refer to necessary professional behaviors that are required by the ethical foundation of medical practice, teaching, learning, and research. "Ideals" refer to desirable professional behaviors that professionals at all levels should make every effort to acquire because they enhance professional excellence.

A. Professional Obligations

1. Respect for learning- Students of medicine should recognize that ultimately learning the science and art of medicine is their responsibility and, importantly, that what they learn will impact on the quality of patient care they render.

2. Respect for persons- "Simply treat others as you would like to be treated."
   - Treat patients, colleagues, other health professionals, students, and teachers with the same degree of respect you would wish them to show you.
   - Treat patients with kindness, gentleness, and dignity.
   - Do not use offensive language, verbally or in writing, when referring to patients or their illnesses.
   - Respect the privacy and modesty of patients.
   - Do not harass others physically, verbally, psychologically, or sexually.
   - Do not discriminate on the basis of sex, religion, race, disability, age, or sexual orientation.

3. Respect for patient confidentiality- "Mind the patient’s business."
   - Do not share the medical or personal details of a patient with anyone except those health care professionals integral to the well being of the patient or within the context of an educational endeavor.
   - Do not discuss patients or their illnesses in public places where the conversation may be overheard.
   - Do not publicly identify patients, in spoken words or in writing, without adequate justification.
   - Do not invite or permit unauthorized persons into patient care areas of the institution.
   - Do not share your confidential Clinic Information System or VA computer system passwords with unauthorized persons.
   - Do not look up confidential data on patients without a professional "need to know".
   - Do not misuse electronic mail.

4. Honesty, Integrity- "Play by the rules of the ideal doctor."
   - Be truthful in verbal and in written communications.
   - Acknowledge your errors of omission and commission to residents and attendings.
   - Do not knowingly mislead others.
   - Do not cheat, plagiarize, or otherwise be dishonest.
   - Do not abuse special privileges, eg, making unauthorized long-distance telephone calls.
5. Responsibility for patient care - “It’s on your shoulders.”
- Obtain the patient’s informed consent for diagnostic tests or therapies.
- Follow up on ordered laboratory tests and complete patient record documentation conscientiously.
- Coordinate with your team the timing of information sharing with patients and their families to present a coherent and consistent treatment plan.
- Do not abuse alcohol or drugs that could diminish the quality of patient care or academic performance.
- Do not have romantic or sexual relationships with patients.

6. Awareness of limitations, professional growth - “Don’t be a super-doc.”
- Be aware of your personal limitations and deficiencies in knowledge and abilities and know when and whom to ask for supervision, assistance, or consultation.
- Know when and for whom to provide appropriate supervision.
- Do not engage in unsupervised involvement in areas or situations where you are not adequately trained.
- Avoid patient involvement when you are ill, distraught, or overcome with personal problems.
- Have all patient work-ups and orders countersigned by the appropriate supervisor.

7. Department as a professional - “Look, feel, and act like a physician.”
- Clearly identify yourself and your professional level to patients and staff; wear your name tag when in patient areas.
- Do not introduce yourself as “doctor” or allow yourself as a medical student to be introduced as “doctor.”
- Maintain a professional composure despite the stresses of fatigue, professional pressures, or personal problems.
- Do not write offensive or judgmental comments in patients’ charts.
- Dress in a neat, clean, professionally appropriate manner.

8. Avoiding conflicts of interest - “Place your patients and your reputation first.”
- Resolve all clinical conflicts of interest in favor of the patient.
- Do not accept non-educational gifts of value from drug companies or medical equipment vendors or suppliers.
- Do not participate in incentive programs, especially when this involves prescribing drugs made by the company.

9. Responsibility for peer behavior - “You are your brother- and sister-physician’s keeper.”
- Take the initiative to identify and help rehabilitate impaired students, physicians, nurses, and other employees with the assistance of the UAMS Physicians Health Committee, the Employee Assistance Program, or the employee’s supervisor.
- Report breaches of the Code of Professional Conduct to the appropriate person.

10. Respect for personal ethics - “To thine ownself be true.”
- You are not required to perform procedures (e.g. elective abortions, termination of medical treatment) that you, personally, believe are unethical, illegal, or may be detrimental to patients.
- You have an obligation, however, to inform patients and their families of available treatment options that are consistent with acceptable standards of medical care.
11. Respect for property and laws - "Treat it like it's yours."
• Do not misappropriate, destroy, damage, or misuse property of UAMS or its component institutions.
• Adhere to the regulations and policies of UAMS, and its component institutions, such as policies governing fire safety, hazardous waste disposal, and universal precautions.
• Adhere to local, state, and federal laws, and regulations.

12. Integrity in Research - "Be true to the search for truth."
• Report research results honestly in scientific and scholarly presentations and publications.
• Give proper credit and responsibility to colleagues and others who participated in the research when publishing and presenting reports.
• Report research findings to the public and press honestly and without exaggeration.
• Avoid potential conflicts of interest in research; disclose funding sources, company ownership, and other potential conflicts of interest in written and spoken research presentations.
• Adhere to the institutional regulations governing research using human subjects and animals.

B. Professional Ideals

1. Clinical virtues - "The art of medicine."
• Attempt to cultivate and practice clinical virtues, such as caring, empathy, and compassion.

2. Conscientiousness - "Listen to your voice."
• Fulfill your professional responsibilities with conscientiousness.
• Notify the responsible supervisor if something interferes with your ability to perform clinical tasks effectively.
• Learn from experience and grow from the knowledge gained from errors so as not to make the same mistake repeatedly.
• Dedicate yourself to lifelong learning and self-improvement by implementing a personal program of continuing education and continuous quality improvement.
• Complete all assignments accurately, thoroughly, legibly, and in a timely manner.
• Attend required classes, laboratories, seminars, and conferences except for justified absences.

3. Collegiality - "Be there for others."
• Cooperate with other members of the health care team in clinical activities and with other members of the research team in research activities.
• Teach others at all levels of education and training.
• Be generous with your time to answer questions from patients, and patients' family members.
• Adopt a spirit of volunteerism and altruism in teaching and in patient care tasks.
• Use communal resources (equipment, supplies, and funds) responsibly and equitably.

4. Personal health - "Take care of yourself and then you can care of your patients."
• Develop a lifestyle of good dietary habits, recreation, disease prevention, exercise, and outside interests to optimize physical and emotional health to enhance professional performance.

5. Objectivity - "Know who your patients should be."
• Avoid providing professional care to members of your family or to persons with whom you have a romantic relationship.

6. Responsibility to society - "Do for the good of all."
• Avoid unnecessary patient or societal health care monetary expenditures.
• Provide services to needy patients regardless of their ability to pay.

Conclusion
If the above rules are followed you as a medical student, and in the future a physician, should find your professional life extremely rewarding.

Adapted from Dartmouth-Hitchcock Medical Center, Code of Professional Conduct, 1996, with permission
## Appendix G – Honors Program Project Application Form

**HONORS RESEARCH PROJECT APPLICATION**  
**DATE RECEIVED:**

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**SIGNATURE OF STUDENT:**

### ADVISOR SECTION

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**SIGNATURE OF ADVISOR:**
Appendix I – Constitution and By-Laws of the COM Student Council

Article I (Name)

The organization shall be named the Student Council of the UAMS College of Medicine Student Body.

Article II (Object)

The objective of this student council shall be to maintain good will among medical students and to promote educational and social standing for the medical profession in this state and country.

Article III (Membership)

Membership in this student council shall consist of two representatives and one alternate elected from each class of the College of Medicine during regular class elections.

Article IV (Meetings)

Section 1. Regular meetings of the Student Council shall be held monthly.

Section 2. Special meetings shall be called at any time by the President, by a majority vote of the Student Council, or by a written request from twenty members of the Student Body of the College of Medicine. This meeting must be publicly announced.

Article V (Officers)

Section 1. The officers of this group shall be a President, a Vice-President, a Secretary, and a Treasurer.

Section 2. The officers of this council shall be elected by majority vote of the members of the Council at the last regular meeting of the year. The new officers will assume their duties at the last regular meeting of the year.

Section 3. The voting members of the Student Council shall consist of the Student Council officers and two elected representatives of each class.

Section 4. Vacancies in office may be filled at any regular meeting by vote of the Council.

Article VI (Amendments)

Section 1. The constitution and by-laws may be amended by a two-thirds majority vote cast by the student body.

By-Laws
Article I (Duties of Officers)

Section 1. The duties of the President are to:

   a. Preside at all meetings of the Council.
   b. Officially represent the student body of the College of Medicine.
   c. Appoint any committees necessary to conduct the functions of the Student Council.
   d. Alert the Council members in writing, that a regular business meeting is to be called and to state the purpose of the session.

Section 2. The duties of the Vice-President are to:

   a. Act for the President in his/her absence.

Section 3. The duties of the Secretary are to:

   a. Keep minutes of all meetings.
   b. Notify all officers of their election and committees of their appointments.
   c. Present a written report at the annual meeting.

Section 4. The duties of the Treasurer are to:

   a. Pay all bills and keep a record of all money received and expended, giving a report at each meeting.

Section 5. All officers, upon retiring, shall deliver to their successors all accounts, record books, papers or other property belonging to the Student Council.

Article II (Quorums)

A quorum shall consist of two officers plus a representative from at least three of the four classes. If a quorum is not present, a mailed secret ballot must be initiated the following day to all Council members.

Article III (Passage of Motion)

Passage of all motions shall require an affirmative vote by at least one-half of the quorum present.

Adopted August 6, 1980
Appendix J – General Confidentiality Policy

You will be asked to sign this policy on-line as a requirement to obtain a UAMS Network Log-on

UAMS

UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES

UAMS ADMINISTRATIVE GUIDE _ NUMBER: 3.1.15
SECTION: ADMINISTRATION AREA: GENERAL ADMINISTRATION SUBJECT: CONFIDENTIALITY POLICY

SCOPE

UAMS workforce as well as non-UAMS employees, vendors, consultants and other visitors who may access Confidential Information.

DEFINITIONS

Confidential Information includes information concerning UAMS research projects, confidential employee and student information, proprietary information of UAMS, and sign-on and password codes for access to UAMS computer systems. Confidential information includes Protected Health Information. Confidential Information includes information maintained or transmitted in any form, including verbally, in writing, or in any electronic form.

Protected Health Information (PHI) means information that is part of an individual’s health information that identifies the individual or there is a reasonable basis to believe the information could be used to identify the individual, including demographic information, and that (i) relates to the past, present or future physical or mental health or condition of the individual; (ii) relates to the provision of health care services to the individual; or (iii) relates to the past, present, or future payment for the provision of health care services to an individual. This includes PHI which is recorded or transmitted in any form or medium (verbally, or in writing, or electronically). PHI excludes health information maintained in educational records covered by the federal Family Educational Rights Privacy Act and health information about UAMS employees maintained by UAMS in its role as an employer.

To access any other terms or definitions referenced in this policy: http://hipaa.uams.edu/DEFINITIONS%20-%20HIPAA.pdf

POLICY

UAMS prohibits the unlawful or unauthorized access, use or disclosure of Confidential Information obtained during the course of employment or other relationship with UAMS. As a condition of employment, continued employment or relationship with UAMS, the UAMS workforce and all non-UAMS employees, vendors, consultants and other visitors who may access Confidential Information shall be required to sign the UAMS Confidentiality Agreement approved by the UAMS Office of General Counsel (Appendix A). UAMS will provide training for each of its workforce members on the importance of maintaining
confidentiality and the specific requirements of state and federal law, including the HIPAA Privacy Regulations and laws protecting the privacy of students and employees, as well as UAMS policies.

**PROCEDURES:**

1. **Confidentiality Agreement:** As a condition of employment, continued employment, or relationship with UAMS, UAMS will require its workforce and all non-UAMS employees, vendors, consultants and other visitors who may access Confidential Information to sign the UAMS Confidentiality Agreement.

   All new employees, students, or vendors requiring access to electronic Confidential Information (computer systems) must have a current Confidentiality Agreement on file in the IT Security Office. The person signing the agreement will receive a copy of the Confidentiality Policy with the Confidentiality Agreement. The UAMS IT Security Office will maintain signed Confidentiality Agreements. It is the responsibility of the manager hiring individual vendors or consultants or receiving sales representatives or service technicians (who do not require electronic access but who may have access to Confidential Information) to require execution of the appropriate confidentiality agreements approved by the UAMS Office of General Counsel and to send those documents to the UAMS IT Security Office.

   **Restriction on Access, Use and Disclosure of Confidential Information:** UAMS limits and restricts access to Confidential Information and computer systems containing Confidential Information based upon the specific job duties and functions of the individual accessing the information. UAMS will restrict access to Confidential Information to the minimum necessary to perform individual job functions or duties. UAMS will further limit and control access to its computer systems with the use of unique sign-on and password codes issued by the IT Security Office to the individual user authorized to have such access. Users are prohibited from sharing their password or using the access codes of another.

   Authorization to access, use or disclose Protected Health Information also is governed by the UAMS Use and Disclosure Policy [3.1.28].

   UAMS will control and monitor access to Confidential Information through management oversight, identification and authentication procedures, and internal audits. UAMS managers and heads of departments will have the responsibility of educating their respective staff members about this Policy and the restrictions on the access, use and disclosure of Confidential Information, and will monitor compliance with this Policy.

3. **Sales Representatives and Service Technicians:** Sales representatives and service technicians must register in the appropriate area and execute the Confidentiality Agreement prior to any exposure to UAMS Confidential Information.
4. **Media:** All contacts from the media regarding any Confidential Information must be referred to the UAMS Office of Communications and Marketing (501-686-8998 or pager 501-395-5989).

5. **Violation of Confidentiality Policy:** Individuals shall not access, use, or disclose Confidential Information in violation of the law or contrary to UAMS policies. Each individual allowed by UAMS to have access to Confidential Information must maintain and protect against the unauthorized access, use or disclosure of Confidential Information. Any access, use or disclosure of Confidential Information in any form – verbal, written, or electronic – that is inconsistent with or in violation of this Policy will result in disciplinary action, including but not limited to, immediate termination of employment, dismissal from an academic program, loss of privileges, or termination of relationship with UAMS. Any workforce member whose relationship with UAMS is not terminated as a result of violating this Policy must, in order to continue working at or attending UAMS, complete the HIPAA training module through the UAMS HIPAA Office.

All UAMS employees and others subject to this Policy must report any known or suspected incidents of access, use or disclosure of Confidential Information in violation of this Policy or in violation of the law to the HIPAA Office at 603-1379.

Date: October 23, 2009
CONFIDENTIALITY AGREEMENT

As a condition of my employment, continued employment or relationship with UAMS, I agree to abide by the requirements of the UAMS Confidentiality Policy and with federal and state laws governing confidentiality of a patient’s Protected Health Information, and I agree to the terms of this Confidentiality Agreement. I understand and agree that the confidentiality laws require me to maintain the confidentiality of this information even when I am not at work or acting within the scope of my relationship with UAMS and also after my employment or relationship with UAMS ends.

I understand and agree that if I access, use or disclose Confidential Information in any form – verbal, written, or electronic – in a manner that is inconsistent with or in violation of the Confidentiality Policy, UAMS may impose disciplinary action, including but not limited to, immediate termination of employment, dismissal from an academic program, loss of privileges, or termination of relationship with UAMS.

I understand that when I receive a sign-on code to access the UAMS Network and Systems, I have agreed to the following terms and conditions:

☐. The sign-on and password codes assigned to me are equivalent to my signature, and I will not share the passwords with anyone.
☐. I will be responsible for any use or misuse of my network or application system sign-on codes.
☐. I will not attempt to access information on the UAMS Network and Systems except to meet needs specific to my job or position at UAMS.

I acknowledge that I have read the terms of this Confidentiality Agreement, and that I have received a copy of the Confidentiality Policy.

Last four digits of SS#

(Signature)

Print Full Name:

Date: ____________________ Department: __________________________

Witness at UAMS Orientation only, otherwise not required:

Supervisor/Manager’s Signature: Date:
Appendix K - E-mail Access and Usage

PURPOSE

To inform departments within the University of Arkansas for Medical Sciences (UAMS) of the procedure to be followed while accessing and using e-mail.

SCOPE

UAMS faculty, employees, students, contract personnel, vendors, volunteers, and official visitors.

DEFINITIONS

Confidential Information includes information concerning UAMS research projects, confidential employee information, information concerning the UAMS research programs, proprietary information of UAMS, and sign-on and password codes for access to UAMS computer systems. Confidential information shall include Protected Health Information.

Protected Health Information (PHI) means information that is part of an individual’s health information that identifies the individual or there is a reasonable basis to believe the information could be used to identify the individual, including demographic information, and that (i) relates to the past, present or future physical or mental health or condition of the individual; (ii) relates to the provision of health care services to the individual; or (iii) relates to the past, present, or future payment for the provision of health care services to an individual. This includes PHI which is recorded or transmitted in any form or medium (verbally, or in writing, or electronically). PHI excludes health information maintained in educational records covered by the federal Family Educational Rights Privacy Act and health information about UAMS employees maintained by UAMS in its role as an employer.

To access any other terms or definitions referenced in this policy:
http://hipaa.uams.edu/DEFINITIONS%20-%20HIPAA.pdf
POLICY

This policy applies to all usage of electronic mail systems within UAMS where the mail either originated from or is forwarded into a UAMS computer network. It applies to all e-mail users including, but not limited to, faculty, staff, students, and volunteers if UAMS information is involved regardless of whether UAMS computer resources are used or not.

PROCEDURES

A. PRIVACY, CONFIDENTIALITY AND PUBLIC RECORDS CONSIDERATIONS

The UAMS electronic mail (e-mail) system is available to authorized users for the expressed purpose of conducting UAMS business. Reasonable efforts will be made to maintain the integrity and effective operation of its electronic mail systems (e-mail), but users are advised that those systems should not be regarded as a secure medium for the communication of sensitive or confidential information. Any e-mails sent outside of the UAMS network containing Confidential Information, including ePHI, must be encrypted. Refer to Section D below.

B. PERMISSIBLE USES OF ELECTRONIC MAIL

1. Authorized Users: Only UAMS faculty, staff, and students and other persons who have received permission under the appropriate UAMS authority are authorized users of UAMS electronic mail systems and resources.

2. Purpose of Use: The express purpose of UAMS electronic mail resources is for UAMS business, including academic, clinical and research pursuits.

C. PROHIBITED USES

E-mail is the property of UAMS. Prohibited uses of electronic mail include, but are not limited to:

1. Using for personal monetary gain or for commercial purposes that are not directly related to UAMS business.

2. Sending copies of documents in violation of copyright laws.

3. Including the work of others in electronic mail communications in violation of copyright laws.

4. Unapproved capturing or opening of another individual’s electronic mail except as required as part of assigned job duties for authorized employees to diagnose and correct delivery problems.

5. Using electronic mail to harass or intimidate others or to interfere with the ability of others to conduct University business (this includes inappropriate or offensive content, chain-letters and/or “spamming” - sending non-approved / non-solicited advertisements to other individuals on campus.)

6. Using electronic mail systems for any purpose restricted or prohibited by state and federal laws and regulations or by UAMS Policy.

7. "Spoofing" - constructing an electronic mail communication so it appears to be from someone else.

8. Attempting unauthorized access to electronic mail or attempting to breach any security measures on any electronic mail system, or attempting to intercept any electronic mail transmissions without proper authorization.
Broadcasting messages to “Everyone” within UAMS without prior permission from the UAMS e-mail administrator (see Section I below).

Using custom backgrounds, special formats, or colors within your email. Refrain from this practice and use plain, white backgrounds and professional formats. The only exceptions to this are special emails crafted to be official UAMS business invitations, announcements, advertisements, or pamphlets.

Use of quotations or sayings within your message or signature block. This practice has great potential to offend so quotations must not be used and any that exist must be removed. Again, the exceptions would be special official UAMS business emails crafted for specific purpose.

D. CONFIDENTIAL INFORMATION AND ePHI IN E-MAILS/ELECTRONIC COMMUNICATIONS

1. E-mail is secured automatically inside the UAMS network. Any e-mails sent outside of the UAMS network containing Confidential Information, including ePHI, must be encrypted.
   a. The UAMS workforce may utilize encryption methods of their own choosing.
   b. It is recommended that the UAMS workforce utilize the enterprise secure e-mail gateway solution.
      (1) This is easily accomplished by clicking on the “mark secure” button provided on the standard toolbar in Outlook, or
      (2) The word [secure] typed with the brackets into the subject line will also encrypt the message
      (3) Communication with other organizations in many cases will be set up for automatic encryption and a list of these organizations will be provided.
   2. The patient’s e-mail address is part of the patient’s Protected Health Information and must be protected as any other PHI in accordance with all applicable laws, regulations and UAMS policies.
   3. For Protected Health Information (PHI) that is subject to the minimum necessary requirements of the HIPAA regulations, reasonable efforts must be made to limit the use or disclosure of, and requests for, PHI to the minimum necessary to accomplish the intended purpose of the use, disclosure or request. Policy 3.1.25 Minimum Necessary
   4. UAMS takes the steps necessary to make sure that your e-mail and other computer messages are secure, but no one can guarantee the security and privacy of e-mail messages. Therefore, it is best not to use e-mail to send highly sensitive information.
   5. Confirm the e-mail address before sending any e-mail containing Confidential Information or ePHI.
   6. Caution must be taken when using distribution lists or forwarding e-mails that contain Confidential Information and ePHI.
   7. UAMS e-mail may not be auto-forwarded to any non-UAMS account, including but not limited to personal and commercial e-mail accounts such as AOL, Yahoo, or MSN, with the exception that UAMS e-mail may be auto-forwarded to VA and Arkansas Children’s Hospital e-mail accounts.
   8. ePHI contained within the content or in attachments of UAMS email should be deleted after use especially in the case of larger attachments containing multiple patients’ PHI.
E. PROVIDER COMMUNICATIONS WITH PATIENTS VIA E-MAIL

1. The decision to correspond with patients via e-mail is left to the discretion of the physician or clinic. It is the responsibility of the clinic to determine additional e-mail communication guidelines, such as (a) how often e-mail will be checked; (b) instructions for when and how to escalate to phone calls and office visits; and (c) the types of transactions that are appropriate for e-mail.
2. Any ePHI originated by UAMS must be encrypted when being sent via e-mail.
3. UAMS takes the steps necessary to secure e-mail and other computer messages, but no one can guarantee the security and privacy of e-mail messages. Use caution when sending highly sensitive information.
4. E-mail communication is a convenience for the patients and should not be used for emergencies or time-sensitive situations.
5. Keep in mind that the patient’s e-mail address is part of the patient’s Protected Health Information and must be protected as any other PHI in accordance with all applicable laws, regulations and UAMS policies.
6. Before sending the e-mail containing Confidential Information or ePHI, confirm the e-mail address to ensure it does not contain any typographical errors.
7. E-mail messages must include (a) information in the subject line, such as prescription refill, appointment request or other information generally describing the purpose of the e-mail; and (b) patient name, telephone number and patient identification number in the body of the message.
8. Clinically relevant messages and responses will be documented in the patient’s medical record.
9. Upon a patient’s receipt of e-mail, patients will be provided guidelines of using e-mail for communicating with their provider.

F. UAMS ACCESS AND DISCLOSURE OF COMMUNICATIONS

To the extent permitted by law, UAMS reserves the right to access and disclose the contents of faculty, staff, students, and other users’ electronic mail without the consent of the user. UAMS will do so when it believes it has a legitimate business need including, but not limited to, those listed in section F 6. (below), and only after explicit authorization is obtained from the appropriate UAMS authority (see Section G below).

1. Faculty, staff, and other non-student users are advised that UAMS’ electronic mail systems should be treated like a shared filing system, i.e., with the expectation that communications sent or received on UAMS business or with the use of UAMS resources may be made available for review by any authorized UAMS official for purposes related to UAMS business.
2. Electronic mail of students may constitute "education records" subject to the provisions of the federal statute known as the Family Educational Rights and Privacy Act of 1974 (FERPA). UAMS may access, inspect, and disclose such records under conditions that are set forth in the statute.
3. Any user of UAMS electronic mail resources who makes use of an encryption device to restrict or inhibit access to his or her electronic mail must provide access to such encrypted communications when requested to do so under appropriate UAMS authority.
4. UAMS will not monitor electronic mail as a routine matter but it may do so to the extent permitted by law as UAMS deems necessary for purposes of maintaining the integrity and effective operation of UAMS electronic mail systems.

5. Limitations on Disclosure and Use of Information Obtained by Means of Access or Monitoring: To the extent permitted by law, the contents of electronic mail communications, properly obtained for UAMS purposes, may be disclosed without permission of the user. UAMS will attempt to limit disclosure of particular communications if disclosure appears likely to create personal embarrassment, unless such disclosure is required to serve a business purpose or satisfy a legal obligation.

   Special Procedures to Approve Access to, Disclosure of, or Use of Electronic Mail Communications: Individuals needing to access the electronic mail communications of others, to use information gained from such access, and/or to disclose information from such access and who do not have the prior consent of the user must obtain approval in advance of such activity from the appropriate UAMS authority. The request for approval shall take into consideration ways to minimize the time and effort required to submit and respond to requests, the need to minimize interference with UAMS business, and protection of the rights of individuals. The request for granting access to electronic communications is provided in Section L below.

6. UAMS will inspect and disclose the contents of electronic mail in accordance with the established approval process (see section G below). Such action will be taken as necessary; to include:
   a. To respond to legal processes or fulfill UAMS obligations to third parties,
   b. in the course of an investigation triggered by indications of misconduct or misuse,
   c. as needed to protect health and safety,
   d. as needed to prevent interference with the academic, clinical or research missions of the organization,
   e. as needed to locate substantive information required for UAMS business, or
   f. as required under the Arkansas Freedom of Information Act.

G. PROCEDURE FOR GRANTING APPROVAL TO ACCESS ELECTRONIC COMMUNICATIONS OF OTHERS

1. The following information will be required prior to approval of access to electronic communications addressed to others:
   a. Name and title of the person whose communications will be accessed;
   b. Name and title of the person who is requesting access;
   c. Name and title of the person who will do the accessing;
   d. Detailed description of why the access is needed;
   e. Required duration of the access or dates within which access is desired;
   f. What will be done with the accessed messages? With whom will they be shared?

2. Anyone may request access of messages through the UAMS Technical Support Center. The following approvals are required.
   a. Department Chairpersons and Unit Directors are the first level of approval;
   b. Deans or Vice Chancellors are the final level of approval.
3. The IT Security Office will obtain appropriate approval and will maintain copies of all requests.

4. The person requesting the access will be given the following advice and reminders:
   a. A reminder that concerns about fiscal misconduct or criminal activity should not be investigated by individuals or departments but should be referred to University Police, Hospital Compliance, or Internal Audit staff.
   b. A reminder that to the extent permitted by law, the contents of electronic communications obtained after appropriate authorization may be disclosed without the permission of the employee. At the same time, UAMS will attempt to refrain from disclosure of particular messages if disclosure could create personal embarrassment, unless such disclosure is required to serve a business purpose or satisfy a legal obligation.

H. RETENTION & STORAGE OF E-MAIL

E-mail servers are backed up completely on a daily basis. Two (2) full backups are retained in secure storage in the event of a complete network server failure. The e-mail backup and recovery system is intended to provide a means of recovery from failure of an entire e-mail server or e-mail storage device. Routine recovery capabilities and procedures do not include a capacity to recover e-mail of a specific user. E-mail recovery procedures will not be used to recover specific e-mail messages.

I. E-MAIL SITE MESSAGES

Site messaging is a tool used for campus e-mail alerts and notifications that are directed to the entire campus or a select group (i.e., Department Heads, Business Managers). These notifications are restricted and may ONLY be sent by the e-mail administrator. Messages must also have prior approval before delivery of the site message is transmitted by the e-mail system. To request sending of a site message:

1. The party requesting an e-mail site message should contact the UAMS IT Technical Support Center (TSC) by calling 686-8555 or sending an e-mail message to ‘Tech Support Center’ utilizing the “Campus-Wide Email Request” web site http://intranet.uams.edu/announcements.htm
2. Except in emergency situations, the requested Site Message text must be received by the UAMS Technical Support Center no later than two days prior to the requested send event.
3. Technical Support Center logs the call and assigns call to Communications and Marketing.
4. Communications and Marketing will contact requesting party for verification of message and targeted individuals or group.
5. Communications and Marketing formats messages and forwards to the IT Server Support group.
   a. Non-UAMS function announcements will not be approved.
   b. Emergency site messages are processed by the Server Support group.

J. E-MAIL ETIQUETTE
When you send e-mail, remember these points:

1. Don’t say anything in an e-mail that you wouldn’t say in a letter on your office letterhead. E-mail should contain appropriate language and be rational, reasonable and respectful.

2. Communication should be done within a framework that does not constitute negligence or willful disregard of harmful consequences that might ensue to the institution and its employees.

3. Be aware of the difference between reply and reply-all. Assure that your communication is sent to the proper individual(s) - not inadvertently sent to someone that has no need for the information, or is adversely affected by the communication.

4. E-mail is not a forum to discuss significant events, opinions affecting health care in the institution, lengthy debates or arguments.

K. SANCTIONS

Violation of this Policy will result in disciplinary action, in accordance with Policy 4.4.02. UAMS IT Security can also take immediate action to investigate and address inappropriate use in order to protect PHI and enterprise security.

L. REQUEST TO ACCESS ELECTRONIC COMMUNICATIONS OF OTHERS

Our department requests authority to access electronic communications sent to an individual as described below:

Name, Title, and Department of person whose communications would be accessed:

____________________________________  ___________________________ Name & Title
Department

Name, Title, and Department of person requesting access:

____________________________________  ___________________________ Name & Title
Department

Name, Title, and Department of person who will do the accessing (if different than above):

____________________________________  ___________________________ Name & Title
Department

Reason for access request:

________________________________________________________________________
________________________________________________________________________

How long should the special access last? _______________________________________
________________________________________________________________________

What will be done with the accessed messages? With whom will they be shared?

________________________________________________________________________
________________________________________________________________________

___________________________________________________ _____________________
Signature of Requesting Person      Date
Upon approval, this form is to be delivered to the following person as authorization for them to implement the requested special access: Steve Cochran, Director of Information Technology Security, Slot 802
Appendix L - Appropriate Treatment of Medical Students in an Educational Setting

Preamble:

It is the basic philosophy of the UAMS College of Medicine that optimal learning occurs in an atmosphere of mutual respect. The medical learning environment is expected to facilitate students’ acquisition of the professional and collegial attitudes necessary for effective caring and compassionate health care. The development and nurturing of these attitudes requires mutual respect between teachers (including faculty, residents, fellows, nurses, staff, and students in a teaching role) and students at all levels, and between each student and his or her fellow students. While it is the responsibility of the Faculty and the College to provide a proper atmosphere for education, it is also the responsibility of the student to develop and maintain personal honor and integrity, as well as compassionate and ethical behavior. Students must pledge their utmost effort to acquire the knowledge, skills, attitudes, and behaviors required to fulfill all educational objectives established by the faculty. This policy is set forth to assist in the maintenance of an optimal learning environment, but is not meant to be used as an excuse for students to disregard their own responsibilities in the educational process.

Definition of Mistreatment:

Mistreatment is behavior that adversely affects the learning environment and negatively impacts the student/teacher relationship. Inappropriate and unacceptable behaviors promote an atmosphere in which abuse is accepted and perpetuated in medical training. Examples of mistreatment include, but are not limited to:

- Harmful, injurious, or offensive conduct
- Verbal attacks
- Insults or unjustifiably harsh language in speaking to or about a person
- Public belittling or humiliation
- Threats of physical harm
- Physical attacks (e.g., hitting, slapping, or kicking a person)
- Requiring performance of personal services outside of the educational environment (e.g., shopping, baby sitting)
- Threatening with a lower grade or poor evaluation for reasons other than course/clerkship performance
- A pattern of intentional neglect or lack of communication
- Disregard for student safety
- Unnecessary or avoidable acts or words of a negative nature inflicted by one person on another person or persons intended to cause humiliation. (Pointing out during rounds, conferences, and the like, that a student has not adequately prepared for
his/her assignments or learned required material is \textbf{not} mistreatment unless it is done in an inappropriate manner)

**Exclusions from this Policy:**

Specifically, this policy is not intended to include complaints of sexual harassment or complaints of discrimination on the basis of disability, race, color, sex, creed, veteran’s status, age, marital or parental status, or national origin. The College of Medicine has specific policies to address these complaints (Please see Student Handbook).

**Process for Reporting and Dealing with Allegations of Mistreatment:**

Stage 1: When it is felt that an incident of mistreatment has occurred, the parties directly involved should try to resolve the matter themselves. Many such situations are amenable to resolution in this manner. However, it is acknowledged that this informal approach may fall short at times, because of reluctance of the student with a complaint to directly interact with the accused, intransigence of the accused, or differing perceptions of the incident by the parties involved. In such cases, the following steps shall be taken:

Stage 2: When the matter cannot be resolved in Stage 1, assistance should be sought from representatives of the Student Advocacy Council. These elected peers in the various classes may, with the help of their faculty advisors, be able to resolve the matter either by counseling the student with a complaint on appropriate steps to take, by directly intervening with the accused, or by referring the matter to the next stage. When the situation is elevated to Stage 2, anonymity of the student and the accused can no longer be maintained. Nevertheless, confidentiality is critical, and no information may be given to those not directly involved in the process.

Stage 2B: If the matter cannot be resolved at Stage 2, the Student Advocacy Council or the accuser should directly consult the Executive Associate Dean for Academic Affairs. It is possible that an individual in the administration, such as the Executive Associate Dean, can intervene in a manner not possible for students in the Student Advocacy Council. For example, it might be possible for this individual to directly discuss the problem with the accused or his/her Chair or supervisor. When the situation reaches this stage, in the case where the accused is a faculty member, the Chair of the involved department should be notified so that he/she can be involved in any discussions with the accused if appropriate. In a case where the accused is a Chair, the Dean should be notified.

Stage 3: It is anticipated that most situations will be resolved in Stages 1 or 2. For those unusual cases that are not resolved, the student should discuss the problem with the Executive Associate Dean for Academic Affairs. If the accused is within the College of Medicine, the student will be advised of their right to file a formal
grievance utilizing the “Grievance Procedure” as defined under “Academic, Disciplinary, Administrative Actions, and Grievance Procedures” in the Student Handbook. If the accused is outside of the College of Medicine (e.g., Nurse, Respiratory Tech, etc.), the Executive Associate Dean for Academic Affairs will communicate the problem to the accused’s supervisor and they will work together to determine the appropriate formal grievance procedure.

Protection from Retaliation:

Every effort will be made to protect alleged victims of mistreatment from retaliation if they seek redress. Retaliation will not be tolerated. To help prevent retaliation, those who are accused of mistreatment will be informed that retaliation is regarded as a form of mistreatment. Accusations that retaliation has occurred will be handled in the same manner as accusations concerning other forms of mistreatment.

Malicious Accusations:

A complainant or witness found to have been dishonest or malicious in making the allegation of mistreatment will be subject to disciplinary action.

Education:

Education is the cornerstone in the prevention of student mistreatment. A thorough and on-going effort should be made to inform all involved individuals about the appropriate treatment of medical students, and of this policy dealing with alleged mistreatment. To that end, the following notification mechanisms will be utilized:

Medical Students – This policy will be included in the Student Handbook. A discussion of mistreatment in general, as well as of this policy in particular, will take place each year during freshman and junior orientations. Each course and clerkship director will be encouraged to include this policy in course and clerkship related policy materials.

Faculty, Residents, and Fellows – An informative written message will be sent each year from the Dean’s office to all Department Chairs. The Dean will direct the Basic Science Chairs to convey the information to all Basic Science Course Directors. The Course Directors, in turn, will be asked to convey the information to all faculty teaching in their courses. The Dean will direct the Clinical Chairs to assure that all clerkship and course directors of clinical courses, as well as all residency/fellowship training program directors, faculty, fellows, and residents in their departments, are aware of the College’s philosophy on the appropriate treatment of medical students, and of this policy. The Dean’s Office will also ask the AHEC office to convey this information and policy to all AHEC directors, as well as to their faculty and residents.
Nurses – An informative written message will be sent each year from the Dean’s Office to the individual in charge of nursing at each of the major teaching hospitals utilized by our students. They will be asked to make this information, and this policy in particular, known to the nurses in their institution by whatever means they feel the most appropriate.

Summary:

It is hoped that this policy will promote a positive environment for learning in the College of Medicine and will affirm the importance of collegiality and respect for others.

Approved by the Council of Department Chairs – 4/1/2002; Approved and authorized by the Dean’s Executive Committee – 4/25/2002 (pending approval by full faculty); Approved by vote of the Faculty – 12/18/02
Appendix M - Hold Directory Information Form

1. “Directory Information” includes, but is not limited to, the student's name; address; telephone listing; electronic mail address; photograph; date and place of birth; major field of study; grade level; enrollment status (e.g., undergraduate or graduate, full-time or part-time); dates of attendance; participation in officially recognized activities and sports; weight and height of members of athletic teams; degrees, honors and awards received; and the most recent educational agency or institution attended.

“Directory Information” also includes a student ID number, user ID, or other unique personal identifier used by the student for purposes of accessing or communicating in electronic systems, but only if the identifier cannot be used to gain access to education records except when used in conjunction with one or more factors that authenticate the user's identity, such as a personal identification number (PIN), password, or other factor known or possessed only by the authorized user. “Directory Information” does not include a student's social security number.

2. Pursuant to the Family Education Rights and Privacy Act of 1974 (FERPA, 20 U.S.C. § 1232g), you have the right to withhold the public disclosure of all “Directory Information.” If you want to withhold public disclosure of your “Directory Information,” mark the appropriate space below and return the signed and dated form to the Registrar within one week following registration. However, please understand that this information may still be provided to University officials and other specified individuals as prescribed by FERPA. (See University-wide Administrative Memorandum 515.1.).

3. Even if you choose to withhold the public disclosure of your “Directory Information,” your picture and name will appear in the Caduceus (the UAMS yearbook), the UAMS global e-mail list, class schedules, match lists, and graduation materials unless you contact the Dean’s office personally and arrange to exclude your information.

4. This request will remain in effect until you instruct the Registrar in writing to change it.

Please mark the space below:

[___] Withhold my “Directory Information” from public disclosure.

Print Name: ____________________________________________________________

UAMS Student ID# (If known): ____________________________________________

Signature: ___________________________ Date: ____________________________
Appendix N – Smoking Policy

Purpose

The University of Arkansas for Medical Sciences (UAMS) is committed to promoting health, wellness, prevention and the treatment of diseases within the community as well as to providing a safe, clean and healthy environment for our patients, visitors, employees and students. UAMS serves as a model for our community in the area of promoting the good health of our staff and influencing public attitudes about the use of tobacco products. It is, therefore, UAMS’s policy to provide a tobacco-free work environment.

Scope

All UAMS employees, faculty, staff, students, contractors, vendors, volunteers, patients, visitors and anyone on any UAMS property.

Policy

Smoking and the use of tobacco products (including cigarettes, cigars, pipes, smokeless tobacco and other tobacco products) by employees, faculty, students, patients, and visitors are prohibited on all properties of the University of Arkansas for Medical Sciences.

Definitions

Tobacco products include, but are not limited to: cigarettes, smokeless tobacco, pipes, cigars and any tobacco containing product.

Employee – for the purpose of this policy, all UAMS employees while in UAMS facilities (leased or owned) or on the grounds of those facilities.

Students – for the purpose of this policy, any student attending any of the colleges or clinical areas on the UAMS grounds, leased or owned buildings.

Contractors/subcontractors/vendors/volunteers- individuals who enter UAMS Property for the purpose of providing a service to the institution.
Visitors- individuals who do not fall under the above categories including patients and their families.

PROCEDURES

1. All Persons are prohibited from using tobacco products on or in all UAMS owned or leased properties, UAMS owned or leased vehicles, and UAMS adjacent grounds, including parking lots and ramps.

2. Patients in the UAMS Medical Center are prohibited from tobacco use in accordance with the UAMS Medical Center Policy Manual Policy PS 1.09.

3. Compliance with this -tobacco free policy will be the responsibility of all administrators.
   - Lack of cooperation or repeated violations by employees or vendors should be reported to the individual’s supervisor. The supervisor shall then attempt to resolve the problem.
   - Standard disciplinary procedures will be followed for compliance problems with employees. Violations will result in progressive disciplinary actions, including termination.
   - In the event the tobacco violation involves a potential threat to health or safety (e.g. smoking where combustible supplies, flammable liquids, gasses or oxygen are used or stored) the UAMS Police may be called for additional support.
   - UAMS Police will be notified as the final resource to resolve problems arising with visitors or employees during the enforcement of this policy.
   - Under Arkansas law violators of the smoking ban may be fined an amount not less than $100 and no more than $500.

4. New employees will be informed of the UAMS tobacco free policy during orientation. The Office of Human Resources will also inform employment candidates of the tobacco free policy during the application process.

5. Tobacco products will not be sold or dispensed within the UAMS property.

6. Employees may not use tobacco products in any vehicle when the vehicles are on UAMS property.

References:
Arkansas Law, ACT 134 of 2005, “An Act to prohibit the use of tobacco products in and on the grounds of all medical facilities in Arkansas and for other purposes;”
Arkansas Law, ACT 734 of 2009, “The Arkansas Clean Air on Campus Act of 2009”.
UAMS Medical Center Policies and Procedures, Policy PS.109
Joint Commission Accreditation Standards, EC.02.01.03
Administrative Guide policy, 4.4.01, Employee Disciplinary Notice
Appendix O – White Coat Award

White Coat Award

Mindful that medical education is a privilege, the members of the Honor Council wish to publicly acknowledge classmates who consistently embody the ideals set forth in our medical student oath. The purpose of this award is to recognize and encourage personal integrity and professional leadership in students of the College of Medicine. Specifically we wish to recognize those who consistently are worthy of trust, who put others before themselves, and who exhibit the traits of honesty, integrity, respect, compassion, and commitment. These values and qualities are symbolized by the white coat worn by medical professionals. Therefore, the College of Medicine, in partnership with the Honor Council, establishes this annual award to remind students of the ethical and moral responsibilities that are essential to their status as future physicians.

Guidelines for said award, and its administration, include:

1. The award will be presented annually to rising sophomores, juniors, and seniors.

2. All students are eligible and will be nominated for the award by their respective classmates. The collection of nominations and the election will be the responsibility of the Honor Council representatives from each class. Nominations are to include written statements as to the qualifications of the nominee for the award, and are to be submitted to an Honor Council member. All accepted nominations will then be voted on during class spring elections.

3. Award recipients should exemplify the principles outlined in the Medical Student Oath, as stated in the student handbook. Specifically, those principles include honesty, integrity, respect, compassion, and commitment.

4. Award recipients will be announced after spring elections. A member of the Honor Council will then introduce the recipients during the fall White Coat Ceremony.

5. Recipients will receive a minimum gift of $500.00, provided via designated endowment(s) of previous graduate classes, as administered by the College of Medicine Alumni Association.

6. Recipients will have their names inscribed upon a commemorative plaque, to be displayed permanently in the College of Medicine offices.

7. Recipients will each receive a personalized plaque, and a lapel pin bearing the award insignia.

8. Recipients will each receive an appropriate letter of recognition to be placed in their academic file, for subsequent reference in Dean's letters.

9. Previous recipients of the White Coat Award will not be eligible for future consideration for this award.
Appendix P – Use of Social Network Sites

Policy of the University of Arkansas for Medical Sciences Division of Academic Affairs
Subject: Use of Social Networking Sites (included in all college/school catalogues)
Number: 2.100
Date Approved (Council of Deans): January 18, 2012
Last Review/Revision: N/A

The University of Arkansas for Medical Sciences recognizes that social networking websites and applications such as Facebook, MySpace, Twitter, etc. are important and timely means of communication. Students who use these websites and applications must be aware of the critical importance of privatizing these websites and applications so that only trustworthy “friends” have access to the sites. They must also be aware that posting certain information is illegal. Violation of existing statutes and administrative regulations may expose the offender to criminal and civil liability, and punishment for violations may include fines and imprisonment. Offenders also may be subject to adverse academic actions that range from a letter of reprimand to probation to dismissal from the University.

The following actions are strictly forbidden:

- Students may not report the personal health information of patients. Removal of an individual’s name does not constitute proper de identification of protected health information. Furthermore, inclusion of data such as age, gender, race, or date of evaluation may still allow the reader to recognize the identity of a specific individual.
- Students may not report private (protected) academic or financial information of another student or trainee. Such information might include, but is not limited to: course grades, narratives evaluations, examination scores, adverse academic actions, or financial aid information.
- In posting information on social networking sites, students may not present themselves as official representatives or spokespersons for the University of Arkansas for Medical Sciences or their college, department, or program.
- Students may not represent themselves as another person.
- Students may not utilize websites and/or applications in a manner that interferes with educational or work commitments.

In addition to the absolute prohibitions outlined above, the following actions are strongly discouraged as these are considered unprofessional and reflect poorly on the individual, the healthcare profession, program, department, college, and the University of Arkansas for Medical Sciences:

- Display of vulgar language
- Display of language or photographs that imply disrespect for any individual or group because of age, race, gender, ethnicity, sexual orientation, or disability.
- Presentations of photographs that may reasonably be interpreted as condoning irresponsible use of alcohol, substance abuse, or sexual misconduct.

The following actions are strongly encouraged:

- Students should use privacy settings to limit the unknown or unwanted access to the student’s profile or application.
When listing an email address on a social networking site, students should use a personal email address (not a uams.edu address) as the primary means of identification.

When using these social networking sites, students are strongly encouraged to present themselves in mature, responsible, and professional manners. Discourse should always be civil and respectful. No privatization measure is perfect and undesignated persons may still gain access to the site. Once an item is posted on a networking site, it may not be easily removed. Future employers (e.g., residency or fellowship program directors, representatives of employers) may review these sites when considering potential candidates for employment.
APPENDIX Q – CODE BLACK

UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES
EMERGENCY INCIDENT COMMAND SYSTEM
REVISED DECEMBER 2011

CODE BLACK
Campus Violence Plan

PURPOSE/INTRODUCTION OF PLAN:

In the event of a violent occurrence on Campus, special procedures are needed to ensure maximum safety and prevention of injury / loss of life. As a result, multiple responses are necessitated by all components of UAMS. Law enforcement is paramount in securing the situation, but the rest of the campus must work to ensure patient, student, visitor, and staff safety. Violent actions on campus could include an active shooter, hostage situation, terroristic threatening and other scenarios not depicted here. While this is primarily a law enforcement operation; incident management, sheltering in place and crisis communications are integral to the safety and security of the Campus.

PART I: ACTIVATION OF CODE BLACK

UAMS Notification

Notification may come by way of reports of violent actions or potential for violence from staff / employees, students, visitors, patients, or by UAMS Police. All reports should be transmitted to the UAMS Police Department (UAMSPD) by calling 686-7777 or personally notifying an officer.

The persons providing the initial notification should immediately notify the UAMSPD Dispatch Center, providing as much information of the event and person(s) involved as possible. UAMSPD Dispatch will immediately notify the Shift Commander as well as Captain of Patrol and the Chief. Shift Commander will determine the level of response needed. After determining the event is beyond the ordinary capacity of the PD and poses an imminent danger to life and property, Dispatch and the Shift Commander will follow the Implementation protocol, to activate the Emergency Notification System (ENS) and the Emergency Incident Command System (EICS) – Code BLACK.
Implementation of CODE BLACK

After being advised that a potential emergency situation exists, in which violent means have been employed or are threatened, the UAMSPD Dispatcher in conjunction with the Shift Commander:

1. Determines the level of response needed;
2. UAMSPD Dispatcher activates both the Emergency Notification System (ENS) which notifies the UAMS Tactical Team, Code Black EICS Command Structure – UNIFIED COMMAND, The Chancellors Cabinet, all Building Managers; and other designated personnel, as well as the WAVES system which triggers all internal and external speakers;
3. ENS notifies Communications & Marketing;
4. Communications & Marketing immediately initiates email and list serve notifications to all personnel on global email as well as enrolled on the student or other list serves.
5. Unified Command assumes overall command of the law enforcement and disaster response;
6. Notifies Little Rock Police Department and Pulaski County Sherriff’s Office if warranted;
7. Notifies MEMS and metropolitan hospitals that UAMS is temporarily closed and cannot receive ambulance traffic. MEMS STAR Teams and Little Rock Fire Department Bomb Squad will be automatically placed on standby as well as regular MEMS and LRFD assets will be alerted to possibly respond and assist with triage, treatment and potential transport of any victims as designated by Unified Command;
8. Delegates roles/responsibilities per organizational chart as deemed necessary for the specific situation.

Once the decision to implement the EICS is made and ENS, in addition to the activation of internal and external messaging; all decision making devolves to the UNIFIED COMMAND (Incident Commander, Hospital Administrator, Chief of Police, and Vice Chancellor of Campus Operations). This may initially be the ADON (Assistant Director of Nursing) and the PD Shift Commander after hours and the accepted hierarchy listed above during normal business hours. The After Hours Activation Policy command staff will be utilized until Hospital Administration, VC for Campus Operations and Chief of Police are available and briefed.

Transmission of Emergency Information

When instructed by either the UAMSPD Dispatcher/Shift Commander and/or UNIFIED COMMAND to implement the Code BLACK Plan, the automated
internal/external warning system will make the following announcement continuously over the public address system in all buildings and through the external sirens outside:

"THE UAMS CAMPUS IS NOW IN A CODE BLACK STATUS. EVERYONE SHOULD IMMEDIATELY MOVE OUT OF ANY HALLWAY OR OTHER OPEN AREAS INTO THE NEAREST OFFICE, PATIENT ROOM, OR CLASSROOM. CLOSE AND LOCK THE DOOR. DO NOT LEAVE THE BUILDING. DO NOT ENTER STAIRWELLS OR HALLWAYS UNTIL FURTHER NOTICE. IF YOU ARE CURRENTLY OFF CAMPUS, DO NOT COME TO CAMPUS"

The announcement will be repeatedly played until either an update is provided, or until the "all clear" has been called by the UAMS Police Department.

Recall of UAMS Police Officers

If the UNIFIED COMMAND determines additional personnel are needed, above and beyond that already on campus, UAMSPD Dispatch will begin a call out to all officers of the Department.

Assembly of Employees, Staff and Students

All UAMS employees, staff, and students should be aware that all public assembly or transit throughout any campus area during a Code Black is strictly prohibited. All UAMS personnel are instructed follow their departmental plans, if in place or in lieu of, to shelter in place or immediately find a place of shelter and secure themselves until further notice or suspension of law enforcement operations.

Off duty employees should not return to the hospital, unless a Code Green (mass casualties) is called in response to the Code Black and only as directed by their departmental plan or as requested by Code Green officers or their Department’s chief. Each department should keep a current recall list of all employees and call in additional personnel as needed, in consultation with the Incident Commander.

Law Enforcement Communications

All internal UAMS communications will be conducted on radio channels Disaster 1, 2, and 3 as determined by the UNIFIED COMMAND. Any outside communications with other law enforcement and responding agencies will utilize an AWIN “LAW” Frequency as assigned by the Arkansas Department of Emergency Management (ADEM) at the time of the event.
PART II: EMERGENCY INCIDENT FACILITIES

Specific locations of support functions during a Code BLACK event are as follows:

- Command Center is to be in one of the following locations, depending upon activity of the event and if a particular area is compromised
  - Hospital Administration Conference Room
  - UAMS Police Department / Distribution Center
  - Little Rock Fire Station #7
  - Any other location as determined by the UNIFIED COMMAND

- Media Vehicle Staging will be the gravel lot adjacent to Bio Med Building II
- Media Conference Center will be in the first floor lobby of the Boozman College of Public Health Building
- Law Enforcement Staging will be as determined by the UNIFIED COMMAND

PART III: VITAL/SPECIAL CONTINGENCIES & RESPONSIBILITIES

Community Law Enforcement Response

Law Enforcement personnel from other agencies may be responding either at the request of UAMSPD or in support of investigative or response operations. During Code Black operations all outside Law Enforcement officers must check in with the UAMSPD Staging Officer for assignment and instructions. Upon termination of Code Black Operations, investigative measures may be necessary. All investigative teams will need to check in with and report to UAMSPD designated staff.

Hospital & Campus Operations

Upon the activation of Code Black, certain clinical procedures, treatments and therapies will not be able to be immediately ceased. The Unified Command will endeavor to provide relief and support based upon the incident needs and capability on hand at the time of the incident.

Deceased Victims

Upon Code BLACK activation, the Morgue will serve as the Black Treatment Area for deceased/expectant patients. It will be staffed by Pathology Staff and operate in the following manner:

- Complete list of bodies/remains and identities will be kept.
- Crime Scene Technicians will be allowed to work within the morgue or other spaces
- Communication with the Patient Information & Family Services Officers will be maintained for contacting next-of-kin.
- Situational Reports to Command Staff as appropriate.
- Coordination with Pulaski County Coroner and investigative bodies as dictated by Arkansas Law.

**Staff Identification / Hospital Access**

**ALL PERSONNEL MUST DISPLAY PROPER UAMS CREDENTIALS**

**NO CAMPUS ACCESS WILL BE ALLOWED UNTIL DETERMINED BY THE UNIFIED COMMAND.**

**In the event Code Black becomes a Code Green event:**

- Only ED employees and those assigned to the Red Treatment Area are allowed access to the ED;
- All other employees are encouraged to access the Hospital, through the Central Building on the first floor/A level of Parking 2 (*formerly the North Deck*);
- All assigned Treatment Area Leaders and other Officers will be identifiable by vests or colored tape. They have authority to grant or limit access to their respective area;
- Elevators are to be used only for transport of Patients and necessary supplies;
- Staff should use stairs in the event of a Code GREEN;
- Phone Calls should be limited to Official Use ONLY.

**Metro Hospital & MEMS Communications**

Communications between first responders and other Hospitals will be accomplished by the METRO Hospitals dedicated phone line and the METRO Hospitals Radio Talk Group / AWIN System. Reports may be transmitted via the Hospital Communications Radio located in the ED.

**PART IV: DISCONTINUING THE PLAN**

Upon determination by the UNIFIED COMMAND the campus no longer needs to operate within Code BLACK status, the Incident Commander will notify the Call Center to cancel Code BLACK. *The automated system will then announce overhead three (3) times:*

"**CODE BLACK ALL CLEAR, CODE BLACK ALL CLEAR, PLEASE RETURN TO NORMAL OPERATIONS.**"
(Repeated three (3) times)

The UAMS Police Dispatcher will activate the Lockdown All Clear in the Emergency Notification System. The all clear message: "Code Black ALL CLEAR, Code Black ALL CLEAR, please return to normal operations." will be sent to the same list as above. The UAMS Police Dispatcher will direct Communications & Marketing to send out a campus-wide email with the same scripted message as above.

PART V: RESUMING NORMAL OPERATIONS

Following the conclusion of any Code BLACK plan activation, the effectiveness of the response will be evaluated. Changes to the plan will be initiated as necessary to correct any problems identified during the response. Resources used during the response will be inventoried and replaced in conjunction with the usage of the UAMS Disaster Recovery Checklist.

Initiated: December 2008
Revised August 2009
Revised June 2010