

Howard University College of Medicine

Policies and Procedures Manual

*Howard University
Washington, D. C.*

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SECTION I

INTRODUCTION

**THIS PUBLICATION ENTITLED “UNIVERSITY AND COLLEGE OF
MEDICINE POLICIES AFFECTING STUDENTS” IS AVAILABLE TO ALL
MEDICAL STUDENTS, FACULTY AND STAFF**

The publication has been compiled for the benefit of students, faculty and staff in the College of Medicine. The policies and procedures contained herein include extracts from existing announcements previously issued separately. All students, faculty and administrators are expected to become thoroughly familiar with these policies and procedures.

Other informational announcements may be made available by memorandum (written or electronic) from time to time during the year. Any modifications of the policies or procedures contained herein or new policies or procedures will be announced as they are approved. In addition to the policies contained herein, medical students, faculty and staff are expected to be familiar with the Howard University Student Handbook (H Book).

Hospitals and other sites where students rotate for approved educational experiences also have policies and procedures that students from Howard University College of Medicine must observe. If there are any questions regarding policies from the other sites, students should contact the Associate Dean for Academic Affairs at Howard University College of Medicine.

Care has been taken to ensure accuracy of the information contained in this publication. Contact information and website addresses may change after this manual is published. Please contact the office of the Dean for updated information. Errors, omissions, or other corrections will be corrected and distributed as they are discovered.

While students may be reminded of the policies and procedures by the Dean or his/her designee from time to time, each student shall be bound by the policies even if the student is not reminded of the policies by the Dean or his/her designee.

The information within this brochure does not constitute a contract. The College of Medicine reserves the right to modify, delete or add policies and procedures as necessary before or during matriculation, or at any time during the academic year.

This publication and subsequent announcements shall be retained by all for reference.

*Sheik N. Hassan, M.D., FCCP
Vice Dean
June 26, 2015*

SECTION II

HOWARD UNIVERSITY STUDENT HANDBOOK

The policies and procedures contained in this manual are supplements to the policies and procedures described the Howard University Student Handbook (H Book).

**The H Book can be accessed at
<https://www.howard.edu/students/hbook/H-Book.pdf>**

SECTION III

ACCREDITATION STATEMENT

Howard University is accredited by the Middle States Association of Secondary Schools and Colleges. The College of Medicine is accredited by the Liaison Committee on Medical Education (LCME) of the Association of American Medical Colleges (AAMC) and the American Medical Association (AMA).

The next full accreditation survey by the LCME of the College of Medicine is scheduled for March 2017. Students, faculty, and staff are expected to participate in preparing for the survey.

SECTION IV

HOWARD UNIVERSITY COLLEGE OF MEDICINE

The Howard University College of Medicine has long been in the forefront of medical education. Founded in 1868, the College takes pride in its long and illustrious history of training students to become competent and compassionate physicians who provide health care in medically underserved communities. While the College offers excellent research and research training opportunities, the major emphasis is on preparing students to deliver patient care in communities that have shortage of physicians and public health professionals.

The College of Medicine is fortunate in being located in the nation's capital and can draw upon the immense medical resources of this area, including the National Institutes of Health and the National Library of Medicine.

The College is also fortunate in being a part of Howard University, the only comprehensive research university with a predominantly African-American constituency. Although the University community has traditionally been predominantly black, Howard has been an interracial and cosmopolitan institution throughout its history, with students, faculty and staff of all races and from the United States and many foreign nations. All must meet the high standards of excellence of Howard University, which has the largest concentration of black faculty and student scholars in the country.

In addition to the College of Medicine, the Howard University Health Sciences Center includes the Howard University Hospital; the College of Dentistry; the College of Pharmacy, the College of Nursing and Allied Health Sciences; the Louis Stokes Health Sciences Library; and the Student Health Center. The University is also composed of the College of Arts and Sciences; the Schools of Business; Communications; Education; Law; Divinity; Social Work; Engineering, Architecture, and Computer Sciences; and the Graduate School. The latter offers Masters and Ph.D. programs in several disciplines. More than 11,500 students are enrolled annually at Howard University.

The College of Medicine is proud of its achievements. Its more than 4,000 living alumni are testimony that an excellent medical education can be obtained at Howard. The College has graduated a large percentage of the black practicing physicians in this country. Although opportunities for minority students have increased at other medical schools, the College uniquely addresses the special health care needs of medically underserved communities and continues to produce a significant number of the nation's minority physicians.

By any objective or subjective measure, the College is meeting or exceeding national standards for medical education. The future of the College is indeed bright, and it accepts with enthusiasm the continuing challenge of service to this nation and the world.

SECTION V

HISTORY OF THE COLLEGE OF MEDICINE

Howard University is named for Major General Oliver Otis Howard, a native of Maine and a graduate of Bowdoin College and West Point. He was a Union Army hero, having served in several major battles of the Civil War, including First and Second Bull Run, Antietam, Chancellorsville, and Gettysburg. In May 1865, he was appointed as Commissioner of the Bureau of Refugees, Freedmen, and Abandoned Lands, more commonly referred to as the Freedmen's Bureau. This appointment brought Gen. Howard to the city of Washington. A deeply religious man, he joined others in helping to establish the First Congregational Church of Washington at 10th and G Streets, N.W.

On November 20, 1867, eleven members of the church gathered at the home of Deacon Henry Brewster for a missionary meeting. While there, they resolved to establish a seminary for the training of African-American ministers, especially for the South and Africa. Soon thereafter, General Howard was brought into the deliberations. After further discussion, the mission broadened to include the training of black teachers and the name of the proposed institution became "The Theological and Normal Institute." The concept of the proposed school as a mere institute did not last long. Other fields of study were considered and the concept of the school was enlarged to that of a university. The name "Howard University" was proposed in honor of General Howard, who was highly regarded as a hero and humanitarian and who played an important role in the institution's conceptualization. On March 2, 1867, a Charter approved by the 39th United States Congress to incorporate Howard University was signed into law by President Andrew Johnson. Seventeen men, including General Howard, were named as Trustees in the Charter and are considered as the University's founders. The Charter specified the following departments: normal and preparatory, collegiate, theological, medicine, law, and agriculture.

While clearly the intent of the founders was to uplift African-Americans, especially those recently freed from slavery, the university was established on the principle that it would be open to all races and colors, both sexes, and all social classes. On May 1, 1867, Howard University opened with five white female students, daughters of two of the founders. On November 5, 1868, the first opening exercise for the Medical Department was held at the First Congregational Church. On Monday, November 9, 1868, at 5:00 p.m., classes began with eight students and five faculty members.

At the time of its founding, the Medical Department included degree programs in medicine and pharmacy. The medical curriculum was three years in length and the pharmacy program two years. A degree program in dentistry was introduced in the early 1880's. James T. Wormley graduated from the pharmacy program in 1870 and was the first graduate of the Medical Department. Five medical students were graduated in 1871 (2 blacks and 3 whites).

Medical education in this country was drastically altered by the Flexner Report of 1910,

as it set new and higher standards for the training of physicians based on the Johns Hopkins University model of medical education. Of the seven black medical schools in existence at the time, only Howard and Meharry survived the Flexner Report and its aftermath.

From the time of Howard's founding in the 1860's until the 1960's, Howard and Meharry trained most of the African-American physicians of this nation. For most of the first half of the twentieth century, many medical schools (including all medical schools in the South except Meharry) did not accept black students. Medical schools outside of the South provided only limited opportunities for minority students. Since the 1960's, opportunities have expanded for minorities at majority medical schools, and two other medical schools focused on the training of minority physicians have opened, the Charles R. Drew University of Medicine and Science in Los Angeles and the Morehouse School of Medicine in Atlanta.

Howard has also been in the vanguard with regard to the training of women physicians. Over the years, females have been afforded opportunities to study medicine here to a greater extent than at most other U.S. medical colleges. The first female graduate was Mary Spackman, Class of 1872, a white student from Maryland. The first black female to graduate was Eunice P. Shadd, Class of 1877, who was from Chatham, Ontario, Canada. Howard University has also been noted for educating individuals from the West Indies and Africa for the medical profession.

The history of the Howard University College of Medicine is linked closely to that of Freedmen's Hospital. In 1862, the War Department established a hospital at Camp Barker, which was located at 12th and R Streets in the city of Washington. In 1869, the hospital was moved to the campus of Howard University. During the period 1904-1908, a new facility was erected for Freedmen's Hospital on a site north of the medical school. In 1975, the new Howard University Hospital opened just south of the College of Medicine on the former grounds of Griffith Stadium, which for many years was the home of the Washington Senators baseball team, Washington Redskins football team, as well as Negro League baseball teams, including the Homestead Grays. The Howard University Hospital, which replaced the Freedmen's Hospital, serves today as the College of Medicine's major teaching facility.

Many famous physicians and scientists have been affiliated with the College of Medicine over the years. Among them are Dr. Daniel Hale Williams and Dr. Charles R. Drew. Dr. Daniel Hale Williams, the first physician to successfully perform open heart surgery, served as Chief Surgeon of Freedmen's Hospital during the 1890's. Dr. Charles Drew, well-known for his groundbreaking research on and authoritative knowledge of banked blood and for his leadership of the "Blood for Britain" project during World War II, served as head of the Department of Surgery from 1941 until his death in an automobile accident in 1950.

SECTION VI

MISSION, VISION & CORE VALUES

The College of Medicine dates from 1868 and serves a broad constituency, with about 70% of the student body being U.S. underrepresented minorities and a substantial number being from foreign countries. There are over 4,000 living alumni, making up a large percentage of the black physicians practicing in this country.

A. Mission Statement

Howard University College of Medicine provides students of high academic potential with a medical education of exceptional quality and prepares physicians and other health care professionals to serve the underserved. Particular focus is on the education of disadvantaged students for careers in medicine. Emphasis is placed on developing skills and habits of life-long learning and producing world leaders in medicine. Special attention is directed to teaching and research activities that address health care disparities.

The College also seeks to improve the health of America and the global community through public health training programs and initiatives. Our mission also includes the discovery of new knowledge through research. Lastly, the College supports the education and training of postgraduate physicians, other health care providers, and graduate students in the biomedical sciences.

B. Vision Statement

The goal of the Howard University College of Medicine is to enhance our global recognition as a medical school of the first rank, known for the excellence of our teaching, research and service. We will continue to be a world leader in the training of competent, compassionate physicians and other health professionals for medically underserved communities and populations. In addition, the College envisions that it will be an exemplar in eliminating health disparities and in finding solutions through research and public health programs for medical problems disproportionately found in disadvantaged communities, both in this nation and abroad.

C. Core Values Statement

The core values of the Howard University College of Medicine are: (1) fidelity to our mission and a strong and confident belief in our work; (2) excellence and integrity in all that we undertake--teaching, research, and service; (3) leadership in medical education and health care, especially for African Americans, other minorities, and the economically disadvantaged; (4) service to our community, the nation, and the world through public health programs, medical care, and health education; (5) the unrelenting pursuit of knowledge through research and life-long learning; and (6) a commitment to cultural diversity among faculty, staff, and students, and to ensuring a respectful and ethical academic environment.

SECTION VII

INSTITUTIONAL EDUCATIONAL OBJECTIVES

Objectives	ACGME Competency	Instructional methods	Evaluation
1. Demonstrate understanding of current core knowledge of basic biomedical science through an interdisciplinary approach to the understanding of the processes that support normal development, structure and function of the human organism.	Medical Knowledge	Lectures Small group discussions PBL Self-directed learning	MCQ Direct observation by faculty
2. Demonstrate understanding of current core knowledge of normal and altered structure and function of organ systems, in order to apply that knowledge to the recognition and management of complex clinical conditions	Medical Knowledge	Lectures Small group discussions PBL Self-directed learning	MCQ Direct observation by faculty OSCE Standardized patients
3. Demonstrate the ability to evaluate patients and properly manage their medical problems by (a) completing comprehensive histories and physical examinations, (b) obtaining focused histories and perform relevant physical examinations (c) to correctly identify patients' medical problems through critical thinking and to formulate hypotheses as to etiology and solutions; (d) successful development of diagnostic strategies; and (e) formulation and implementation of a management plan.	Patient Care Medical Knowledge Interpersonal and Communication Skills Professionalism	Lectures Small group discussions PBL Self-directed learning Demonstrations Role modeling	MCQ Direct observation by faculty OSCE Standardized patients

Objectives	ACGME Competency	Instructional methods	Evaluation
4. Apply knowledge of the scientific method in medical diagnosis and treatment and in research. The student should be able to evaluate published findings and to apply scientific evidence-based reasoning to the solution of medical problems	Medical Knowledge Practice-based Learning and Improvement	Lectures Small group discussions Self-directed learning	MCQ Direct observation by faculty
5. Demonstrate understanding of the impact of the various stages of life, as well as the effects of gender, life style, socioeconomic status, nutritional factors, genetic characteristics, psychosocial and epidemiologic factors, and culture upon the quality of human health and the prevalence of disease, disease prevention and health maintenance.	Patient Care Medical Knowledge Systems-based Practice	Lectures Small group discussions PBL Self-directed learning	MCQ Direct observation by faculty Standardized patients
6. Demonstrate an understanding of the fundamental concepts of continuity of care (preventive, rehabilitative and end-of-life) in addition to the diagnosis of acute medical problems, and be able to apply these concepts to clinical practice on a local, regional, national or international level	Patient Care Systems-based Practice	Lectures Small group discussions PBL Self-directed learning	MCQ Direct observation by faculty OSCE Standardized patients

Objectives	ACGME Competency	Instructional methods	Evaluation
7. Demonstrate mastery of a variety of skills, such as effective communication during interviewing patients and educating patients about their diseases and communicating with their families. The student must also demonstrate appropriate skills during physical examinations (proper use of instruments; application of manual techniques) and in utilization of laboratory resources (ordering appropriate tests; interpreting values).	Patient Care Interpersonal and Communication Skills Professionalism	Lectures Small group discussions PBL Self-directed learning Demonstration Role Modeling	MCQ Direct observation by faculty OSCE Standardized patients
8. Exhibit appropriate professional behavior in interactions with patient and their families, peers and other healthcare professionals to adhere to professional standards of ethical behavior, and to function harmoniously and respectfully as a member of a diverse health care team.	Interpersonal and Communication Skills Systems-based Practice Professionalism	Role modeling Small group discussions Case-based discussions Self-directed learning	Direct observation by faculty OSCE Standardized patients
9. Demonstrate mastery of the curriculum essential to enter and pass USMLE, Step 1 and progress to and pass USMLE, Step 2 (CK and CS) along the pathway toward licensure for the practice of medicine.	Medical Knowledge	Lectures Small group discussions PBL Case-based discussion Self-directed learning	MCQ OSCE Standardized patients Direct observation by faculty

Objectives	ACGME Competency	Instructional methods	Evaluation
10. Display skills of independent, life-long, and progressive learning	Practice-based learning and Improvement	Self-directed learning	Direct observation by faculty
11. Manifest self-awareness, self-care, self-assessment, and personal growth sufficient to be a role model for others	Professionalism	Case-based discussions Role modeling	Direct observation
12. Show sensitivity toward the need to address and resolve health disparities at all levels	Systems-based Practice Professionalism	Lectures Small group discussions Case-based discussion Self-directed learning	MCQ Standardized patients
13. Show mastery of the scholarly expectations of the medical faculty of the College of Medicine as determined by appropriately designed and applied assessment methodologies, including but not limited to written examination performance and practical clinical skills	Medical Knowledge Interpersonal and Communication Skills Professionalism	Lectures Small group discussions PBL Case-based discussion Self-directed learning	MCQ Direct observation by faculty OSCE Standardized patients

Reviewed and provisionally approved at a meeting of the Medical Faculty Senate in January 2003.

The Curriculum Committee formally accepted this as a working document on February 3, 2003.

Revisions approved by the faculty of the College of Medicine on July 16, 2007

SECTION VIII

REGISTRATION INFORMATION

- A. Undergraduate Registration for New Entrants, Transfers, and Former Students (FSR): New admittees who have sent the required enrollment fee to the University within 30 days of acceptance, and FSRs who have been readmitted, will be permitted to register.
- A. **Former Students Returning (FSR)** are required to file the appropriate application no later than 30 days prior to the beginning of late registration in order to be considered for admission for a particular semester. A student who was suspended for academic reasons should apply well in advance of the 30 days before registration and petition the dean of the school or college last attended for readmission so that the appropriate faculty committee will have time to consider his or her application.
- B. **Evidence of Official Enrollment:** Students are not officially enrolled until all designated charges for tuition/fees, previous balances, etc., are paid. Mere possession of a computer printout of your confirmed schedule is not considered proof of official enrollment. The appropriate and acceptable evidence of your official enrollment is the appearance of your name on the class lists issued by the Records Office. For more information, consult your Student Reference Manual and Directory of Classes.
- C. **Absence from classes:** Failure to attend classes, or abandonment of a residence hall space to which one has been assigned, or one's non-return to classes for an upcoming semester for which one is already academically and financially registered in advance, does not constitute official discontinuance or withdrawal. The student should effect total withdrawal in person or request that it be done in his/her behalf.
- D. Usually, the Office of Student Financial Services will not make refunds or other adjustments in a student's account after the end of the current academic year of the student's enrollment. All individuals who need assistance in this regard should telephone, write or confer with the Dean for Special Student Services, Howard Center, at (202) 238 2420.
- E. **Policies on Payment of Tuition and Fees:** General Information
All University students must pay tuition and fees in accord with the deadlines established by the Office of Student Financial Services. The Board of Trustees of Howard University reserves the right to change tuition, fees and charges at any time. The University is committed to giving students financial aid to the extent that need is demonstrated, financial aid resources are available and as Federal regulations permit. Howard University also offers a 5-month Installment Payment Plan.

F. Payment Plans

1. Payment in Full: All charges must be paid in full by the due date: Fall semester, July 1st and spring semester, December 17th. Any outstanding balances will be assessed a \$100.00 late payment fee each month the balance remains.
2. Installment Plan: Howard University offers a 5-month installment plan for the fall and spring semesters. When registration opens for the plan in May and October, students can sign up for the 5-month installment plan via BisonWeb. There is a \$30 non-refundable enrollment fee and monthly payments are made on the 5th of each month. This plan is managed by Nelnet Business Solutions and offers several benefits:

G. Payment Methods

1. Payments may be made by Discover, MasterCard or American Express or automatic bank payment (ACH)
2. Convenience – Automatic payments deducted from a checking/savings account or credit/debit card
3. Easy Access – The installment plan can be monitored online or you can call a dedicated customer service representative
4. Peace of Mind – Arrangements are made to satisfy the semester charges and students who have secured validation

H. Note:

Payments may be made by credit card (Visa, American Express, MasterCard, Discover), cash, money order, cashier's check, certified check or wire transfer (PDF). A fee will be charged for all reversed credit card payments and returned checks. Subsequent checks will not be accepted. Checks and money orders should include the student's name and Howard University Identification Number.

The fall installment plan begins in June and the last payment is scheduled for October; the spring installment plan begins in November and the last payment is scheduled for March. If you sign up after the first established deadline, a down payment will be required. If a credit card/debit card is used, a convenience fee, in addition to the enrollment fee, will be assessed.

To assist with the registration process, a “how-to-guide” has been created for your benefit. For additional help, customer service representatives are available Monday through Thursday, 7:30 am to 7:00 pm (CST) and Friday 7:30 am to 5:00 pm. They can be reached at 1-800-609-8056. Howard University maintains a special address to expedite processing. The bill, along with payment, must be mailed in the special envelope. Failure to enclose the bar-coded bill will delay processing time. Students who have a pin number and Howard University ID number may pay by credit card on the internet by logging on to

<http://www.howard.edu> . Billing inquiries should be mailed to:

Howard University
Office of Student Financial Services
MSC 590501
Washington, DC 20059

I. Factoring in Financial Aid

Authorized financial aid is factored into the registration payment and per Federal regulations **MUST** be applied to tuition and fees first. The following aid **CANNOT** be used in computing your registration payment:

1. Federal Work-Study (FWS)
2. Howard University Student Employment (HUSEP)
3. Assistantship
4. Unauthorized Federal Loans
5. Parent Loan (PLUS)
6. Private Loans and Scholarships
7. Sample Computation of Registration Payment In Full (with authorized Financial Aid/Scholarship)

J. Credit Balance Funds are created when a student's account is overpaid.

These funds are refunded to the students as follows:

1. Credit Card Payments credited back to the credit card.
2. Direct Deposit funds are transmitted directly to the specified bank account if the student has enrolled for this method with the Assistant Treasurer's Office.
3. Credit Balance Checks created for all other accounts are disbursed by the Office of Assistant Treasurer.

K. Third-Party Sponsors/Special Billing: Third-Party Contracts must be submitted to the Office of Student Financial Services/Student Accounts by the appropriate sponsoring agency or organization. The Third-Party Agent is billed once a month. If the sponsor does not submit payment the student is responsible for satisfying the account.

N. Office of Student Financial Services Frequently Asked Questions

1. What is third party billing?

When an organization makes a commitment to pay your educational expenses, they are considered a third party sponsor. The sponsor is then billed by the University after the student is validated and after the University's add/drop period.

2. What does it mean to be validated?

Validation means that you are registered for a course(s) AND have satisfied your financial obligation to the University, either by paying the balance in full, making the first deferred payment, or on the University payment plan. If a student has a third party sponsor, the sponsor may pay the student account balance in full upon receipt of an invoice from the University. If the sponsor will pay only a portion of the semester charges, the student is responsible for paying the difference by the due date in order to be validated.

3. What do I need to know about third party sponsorships?

You will need to find out what your sponsor's requirements are to receive your funds and what charges the sponsor commits to pay on your behalf. The University bills the sponsor for sponsored expenses on your behalf. You are responsible for paying your portion of the bill by the due date; otherwise, validation may be impacted and late payment fees may be assessed.

4. How does a sponsorship work?

The sponsor provides a billing authorization to the Office of Student Accounts. Your University student account is then set up on a third party contract for the amount the sponsor will pay on your behalf. After validation and the add/drop period, we bill your sponsor on your behalf. **Any** restrictions or contingencies on the authorization are unacceptable. For instance, if the agency requires grade or transcript review before paying, the University will not authorize third party billing. In such cases, the student must pay the original bill and be reimbursed by the sponsoring agency. If the sponsor does not pay your bill, you will be responsible for your account balance, including any late and/or deferred payment fees. An unpaid bill may result in your inability to obtain transcripts or register for future terms, cancellation from classes, or similar issues.

5. What is a billing authorization?

A billing authorization may be a letter (on company letterhead), purchase order, or voucher in which a sponsor commits to pay designated educational expenses for you. The authorization from the sponsor should include the following:

- a) Student's Name
- b) Howard University ID #
- c) What and how much they will pay, i.e. tuition, fees, books, room and board, etc.

- d) Period of coverage, i.e. fall semester, entire academic year
- e) Contact/authorizing person's name, phone number, fax number, email address, and billing address

Sponsors usually send the authorization to us directly, but some sponsors send the authorization to the student. It is the student's responsibility to ensure the proper billing authorization has been provided to the University. The University does not notify the student or sponsor when an authorization expires at the end of the term or effective date. The sponsor and student are responsible to ensure that an authorization is received before the end of the add/drop period to avoid late payment fees.

6. What is the deadline to submit the billing authorization?

Billing authorizations must be submitted by the end of the add/drop period. If it is submitted after this time, you may be subject to a late and/or deferred payment fee. Billing authorizations WILL NOT be accepted for previous academic years. The student will need to work with the agency to receive any funds.

7. Why are the sponsors billed after validation and the add/drop period?

A student must be validated to be an official student at the University. As well, many students add or drop classes during the add/drop period. Since changes in registration often correlate with changes in tuition charges, Howard waits until after this period ends in order to ensure that all invoices are accurate. This delay is taken into account when considering late fees on the sponsored portion of a student's tuition.

Please note: Students must pay the portion of their tuition for which they are responsible by the due date; otherwise, validation may be impacted and/or late payment fees may be assessed.

8. Can I get a refund if my account shows a credit balance?

Amounts received from third party payments are non-refundable to the student. Only loans, scholarships, and grants paid in excess of the semester charges may be refunded.

9. What happens if my sponsor does not pay?

You are legally responsible to pay the full cost of your educational expenses if your sponsor does not pay. A hold will also be placed on your record that prevents transcript release and registration.

10. Do you send grades or transcripts to my sponsor?

The relationship between the sponsors and the University involves billing and payment matters only. You are responsible for providing all other information required by your sponsor.

O. Penalties for Nonpayment or Late Payment: Only students who have satisfied their accounts, notified the Office of Student Account of Third Party Billing or enrolled in the Installment Plan will be validated. Only registered students who have paid the room rent may live in the residence halls. Non-registered persons will be required to immediately vacate the residence halls. Degrees, transcripts, or any other official documents will not be released to any student with a delinquent student account or loan balance. No University loans will be made to students who have existing outstanding loans in a delinquent payment status. Furthermore, students cannot complete registration until such delinquent payments are made.

P. Financial Clearances: Financial clearances for transcripts, graduation, and Former Students Returning (FSR) are granted by the Office of Students Financial Services.

Q. Orientation: All students are expected to attend all orientation sessions.

SECTION IX

STUDENTS WITH DISABILITIES HOWARD UNIVERSITY

A. Who is Eligible for Services?

All students attending the Howard University with a documented disabilities are eligible and encouraged to register for services.

B. How Do You Apply for Services?

As soon as you are admitted to the University, you must submit a Self-Disclosure of a Disability form to the Office of Special Students Services along with:

1. A copy of the documentation of your specific disability must be provided at the time of intake
2. Information regarding your academic history (transcripts, IEP, etc.)
3. A copy of the class schedule (if applicable).

C. How Is It Determined Who Gets What Accommodations?

Accommodations are determined as a result of a comprehensive individualized assessment, including a review of medical reports, psychological reports, academic background and an interview with the student.

D. What If Accommodations Are Not Provided?

ODSSS strives to provide reasonable accommodations, and works to facilitate an agreeable working relationship between you and the University. If you feel that you are not being treated fairly because of your disability, you are encouraged to contact our office and make an appointment to discuss the issue.

E. What If I Disagree With A Decision, How Do I File A Grievance?

You may contact the Dean of ODSSS to request a grievance form and instructions and timelines regarding filing a grievance will be provided to you.

F. Responsibilities of the Office of the Dean for Special Student Services

1. Determine eligibility
2. Identify appropriate accommodations (academic, auxiliary aids, etc.)
3. Develop accommodations plan and complete faculty notification forms with student
4. Work with faculty to insure delivery of accommodations (arranging testing, use of auxiliary aids in classrooms, classroom modification, etc.)
5. Maintain detailed confidential records that document the plan for the provision of selected accommodations
6. Assist in course registration each semester
7. Assist students in development of self-advocacy

8. Development and revise policies/guidelines for accommodating students with disabilities.
9. Work with ADA Coordinators from each school.

G. Responsibilities of the Student

1. Meet with ODSSS and provide appropriate documentation in a timely manner. It is recommended that students provide documentation at least eight weeks prior to the start of the semester for which they are requesting services. Students should schedule an appointment with ODSSS during the first few weeks of classes so that accommodations can be finalized.
2. Submit proper forms requesting services (Braille, interpreters, etc.)
3. Deliver faculty notification forms to faculty as soon as possible.
4. Follow guidelines regarding use of accommodations/ODSSS services.
5. Consult with the ODSS, within five business days regarding any problems encountered during the semester.
6. Attend all classes.
7. Organize time.
8. Follow course syllabi.
9. Meet with ODSSS Advisor at least twice a semester.

H. Responsibilities of the Faculty

1. Adopt teaching practices and evaluation methods which promote equal access.
2. Collaborate with the ODSSS and ADA Coordinator for your school to provide accommodations.
3. Contact your ADA Coordinator for your school or the ODSSS with any questions or problems.
4. Treat all matters related to students with disabilities in a confidential manner.
5. Consult with the ADA Coordinator of your school or the ODSSS if a disagreement between a student and faculty member regarding an accommodation is not resolved.
6. May request a written agreement before allowing the student to tape record the lecture/class.
7. **Do not provide** academic adjustments under the guise of a disability unless a faculty notification form has been processed by ODSSS.

In compliance with the law (Section 504, Rehabilitation Act and the American with Disabilities Act, "ADA"), Howard University is committed to providing its disabled students with reasonable accommodations. There are specific guidelines for the acquisition of accommodations and services under ADA. This brochure explains in detail of the information you will need to request and to receive them. Please read this information carefully and share it with the professional who will be conducting your testing and evaluation or providing you will the results of prior evaluations.

I. Guidelines for Documenting Medical Disabilities
(mobility, manual, hearing and visual)

1. The clinician appears to be qualified to make the diagnosis in the area of specialization and is not a member of the student's family.
2. The evaluation is written on professional letterhead, is current and contains the date of the last appointment with the student.
3. The clinician clearly indicates a claimed disability that is covered under the ADA.
4. Documentation clearly supports the claimed disability with relevant medical and other history.
5. The evaluation contains a description of current medications, treatments and assistive devices and technologies with estimated effectiveness in ameliorating the impact of the disability, i.e., extent of effectiveness of corrective lenses, use of crutches, etc.; and history of medication side effects known to have affected the student.
6. Give a description of the functional limitations resulting from the disability, which specifically addresses a postsecondary residential and educational setting.
7. The documentation clearly supports the direct link to and need for the requested accommodations.

In compliance with the law (Section 504, Rehabilitation Act and the American with Disabilities Act, "ADA"), Howard University is committed to providing its disabled students with reasonable accommodations. There are specific guidelines for the acquisition of accommodations and services under ADA. This brochure explains in detail of the information you will need to request and to receive them. Please read this information carefully and share it with the professional who will be conducting your testing and evaluation or providing you will the results of prior evaluations.

J. Guidelines for Documenting Learning Disabilities

1. A Qualified Professional Must Conduct the Evaluation

Professionals conducting assessments and rendering diagnoses of specific learning disabilities and making recommendations for appropriate accommodations must be qualified to do so. For example, the following professionals would generally be considered qualified to evaluate specific learning disabilities provided that they have additional training and experience in evaluating adolescent/adult learning disabilities: clinical or educational psychologists; school psychologists; neuropsychologists; learning disabilities specialists; medical doctors with training and experience in the assessment of learning problems in adolescents and adults. It is not appropriate for professionals to evaluate members of their own families. All reports should be on letterhead, typed, dated, signed, and otherwise legible.

2. **Testing Must Be Current**

Because the provision of all reasonable accommodations and services is based upon assessment of the current impact of the student's disabilities on his or her academic performance, it is in a student's best interest to provide recent and appropriate documentation. In most cases, this means that testing usually has been conducted within the past three years.

3. **Comprehensive Documentation Necessary to Substantiate the Learning Disability Must Be Provided**

Prior documentation may have been useful in determining appropriate services in the past. However, documentation must validate the need for services based on the individual's current level of functioning in the educational setting. A school plan such as an individualized educational plan (IEP) or a 504 plan is insufficient documentation in and of itself but can be included as part of a more comprehensive assessment battery. A comprehensive assessment battery and the resulting diagnostic report should include a diagnostic interview, assessment of aptitude, academic achievement, and information processing.

a) **Diagnostic Interview**

Because learning disabilities are commonly manifested during childhood, though not always formally diagnosed, relevant historical information regarding the student's academic history and learning processes in elementary, secondary, and postsecondary education must be investigated and documented. An evaluation report should include the summary of a comprehensive diagnostic interview by a qualified evaluator. By using a combination of student self-report, interviews with others, and historical documentation such as transcripts and standardized test scores, the diagnostician should provide a summary of the following:

- I. A description of the presenting problem(s);
- II. Developmental history;
- III. Relevant medical history including the absence of a medical basis for the present symptoms;
- IV. Academic history including results of prior standardized testing; reports of classroom performance;
- V. Relevant family history, including primary language of the home, and the student's current level of fluency of English;
- VI. Psychosocial history;
- VII. Relevant employment history;
- VIII. A discussion of dual diagnosis, alternative or co-existing mood, behavioral, neurological, and/or personality disorders along with any history of relevant medication and current use which may impact the individual's learning; and exploration of possible alternatives which may mimic a learning disability when, in fact, one is not present.

b) **Assessment**

The neuropsychological or psychoeducational evaluation for the diagnosis of a specific learning disability must provide clear and specific evidence that a learning disability does or does not exist. Assessment, and any resulting diagnosis, must consist of and be based on a comprehensive assessment battery, which does not rely on any one test or subtest.

- I. **Aptitude/ Cognitive Ability.** A complete intellectual assessment with all subtests and standard scores reported is essential.
- II. **Academic Achievement.** A comprehensive academic achievement battery is essential with all subtests and standard scores reported for those subtests administered. The battery must include current levels of academic functioning in relevant areas such as reading (decoding and comprehension), mathematics, and oral and written language.
- III. **Information Processing.** Specific areas of information processing (e.g., short- and long-term memory; sequential memory; auditory and visual perception/ processing; processing speed; executive functioning; motor ability) should be assessed.
- IV. **Other Assessment Measures.** Non-standard measures and informal assessment procedures or observations may be helpful in determining performance across a variety of domains. Other formal assessment measures may be integrated with the above instruments to help rule in or rule out the learning disability to differentiate it from co-existing neurological and/or psychiatric disorders, i.e., to establish a differential diagnosis. The evaluator should address why these assessments were included in addition to the standard measures. In addition to standardized tests, it is also very useful to include informal observations of the student during the test administration.

c) **The Documentation Must Include a Specific Diagnosis**

Nonspecific diagnoses, such as individual "learning styles," "learning differences," "academic problems," "computer phobias," "slow reader," and "test difficulty or anxiety," in and of themselves do not constitute a learning disability. It is important to rule out alternative explanations for problems in learning, such as emotional, attentional, or motivational problems, that may be interfering with learning but do not constitute a learning disability. The diagnostician must use direct language in the diagnosis and documentation of a learning disability, avoiding the use of such terms as "could possibly" "suggests" or "is indicative of." If the data indicates that a learning disability is not present, the evaluator must state that conclusion in the report.

d) **All Actual Test Scores from Standardized Instruments Must be Provided**

Standard scores and/or percentiles must be provided for all normed measures. Reports of grade equivalents must be accompanied by standard scores and/or percentiles. The data must logically reflect a substantial limitation to teach which the student is requesting the accommodation. The particular profile of the student's strengths and weaknesses must be shown to relate to functional limitations that may necessitate accommodations.

The tests used should be reliable, valid, and standardized for use with an adolescent/adult population. The test findings must document both the nature and severity of the learning disability. Informal inventories, surveys, and direct observation by a qualified professional may be used in tandem with formal tests in order to further develop a clinical hypothesis.

e) **Each Accommodation Recommended by the Evaluator Must Include a Rationale**

It is important to recognize that accommodation needs can change over time and are not always identified through the initial diagnostic process. Conversely, a prior history of accommodation, without demonstration of a current need, does not in and of itself warrant the provision of a like accommodation. The diagnostic report must include specific recommendations for accommodation(s) as well as a detailed explanation of why each accommodation is recommended. The evaluator(s) must describe the specific impact the diagnosed learning disability has on a specific major life activity as well as the degree of significance of this impact on the individual's academic abilities. The evaluator(s) should support recommendations with specific test results or clinical observations. If no prior accommodation(s) has been provided, the qualified professional and/or the student should include a detailed explanation of why no accommodation(s) was used in the past and why an accommodation(s) is needed at this time. If an accommodation(s) is not clearly identified in the diagnostic report, ODSSS will seek clarification, and, if necessary, more information. ODSSS will make the determination as to whether appropriate and reasonable accommodations are warranted and can be provided to the individual.

4. **A Clinically Interpretive Summary Must be Provided**

A complete and clearly stated diagnostic summary based on a comprehensive evaluative process is a necessary component of the report. Assessment instruments and the data they provide do not diagnose; rather, they provide important elements that must be integrated with background information, observations of the client during the testing situation, and the current context. It is essential, therefore, that professional judgment be used in the development of a clinical summary. The clinical summary must include:

- i. Indication that the evaluator ruled out alternative explanations for academic problems such as poor education, poor motivation and/or study skills, emotional problems, environmental issues, attentional problems, and cultural/language differences;
- ii. Indication of how patterns in cognitive ability, achievement, and information processing are used to determine the presence of a learning disability;
- iii. Indication of the substantial limitation to learning presented by the learning disability and the degree to which it effects the individual in the learning context for which accommodations being requested; and,
- iv. Indication of why specific accommodation(s) are needed and how the effects of the specific disability are mediated by the recommended accommodation(s).

5. Accommodations

A. Accommodation Letters

Once a student's eligibility has been determined, ODSS prepares letters to professors, which verifies the existence of the student's disability and documents the need for accommodations and academic adjustments. The student is responsible for delivering the letters to the professors and formally requesting accommodations.

B. Assistive Technology

Assistive technology is housed in the I Lab. A computer is available with speech, text enlargement, voice recognition, and scanning capability. Kurzweil 3000 (scan and read), Text Help and Inspiration software packages have been installed to assist students.

C. Interpreting Services

ODSSS provides sign language and oral interpreting services by freelance interpreters for classes and special events by written request.

D. Learning Disability Screening

ODSSS conducts screening interviews of students referred to assess the possibility of a learning disability. When appropriate, students are referred to community resources for formal diagnostic evaluation, which would be at the student's expense. Screenings generally take a minimum of one hour. To give each student uninterrupted and full attention, advance appointments are requested.

E. Note taking Assistance

ODSSS requests faculty assistance in locating a note taker from the class in which the student is enrolled. If students are not available from the class, ODSSS will assist the student with identifying outside note takers.

F. Reading Services

ODSSS provides assistive technology and text in Braille for students who are blind or have print disabilities such as dyslexia. Students are asked to obtain any available

textbooks from Recording for the Blind and Dyslexic, prior to requesting books in Braille or on tape. All request must be made in writing or in person.

G. Test Accommodations

Accommodations may include extended time, and/or use of adaptive equipment. Standard practice is time and a half for exams. Students with more severe or multiple disabilities may be granted additional time as determined by ODSSS.

H. Forms- Self Disclosure & Request for Services

All services must be requested in writing. Please contact ODSSS for a **Request for Service Form** or you may download the form from the website

If there are any questions, you may call the Office of the Dean for Special Student Services at 202-238-2420 or fax us at 202-588-9755.

OFFICE OF THE PROVOST AND CHIEF ACADEMIC OFFICER AMERICAN WITH DISABILITIES ACT (ADA)

**1990 Americans with Disabilities Act (ADA)
(Section 504 of the Rehabilitation Act of 1973)**

Policy and Procedures

Purpose

The purpose of this document is to remind all faculty members (full and part-time) of their obligation to comply with the University's ADA policy and procedures in carrying-out their instructional duties and in their response to students' ADA documented needs.

The Office of the Dean of Special Student Services

The Office of the Dean of Special Student Services (ODSSS) is the official office with the authorization to certify eligibility for and to establish and delineate appropriate ADA accommodations for students seeking ADA accommodations in a course.

Faculty members should refrain from establishing or granting any ADA accommodations in response to student requests that have not been certified in writing by the Dean of Special Student Services.

All inquiries concerning ADA accommodations and related University policies and procedures must be directed to: Dean for Special Student Services; Howard University Center, 2225 Georgia Avenue, NW, Suite 725, Washington, DC. The Office hours of operation are 9:00 a.m. to 5:00 p.m. The main number for the Office is 202 238 2420.

L. Accommodating Students with Eligible ADA

- 1. Accommodation Requirements:** Students who have been certified for specific accommodations by the ODSSS must present an official ADA notification of accommodations letter from the ODSSS to their instructor of record. No other form of notification is acceptable. An ADA notification of accommodation letter is required for each course in which a student is seeking an approved ADA accommodation. The ADA notification of accommodation letters must be course-specific and are valid only for one semester.
- 2. ODSSS approved ADA accommodations are not retroactive. They are applicable from the date the ADA eligible student presents his or her ADA accommodations notification letter to the instructor of record. In addition, *ADA Self-Identification Forms* may be obtained by students from the Office of the Dean and the EEO Designee for each school and college. Students must complete the Form and submit it to the ODSSS. **No other individual in a school or college is authorized to receive the Form.****
- 3. Once the ADA notification of accommodations letter is presented by the student**

- to the instructor of record, the instructor is required to adhere to the stipulated and mandated ADA accommodations(s). Instructors must provide the indicated accommodations. Instructors, who encounter difficulty in responding to students' ADA requirements, should immediately contact the ODSSS and the Dean of their respective school or college.
4. Instructors may not discuss with students questions that they may have about the existence, nature or severity, or appropriateness of ADA related accommodations. Such concerns must be addressed to the instructor's Dean or Dean's designee or to Dean for Special Student Services for resolution.
 5. Faculty members may not discuss or negotiate approved ADA accommodations with ADA eligible students and must maintain the confidentiality of students' rights to receive ADA accommodations. Faculty members should not discuss students' rights to ADA accommodations in the context of a course or any other environment.
 6. When properly notified, faculty members who fail to adhere to the University's ADA compliance policies and procedures, including failing to provide ADA eligible students with officially approved ADA accommodations, will be subject to sanction and other appropriate action by the University.
- M. **Commitment:** Howard University is committed to providing an educational environment that is accessible to all students. In accordance with this commitment, students in need of accommodations due to a disability should contact the Office of the Dean for Special Student Services for verification and determination of reasonable accommodations as soon as possible after admission to the University, or at the beginning of each academic semester. The Dean for Special Student Services may be reached at 202 238 2420

Revised December 1, 2006

For updated information students are advised to check the web site:

<http://www.howard.edu/specialstudentservices/>

SECTION X

THE EDUCATIONAL ENVIRONMENT AND CONDUCT TOWARD STUDENTS

The following statement of teacher, learner and institutional responsibilities forms the foundation of an environment which is most conducive to learning. Ultimately, all student-teacher relationships must be held to the highest professional standards; relationships shall be free of abuse, discrimination, mistreatment or harassment; this includes all Howard University College of Medicine (COM) affiliated sites. Students subjected to abuse, discrimination, mistreatment or harassment have rights to seek timely and effective remediation with the full support of the COM and/ or Howard University (HU). This policy does not supersede Howard University Policies on Discrimination, Sexual Harassment and the Student Code of Conduct, but is meant to address instances not covered in those policies. The teacher-learner relationship requires that both parties recognize rights and responsibilities. Behaving in a way that embodies the ideal teacher-learner relationship fosters mutual respect, minimizes the likelihood of learner mistreatment, and optimizes the educational experience.

A. Responsibilities of Teachers

1. **Fair and Impartial Treatment:** Teachers must treat learners fairly, respectfully, and without bias, irrespective of age, race, gender, sexual orientation, socioeconomic status or educational background, disability, religion, or national origin.
2. **Professionalism:** Teachers must model an appropriate level of professionalism by
 - a) being prepared, on time and appropriately dressed and groomed for all activities
 - b) treating patients in an ethical, compassionate and culturally sensitive manner and adhering to standards of patient and student confidentiality, acknowledging the primacy of patient welfare above other responsibilities
 - c) providing learners timely, constructive, and accurate feedback, and opportunity for remediation.
 - d) welcoming and encouraging student participation by treating other teacher-colleagues and staff in a reasonable and respectful manner
 - e) encouraging interest and inquiry by asking and responding to insightful questions, where the end point is an increase in knowledge of the learner
3. **Scholarship and Pedagogy:** Teachers must provide learners with course objectives and appropriate educational activities using innovative and effective teaching methods which encourage life-long learning habits.

4. Rules Governing: A teacher is expected to act in accordance with the HU Faculty Handbook and COM Bylaws.

B. Responsibilities of Learners

1. Fair and impartial treatment: Learners must treat teachers fairly, respectfully, and without bias, irrespective of age, race, gender, sexual orientation, socioeconomic status or educational background, disability, religion or national origin

2. Professionalism and general conduct: Learners must maintain an appropriate level of professionalism according to the policies of the COM, by

- a) being prepared, on time and appropriately dressed and groomed for all activities
- b) responding maturely and appropriately to timely, constructive, and accurate feedback, and incorporating feedback during time allotted for remediation
- c) treating staff and other student-colleagues in a reasonable and respectful manner
- d) treating patients in an ethical, compassionate and culturally sensitive manner, adhering to standards of patient confidentiality and acknowledging that patient welfare is of primary importance
- e) Respond promptly when contacted by faculty, staff, and administrators.

3. Education: Learners should be devoted, active, life-long learners, dedicated to the undergraduate medical program and all subsequent training/ learning

4. Rules Governing: All medical students are expected to review and act in accordance with the Howard University policies and procedures, including the HU Student Code of Conduct, found at: <http://www.howard.edu/policy/academic/student-conduct.htm> and the University and College of Medicine Policies and Procedures Affecting Students, i.e. this manual that is distributed to students in hard copy format during orientation.

C. Institutional Responsibilities

It is the expectation that Howard University and the College of Medicine will support and encourage, through its faculty and staff, and to the extent of institutional resources, student mental, physical and emotional health and well-being, including but not limited to the provision of

- a) an educational experience of quality
- b) academic, personal, career and financial counseling
- c) health and disability insurance for mental and physical health promotion, maintenance and care, and illness prevention

- d) sufficient areas/ opportunities for recreation and relaxation
- e) safe and secure facilities

D. Mutual Responsibilities

In keeping with the requirement for a safe, secure environment which is free of abuse, the following procedures should be followed with respect to alleged student mistreatment.

1. **Verbal abuse** may include shouting, hostility, belittlement, intimidation, humiliation or profanity directed at the student. **Physical abuse** or threats of physical abuse may include hitting, slapping, kicking or intentionally or negligently placing a student at risk of physical harm, or threatening to do so.
2. Other forms of mistreatment covered by this policy may include such things as requiring a student to perform personal services such as shopping or babysitting or requiring a student to perform menial tasks, which may not cause a student to feel humiliated, but clearly fall outside of any reasonable student-teacher relationship.

Forms of mistreatment not covered by this policy are briefly noted here for clarity:

1. **Discrimination** is defined by University policy. Discrimination may include those behaviors, actions, interactions, and policies that adversely affect one's work because of disparate treatment, disparate impact, or the creation of a hostile, intimidating or offensive work or learning environment. Common forms of discrimination include those based on gender, age, religion, ethnicity, race, disability, and sexual orientation. Complaints involving discrimination on the basis of race, color, national origin, religion, physical or mental disability, medical condition, ancestry, marital status or age must be filed with the Equal Opportunity (EO) Designee, pursuant to the Policy And Procedure On Equal Opportunity In Employment And Education Programs And Activities College of Medicine EO Designees are Drs. Sheik Hassan and Walter Bland.
2. **Sexual Harassment** is defined by University policy, and includes, but is not limited to:
 - a) unsolicited, unwelcome flirtations, advances, and/or propositions of a sexual nature
 - b) insults, jokes, or anecdotes that belittle or demean an individual or a group's sexuality or gender
 - c) unwelcome sexually-oriented gestures, verbal expressions, or comments of a sexual nature about an individual's body, clothing, or sexual experience
 - d) inappropriate displays of sexually suggestive objects or pictures
 - e) unnecessary and inappropriate touching, such as patting, pinching, hugging, or brushing against an individual's body

- f) sexual assault (includes all incidents of "criminal sexual conduct" as defined by the District of Columbia Code or the applicable law where the sexual assault takes place) and/ or
 - g) suggestions that submission to or rejection of sexual advances will affect decisions regarding such matters as an individual's employment, work assignments, or status, salary, academic standing, grades, receipt of financial aid, or letters of recommendation.
3. **Consensual relationships (including dating) between students and faculty are prohibited**, whether or not such a relationship may violate the law. Therefore, violations of this prohibition by a faculty member and a student will lead to disciplinary action against that faculty member.
 4. Complaints involving sexual harassment or gender-based discrimination must be filed with the Title IX Designee pursuant to the Howard University Procedures for Resolving Sexual Harassment and Gender-Based Complaints In Educational Programs or Activities. Title IX designees for the College of Medicine are Drs. Sheik Hassan and Walter Bland.

E. Procedures for Filing Complaints

Students have the right to remain anonymous.

Any student who feels that he or she may have been subjected to abuse, discrimination, harassment, or mistreatment of any kind by residents, faculty, staff, or other student(s) has the right to seek remedy through any one of multiple options. This process shall be free of retaliation. The involved student has both informal and formal options available. Whenever possible, the student is encouraged but not required to seek remedy at the most informal level which will adequately and appropriately address the student's concerns.

All College of Medicine faculty and staff are expected to report violations. If an incident occurs at an affiliated clinical institution the violation must also be reported to the respective department at that site. Violations should also be reported to the College of Medicine Associate Dean for Student Affairs and Admissions. Students who wish to discuss such violations may report to the University Counseling Center where the counselors will keep the complaint confidential.

1. **Informal Procedures:** Informal Complaint, direct resolution – students may meet with the individual involved in the complaint and come to a mutually agreed upon resolution of the problem. The student is permitted, but not required, to bring to the meeting with him or her, any one of the Assistant or Associate Deans* of the College of Medicine to assist in resolution at this level. Unless required by law or University policy, there will not be a written record made concerning a matter that is *resolved directly* between the complainant and the alleged offender.

2. **Formal Procedures:** These include the following options:
Formal complaint, facilitated resolution - Students may meet with the Associate of Student Affairs and Admissions (ADSAA), within 45 calendar days of the alleged incident, to discuss a complaint and to develop a plan for resolution of the problem. The associate dean may assist in any intervention deemed necessary for resolution of the problem. If disciplinary action is anticipated, he/she will contact the appropriate supervisor of the alleged offender who will develop a plan of action. The supervisor of the alleged offender will maintain a written record.
3. **Formal complaint, investigator resolution:** If the complainant desires a formal complaint/investigation of an allegation against faculty or staff, the complainant must file a formal, written complaint with the Associate Dean for Student Affairs and Admission within 45 calendar days of the alleged incident. If the complaint involves any one of the Assistant or Associate Deans, or there is a conflict for the ADSAA, the complaint must be directed to the Dean of the College of Medicine. If there is a conflict for the Dean of the College of Medicine, the complaint must be directed to the Provost and Chief Academic Officer of the University
4. The Associate Dean, Dean, or the Provost (“the investigator”) will have approximately 45 (forty-five) calendar days to complete his or her investigation, which must include a written record of interviews and correspondence pertaining to that investigation. The case should then be presented to the Office of the General Counsel, which will provide an opinion as to the resolution of the case. The final decision regarding the resolution of the case will rest with the Dean of the COM, or the Provost, as appropriate. The timeline from completion of investigation, to communication of a final decision to the student will not exceed 45 calendar days. Resolution may include, but is not limited to:
 - a) Requirement of education/ remediation against the alleged abuser
 - b) More severe disciplinary sanctions against the alleged abuser
 - c) Disciplinary action against the student if the complaint is found to be spurious or maliciously intended

SECTION XI

PROFESSIONALISM

A. Introduction

Medical educators and patients alike expect physicians to be just, altruistic, conscientious, compassionate, honest, and scrupulous about financial conflicts of interest. The Accreditation Council for Graduate Medical Education (ACGME) includes professionalism as one of the six (6) general competencies that residents are expected to achieve during their training. The Association of American Medical Colleges (AAMC) and the National Board of Medical Examiners (NBME) have also weighed in on this. The American Board of Internal Medicine has been in the forefront in addressing the matter of professionalism in physicians for decades.

The following is an excerpt from the American Board of Internal Medicine “Project Professionalism”:

Professionalism in medicine requires the physician to serve the interests of the patient above his or her self interest. Professionalism aspires to altruism, accountability, excellence, duty, service, honor, integrity and respect for others. The elements of professionalism required of candidates seeking certification and recertification from the ABIM encompass:

- A. A commitment to the highest standards of excellence in the practice of medicine and in the generation and dissemination of knowledge.
- B. A commitment to sustain the interests and welfare of patients.
- C. A commitment to be responsive to the health needs of society.

<http://www.abim.org>

<http://www.aamc.org>

<http://www.nbme.org>

B. Requirements for Professional Behavior

The attributes of professional behavior expected of students, faculty and staff in the College of Medicine are shown below. These are adapted from the ABIM “Project Professionalism” and from the Task Force on Professionalism in Undergraduate Medicine at the University of Toronto. Students at Howard University College of Medicine will be evaluated according to these domains. Each domain shown below is not restricted to the descriptions listed below it, as these are only examples.

1. Altruism

- a) Places patients’ needs before self
- b) Demonstrates sensitivity to patients’ needs
- c) Demonstrates respect for patients’ privacy
- d) Demonstrates respect for patients’ confidentiality
- e) Shows respect for patients’ modesty
- f) Spends enough time to comfort patient
- g) Spends enough time to educate patients’ about their disease

2. Duty – reliability and responsibility*

- a. Adheres to institutional policies and procedures
- b. Attends instructional sessions including, but not limited to
 - i. Lectures
 - ii. Small group sessions
 - iii. Clinical rounds
 - iv. Conferences
 - v. Laboratory sessions
- c. Arrives on time for scheduled activities, examinations and appointments
- d. Completes assigned tasks on time including evaluation of courses, clerkships, program, and faculty
- e. Participates fully in group assignments and discussions
- f. Fulfills call duties as expected
- g. Informs supervisors of mistakes in patient care
- h. Asks for help when needed

3. Excellence – Self improvement and adaptability

- a) Attends lectures, rounds, conferences and seminars as expected
- b) Researches literature on own patients and other topics
- c) Accepts constructive feedback without being too defensive
- d) Modify behavior based on feedback and formative evaluation
- e) Demonstrates commitment to continuous learning and professional development

4. Respect for Others – Relationships with students, faculty, staff and colleagues

- a) Work in harmony with all members of the health care team
- b) Demonstrates respectful behavior to all members of the health care team
- c) Demonstrates respectful behavior to patients and their families
- d) Demonstrates respect for patient’s autonomy

- e) Communicates professionally in a non judgmental and non defensive manner

5. **Honor and Integrity** – Upholding Professional Codes of Conduct

- a) Behaves honestly
- b) Never misrepresents or falsifies information and/or actions (e.g. cheating)
- c) Demonstrates respect for people from all cultures, race and religions
- d) Establish and maintain strictly professional relationships with patients
- e) Acknowledges limits in knowledge and skills
- f) Dress in a professional manner
- g) Maintains professional demeanor even when stressed; not verbally hostile, abusive, dismissive or inappropriately angry
- h) Acknowledges own mistakes
- i) Adheres to ethical standards of the profession

***Duty**, one of the domains of professionalism, also includes

1. **Class and clerkship attendance:** Students are expected to attend all lectures, to be present on time, and to remain for the entire lecture. Students are required to attend rounds, all laboratory sessions, and all small group sessions; and to be present on time, to remain for the entire session, and to actively participate in each session. Attendance and participation in the small group sessions and on rounds will be taken in consideration in determining the summative evaluation of the student in computation of grades and in support of promotions, graduation, and residency applications.
2. **Evaluations:** Students will be evaluated on the basis of their knowledge, problem solving skills, technical skills, interpersonal skills, communication skills, and professionalism among other domains. Narrative comments will be recorded by the attending physician, resident, and faculty facilitator of the small group sessions and these comments could be used in preparing letters of recommendations and decisions regarding promotions. Students are expected to complete evaluations of courses, clerkships, faculty, and residents in a timely manner. Grades could be withheld for students who do not complete the evaluations.

Note: It shall be considered inattention to duty for students who do not attend required classes. It shall be considered unprofessional behavior of students who do not complete the evaluations in a timely manner whenever such evaluations are not anonymous.

Letters documenting failure to complete evaluations may be placed in students' files and may be removed providing there are no recurrences.

C. Early Warning

1. **"Early Warning" Incident Reports:** The intent of the "early warning" report is to give the student formative feedback of concerns about professional behavior before that behavior becomes part of a grade or a sanction by the administration. In certain cases, such as cheating, an early warning may not be warranted and appropriate actions will be taken.

Process for use of an Early Warning Incident Report:

- a) An "early warning/incident report" may be filed by the relevant faculty, unit leader/coordinator, course/clerkship director, department chair, Assistant/Associate Dean or others who observe or supervise the student.
- b) Faculty or others concerned are encouraged to discuss their concern directly with the involved student before going forward. The decision of whether or not to file an early incident report at that point will be at the discretion of the relevant evaluator or observer.
- c) It is normally expected that before filing a report, a face-to-face meeting between the student and the person filing the report will be held. In the sole discretion of the person filing the report, other involved persons may be asked to attend. If a face-to-face meeting is not feasible, an explanation of the reason and way in which the student was contacted must be included. At times, this process of discussion and fact-finding may result in the decision not to file a report.
- d) The report will consist of a narrative statement describing the incident. Optionally, the student may also file a commentary which could include a different side of the incident(s), report of extenuating circumstances and/or discussion of remediation.
- e) The report should be filed usually within 14 days of the unprofessional behavior and shall be filed with the unit leader, clerkship director, chair of department or with the Associate Dean for Student Affairs and Admission.
- f) A filed report will be discussed by the person filing the report and the Associate Dean for Student Affairs and Admissions or designee to determine what action should be taken, if any.

Approved by the Faculty June 18, 2007

Updated July 2013

D. Code of Honor, Professionalism, and Ethics

I. Preamble

Since its founding in 1868, the Howard University College of Medicine (COM) has been committed to producing a community of knowledgeable, compassionate and culturally competent health care professionals of high ethical standards. This community remains dedicated to improving the health and health care of those they are charged to serve. In an effort to create an atmosphere that fosters the development of professional skills and high ethical principles, the Howard University College of Medicine's Code of Honor, Professionalism and Ethics was developed and implemented.

The Code of Honor, Professionalism and Ethics, hereafter referred to as the Code, demands that community members tell the truth, live honestly, advance on individual merit, and demonstrate respect for others in the academic, clinical and research communities. The central purpose of the Code is to sustain and protect an environment of mutual respect and trust in which students have the freedom necessary to develop their intellectual and personal potential. To support the community of trust, students and faculty must accept individual responsibility and apply themselves to developing a collegial atmosphere. The intent of the Code is not merely to prevent students from engaging in dishonest behaviors, or to punish those who violate its principles. Rather, participation in such a Code assures The College of Medicine community that the integrity of its members is unquestioned, and accepted as fact by those in the academic, clinical and research communities. Participation in the Code confers upon faculty, staff and most importantly, students, the responsibility to respect and protect the values of the Howard University College of Medicine (COM).

Students are expected to maintain the highest standards of honesty and, if engaged in research, to conduct those activities in an unbiased manner, to reports the results truthfully, and to credit ideas developed and worked on by others. If engaged in patient care, students are expected to be considerate and truthful, to report all historical and physical findings, test results, and other pertinent information, to respect the dignity of others, treating them with civility and understanding, and to regard privacy and confidentiality as core obligations. Students are also expected to conduct themselves professionally, and to take responsibility for what they say and do. They are also expected to recognize their limitations and to seek help when appropriate.

It is expected that a statement about academic integrity be included in each course syllabus. Faculty and administrators are also expected to contact the Honor Council regarding suspected infractions of the Code.

Those in the healing professions are expected to adhere to highest standards of medical ethics and professionalism. Therefore, the Code of Honor, Professionalism and Ethics of the COM will supersede all existing University student academic and/or honor codes.

The foundation of the Code rests upon the willingness of each individual to live up to the

standards established by the student body and faculty. Violation of the Code affronts us individually and collectively and the COM regards such violations as serious offenses. The Code presumes the absolute honesty of each individual. As a result, community members live with the freedom of knowing that:

- a) Their integrity, intentions, work and word are unquestioned
- b) Their personal property and academic work are respected and free from theft, interference or tampering by COM community members
- c) Classroom, clinical and research environments for learning and evaluation are honorable
- d) The learning environment is safe and equitable regardless of the student's gender, race, religion or sexual orientation.

Guided by these principles, this Code outlines the COM's expectations for students, the procedures for resolving alleged violations of those expectations, and the rights and responsibilities of students and faculty throughout the process.

2. Statement of the Code of Honor, Professionalism and Ethics

- a) Any action indicating lack of integrity, or dishonesty in academic matters is considered a violation of academic ethics. Such offenses include, but are not limited to, engaging in or attempting to engage in cheating, plagiarism, sabotage, fabrication or complicity. Furthermore, a lack of professionalism is considered a violation of the Code.
 - i. Cheating includes knowingly acquiring, receiving, or passing on information about the content of an examination prior to its authorized release or during its administration; provision, utilization or theft of unauthorized aids; or impermissible collaboration (such as copying from another student's examination, or allowing another student to copy from one's examination)
 - ii. Plagiarism is defined as the act of incorporating into one's own work or the work or expression of another without appropriately and adequately indicating the source. This includes intentional or unintentional plagiarism, wherein a student does not appropriately credit sources consulted in the writing of a paper or preparing a presentation
 - iii. Sabotage is defined as intentional and malicious actions that impair another student's academic performance
 - iv. Fabrication is defined as the creation or manipulation of information to support an academic or scholarly pursuit. This includes falsifying, manipulating, creating, enhancing, or otherwise changing actual results in academic, clinical, or research matters; taking an examination or writing a paper on behalf of another; listing sources in a bibliography that were not

used in the academic exercise or scholarly pursuit, and falsifying patient information for use in the patient record or elsewhere

- v. Lack of professionalism includes but is not limited to inattention to duty and participation in patient care while under the influence of any substance that impairs his or her ability to function. It also includes ignoring the patient's dignity, privacy, cultural values and confidentiality
 - vi. Complicity involves intentionally helping another to commit an act of academic dishonesty.
- b) **All students in the College of Medicine must complete HIPPA** training prior to any activity that may involve access to patient PHI, including but not limited to research, shadowing healthcare providers, and rotation on clinical clerkships. Students are prohibited from removing PHI from Howard University Hospital, any affiliated hospital, clinic, physician's office or any health care facility in any form, including written, electronic, or photographed. Students are also prohibited from placing any PHI on social media.
- c) **HUCM policy re: Protected Health Information (PHI)**
Protected health information refers to individually identifiable health information related to the past, present or anticipated future physical or mental health or condition of an individual. This may include but not limited to names, addresses, birth dates, admission dates, phone numbers, email addresses, social security numbers, medical record numbers, health plan account numbers, photographic images and any other unique identifying number.
- d) **Other acts included under this Code are**
- i. Violations of confidentiality: knowingly obtaining, viewing or releasing confidential information inappropriately, including but not limited to gaining access to patient or student records, documents or information without justification
 - ii. Misrepresentation of information to or through COM or University officials (via, for example, forgery, or lying in an investigation, or not revealing a conflict of interest and subsequently participating in a Honor Council Hearing)
- e) Students in violation of this policy will be subject to disciplinary action.

3. Application of the Code of Honor, Professionalism and Ethics

- a) Adoption of the Code necessitates the creation of a Council on Honor, Professionalism and Ethics, hereinafter referred to as the Council, a group of faculty and students empowered to receive, investigate and hear disputes and make recommendations to the appropriate disciplinary entity or COM committees. The composition and operation of the Council is described herein

- b) Acts observed that appear to be in violation of the Code will be reported to the Council
- c) Failure on the part of a student to report such violations, or acts that appear to be violations, will itself be considered a violation of the Code
- d) Lack of knowledge of the aforementioned precepts will not stand as adequate defense for violation of the Code
- e) The following pledge, where present, MUST be signed at the end of all examinations, quizzes, and other important projects on which the pledge is required by an instructor:

“On my honor, I have neither given nor received any aid on this examination, quiz, or paper, nor am I aware of anyone who did.”

NOTE: Absence of this pledge does not exempt the student or the assignment from the obligations set forth under this Code.

1. Each student, at the start of each academic year, must sign a pledge upon matriculation stating that he/she has read, understands, and is aware of his/her responsibilities under the Code
2. The Council will have primary jurisdiction over the supervision of the Code as it applies to medical students. This shall include all clinical, research, and academic affairs
3. Honor, Professionalism and Ethics Council composition - the Council will consist of student and faculty members

4. Membership

- a. Student Members - the Council will consist of FOUR student members, one from each of the four classes, and FOUR alternates, one from each class. For the first Council, and any Councils subsequently in need of student members, students in years 2 through 4 (ONE member and ONE alternate each from years 2 thru 4) will be SELECTED by the dean (or his/her designee, hereinafter called the Dean) via a defined application process through the Office of the Dean. A student member from year 1 will be ELECTED by the members of the first year class not later than three weeks following the first examination of the year, or at the conclusion of the first month of classes, whichever is later. Student members are approved to serve as Council members, NOT as representatives of their class to the Council. Alternates are only called to serve in the event that their corresponding student member CANNOT serve because of a conflict of interest, cannot serve for the full academic year, for a substantial portion of the year, or for the remainder of the year (e.g. if a student loses good academic standing, or is investigated on a violation of the Code or other student conduct policy). Once an alternate has been

seated, that alternate will be a member of the Council for the remainder of the academic year, UNLESS the need for that alternate was created by a sitting Council member's recusal because of a unique instance of conflict of interest (e.g. a student member who is a good friend of the accused, or a student or faculty member who is somehow involved in the Code breach).

In April of each academic year following implementation, student members may submit an application to the dean to serve on the Council for the next academic year. Applications will also be open to any student in good academic standing. No student previously found to be in violation of ANY Honor Code is permitted to serve.

- b. Faculty Members - EIGHT faculty members will be appointed by the dean; SIX of these shall be Council members and TWO will serve as alternates in the event that one or more of the SIX cannot serve. Not more than FIVE of the EIGHT faculty members and alternates shall be from either a clinical or basic science department. Each will serve a term of two years, with the opportunity for two terms of reappointment. Faculty members will be limited to three consecutive terms (six years). An assistant or associate dean in the COM will function as administrative support to the Council indefinitely in order to facilitate communication among Council members and students/ faculty involved in an investigation. Vacancies which exceed the number of alternates will be filled by appointments by the Dean
- c. Honor Council Leadership - The Chair will be one of the six faculty members of the Council. The Council will elect its Chair at an organizational meeting to be held during September of each academic year. The 4th year student Council member will serve as the Vice Chair. With this responsibility in mind, the Vice Chair of the Council shall only be allowed 2 (two) electives outside of the Washington D.C. metropolitan area during their 4th year. The 3rd year student Council member will serve as the Secretary to the Council and begin his or her term of office in July

5. Procedures for Reporting and Investigating Violations

- A. If an individual (student, faculty or staff) believes that a violation of the Code has occurred, that individual must report the violation as soon as possible to the Chair of the Council. Failure to report the violation will itself constitute a violation of the Code, with possible charges made according to applicable policies. The names and contact information for Council members will be made available to all students, faculty and staff at the beginning of the academic year
- B. Once an allegation has been made, the individual making that allegation must draft, sign, date and submit to the Council Chair and Secretary a brief written statement for Council documentation

- C. Upon notification of a possible violation of the Code, the Council Secretary will inform the Council's Vice Chair that he or she and the Chair are required to complete an investigation. The Chair and Vice Chair will be responsible for gathering information about the case unless the accused student(s) are members of the senior class, in which case, the investigation will be completed by the Chair and Secretary. Every effort MUST be made to name a student co-investigator (Vice Chair, Secretary or other) who is NOT a member of the class within which a student or students have been accused of a Code breach. If students across all classes are to be investigated, the Chair shall name a faculty co-investigator in lieu of the Vice Chair, Secretary or other student co-investigator. The Chair shall exercise the right to name a faculty co-investigator in situations where more than two co-investigators are needed
- D. The Chair shall inform the Dean of the following: that an investigation is being conducted, the name of the student(s) and details of the incident as known at that time. This notification will take place as soon as possible, but will not exceed 5 business days from the time that a complaint is received by the Council Chair
- E. After information concerning the case has been gathered, the Council will convene to determine whether sufficient evidence exists to warrant a formal hearing. Student members within the class(es) of the accused are excused from this session. If students across all classes stand accused, the Dean will select two conflict-free students (members or alternates) to deliberate this decision with faculty members. Students and faculty with a conflict of interest are expected to recuse themselves from any investigation or deliberation where there is a conflict. Among members of the Council seated, the decision to continue with a formal hearing or cease the investigation will rest upon the vote of a simple majority of the convened members. Any meeting of the Council, whether a hearing, or a meeting to determine whether a hearing is warranted, the mandatory minimum number of convened members are detailed below
- F. If a hearing is deemed warranted, the accused student will be notified by the Secretary of the Council in writing of the date, time, and place of the Hearing; the nature of the violation with which the student is charged; the evidence of the investigation, including the name of the individual making the initial allegation, and of the opportunity to select an advisor. The accused has the option of selecting for an advisor from within the College of Medicine, but not a member of the Council, to assist in an advisory capacity prior to the hearing and to be present at the hearing. This individual will not be permitted to testify or to make statements of any nature during the Hearing. The student and advisor are empowered to review and gather evidence prior to the hearing
- G. The hearing will take place within twenty-one working days (excluding weekends) after the accusation is reported to the Council. (In rare instances, a different time period may be determined by the Council based upon the specific circumstances of the case.)

- H. The accused will be permitted to continue matriculation until a final decision (including any opportunity for appeals) is made. All applicable tuition and fees must be paid by any student exercising this option
- I. For each hearing, at least 7 (SEVEN) members of the Council MUST be present: 2 student members PLUS the Vice Chair, and 5 faculty members PLUS the Council Chair, who will conduct the hearing, but who may only vote in case of the need to break a tie. If any member decides she/he cannot serve for any reason, including conflict of interest, then the alternate member will sit on the Council. The investigators (usually Chair and Vice Chair) will present pertinent information but will not be allowed to vote on the matter they have investigated
- J. It will be the responsibility of the Secretary to inform Council members and the accused of the alleged violation (date, person(s) involved, and nature of the accusation) and the time, place and date of the Hearing.

The standard legal rules of evidence or civil or criminal courtroom procedures and protocols do not apply to any hearings or proceedings regarding the Honor Code.

6. Order of Proceeding

- A. Call to order
- B. Reading of Parts I and II of the Code of Honor, Professionalism and Ethics (Preamble and Statement of the Code of Honor, Professionalism and Ethics)
- C. Statement of the alleged Code violation
- D. Presentation of evidence: The investigators and then the accused will present evidence as appropriate and relevant to the case, including calling witnesses. Witnesses are NOT permitted to be present at the Hearing unless they are giving testimony or answering questions. The Chair and members of the Council, and the accused, may ask questions of witnesses, but the Chair shall have the right to determine whether such questions are appropriate. The advisor may be present but is not permitted to question witnesses
- E. Discussion and deliberation by the Council are held in a private executive session.

7. Rules Governing Proceedings

- A. All hearings will be conducted in closed-door session and will remain confidential
- B. Participants in the hearing will be limited to the following: Faculty and student Council members without involvement (or relationship to the matter which is the

subject of the violation) or other conflict of interest; accused student(s), witnesses (during testimony and questioning only) and the advisor for the accused student(s)

- C. The Secretary or his/her appointee will take notes during the hearing and make them available to the Council. Notes (which may be made from a transcribed tape or taken directly by hand during the Hearing) will be held as a written record until the Council decides that a Hearing is NOT required or until accused student(s) are adjudged innocent of charges, whichever comes first. In these cases, this record will be destroyed and disposed of in a secure manner. If accused student(s) are deemed guilty, the record remains in a separate disciplinary file within the Office of the Dean, along with written documentation of the Dean's final decision regarding sanctions
- D. Each member has one vote during the proceedings. While it is expected that each student member will be present, there will only be one vote per voting member. Each faculty member will have one vote. The Chair will not have a vote unless there is a tie vote. The Vice Chair and / or Secretary will only have a vote in the event that he or she did not serve as co-investigator. All Council members present, and the accused, may ask questions of investigators and witnesses, to the extent that the Chair deems the questions appropriate

8. Decision and Penalties

- A. The Council will adjudge the accused to be innocent or guilty of charges made, and/ or of other charges which may have come to light as a result of the investigation and hearing
- B. The Council will RECOMMEND to the Dean of the College of Medicine disciplinary action or sanctions that it deems appropriate, including but not limited to:
 - i. A written warning with a temporary or permanent copy to the student(s) record
 - ii. Suspension for a defined period of time, with conditional or unconditional re-enrollment at the completion of the suspension
 - iii. Dismissal with the option to apply for readmission via the COM Readmissions process (occurs once annually beginning in June)
 - iv. Expulsion, which is permanent dismissal from the COM, and which precludes eligibility for readmission and results in a permanent barring from the COM and University owned property or sponsored events
 - v. Remediation as defined by the Council
 - vi. Restitution as defined by the Council
 - vii. Any logical combination of any of the above
- C. All decisions of the Council are made by a simple majority vote. The Council Chair MUST break any tie votes

While the decision of guilt or innocence rests solely within the purview of the Council, the final decision as to sanction rests with the Dean of the College of Medicine. The decision of the Dean will be effective immediately unless there is an appeal. The appeal, including the basis for the appeal, must be submitted by the student in writing according to the COM Policy on Appeals (which is found in this booklet, Howard University College of Medicine Policies Affecting medical Students).

VII. Amendments to the Honor Code

Amendments to the Honor Code may be proposed by the Honor Council at any point in the academic year; proposed amendments must be approved by the Executive Committee or the Faculty Senate of the COM before becoming effective. If an amendment is approved while a case is under active review, the new amendment will not apply to that case. Any new amendment, once approved, will become part of the policy for the ensuing academic year, and become effective at that time

References: Honor Codes of the Carver and Emory Schools of Medicine, with thanks to the COM Student Council for input.

Approved by the Board of Trustees – April 2010

E. Resolution of Students on Professional Standards

That cheating can be understood by all concerned to be expressly unlawful; that no student shall have on their desk or in their possession books, notes, papers or electronic devices with memory capabilities during any examination room; that an adequate number of proctors supervise each examination; that a proctor shall relocate a student to another seat if to avoid even a suspicion of unauthorized practices; that the proctor will take the examination paper from a student who is seen cheating or possessing unauthorized books, papers or electronic devices with memory capabilities; that students be notified that all answer sheets are subject to a computerized analysis which can reveal cheating patterns; that the profession of the physician is an honorable one and that physicians and students must eschew dishonorable practices and that expulsion from the College of Medicine be the penalty for a student adjudged of cheating in an examination.

A copy of this resolution, pledging to observe these standards, shall be signed by each student upon entering the College of Medicine.

I hereby acknowledge and agree to abide by the above. I also acknowledge receipt of a copy of the Howard University College of Medicine Policies and Procedures manual.

Print name:.....

Signed:.....Date:.....

SECTION XII

STUDENT DRESS CODE

Effective April 1, 1989

The guidelines which follow are of general nature. They set minimum standards only. In most instances, an individual's dress will far exceed these minimum standards. In many departments, more specific guidelines for dress will be set which relate directly to the specific situation in those areas.

A. General

All College of Medicine students are expected to dress in appropriate attire and to practice the highest standards of personal hygiene and cleanliness. All hair is to be neatly groomed and clean. Nails are to be neatly trimmed and clean. All clothing should be clean and free of holes.

B. Preclinical Guidelines

Unacceptable attire for students include short skirts and short shorts, clothes with holes, cutoff or frayed clothing such as jeans and shirts, tee shirts with inappropriate inscriptions, halter tops, midriffs, excessively low-cut necklines, sweat bands, and rubber thongs. Bermuda length shorts and skirts are acceptable. Students should be fully clothed at all times. Shoes are required in all areas. The entire foot should be covered in the laboratory and other specified areas in conformance with safety regulations. The wearing of athletic attire is discouraged.

C. Clinical Guidelines

In general, there should be conformance to the Howard University Hospital dress code which follows:

The Howard University Hospital code is designed to establish regulations governing attire conducive to good public relations and the welfare of patients and hospital personnel. It also reinforces dress standards that meet safety, infection control, and sanitary requirements of health care institutions.

The following list includes some of the articles or styles of dress that are unacceptable attire for work in the hospital:

- jeans
- halter tops
- tank tops
- tee shirts
- mesh or see-through garments
- short pants
- excessively low-cut necklines
- vests, short tops, or other clothing revealing, abdomen and lower back
- sundresses (alone)

- curlers in the hair
- unapproved footwear. The Hospital will not assume responsibility for any injury sustained as a result of not wearing the proper type of safety shoes. In the interest of employee, trainee, and volunteer safety, and in accordance with the recommendations of the Hospital Safety Committee, this Hospital policy shall be strictly adhered to.

In addition:

- Attending staff and medical officers are to wear clean, pressed, three-quarter length white laboratory coats
- Postgraduate physicians are to wear clean, pressed, three-quarter length white laboratory coats
- Medical students are to wear clean, pressed, short white jackets
- Proper identification badges and name tags are to be worn at all times
- Proper identification badges and name tags are to be worn at all times
- Males are encouraged to wear freshly laundered and pressed shirts with ties
- Blouses worn by females should be properly fitting, and freshly laundered
- All employees who work in areas where there is a possibility of heavy or sharp objects falling on their lower extremities are required to wear safety shoes that meet Standard of the American National Standard Institute (ANSI)
- The wearing of canvas top type shoes, sandals, and mesh shoes during the performance of duties is discouraged
- Bare feet are not allowed and bare legs are discouraged. All categories of personnel are requested to wear stockings or socks when on duty
- The Hospital will not assume responsibility for any injury sustained as a result of not wearing the proper type of safety shoes.

D. Enforcement of Guidelines

In case of students, it is the responsibility of every faculty member to monitor adherence to the above guidelines. If problems cannot be resolved at this level, then referrals should be made to the Associate Dean for Student Affairs and Admission.

SECTION XIII

ATTENDANCE AND CONDUCT DURING EDUCATIONAL SESSIONS

1. Students are expected to attend and to be punctual for all structured educational sessions
2. Students are required to attend and to be punctual for all active learning sessions, clinical rounds, and conferences. Active learning sessions include but are not limited to:
 - A. Small group sessions
 - B. Team-based learning
 - C. Laboratory sessions
 - D. Clinical skills sessions
 - E. Simulation laboratory sessions
 - F. Demonstrations
 - G. Classroom discussions
3. All mobile devices must be completely turned off during all educational sessions unless explicitly required by the teacher or if the educational session requires the use of such devices.
4. Checking emails, answering telephone calls, texting, and any other form of electronic communications are prohibited during any educational session
5. Completion of evaluations of courses, clerkships, faculty, and residents are considered part of the course and clerkship
6. Students are required to attend all educational sessions during the third and fourth years. Students must be available within five to ten minutes when on duty and rounds or educational sessions are not scheduled.
7. Third year students are encouraged to report for duty (rounds and patient care) on holidays and during periods of unscheduled closure or delayed opening of the university. This applies to all sites where the student may be rotating.
8. Fourth year students are required to report for duty (rounds and patient care) on holidays and during periods of unscheduled closure or delayed opening of the university. This applies to all sites where the student may be rotating.

July 2014

SECTION XIV

CLOSURE OF THE UNIVERSITY

A. Scheduled Closure

1. First and second year students

- a) All first and second year students may be excused from classes when the university is officially closed or when classes are suspended.
- b) When classes are suspended for university or College of Medicine events, students are expected to attend the events

2. Third year students

- a) Students shall not be scheduled for rotations during the College of Medicine Christmas/Winter break
- b) Students shall be excused from rotation only on Labor **Day**, Thanksgiving **Day**, MLK Birthday **observed**; and Independence **Day**
- c) Students are required to be on rotation on all weekend days, College of Medicine Spring Break, and all university holidays except as noted in # 2 above, unless the weekend day or holiday is their day off
- d) When classes are suspended for university or College of Medicine events, students are expected to attend the events

3. Fourth year students – required rotations and electives

- a) Students may not be scheduled for rotations during the College of Medicine Christmas/Winter break
- b) Students are required to be on duty during weekends, university holidays, Thanksgiving break (including Thanksgiving Day), and College of Medicine spring break unless it is their scheduled day off
- c) When classes are suspended for university or College of Medicine events, students are expected to attend the events

B. Unscheduled Closure

1. First and second years

In case of delayed opening or unscheduled closure of the university, materials that should have been covered during the delayed or closed period could be included on the examination that follows the delayed or closed period, providing the students are given written objectives prior to the delayed opening or closure of the university. The unit leader shall make reasonable attempts to have the missed session(s) made up at a later date.

2. Third year clerkships

- a) During periods of delayed opening or unscheduled closures of the university, students will be excused from the clerkships during the delayed or closed period, but are encouraged to report for duty.

- b) Make-up lectures and other learning sessions shall be rescheduled whenever possible
- c) Students shall not be required to make up the missed period unless the missed period includes make-up time for an earlier rotation, but will be responsible for the material that would have been covered during any lectures, small group session, or other learning activities.

3. Fourth year clerkships (AI on medicine and surgery)

- a) During periods of delayed opening or unscheduled closures of the university students on the required clerkships during the senior year are **NOT** excused from the clerkships.
- b) Make-up lectures, PBL or other learning sessions shall be rescheduled whenever possible

4. Electives

- a) During periods of delayed opening or unscheduled closures of the university students on the electives may be excused from the rotations at the discretion of the director for the elective. However students are encouraged to report for duty.
- b) Make-up lectures, PBL or other learning sessions shall be rescheduled whenever possible

SECTION XV

EVALUATION AND GRADING

A. Formative and Summative Evaluations

The faculty shall provide formative evaluations for all students and the final grades for students in the first two years of the curriculum must be submitted to the office of the Senior Associate Dean for Academic Affairs within two (2) regular working days following final review of the examination questions. The final grades for all students in the second two years of the curriculum must be submitted to the office of the Senior Associate Dean for Academic Affairs within 4 weeks following the end of each rotation.

Records of formative evaluations should be maintained in the respective departments for at least five years following the end of the educational experience

B. Narrative

The faculty is required to provide a narrative description of each medical student performance including non-cognitive achievement in each required course and clerkship whenever teacher-student interaction permits this form of assessment.

C. Evaluations by Students

Completion of evaluations by students of courses, clinical rotations, faculty, and residents in the College of Medicine and affiliated sites are considered part of the grade for each course and clerkship.

If at the end of an academic year the average completion rate of evaluations within 3 weeks after completion of the course or clerkship is 90% or greater for an individual class, the Dean will add \$2000.00 to fund of that class.

The final grade of a course or clerkship for any student who fails to complete these evaluations will be withheld until the student completes the evaluations. If the evaluations are not completed within four (4) weeks after the course or clerkship is completed, grades will be released but 2 points will be deducted from the student's final grade for the course or clerkship; and the student may not be eligible for reexamination in that course or clerkship. The student will be eligible for SDSP.

D. Grading

This system, which was adopted beginning with the 2006-2007 academic year, is one that sets a predetermined numerical performance value that is equal to a letter grade. All students can, in theory, earn the grade of Honors (H). Numerical scores and equivalent letter grades are as follows:

Honors –	A final score of 85 or more
Satisfactory –	A final score of 70-84
Unsatisfactory –	A final score of less than 70

E. First and second years (M 1 and M 2)

The minimum passing score for each examination (faculty generated or NBME customized) shall be 70 raw score; and a raw score of 85 shall be considered Honors. The faculty shall determine the weight of each examination, each quiz, and any other assignments for computation of the final grade.

F. Third and fourth years (M 3 and M 4)

The minimum passing score on all subject examinations, except for psychiatry, from the National Board of Medical Examiners is 62. The Data Analysis Center then adjusts this score such that $62 = 70$. The passing score for the NBME Subject examination in psychiatry is 63 ($63 = 70$) effective beginning with the 2013-2014 academic year. The faculty in each department determines the weight of all other examinations, quizzes, assignments and clinical performance in computing the final grade. The clinical component of the final grade shall be based on the student's level of achievement of the general competencies defined by the clinical departments. A student who fails the clinical component fails the clinical rotation.

G. Unexcused absence/lateness from TBL and SGL sessions

All Students

Attendance at all lectures is expected. Attendance at all sessions for TBL, SGL, Clinical Skills Center, Simulation Center, and patient contact is required.

1. Students who are late by 10 or more minutes without excuse from the Associate Dean for Student Affairs and Admissions should remain for the learning session but will not be permitted to take a quiz, if one will be administered for that session. These students will be considered absent for the session.
2. Students who are absent or late by 10 or more minutes without excuse from the Associate Dean for Student Affairs and Admissions will have final grades reduced for the unit as shown below:

Two (2) points will be deducted from the final grade for each unexcused absence for that unit

H. Professionalism

The grade at the end of the first semester of each academic year shall be formative and noted as Pass/Fail. A student who receives a failing grade during or at the end of the first semester of the school year shall be:

- a. placed on self-reflection **or**
- b. mandated to a program on professionalism recommended **or**
- c. referred to the Honor Council

The grade at the end of the second semester of each school year shall be summative and shall be entered on the students' transcript as Pass or Fail.

A first, second, or third year student who receives a failing grade for professionalism may be conditionally be promoted to the next year or may not be promoted to the next year until the student satisfactorily completes a program of remediation. A fourth year student who receives a failing grade for professionalism may not be permitted to graduate until she/he satisfactorily completes a program of remediation. The committee on Promotions and Graduation shall determine the course of action for any student who receives a failing grade. When the breach of professional behavior is serious as determined by the Honor Council, the student may be dismissed or expelled from the College of Medicine.

Students who exhibit unprofessional behavior may have their final numerical grade for any course or clerkship reduced. This reduction could include a change in the letter grade from H to S, or from H to U, or from S to U.

Approved By the Curriculum Committee November 17, 2014

H. Non-involvement of providers of student health services in student assessment/location of student health records.

Any physician/resident or other healthcare provider who renders medical care to any student enrolled in the Howard University College of Medicine will not participate in the academic/clinical evaluation, or in promotion and graduation decision of that student. Student health records will be maintained in the Office of Student Health in accordance with HIPPA policies. By completing the evaluation (formative or summative), the evaluator attests that she/he did not participate in the medical care of the student.

I. Official Grades

Grades for examinations and final grades are official only when issued through the Office of Academic Affairs.

J. Right to Appeal: All students have the right to appeal any grade, evaluation, or any decision that she/he is in disagreement. The appeal process is described elsewhere in this manual

SECTION XVI

EXAMINATIONS AND QUIZZES

A. Written Examinations and Quizzes

1. Proctors will be present in the examination room approximately 15 minutes before the scheduled examination time.
2. Students should be seated at least five (5) minutes before the scheduled starting time. Proctors will make sure students are properly seated according to seat assignments.
3. The doors will close promptly at the time the examination is scheduled to begin. Students arriving late will not be admitted to the examination room while examination materials and instructions are being distributed to the students who were present on time. Those students who arrive late will not be given additional time to complete the examination. Any student who arrives more than twenty (20) minutes late will not be admitted to the examination.
4. No books, notes, electronic devices or other paraphernalia will be allowed at examination seats. Materials brought to the examination room must be placed in the front or back of the room. Electronic devices of any type with memory or communication capabilities are not permitted on any student's person, even if the devices are turned off, during any examination or quiz. Students are therefore advised not to carry these devices to the examination room. If they do carry them to the room, the devices must be completely turned off and turned in to a proctor or left at the front or the rear of the examination room until after the examination has been completed. The College of Medicine assumes no responsibility for loss of such devices if they are carried to the examination room and left with a proctor, at the front of the room, or the rear of the room during the examination.
5. Food and beverages (except when medically necessary), radios, electronic devices with memory and or recording capabilities, or earphones are not allowed in the examination room. Students who have medical needs must contact the Associate Dean for Student Affairs and Admissions prior to the start of the examination or each academic year.
6. During the course of examinations, students will remain in their assigned seats. Questions and needs of individual students will be attended to by proctors who will go to the students seating area when the student raises his/her hand.
7. Students who finish the examination before the last 10 minutes may leave the examination room one at a time. These students will raise their hands and remain seated until released by a proctor. These students will not be permitted to reenter the examination room.

8. Students may leave the examination room one at a time to take care of personal needs. These students will raise their hands and remain seated until permission is granted by a proctor. A proctor will log in the time the student left the examination room and the time the student returns to the room. This list will be submitted to the Associate Dean for Academic Affairs immediately following the end of the examination. Students will not be given extra time to make up the missed time lost during the absence. No student will be permitted to leave the examination room during the last 10 minutes of the examination. Students who finish any examination during the last 10 minutes must remain seated and refrain from talking.
9. Student are not permitted leave their seats during the last ten (10) minutes of any examination.
10. Upon completion of the examination, students must remain seated until dismissed by the chief proctor. Students are not permitted to leave their seats and carry the examination material to the proctor or other areas of the room or outside of the examination room.
11. Quizzes are sometimes administered following educational sessions. Students are advised to turn off all communication devices during the educational sessions. All such devices must be turned in or placed in front or the rear of the classroom before the start of the quiz. No student is permitted to leave the classroom until after all students have completed the quiz and turned in their answer sheets.
12. All students must sit for each examination as scheduled except for excused absences. Students who are excused from any examination or quiz must make up the missed examination or quiz detailed elsewhere in this manual.
13. Any student who fails to follow the College of Medicine policy on missing examinations will be awarded 0 for the examination
14. "Make-up" examinations will be administered according to the policy on excused absences and make-up examinations
15. In case of delayed opening or unscheduled closure of the university, materials that should have been covered during the delayed or closed period could be included on the examination that follows the delayed or closed period, providing the students are given written objectives prior to the delayed opening or closure of the university.
16. Students who are in violation of any of the above will be subject to disciplinary action that may include but not limited to
 - a. Failing grade for the quiz or examination
 - b. Failing grade for the unit or clerkship
 - c. Ineligible for reexamination

- d. Ineligible for the Summer Directed Study Program
- e. Ineligible to repeat the clerkship
- f. Dismissal from the College of Medicine

Use of these procedures is intended to assure:

- a) Consistency among all units and departments in conducting examinations
- b) Maximum available time for students to take examinations; and
- c) The best possible environment in which students will take examinations.

B. Clinical Skills Examinations for Courses and Clerkships

1. Students may be permitted to leave the orientation to take care of personal needs. If they return after the examination has started, they will not be permitted to enter the examination suite
2. Students are not permitted to enter examination session if **the examination has started**
3. Talking is prohibited during the administration of any examination
4. Students are not permitted to discuss the cases with anyone (before, during, or anytime after the examination) other than members of the faculty who will review the students' performance on the clinical skills examination
5. Electronic devices or any devices with memory capability are not permitted in the examination suite. Students who violate this policy will not be permitted to continue the examination and will be referred to the Senior Associate Dean for Academic Affairs
6. It is the responsibility of the Course Director and Clerkship Director to
 - a. report results of clinical skills examinations to the student.
 - b. request that the Center release videos to the students for review
 - c. discuss students' performance with the students
7. The Director of the Clinical Skills Center will post the results of clinical skills examinations for the course and clerkship directors
8. Students must follow the standard procedure in case of absences

C. Third Year Clinical Skills Examination

All students must take and pass the clinical skills examination which is administered during the third year. Students must take the examination according to the schedule that is set by the College of Medicine. This is a consortium (regional medical schools) examination. Students who do not pass the examination will be placed in an enhancement program for clinical skills and will be required to retake and pass the examination prior to graduation.

D. Unscheduled Closure and Delayed Opening of the University

1. Years 1 and 2

Early Closure: If an examination is already in progress and an announcement is made that the university will close early then the examination may be fully administered according to the judgment of the chief proctor. If not, the examination will be rescheduled.

Delayed Opening of the University: When there is a delayed opening of the university and an examination is scheduled during the delayed period, students and faculty shall expect that the examination will be administered the same day whenever possible, but no later than two hours following the opening of the university. The examination must be administered within 3 school days following the opening of the university. The unit leader/coordinator shall coordinate with the Senior Associate Dean for Academic Affairs the date, time and location for administration of the examination. The unit leader/coordinator or designee shall:

- a) Post signs announcing the date, time, and location for the administration of the examination. One of the postings shall be outside the room where the examination was originally scheduled to be administered.
- b) Whenever possible, make an oral announcement to the class.
- c) Arrange for an email to be sent to the faculty proctors and students

Closure of the University on one or more days: When there is an unscheduled closure of the university for one or more days and an examination is scheduled during the closed period, students and faculty shall expect that the examination will be administered the first day of the reopening of the university, but no later than two hours following the reopening whenever possible. The examination must be administered within 3 school days following the reopening of the university. The unit leader/coordinator shall coordinate with the Senior Associate Dean for Academic Affairs the date, time and location for administration of the examination. The unit leader or designee shall

- a) Whenever possible post signs announcing the date, time, and location for the administration of the examination. One of the postings shall be outside the room where the examination was originally scheduled to be administered.
- b) Whenever possible make an oral announcement to the class. These examinations may be scheduled during times other than regular scheduled class time, but not on weekends and holidays.
- c) Arrange for an email to be sent to the faculty proctors and students

2. Years 3 and 4

Early Closure of the University: If an examination is already in progress and an announcement is made that the university will close early then the examination may be fully administered according to the judgment of the chief proctor.

Delayed Opening of the University: If there is a delayed opening of the university for one or more days and an examination is scheduled during the delayed period, students and faculty shall expect that the examination will be administered the same day but no earlier than two hours following the opening of the university. Students on clinical rotations shall contact the department, the clerkship director for the respective clerkship or the Office of the Senior Associate Dean for Academic Affairs for the rescheduled date, time, and location for administration of the examination. The examination must be administered within 3 days following the delay. The clerkship director or designee shall post signs announcing the date, time, and location for the administration of the examination. One of the postings shall be outside the room where the examination was originally scheduled to be administered.

Closure of the University for One or More Days: If there is an unscheduled closure of the university for one or more days and an examination is scheduled during the closed period, students on clinical rotations shall contact the department or the clerkship director for the respective clerkship for the rescheduled date, time, and location for administration of the examination. The examination shall be administered no earlier than 24 hours but no later than 3 days following the reopening of the university. The clerkship director shall coordinate with the Associate Dean for Academic Affairs the date, time and location for administration of the examination. The clerkship director or designee shall post signs announcing the date, time, and location for the administration of the examination. One of the postings shall be outside the office of the clerkship coordinator (secretary).

E. Reexaminations

1. Years 1 and 2

- a. **Purpose:** The purpose of the reexamination is to give students who fail one or two units a second opportunity to demonstrate their satisfactory understanding of the information taught in the unit(s). It is not intended to provide time for remediation in knowledge or to increase a passing score to a higher level.

b. Definition of terms for this policy

- i. **Satisfactory grade** refers to a passing grade (H or S) at the end of the unit; or passing grade following reexamination, if eligible for reexamination
- ii. **Conditional unsatisfactory grade** refers to the unsatisfactory grade before reexamination, if eligible for reexamination.
- iii. **Unsatisfactory grade or transcript unsatisfactory grade** refers to any one of the following:
 - a) Failing grade on reexamination

- b) Failing grade when a student is ineligible to sit for reexamination
- c) Conditional unsatisfactory grade when the student is eligible but fails to sit for the reexamination.

Eligibility: Subject to the conditions set forth in this policy, any student who receives one (1) or two (2) conditional unsatisfactory grade(s) in one semester may be offered reexamination(s) for the unit(s) providing the student:

1. sat for all the examinations and quizzes in the unit(s)
 2. satisfactorily completed all other requirements in the unit(s)
 3. attend laboratory and small group sessions as scheduled
 4. obtain a minimum score of 65% on laboratory examination(s)
- c. A student is eligible to sit for no more than two (2) reexaminations each semester (exclusive of Physical Diagnosis). The Senior Associate Dean for Academic Affairs shall determine the eligibility of students for reexaminations, and each student must obtain written permission from the said Senior Associate Dean in order to sit for any reexamination.
 - d. A student who fails three (3) or four (4) units during the semester must discuss with the Senior Associate Dean for Academic Affairs to determine which failing grades will be designated as conditional unsatisfactory. If eligible to sit for reexaminations, the student shall make the final selection for the conditional unsatisfactory grades. The remaining grade(s) shall be deemed transcript unsatisfactory. The student must inform the Senior Associate Dean for Academic Affairs in writing of his/her decision. It is the responsibility of the students to initiate the discussion.
 - e. A student who accumulates three (3) or more transcript unsatisfactory grades is not eligible for reexaminations or for the Summer Directed Study Program (SDSP) and will be dismissed.
 - f. **Responsibility:** It is the responsibility of the student to obtain the written permission to sit for reexamination(s) from the Senior Associate Dean for Academic Affairs. Any student who sits for any reexamination without such written permission shall be awarded an unsatisfactory grade for the unit, even if the student obtains a passing score on the reexamination.
 - g. **Schedule for reexaminations:** The reexaminations shall be offered only once each semester. The reexaminations shall be administered according to the following schedule and may include laboratory reexaminations:
 - 1) First week of January for units offered and completed during the fall semester for freshman and sophomore medical students
 - 2) Approximately 10 days after the last examination at the end of the spring semester for freshman medical students for units offered and completed during the spring semester

- 3) Approximately 7 days after the last examination at the end of the spring semester for sophomore medical students for units offered and completed during the spring semester
 - 4) The dates and time for the reexaminations as shown in schedules booklet may be changed by mutual agreement between the students who are eligible for the reexamination and the Senior Associate Dean for Academic Affairs
- h. **Grades for reexaminations:** There shall be no “make up” reexamination. A student who is eligible to sit for a re-examination must pass the reexamination in order to receive a satisfactory grade for the unit. The maximum score that can be awarded for the unit shall be the minimum passing score (70 S). A student who fails the reexamination fails the unit.
- i. **Physical Diagnosis & reexamination:** The final grades for Physical Diagnosis are usually not available in time for reexaminations. Therefore, Physical Diagnosis shall not be included in the maximum of two (2) conditional unsatisfactory grades. Remediation for this course shall be determined by the course coordinator and the department of medicine. Remediation must be completed no later than the same date of completion for the SDSF for sophomore medical students.

2. Years 3 and 4

A third or fourth student may be offered one reexamination in each clinical course in which he/she obtains an unsatisfactory examination grade. Any student who fails the written examination at the end of the clinical course must sit for the examination (reexamination) at the next offering of the examination in that clinical course unless he/she obtains a written excuse from the Associate Dean for Student Affairs & Admissions. A student who fails to sit for the reexamination in a timely manner as noted herein will be awarded 0 for the examination. The maximum examination grade that can be assigned for a reexamination shall be the minimum passing score (70 –S). A student who fails the reexamination fails the clinical course/clerkship.

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SECTION XVII

UNITED STATES MEDICAL LICENSING EXAMINATIONS (USMLE)

A. STEP 1

1. All students must pass Step 1 of the USMLE prior to starting the junior year.
2. No student may begin the junior year after November.
3. Students will not be permitted to enter any rotation that is in progress, or take any elective for senior year credit while waiting for the results of the USMLE Step 1.
4. Students will be considered as not making satisfactory academic progress (SAP) if the student is required to attend the Summer Directed Study Program (SDSP) or if a passing score for USMLE Step 1 is not received on or before the second Wednesday in July – even if the student is the SDSP.
5. Federal financial aid will be disbursed only after a passing score for USMLE Step 1 is received by the College of Medicine. The date for distribution of the financial aid will be determined by the university.

6. Students not in SDSP

- a. **First Attempt:** Students who successfully completed the sophomore medical curriculum and are not in the SDSP must sit for the USMLE Step 1 for the first time so that the results will be available no later than the second Wednesday in July. Students who fail to meet this deadline but subsequently pass the examination will not be permitted to rotate on any clerkship until the spring semester which begins in November; or take any elective until after successfully completing the junior year. Financial aid eligibility, health insurance, and disability income benefits will be affected.

Second Attempt: A student who does not pass the USMLE Step 1 on the first attempt must sit for the examination for the second time no later than the second Tuesday in August so she/he can begin a clerkship in September providing a passing score for the examination is received no later than the second Wednesday in September.

Students who fail the USMLE Step 1 on their first attempt must sit for the examination for the second time no later than the second Tuesday in October in order to begin a third year rotation in November. Students who fail to meet this deadline will not be permitted to rotate on any clerkship or elective for the fall or the spring semester and financial aid eligibility, health insurance, and disability income benefits will be affected.

7. Students in SDSP

- a. **First Attempt:** Students who were in the SDSP and pass all courses will be permitted to begin the third year in July if passing scores for USMLE Step 1 are received no later than the second Wednesday in July.

A student who was in the SDSP must sit for the examination no later than the second Tuesday in August so he/she can begin a clerkship in September providing a passing score for the examination is received no later than the second Wednesday in September

Students who do not meet this August deadline must sit for the examination for the first time no later than the second Tuesday in October in order to begin a clinical rotation in the spring semester which begins in November. Financial aid eligibility and health insurance & disability income benefits will be affected. Students who fail to meet this October deadline will not be permitted to rotate on any clerkship or elective for the fall or the spring semester and financial aid eligibility, health insurance, and disability income benefits will be affected.

- b. **Second Attempt:** A student who fails the USMLE Step 1 on the first attempt must sit for the examination for the second time no later than the second Tuesday in October in order to begin a clinical rotation in November. Student who fails to meet this deadline will not be permitted to rotate on any clerkship or elective for the academic year, financial aid eligibility, and health insurance & disability income benefits will be affected.

8. All Students

Third Attempt: Any student who fails the USMLE Step 1 twice must enroll and complete a well-recognized review course before sitting for the examination for the third and final time. Participation in the review course must be approved in writing by the Senior Associate Dean for Academic Affairs. The student must write a letter or send an email to the Senior Associate Dean for Academic Affairs identifying the specific review course in which he or she plans to enroll. The letter must include the name and contact information for the course director and must be accompanied by a copy of the course description. Students will be notified in writing if the course is approved. The Senior Associate Dean for Academic Affairs may waive the requirement for the student to provide a copy of the course description if such course has been previously (within the past 2 years) approved, but written approval to take the course is required. Students must obtain written approval from the Senior Associate Dean for Academic Affairs prior to enrolling in any review program(s).

Students may appeal to the Dean requesting that the College subsidize the cost of the required review course selected. The letter should provide the name of

the course, the tuition cost, the amount of subsidy requested, and a contact name and number for the course. Any subsidy approved will be submitted directly to the program.

International students (F-1 VISA) who are required to take the review course are advised to consult with the Office of International Students at Howard University.

Students who do not pass the USMLE Step 1 on the third attempt will be dismissed from the College of Medicine.

9. Absolute deadline for receipt of passing score and taking the examination

Students who fail to have a passing score for USMLE Step 1 reported to the College of Medicine by the second Wednesday in July of the year following the one in which they successfully completed the sophomore year may be dismissed.

10. Additional Guidelines for Students for USMLE Step 1

- a. In order to be eligible to sit for the USMLE, students must be enrolled in the College of Medicine. Students who do not sit for the USMLE Step 1 on or before the third Tuesday in June and students who fail the USMLE Step 1 must be registered in the College of Medicine for a one (1) credit hour self-study course which shall not be credited toward the graduation requirements.
- b. Students may elect to request a leave of absence (LOA) or withdraw from the College of Medicine for the fall and or the spring semester. If the decision is made to withdraw, a withdrawal form must be completed in the Office of Academic Affairs. The student withdrawal procedures contained in the “University and College of Medicine Policies Affecting Students” booklet must be followed. Students who withdraw or who have approved LOA will not be eligible for financial aid, health services, library privileges, or any other privilege and benefit reserved for registered students. Students who withdraw from the University and wish to reenroll must apply for readmission. The procedure for application for reenrollment is detailed elsewhere in this manual.
- c. Students who take a leave of absence (LOA) after completing the second year must register as a student in the College of Medicine for a one credit hour of self-study in preparation for the USMLE in order to be certified by the College of Medicine as a registered student to be eligible to sit for the USMLE. The registration and sitting for the examination must be in the same semester.
- d. Students who withdraw from the university after completing the second year must apply for readmission, and if readmitted must register as a student in the College of Medicine for a one credit hour of self-study in

preparation for the USMLE in order to be certified by the College of Medicine as a registered student to be eligible to sit for the USMLE. The registration and sitting for the examination must be in the same semester.

B. USMLE STEP 2

1. Step 2 Clinical Knowledge (CK) and Clinical Skills (CS)

- a) Students must pass the USMLE Step 2 CK and CS in order to graduate.
- b) Passing score/grade for USMLE Step 2 CK and CS must be received by the College of Medicine no later 9:00 a.m. on the day the Rank Order List (ROL) closes. If passing scores are not received by this deadline the student will be withdrawn from the National Residency Matching Program (NRMP). This applies to all students, regardless of when they completed the third year or started the fourth year. The date that the ROL closes can be found on the NRMP website, and the reporting schedule for the USMLE Step 2 CS can be found on the USMLE website. Results of the USMLE Step 2 CK are generally available within 4-5 weeks after sitting for the examination.
- c) **First Attempt:** Students are encouraged to take the USMLE Step 2 CK and CS for the first time within four weeks following completion of all third year curriculum requirements. Students who complete the junior year after September may therefore have to sit for the USMLE Step 2 CK and CS shortly after completing the third year or they may not participate in the NRMP, because the results may not be reported in time to meet the deadline shown in # b above.
- d) **Second Attempt:** Students who fail the USMLE CK and or CS on the first attempt should retake the examination(s) for the second time within eight (8) weeks after the results for the first sitting are available. Students will not be permitted to participate in the NRMP that academic year unless passing scores/grades for the USMLE Step 2 CK and CS are received in the Howard University College of Medicine no later 9:00 a.m. on the day the Rank Order List (ROL) closes.
- e) **Third Attempt:** Students who do not pass the USMLE Step 2 CK and or CS on the second attempt will not be permitted to participate in the NRMP for that academic year. They must satisfactorily complete a program or programs of review(s) before sitting for the examination(s) for the third and final time. The student must write a letter to the Senior Associate Dean for Academic Affairs identifying the review course in which he or she plans to enroll. The letter must include the name and telephone number of the course director and be accompanied by a copy of the course description. Students will be notified in writing if the course is approved. The Senior Associate Dean for Academic Affairs may waive the requirement for the student to provide a copy of the course description if such course has been previously (within the past 2 years) approved.

International students who are required to take the review course are advised to consult with the Office of International Students at Howard University. The students must obtain written approval from the Senior Associate Dean for Academic Affairs prior to enrolling in the review program(s). Passing grades for USMLE Step 2 CK and CS must be received in the College of Medicine no later than one year after successfully completing the fourth year curriculum. These students will be permitted to participate in the NRMP only if passing scores/grades for the USMLE Step 2 CK and CS are received at the College of Medicine no later 9:00 a.m. on the day the Rank Order List (ROL) closes in the year following the one in which they completed the fourth year curriculum.

Students may appeal to the Dean requesting that the College subsidize the cost of the review course selected. The letter should provide the name of the course, the tuition cost, the amount of subsidy requested, and a contact name and number for the course. Any subsidy approved will be submitted directly to the program.

International students (F-1 VISA) who are required to take the review course are advised to consult with the Office of International Students at Howard University.

Students who do not pass the USMLE Step 2 CK or Step 2 CS on the third attempt will be dismissed from the College of Medicine.

- f) **Absolute Deadline for Receipt of Passing Score:** Students who do not have passing score/grade reported to the College of Medicine for USMLE Step 2 CK and or USMLE Step 2 CS within one year of the year following the one in which they successfully completed the fourth year curriculum may be dismissed.
- g) In order to be eligible to sit for the USMLE, students must be enrolled in the College of Medicine. Students who completed the second year and will sit for the USMLE Step 1 during a subsequent semester must be registered in the College of Medicine for a one (1) credit hour self-study course which shall not be credited toward the graduation requirements. Students who completed the curriculum in one semester and will sit for the USMLE Step 2 CK and or CS in a subsequent semester must be registered in the College of Medicine for a one (1) credit hour self-study course which shall not be credited toward the graduation requirements.

C. FAILURE OF USMLE STEP 1 or STEP 2 THREE TIMES

A student who fails USMLE Step 1 or USMLE Step 2 CK or USMLE Step 2 CS three times will be dismissed from the College of Medicine and is not eligible for readmission to the College of Medicine

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SECTION XVIII

SATISFACTORY ACADEMIC PROGRESS

Students who pass all courses, clerkships, electives, and the USMLE on the normal schedule shall be considered to be making Satisfactory Academic Progress.

A student will be considered not to be making Satisfactory Academic Progress (SAP) if she/he

1. is required to attend the Summer Directed Study Program (SDSP) at the end of the first year or at the end of the second year
2. fails to have a passing score for USMLE Step 1 reported to the College of Medicine on or before the second Wednesday in July of the year in which the student completed the second year
3. fails to satisfactorily complete all third year clerkships and courses within twelve (12) months after starting the third year
4. fails two or more clerkships and or electives during the third or fourth year
5. fails to have passing score/grade for USMLE Step 2 CK and CS reported to the College of Medicine on or before fourteen (14) days prior to graduation

The College of Medicine's Office of Academic Affairs will immediately notify the Office of Financial Aid (Main Office and College of Medicine Office) of all first and second year students who are required to attend the SDSP or who have three or more unsatisfactory grades or third and fourth students with two or more failed clerkship grades. NOTE: This notification shall be made even if the student is appealing one or more grades.

The Office of Financial Aid will immediately update the student's SAP status in Banner and reverse any aid awarded or disbursed for the current or subsequent semester if necessary. For example, a student enrolled in the Spring semester for whom a dismissal notification based on the Fall semester grades is received in January by the Office of Financial Aid will have their Spring semester aid reversed. Students who choose to appeal to the Dean will also have to complete and submit a Satisfactory Academic Progress (SAP) Appeal to the Office of Financial Aid (main office). Students whose appeals to the Dean AND the Office of Financial Aid are approved will have their aid restored.

Students whose appeals to the Dean are denied will be administratively withdrawn by the Office of the Academic Affairs via a memorandum to the Office of the Provost and the Office of the Registrar, with a copy submitted to the Office of Financial Aid (Main Office and College of Medicine Office). No student who is academically dismissed should complete their own Total Withdrawal form at any time.

Students who have not made SAP must meet with the Assistant Dean for Medical Education or the Associate Dean for Academic Affairs and jointly develop a SAP Academic plan. The plan will become part of the student's record. The student may also

file a SAP appeal if she/he will be applying for financial aid. The student is advised to meet with the Financial Aid Manager to discuss the SAP appeal process.

Students who are at risk for not making SAP, e.g. failure or low passing grades on examinations, are strongly encouraged to participate in an enhancement program offered by the Office of Medical Education. Some students may be required to participate in an enhancement program.

Note: Grade point average (GPA) is not issued for students in the College of Medicine. See later section on grading.

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SECTION XIX

ACADEMIC ENHANCEMENT PROGRAMS

A. Student Academic Support Program (SASP)

The Office of Medical Education (OME), in a series of workshops, presents problem solving, critical thinking, and assessment of learning styles strategies for concept mapping to medical students during freshman orientation week and during the early part of the first semester of the first year. Individual sessions are also offered throughout the school year. While academic support is offered to all students, students who are identified as requiring academic reinforcement are referred to the OME for academic counseling and or tutorial support.

B. Medical Student Taught Academic Review (MedSTAR)

The MedSTAR program has tutors who are selected on the basis of their academic performance, scholastic standing, and personal traits to provide assistance to students who require support in handling course content. This program is designed primarily for students in the first two years of study.

The clerkship directors in conjunction with the staff in the OME will devise individual academic enhancement plans for students who encounter academic challenges during the last two academic years in medical school. Referral can be made by any administrator, any faculty member, or by the student himself/herself.

C. Summer Directed Study Program (SDSP)

The SDSP is designed to enhance preparation for further medical study and increase retention of students enrolled in the College of Medicine. A student may be eligible to attend the SDSP if he/she has no more than two (2) transcript unsatisfactory grades during the freshman year or during the sophomore year. Attendance at all sessions in the SDSP is required and will be recorded for those students to whom the opportunity to enroll in the program is granted by the Committee on Student Promotions and Graduation. A student who fails to attend scheduled classes may be dismissed from the College of Medicine. Unexcused absences will not be permitted (see guidelines for excused absence). Only one examination will be offered for each unit in the SDSP. However, quizzes may be administered during the program and the results may be used to compute the final grade for the unit. The maximum unit grade that will be assigned after obtaining a satisfactory grade in the SDSP is 70-S.

Students who are not repeating an academic year and who earned one or two final (transcript) unsatisfactory grade(s) may continue in the academic year, may be offered the opportunity to attend the Summer Directed Study Program (SDSP), and at the conclusion of the SDSP may be provided an examination in the one or two previously failed unit(s) for obtaining satisfactory grade(s). If a student fails to obtain satisfactory grade(s) in the unit(s) taken in the SDSP, he/she may be dismissed from the College of Medicine. Students who are repeating an academic year are not eligible for the SDSP.

D. Reexaminations

These are described earlier in this manual.

E. Repeat clerkship or Elective

A third or fourth year student who is not repeating an academic year may be eligible to repeat a clerkship or elective. A satisfactory grade must be obtained by successfully repeating all components of the clerkship or elective and passing the written examination and quizzes, even if he/she previously passed the examination. The maximum grade assigned in this case for the clerkship or elective is 70-S. A student shall not repeat a clerkship or elective or part of a clerkship or elective during the same period that he/she is rotating on another clerkship or elective. A student who fails a reexamination or fails the clinical component of a clerkship or elective will be awarded an unsatisfactory grade for the clerkship or elective.

F. Repeat an Academic Year

1. First and second year: A student who is dismissed from the College of Medicine may be offered the opportunity to repeat the first or second year. Attendance at all instructional sessions is required. The student may also be required to attend additional academic reinforcement programs. A student, who fails to attend all instructional sessions, unless officially excused, will be subject to disciplinary action which could include dismissal from the College of Medicine. The procedure to apply for readmission is detailed elsewhere in this manual.
2. Third and fourth year: A student who fails two or more clerkships or electives during the same academic year, or who fails a clerkship or elective that she/he is repeating may be offered the opportunity to repeat the entire academic year. The student may also be offered the opportunity to restart the academic year before completing that academic year in which she/he incurred the deficiencies.

G. Change in Rotation Schedule (Clinical Years)

A student who fails one or more clerkship and/or elective end-of-rotation examination(s) may request the Senior Associate Dean for Academic Affairs adjust his/her rotation schedule. The Senior Associate Dean for Academic Affairs may also recommend a change in the student's rotation schedule. Such adjustments may include a leave of absence from the College of Medicine.

H. Personal Challenges

The university operates a program of counseling to support students who have personal challenges that may affect their well-being or academic performance. The counseling is strictly confidential and the counselors have no role in teaching or evaluating medical students.

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SECTION XX

REPEATING STUDENTS

- A. A repeating student is one who:
 - 1) has completed an academic year is dismissed from the College of Medicine and is readmitted and required to repeat an academic year OR
 - 2) has completed at least one course or clerkship and who withdraws with one or more transcript or conditional unsatisfactory grade(s) before completion of the semester or completion of the entire academic year and is readmitted to the College of Medicine to repeat that academic year OR
 - 3) is required to restart an academic year with or without withdrawal or dismissal from the College of Medicine or without completing the entire academic year.
- B. If a student is allowed to repeat or restart any academic year, he/she must satisfactorily complete all components of all units/clerkships/courses/electives in that academic year, including those already passed and those that he/she may not have previously taken.
- C. A repeating student who fails any unit/course/clerkship/elective during the repeat year will be dismissed from the College of Medicine. This includes those units or courses or clerkships that he/she may have taken and failed OR not have taken previously OR may have taken previously and passed. A repeating student who fails any unit, course, clerkship or elective is not eligible for the Summer Directed Study Program.
- D. A student who repeats or restarts an academic year will earn the grades that he/she receives during the repeat/restart year. The grades that the student earned during the prior year shall remain on the transcript. Students who exhibit unprofessional behavior or ethical misconduct may be denied passing grades and or promotion.
- E. A student may be permitted to repeat or restart the same academic year only once.
- F. A student who is dismissed because she/he fails one or more course or clerkship during a repeat or restart year will be dismissed and is not eligible for readmission to the College of Medicine.

Approved by the Faculty in the College of Medicine June 28, 2006

Revised July 2013

Revised July 2014

SECTION XXI

ABSENCES

A. Excused Absences from Examinations, Classes, and Rotations

1. Students may be excused from examinations, classes or rotations for reasons of illness or injury. Absences due to serious illness, serious injury, or death in the immediate family may also be excused.
2. Department chairs, clerkship directors and unit leaders/coordinators will accept only excuses from the Dean's Office, usually through the Office of Associate Dean for Student Affairs and Admissions
3. Illnesses or injuries that may result in missed examinations must be reported to the Dean's Office, departments or unit leaders/course directors concerned immediately. The absence must be reported by the student before the start of the scheduled examination unless the accident or injury prevents the student from filing the report.
4. Illnesses or injury resulting in a missed examination, classes or rotations must be certified by a physician
5. Problems other than those stated above, which result in a missed session, may be reported to the Dean's Office for consideration. Such absences will not be excused however, except in cases of extreme hardship. All such cases will be handled on an individual basis.

B Procedures Governing Excused Absences and Make-up Examinations

1. Basic Science Courses

It is expected that all student will take all scheduled examinations on time. If a student finds that he/she must be absent from an examination or quiz, that student must inform the Associate Dean for Student Affairs and Admissions that he/she will need an excuse from the examination prior to the start of the examination.

An exception to the time limitation above will be considered only when the student

- a. is involved in a serious accident or
- b. has an acute illness that would prevent him/her from contacting the Office of the Dean, or
- c. has a sudden death in the immediate family

All telephone requests must be followed by written requests, along with documentation, for excuses from examination(s). These written requests must detail the reason(s) that the examination was missed, and should state the department/unit, date(s), and time(s) of the missed examination(s). In the case of illness or injury, the student's written request must

be accompanied, or followed, by a note from a physician who supports the request for an excuse during the date(s) and time(s) of the missed examination(s). The student's written request must be received in the Office of the Dean upon the student's return to school, or the document may be sent by mail prior to the return to school. The physician's note must be received by the Office of the Dean on or before the time the student returns to school. This is required in all cases, but is especially critical when a student has been ill enough to require medical clearance for return to school.

All make-up examinations shall be given within 72 hours (freshman) and 96 hours (sophomore) of the scheduled examination(s), but only if a written recommendation from the Dean or his/her designee to administer such an examination is received by the unit leader/coordinator. A recommendation from the Dean or his/her designee not to administer such an examination will be honored. Any request for waiver of this 72 or 96 hour rule will be considered on a case-by-case basis upon recommendation from the Dean or his/her designee. Any student who receives an excuse from the Dean or his/her designee is responsible for consulting directly with the department/unit leader in question concerning the date, time and location of the makeup examination. The Dean's Office neither bears responsibility for arranging or scheduling makeup examinations, nor for notifying an excused student as to the date, time or location of the makeup examination.

If a student sits for a make-up examination after the 72 or 96 hours of the missed examination, due to negligence on the part of the student, the examination may be graded (at the discretion of the faculty, the Senior Associate Dean for Academic Affairs and the Associate Dean for Student Affairs and Admissions) on a pass/fail basis with the only passing grade set at 70-S. Other currently existing rules and regulations on examinations will continue to be applicable. If an excuse is not granted, the score for the missed examination will be zero.

2. Clinical Science Courses

Repeat and makeup examinations for clinical clerkships are administered at designated times during the academic year. Such make up examinations must be taken the very next time the examination is administered (e.g., a missed or failed November examination in Internal Medicine must be taken in March). Requests for an excuse due to illness or injury must be submitted in accordance with the procedures for basic science examinations. Any other request for an excused absence may be considered, but excuses will be granted only in cases of extreme hardship. These written requests must be received in the Office of the Dean (through the Associate Dean for Student Affairs and Admissions) no later than 5 p.m. on the date of the missed examination.

A student who fails one or more clerkship and/or elective end-of-rotation examination(s) may request the Senior Associate Dean for Academic Affairs to adjust his/her rotation schedule. The Senior Associate Dean for Academic Affairs may also recommend a change in the student's rotation schedule. If an excuse is not granted, the score for the missed examination will be zero.

C. Unapproved absence from the College of Medicine

A student who is absent without written excuse from the Associate Dean for Student Affairs and Admission from classes or clinical rotations for a period of two weeks or more may be considered to have withdrawn from the College of Medicine and is eligible to apply for readmission.

Updated July 2014

SECTION XXII

WORK LOAD AND DUTY HOURS

Work Load for Years One and Two Students

Medical student workloads during the pre-clerkship phase of the curriculum shall be such that students' learning is not compromised while maintaining an appropriate level of engagement with faculty, patients and the clinical or simulated clinical environment.

Contact or Classroom time: The scheduled classroom time (lectures, TBL, SGL, and other required contact time with faculty) for first and second year students shall be limited to approximately 24 hours per week when averaged over the unit. This does not include the scheduled time for Medicine and Society Units 1 and 2 which requires contact with students on Tuesday afternoons; and Introduction to Clinical Medicine and Physical Diagnosis which requires contact with students (faculty, standardized patients, and real patients) for approximately 4 hours each week.

Assigned Activities Outside of Scheduled Classroom Time: It is estimated that each hour of lecture, TBL, or SGL require approximately two hours of students' preparation time; and each hour of laboratory time requires one hour of students' preparation time. Students will independently study the answers to the learning objectives that are provided the start of each course. These outside classroom time may include assigned reading, cases for classroom discussion, or online modules.

Monitoring: The class time schedule for each course shall be approved by the Curriculum prior to the start of the academic year or least prior to start of each semester. In addition the curriculum subcommittee for years one and two and the curriculum committee shall monitor compliance through formal evaluations by students and by reports of students on the curriculum committee.

Effectiveness: The effectiveness shall be based on surveys of students and faculty satisfaction, student performance on internal examinations, students performance on NBME customized examinations, students performance on the USMLE Step 1, and students well-being e.g. sufficient time for rest and relaxation (survey of students)
May 14, 2015

Duty Hours for Years Three and Four Students

During the course of some required clerkships and some electives medical students are required to be on duty (on call) after the normal duty hours. Student duty hours shall be as follows:

1. Start and end of tour of duty each day shall be set by each clinical department
2. Duty hours shall not exceed those for residents and shall not exceed 80 hours per week, inclusive of all in-house call activities.
3. Students must be provided with 1 day in 7 free from all structured educational and clinical responsibilities, inclusive of call.

4. Adequate time for rest and personal activities shall be provided. This should consist of at least 10 hour time-off period between daily duty and after hours in-house call
5. In-house call must occur no more frequently than every third night.
6. Students shall not be on duty for more than 24 hours continuously.
7. Students' schedules shall be arranged such that they can attend all required educational sessions.
8. It is the responsibility of each clerkship director or course coordinator to monitor the duty hours of the students and periodically submit a report to the Senior Associate Dean for Academic Affairs.

Approved by the faculty of the College of Medicine April 11, 2005

Updated July 2012

Updated July 2015

SECTION XXIII

PROMOTIONS, HONORS & OATHS, AND GRADUATION

A. Promotion and Graduation

1. Students must satisfactorily complete all requirements of the College of Medicine for each academic year in order to be promoted to the next class or to be recommended for graduation. The requirements for promotions and graduation include satisfactory completion of all course work including electives, clerkships, passing the USMLE Steps 1 and 2 (CK and CS), and demonstration of professionalism.
2. Notwithstanding the College's purpose to promote and to recommend for graduation all students admitted to the College of Medicine, the faculty through its Executive Committee and/or Committee on Student Promotions and Graduation, will exercise its responsibility to deny student status, promotion, or graduation to a student who fails to meet academic standards, who is ill and whose illness prevents effective study or practice, who grossly neglects his/her academic or clinical duties, who violates standards of honesty, or who clearly demonstrates a disregard for professional standards of conduct.

B. Freshman and Sophomore Years

1. The Committee on Student Promotions and Graduation will act upon students' performance at the end of the fall semester, at the end of each academic year, and at the end of the Summer Directed Study Program (SDSP). The following are required for promotion:
 - a. Satisfactory completion of the freshman year curriculum is required for promotion to the sophomore year
 - b. Satisfactory completion of the sophomore year curriculum and passing the USMLE Step 1 are required for promotion to the junior year
 - c. Students, who exhibit unprofessional behaviors may be promoted to the sophomore or junior year but will be placed in a remediation program; may be denied promotion; or may be dismissed from the College of Medicine.
2. One or Two Unsatisfactory Grade(s):

Students who have one or two unsatisfactory grades may be placed in an academic reinforcement program in a Summer Directed Study Program (SDSP), and may be promoted to the next class providing they successfully complete the program and meet all other requirements for promotion.
3. Three or More Unsatisfactory Grades:

A student who has final (transcript) unsatisfactory grades in three or more units during either the freshman or sophomore year is not eligible for the SDSP (described earlier in this manual) or for promotion and will be dismissed from the College of Medicine.

4. A student who repeats or restarts a year will earn the grades that he/she receives during the repeat year. The grades that the student earned during the prior year shall remain on the transcript. A repeating student who fails any unit or course during the repeat year will be dismissed from the College of Medicine. This includes those units or courses that he/she may not have taken previously OR may have taken previously and passed. A repeating student who fails any unit, course, clerkship or elective is not eligible for the SDSP.

C. Junior year

1. The Committee on Student Promotions and Graduation will act upon students' performance at the end of the fall semester, at the end of each academic year, and at other times as necessary. The following are required for promotion to the fourth year:

- a. Students must earn grades of satisfactory or better in all clerkships/electives/courses
- b. Students must complete all third year clerkships and sat for all third year examinations
- c. Students must satisfactorily complete the course on Introduction to Health Care Ethics/Jurisprudence
- d. Students who have satisfactorily completed all the clinical requirements for the junior year and sat for all examinations for the junior year, but are waiting for the result(s) for the examination(s), may be permitted to begin the senior year curriculum. If a student fails a clerkship, his/her schedule will be adjusted to allow the earliest possible repeat of the clerkship before resuming the senior year rotations.
- e. Students who exhibit unprofessional behaviors may be promoted to the senior year but placed in a remediation program, may be denied promotion, or may be dismissed from the College of Medicine

2. Two or More Unsatisfactory Grades:

Any student who fails two clerkships/courses/electives in the same academic year or who fails a clerkship/course/elective that he/she is repeating will either be dismissed from the College of Medicine, or be required to restart or repeat the academic year. This includes the course on Introduction to Ethics/Jurisprudence. The student must take all components of all clerkships including those that the student may have passed and the course on Introduction to Ethics/Jurisprudence. A student who is required to repeat or restart the academic year is also required to retake the end-of-third year examination (clinical skills examination) at Howard University, even if she/he passed the USMLE Step 2 Clinical Skills examination. A student who repeats or restarts a year will earn the grades that he/she receives during the repeat or restart year. The grades that the student earned during the prior year shall remain on the transcript. A repeating student who fails any unit/course/clerkship/elective during the repeat year will be dismissed from the College of Medicine. This includes those clerkships that he/she may not have taken previously OR may have taken previously and passed.

D. Senior Year/Graduation

1. The Committee on Student Promotions and Graduation will act upon each student's

performance at the end of the fall semester, at the end of each academic year, and at other times as necessary.

2. Required rotations and Electives: Students must take all rotations and at the sites for which they are approved. Students who change their rotations (specialty, subspecialty, dates, or site) will not receive credit for that rotation, will not have liability coverage for that rotation, and will be required to take the original rotation.

Two or More Unsatisfactory Grades:

Any student who fails two clerkships/courses/electives in the same academic year or who fails a clerkship/course/elective that he/she is repeating will either be dismissed from the College of Medicine or required to repeat or restart the academic year. The student must take all components of all clerkships/electives including those that the student may have passed. A student who repeats or restart a year will earn the grades that he/she receives during the repeat or restart year. The grades that the student earned during the prior year shall remain on the transcript. A repeating student who fails any unit/course/clerkship/elective during the repeat year will be dismissed from the College of Medicine. This includes those clerkships that he/she may not have taken previously OR may have taken previously and passed. No student will be recommended for graduation who has not satisfactorily completed all requirements, including electives for the senior year and passing USMLE Step 2 CK and CS.

E. Honors and Oath

All students who are on schedule to satisfactorily complete all requirements for graduation in May, June, or December of the same calendar year are permitted to participate in the Honors and Oath program in May. However, students may be denied permission to participate in the program for cause.

F. Commencement

Only those students who satisfied all requirements for graduation are permitted to participate in the Commencement program.

G. Graduation

In order to be eligible for recommendation to the faculty (who will recommend to the President of the University) for graduation, the student must satisfy all of the following:

- 1) Satisfactorily complete all four years of the year curriculum
- 2) Pass USMLE Step 1 (a prerequisite for promotion to the third year)
- 3) Pass the consortium clinical skills examination
- 4) Pass USMLE Step 2 Clinical Knowledge (HUCM must receive passing score at least 14 days prior to the graduation date)
- 5) Pass USMLE Step 2 Clinical Skills (HUCM must receive passing grade at least 14 days prior to the graduation date)
- 6) Demonstration of acceptable professional behavior, detailed elsewhere in this manual

Revised July 2013
Revised July 2014

SECTION XXIV

TIME LIMIT TO COMPLETE THE REQUIREMENTS FOR THE M.D. DEGREE

Students are expected to complete all requirements for the degree Doctor of Medicine within four years from initial matriculation. In recognition of the fact that some students may have specific challenges or reasons to complete the requirements in more than four years after initial matriculation, additional time will be permitted. The number of years, including approved leave of absences, from initial matriculation in the College of Medicine to graduation with the degree doctor of Medicine shall be:

- A. seven years for students who are not in a combined or dual degree program. The maximum number of years to complete either the first two years of the curriculum or the second two years of the curriculum shall be no more than four academic years. Approved leave of absences are included in the seven years
- B. seven years for students who are in the BS/M.D. program. The maximum number of years to complete either the first two years of the curriculum or the second two years of the curriculum shall be no more than four academic years. Approved leave of absences are included in the seven years. The seven years do not include the initial 2-3 years in the BS program in the College of Arts and Sciences. Approved leave of absences are included in the seven years
- C. eight years for students who are in the dual MBA/M.D. program. The maximum number of years to complete either the first two years of the curriculum or the second two years of the curriculum shall be no more than four academic years. Approved leave of absences are included in the eight years
- D. Ten years for students who are in the M.D./PhD program. The maximum number of years to complete either the first two years of the curriculum or the second two years of the curriculum shall be no more than four academic years. Approved leave of absences are included in the ten years

Revised July 2009

Revised July 2014

SECTION XXV

APPEALS

A. Preamble

The standards and procedures for the evaluation, advancement, and graduation of students, and for disciplinary action, are publicized for faculty members and students in the booklet "University and College of Medicine Policies Affecting Students". This publication is available on-line at www.med.howard.edu.

The Committee on Student Promotions and Graduation will act upon Student Performance and Promotions at the end of the fall semester, at the end of the academic year and at the end of SDSF in accordance with the "Policy on Student Promotions."

The College of Medicine will provide a fair and formal process for the faculty and administration to follow when taking any action that adversely affects the status of a student. The process will include timely notice, disclosure of the basis on which the action is taken, and an opportunity for the student to respond. The process will be consistent with the University-wide Student Grievance Procedures adopted by the Board of Trustees. In academic matters, students may appeal the decision in accord with the procedures that are provided herein. In disciplinary cases, appeal procedures are outlined in the "University System of Judiciaries and Code of Conduct".

A student's record will be available for review by the student, and the student will be given the opportunity to challenge the accuracy of that record. Students who wish to review their records must make an appointment in the Student Records Section of the Office of Academic Affairs. Student records are confidential and are made available to members of the faculty and administration on a need to know basis only, unless released by the student, or as otherwise dictated by laws governing confidentiality or by University-wide policy.

B. General Procedures for filing appeals

All appeals must be in the form of a letter that is signed by the student who is appealing and must indicate the nature of and reason(s) for the appeal. Appeals by verbal communication, emails or any form other than by a letter that is dated and signed by the student will not be accepted and will not be acted on. Appeals that are received after the deadline for filing the appeal will not be accepted and will not be acted on.

C. Appeal of Promotions Committee Decisions

Students registered in the College of Medicine may appeal any decision made by the Committee on Student Promotions and Graduation, such as dismissal or requirement to repeat an academic year. The student who is appealing must submit the appeal in the form of a letter that is dated and signed by the student. The letter must be received by the Dean of the College of Medicine within seven (7) days of the date of the letter informing the student of the Committee's decision. A copy of the letter of appeal must also be sent to the Senior Associate Dean for Academic Affairs.

The letter of appeal must outline the basis for the appeal. Supporting documents should also be submitted. The Dean will consign the student's appeal to the College of Medicine's Student Grievance Committee. The formal process as outlined in the University-wide "Student Grievance Procedures" will be followed. Attorneys are not permitted in the room during the hearing or deliberation. The Committee's decision will be sent to the Dean of the College of Medicine in the form of a recommendation. This recommendation should be submitted within approximately two weeks of the date of receipt of the student's appeal. The Dean will inform the student in writing of the decision, which may be based upon the Committee's recommendation or upon a modification of it. The Dean's decision should be postmarked not more than approximately 30 days after the date of receipt of the student's appeal. Alternatively, the student who is appealing may retrieve the written decision of the Dean directly from the office of the Dean. While the appeal is pending, the student may continue to attend classes or clerkships and may take scheduled examinations, if applicable. During the appeal process, the student shall register and pay the full tuition and all applicable fees for the semester during which the appeal is being adjudicated. If the student's appeal is denied, any refund of tuition and fees shall be according to the University's schedule for such refunds.

The decision of the Dean is final.

D. Appeal of a Grade or Other Evaluation

Students must be given the results of each examination, clerkship evaluation, written assignment, or other course requirement. Students must also be given a final grade for each course. The formula or criteria for determining the grade on each examination, clerkship evaluation, written assignment, or other course requirement must also be given to students, as must the basis for determining the final grade in each course. Ideally, the criteria for determining grades should be given to the students on or before the first day of each unit, course or clerkship.

Students registered in the College of Medicine may appeal the accuracy of a grade, or other evaluation, or the fairness of an examination, evaluation, or grading process or procedure. All letters of appeal must be dated and signed by the student who is filing the appeal and they must indicate the basis of the appeal.

- a. **The first line of appeal** is with the course coordinator, unit leader, unit coordinator or clerkship director who will consider the appeal in consultation with the course faculty. The letter of appeal must be in writing, dated and signed by the student who is appealing. The letter of appeal must be received by the course coordinator, unit leader, unit coordinator or clerkship director within seven (7) days after the grades or other evaluations for the course, unit or clerkship are available for students and must indicate the nature and reason(s) for the appeal.
- b. **The second line of appeal** is with the Senior Associate Dean for Academic Affairs. If the course coordinator, unit leader, unit coordinator or clerkship

director fails to act on a student's appeal within five days of receipt of the appeal, excluding Saturdays, Sundays and days when the College of Medicine is officially closed such as for a legal holiday or inclement weather (normal working days), or if the student disagrees with the decision made by the course coordinator, unit leader, unit coordinator or clerkship director, the student may appeal in writing to the Senior Associate Dean for Academic Affairs. This appeal must be received in writing by the Senior Associate Dean for Academic Affairs within seven (7) days after the appeal was filed with the unit leader/coordinator, course coordinator or clerkship director. The letter of appeal must be in writing, dated and signed by the student who is appealing and it must indicate the basis of the appeal. The Senior Associate Dean must attempt to resolve the matter in consultation with the Department Chair (whenever applicable), and/or the clerkship director, or course coordinator, or unit leader, or unit coordinator.

- c. **The final line of appeal** is with the Dean of the College of Medicine. If the Senior Associate Dean for Academic Affairs fails to act on a student's appeal within five normal working days from the date of receipt of the appeal from the student, or if the student disagrees with the decision of the Senior Associate Dean for Academic Affairs, the student may appeal in writing to the Dean of the College of Medicine. The letter of appeal must be in writing, dated and signed by the student who is appealing and must indicate the nature of and reason(s) for the appeal. The student may request a hearing with the Dean to discuss the appeal. A copy of the student's appeal to the Dean must be provided to the Senior Associate Dean for Academic Affairs. If the Dean is not able to resolve the student's grievance through mediation with the parties involved, then the appeal will be referred to the College of Medicine's Student Grievance Committee. The formal process as outlined in the University-wide "Student Grievance Procedures" will be followed. The Committee's decision is sent to the Dean of the College of Medicine in the form of a recommendation. The Dean will inform the student in writing of the decision, which may be based upon the Committee's recommendation or upon a modification of it. The Dean's decision shall be forwarded to the student approximately two (2) weeks following his/her receipt of the appeal from the student. The Senior Associate Dean for Academic Affairs will also be informed in writing of the decision and will be responsible for its implementation.

The decision of the Dean is final.

E. Appeal of Administrative Decisions Made by Associate and Assistant Deans

Decisions made by Associate and Assistant Deans regarding but not limited to such matters as excused absences and academic schedules may be appealed in writing to the Dean. The letter of appeal must be in writing, dated and signed by the student who is appealing and must indicate the nature of and reason(s) for the appeal. The student may request a meeting with the Dean to discuss the appeal. Such appeals must be received by the Dean within seven (7) days after the student receives the decision from the Assistant or Associate Dean. A copy of the appeal letter must be submitted by the student to the

Associate or Assistant Dean who made the decision. If the Dean is not able to resolve the student's grievance through mediation with the parties involved, then the appeal will be referred to the College of Medicine's Student Grievance Committee. The formal process as outlined in the University-wide "Academic Grievance Procedures" will be followed. The Committee's decision is sent to the Dean of the College of Medicine in the form of a recommendation. The Dean will inform the student and the Associate or Assistant Dean in writing of the decision, which may be based upon the Committee's recommendation or upon a modification of it.

The decision of the Dean is final.

F. Appeal of the Decision of the Honor Council

Decisions made by the Honor Council on violations of the Honor Code may be appealed in writing to the Dean. The letter of appeal must be in writing, dated and signed by the student who is appealing and must indicate the nature of and reason(s) for the appeal. The student may request a meeting with the Dean to discuss the appeal. Such appeals must be received by the Dean within seven (7) days after the student receives the decision from the Honor Council. A copy of the appeal letter must be submitted by the student to the Chair of the Honor Council and to the Senior Associate Dean for Academic Affairs. If the Dean is not able to resolve the student's grievance through mediation with the parties involved, then the appeal will be referred to the College of Medicine's Student Grievance Committee. The formal process as outlined in the University-wide "Academic Grievance Procedures" will be followed. The Committee's decision is sent to the Dean of the College of Medicine in the form of a recommendation. The Dean will inform the student and the Chair of the Honor Council in writing of the decision, which may be based upon the Committee's recommendation or upon a modification of it.

G. Challenge to questions and or answers to questions on examinations

Students may challenge questions and or answers to questions on any examination constructed and administered by the faculty in the College of Medicine by directly submitting such challenges to the unit leader/coordinator, clerkship/course director. The challenge must be submitted by the student in the form of a letter that is dated and signed by the student and must indicate the reason(s) for the challenge(s). No question or answer to any question can be challenged after seven (7) calendar days have elapsed from the date of the post-examination review or release of the grade for the examination whichever occurs earlier. The grades for all students who sat for an examination may be revised (increased or decreased) following the challenge(s) to question(s) and answer(s), even if the grades have been released.

Approved by the Faculty Senate on November 19, 1996

Updated July 2012

SECTION XXVI

ACADEMIC GRIEVANCE PROCEDURES

A. The Informal Procedure Process

1. A student who believes that he/she has been aggrieved must first attempt to seek an informal resolution with the other party involved in the dispute, e.g. grade dispute with instructor.
2. If the student is unable to resolve the dispute with the primary party of the dispute, then the student is advised to seek the intervention of his/her department chairperson or unit leader/clerkship director.
3. All disputes which are not resolved at the departmental level are then brought to the Dean's Office, where upon the Dean or his designee will seek to reach an informal resolution through mediation between the parties.
4. If the mediation at the Dean's level fails, then the student's grievance is consigned to the committee designated by the school/college to address student grievances herein referred to as the Student Grievance Committee.

B. The Formal Process

1. Student grievances which are consigned to the Student Grievance Committee must be specified in writing and given to the Dean or his designee.
2. A student's written statement, along with supportive evidence, constitutes a case document which will be submitted to each member of the committee.
3. The second party to dispute is also requested to provide the Office of the Dean with his or her account of the matter in dispute, which becomes part of the case document that is forwarded to the committee.
4. The Student Grievance Committee is then required to set a date for convening a meeting to hear the case(s) as expeditiously as possible.
5. After the date has been set, each party to the dispute is sent a certified letter, or in order to expedite the process the parties may retrieve the letter of notification directly from the office of the Dean. The letter informs the parties of the charges, date of the meeting, as well as a statement requesting the presence of the parties involved.
6. During the hearing, the student presents his/her case; after the accused party is allowed to present the other side, each side is permitted to have witnesses to testify on their behalf.
7. Following the hearing, members of the committee after deliberation on their assessment of the case should be resolved.
8. The committee's decision is sent to the Dean of the School/College in the form of a recommendation.
9. The Dean then informs the student in writing of the decision, which may be based upon the committee's recommendation or upon a modification of it. The decision of the Dean is final.

*Approved by the Board of Trustees on April 23, 1994
Updated July 2009*

SECTION XXVII

LEAVE OF ABSENCE AND WITHDRAWAL

A. Procedures to Request Leave of Absence

1. Any student who wishes to request a leave of absence from the College of Medicine must first seek advisement from the Senior Associate Dean for Academic Affairs and the Associate Dean for Student Affairs and Admissions.
2. If after the above discussions the student still wishes to request a leave of absence, he/she must write a letter (dated and signed by the student) to the Associate Dean for Academic Affairs indicating same.
3. The Senior Associate Dean for Academic Affairs will make a decision on the request for a leave of absence after conferring with the Associate Dean for Student Affairs and Admissions.
4. Students who have unsatisfactory examination grade(s), or transcript unsatisfactory grade(s), or conditional unsatisfactory grade(s) should not expect to be granted a leave of absence.
5. Requests for leaves of absence will not normally be approved for more than one year.
6. Any student whose leave of absence is approved at the end of an academic year in which the student met all requirements for satisfactory performance will return to begin the year to which he/she was promoted.
7. Any first or second-year student who is granted a leave of absence before the end of an academic year will be expected to return to satisfactorily repeat all courses of that academic year, including courses previously passed. Junior and senior students who are granted more than one year leave of absence may be required to repeat the entire year.
8. The student may appeal the decision of the Senior Associate Dean for Academic Affairs to the Dean.
9. All students before departing the College of Medicine on leave of absence must follow the procedures specified below:
 - a. Complete a total withdrawal form in Room 527, Office of Academic Affairs, College of Medicine, 806-9494.
 - b. Report to the Office of Financial Aid, Room 524, College of Medicine, 806-6388, for counseling and an exit interview.
 - c. Follow the University Total Withdrawal Procedure (See below)

12. For students who leave the College of Medicine without completing the above procedures, the Office of Academic Affairs will initiate a total withdrawal process and the student may be required to apply for readmission to the College of Medicine.

B. Procedures to Request Withdrawal

1. Any student who wishes to withdraw from the College of Medicine must first seek advisement from the Senior Associate Dean for Academic Affairs and the Associate Dean for Student Affairs and Admissions.
2. If after the above discussions the student still wishes to withdraw, he/she must write a letter to the Senior Associate Dean for Academic Affairs indicating same.
3. The last day for total withdrawal will be printed in the Academic Calendar of the College of Medicine.
4. Any student who is not performing satisfactorily in any course at the time of withdrawal will be withdrawing not in good academic standing. Students will be notified of their standing at the time of withdrawal or within a reasonable time.
5. All students wishing to withdraw must follow the procedures specified below:
 - a. Complete a total withdrawal form in Room 527, Office of Academic Affairs, College of Medicine, 806-9494.
 - b. Report to the Office of Financial Aid, Room 530, College of Medicine, 806-6388, for counseling and an exit interview.
 - c. Follow the University Total Withdrawal Procedure (see below)
7. For students who leave the College of Medicine without completing the above procedures, the Office of Academic Affairs will initiate the total withdrawal process.
8. Any student who wishes to re-enroll in the College of Medicine after withdrawal must follow the procedures for applying for readmission.. For information on readmission, students should consult with the Associate Dean for Student Affairs and Admissions or the document, Readmission Application Procedures. Any student re-admitted after withdrawal will be required to repeat the academic year in which he or she was last enrolled.

C. Total Withdrawal Procedure

1. Students who find it necessary to withdraw from all of their classes for the current semester or for a subsequent semester for which they have already registered must complete a *Total Withdrawal Request Form*. This form must be submitted by the end of the 12th week of classes for the semester in which they wish to withdraw. The withdrawal form and instructions are available from the Dean or advisory center of each school or college. Students who are physically unable to complete the withdrawal in person and students who are administratively withdrawn should

contact their dean or advisor for assistance.

Students considering a total withdrawal should note the following:

- a) The effective date of the withdrawal will be the date on which EM/Records receives the completed withdrawal request form.
 - b) By registering for courses, students accept financial responsibility for payment for those courses and for any other charges incurred while they are enrolled.
 - c) Financial aid may be adjusted or canceled as a result of withdrawal and may require repayment of loan funds. Adjustments to financial aid awards will be calculated according to University and Federal refund guidelines based on the official withdrawal date.
 - d) Once the withdrawal has been completed, students will receive a grade of “W” for each course.
 - e) Students who reside in University housing are required to **check out of their residence hall within 24 hours** of completing the total withdrawal process.
 - f) Completing a total withdrawal from the University requires that **students surrender all University property**, including, but not limited to library books, room keys, computer cards, and identification access cards.
 - g) Students who complete a total withdrawal from the University must reapply for admission to the University by published application deadlines.
2. **Students should report first to the office of the dean or advisory center of their school or college to obtain a *Total Withdrawal Request Form***, and to discuss the reasons for and the implications of the withdrawal (1). Students who decide to continue with the withdrawal process should have the withdrawal form signed by their dean or the dean's designee and should then proceed as follows to the offices that correspond with their student status:
- a) Veterans, students with disabilities, and students who have judicial stipulations should report to the Office of Special Student Services, Suite 725, Howard Center (2).
 - b) International students must report to the Office of International Student Services, Rm. 119, Blackburn Center (3).
 - c) Students who reside in University housing must report to the Office of Residence Life, Tubman Quadrangle (4).
 - d) Students who received any type of financial aid (including scholarships, grants, and loans) must report to the Office of Financial Aid, Scholarships, and Student Employment, Rm. 205 Administration Building to discuss the effect of withdrawal on their award(s) and potential financial aid overpayment. (5).
 - e) All students must report to the Office of Student Financial Services, Rm. 218, Administration Building to discuss the status of and adjustments to their account. (6).
 - f) All students must report to EM/Records, Rm. 104 Administration Building to submit the completed *Total Withdrawal Request* form and surrender their *Capstone Card* (7).

- D. A student may withdraw from the University at anytime prior to the twelfth week of classes. To implement an official total withdrawal from the University, a student must file a completed Total Withdrawal Request Form with the Office of Enrollment Management/Records. A student who leaves the University without filing a completed Total Withdrawal Request Form may not be eligible to receive tuition refunds and may receive failing grades in the courses for which he/she is registered. A student who withdraws officially from the University may be eligible to receive a total or partial tuition refund in accordance with the University's Schedule of Financial Adjustments and/or Refunds. Students may be required to repay federal funds received in a given semester as a result of total withdrawal from the University.
- E. Students registering for courses during General Registration for the upcoming semester, who decide prior to the first day of classes of the next semester that they will not attend the university, must complete a Total Withdrawal Request Form.
- F. **Unapproved Absence from Classes or Clinical Rotations**
A student who is absent (without approval from the Associate Dean for Student Affairs and Admission) from classes or clinical rotation must provide to the Senior Associate Dean for Academic Affairs a satisfactory explanation for the absence or she/he will be subject to disciplinary action which could include unsatisfactory grade for the course or clinical rotation or dismissal from the College of Medicine. A student who is absent from the College of medicine for four weeks or more (without approval from the Associate Dean for Student Affairs and Admission) shall be considered to have withdrawn from the College of Medicine.

Revised July 2014

SECTION XXVIII

READMISSION

Procedure for Requesting Readmission

A. Eligibility for Readmission

All students who withdraw or are dismissed from the College of Medicine are eligible to apply for readmission except for those students who were dismissed because of:

1. unprofessional behavior
2. failure on USMLE Step 1 or Step 2 CK or Step 2 CS three times
3. failure of a course or clerkship or elective during a repeat or restart academic year

B. Procedures for Readmission

1. Students who are dismissed because of academic reason(s) are not eligible for readmission for at least one semester after the dismissal.
2. Any student desiring readmission should discuss his/her plans with the Associate Dean for Student Affairs.
2. Any student who decides to seek readmission must write a letter to the Associate Dean for Student Affairs by **May 1** of the year in which the student wishes to re-enroll. The letter should (1) request readmission, (2) indicate the reasons for the student's academic and/or other difficulty, (3) outline, in detail all activities since leaving medical school, emphasizing those in preparation for returning to the medical curriculum, (4) discuss the resolution of any personal problems that may have affected medical school performance, and (5) describe how medical school would be approached, if readmitted in terms of such matters as study habits, learning techniques, and examination preparation.
3. Letters of recommendation in support of readmission will be accepted, but not required.
4. If course work is completed during the time away from medical school transcripts of grades will be required.
5. The letter requesting readmission, as well as any supporting documents submitted, will be presented to a Subcommittee of the Executive and Promotions Committees, hereinafter referred to as the Readmissions Subcommittee.
6. The Readmissions Subcommittee may request that the student come in for an interview
7. The Readmissions Subcommittee will present its recommendation regarding the student's request for readmission to the Executive and Promotions Committees at a joint meeting.

8. The student will be notified in writing of the decision of the Executive and Promotions Committees.
9. Any student readmitted who left the College of Medicine not in good standing and who is not on official leave of absence must repeat and pass all courses of the curriculum of the year to which the student was readmitted; and will be required to fulfill all terms of the Promotions Policy that refer to repeating students.
10. A student who is offered the opportunity for readmission cannot defer the readmission to another semester or academic year.
11. The student may appeal the decision of the Executive and Promotions Committees to the Dean of the College of Medicine.

C. Absence from School

Regulations relating to returning students require that all students who are absent from or not registered at the university for one entire semester (summer school not included) must apply in advance for readmission.

Revised July 2014

SECTION XXIX

SMOKING POLICY

Effective July 1, 1989, the College of Medicine and the Howard University Hospital prohibited smoking within all buildings under their jurisdiction. The College and the Hospital find smoking inherently at odds with the mission to provide health care and promote health. Further, implementation of this policy will enhance the health and safety of patients, faculty, staff, students and visitors, and will reduce fire risks. Moreover, this policy is necessary to comply with District of Columbia law. Smoking is permitted in outside areas adjacent to our facilities, except near front entrances.

SECTION XXX

HEALTH SERVICES

- A. The Student Health Center provides all full-time and part-time students with access to a comprehensive health care program. One or more physicians are assigned at the student Health Center to evaluate and manage only medical students. The Health Center is located at 2139 Georgia Avenue (at the intersection of Georgia Avenue and W Street, NW), 806-7540.

All students entering a school or college of the University for the first time, returning after an absence of a semester or more due to illness, or returning to the University after an absence of more than two years are requested to submit a completed Entrance Medical Record form to the University Student Health Center.

The insurance covers the patient for medical expenses resulting from accidents or sickness causing loss commencing during the period of coverage 24 hours a day, 12 months a year, and is subject to the conditions of the policy. This program supplements, but does not replace, the facilities of the University Health Center. **Students must first report to the Student Health Center before utilizing other health care facilities in order for insurance benefits to be available, except in cases of extreme emergency.**

While a student is officially enrolled, current registration and identification cards are required for eligibility of service. The plan offers medical care during the school year in services pertaining to general health, sickness, accidents, preventive medicine and health education. It does not assure medical care relating to preexisting conditions, and does not cover routine physical examinations, refraction and eyeglasses, or orthopedic equipment.

B. Immunizations

All students entering the University must comply with the District of Columbia Law which requires measles, mumps, rubella, diphtheria and tetanus immunizations before they can register or attend classes. Proof of immunization should be sent to the Director, Student Health Center, Howard University, 2139 Georgia Avenue, NW, Washington, DC 20059.

C. Appointments

Appointments can be made for all clinics by calling (202) 806-7539. Students who do not report to appointments on time may be rescheduled for another date or seen on a walk-in basis.

D. Disabled Students

Students with disabilities documented by the appropriate medical professional receive consideration for reasonable accommodations as required once the

University has been officially notified. Upon initial enrollment, disabled students should provide to the Office of the Dean for Special Student Services documentation of their disability for appropriate intake and determination of necessary accommodations. For the first semester and each subsequent semester after validation, these students must report to the Office of the Dean for Special Student Services for counseling and to submit the required request for reasonable accommodations from faculty members and other persons and from campus units as necessary.

E. Student Health Insurance and Disability Income Plans

During orientation at the beginning of each academic year the student health insurance and disability income plans are discussed with each class. In addition, staff from the Occupational Health area of Howard University Hospital discuss with students safety precautions.

The Office of the Dean for Special Student Services is located in Suite 725 of the Howard Center, 2225 Georgia Avenue, N.W., 202 238-2420.

XXXI

HEALTH CLEARANCE AND MANAGEMENT PLAN POLICY (Including Student Exposure to Infectious and Environmental Hazards)

These policies and procedures are supplemented by those of Howard University Hospital infection control. The Policies and Procedures manual of the College of Medicine as well as the relevant hospital policies and procedures relating to infection control shall be distributed and discussed with students during orientation for each academic year. When students rotate away from Howard, they are expected to follow the policies and procedures of those other sites.

NOTE: Health screening, disease prevention, and other health practices are often updated. Students must therefore confirm the requirements with the Student Health Center.

A. Health Screening

Health screening is accomplished prior to matriculation and annually thereafter. More frequent screening or monitoring shall be done as necessary. The following are required of all medical students:

1. Initial physical examination and annually thereafter done at the Student Health Center
2. Screening for tuberculosis prior to starting medical school and annually thereafter
3. Serology Testing is annual and is a part of the annual Health Sciences Physical examination
4. Proof of immunity to measles, mumps and rubella as evidenced by immune titers (*Simply having had the series of vaccinations is not sufficient*)
5. Tetanus (Td) within the past 10 years. In addition, Health Sciences Students with patient contact should receive a single dose of Tdap prior to their rotation. The Tdap dose interval may be as short as two years from the last Td
6. Immunity to Hepatitis B must be evidenced by immune titers. (*Simply having had the 3 required vaccinations is not sufficient to guarantee immunity*)
7. Immunity to varicella (chicken pox)
8. Additional requirements if rotating through pediatrics (such as nasopharyngeal cultures, etc.)

B. Non-Occupational Illness

The Howard University Student Health Center will monitor the health status of all students with potentially infectious conditions. Any student having an active infectious disease must be treated by a qualified health care provider prior to beginning or continuing a clinical assignment.

1Colds and Coughs

A student with cold symptoms, without constitutional symptoms, may begin or continue his/her clinical assignment unless coughing repeatedly or with a temperature of 100 degrees F or more. Exception: students with viral

infections or cold symptoms who work with children, immunosuppressed patients, and renal transplant patients will be sent home.

2. Diarrhea

Students with diarrhea suspected to be viral or bacterial in origin will not be allowed to work in the nutrition and food service department or nursing services until the condition is controlled. Rectal swab or stool specimen analysis and follow-up are advised.

3. Herpes

Students with open herpetic lesions will be relieved from direct patient contact until the lesions are dried and healed.

4. Communicable Disease

Students with a communicable disease (or who have a family member with a communicable disease) should follow the guidelines found in "Guidelines for Students With or Exposed to Communicable Diseases" from the Center for Disease Control and Prevention. The Infection Control Unit at Howard University Hospital shall provide the most current guidelines.

C. Occupational Injury

For the purpose of this policy occupational injury refers to any type of exposure, injury, or illness to infectious and environmental hazards that a student sustains when she/he is on any required, assigned, or approved educational activity at Howard University Hospital or at any other approved site. The educational activities include required rotations or experiences, approved electives, approved research, and approved service learning activities while the student is officially enrolled in the College of Medicine.

1. Goals of Occupational Exposure Plan

- a. To prevent work-related injury and illness of Howard University medical students
- b. To prevent spread of communicable diseases to patients seen by Howard University medical students
- c. To formalize procedures for reporting and managing work-related injuries and illness of Howard University medical students

2. Methods

a. Education

All students will be provided a copy of *The Howard University Hospital Infection Control Inservice Handbook*. The handbook will be distributed during orientation that occurs before the beginning of each academic year. In addition, students will receive specific instructions in standard precautions and isolation requirements during orientation that occurs before the start of the academic year. These instructions will be repeated to groups of students or on an individual basis.

b. Health Screening and Maintenance Following Exposure

The Howard University Student Health Center will monitor the health status of all students who are injured or exposed to infections or environmental hazardous materials. This will be accomplished through primary prevention screening and post-exposure or post-injury diagnostic testing and management.

3. Evaluation of Occupational Exposure, Illness and Injury

Costs for evaluating and managing occupational exposure, illnesses, and injuries are covered by the Student Health Insurance Plan, the hospital, and the College of Medicine. Students who are exposed or become ill or injured as the result of an educational requirement or assignment will be evaluated at the Howard University Student Health Center during the Center's normal operating hours whenever possible. The Student Health Center staff member will triage the student and write the following information on a referral form to the Howard University Hospital Employee Health Unit or to the Emergency Department:

1. Whether the student has had his/her series of Hepatitis B and tetanus vaccines, and any other laboratory information
2. The type of injury, when and how the injury occurred, and any pertinent information regarding the patient

D. Students will be treated at the Howard University Hospital Employee Health Unit or the Emergency Department after obtaining referral and claim forms from the Student Health Center.

E. When the Student Health Center is closed, or in cases of dire emergency, the student shall first contact the designated administrator at the work site whenever possible. Any necessary emergency medical and nursing care shall be made available to the student through the regular procedures in effect at the Employee Health Unit or Emergency Department of the hospital, clinic or other medical facility to which the student is assigned. The student shall take copies of discharge instructions and any other information describing the treatment that was rendered at the Employee Health Unit or the Emergency Department to the Student Health Center. The student may then be referred back to the Howard University Hospital Employee Health Unit for further management of the condition, if deemed medically necessary by the Student Health Center.

F. A Howard student who sustains an occupational injury while rotating at a site away from Howard University Hospital should follow the procedures specific to that site and inform the Associate Dean for Student Affairs and Admissions at Howard of the incident. The Associate Dean will provide further instructions to the student.

G. Students who sustain any occupational injury that requires long-term care and

follow-up will be managed in the Student Health Center, Hospital Employee Health Unit, or referred to a health care provider who is qualified to provide the care and follow-up.

- H. Students have disability coverage through the American Medical Association Insurance Agency, Inc. Among the benefits for disability of the student, the policy provides monthly payments to the student, waiver of premium, accommodation fee should the student become employed, loan repayment, assisted living, and survivor payment. The policy defines the requirements for benefits and the limit of payments.

G. Effects of Infectious and Environmental Disease or Disability on Medical Student

1. Learning Activities

The Dean for Special Student Services will evaluate any student who claims temporary or permanent disability that requires accommodations to continue in school. The Dean will inform courses and clerkship directors regarding reasonable accommodations for the student that are necessary. Courses and clerkship directors are required to provide the necessary accommodations. If the student disagrees with the decision of the Dean for Special Student Services, she/he can appeal that decision through the College of Medicine's appeal process. Students who are unable to complete the semester during which an injury occurred will receive credit for tuition and fees according to the refund policy of the university. A student who cannot continue in school because of chronic infectious and environmental disease or disability will be placed on a leave of absence. The student will be permitted to resume her/his education after she/he is cleared by the Student Health Center.

- 2. Students who are unable to complete the semester during which an injury or illness (occupational or non-occupational) occurred will receive credit for courses and clerkships that were successfully completed. A student whose learning activities are disrupted because of chronic infectious and environmental disease or disability will be placed on a leave of absence. A student who suffers a permanent disability as a result of an occupational injury will be reviewed by the College of Medicine on a case by case basis by the Dean for Special Student Services and appropriate recommendations will be made to the Associate Dean for Academic Affairs. If it is determined that a student incurred a disability as a result of an educational assignment or experience, and if it is further determined that the student cannot continue with her/his education as a result of the disability, the student will receive disability compensation according to the student disability insurance plan. A student not allowed to continue in school due to disability has the right to appeal the decision through the standard appeal process of the College of Medicine.

E. Financial Responsibility of Students

Students who suffer any occupational injury will not bear any expense related to those injuries. A student who receives an invoice for services related to any occupational injury must immediately forward the invoice to the Associate Dean for Student Affairs and Admissions. The costs for evaluating and managing the injury (short and long-term) will be paid in full by:

1. The Student Health Insurance Plan
2. Student Long-term Disability Insurance
3. Howard University Hospital
4. Howard University College of Medicine

A student who is unable to complete any course or clerkship because of an occupational injury shall be refunded the tuition and fees according to the university refund policy.

G. Visiting Students

Visiting students are required to have their own health insurance plans. If a visiting student sustains an occupational injury, she/he will be evaluated and managed in the same manner as Howard students while she/he is at Howard. The student must inform the Associate Dean for Student Affairs and Admissions of the injury. The Associate Dean for Student Affairs and Admissions will inform the student's home school. It is expected that the student's home school will arrange for short and long-term follow-up and for all charges related to the injury. Visiting students will be informed of this policy before the start of the Howard rotation

H. Health Clearance

1. All students must be cleared by the Student Health Center before the start of the school year
2. Students must have documentation of health screening and treatment of active disease prior to the time they present for clinical experiences to Howard University Hospital, and all other hospitals, clinics or physician offices to which they are assigned. These sites reserve the right to refuse access to their facilities to any student who fails to comply with the occupational exposure plan
3. Students will be allowed to begin clinical assignment only after they have been cleared by the Student Health Center and have been appropriately fitted for protective particulate masks
4. Any student having an active infectious disease must be treated by a health care provider prior to beginning or continuing a clinical assignment. A provider's "return to duty" certificate is required by the University Student Health Center as well as by the student's immediate supervisor before starting or resuming clinical activity. The student must report to the Student Health Center for evaluation and clearance to return to his/her assignment.

*Updated December 9, 2010
Approved by the Executive Committee, HUCM*

SECTION XXXII

SOCIAL MEDIA POLICY

Faculty, residents, students, and staff are required to conduct themselves in a professional manner, which includes treating patients in an ethical, compassionate and culturally sensitive manner, adhering to standards of patient confidentiality and acknowledging that patient welfare is of primary importance.

Social media has become integrated into the fabric of our daily communications. As set forth in the University's Social Media Policy, the University recognizes the importance of social media and encourages responsible and respectful online activity by faculty, residents, students, and staff. The University community is reminded that the requirements regarding patient confidentiality extend to social media. Social media is defined as online public communication forums used to share, collect, engage, and exchange personal and public information and includes, but is not limited to, YouTube, Facebook, Instagram, Twitter, LinkedIn, Pinterest, personal blogs and vlogs, etc.

University policy prohibits posting confidential or proprietary information or conversations on social media. ***All members of the University community are prohibited from posting any content that contains personal health information, including patient images, on any personal social media.*** Everyone must refrain from discussing patients on social media pages. Posting of images and information about clinical activities could violate federal (including, but not limited to, the Health Information Portability and Accountability Act, known as "HIPAA") and state laws. Posting of pictures of patients, patient's body parts, patient images, etc., even if the patient or the patient's family has agreed is prohibited. This prohibition extends to research subjects. This includes cell phone pictures of wounds or body parts as well as images such as X-rays, CT scans, etc. Personal devices should not be used to take pictures in the health care or research setting.

Appropriate actions will be taken against anyone who violates this policy.

This policy supplements the University Social Media Policy

For questions about the use of social media in the clinical or research setting, please contact the Health Sciences Privacy Officer at (202) 865-5266.

SECTION XXXIII POLICY ON RELIGIOUS HOLIDAYS

This policy is implemented in recognition of the diverse body of faculty, students, and staff in the university and in the College of Medicine and with respect for their religious beliefs.

Any student who, because of his or her religious beliefs, cannot attend classes or any structured educational session, sit for any examination or quiz, or submit any report on a specific day that coincides with his/her duly recognized religious holiday shall be offered the opportunity to sit for the examination or quiz or to submit the report on another day. Students who missed classes shall be responsible for the material covered during the class on the scheduled day. It is the responsibility of the student to request (in writing – letter or email) an excuse to be absent from classes, sit for any examination or quiz, or submit any report on a specific day that coincides with his/her duly recognized religious holiday from the Associate Dean for Student Affairs and Admissions. A copy of the letter should also be forwarded to the unit leader, clerkship director, and attending physician. The letter must be submitted at least four weeks prior to the religious holiday. All excuses must be approved by the Associate Dean for Student Affairs and Admission.

June 2015

POLICY XXXIV

POLICY ON TRANSFER STUDENTS

A. Howard students transfer out

Students from Howard University College of Medicine who wants to transfer to another medical school must submit a request in writing to the Associate Dean for Academic Affairs. The letter must indicate the reason for transfer and the date the transfer will be effective. The Associate Dean for Academic Affairs will meet with Associate Dean for Student Affairs and Admission and the student to discuss the request. A student who transfer out of Howard University College of Medicine and subsequently wants to return to Howard University College of Medicine must apply for readmission by following the procedures described in this manual

B. Students transfer to Howard University College of Medicine

Howard University College of Medicine will consider students for transfer to Howard who meet the following requirements:

- a. Be enrolled in an LCME accredited school at the time of the transfer
- b. Be in good standing at the medical school that he/she is attending at the time of the transfer
- c. Provide a letter indicating the student's status from the Dean of the school where he/she is enrolled
- d. Provide a transcript of courses and clerkships that he/she completed or enrolled
- e. Cannot be transferred to Howard University College of Medicine in the fourth year
- f. Must pay tuition and fees according to the rates in effect at the time of the transfer

SECTION XXXV
POLICY ON STUDENT EDUCATION RECORDS

- A. Students education records shall remain secure in the Office of the Associate Dean for Academic Affairs
- B. Student education records may be taken out of the Office of the Associate Dean for Academic Affairs only by permission of the Dean of the College of Medicine or his designee. The person taking the record out of the office must complete an application (shown below) to temporarily remove the record.
- C. Students are not permitted to take their education records out of the Office of Academic Affairs
- D. Students have the right to:
 - a. inspect and review their education records
 - b. seek amendments to their education records
 - c. file a complaint with the Department of Education concerning alleged failure of the College of Medicine to comply with requirements of FERPA
- E. Details of the procedure and additional information on access to and review of their records are shown in the H Book.
- F. Students education records are confidential and may be accessed only by those with the need to do so. Examples are: for promotions, graduation, and awards; filing of documents; and preparation of the Medical Student Performance Evaluation (MSPE)
- G. Application to temporarily remove student education record

Name of student:.....

Name of person taking the record:.....

Reason for temporarily removing records:

.....
.....
.....
.....

Approved by:.....

Date taken:.....

Time taken:.....

Date returned:.....

Time returned:.....

SECTION XXXVI

UNIVERSITY POLICIES AND PROCEDURES

The university publishes a student handbook that applies to all students in the university with limited exceptions. These can be found on the following website:

<http://www.howard.edu> then click on administration

LOUIS STOKES HEALTH SCIENCES LIBRARY

Group Study and Problem Based Learning Room Rules

- No Eating in the rooms
- Do not take food out of your bag and place it on the table.
- You may leave your lunch bag at the security desk. The security guard will return it to you when you leave.
- If you need to eat, you may eat in the student lounge on the 1st floor of the library next to the security desk
- The rooms are not soundproof; therefore keep the noise level down
- Pick up after yourself. Keep the room clean for the next users.
- The Library only has one daytime housekeeper. The overnight housekeeping staff does not have keys to the Group Study and Problem Based Learning Rooms to clean
- Turn off the lights, lock and shut the door securely when you leave
- Do not prop doors open

Return the room key before you leave the building.

In addition all users of the Louis Stokes Health Sciences Library will adhere to the HOWARD UNIVERSITY CODE OF ETHICS AND CONDUCT

<http://www.howard.edu/policy/codeofethics.pdf>

Please pay particular regard to Section IV. REQUIRED CONDUCT

All members of the University Community shall conform to the following standards and avoid any conduct that is an actual or apparent violation of the standards.

University resources shall not be used for other than their intended purpose.

Failure to comply with room and conduct rules can result in the user being subject to a 3 week ban and/or appropriate legal sanctions by the university.

SECTION XXXVII

UPDATED POLICIES AND PROCEDURES

Updated and revised policies and procedures of the College of Medicine shall be forwarded to all concerned as they occur. Such updates may occur before the start of a new academic year or at any time during an academic year.

When in doubt, students should consult with the Associate Dean for Academic Affairs for interpretation or clarification of existing, updated, or new policies and procedures..

SECTION XXXVIII

STUDENTS' CONTACT INFORMATION

Each student is responsible to immediately notify, in writing, the Director of Students Records in the Office of the Senior Associate Dean for Academic Affairs changes in any of the following:

- Name
- Mailing address
- Home telephone number
- Mobile (cell phone) telephone number
- E mail address (Howard University assigned e mail address will be used)
- Contact information in case of emergency

Each student is also responsible to notify unit leaders and clerkship directors of changes in any of the above, and to provide contact information to the Director of Students Records or the Senior Associate Dean for Academic Affairs of contact information when on extra-mural or international electives or rotations.

Electronic submissions of changes in contact information are preferred. Forward to shassan@howard.edu

All students must use the Howard University assigned Email addresses. The College of Medicine assumes no responsibility for students who fails to check his/her Howard University assigned email for messages. Students who require assistance in accessing their Howard email accounts must contact the Howard University Help Desk by calling 202 806 2020.

The College of Medicine shall not be responsible for any communication that a student does not receive because of failure of the student to inform the College of Medicine of any changes in name or contact information.

SECTION XXXIX ADMINISTRATIVE CONTACT INFORMATION

The main number to the College of Medicine is 202 806 6270

Administrator	Telephone Number	Pertaining to:
Hugh Mighty, M.D., MBA	202 806 9168	Dean
Tashieka Stone Administrative Coordinator to the Dean	202 806 9168 ttstone@howard.edu	Administrative Coordinator to the Dean
David A. Rose, M.D. Office of Academic Affairs	202 806 9494 darose@howard.edu	Student schedules and grades
Walter P. Bland M.D. Associate Dean for Student Affairs and Admissions	202 806 6394 wbland@howard.edu	Student affairs and admission including excuses from classes, clerkships and examinations; and readmissions
Celia Maxwell, M.D. Associate Dean for Research	202 806 7818 cmaxwell@howard.edu	Research
Assistant Dean For Medical Education	202 806 6282	PARP Academic reinforcement MEDSTARS, SDSP
Alicia Anderson, PhD Office of Medical Education	202 806 5177 Anderson.alicia1@gmail.com	Academic reinforcement
Rozanna Aitcheson Financial Aid Manager	202 806 4338 raitcheson@howard.edu	Financial aid
Benita Griffis Director of Academic Support	202 806 9492 benita.griffis@howard.edu	Student records, grades
Angela Cummings Administrative Coordinator Academic Affairs	202 806 9494 Angela.cummings@howard.edu	Academic Affairs; electives
Alyene English Administrative Assistant	202 806 6282 A_I_english@howard.edu	Medical Education
Leiza O'Neil	202 806 6690 loneil@howard.edu	Student Affairs; MSPE
Tamara Owens	202 865 0062 tlowens@howard.edu	Clinical Skills and Simulation
Stephen Whetstone	202 806 6383 Swhetstone@howard.edu	Informatics
Monique Frazier	202 806 6228 monique@frazierinternational.net	Data Analysis Center
Darlene Wall	202 806 9491 dmwall@howard.edu	Verification of training; letters of standing
Stafford Battle	202 806 9703 sbattle@howard.edu	Curriculum office
Clive Callender	202 865 1659 ccallender@howard.edu	Honor Council
Email reset	202 806 2020	

Students are not permitted in the Curriculum Office on in the Data Analysis Center