



**UNIVERSITY OF FLORIDA COLLEGE OF
MEDICINE**

MEDICAL EDUCATION PROGRAM

POLICIES AND PROCEDURES

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ADMINISTRATIVE STRUCTURE

DEAN

The Dean is the chief executive and administrative officer of the College. The Dean reports organizationally to the Senior Vice President, Health Affairs, is responsible for the administration of the College, and is the agent of the faculty for the execution of all missions of the College. As Executive Officer of the Medical School and Chair of the Medical School Executive Committee, the Dean is responsible for the final disposition of all student issues related to performance and professional conduct.

SENIOR ASSOCIATE DEAN FOR EDUCATIONAL AFFAIRS

The Senior Associate Dean is responsible for all programs related to medical, physician's assistant and graduate students' education. The Senior Associate Dean appoints the chair of the Curriculum Committee and serves as an ex-officio member of the Academic Status Committee (ASC).

ASSOCIATE DEAN FOR MEDICAL EDUCATION

The Associate Dean for Medical Education is responsible for the educational program for the M.D. degree. The Associate Dean also is responsible for management and maintenance of all educationally-related student databases. The Associate Dean provides counseling and approves examination absences and certain leaves of absence. The Associate Dean is an ex-officio member of the ASC.

ASSOCIATE DEAN FOR STUDENT AFFAIRS

The Associate Dean for Student Affairs is responsible for administrative actions related to student registration status and progress through the curriculum. The Associate Dean serves as a source for personal and career counseling. The Associate Dean is responsible for providing students with consistent and accurate advice concerning their medical career and for preparing their medical student performance evaluation (Dean's Letter). The Office of Student Affairs and Registration maintains the official student academic records and assists in maintenance of student databases. In conjunction with the Associate Dean for Medical Education, the Associate Dean for Student Affairs is responsible for management and maintenance of student data needed for deliberations of the Executive Committee and Academic Status Committee (ASC). During the proceedings of the ASC, the Associate Dean for Student Affairs may function as an advisor to students in accordance with UF and UFCOM policies.

ASSOCIATE DEAN FOR STUDENT AFFAIRS JACKSONVILLE

The Associate Dean for Student Affairs Jacksonville, in collaboration with the associate clerkship directors located in Jacksonville, is responsible for oversight and coordination of all educational activities and support services for medical students during their clinical clerkship rotations at UF Health Jacksonville. The Associate Dean serves as a primary contact person for medical students who require assistance or have specific concerns. The Associate Dean serves as a member of the Curriculum Committee and Academic Status Committee.

OFFICE FOR DIVERSITY AND HEALTH EQUITY

One of the primary roles of The Office for Diversity and Health Equity (ODHE) is the recruitment and retention of students from populations underrepresented in medicine. The AAMC definition of the term "underrepresented" includes persons from the following groups: African-American, Mainland Puerto Rican, Mexican-American/Chicano, and Native American/American Indian. The ODHE also coordinates the NIH Short-Term Research for Minority Students Program and the Health Care Summer Institute. Either the Associate Dean and/or one of the Assistant Deans serve as members of the College of Medicine Admissions Committee and as ex-officio members of the following committees: Academic Status Committee, Clerkship Directors Committee, Course Directors Committee, and Curriculum Committee.

DIRECTOR FOR PROGRAM EVALUATION AND STUDENT ASSESSMENT

The Director for Program Evaluation and Student Assessment promotes student assessment, curricular evaluation, feedback and scholarship in education as a means to further strengthen and enhance the education mission of the College of Medicine. The Director coordinates formal evaluation of the medical education program, provides appropriate feedback to curriculum leadership, assists with faculty development, monitors equivalency at geographically separated sites, and continuously monitors LCME standards to ensure compliance. The Director works with course and clerkship directors and curriculum leadership to ensure a comprehensive student assessment program aligned with the stated learning outcomes of the curriculum.

FACULTY

The College of Medicine faculty is responsible for the teaching and evaluation of medical students in the courses, clerkships and electives that comprise the competency-based curriculum.

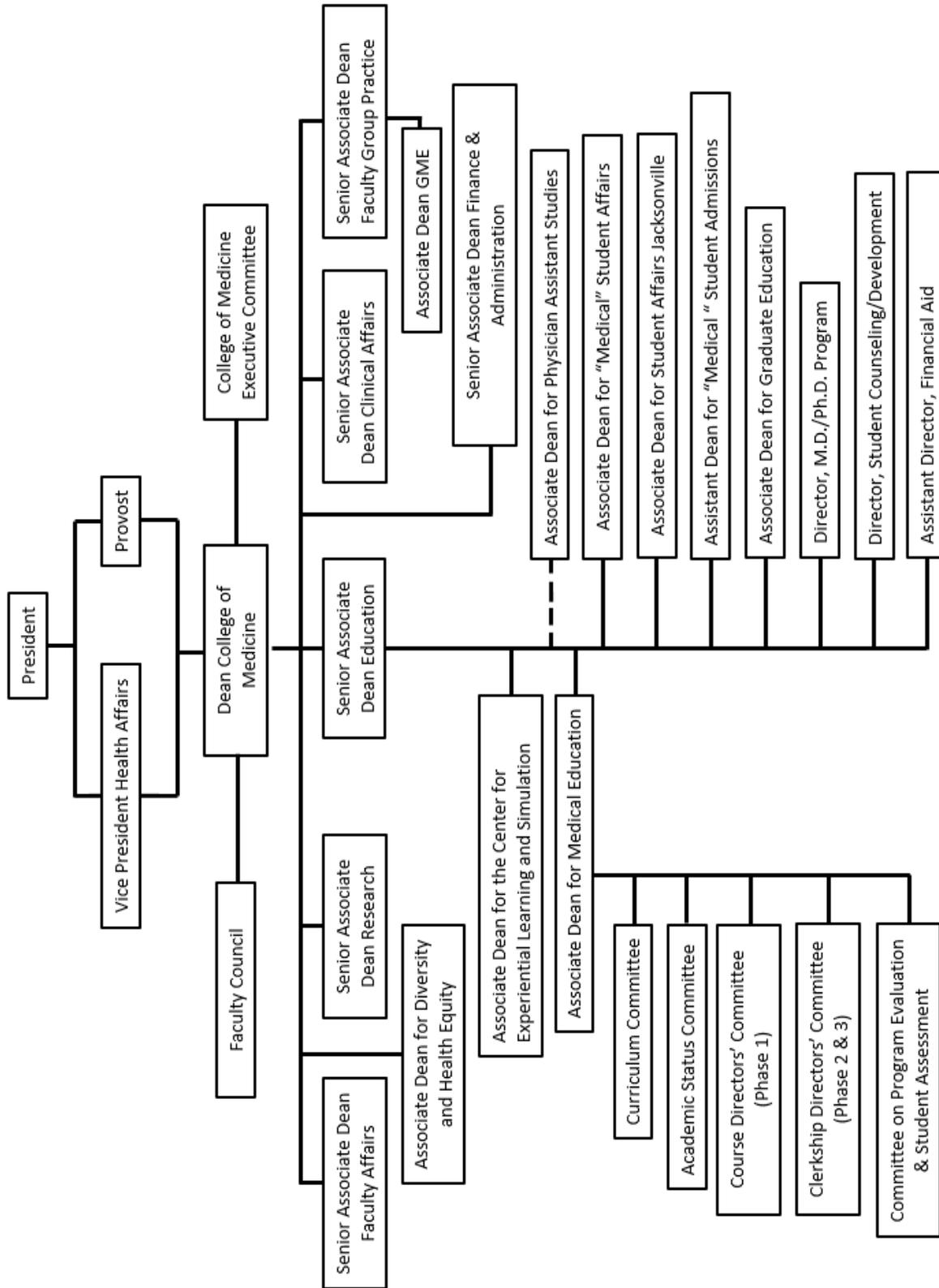
FACULTY COUNCIL

The Faculty Council shall be representative of, and responsible to, the Faculty of the College of Medicine. The Faculty Council serves as a forum for shared governance and mutual exchange of ideas between senior officers of the College and the Faculty.

EXECUTIVE COMMITTEE

The Dean is delegated administrative and fiscal responsibility for the UF COM by the senior vice president, health affairs (SVPHA) and works with the departmental chairs and appropriate center/institute directors through the College of Medicine Executive Committee to ensure that the educational, research and clinical missions are fulfilled.

College of Medicine Organizational Chart: Medical Student Educational Program



COMMITTEES FOR THE COLLEGE OF MEDICINE EDUCATIONAL PROGRAM

MEDICAL STUDENT CURRICULUM COMMITTEE (CC)

The **Curriculum Committee** serves as the faculty decision-making body regarding content, methods, timing, and structure of the medical education program. The Curriculum Committee will work with the Associate Deans for Medical Education, and Student Affairs and with course/clerkship directors who will implement changes in curriculum, learning environment and/or student support services. Major curriculum changes require approval of the Executive Committee of the Medical School and Dean.

Specific responsibilities of the CC include:

- Defining the learning outcomes of the educational program associated with the six core competencies: medical knowledge, patient care, communication, practice based learning and improvement, systems based practice, and professionalism.
- Overall design, management, evaluation, and central oversight of a coherent, efficient, and coordinated curriculum.
- Determining the types of patients, clinical conditions, and appropriate clinical settings for education experiences, including the expected level of student responsibility.
- Monitoring, and when necessary, modifying the curriculum, medical student experiences, and methods used to assess student performance to ensure that curriculum learning outcomes are achieved.
- Monitoring the overall learning environment and ensuring high quality student support services.
- Maintaining compliance with all relevant LCME standards.

Membership of the committee consists of:

- Associate Dean for Medical Education, or appointee (Chair)
- Chair of the Course Directors' Committee
- Chair of the Clerkship Directors' Committee
- Six members from the Faculty with 3-year staggered terms will be appointed by the Senior Associate Dean for Educational Affairs in consultation with Course Directors, Clerkship Directors, Faculty Council, Curriculum Committee members, and Chairs, thus assuring a broad representation.
- Student Academic Chair from fourth year class
- Faculty Council representative
- Two appointed members from Jacksonville faculty: 3-year terms

Fifty percent or more of the voting members must be present for a quorum. In case of tie votes, the chair will cast the deciding vote.

Ex officio (non-voting) members include:

- Senior Associate Dean for Educational Affairs
- Assistant Dean for Medical Education
- Associate Dean for Student Affairs
- Associate Dean for Education Jacksonville

- Associate Dean for Physician Assistant Studies
- Academic Chairs for year 1, 2, 3 medical student classes (In the event that the Student Academic Chair from the fourth year class is not present, the highest ranked class becomes a voting member.)
- AAMC student representative
- Assistant Dean for Admissions
- HSC library representative
- Office for Diversity and Health Equity representative
- Director for Office of Student Counseling and Development
- Director for Program Evaluation and Student Assessment
- Associate Dean for the Center for Experiential Learning and Simulation
- Medical Director for Anaclerio Learning and Assessment Center
- Director of the Fourth Year
- CLG Director
- College of Medicine Learning Specialist

COURSE DIRECTORS' AND CLERKSHIP DIRECTORS' COMMITTEES

The Course Directors' (Phase 1) and Clerkship Directors' Committees (Phase 2 and 3) report to the Associate Dean for Medical Education and are responsible for the daily operation of the medical curriculum. Any committee recommendations for significant changes in the educational program are submitted for review and approval by the Curriculum Committee. Chairs of the Course Directors' and Clerkship Directors' Committees are appointed for three year terms by the Associate Dean for Medical Education from the membership, with the approval of the Curriculum Committee. Regular monthly or bimonthly meetings are scheduled, and minutes are recorded.

The Course Directors' (Phase 1) Committee is responsible to the Associate Dean for Medical Education and the Curriculum Committee. The committee's roles and responsibilities include;

- Ensuring horizontal and vertical integration/coordination across the curriculum.
- Implementing the goals, objectives, and teaching responsibilities of the curriculum for each course.
- Maintaining an organized schedule of teaching activities.
- Coordinating student assessments and evaluations in Phase 1 of the curriculum.
- In collaboration with the Director of Program Evaluation, reviewing syllabi, learning objectives, and assessment criteria to ensure effective integration of course materials, teaching and assessment methods across Phase 1 and ensuring adherence to College and University policies.
- Providing input to the Curriculum Committee related to potential gaps and/or unplanned redundancies informed by course reviews, AAMC GQ, student outcome data, and other relevant data.
- Sharing teaching methods and education delivery modalities to promote learning.
- Reviewing overall student/class performance in preparation for Phase 2 of the curriculum.

Membership of the committee consists of:

- Individual course directors of required educational experiences
- Basic science discipline representatives
- “Thread” leaders

Ex officio (non-voting) members include:

- Senior Associate Dean for Educational Affairs
- Associate Dean for Medical Education
- Associate Dean for Student Affairs
- Medical Director of the Anaclerio Learning and Assessment Center
- Director of Program Evaluation and Student Assessment
- Representative of the Office for Diversity and Health Equity
- Director of the Office of Student Counseling and Development
- HSC Library representative

The Clerkship Directors’ (Phase 2 and 3) Committee is responsible to the Associate Dean for Medical Education and Curriculum Committee. The committee’s roles and responsibilities include:

- Ensuring horizontal and vertical integration/coordination across the curriculum.
- Implementing the goals, objectives, and teaching responsibilities of the curriculum for each clerkship.
- Maintaining an organized schedule of educational activities and coordinating student assessments and evaluations in Phase 2 and 3 of the curriculum.
- In collaboration with the Director of Program Evaluation, reviewing syllabi, learning objectives, and assessment criteria to ensure effective integration of course materials, teaching, and assessment methods and adherence to College and University policies.
- Providing input to the Curriculum Committee related to potential gaps and/or unplanned redundancies informed by course reviews, AAMC GQ, student outcome data, and other relevant data.
- Sharing teaching methods and education delivery modalities to promote learning.
- Reviewing overall student/class performance in preparation for graduation.

Membership of the committee consists of:

- Individual clerkship directors of required educational experiences
- Director of the Fourth Year
- “Thread” leaders

Ex officio (non-voting) members include:

- Senior Associate Dean for Educational Affairs
- Associate Dean for Medical Education
- Associate Dean for Student Affairs
- Medical Director of the Anaclerio Learning and Assessment Center
- Director of Program Evaluation and Student Assessment
- Office for Diversity and Health Equity representative

- Director Office of Student Counseling and Development
- HSC Library representative
- Course Directors of Introduction to Clinical Medicine 1-4

THE COMMITTEE ON PROGRAM EVALUATION AND STUDENT ASSESSMENT

The Committee on Program Evaluation and Student Assessment is accountable to the Curriculum Committee and the Associate Dean for Medical Education. Broadly, the charge of the Committee is to oversee College of Medicine assessment and evaluation. This Committee evaluates curricular quality and outcomes, monitors the overall assessment program, and conducts formal reviews of courses and clerkships. The Committee is comprised of administrators, clinical and basic science educators, and students.

Membership of the Committee consists of two (2) committee co-chairs, appointed members, student members, and *ex officio* members. Appointed members serve a three-year term and are appointed by the Associate Dean for Medical Education. Student members serve a one-year term and are selected from persons who submit a biographical sketch, CV or resume, and a personal statement that address any special skills and explain why he/she is interested in serving.

Membership of the committee consists of:

- Associate Dean for Medical Education (Co-chair)
- Director of the Office of Program Evaluation and Student Assessment (Co-chair)
- One course director from each of the first two years (Phase 1), nominated by the Course Directors' Committee
- One course director responsible for the Introduction to Clinical Medicine sequence
- Director of the Collaborative Learning Groups, or designee
- Three clinical clerkship directors (at least one of whom is a 4th year clerkship director) from Gainesville faculty (nominated by the Clerkship Directors' Committee)
- One associate clerkship director (third or fourth year) from Jacksonville faculty, nominated by the Associate Dean for Student Affairs – Jacksonville
- Additional ad hoc faculty with assessment expertise as required
- One medical student from each of the four years

Ex Officio members are non-voting members who have been chosen to serve on the Committee because they have knowledge and skills that are important to the function and charge of the Committee.

ACADEMIC STATUS COMMITTEE

The Academic Status Committee (ASC) has the responsibility to review the progress of each student and to determine the status of each student with regard to promotion, remediation, probation, suspension, or dismissal. The ASC makes recommendations to the Executive Committee and the Dean regarding graduation of students.

Academic Performance

The Academic Status Committee (ASC) continuously monitors a student's academic performance. Information upon which assessment of satisfactory progress is made includes: mastery of competency-based behaviors, skills, and knowledge; letter grades; written evaluations; data submitted by the faculty regarding cognitive and non-cognitive skills; scores on the United States Medical Licensing Examination (USMLE); and scores on Clinical Skills Examinations (CSEs).

Competencies

Students' mastery of the graduation competencies is monitored by the ASC. Students are expected to progress in their attainment of clinical competency. Assessment of student competency during Phase 1 courses and clerkships will be evaluated independent of the actual course grade.

The ASC maintains direct responsibility for appeals and actions, such as leaves of absence that exceed six weeks, suspensions, dismissals, and returns to registration from leaves of absence.

The committee will be composed of 11 voting members. The chair shall be appointed by the Senior Associate Dean for Educational Affairs, for a three-year renewable term. The chair will vote only in cases of a tie. All faculty members of the committee must have an active faculty appointment. Physician members of the committee must also have an active medical license. Students must remain in good academic standing during their tenure on the committee. For faculty members, the term of appointment will be three years, with the opportunity for renewal of the appointment for an additional three years. The length of appointment for the resident representative will vary, depending upon the resident's level of training. The voting student representative will serve for one year. The student-elect member will serve for one year as a non-voting member and then for an additional year as a voting member.

Membership of the committee consists of:

- Three faculty from Gainesville (nominated by the Course Directors' Committee)
- Three faculty from Gainesville (nominated by the Clerkship Directors' Committee)
- One faculty from Jacksonville (nominated by the Associate Dean for Student Affairs – Jacksonville)
- One third year student-elect member, non-voting (nominated by the third year class Executive Board) – becomes student representative during his/her fourth year
- One fourth year student, voting member (initially nominated by Class Executive Board)
- One resident or fellow representative (nominated by Associate Dean for Graduate Medical Education)
- Representative of the Office for Diversity and Health Equity

Nominations are approved by voting members of the ASC. Faculty who are responsible for assigning grades are not eligible for appointment to the ASC.

Ex Officio members include:

- Senior Associate Dean for Educational Affairs
- Associate Dean for Medical Education

- Assistant Dean for Medical Education
- Associate Dean for Student Affairs
- Assistant Dean for Admissions
- Program Director for Student Counseling and Development
- College of Medicine Financial Affairs Officer
- College of Medicine Registrar
- Course and Clerkship Directors, as needed
- Director of the Fourth Year
- CLG Director
- College of Medicine Learning Specialist
- Associate Dean for Student Affairs – Jacksonville
- Other individuals may attend meetings by invitation of the chair

The College of Medicine Director for Student Counseling and Development may be asked to present factual information related to individual students after receiving specific authorization from the student. In order to avoid any appearance of conflict of interest, the counselor must recuse herself/himself and leave the room prior to a vote for academic action or sanction involving any student that she/he has evaluated or treated.

If any other member of the committee is a direct party in a student case, she/he can present relevant information. However, she/he must then recuse herself/himself and leave the room prior to a vote for academic action or sanction.

Student records reviewed during the deliberations of the ASC must be maintained in strict confidentiality. Only faculty members who have a legitimate need to know may have access to these records.

PROFESSIONAL BEHAVIOR

The College of Medicine expects all medical students to be professional in their interactions with patients, colleagues, faculty, and staff and to exhibit caring and compassionate attitudes. These, and other qualities will be evaluated during patient contacts and in other relevant settings by both faculty and peers. Behavior of a medical student reflects on the student's individual's ability to become a competent physician. **Attitudes or behaviors inconsistent with compassionate care; refusal by, or inability of, the student to participate constructively in learning or patient care; derogatory attitudes or inappropriate behaviors directed at patients, peers, faculty or staff; misuse of written or electronic patient records (e.g., accession of patient information without valid reason); substance abuse; failure to disclose pertinent information on a criminal background check; or other unprofessional conduct can be grounds for dismissal.** Professionalism is one of six competencies expected of the COM students; see specific requirements for professionalism below. For complete listing of all COM competencies see the University of Florida College of Medicine Medical Education Program Curriculum Overview.

Ethical and professional behaviors are the foundation of medicine. The College of Medicine requires each entering class to agree to the institution's Code of Ethics.

During the four years of medical school, development of professional behavior is monitored by both the faculty and students. Faculty and peer evaluation of student adherence to the class Code of Ethics also is monitored. Formative peer evaluation of professional competence is solicited during the first three years. Summative peer evaluation of professional competence is documented following completion of the second and third years.

In conferring the M.D. degree, the University of Florida certifies that the student is competent to undertake a career as a Doctor of Medicine under supervised practice. The M.D. degree also certifies that, in addition to competency in medical knowledge and skills, the graduate possesses those personal traits essential to the profession of medicine as judged by the faculty, residents and the student's peers.

PROFESSIONALISM – Graduates will be able to:

- Discuss and apply ethical standards of practice
- Demonstrate humanistic and patient-centered care including respect, empathy, and compassion in their role as the patient's advocate
- Demonstrate strength of character and integrity including honesty, altruism, accountability, humility, and moral courage
- Employ measures to balance clinical responsibilities with personal societal responsibilities
- Strive for excellence in all professional endeavors
- Consistently demonstrate the attitudes, values, and behaviors expected of one who thinks, acts, and will be a physician.

RULES OF CLASSROOM BEHAVIOR

- Be on time for class.
- If you arrive late, close the door quietly and find a seat quickly so that you do not disturb others.
- Do not talk to your classmates when the lecturer is speaking.
- Turn off your cell phone while in class. If you are expecting an urgent call, set the phone on silent mode.
- Do not read the newspaper, answer e-mail, or text during class.
- Do not sleep during class.
- Remain quietly in place during the Q&A session at the end of class.
- Ask questions in a respectful, courteous manner.

DRESS CODE

- Students are expected to maintain a proper professional appearance when they are on the medical campus.
- Students should wear their photo identification badge at all times while on the medical campus.
- Please adhere to the following guidelines when attending classes in the lecture halls (applicable to first and second year students and senior students during Internship 101).
 - Do not wear running shorts or extremely tight shorts. Longer shorts, Capri-style pants, and blue jeans are perfectly acceptable for the classroom.
 - For men, a polo shirt with a collar is preferred. A tee shirt is acceptable provided it is clean and does not contain any offensive language or picture.
 - For women, “tube tops,” “halter tops,” deep set necklines, “see-through” blouses, and very short, tight skirts should not be worn to class. Shirts and blouses must extend to the waistband of your slacks or shorts. Bare midriffs are not acceptable. Please be conscious of the “fit” of your clothes when you are in different positions, e.g., standing vs. leaning over.
 - Baseball caps and sunglasses should not be worn in the classroom.
 - Avoid **extremes** of hairstyles (e.g., “spiked hair,” multicolored or bizarre-colored), make-up, and piercings. Facial hair must be neatly groomed
 - **IN SHORT, BE MODEST AND PROFESSIONAL.**
- In the laboratories, OSHA regulations prohibit open-toed shoes. For purposes of safety, you must wear closed-toe shoes.
- When you participate in any clinical activity and anticipate patient contact, you must dress in a very professional manner. Men should wear a shirt, tie, slacks (not jeans), belt, socks, and hard-soled shoes (i.e., no tennis shoes). Women should wear comparable attire. Your white laboratory coat should be clean, pressed, and in good repair.
- When engaged in patient-care related activities, you should not chew gum.

SOCIAL NETWORKING SITES POLICY

The administration of the College of Medicine recognizes that social networking websites and applications, including but not limited to Facebook, MySpace, and Twitter, are an important and timely means of communication. However, students who use these websites and other applications must be aware of the critical importance of privatizing their web sites so that only trustworthy “friends” have access to the websites/applications. 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 the 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 school.

Prohibitions include the following:

- In your professional role as a care-giver, you may not present the personal health information of other individuals. Removal of an individual’s name does not constitute proper de-identification of protected health information. Inclusion of data such as age, gender, race, diagnosis, date of evaluation, or type of treatment or the use of a highly specific medical photograph (such as a before/after photograph of a patient having surgery or a photograph of a patient from one of the medical outreach trips) may still allow the reader to recognize the identity of a specific individual.
- You may not report private (protected) academic information of another student or trainee. Such information might include, but is not limited to: course or clerkship grades, narrative evaluations, examination scores, or adverse academic actions.
- In posting information on social networking sites, you may not present yourself as an official representative or spokesperson for the University of Florida College of Medicine.
- You may not represent yourself as another person, real or fictitious, or otherwise attempt to obscure your identity as a means to circumvent the prohibitions listed above and below.
- You may not utilize websites and/or applications in a manner that interferes with your official work commitments. That is, do not tie up a hospital or clinic computer with personal business when others need access to the computer for patient-related matters. Moreover, do not delay completion of assigned clinical responsibilities in order to engage in social networking.

In addition to the absolute prohibitions listed above, the actions listed below are strongly discouraged. Violations of these suggested guidelines may be considered unprofessional behavior and may be the basis for disciplinary action.

- Display of vulgar language.
- Display of language or photographs that imply disrespect for any individual or group because of age, race, gender, ethnicity, or sexual orientation.
- Presentation of personal photographs or photographs of others that may reasonably be interpreted as condoning irresponsible use of alcohol, substance abuse, or sexual promiscuity.
- Posting of potentially inflammatory or unflattering material on another individual’s website, e.g. on the “wall” of that individual’s Facebook site.

When using these social networking websites/applications, students and residents are strongly encouraged to use a personal e-mail address, rather than their ufl.edu address, as their primary

means of identification. Individuals also should make every effort to present themselves in a mature, responsible, and professional manner. Discourse should always be civil and respectful. Please be aware that no privatization measure is perfect and that undesigned persons may still gain access to your networking site. A site such as YouTube, of course, is completely open to the public. Future employers (residency or fellowship program directors, department chairs, or private practice partners) often review these network sites when considering potential candidates for employment.

Finally, although once-posted information can be removed from the original social networking site, exported information cannot be recovered. Any digital exposure can “live on” beyond its removal from the original website and continue to circulate in other venues. Therefore, think carefully before you post any information on a website or application. Always be modest, respectful, and professional in your actions.

POLICY FOR USE OF MOBILE TECHNOLOGY IN PATIENT CARE AREAS

Students are expected to act appropriately and professionally in all clinical settings. The use of mobile devices may be appropriate, if respect for colleagues, faculty, the medical team and patients is observed. During lectures, conferences, or patient care activities students should:

1. Turn all electronic devices including cell phones to silent/vibrate.
2. Refrain from text messaging, checking email, talking on the phone or using the internet for non-patient care/educational activities.
3. Students must complete Mobile Device Training (see Core Procedure V, Section A of attached link) and adhere to the UF Shands Core Policy and Procedure CP03.012 - Mobile Device Management, https://com-faculty-affairs.sites.medinfo.ufl.edu/files/2018/01/UF-Health-Shands-Core-Policy-CP03.012_Mobile-Device-Mgmt.pdf.

CODE OF ETHICS

As we learn and, subsequently, practice the art and science of medicine, we pledge to:

- Do no harm to our patients.
- Put the welfare of our patients above our own self-interest and any consideration of financial gain.
- Be respectful of the wishes of our patients, consistent with our obligation to “do good”.
- Treat our patients with great respect and compassion, without regard to gender, age, race, ethnicity, religion, or sexual orientation.
- Maintain the highest standard of honesty and integrity.
- Be fiscally responsible in our professional and personal lives.
- Be just and impartial in allocation of scarce health care resources, but to always advocate first for the rights of our patients.
- Be consistently attentive to the need to protect the privacy of our patients and to maintain their personal health information in the strictest confidence.
- Maintain a commitment to life-long learning.
- Share knowledge freely with patients and colleagues.
- Maintain the proper balance between our personal and professional lives and nurture our spiritual, emotional, and physical well-being so that we may better care for our patients and loved ones.
- Conduct ourselves with grace and humility.
- Act always in a way that brings honor to ourselves and our profession.

TECHNICAL STANDARDS/DISABILITY SERVICES

Introduction

Candidates for the M.D. degree at the University of Florida College of Medicine (UFCOM) must be capable of completing core educational requirements and achieving the UFCOM competencies and entrustable professional activities essential for the delivery of high quality medical care. The College of Medicine has an ethical responsibility for the safety of patients with whom students and graduates will come in contact.

Although students learn and work under the supervision of the faculty, students interact with patients throughout their medical school education. Patient safety and well-being are therefore major factors in establishing requirements involving the physical, intellectual, and emotional abilities of candidates for admission, promotion, and graduation. The essential skills and abilities described herein are also referred to as technical (or non-academic) standards.

The goal of the medical education program is to graduate physicians who possess high ethical and professional attributes, deep and thorough medical knowledge and outstanding clinical skills, with the ability to appropriately apply these skills, effectively interpret information, and contribute to decisions across a broad spectrum of medical situations in varied settings. Therefore, all students are expected to meet the standards described below for admission, retention, promotion, and graduation.

TECHNICAL STANDARDS

Observation

A candidate must be able to acquire information from demonstrations and participate in laboratory exercises. A candidate must be able to assess and comprehend the condition of all patients assigned to him or her for examination, diagnosis, and treatment. These skills require the use of vision, hearing, and touch or the functional equivalent.

Communication

A candidate must demonstrate proficiency in the English language such that he or she can communicate in both oral and written form effectively and sensitively with patients and members of the health care team. This includes the ability to speak, to hear and to observe patients by sight in order to elicit information, describe changes in mood, activity and posture, and perceive nonverbal communications. In a case where a candidate's ability to communicate is compromised, the candidate must demonstrate alternative means and/or abilities to communicate with patients and members of the health care teams.

Motor

A candidate must be able to attend and participate in classes and activities which are a part of the curriculum. A candidate's motor and sensory functions must be sufficient to diagnose and deliver patient care consistently, quickly and accurately. A candidate must be able to perform physical exams and diagnostic procedures using techniques, such as: palpation, auscultation, percussion, and other diagnostic maneuvers. A candidate must be able to respond in a timely manner and safely

execute motor movements reasonably required to provide general care and emergency treatments to patients. A candidate must be able to participate in physically taxing duties over long hours.

Intellectual-Conceptual, Integrative and Quantitative Abilities

A candidate must have sufficient cognitive abilities and effective learning strategies to assimilate the detailed and complex information presented in the medical school curriculum. A candidate must be able to learn through a variety of modalities, such as: class instruction, small group, team, and collaborative activities, and independent study. A candidate must have the ability to learn, memorize, measure, calculate, reason, organize, analyze, and synthesize complex information in a coherent manner. A candidate must be able to comprehend three-dimensional relationships and understand the spatial relationships of structures. A candidate must be able to formulate a hypothesis, investigate the potential answers and outcomes, and formulate appropriate and accurate conclusions in a timely manner.

Behavioral and Social Attributes

A candidate must demonstrate the maturity and emotional stability required for full utilization of his or her intellectual abilities, the exercise of good judgment, and the timely completion of all responsibilities attendant to his/her academic work, team work, and patient care. A candidate must demonstrate the ability to develop mature, sensitive, and effective professional relationships with faculty members and peers, patients, and all members of the healthcare team. A candidate must be able to function effectively under stress and proactively make use of available resources to help maintain both physical and mental health. A candidate must be able to adapt to changing environments, display flexibility, and function in the face of uncertainties inherent in the educational and patient care setting. Professionalism, compassion, integrity, concern for others, interpersonal skills, interest, and motivation are expected throughout the education process. The candidate must be willing to interview, physically examine, and provide care to all patients regardless of their race/ethnicity, gender, sexual orientation, religion, or disability.

Equal Access to the UFCOM Medical Education Program

The UFCOM is committed to providing all students with opportunities to take full advantage of the medical education program. It recognizes that students with documented disabilities may require reasonable accommodations to meet the technical standards described above. During the Admissions process, candidates with a disability are encouraged to discuss their disability with the Assistant Dean of Admissions so that jointly, they may consider technological and other facilitating mechanisms necessary to train and function effectively as a physician. Upon admission, the Office for Medical Education, the Office of Student Affairs and the UF Disability Resource Center (DRC) are committed to removing potential barriers that may prevent a student from accurately reflecting their abilities in the medical education program. The goal of the multi-perspective approach described below is to support medical students with disabilities in order to provide reasonable and accessible opportunities to complete the medical education program.

Requesting Disability/Medical Accommodations

1. The University encourages students to register with the Disability Resource Center (DRC) prior to the beginning of medical school or upon the verification of a disability for medical condition. A student must comply with the following process for requesting and receiving appropriate reasonable accommodations, in a timely manner, to enable him or her to have the opportunity to meet the UFCOM requirements for completion of the medical education program.
2. To meet UFCOM technical standards, it is the student's responsibility to self-disclose the disability or medical condition that require accommodations to the Disability Resource Center. The student must provide requested documentation of the disability/medical condition during the DRC registration process. A student who fails to register with DRC or who fails to provide the necessary documentation shall not be considered to be claiming or receiving accommodations under federal or state disability laws. A student is encouraged to register with the DRC prior to the beginning of his or her first or subsequent semester or as soon as a disability/medical condition is established in order to ensure access to appropriate accommodations. Students are accountable for their performance, with or without accommodation. No student will be assumed to have a disability/medical condition based on poor performance.
3. Any request, design and implementation of accommodations for an individual student to participate and complete the medical education program must include full collaboration with the Office of Student Affairs and the Disability Resource Center, as well as being in synch with the UFCOM Technical Standards.
4. In review of a student's accommodation request, the DRC will make every effort to recommend the appropriate accommodation for academic success. Upon receipt of a student's request for accommodations, the UFCOM will convene the UFCOM Technical Standards Committee. The Technical Standards Committee is an ad hoc committee reporting directly to the UFCOM Curriculum Committee. The Technical Standards Committee is responsible for reviewing requests for accommodations in light of the UFCOM Technical Standards and appropriate course standards and learning objectives. Membership consists of the Assistant Dean of Admissions, Assistant Dean for Medical Education, Associate Dean for Medical Education, Associate Dean of Student Affairs, and the UFCOM Learning Specialist.
5. Following review by the Technical Standards Committee, the implementation of accommodations for first and second year students will be facilitated by the UFCOM Office of Student Affairs. The Office of Student Affairs will notify course directors of requested accommodations via a student's DRC accommodation letter.
6. Rising third year students with current academic accommodations **MUST** review their accommodations with the DRC in advance of their clinical years. This review is important for all students requesting accommodations, especially for students who request the support of non-academic accommodations. Following review by the Technical Standards Committee, the implementation of accommodations for third and fourth year students will be facilitated by the UFCOM Office of Student Affairs. The Office of Student Affairs will notify clerkship directors of requested accommodations via a student's DRC accommodation letter.

7. An accommodation may be deemed unreasonable if it poses a direct threat to the health or safety of the student, patients or others, causes a fundamental alteration of the medical education program, does not meet UFCOM academic or technical standards, or poses an undue hardship on the College of Medicine. In review of a student's request, the Committee will work in concert with the DRC, requesting additional assessment or evaluation, as needed, and providing a determination of the review to the DRC.
8. Accommodation through the use of a trained intermediary or other aid may be appropriate or reasonable if the intermediary or aid functions as an information conduit. The intermediary or aid may not provide a selective function, cognitive support, or medical knowledge or act as a substitute in performing essential skills or supplement clinical and ethical judgement.
9. Should, despite reasonable accommodation (whether the student chooses to use the accommodation or not), a student's existing or acquired disability interfere with the safety of others, or otherwise impede the ability to complete the UFCOM medical education program and advance to graduation, residency, training, or licensure, the candidate/student may be denied admission or may be separated, discontinued, or dismissed from the program.
10. While the Office of Student Affairs works in consultation with the DRC to determine and coordinate approved accommodations, disability documentation remains confidential and housed at the DRC.
11. Students may petition for retroactive medical withdrawal from courses: <https://care.dso.ufl.edu/submit-medical-petition/>.

MEDICAL STUDENT MISTREATMENT POLICY

The University of Florida College of Medicine is committed to treating all members of the college community fairly with regard to both personal and professional concerns. The student mistreatment policy ensures that concerns are promptly dealt with and resolutions reached in a fair and just manner. The College's procedures enable students to bring problems to the attention of the College of Medicine administration in a timely manner. The College forbids any retaliatory action against students who present grievances in good faith.

Mistreatment is any decision, act, or condition affecting a student that is determined to be illegal or unjust or that has created unnecessary hardship. Mistreatment may take the form of verbal or physical abuse, discrimination for any reason, or a requirement for individual service activity that is independent of requirements for other team members. When such an incident occurs, the student should take steps to address it. The student may first discuss the problem with the individual responsible for the negative action or with the Associate Dean for Medical Education, Associate Dean for Student Affairs, or the Associate or Assistant Dean for Diversity and Health Equity. The dean contacted by the student will then address the concern with the appropriate Course Director or Clinical Clerkship Director who is responsible for the educational activity in which the incident occurred. If the negative action occurred on the Jacksonville Campus, students may also discuss the matter with the Associate Dean for Students Affairs-Jacksonville, who will follow the same plan outlined above. A written record of incidents reported to one of the Associate or Assistant Deans will be maintained by the Associate Dean for Medical Education. Once the allegation of mistreatment is elevated beyond the level of the individual responsible for the incident, the reviewing authority should provide a written response to the student within ten business days of being notified of the incident. If the student is not satisfied with the response of the reviewing official, he/she may appeal first to the Senior Associate Dean for Educational Affairs and, subsequently, to the Dean of the College of Medicine.

A student who has been accused of mistreatment or harassment of others is entitled to due process to refute or challenge the accusations per policies of the University of Florida (UF Regulations 1.006 Non-Discrimination/Harassment/Invasion of Privacy Policies, <http://regulations.ufl.edu/wp-content/uploads/2013/03/1006.pdf>, and UF Regulations 4.012 Student Grievance Procedure, <http://regulations.ufl.edu/wp-content/uploads/2013/03/4012.pdf>).

If faculty observe unprofessional behavior or mistreatment of students they should report it to the responsible course or clerkship director.

At any point in the process outlined above, the student also may address his/her concern about mistreatment with the Director for Student Counseling and Development. This official may provide counseling to the student but is not responsible for attempting to redress the grievance.

LIMITATIONS TO STUDENT SUPERVISION AND EVALUATION

At no time may a student, trainee, and/or employee be supervised, evaluated, and/or assessed by an individual with whom there is an amorous, romantic, and/or sexual relationship. This limitation on evaluation extends to any individuals who are family members. When this conflict of interest exists, it is the responsibility of both parties, the supervisor and subordinate, to immediately disclose the conflict to the course or clerkship director or ADME and request reassignment. Failure to do so may be reported to the proper hiring authority, academic/professionalism committee, and/or UF Title IX office for further action.

Additionally, whenever a student, trainee, and/or employee has been inadvertently assigned to be supervised, evaluated, and or assessed by their own personal healthcare provider, they are encouraged to request a reassignment without any recrimination.

Conversely, if the aforementioned subordinates are coerced into an unwelcome relationship, rejected to unwanted advances, and/or other forms of discrimination or mistreatment, they are encouraged to report this behavior to the College of Medicine administration including the Senior Associate, Associate, or Assistant Deans or directly to the Title IX office (<https://sccr.dso.ufl.edu/>). For confidential consultation, students are encouraged to speak with a mental health provider within the medical school, Counseling and Wellness Center, Dean of Students' Care area, or at the UPD Victims' Advocate office.

ATTENDANCE POLICY FOR REQUIRED EDUCATIONAL ACTIVITIES

Students are allotted the following breaks: Thanksgiving and a winter break (see the academic calendar for details). Thanksgiving break starts at the conclusion of clinical/academic responsibilities on Wednesday, and ends at the beginning of clinical/academic responsibilities on Monday. Third and fourth year students on scheduled clerkships and electives are **NOT** automatically off on official one day holidays listed on the academic calendar.

Clerkship directors, at their discretion may permit students a holiday (example: on Labor Day, outpatient clinics are closed, and a clerkship director may give the students assigned there the day off).

RELIGIOUS HOLIDAYS

The COM recognizes that there are other holidays, both religious and secular, which are of importance to some individuals and groups. Students who wish to observe these holidays must inform the director before the course or clerkship begins, if applicable. The director may provide the student with an alternative arrangement to make-up the day(s) missed, on-call assignments, and examinations and other projects. The timing of make-up work is at the discretion of the course/clerkship director and may fall during vacation periods. Missed days which cannot be completed before the course end date will result in a grade of "Incomplete". Students shall not be penalized due to absence from class or other scheduled academic activity because of religious observances.

If a faculty member is informed of, or is aware, that a significant number of students are likely to be absent from class because of a religious observance, a major examination or other academic event should not be scheduled at that time.

A student who is to be excused from class for a religious holy day is not required to provide a second party certification of the reasons for the absence. A student who believes that he or she has been unreasonably denied an education benefit due to religious beliefs or practices may seek redress through the student grievance procedure, see <http://regulations.ufl.edu/wp-content/uploads/2013/03/4012.pdf>.

UNEXPECTED ABSENCES

In the case of an unexpected, single day absence due to illness, the student **MUST** notify the responsible faculty/mentor or senior resident (when on a clinical service) and the Course/Clerkship Administrator. If the student is unable to contact the Course/Clerkship Administrator, he/she should notify the staff in the Office of Student Affairs and Registration. If the absence is of greater duration than a single day, the staff in the Office of Student Affairs and Registration (352-273-7971) **MUST** be notified, in addition to the course director or supervising attending and Clerkship Administrator.

PLANNED ABSENCES

In the case of planned absences to attend meetings or family events such as a wedding or funeral, the student must contact the Course/Clerkship Administrator as far in advance as possible to discuss the requests and obtain the permission of the Course/Clerkship Director to be absent from assigned responsibilities. If permission is obtained for the planned absence, the student must notify the Office of Medical Education (UFMedEd@ahc.ufl.edu) of the approved dates for the absence.

ABSENCES FOR HEALTH SERVICES

Students are encouraged to maintain their own personal health throughout medical school. This includes their dental, mental and/or physical health. Ideally, students will make every effort to schedule these appointments at dates/times that do not conflict with required education activities. When this is not possible, students must submit their request for an excused absence to the relevant course/clerkship director(s). Upon approval, the director will notify the student of makeup requirements and due date, if appropriate. Additionally, students will not be penalized for absence from class or other scheduled academic activities for medical reasons. This applies to absences for acute illnesses as well as to absences due to regularly scheduled ongoing treatment for dental, mental or physical health. For any questions and/or concerns regarding this policy, students are to consult the Associate Dean for Medical Education or Student Affairs.

ABSENCES DURING JACKSONVILLE CLINICAL ROTATION

If the absence occurs while in Jacksonville on a clinical rotation, the Office of Education Affairs (904-549-5128) in Jacksonville **MUST** be notified in addition to the OME in Gainesville and the clerkship administrator in Jacksonville (904-244-5626).

FOURTH-YEAR INTERVIEW ABSENCES

Students are expected to schedule residency interviews during their interview month and vacation. However, due to the inherent unpredictability of the residency interview process, it may be necessary for students to schedule interviews during an elective. Students should not schedule interviews during electives without prior approval of the elective director. The approval process may include discussion and provision of documentation that the interview was impossible to schedule at another time. The make-up may include additional clinical assignments and/or extension of the elective into another time period. Students should not schedule interviews during required clerkships.

*** Repeated unexcused absences will result in a professional concern notation in the MSPE, or additional disciplinary action.**

Requirements for class attendance and make-up exams, assignments, and other work within the UF COM are consistent with the university policies that can be found at <https://catalog.ufl.edu/ugrad/current/regulations/info/attendance.aspx>.

STUDENT COUNSELING AND HEALTH CARE

Policy

Medical and psychiatric physicians at the Student Health Care Center (SHCC) may hold faculty positions in the College of Medicine and, therefore, may have academic and/or clinical teaching responsibilities with medical students. Most of the teaching assignments bring the faculty member into direct contact and academic involvement with only a few students in each class year. Because of the potential for conflict, medical students presenting for services at the SHCC or the SHCC Shands satellite clinics will be given the option to see (1) a faculty member or alternative health care provider who has not, and will not, have an academic role with them or, (2) a health care provider in the community.

The Director of the College of Medicine, Office of Student Counseling & Development also holds a faculty position. However, this individual does not have any academic and/or clinical teaching responsibilities, is not involved in the academic assessment of the students, and does not take part in decisions regarding the advancement/promotion and/or graduation of medical students.

Procedure - Gainesville

Medical students will be notified of this provision during their orientation to the College of Medicine. The policy shall also be posted on the Student Affairs and Student Counseling and Development websites. Additionally, this information will be presented annually to the faculty members who serve as the Collaborative Learning Group Leaders, as well as the Course Directors and Clerkship Directors.

When students call to make medical or psychiatric appointments at the SHCC, at Shands or an associated clinic, they should identify themselves as being a medical student. Students can request an appointment with a healthcare provider who does not have a teaching role. If a non-teaching physician is not available at either the main SHCC or any of the satellite clinics, the student will be referred to a non-UF physician in the community.

If a student is assigned to a clinical site or service that involves one of his/her health care providers, the student may request a reassignment to a different service.

Procedure - Jacksonville

Should students need to seek counseling or other mental health services while on a rotation in Jacksonville, they may contact an independently contracted counseling center, Employee Assistance Program (EAP) at (904)296-9436 or (800)327-9757. This is a 24-hour Helpline staffed

by licensed professionals. Services provided to medical students are at no charge and are kept confidential.

For medical services, students may contact the UF Community Health Center (CHC) at (904)244-5673 or (904)244-2573 to schedule an appointment. If the student is unable to reach the CHC, students may call the main appointment line at (904)244-5121 and press 1. In either case, they should identify themselves as a medical student needing Acute/Urgent Care, so the appointment is made with a healthcare provider who does not have a teaching role. Students will not have any out of pocket expense, and the student's health insurance company will be billed for the visit, including any ancillary services such as laboratory tests, X-rays, or specialty consults.

POLICY ON STUDENT EVALUATIONS OF COURSES, CLERKSHIPS, AND FACULTY

One of the essential professional attributes of a physician is a commitment to life-long learning and improvement of systems that enhance patient care and the health of the population. The UF COM medical education program recognizes that learning occurs through both individual and collaborative study, thoughtful reflection and self-assessment, patient interactions, and formal and informal interactions with faculty, house staff and other members of the health care team.

Effective learning occurs with a bidirectional flow of information, such that learners become teachers and performance of both the learner and the teacher improves. Thus, there is a professional expectation that students will provide feedback for each educational experience (e.g. course, clerkship) in order to improve the quality of our teaching and curriculum.

The Office for Educational Affairs in the College of Medicine continually and systematically collects, uses, and responds to students' feedback through online questionnaires and small group debriefings. Numeric results and students' written comments are carefully reviewed by faculty, department chairs, and the Evaluation committee to reward faculty efforts and promote positive curricular change. The College of Medicine is committed to ensuring that our evaluation tools show evidence of validity, are of reasonable length, and are useful for individual faculty and for COM medical education quality improvement.

The Evaluation committee, with the approval of the Curriculum Committee, has established the following guidelines in order to elicit the meaningful participation of every student in the evaluation process.

- Every required course/clerkship will be evaluated by students. Students will have a minimum expectation of responses based on the needs of each course or clerkship as defined in the syllabus. Each student must complete at least 75% of all assigned faculty, resident, and small group leader evaluation forms associated with a course/clerkship in each year of enrollment. **There is an expectation of 100% completion of the overall course and clerkship evaluations.**
- Every student is expected to respond in a professional manner to each item which she/he feels qualified to answer.
- Strict confidentiality of responses is assured. Evaluation data (numerical ratings and student comments) is de-identified. However, the completion of evaluations will be tracked.

Failure to complete course/clerkship evaluations within the established timeframe will be noted as a professional concern in a student's professionalism competency evaluation and may impact the overall grade in the course/clerkship. Repeated failure to respond in a timely and reasonable fashion or failure to achieve the required completion rate will be brought to the attention of the Academic Status Committee.

MEDICAL STUDENT FEEDBACK POLICY

All courses and clerkships will provide summative feedback on student performance at the conclusion of each course/clerkship. Assessments will be chosen based on the learning objectives of each course/clerkship.

All required course/clerkships must assess and provide formal mid-course/clerkship feedback to each student, to allow sufficient opportunity for improvement or remediation. Courses or clerkships that are of a short duration (two or less weeks) may not have time for a structured formative assessment; however, another form of feedback that allows students to self-assess and improve must occur.

Formative feedback in courses

- Courses are allowed to determine the format and scheduling for formal mid-course feedback.
- The format in which feedback will be provided must be explicitly listed (e.g., quizzes, mid-term exam, face-to-face meeting, narrative when appropriate) in the syllabus.
- The course director should review aggregate data available.
- The collaborative learning group (CLG) leader provides formative feedback, mentoring, coaching and advising. CLG leaders do not assign grades.
- Documentation of the feedback must be provided to the student either electronically or on paper.

Formative feedback in clerkships

- Clerkships are allowed to determine the format and scheduling for the formal mid-clerkship feedback.
- The syllabus should explicitly state at what point the mid-clerkship feedback will be provided.
- The format in which feedback will be provided must be explicitly stated in the syllabus.
- The clerkship director should review aggregate feedback provided during each rotation.
- Documentation of the feedback must be provided to the student either electronically or on paper.

The course/clerkship director is responsible for ensuring that mid-course/clerkship feedback occurs. In addition, the Committee on Program Evaluation and Student Assessment will ensure that mid-course/clerkship feedback occurs as part of the formal course/clerkship review. If appropriate feedback does not occur, the Associate Dean for Medical Education (ADME) will be informed. The ADME will meet with the course/clerkship director to ensure that appropriate implementation of the policy occurs.

Narrative description of medical student performance

- A narrative description of the student's performance must be included as a component of all required clerkship student final assessments.
- CLG leaders will provide narrative assessments of student's performance during fall and spring semesters of the first two years across the six competencies, as appropriate.

- All courses are encouraged to provide narrative descriptions of student’s performance, as appropriate.

Grades

Student performance in academic course work is evaluated by the level of competency achieved and, secondarily, by letter grades A through E or Satisfactory/Unsatisfactory ratings in pass/fail courses. Final grades should be made available to students within 2 weeks of the end of a course and prior to 6 weeks of the end of a clerkship. Only final grades are forwarded to the registrar for posting on the official transcript.

Grading System

A (Exemplary): The student has performed consistently in a manner judged as truly outstanding. The performance is worthy as a model.

B or B+ (Superior): The student has performed consistently in a manner judged to be clearly above average competency. The performance may occasionally be exemplary but not consistently so.

C or C+ (Competent): The student has performed consistently in a manner judged to be at or above the minimum level of competency. The performance may occasionally be superior, but not consistently so. No significant portion of the performance has been below the minimum level of competency.

D (Unsatisfactory): The student has performed in a manner judged as marginal in relation to the minimal level of competency. In some aspects, performance may have been above the minimum level, but in other aspects, or at other times, performance has been below the minimum level. The student has **not** demonstrated adequate mastery of the pertinent competency. **REMEDICATION IS REQUIRED.**

E (Failure): The student has performed in a manner judged to be below the minimum level of competency. While the student’s performance may occasionally meet or even exceed the minimum acceptable level, but this is the exception rather than the rule. **REPEATING COURSEWORK IS GENERALLY REQUIRED.**

I (Incomplete): This grade is to be used for students who have failed to complete all required components of a course or clerkship. The grade of “I” must be remediated before a student progresses to the next academic year, unless an extension is granted by the ASC. “Incompletes” change to “E” grades if the remediation is not completed in a satisfactory manner. The deadline for completion of “incompletes” does not apply while a student is on an approved leave of absence. The “incomplete” will be replaced on the transcript when a final grade has been assigned. All “incomplete” grades must be resolved before a student is eligible for graduation.

H (Hold): The grade of “H” may be given when a student is unable to complete coursework due to serious illness or some other extenuating circumstance. The grade does not convert automatically to an “E” at the end of the next semester. The rules on the removal of the “H” are

the same as the “I.” An “H” grade must be replaced by a passing grade before a student is allowed to progress to the next level of training or graduate.

GRADE GRIEVANCE PROCESS

Medical students may appeal a final grade or evaluation based on concerns about discrimination or the process used to assign the grade. The process is as follows:

1. The student submits his/her written concern(s) about a final grade or evaluation and arranges a meeting to discuss the concern(s) with the respective course/clerkship director within one month of the posting of that grade.

If the student is not satisfied with the outcome:

2. The student may submit their written explanation of the grievance to the Grade Grievance Committee consisting of the Chair of the Course/Clerkship Committee, or designee if it involves his/her course/clerkship, and three faculty familiar with the medical education program who are not involved in the same course/clerkship as the grievance, or are members of the ASC. A 4th year medical student from the ASC will serve as a non-voting member on the Grade Grievance Committee. The faculty members of the Grade Grievance Committee are appointed by the Associate Dean of Medical Education.
3. After review, the Grade Grievance Committee will submit a recommendation to the Associate Dean for Medical Education and the Chair of the Academic Status Committee who will review the report and provide the response to the student.
4. The decision of the Associate Dean for Medical Education and the Chair of the Academic Status Committee is final.

Grade grievances must follow UF policy. Additional information can be located, <https://registrar.ufl.edu/services/petitionpolicy>.

The UF Office of the Ombudsman is another resource for students with a university related problem and/or concern. For additional information about the Office, see <http://www.ombuds.ufl.edu/>.

UNITED STATES MEDICAL LICENSURE EXAMINATION (USMLE)

A passing score on the USMLE Step 1, Step 2 Clinical Knowledge (CK), and Step 2 Clinical Skills (CS) examinations are required for graduation from medical school. Students must have the approval of the Academic Status Committee to be sponsored for each of the three USMLE examinations.

USMLE STEP 1

All students must take USMLE Step 1 following the successful completion of Phase 1 (Principles of Medical Practice) and prior to beginning Phase 2 required clinical clerkships. All students must complete USMLE Step 1, on or before the Sunday immediately prior to the start of orientation to Phase 2 clerkships, unless there is an extraordinary circumstance that warrants delay. To support success on USMLE Step 1, all second year students will take the CBSE within 1 week of completion of Phase 1 courses.

Students who (1) have a cumulative average score for Phase 1 courses ≥ 1 standard deviation below the class mean **and** (2) score ≤ 56 (Step 1 equivalent = 165) on the CBSE will be required to:

- Meet with the learning specialist and develop a structured learning plan.
- Meet with an identified content expert.
- After 4 weeks of intentional study; students identified above must retake the CBSE* and score at 64 or above (Step 1 equivalent = 185) to be sponsored for USMLE Step 1.
- Students who do not make the benchmark will delay the first clerkship and have a monitored individual study plan approved by the Academic Status Committee.

*Of note: any student may take the CBSE again at the 4 week mark for self-assessment.

Not sitting for USMLE Step 1 prior to the beginning of Phase 2 required clinical clerkships in May results in an immediate one year leave of absence for the student. Deferrals may be granted by the Associate Deans for Student Affairs or Medical Education. Deferrals may be granted for medical reasons. Documentation from the student's healthcare provider will be required. Deferrals may also be granted for significant personal reasons, such as life-threatening illness in a close relative.

If a student receives notification of USMLE Step 1 examination failure, the student may petition the ASC to request approval for a second administration of the USMLE Step 1 examination. If a second administration of the USMLE Step 1 examination is approved by the ASC, students who are otherwise in good academic standing will be allowed to finish their current clerkship. If they are on the Family Medicine Clerkship, they may finish the clerkship. They will then defer the next clerkship to study for the re-examination. They must prepare an individualized study plan and have this plan approved by the Associate Dean for Medical Education or the Associate Dean for Student Affairs. They must register for the re-examination prior to the onset of the next clerkship.

Students who are not in good academic standing (e.g., academic probation) at the time they receive notification of failure should follow the same course of action outlined above with one exception. If approved by the ASC for a second administration of the USMLE Step 1 exam; their study plan

must also be approved by the ASC. Any student who does not pass USMLE Step 1 within one year of the end of the Phase 1 curriculum must appear before the ASC.

Students who subsequently fail a second administration of USMLE Step 1 examination and have previously failed a course or received an unsatisfactory grade will be on academic probation. These students may petition the ASC to request approval for a third administration of the examination. If approved by the ASC the student will be placed on a leave of absence for the remainder of the school year in order to prepare for the examination. Students must schedule the re-examination by March 15 so that the examination score is available before the start of the new Phase 2 academic year. Failure of USMLE Step 1 examination on the third attempt will result in dismissal of the student from medical school. The student may appeal this action to the ASC. If the ASC denies the appeal, the student may then appeal to the Deans' Advisory Committee. The decision of the Deans' Advisory Committee is final and will constitute final agency action.

USMLE STEP 2

All students are required take both USMLE Step 2 examinations, Cognitive Knowledge and Clinical Skills, after successful completion of Phase 2 and prior to October 31 of their fourth year. Exceptions due to extenuating circumstances may be approved by the Associate Dean for Student Affairs. Students are not eligible for graduation unless they achieve a passing score on both USMLE Step 2 CK and CS examinations. Students who receive a failing score on either USMLE Step 2 CK or Step 2 CS will be referred to the ASC for review.

CLINICAL SKILLS EXAMS (CSEs)

Seven Clinical Skills Exams (CSEs) are required within the UF COM educational program as outlined below:

- Year 1 – Two CSEs are conducted within the ICM courses.
- Year 2 – One CSE is assessed during the ICM course. A second CSE (CSE 2B) is part of the USMLE Step 1 Preparation course and is a high stakes examination. If a student fails the second examination he/she must develop an individualized learning plan and review best practices videos. The student will also meet with the Medical Director of the Anaclerio Learning and Assessment Center or the Associate Dean for Medical Education to review performance and the ILP. The student may then progress to the third year clerkships. After 3-6 weeks, the students will revisit their ILP and reflect on performance and progress. This is shared with the Associate Dean for Medical Education.
- Year 3 – Two CSEs are required independent of the clerkships. The first CSE occurs near the end of the first semester. This examination is “formative” for most students. For students who failed the CSE 2B, this examination is, in essence, the remediation examination. **They must pass this examination in order to continue in the clerkships.** Another CSE is presented near the end of the third year. Students who fail this examination must meet with the director of the 4th year and the Associate Dean for Student Affairs to discuss modification of their senior schedule. They also will be required to take an elective designed to improve interviewing and physical examination skills. This course is also required for any senior student who fails USMLE Step 2 CS.
- Year 4 – One CSE is required within the sub-internship rotation and is formative.

POLICIES FOR UNSATISFACTORY PERFORMANCE AND/OR UNPROFESSIONAL BEHAVIOR

Students are expected to adhere to the Student Conduct and Honor Code of the University of Florida. In cases of alleged violation of the Student Conduct and Honor Code, actions will proceed in accordance with University of Florida policies:

<https://www.dso.ufl.edu/sccr/process/student-conduct-honor-code/>.

Preclinical Courses (Phase 1: Principles of Medical Practice)

If a student's initial performance is **unsatisfactory** in one of the preclinical courses, competencies, or Clinical Skills Examinations, his/her academic performance will be reviewed by the Academic Status Committee (ASC). The course director will present a plan for remediation, which will be reviewed by the Committee. The remediation plan may be as straightforward as an Individualized Learning Plan (ILP, see [Appendix A](#)) or an independent study followed by re-examination. Exams are scheduled during non-curricular times, such as winter, spring or summer break. Alternatively, successful remediation may require repeating the entire course. If a student successfully completes remediation, the transcript will show a grade of "Satisfactory". Students who fail to satisfactorily complete their remediation will receive a grade of "Unsatisfactory," will be reported to the ASC, and may be subject to adverse academic action such as a leave of absence, probation or dismissal. If the student fails to make adequate academic progress due to multiple failures; the ASC may require the student to repeat the academic year.

No student is allowed to begin the clinical clerkships until all foundational courses have been satisfactorily completed and the student's promotion is approved by the Academic Status Committee.

Exam Grade Policy

Any student who scores below a passing grade on any major examination in the foundational courses must meet with the course director to discuss his/her performance and learning strategies. If a student performs two standard deviations below the mean on any Exam or Course during Phase 1, the student will be required to meet with the Learning Specialist for an intake. Failure to meet with the Learning Specialist within two weeks of the exam will result in an appearance before the Academic Status Committee.

Clinical Clerkships (Phases 2 & 3)

If a student receives a grade less than a B or receives an **unsatisfactory** rating in any of the clinical competencies, her/his academic performance will be reviewed by the Clerkship Directors' Committee. The Clerkship Directors' Committee will refer students with repeated poor performance in more than one of the clinical clerkships to the Academic Status Committee (ASC), and present a plan for remediation. The remediation plan may range from re-examination to repeating clerkships. The ASC must formally approve the remediation plan. Repeated poor performance in the clinical clerkships may result in an adverse academic action such as probation or dismissal from school.

Academic Probation for Academic Progress

Students who achieve 2 or more failures or unsatisfactory grades of any course or clerkship will be automatically placed on academic probation, even with the successful remediation of course/clerkship. This may be appealed to the ASC. The appealed decision of the ASC is final.

Academic Probation during Repeated Year

Any student who must repeat a school year for academic reasons will be placed on academic probation. The student must appear before the ASC to review their academic progress prior to removal from probation. This may be appealed to the ASC. The appealed decision of the ASC is final.

Academic Standards for Students Who Hold Leadership Positions in University of Florida Campus Organizations/Activities

The College of Medicine strongly encourages students to assume leadership positions in various sanctioned campus organizations and activities (e.g., class officer positions, student interest groups, health outreach missions, Equal Access Clinic). Students who accept such leadership positions should be in “good academic standing,” defined as:

- A passing grade in each course.
- Successful completion of USMLE Step 1 on the first attempt.
- A grade of at least “B” in each required third and fourth year clerkship.

If students fall below this specified standard of academic performance, they may be required to relinquish their leadership position until their academic performance returns to the acceptable level. They also should seek assistance from appropriate advisers, counselors and mentors.

CLERKSHIPS AND ELECTIVES

REQUIRED THIRD-YEAR AND FOURTH-YEAR CLERKSHIPS

All University of Florida College of Medicine students must take their **required** third- and fourth-year clerkships on the University of Florida campus, including UFHSC Jacksonville, or at sites utilized by the required clerkships. In case of extraordinary circumstance, appeals for exceptions to this policy will be heard by the ASC. No student from other institutions will be allowed to take **required** courses or clerkships at the University of Florida (e.g., courses or clerkships that are required either by the student's home school or the University of Florida).

POLICY ON STUDENT SUPERVISION IN CLINICAL SETTINGS

Faculty course and clerkship directors are responsible for ensuring that students are appropriately supervised at all times when assigned to clinical settings. The attending physician is responsible for the supervision of all medical students assigned to his/her clinical service. The attending physician has medical and legal responsibility for the patient's care and is ultimately responsible for patient evaluation and management. Supervision and teaching of medical students may be delegated to resident physicians and other health care providers when appropriate. The Office of Medical Education reviews syllabi and medical students' evaluations to ensure that supervision is appropriate at all times. Among other assessment variables, students evaluate the quality of teaching of faculty and residents and the quality of feedback they receive. If a problem in supervision is apparent, the Associate Dean for Medical Education will meet with the clerkship director(s) to address the issue(s). If an issue arises in Jacksonville, the Associate Dean for Student Affairs in Jacksonville will meet with assistant clerkship director(s) to address the issue(s).

ORGAN PROCUREMENT TRIPS

Medical students may participate in organ procurement trips. Participation of the medical student is optional. Accepting or declining to participate must not affect a student's evaluation on a clerkship.

ELECTIVES

The senior year is comprised of thirteen, four-week periods, during which students must obtain a minimum of 40 hours of course credit. Students must schedule 20 credits of elective courses and five required courses listed below:

1. Anesthesiology & Critical Care (4 weeks)
2. Emergency Medicine (4 weeks)
3. Geriatrics/Rehabilitation (4 weeks)
4. Internship 101 (3 weeks/4 credits)

5. Sub-internship in Community Health and Family Medicine, Internal Medicine, Pediatrics, or Surgery (4 weeks).

Elective courses and clerkships provide students with the opportunity to select educational opportunities that align with their educational plan and career interests. UF COM has extensive resources, in addition to offering flexibility for planning an individualized program.

Electives in both the basic and clinical sciences serve to broaden the student's experiences. Electives also provide the student with opportunities to strengthen learning gaps and/or to pursue subjects of special interest. There is no set maximal number for electives in a specific area. Students review their schedule with their academic advisor for appropriateness of their choices.

The goals of electives are to:

- Facilitate the student's increasing responsibility as an adult learner for educational self-determination.
- Provide opportunities to augment previous experience in clinical and basic sciences in preparation for his/her chosen career.
- Provide opportunities to acquire and utilize skills which will be helpful in his/her future career (example: Radiology for a student who will be pursuing Internal Medicine).
- Provide opportunities to strengthen identified learning gaps.
- Provide experiences to meet the needs of students with specific goals, such as research, postdoctoral education, international experiences, and/or special learning activities outside the UF COM.

MedCat has been prepared to provide students electronically with essential information needed in selecting electives. The Director of the Fourth Year, who reports to the Associate Dean for Medical Education, approves all electives that are subsequently listed in MedCat. Students are to meet with their academic advisor to discuss elective choices. The Director of the Fourth Year will review the schedules of students who are in the bottom quarter of the class to ensure that they provide an appropriately rigorous educational experience.

All electives taken at locations other than UF Health facilities or the Malcom Randall Veterans Affairs Medical Center in Gainesville are considered to be **external electives**. The detailed rules governing electives are explained in the Senior Elective Catalog. Most students will be limited to a maximum of three external electives. Any student who wishes to take more than three months of external electives must obtain their advisor's permission, the approval of the Director of the Fourth Year, and the Academic Status Committee. Students who rank in the lower quarter of the class are usually limited to one external elective. However, they may formally petition the Academic Status Committee permission to take additional electives.

ELECTIVE CREDIT TOWARDS THE M.D. DEGREE

Dual degree students (e.g., MD/PhD, MD/MPH) may petition the Academic Status Committee for a waiver of 4 weeks of elective credit during Phase 3 toward the MD degree for each year of training outside the MD program for a maximum of 16 credits. This will require endorsement by

the professional or graduate program and approval by the Academic Status Committee of the COM.

ADVANCED DEGREE AFTER MATRICULATION TO MEDICAL SCHOOL

Students who complete an advanced degree program outside the dual degree option (e.g. MD/PhD) may petition the ASC for a waiver of 4 weeks of elective credit applied toward the MD degree for each year of training outside the MD program for a maximum of 16 credits. The student must provide justification for the degree enhancing their medical career. Endorsement is by the Associate Dean for Medical Education or the Associate Dean for Student Affairs with approval by the ASC.

MEDICAL STUDENT WORK/DUTY HOURS POLICY

UF COM is committed to providing a supportive educational environment.

PRECLINICAL YEARS (Phase 1)

The curriculum for the preclinical years is specifically designed to provide multiple learning opportunities for students. Students are considered responsible for their own learning. Attendance is encouraged for all learning sessions and required for selected activities including: patient presentations, those involving team accountability (e.g., Collaborative Learning Groups, all small group sessions), and clinical skill/ OSCEs/ Anaclerio Learning and Assessment Center activities. Didactic time is limited to approximately 20 hours a week with an additional 10 hours of scheduled group activity (e.g., labs and collaborative learning groups).

CLINICAL YEARS (Phases 2 & 3)

This policy clarifies the requirements and protection to medical students regarding hours they are required to work during their clinical rotations at the University of Florida. All clinical rotations will follow this policy. The policy will be posted in the syllabi for all clerkships.

Work hours are defined as clinical activities related to the rotation, inclusive of clinical care, call, shifts and night float, and exclusive of independent afterhours studying.

Each student is limited to a maximum of 80 hours of assigned clinical duties per week averaged over the length of the rotation. The 80 hours includes time spent sleeping at the hospital while on call and non-clinical educational activities at the COM. Students are required to have four 24-hour periods off averaged over a four week period. If an infraction should occur during a clerkship, the student should contact either the Clerkship Director or the Associate Dean for Medical Education (who will contact the Clerkship Director). The Clerkship Director will work with the site to rectify the infraction of duty hours. Additionally, students will report the extent of work hours in the formal clerkship evaluations.

Compliance will be reviewed by:

- a. Clerkship Directors

Review of student evaluations via mid-clerkship feedback and at end of each clerkship rotation

- b. Committee on Program Evaluation and Student Assessment
Review of student evaluations at end of each clerkship rotation

If students have been compelled to work beyond the allowable time frame as described above, the Associate Dean for Medical Education will meet with the specific clerkship director to assure future compliance.

LEAVE OF ABSENCE

Students who desire a personal leave of absence, medical leave of absence, or educational leave of absence should submit their request in writing per the policy outlined below.

The total time spent on leave of absence may not exceed one year unless specifically approved by the ASC. The Associate Dean for Student Affairs, or designee, will present the student's appeal for an extension and will advise the ASC as needed.

Leave of Absence - Academic

The ASC can place a student on academic leave of absence. Only the ASC can approve the return to registration from an academic leave of absence.

Leave of Absence - Disciplinary

Only the ASC can place a student on a disciplinary leave of absence or approve the return of a student to registration from a disciplinary leave of absence.

Leave of Absence - Educational/Research

Students in good academic standing who wish to take a leave of absence to pursue another degree, such as the MPH or MBA, or who wish to pursue an extended research experience should submit a written request to the Chair of the Academic Status Committee. This request should specify the purpose and the time period of the leave of absence. The request should be accompanied by a formal letter of acceptance for the alternate degree program or research investigation. As a usual rule, the ASC will approve such a request for a period of one year. Students who wish to extend their leave of absence for more than one year should make a formal written request to the Chair of the Academic Status Committee. That request should provide a detailed progress and an explanation for continuance of the academic program or research experience. Progress reports from the mentor should be provided to the ASC on an annual basis for any educational/research leaves.

Leave of Absence - Medical

The Associate Dean for Medical Education or the Associate Dean for Student Affairs may approve a leave of absence of up to six weeks for compelling medical issues that are temporarily impeding a student's academic progress. The Academic Status Committee will be notified that the leave of absence has been granted. If the leave extends for more than six weeks, the student must make a leave request to the Academic Status Committee. This should include documentation from a treating practitioner, a proposed return date and an academic plan and schedule. This must be

approved by the Academic Status Committee. When a student wishes to return to registration after a medical leave of absence, he/she must make an appearance before the Academic Status Committee. Students returning must present an updated academic plan and documentation that their medical situation has resolved or is being appropriately addressed, and that they are fit to resume their medical studies (e.g., health care provider letter and/or cognitive testing results).

Leave of Absence – Personal

The Associate Dean for Medical Education or the Associate Dean for Student Affairs may approve a leave of absence of up to six weeks for compelling personal issues that are temporarily impeding a student’s academic progress. The Academic Status Committee will be notified that the leave of absence has been granted. If the leave extends for more than six weeks, the student must submit a request for extension, which includes an academic plan and schedule, to the Academic Status Committee for approval. When a student wishes to return to registration after a personal leave of absence, he/she must present an updated academic plan and make an appearance before the Academic Status Committee.

Leave of Absence - USMLE

Students who do not pass the USMLE examination can be placed on a USMLE-leave of absence by the Associate Dean for Medical Education or the Associate Dean for Student Affairs. Students will be reinstated by the Associate Dean for Medical Education or Associate Dean for Student Affairs upon successful completion of the examination.

READINESS TO RETURN POLICY

The UF COM wants to ensure that any student who has had a leave of absence for medical reasons or an extended leave of absence for educational or disciplinary reasons is evaluated for their readiness to return to registration. Exceptions to this policy include any student who takes an educational leave of absence of 1 year or less and MD-PhD students who already have a curriculum in place for their return. All other students will be required to provide documentation of their readiness to return or will be required to have an evaluation from a 3rd party that specifically addresses their ability to return successfully to the medical school curriculum. The most common scenarios, but not all, in which a student would be required to provide documentation for their readiness to return include:

1. A situation in which a student is unable to perform essential functions of a medical student because of a physical illness. (short term or long term)
2. A situation in which a student is unable to perform essential functions of a medical student because of a mental health diagnosis.
3. A situation in which a student is unable to perform essential functions of a medical student because of addiction.
4. A situation in which a student may pose a direct threat of harm to self or others due to a physical or psychological condition.
5. A situation in which a student’s ability to perform essential functions may be impaired by the duration of time they spent away from the medical school curriculum. (e.g.-completing a 2 year MBA or MPH program or taking 3 years to do a research project)

For situations 1-4, a fitness for duty evaluation will be required. This may come in the form of a complete evaluation of the student's stressors, abilities, and accommodation requirements (e.g., after a diagnosis of anxiety, depression, substance abuse, a physical injury that impacted cognitive function). It may also be in the form of a note from the treating physician stating the physical limitations of the student and indicating when the student may be able to return to full function (e.g., after a broken leg, surgery, or cancer treatment). The decision for which type of evaluation will be required will be made by the Academic Status Committee, which has oversight of the student's entire academic history.

The following is a thorough, but not exhaustive, summary of possible scenarios that may occur.

MEDICAL LEAVE OF ABSENCE

- A. Non-cognitive or physical impairment (Situation #1 above)
 - a. Return to registration approvals and documentation will be required for students who have both short term and long term absences.
 - b. Documentation should describe the following:
 - i. When the student is able to return to registration
 - ii. Whether there are limitations to their return
 - 1. The student will have to apply through the DRC for accommodations if they are recommended by their treating physician, and those accommodations will be determined to be appropriate, or not, based on the written technical standards of the COM
 - iii. The need for on-going appointments/supports and the duration of those
 - c. In some cases, a fitness for duty evaluation will be required that can also assess the student's medical situation in the context of the stressors of the medical school curriculum. Please refer to the Medical Student Fitness for Duty Policy.
 - i. This may be due to time away from the curriculum or other concerns including, but not limited to, previous academic difficulties.
 - ii. This determination will be made by the Academic Status Committee
 - iii. If the ASC does not determine a FFD evaluation is necessary, then (b) applies
- B. Cognitive Impairment (Situation #2,3,4)
 - a. Mental Health Diagnosis
 - i. Return to registration approvals and documentation of appropriate treatment will be required for any student who has taken a short-term medical leave of absence (less than 6 weeks) and who has not had prior academic or professionalism concerns.
 - ii. Documentation from the treating physician should describe the following:
 - 1. When the student is able to return to registration
 - 2. Whether there are limitations to their return
 - a. If yes, then the student will have to apply through the DRC for accommodations if they are recommended by their

treating physician. Those accommodations will be determined to be appropriate, or not, based on the written technical standards of the COM.

3. The need for on-going appointments/supports and the duration of those
 - iii. Return to registration for a student who has taken a leave of absence that exceeds 6 weeks may require a fitness for duty evaluation (Please refer to the Medical Student Fitness for Duty Policy). The need for this evaluation will be determined by the Academic Status Committee (ASC).
 1. Options for a fitness for duty evaluation include
 - a. Physician Resource Network (PRN)
 - b. Private Forensic Psychologist or Psychiatrist who provides fitness for duty evaluations
 2. If a FFD evaluation is deemed unnecessary, then (ii) would apply
 - iv. Any student who takes repeated short or long-term absences for any cognitive impairment will require a fitness for duty evaluation after the second leave in order to return to registration
- b. Addiction
- i. Any student who is suspected of having a drug or alcohol addiction will be given the option of self-referring to PRN. If the student refuses to self-refer, he/she will be referred by the COM PRN liaison.
 - ii. In addition, if the student is considered to be impaired, they will be immediately removed from any patient interaction until after their PRN assessment is completed.
 - iii. Any student who is deemed by PRN to require a contract and monitoring will be required to adhere to the recommendations of PRN prior to their return to registration.
 - iv. Any student who is not compliant with their monitoring contract will be subject to dismissal from the COM.

EDUCATIONAL LEAVE OF ABSENCE

Any student who is on an education leave of absence that exceeds 1 year will be required to participate in a return to registration program in order to prepare them for their return to the medical school curriculum. This re-orientation may take the form of a formal intensive course, the development of an individualized learning plan followed by an assessment, or a videotaped standardized patient encounter. The return plan will be dependent upon the student's prior academic history, the phase in which they will return, and the duration of time away from the medical curriculum. The Academic Status Committee will determine what type of re-entry program is indicated.

MEDICAL STUDENT FITNESS FOR DUTY POLICY

Policy Summary: This University of Florida (UF), College of Medicine (UF COM) policy outlines the process for ensuring a medical student's (student) fitness for duty (FFD) meets the standards of practice as outlined by the [College of Medicine Technical Standards](#). The goal of this policy is to address the need to assess a student's mental/physical state when returning to medical school and/or clinical care environment for the safety of the student and patients under the student's care. The policy also defines the procedures to be followed to ensure the student receives effective treatment with the intention to return to clinical and educational duties. This policy does not supersede or replace federal and state laws and regulations.

UF COM is required to comply with Americans with Disabilities Act (ADA) of 1990. In general, the ADA prohibits: (1) employers/schools from requiring a student to submit to a medical examination; and (2) employer/school inquiries into whether an individual has a disability. However, the protections afforded by the ADA are not without limits. Federal law permits UF COM to require a medical examination of a student if the requirement for the examination is performance-related, consistent with business necessity and if UF COM has a reasonable belief that:

- (1) The student's ability to perform essential functions may be impaired by a health condition; or
- (2) The student may pose a direct threat (i.e., significant risk of substantial harm to self or others) due to a medical condition.

Policy:

The University of Florida (UF), College of Medicine (UF COM) is committed to the promotion of a safe and healthy environment for our students, patients and staff. In order for appropriate learning and care of patients to occur, each student must be able to perform his/her responsibilities in a safe and effective manner. Those students who are not fit for duty may present a safety risk to themselves, patients or others and may adversely affect learning in the classroom and/or clinical setting, as well as patient care. With the safety of the student and patient in mind, it is important that individuals with a medical condition that affects their ability to perform in a safe manner receive ongoing care and support. The UF COM Associate Dean for Student Affairs encourages students to register with the Disability Resource Center to receive accommodations. The Associate Dean may also be able to provide additional information to resources and is available to meet with a student to discuss support services available within the college. Students must meet minimal technical standard for COM admission, progress during the period of studies and for graduation, with or without reasonable accommodations.

Faculty and Clinical Supervisors are responsible for the safety of students and the patients whom they treat. It is important to communicate observations of erratic behavior that may affect the safety of others. Supervisors must notify the Associate Dean for Student Affairs who will assess the immediate concern, take appropriate action and refer the matter to the Academic Status Committee (ASC). The ASC will follow standard protocol for determining whether additional action is required that may include an extended medical leave of absence.

In order to ensure an individual is ready to return to their academic and clinical duties, UF COM may request an individual to provide evidence of receiving an evaluation that confirms their fitness for duty from a provider who is trained in FFD evaluations.

If the student is found to be impaired, he or she will be relieved of their clinical/educational responsibilities until it is determined they are fit to return to their clinical/educational responsibilities. Participation in a treatment or rehabilitation program does not guarantee continued enrollment and may not necessarily prevent disciplinary action for violation of any UF COM policies. A student must comply with all treatment recommendations resulting from a fitness for duty evaluation before he/she is permitted to return to school. The Associate Dean for Student Affairs will oversee the evaluation process of the student, as well as plan the return to his/her studies. If the student requires a FFD evaluation, a list of providers who have expertise in FFD evaluations will be provided to the student. The student may select from one of these providers. Every effort will be made to find providers from within and outside of the UF Health system to allow for reasonable choice. The student is responsible for the cost of an evaluation(s). To the extent required by law or UF regulations, UF COM shall protect the confidentiality of the evaluation and the results. Non-compliance with a request for a fitness for duty evaluation shall be cause for disciplinary action up to and including dismissal from medical school. If a student is dismissed, they have the ability to appeal the decision to the Deans Advisory Committee per the student handbook.

Referral Process:

Step One: Student Advisors or Faculty must report suspected students to the Office of Medical Education. Self-referral by a student is also appropriate. *Contact Phone: (352) 273-7971*

Step Two: The Academic Leadership from either the Office for Student Affairs or the Office of Medical Education will meet with the student to determine the next course of action. If it is determined that the student requires an extended medical leave of absence, the matter will be referred to the ASC. If the ASC approves the leave of absence, the student will be asked to have the appropriate type of evaluation (mental health, substance abuse, or physical health evaluation) done to determine a plan of treatment.

- If a student is in need of mental health evaluation he/ she will be referred for a FFD evaluation prior to re matriculating.
- If student is in need of substance abuse evaluations he/ she will be referred to PRN.
- If the student is in need of a medical evaluation, he/ she will be referred to the appropriate physician, and if deemed appropriate, will be referred for a FFD prior to re matriculating.

Step Three: The Associate Dean for Student Affairs will be the referring contact for the evaluations. The student must sign a waiver to allow the Associate Dean for Student Affairs to review the recommendations provided by the evaluators as well as an executive summary of any completed initial evaluations. *The individual student is responsible for any cost associated with evaluation.*

Step Four: Prior to rematriculating, a summary of the FFD evaluation will be reviewed by the Associate Dean for Student Affairs. Any academic leaves or adjustments will be addressed as necessary with the Academic Status Committee.

After evaluation, the decision options are:

- a. Return to full duty
- b. Return to full duty with recommendations for follow up
- c. Return to part time duty with recommendations for follow up
- d. Not allowed to return to duty

The student and the Associate Dean for Student Affairs will work with the appropriate entities to apply for recommended accommodations to ensure student compliance and success with the recommendations.

Continued matriculation shall be contingent upon compliance with recommendations provided by the formal evaluation. This may include participation in medical treatment programs, periodic drug screen testing and/or professional counseling. Failure to comply with the recommendations or agreed upon accommodations may result in disciplinary action up to and including dismissal from medical school. The Academic Status Committee will determine resolution in cases where students are not compliant with recommendations. The student handbook describes the process of adverse actions and the appeal process for students.

Confidentiality/Privacy of Fitness for Duty Evaluations:

Under the Health Insurance Portability and Accountability Act (HIPAA), documents containing medical information about a student may be considered a medical record and may be regarded as confidential. This information may be shared only as permitted by law.

UF ensures the confidentiality of education and treatment records in accordance with the provisions of various federal, state, and university regulations, including the Family Educational Rights and Privacy Act of 1974 (FERPA), as amended, also known as the Buckley Amendment. FFD evaluations shall be treated as confidential education and treatment records protected by FERPA and shall be maintained by the Office for Student Affairs. These records may be shared only as permitted by law.

PROBATION AND DISMISSAL

Students on probation may be dismissed from school if they receive a grade less than “C” or a grade of **unsatisfactory** in any course or in any competency during their time on probation. Probation will extend for a minimum of one semester beyond the point in time when remediation is satisfactorily completed. The ASC will then regularly review the academic progress of the medical curriculum of a student on probation to determine if a more extended period of probation is warranted. Students on probation are required to follow the plan put forth by the ASC.

As a general rule, a student will only be allowed to repeat one year of the four year curriculum because of poor academic performance. An exception to the rule may be made if 80% of the voting members of the ASC approve.

If there is a determination by the ASC that a student demonstrated unprofessional behavior, several actions may be taken. Depending on the severity of the behavior, the student may be warned in writing that the behavior is unacceptable and that if the behavior is continued, it may lead to dismissal from medical school. Such a letter will provide examples about what is, or is not, acceptable and may encourage the student to seek professional help from an appropriate resource. If there is a second documented case of unprofessional behavior, the student may be placed on probation. The student will be strongly encouraged to seek professional help and will be warned that, if such behavior occurs again, it may lead to dismissal from medical school. If there is a third instance of unprofessional behavior, the student must appear before the ASC to address why she/he should not be dismissed from medical school.

Some types of behavior may be so egregious as to justify immediate dismissal of a student. Such behavior might include criminal acts, persistent substance abuse, blatant disregard for patient safety, or flagrant academic dishonesty.

APPEALS PROCESS

A student will be contacted by the Associate Dean for Students Affairs (or chair of the ASC) when an adverse academic action, such as academic/disciplinary leave of absence, probation, suspension or dismissal is taken or being considered by the ASC. The student may appeal the initial decision and will be scheduled to meet before the ASC as soon as possible, but not less than 5 Business Days after receiving notification. The student will be notified of the specific adverse action that is being considered, advise the student of their rights and provide a copy of the relevant policies that describe the appeals process, including a personal appearance before the ASC. The student will be allowed to have an adviser during the personal appearance, and must provide the identity of the person at least two business days in advance of the meeting. The adviser may not address the committee but may consult with the student. The student will have an opportunity to make an opening and closing statement and to take notes during the meeting. Appealed actions of the committee will be final except in cases of suspension or dismissal. All appeals must be in writing and submitted to the appropriate office within 10 Business Days from the date of the decision letter. Appealed actions will be heard by the Dean's Advisory Committee (ad hoc). This committee will be composed of the Dean of the College of Medicine (chair – will only vote in the event of a tie), Senior Associate Dean for Research Affairs, Senior Associate Dean for Faculty Affairs, Senior Associate Dean and CEO for UF Health Physicians, Chief Medical Officer for UF Health, and the Senior Associate Dean for Educational Affairs (non-voting member). Actions of the Dean's Advisory Committee will be final, and will constitute final agency action. Students dismissed from medical school may re-apply for admission to the College of Medicine. In such cases, the action of the ASC/DAC will be available to the Medical School Admissions Committee.

PROBATION FOR STUDENTS WHO SUCCESSFULLY APPEAL DISMISSAL

Students whose dismissal is reversed by successful appeal and who are permitted to remediate deficiencies will be placed on probation for one year from the date of the appeal hearing. The ASC will review the status of students on probation annually and prior to graduation. The ASC may remove students from probation upon successful remediation. Students will automatically be dismissed if they receive a grade of **D, E, or unsatisfactory** or an **unsatisfactory competency evaluation** in any course during the time on probation.

GRADUATION REQUIREMENTS AND RECOMMENDATIONS

The ASC will review the overall academic and professional performance of each fourth year student in determining the recommendation for graduation. To be considered for graduation, a student must be judged to be in good standing with a GPA of 2.0 or better, have successfully completed all required educational experiences, the Clinical Skills Exams (CSEs), and passed USMLE Step 1 and both USMLE Step 2 Clinical Knowledge (CK) and Step 2 Clinical Skills (CS). The UF COM Executive Committee grants final approval for graduation.

GRADUATION WITH HONORS

Students who have demonstrated outstanding achievements will be recommended for graduation with honors. Excellence of different types will be considered, such as superior academic work, outstanding student research, service or special achievement. The faculty will nominate students for graduation with special honors. Selection will be made by the College of Medicine's Executive Committee.

MEDICAL STUDENT MEETING TRAVEL SUPPORT

UF COM students are encouraged to pursue research and present their scholarly work at conferences. They are also encouraged to represent the school in leadership capacities. Students' research mentors are expected to provide support for students who conduct research under their guidance to attend the meetings. In the event that mentors or student organizations do not have resources to cover their expenses, students may request assistance from the Office of Educational Affairs.

The following criteria must be met before requesting funding:

1. The student must be applying at least three weeks prior to Conference/Meeting/Publication date.
2. Conference/Meeting must take place in the United States.
3. Research being presented must have been conducted while in medical school.
4. The student must be the first-author on paper/poster/abstract.
5. If the student is a national officer of an organization, there must be no other fund sources for travel.
6. The student must be in good academic standing. Students on a leave of absence are not eligible for funding.

Expectation of Students

- Students are expected to contribute to their travel costs.
- Students are expected to submit all receipts within 2 weeks of travel date or funds may be denied.
- Students must notify the Office of Educational Affairs before the planned travel date, if they decide not to travel or if the travel is cancelled.

Funding Availability and Notification

While costs do vary, in general, funding is available for one trip per student not to exceed \$500/academic year (Aug. 1 – July 31). Students can expect a response from the COM within 2 weeks of their submitted request.

What is REIMBURSED

Conference registration, airline/mileage, and/or hotel expense (maximum of 2 nights) will be supported. Please note the COM will not reimburse for Airbnb or other room/house rental stays, printing, food/alcohol, internet services at hotel, and/or other entertainment.

Request

Information to be submitted:

1. Title, authors and electronic copy of abstract and/or poster
2. Name of meeting, location, and dates
3. Faculty mentor endorsement
4. Receipts after meeting

UNIVERSITY OF FLORIDA POLICIES

The University of Florida Board of Trustees, in conjunction with Florida Board of Governors, adopted regulations to govern all individuals on the UF campus, <http://regulations.ufl.edu/regulations/>. UF also adheres to standards of professional conduct set by the Florida Department of Education, http://www.fldoe.org/edstandards/code_of_ethics.asp. Specific UF policies can be found at the following links.

AMERICANS WITH DISABILITIES ACT (ADA) ACCOMMODATIONS

The University of Florida is committed to providing academic accommodations for students with disabilities. Students requesting accommodations must first register with the Disability Resource Center (DRC) (352-392-8565 <https://disability.ufl.edu/students/get-started/>) by providing appropriate documentation. Once registered, students should present their accommodation letter to the College of Medicine's ADA Representative, Mr. Jim Gorske (jgorske@ufl.edu), who will distribute the accommodation letter to appropriate course and/or clerkship directors, as needed, as well as the testing center. The University encourages students to register with the DRC as soon as they begin medical school or upon the verification of a disability.

CONFLICT OF INTEREST POLICY (COI)

Information about the College of Medicine COI policy can be found at <https://bridge.ufhealth.org/college-of-medicine-compliance/policies/>. Additionally, the University-wide Guidelines, Policies, and Procedures on Conflict of Interest and Outside Activities, Including Financial Interests can be located at <http://generalcounsel.ufl.edu/media/generalcounselufledu/documents/COI.pdf>.

THE FAMILY EDUCATION RECORDS AND PRIVACY (FERPA)

The U.S. Department of Education summarizes the rights afforded to students by FERPA as:

- The right to inspect and review educational records within a reasonable period of time and no more than 45 days after the institution has received the request
- The right to request to amend inaccuracies in educational records
- The right to limit disclosure of some personally identifiable information
- The right to file a complaint if the student feels that FERPA rights have been violated.

Additional information about FERPA is located on the UF Privacy website, see <http://privacy.ufl.edu/privacy/studentfaculty/>.

HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY (HIPAA)

To improve the privacy of personal health information, individuals working with patients and their health information are required to take a training course and sign a confidentiality agreement. See, <http://privacy.ufl.edu/uf-health-privacy/>, for additional information.

SEXUAL HARASSMENT

In accordance with federal and state law, the university prohibits discrimination or harassment on the basis of sex. A definition of sexual harassment, reporting options, and Title IX contacts are located on the UF Human Resources website, <https://hr.ufl.edu/forms-policies/policies-managers/sexual-harassment/>.

STUDENT HEALTH

Students are required to have health and disability insurance. They have the choice of accepting medical coverage through the university-sponsored insurance plan or pursuing other insurance through outside companies. Medical students must have coverage all years of training, including time in the research laboratory. Health insurance must provide coverage for all internal and external training sites. The following links provide valuable information to student health.

- **Immunization Policy:** UF requires that all new students show proof of immunizations before attending UF, <http://shcc.ufl.edu/services/primary-care/immunizations/>.
- **Student Health Care Center:** UF provides a variety of care to students, partners, and spouses. Specific information can be found on their website, <http://shcc.ufl.edu/>.
- **Needle Stick Hotline Program:** UF's dedicated phone line provides immediate access to trained provider. Students should call 1-866-477-6824 (OUCH), or can access the website for additional information, <https://shcc.ufl.edu/services/primary-care/emergencies-and-urgent-care/online-assistance/>. When in doubt, go directly to the nearest emergency room.
- Under most circumstances, students who have the UF Health Insurance plan must initially seek care through their assigned primary care provider. However, no referral is required when the student seeks obstetric or gynecologic care. If you have difficulty arranging for this type of medical care, please contact Ms. Kaitlin Lindsey (273-4550).
- **U Matter, We Care:** At UF Every Gator Counts. U Matter, We Care serves as UF's umbrella program for UF's caring culture and provides students in distress with support and coordination of the wide variety of appropriate resources. Families, faculty and students can contact <http://www.umatter.ufl.edu/> seven days a week for assistance for students in distress.

UF STUDENT HONOR CODE

Students are expected to observe the UF Student Honor Code for all courses and clerkships. Refer to UF Regulation 4.041, <http://regulations.ufl.edu/wp-content/uploads/2012/09/4041.pdf>, and the course/clerkship syllabi for specifics.

INDIVIDUALIZED LEARNING PLAN (ILP) INSTRUCTIONS

An ILP may be required as part of a student's remediation plan. An ILP defines learning outcomes and explains how outcomes are achieved. While an ILP may share common goals and objectives for a particular course, the ILP allows the student to describe and attain unique learning objectives. It is a tool to identify individual learning needs and measure competency attainment. With faculty guidance, the ILP features learning pathways and experiences that help self-assessment, with the goal of successful completion of the remediation. The ILP is a contract for self-directed learning.

The common components of the ILP in Phase 1 for remediation include:

1. Study habits and goals
2. Time management skills
3. Identification of specific subject area weaknesses
4. Other

The "other" is up to the student. This broad, undefined component provides an opportunity to describe unique goals relevant to the student's future medical career. Goals may include increasing stress management skills, balancing work and life, and/or improving specific skills related to medical knowledge.

As the ILP is completed, be as specific as possible and develop descriptions of strategies and techniques for measuring outcomes. Make sure the ILP contains a learning objective, specific and varied strategies to achieve the objective, an assessment of competency both at the beginning of your remediation and at completion. Make sure the ILP contains active verbs to describe typical learning objectives that are commonly divided into the following categories:

1. Cognitive
2. Affective
3. Psychomotor

Be creative in the ILP, but make sure it addresses the specific areas of weakness for the course being remediated.