

UNIVERSITY OF CINCINNATI COLLEGE OF MEDICINE
ACADEMIC PERFORMANCE STANDARDS
GUIDELINES FOR PROMOTION BOARDS

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The College of Medicine reserves the right to make changes in policy, regulations, and Promotion Board guidelines as circumstances dictate, subsequent to publication. The College expects its students to have knowledge of the information presented in this document and in other University publications.

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* Attached

** These documents are available in the Dean's Office and on www.medonestop.uc.edu.

UNIVERSITY OF CINCINNATI COLLEGE OF MEDICINE
GUIDELINES FOR PROMOTION BOARDS

I. THE PROMOTION BOARD

A. MEMBERSHIP AND VOTING

Overall evaluation of student performance at the College of Medicine shall be made by one of three Promotion Boards: Year I, Year II or combined Year III/IV. The Year I Promotion Board and the Year II Promotion Board will each consist of a committee chair, the course directors or designees involved in the courses for which evaluation is required, the Senior Associate Dean for Student Affairs and Admissions (ex-officio), the Assistant Dean for Medical Education (ex-officio), and two student representatives from the third and/or fourth year class designated by the Dean's Office who are and have been in good academic standing.

Membership in the Year III/IV Promotion Board will consist of a committee chair, the six core clerkship course directors, and the acting internship course director. To represent the specialty clerkships, one specialty clerkship director will be selected by the Clinical Biennium Curriculum Committee to serve for a term of two years. The Senior Associate Dean for Student Affairs and Admissions (ex-officio) and the Assistant Dean for Medical Education (ex-officio) will also serve. There will be two student representatives from the fourth year designated by the Dean's Office who are and have been in good academic standing.

For each of the three Boards, voting will be limited to one representative from each course or clerkship and one vote from each of the two student representatives. The chair of the Board, an impartial moderator, votes only to break a tie. The ex-officio members are non-voting.

Nominations for committee chair and vice-chair will be made by the faculty members on each Promotion Board and submitted to the Dean for final approval. The nominees for chair and vice-chair will be selected from among the course directors, past or present, serving on each Promotion Board. The chair and vice-chair will serve three year terms with the option of reappointment. The vice-chair will serve in absence of the chair. A roster of membership for each Promotion Board appears in Appendix I.

Judgments of a Promotion Board will be based upon information submitted by directors of courses or clerkships as well as by the student under consideration. In addition, a Board may invite others to provide information as it deems necessary. A student may appeal the decision of a Promotion Board in a manner described on pp. 37-40 of these Guidelines.

B. FREQUENCY OF THE MEETINGS

The Year I and Year II Promotion Boards meet regularly at the end of each quarter and just prior to the start of the next academic year to accommodate promotion of students who have participated in summer remediation. The Year III/IV Promotion Board meets quarterly to review student progress in the Clinical Biennium. It also meets in June to review the academic progress during Years I and II for all students who will be entering the third year. The material presented at the June meeting is provided for the course directors' use in placing students in optimal learning settings in keeping with individual learning needs. A Board may meet at other times as needed.

All deliberations of the Board are confidential. Board proceedings regarding each student are forwarded in a letter to the student with a copy to the student's advisor.

C. THE NATURE OF BOARD DELIBERATIONS

It should be emphasized that the deliberations of the Promotion Board are positive in approach and intended to be helpful to the student. The Board affirms that the College should adhere to the principle of careful selection in order to minimize student attrition. The Board believes that the student, in spite of adversity, must still be able to meet the minimum academic performance standards outlined in this document (pp. 8-14).

When evaluating student performance, the Board takes into account such matters as fund of knowledge, ability to organize and logically present information, test-taking skills, understanding and judgment. Also, when evaluating student performance, the Board takes into account such qualities as cognitive ability, communication skills, behavioral and social skills, humanistic traits, physical capability, and psychomotor/sensory skills. (See Appendix II) All of these personal qualities are essential to the practice of medicine and must be appropriately demonstrated.

Issues relating to improper conduct will be directed to the Honor Council. The College of Medicine adheres to the documents of its Honor Council, i.e., General Professional Standards: Guidelines for the Honor Council and Guidelines for Student Conduct maintained by the University of Cincinnati. The Honor Council documents are distributed to all entering students and are at all times available from the Dean's Office and the Student Services' website, <http://comdo-wcnlb.uc.edu/PDFdocuments/MedicalEducation/Guidelines/GuideHonorCouncil.pdf>

D. PERSONAL APPEARANCE BEFORE THE BOARD

A student whose advancement or academic performance is in question shall be invited to appear before the appropriate Promotion Board. It is understood that the invitation for appearance is to be extended to students whose academic deficiencies are of major proportions. This includes students for whom such actions as termination, repetition or other alterations in progress are likely possibilities. Repeated instances of marginal grades or other poor academic

behavior may lead to a request by the Board for the student to appear. To implement the above policy, the dates for meetings are set in advance and final grades must reach the Dean's Office no later than two days before the date of each meeting.

There are essentially three purposes for providing the student access to the Board. First, the presence of the student assures that more information will be available to the Board; secondly, it assures the student that the judgment will not be rendered in a remote or impersonal fashion; and thirdly, it guarantees the student an opportunity to furnish information before a decision is made. A student is encouraged to inform the Board of any extenuating circumstances affecting academic performance, or the Board cannot be held responsible for decisions made without such information. The Board retains the option to request consultations or assessments, including those of a medical nature, regarding any student who experiences problems that interfere with academic performance.

II. THE GRADING SYSTEM

The College of Medicine uses an Honors (H), High Pass (HP), Pass (P), Remediate (R), and Failure (F) grading system. All grades appear on a student's official transcript, and those grades given as initial grades are used to calculate class rank/total weighted average. A Withdrawal Passing (WP), Withdrawal Failing (WF) and Withdrawal (W) also will appear on the official transcript; they are not used to calculate class rank/total point average.

A department at its own discretion may write a letter of commendation supplementary to the grade a student receives. The requirements to attain Honors and the percent of Honors traditionally awarded by each course in past years shall be stated in the yearly course Grading Policies Statement distributed to students. (See Addendum 1)

At the end of each academic year, each course director is asked to report to his/her yearly curriculum committee the final statistics on the grades awarded that year. At this time the grading policy for the course is reviewed.

Departments have the latitude of not using the full range of grades available; however, they may not alter the definition of the grades. Grading policies should not be designed to encourage differential study effort based solely on the grading policy.

A course's grading policy may not be changed once the course starts. If, due to unforeseen events, a requirement must be dropped, all students will receive complete credit for that requirement.

For each interdisciplinary course, a committee made up of the directors of the various components will develop a grading policy which, in turn, will be sanctioned by the appropriate yearly curriculum committee. The respective curriculum committee should review the grading policy of an interdisciplinary course each time changes are made in its components. Although an interdisciplinary course may have numerous components that receive grades, only one overall final grade will be recorded on the student's record per course.

Further elaboration of the grading system is used by the departments to indicate to the student his/her relative standing with respect to colleagues in the course. Interpretation of the full grade range is detailed below:

A. GRADES FOR REQUIRED COURSES

Honors (H)

A grade of Honors (H) is awarded to a student whose performance is of very high caliber and, in addition, whose demonstrated qualities of intellectual curiosity, integrity and self-discipline have clearly set him/her apart from the majority of the group.

High Pass (HP)

A grade of High Pass (HP) is awarded to a student whose performance clearly exceeds the Pass requirements but does not reach Honors caliber.

Pass (P)

A grade of Pass (P) is awarded to a student, with the exception of those defined above, whose performance in a subject meets the requirements established by the department concerned.

Remediate (R)

A grade of Remediate (R) is given to a student whose performance is below the minimal requirements for passing but not clearly failing. The below passing portion is judged remediable without repetition of the entire course.

Failure (F)

A student whose performance in a subject is clearly below departmental passing standards shall be given a grade of Failure (F). Remediation is judged to require repetition of the entire course.

Failure to meet a requirement (for example, not taking an exam, not submitting papers or patient write-ups, failure to attend required clinical duties) without prior notification of the course director or designee will be treated as grounds for awarding an F for that part of the requirement.

B. INCOMPLETE

The designation of Incomplete (I) will be assigned when a student fails to complete all the required work in a course for reasons (such as illness) acceptable to the Senior Associate Dean for Student Affairs and Admissions and the department. Incomplete is a non-grade designation. Assignment of an Incomplete requires the prior approval of the Senior Associate Dean for Student Affairs and Admissions on a case-by-case basis. The Promotion Board may determine by when the required work must be completed. Failure to meet the designated deadline will result in a grade of Failure.

C. WITHDRAWAL FROM A COURSE

A student may withdraw (WP, WF, or W) from a course at any time prior to the last exam in that course unless the student has previously failed the course in question or has previously withdrawn from the course. If the student has previously failed or withdrawn from the course, a second withdrawal will be recorded as a Failure.

If a student is passing the course at the time of withdrawal, a WP (Withdrawal Passing) will appear on his/her official transcript. If a student withdraws prior to the first graded course activity, a W (Withdrawal) will be recorded. If a student is not passing the course at the time of withdrawal, a WF (Withdrawal Failing) will appear on his/her official transcript. Administrative rescheduling is not considered a withdrawal. To withdraw, a Medical Student Status Form must be completed (Appendix IV) and appropriate signatures obtained. A W, WF and WP are not counted in the calculation of class rank/total weighted average. (See Appendix V)

A WP, WF or W must be remediated at the UC College of Medicine. For Years I and II courses, the remediation may not be done in the Summer Quarter; it must be done during the regular academic year.

D. EXEMPTION FROM A COURSE

Exemption from a first or second year course may be granted to a student by the course director for coursework at an accredited college or university. An Exempt (E) will be recorded on the student's transcript and is not calculated when determining the student's class rank. For all questions regarding exemption from a course, the Promotion Board has the final decision.

E. WRITTEN INFORMATION SUPPLEMENTAL TO GRADES

Should information about a student's performance be desired to complement a grade, a letter of commendation describing the quality of the student's performance is sometimes written by the course director and placed in the student's file. This letter serves to provide additional information about the quality of work completed by the student which can be referenced in the Medical Student Performance Evaluation (MSPE), formerly referred to as the Dean's letter.

F. GRADES FOR ELECTIVE COURSES

The grading system for all elective courses taken to fulfill graduation requirements will be recorded on the official transcript as Honors (H), High Pass (HP), Pass (P), Remediate (R), or Failure (F).

G. EVALUATION OF NON-CREDIT ELECTIVES

In non-credit electives where no grade is awarded, the instructor may choose to write a letter of evaluation to be entered into the student's file. The student should receive a copy of this letter.

H. THE MEDICAL STUDENT PERFORMANCE EVALUATION AND CLASS RANK

1. The College provides each student with a narrative letter of evaluation, i.e., the Medical Student Performance Evaluation (MSPE), to supplement the transcript when applying for post-graduate training.
2. The College has developed a ranking system which allows a student's course grades to be compared to those of colleagues, although it recognizes that class rankings are imprecise and not necessarily the best indicators of a student's potential as a resident. The College chooses to group its students into five categories. (See Appendix V) No finer gradations are provided.

A student is placed in one of the five categories based on his/her weighted grade point average (WA) in Years I, II, and III. Calculations are made on a point system basis which uses the full range of grades (H = 4, HP = 3, P = 2, R = 1, F = 0). (WF, WP, and W are not used to calculate class rank/weighted grade point average.) The weighted average is calculated on the initial grade. A remedial and/or repetition grade is recorded on the official transcript along with the initial grade, and its inclusion/exclusion in the weighted average is explained in Appendix V.

The yearly weighted averages are calculated by multiplying the credit hours of each course (see Appendix VII) by the numerical value of the grade, summing the products and dividing the sum by the total number of credit hours attempted. The overall weighted average, which determines the class rank, is calculated by adding the combined Year I and II weighted average to the Year III weighted average and dividing the total by two. Class ranks are calculated twice a year. (See Appendix V)

3. Appointment to Alpha Omega Alpha (AOA), the medical honor society, is indicated in the MSPE when the information is available. AOA considers more than academic performance when nominating members; however, a student's grades in Years I, II, and III, as well as the fourth year Acting Internship grade, if available, are used as the measure of academic achievement. Selections, made biannually by the College's AOA Committee, occur at the end of the third year and at the beginning of the fourth year.
4. The Promotion Board may designate for inclusion in the MSPE areas of concern for residency when, in the Promotion Board's judgment, the areas may affect a student's ability to perform as a resident.

I. TRANSCRIPT

The College provides each student with an official transcript. Grades of H, HP, P, R, and F appear on the transcript. When a course is failed (R or F), both the R or F and the second grade in the course appear on the transcript. The grade given for course repetition will also appear on the transcript.

If a student withdraws from a course for reasons other than administrative rescheduling and if the student is passing at the time of withdrawal, a WP (Withdrawal Passing) will appear on the official transcript. If a student is not passing at the time of withdrawal, a WF (Withdrawal Failing) will appear. If a student withdraws prior to the first graded course activity, a W (Withdrawal) will be recorded.

An Awards/Remarks section also appears on the official transcript in which the following entries are made:

1. The date when a student enters Individual Advancement
2. The dates when a student enters and returns from a Leave of Absence
3. Awards, such as AOA and others
4. The date of a student's dismissal or suspension
5. Notations related to admission, dismissal, and other official academic or disciplinary actions

The class' grade distribution for courses is attached to the official transcript accompanying the MSPE.

J. AUDITING OF COURSES

A medical student who seeks to audit a course must have permission from the course director and abide by all conditions specified by the department. The student must make his/her plans to audit known to the Senior Associate Dean for Student Affairs and Admissions in the following manner: The student must submit the audit request via a Medical Student Status Form (Appendix IV). First, the student must receive the signature of the Senior Associate Dean of Student Affairs and Admissions or a designee to verify enrollment and determine that no other educational activity will conflict with the audit. Also, if the audit is a clinical activity, the presence of malpractice coverage needs to be established. Once the Senior Associate Dean of Student Affairs and Admissions has granted approval, as a second step, the student must receive the course director's signature of approval on the Medical Student Status Form. Also, the audit requirements must be listed on an Audit Requirements Form (Appendix VI) signed by the student and the course director. Both forms are to be returned to the Assistant Dean/Medical Registrar in the Dean's Office. Because auditing can play an integral role in student achievement and advancement, the Promotion Board is to be informed of all students auditing courses.

A student in the Individual Advancement Program has the option of auditing courses previously passed. When a student audits a course, an AU (Audit) may appear on the official transcript along with the original grade. An AU designation does not carry credit. However, when a student audits a course previously passed, the student and course director, with approval of the Senior Associate Dean for Student Affairs and Admissions or a designee, must agree to a plan of activities/responsibilities and enter it on the Audit Requirements Form. This plan must be completed to the course director's satisfaction for the student to receive an AU on the official transcript.

Additionally, auditing is to be distinguished from repeating a course. When a student repeats a course because of a deficiency or at the direction of the Dean, the grade earned appears in the student's official transcript.

At times, especially prior to returning from a Leave of Absence (see pp. 31-33), a student may be required to audit designated courses or portions of courses by the Promotion Board that governs the academic year to be reentered. Otherwise, a student is not permitted to audit a course while on a Leave of Absence.

K. GRADE CHANGES AND APPEALS

All requests for changes in grades and/or comments must be carried out within ten (10) business days following notification of the grade and written evaluation. A request for an appeal should follow the procedure outlined for grievances in section VIII, Academic Rights of Students (p. 34). Grievances should first be brought for resolution to the department which issued the grade and/or comment.

III. MINIMUM REQUIREMENTS FOR ADVANCEMENT AND RETENTION

A. REQUIREMENTS APPLICABLE TO ALL YEARS

Unless the Promotion Board or Dean designates otherwise, a student is under the requirements of the Academic Performance Standards, Guidelines for Promotion Boards in effect for the year of his/her matriculation. A transfer student will fall under the Guidelines for Promotion Boards which apply to the class into which he/she enters.

The Promotion Board has specified the minimum requirements for advancement for each curriculum year, as well as the minimum requirements to maintain enrollment. Failure to meet any one of these requirements will result in a recommendation of dismissal for poor scholarship.

1. Any repeated course must be passed; that is, a Failure followed by a second Failure, a Withdrawal Failing, or a Remediate in a repeated course will result in a recommendation of dismissal.

Any repeated previously passed course must be passed. Failure to do so will result in a recommendation of dismissal.

2. A student must complete all coursework in a total of six academic years, excluding Leave of Absence time. No more than three years may be devoted to basic science courses (Years I and II). No more than three years may be devoted to clinical courses (Years III and IV).
3. Failure to satisfy a professional/noncognitive requirement will result in a recommendation of dismissal.

B. SPECIFIC REQUIREMENTS FOR YEAR I

1. To maintain enrollment, at least four of the six first year courses must yield a grade of Pass or above between the start of coursework and the last day of exams Spring Quarter. Failure to do so will result in a recommendation of dismissal.

Remediation or repetition of first year courses is to be done only after completion of Spring Quarter exams.

2. To advance to the second year, all six first year courses (78 credits) must be passed by the July date specified.*

C. SPECIFIC REQUIREMENTS FOR YEAR II

1. To maintain enrollment, at least three of five second year courses must yield a grade of Pass or above between the start of Autumn Quarter and the last day of exams in Spring Quarter. Failure to do so will result in a recommendation of dismissal.

2. To advance to the third year, all five second year courses (72 credits) must be passed by the July date specified in the second year of enrollment.

3. To advance to the third year, the United States Medical Licensing Examination (USMLE) Step 1 must be taken and a passing score recorded in the Dean's Office. Since students' assigned USMLE Step 1 administration dates vary, some scores may arrive following the start of Year III coursework. While a student may start coursework, he/she may continue courses only if a passing USMLE Step 1 score is received.

- a. A student who has passed all Year II coursework by the end of Spring Quarter must request a Step 1 administration date and sit for the examination prior to the first day of the annual Orientation to Year III program which precedes clinical coursework. (Orientation to Year III usually occurs the last Wednesday and Thursday of June. The student is responsible for knowing the exact dates.)

Other than academic difficulties, only extenuating personal circumstances may exempt a student from sitting for the Step 1 examination during the May-June testing period. The judgment to

*Exact dates are announced annually for each class.

postpone rests with the Dean's Office. A medical opinion may be sought. Only one postponement of USMLE Step 1 is permitted.

- b. A student who completes Year II coursework in the Summer Quarter must request a Step 1 administration date in the June-August testing period.
- c. All repetitions of Step 1 must occur within one year of the date of receipt by the student of the first failing score. (See Repetition of USMLE Step 1, pp. 24-25) This time limit applies regardless of whether the student is on Individual Advancement or Leave of Absence. Delay beyond one year without Promotion Board approval will result in the Board's withdrawal of the student from enrollment in the College.

D. SPECIFIC REQUIREMENTS FOR YEAR III

1. The third year courses consist of six core clerkships, one required specialty clerkship and two selective specialty clerkships for a total of 96 credits. Credits awarded for each course appear in Appendix VII. To maintain enrollment in the College in the third year, a student must achieve the following:
 - a. Earn a minimum of 24 credits with passing grades in the first six months of enrollment in third year courses. Failure to do so will result in a recommendation of dismissal.
 - b. Earn a minimum of 56 credits with passing grades by the final day of the student's last clerkship in the twelfth month of enrollment. Failure to do so will result in a recommendation of dismissal.
2. A student who earns an initial F in any two Year III courses will be recommended for dismissal.
3. A student who earns an initial two Rs and one F or three Rs in any separate Year III courses will be recommended for dismissal.
4. All third year core clerkships must be passed no later than January 1 of the final year of enrollment and before starting the Year IV Acting Internship, unless otherwise agreed upon by the Year III/IV Promotion Board and the Senior Associate Dean for Student Affairs and Admissions.
5. Any delayed third year non-core clerkship must be completed before May 1 of the final year of enrollment.

E. SPECIFIC REQUIREMENTS FOR YEAR IV

Fourth year courses consist of the Acting Internship in Internal Medicine, the Clinical Neuroscience Selective and a minimum of twenty-four weeks of electives for a total of 80 credits. The Acting Internship in Internal Medicine, consisting of two one-month rotations, is considered as two separate courses.

The following requirements apply in the fourth year:

1. A student who earns an initial F in any two Year IV courses will be recommended for dismissal.
2. A student who earns an initial two Rs and one F or three Rs in any separate Year IV courses will be recommended for dismissal.
3. Students must take the USMLE Step 2 Clinical Knowledge and Clinical Skills Exams. It is recommended that the examinations be taken in August. Should a student delay taking the USMLE Step 2 exams until March and then not pass, graduation would be delayed until December. The decision to delay taking the USMLE Step 2 exams until March is done at the student's own risk. Passing scores on the USMLE Step 2 Clinical Knowledge and Clinical Skills Exams must be recorded in the Dean's Office to graduate from the College of Medicine.* (See Repetition of USMLE Step 2, p. 25)
4. A student must pass a Clinical Competency Exam (CCX) administered by the College. A Pass (P) for the CCX must be recorded on the student's transcript to graduate. The first administration of the exam occurs in late July through early August. An alternate first testing date for students away from campus will be held in early September.
5. A student must document observing or performing the clinical procedures listed on the Medical Procedures Checklist to graduate.

The Promotion Board has the option of determining the acceptability of a student enrolling in non-University of Cincinnati electives (i.e., away electives). For reasons of academic and professional concern, the Promotion Board may restrict away electives (excludes those students in military programs).

F. SPECIFIC REQUIREMENTS FOR THE CLINICAL BIENNIUM AS A WHOLE

In the Clinical Biennium years, a student who earns any combination of four initial Rs and/or Fs will be recommended for dismissal.

*Implementation of the requirement to pass the USMLE Step 2 Clinical Skills Exam is subject to administration issues encountered by the USMLE in conducting the Clinical Skills Exam nationally.

G. PROFESSIONAL/NONCOGNITIVE REQUIREMENTS FOR ALL YEARS

The Promotion Board avers that on occasion events other than course grades may raise doubts about a student's suitability for earning the faculty recommendation that he/she is progressing satisfactorily toward becoming a physician. The Board expects a student to meet high professional standards.

To meet these standards, the following are requirements of a student in the College of Medicine:

1. A student shall assume personal responsibility for his/her medical education. He/she must be punctual, reliable and conscientious in fulfilling professional duties, including attendance at required course activities, examinations and clinical rotations.
2. A student shall seek appropriate consultation with faculty, staff and other support sources with respect to his/her academics and patient care responsibilities when so directed by the Promotion Board, course directors and/or administration.
3. A student is expected to be responsive to communication from faculty, the Promotion Board and administration, and to accept responsibility to access those resources available to aid the student in meeting academic requirements.
4. A student shall maintain professional demeanor, hygiene and appearance when in a patient care setting, while presenting oneself as a medical student, or otherwise representing the College of Medicine. The medical student must adhere to the dress code of the facility at which he/she is rotating.

Any instance(s) of a student's failure to meet the above standards shall be addressed according to guidelines for professional/noncognitive deficiencies. (See section V., J., pp. 26-27) A student who fails to maintain the highest degree of personal and professional standards deemed essential for all medical students by the Promotion Board is subject to a recommendation of dismissal from the College of Medicine.

H. REQUIREMENTS FOR THE INDIVIDUAL ADVANCEMENT PROGRAM

1. Individual Advancement in the Basic Science Years

A student entering Individual Advancement in the first year of enrollment must pass four courses between the start of coursework and the last day of exams Spring Quarter.

If on Individual Advancement during the second year of enrollment, a student must pass three (first or second year) courses by the last day of Spring Quarter exams in the second year. All first year courses must be passed by the July date specified for first year courses in Summer Quarter of the second year of enrollment. At that point in the academic year when all first year courses have been passed, the student will be advanced to

the status of a second year student, although continuing in the Individual Advancement Program.

All second year courses must be passed by the last day of exams in Summer Quarter of the third year of enrollment on Individual Advancement to advance to Year III. In addition, the requirements for passing USMLE Step 1 must be met. (See Specific Requirements for Year II, pp. 9-10)

If a student withdraws from a course during the academic year, the withdrawal automatically places the student in the Individual Advancement Program. The student will then have to complete the course in the next academic year and within the time limits for retention.

2. Individual Advancement in the Clinical Biennium

A student who takes three years to complete the Clinical Biennium will have his/her progress monitored by the Year III/IV Promotion Board. All core clerkships must be passed no later than the January make-up exam date of the final year of enrollment and before starting the Year IV Acting Internship, unless otherwise agreed upon by the Year III/IV Promotion Board and the Senior Associate Dean for Student Affairs and Admissions.

All non-core third year courses must be passed by May 1 of the final year of enrollment.

The Year IV Acting Internship, selective and elective requirements must be passed by the last day of Spring Quarter of the final year of enrollment.

The requirements for taking and recording passing scores on the USMLE Step 2 Clinical Knowledge and Clinical Skills Exams to graduate must be met. (See Specific Requirements for Year IV, p.11)

IV. REQUIREMENTS FOR GRADUATION

- X Successfully complete the designated four year program of medical education. While the College does not offer a six year program, students may take no more than six years of academic enrollment to complete the program, i.e., no more than one additional year for the basic sciences and one additional year for the Clinical Biennium. (A Leave of Absence is not counted as enrollment except in Years I and II when the Leave of Absence year is counted if the Leave is begun during or after the seventh week of Autumn Quarter.)
- X Take and pass both Step 1 and Step 2 Clinical Knowledge and Clinical Skills Exams (CK/CS) of the United States Medical Licensing Examination (USMLE) and record the results, including the scores provided, in the Dean's Office. Step 1 is to be taken in June prior to entering Year III by all Year II students in good academic standing, unless a student is excused by the Dean's Office. Only one postponement of USMLE Step 1 is permitted. A student who postpones USMLE Step 1 will not be permitted to take Year III coursework until he/she has taken the examination. It is recommended that the Step 2 exams be taken in August of the academic year in which graduation is anticipated.

- X Maintain a satisfactory level of performance in College of Medicine coursework.
- X Discharge all financial obligations to the University at least four weeks prior to Commencement Day.

On successful completion of the curriculum of the College of Medicine, the student is recommended to the Board of Trustees of the University for the degree of Doctor of Medicine. Graduation will occur in June for all students except those who complete their requirements after the June graduation date. These students may graduate at either the August or December graduations.

V. ACADEMIC DEFICIENCIES

A. NOTIFICATION OF BELOW PASSING PERFORMANCE

It is the department's responsibility to notify the student in writing of his/her poor performance (R, F). An up-to-date address for the summer months must be provided by the student and maintained in the Dean's Office. Alternatively, all notifications regarding academic performance and status will be mailed to the student's parents' address. A student must ascertain his/her final grades and, if necessary, make the appropriate departmental and Dean's Office contacts required for remediation.

Formal notification of poor performance constitutes any one or combination of the following:

- X Receipt of departmental grade slip or letter designating R or F
- X Letter from department chair or course director requiring the student to set up and be present at a meeting with the department chair or course director for the purpose of reviewing course performance
- X The description of the student's status as written up in the minutes of the Promotion Board and sent to the student

B. CONSEQUENCES OF A FAILURE GRADE

A Failure (F) designates a grade below departmental passing standards.

A student who receives a grade of F may be allowed, based on Promotion Board approval, to repeat the course at the UC College of Medicine or take a course acceptable to the course director at another institution listed on the AAMC roster of approved courses for summer remediation and approved by the department; this applies to preclinical coursework only. Remediation of clinical courses must be done at an approved UC College of Medicine site. Prior to enrollment, the student must obtain approval of the department and the Senior Associate Dean for Student Affairs and Admissions, if the student wishes to have the course recorded for credit.

The only acceptable grades upon repetition of a course for an F are grades of Honors (H), High Pass (HP), Pass (P); an R is not acceptable and will be recorded as a Failure (F). A Failure followed by a second Failure will result in a recommendation of dismissal. The outcome for remediation of an F is designated in Figure 1.

When remedial work is accomplished by having a student repeat the standard course at the UC College of Medicine, the student will receive any of the customary grades awarded (H, HP, P, R, F). For a preclinical course, when remedial work is accomplished by having a student repeat the course in the Summer Quarter (at the UC College of Medicine or elsewhere), the remediation grade will be either a P or F.

Failure to meet a requirement (for example, not taking an exam, not submitting papers or patient write-ups, failure to attend required clinical duties) without prior notification of the course director or designee will be treated as grounds for awarding an F for that part of the requirement.

C. CONSEQUENCES OF A REMEDIATE (R)

A Remediate (R) designates a student whose performance is below the minimum requirements for passing but not clearly failing. The below passing portion was judged remediable without repetition of the entire course. An R will be recorded on the student's official transcript. The student who receives an R in a course must meet the remedial requirements as specified by the department involved after consultation with the appropriate Promotion Board. Remediation may involve additional study and re-examination at a time specified by the department. The additional study and re-examination may take the form of clinical work when a clinical clerkship is remediated. The type of examination, time, and place will be specified by the department.

When the student completes the remedial work, a grade of P or F will be awarded. That is, an R remediated with a second R is recorded as a grade of Failure (F). The outcome for remediation of an R is designated in Figure 1.

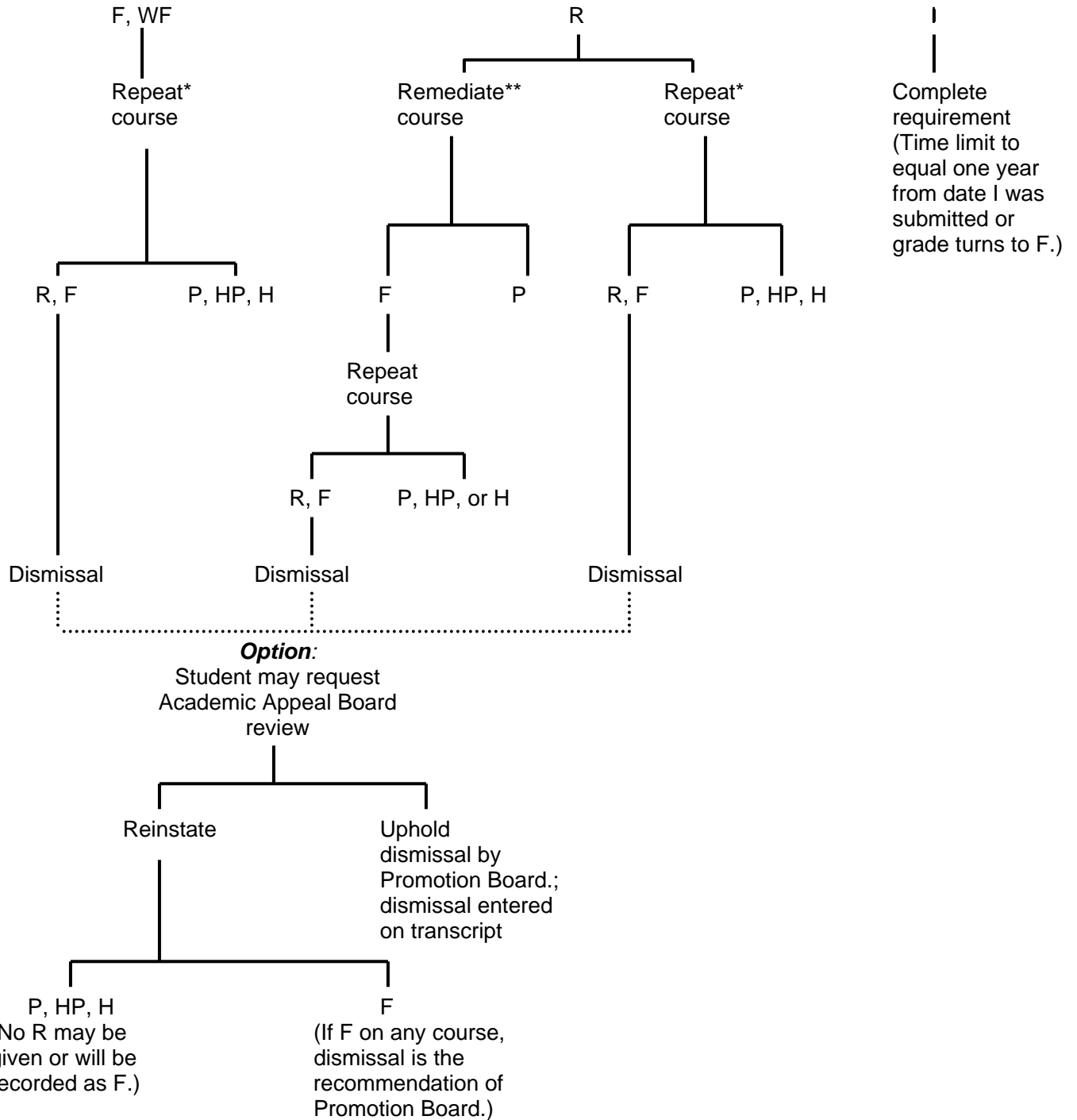
If a student earns an R and repeats the standard UC College of Medicine course, any of the customary grades may be awarded (H, HP, P, R, F).

For third year core clerkships, an R must be remediated no later than the January remediation exam date of the final year of enrollment. For all non-core third year courses, an R must be remediated by May 1 of the final year of enrollment.

D. CONSEQUENCES OF AN INCOMPLETE (I)

An Incomplete (I) is a non-grade designation assigned when a student fails to complete all the required work in a course for reasons (such as illness) acceptable to the Senior Associate Dean for Student Affairs and Admissions and the department. A student in the first or second year may not proceed into the work of the following year until a designation of I has been removed. A student in the third or fourth year must remove a designation of an I in core clerkships no later than January 1 of the final year of enrollment and in all non-core clerkships prior to or by May 1 of the final year of enrollment.

FIGURE 1: LOW GRADES RECEIVED AND OUTCOMES OF GRADE REMEDIATION



*Repeat = retake the entire course
 (a) If retaken in Summer Quarter, grade awarded is either P or F. (An R will count as F, H, HP may not be awarded.)
 (b) If repeated the following year at UC, grade awarded may be H, HP, P, R, F.

**Remediate = redo only the portion of a course which is a deficit. Remediating the portion results in a grade of P or F. (An R will count as an F; H, HP may not be awarded.)

E. CONSEQUENCES OF WITHDRAWAL FAILING

A Withdrawal Failing (WF) designates that a student was not passing the course at the time of withdrawal. A WF (as well as a WP or W) in a first and second year course must be remediated during the regular academic year; it may not be remediated in the Summer Quarter, and, in all years, it must be remediated at the UC College of Medicine. The only acceptable grade upon remediating a course in which a student holds a WF is a P, HP, or H. Earning an R or F will result in a recommendation of dismissal from the College for poor scholarship. A withdrawal automatically places the student on Individual Advancement (pp. 28-31). The withdrawal will appear on the official transcript as WF if the student's performance is not passing at the time of withdrawal.

F. ACADEMIC WARNING

1. Use and Consequences

- a. The Board gives a status of Academic Warning if, in its judgment, the student is at academic risk. (For academic risk for unprofessional behavior, see Professionalism Warning in V. J. Professional/ Noncognitive Deficiencies, pp. 26-27.) This usually entails the student having two or more below passing or a failing grade(s) (2 Rs, 1 F, 1 WF) in major courses. These do not necessarily need to be final grades, but can be interim scores that have been recorded by the departments. A notation of the potential need for a student to hold an Academic Warning may be entered in a Promotion Board's minutes regarding the student. Such notation would alert the student to the Board's concern regarding future academic problems. A student who has failed to pass the USMLE Step 1 or Step 2 CK/CS exams may be given an Academic Warning status.
- b. The nature of the Academic Warning status is one of indicating to the student that his/her studies must come first and that every effort should be expended in assuring success. To that end, the student must seek avenues of remediation both through the departments and through the Office of Student Affairs. Personal counseling can be obtained from a number of sources, and a student is encouraged to speak with the Senior Associate Dean for Student Affairs and Admissions or a designee about these.

Having an Academic Warning status, a student is not allowed to hold a University office, attend out of town trips on behalf of student organizations, pursue committee work, participate as a tutor in the matriculation program and is encouraged not to hold a job. The Board feels that to give an Academic Warning is to alert a student that he/she is in serious trouble; and, should the student fail to achieve the academic standards of the College of Medicine specified for each academic year, he/she can expect a recommendation of dismissal from the College by the Promotion Board.

2. Removal of Academic Warning

To have the Academic Warning status removed, a student must maintain two successive quarters with passing grades in major courses, i.e., receive no Fs or Rs. The passing grades may be interim grades. The successive quarters may include the quarters during which remediation is underway.

However, a Promotion Board may retain a student's Academic Warning status for a period longer than two quarters, particularly if a student is on Individual Advancement and carrying a reduced course load, or if a student presents other factors which in the judgment of the Board warrant continuance of an Academic Warning. Since the Academic Warning status is meant to alert the student that he/she is in significant academic difficulty, it is not recorded on the student's official transcript and does not affect financial aid.

G. REMEDIATION OF COURSEWORK

1. Options Available

- a. The course director will outline the remediation options in the course's Grading Policies Statement. (See Addendum 1)
- b. The final plan regarding overall remediation for academic work in a particular year is subject to Promotion Board review.
- c. Following the post-Spring Quarter meeting of the Promotion Boards (May for Year II; June for Year I), a student who is required to remediate one or more courses must meet with the Senior Associate Dean for Student Affairs and Admissions or a designee to discuss remediation options and develop a remediation plan. While a department may have available various options for remediation, it reserves the right to identify the method of remediation required for each student on an individual basis. The UC College of Medicine course director(s) is to be consulted in the selection of the plan. Each remediation plan must be approved by the course director and the Senior Associate Dean for Student Affairs and Admissions or a designee. (See Appendix IV, Medical Student Status Form) Remediation is to be fair, reasonable, and commensurate with the type of activity in which a deficiency occurred.

The UC College of Medicine course director and the Senior Associate Dean for Student Affairs and Admissions or a designee must both sign their approval of the remediation plan outlined on a Medical Student Status Form. (See Appendix IV) The student must also sign agreement to the plan. Copies of the final, signed remedial plan will be sent by the Senior Associate Dean for Student Affairs and Admissions to the course director. A copy will be maintained in the student's file. No student will receive credit for any form of remediation that has not been first approved in writing by the appropriate UC College of Medicine course director and the Senior Associate Dean for Student Affairs and Admissions or a designee.

- d. Each department needs to provide an in-house option for remediation. The in-house option of last resort would be repeating the course the following academic year at the UC College of Medicine.

A department may require repetition or advanced work within the department to serve as a form of remediation. However, remediation of a required clinical clerkship may not be accomplished by stating that successful completion of another required clerkship in the same year serves as remediation. (For example, passing the Internal Medicine Core Clerkship cannot substitute as remediation for a below passing grade in the Neurology Specialty Clerkship during the third year; however, passing a fourth year Neurology elective would substitute for remediation of the third year Neurology Specialty Clerkship, but it could not be doubly counted as both a fourth year elective and a third year course remediation.)

- e. Year I and II courses also permit a student to enroll in approved AAMC summer courses for remediation. The Year I and II Promotion Boards attempt to meet prior to the first date listed on the AAMC list of courses for remediation to permit a student who chooses to enroll adequate time to arrive for the opening session. Prior to enrollment, the student must obtain written approval on a Medical Student Status Form (see Appendix IV) of both the department and the Senior Associate Dean for Student Affairs and Admissions or a designee if the student wishes to have a remedial course recorded for credit.

2. Time and Scheduling

- a. A department or interdepartmental course director(s) has priority in scheduling the date when the remediation of a course should occur. Remediation dates will be announced at the start of the academic year for preclinical courses. Remediation of clinical coursework must be completed by May 1 of the year of graduation with the exception that core clerkships must be remediated no later than the January remediation exam date of the final year of enrollment and before starting the acting internship. Remediation dates for all clinical course exams will be the last workday of the week just prior to the start of the January and July clinical rotations or at a scheduled course exam date that does not conflict with ongoing coursework.
- b. Any Year I or Year II course(s) remediated at the UC College of Medicine must be completed on or before the dates specified by the College for summer remedial exams. The final grade for any Year I remediation done by a student at an approved AAMC site must be available not less than two work days prior to the August Promotion Board meeting. The Year I Promotion Board meeting must be held before the first day of Autumn Quarter of Year II. The final grade for any Year II remediation done by a student at an approved AAMC site must be available as early as possible so that the number of class

openings created by attrition can be known early enough to fill those spots with transfer students.

3. Remediation of One or Two Courses in Year I

- a. A student is required to pass four of the six major courses offered in Year I between the start of coursework and the last day of exams Spring Quarter to maintain enrollment in the College of Medicine. Remediation of first year courses may be done only following the conclusion of Spring Quarter exams.

The following conditions apply to the student who has met the above standards but has some deficiencies:

- (1) One grade of R or F; two grades of R; one grade of R and one grade of F: The course(s) are to be remediated no earlier than the Summer Quarter. An R or F remediated to a passing grade in the course(s) results in promotion to second year coursework.

An initial Failure followed by a second Failure or a Remediate results in the recommendation of dismissal.

When the initial grade is R, an R followed by a Failure results in a requirement that the student repeat and pass all six Year I courses the following year; failure (F, WF, R) to pass any course in the repeated year will result in a recommendation of dismissal.

The student with one R or F, two Rs, or one R and one F has the option, with approval of the Senior Associate Dean for Student Affairs and Admissions, to repeat the course(s) the following year along with all other Year I courses. When this option is chosen, all courses repeated must be passed; failure to do so will result in a recommendation of dismissal.

- (2) Two grades of F: All first year courses must be repeated the next academic year. Summer Quarter remediation is not permitted. Failure (earning an R or F) to pass any course in the repeated year will result in a recommendation of dismissal. (See VI. Individual Advancement, pp. 28-31, for specific requirements to maintain enrollment while in the Individual Advancement Program)

- (3) When repeating Year I, the student must participate in orientation except the White Coat Ceremony.

4. Remediation of One or Two Courses in Year II

- a. A student must pass at least three of five courses between the start of coursework and the last day of examinations Spring

Quarter to maintain enrollment in the College of Medicine. Remediation of second year courses may be done only following the conclusion of Spring Quarter exams.

- b. The following conditions apply to the student who has met the above standards but has some deficiencies: (Note: Where repeating the year is an option or requirement, repetition can occur unless doing so will exceed the requirement to complete all basic science courses in three years. In this instance, a recommendation of dismissal must be made.)
- (1) One grade of R or F; two grades of R; one grade of R and one grade of F: The course(s) may be remediated no earlier than the Summer Quarter. An R or F remediated to a passing grade in the course(s) results in promotion to third year coursework.

An initial Failure followed by a second Failure or a Remediate results in the recommendation of dismissal.

When the initial grade is an R, an R followed by a Failure results in a requirement to repeat and pass all five Year II courses in the following year; failure to pass any course in the repeated year will result in a recommendation of dismissal. Repetition of all courses can occur unless in doing so the student will exceed the requirement to complete all basic science courses in three years. In this instance, a recommendation of dismissal must be made.

The student with one R or F, two Rs, or one R and one F has the option, with approval of the Senior Associate Dean for Student Affairs and Admissions, to repeat the course(s) the following year along with all other Year II courses, as long as doing so will not exceed the requirement to complete all basic science courses in three years. If this option is chosen, all courses repeated must be passed; failure to do so will result in a recommendation of dismissal.

- (2) Two F grades: All second year courses must be repeated the next academic year. Summer Quarter remediation is not permitted. Failure (earning an R or F) to pass any course in the repeated year will result in a recommendation of dismissal. Repetition can occur unless doing so will exceed the requirement to complete all basic science courses in three years. In this instance, a recommendation of dismissal must be made.

5. Remediation of Courses in the Clinical Biennium

The third year course requirements consist of six core clerkships, one required specialty clerkship, and two selective specialty clerkships, and a required day-long seminar for a total of 96 credits. (See Appendix VII for a breakdown of courses and credits.) To maintain enrollment in the College,

a student must earn a minimum of 24 credits with passing grades in the first six months of enrollment in third year courses, and earn a minimum of 56 credits with passing grades by the final day of the student's last clerkship in the twelfth month of enrollment. Failure to meet either one of these requirements will result in dismissal for poor scholarship.

A student who earns an initial F in any two Year III courses, or an initial two Rs and one F, or an initial three Rs in any separate Year III courses will be recommended for dismissal. A student who earns an initial F in any two Year IV courses, or an initial two Rs and one F, or an initial three Rs in any separate Year IV courses will be recommended for dismissal. The Acting Internship is considered as two separate courses. For the clinical biennium as a whole, a student who earns any combination of four initial Rs and/or Fs will be recommended for dismissal.

- a. A student may not drop, delay, reorder or request time off from courses in his/her assigned third year rotation sequence (pathway) for the purpose of remediating clinical coursework. He/she must stay in sequence and remediate either during the remediation dates or at a scheduled course exam date that does not conflict with ongoing coursework. Designated free time, vacation time or an additional academic year must be used in which to schedule remedial clinical coursework. In some instances, a student may need to enter Individual Advancement. (See VI. Individual Advancement, pp. 28-31)

If an exam alone requires remediation, it is to be retaken at a scheduled exam date or on either of the clinical exam remediation dates; these occur on or about the last workday prior to the start of the January and July clinical rotations. If more than one exam requires remediation, special scheduling arrangements must be made with the course directors, subject to approval by the Year III/IV Promotion Board.

- b. When a student has met the minimal requirements to maintain enrollment (specified above), but has not passed all clerkships in the third year, any of the following remediation procedures are in order:
 - (1) The Year III/IV Promotion Board may require a student to repeat the entire third year curriculum.
 - (2) When repeating one or more, but not all, third year courses, core clerkships must be remediated no later than the January remediation exam date of the final year of enrollment and before the student enters the Acting Internship. All remediation of non-core third year courses must be completed by May 1 of the final year of enrollment. The Promotion Board encourages that remedial work be done at the earliest possible time and prior to taking any away electives so that evaluative comments regarding clerkship performance can be included in the MSPE. Should a student's MSPE need to be sent before remediation is completed, clarification of the nature of the problem and current

grade for all uncompleted courses (for example, an R) must be included in the letter.

- (3) A student who has experienced academic difficulty (i.e., has recorded an R or F during the first two years) will not be allowed to choose pathways M, N, S which permit enrollment in an early Acting Internship.
- (4) The scheduling of remediation will be decided by the course director in consultation with the Senior Associate Dean for Student Affairs and Admissions or a designee considering the student's schedule and not compromising the student's other clerkship assignments. Remedial examinations for clinical courses will be given on or about the last workday just prior to the start of the first clinical rotation in January and July or at scheduled course exam dates that do not conflict with ongoing coursework. All segments of non-core third year coursework must be remediated on or before May 1 of the final academic year. Core clerkships, however, must be remediated by January 1 of the final year of enrollment and before the student enters the Acting Internship.
- (5) Any repeated course must be passed. An F to F will result in dismissal. (An R in a repeated course is recorded as an F.)
- (6) When an advanced course, such as a fourth year elective, is the designated form of remediation for a third year clerkship, no credit is given toward a fourth year elective requirement.
- (7) Under ordinary circumstances, fourth year elective credit will not be given for elective coursework taken in the third year unless the work is a sanctioned curriculum activity (example: third year military requirement).

6. Evaluation of Performance during Remediation

- a. The criteria used to evaluate a student's performance when remediating a course shall not differ from the criteria applied to evaluate student performance in the class as a whole when the course was offered in the academic year immediately preceding the remediation.
- b. Students shall be informed in writing by the course director of the content areas and exam format in a re-examination, particularly if the program is a Year I or II self-study option at the UC College of Medicine. In addition, the date(s) of re-examination must be specified.

7. Financial Considerations of Remediation

The department or course directors need to have options for remediation which take into consideration the financial constraints of the student. For instance, if a low-cost option means offering a comprehensive exam and

the department is unwilling to develop its own exam, it may choose to use a USMLE subtest. The student may be asked to pay for the USMLE subtest administered by the department. Such cost would be less than a student would incur going to a summer course at another school.

The Financial Aid Office does not calculate into a yearly student budget expenses for remedial coursework taken at other campuses; thus, a student who requires remediation is expected to assume the expense.

H. FAILURE TO PASS UNITED STATES MEDICAL LICENSING EXAMINATION (USMLE) STEP 1 AND STEP 2 CLINICAL KNOWLEDGE AND CLINICAL SKILLS EXAMS (CK/CS)

1. Repetition of USMLE Step 1

- a. A student who does not pass USMLE Step 1 may be given an Academic Warning status.
- b. A student who does not pass USMLE Step 1 may retake the examination. A student will be permitted a total of three attempts to pass. Failure to pass on the third attempt will result in a recommendation of dismissal by the Promotion Board. For USMLE Step 1, this recommendation of dismissal may not be appealed, and the Dean=s dismissal of the student follows and is final.
- c. All repetitions of Step 1 must occur within one year of the date of receipt by the student of the first failing score. This time limit applies regardless of whether the student is on Individual Advancement or Leave of Absence. Delay beyond one year without Promotion Board approval will result in the Board's withdrawal of the student from enrollment in the College.
- d. No Year III coursework may be undertaken once a student is informed that USMLE Step 1 has not been passed. Because USMLE Step 1 results arrive in July, a student will be engaged in Year III coursework at the time. A student who does not pass USMLE Step 1 has two options:
 - (1) Terminate participation in coursework immediately upon notifying the course director.
 - (2) Terminate participation in coursework at the first logical juncture of the rotation. The date selected must be agreed to by the course director and the Senior Associate Dean for Student Affairs and Admissions or a designee.

At the option of the course director, partial credit may be awarded for the portion of the course completed, once USMLE Step 1 is successfully passed. The course director may ask a student to repeat the portion taken, if warranted. The student always has the option to repeat the whole rotation upon return to the course once USMLE Step 1 is passed. This method of determining credit will apply to all instances where a student is permitted to engage in coursework while awaiting USMLE results.

- e. When repeating USMLE Step 1 following a first failure, once the examination has been retaken, the student will be permitted to engage in coursework while awaiting USMLE Step 1 results. If the results are a failure, coursework will be stopped.
- f. When repeating USMLE Step 1 following a second failure, once the examination has been retaken, the student will not engage in coursework while awaiting USMLE Step 1 results. Only upon receipt of USMLE Step 1 results which record a pass can a student who has twice failed the examination resume coursework.
- g. On a case-by-case basis and in consultation with the student, the appropriate course directors and the student's advisor, the Office of Student Affairs will redesign the pathway of a student who must acquire additional study time to aid in preparing for repetition of USMLE Step 1. The redesign is done by the designee of the Senior Associate Dean for Student Affairs and Admissions and the Assistant Dean/Medical Registrar, who work closely with course directors. All changes in the pathway are to be done to create the least disruption of the student's schedule and the least amount of fluctuation in clinical course enrollment numbers. A Medical Student Status Form is to be completed by the student. (See Appendix IV)

2. Repetition of USMLE Step 2 CK/CS Examinations

- a. A student who does not pass USMLE Step 2 CK and/or CS may be given an Academic Warning status.
- b. A student who does not pass USMLE Step 2 CK and/or CS may retake the examination(s) and is permitted a total of three attempts to pass. Failure to pass on the third attempt will result in a recommendation of dismissal by the Promotion Board. For USMLE Step 2 CK or CS, this recommendation of dismissal may not be appealed, and the Dean's dismissal of the student follows and is final.
- c. When preparing for repetition of USMLE Step 2 CK or CS, a student will be permitted to continue clinical coursework. Rescheduling of coursework will follow the procedure outlined for repetition of USMLE Step 1.

I. FAILURE TO PASS THE CLINICAL COMPETENCY EXAM (CCX)

- 1. When a student fails part or all of the first administration of the CCX, no grade will appear on his/her transcript. A student who fails the first administration must meet with the Center for Competency Development and Assessment (CCDA) medical director to develop a remediation plan and complete it successfully, as determined by the director, before being eligible to retake the CCX.

2. The second CCX administration shall occur between October 1 and the last business day of January of the senior year. If a student passes the second administration, a grade of Pass (P) will be recorded on the student's transcript. If a student fails the CCX on its second administration, a grade of Failure (F) will be recorded on his/her transcript.
3. A student who receives a Failure on the second CCX administration will be permitted a third and final attempt to pass the exam. He/she must meet with the CCDA medical director, develop another plan, have the director certify that remediation has been completed, and repeat the examination before or on April 15 of the student's final year of enrollment.
4. A student who receives a Failure on the third CCX administration will be recommended for dismissal by the Promotion Board.

J. PROFESSIONAL/NONCOGNITIVE DEFICIENCIES

The Promotion Board recognizes the range and degrees of behavior that encompass professionalism. (See I, C. The Nature of Board Deliberations, paragraph 2, p. 2; III, G. Professional/Noncognitive Requirements for All Years, p. 12; and Appendix II) It acknowledges the potential for growth and change a student may possess in this area. However, a medical student who fails to maintain the degree of personal and professional standards deemed essential for all medical students by the Promotion Board is subject to action(s) by the Promotion Board which may include a recommendation of dismissal from the College of Medicine. A recommendation of dismissal may occur even though the student has all passing grades.

If there is uncertainty whether the standards in question are under the purview of the Promotion Board or Honor Council (see Addendum 2), the Office of General Counsel will determine which is appropriate.

1. Early Intervention and Professionalism

- a. When unprofessional behavior is observed or reported, whenever possible the first intervention is to be an informal conference with the student initiated by the course director. In instances when the unprofessional behavior occurs in other academically related activities or settings, the Senior Associate Dean for Student Affairs and Admissions will initiate the conference.
- b. The course director or Senior Associate Dean for Student Affairs and Admissions informs the student of the problem, provides examples of the problematic behavior, and gives direct counsel. Corrective actions are to be specified and outcomes observed. If the behavior persists or resolution is unsatisfactory, the problem may be brought to the Promotion Board.

2. Promotion Board Review of Professionalism

- a. When a decision is made to report unprofessional behavior to the Promotion Board, the report must be brought to the Board in writing.
- b. The written report may come from a course director, the Senior Associate Dean for Student Affairs and Admissions, and/or may be submitted by the Executive Secretary to the Promotion Board when a student's final grade/evaluation records a deficit in professionalism. Courses that do not use an evaluation form must attach a letter or supplemental evaluation form to the grade.

- c. The Promotion Board will review the documentation of the problem and any action taken to overcome the deficiency. It may ask the student to appear before the Board. A student may request to appear before the Board.
- d. The Board may choose to do any or a combination of the following:
 - (1) Summarize in its minutes the conclusions of its review, which may include taking no action.
 - (2) Place the student on a Professional Warning status.

A majority of the voting members of the Board must agree to this designation and specify the parameters that will result in removal of this status. A majority of voting members must agree on removal of Professional Warning status.

While on Professional Warning status, the student will be required to engage in corrective actions. These may include monitoring of performance; psychological assessment, evaluation and follow-up; a Leave of Absence; specifications regarding the student's academic program and schedule; periodic updates or appearances before the Board; consultation and advising, or other actions.

- (3) Inform other appropriate course directors of the student's need to engage in corrective actions so they can assign optimal instructional situations and provide appropriate mentoring and monitoring.
 - (4) Determine if a statement regarding the professionalism problem should be placed in the student's MSPE; or, if the MSPE has been sent, specify that the MSPE should be reissued with appropriate revision; and/or specify that the Senior Associate Dean for Student Affairs and Admissions inform the student's matched residency program of the specific needs which the student has regarding professional guidance.
 - (5) Recommend dismissal for unprofessional behavior.
3. New or Repeated Instances of Unprofessional Behavior
- a. If the unprofessional behavior noted in a first written report is not corrected by the student and the behavior continues, or if a new, separate, distinct case of unprofessional behavior is brought in writing to the Promotion Board, the Board may take any of the actions listed above.
 - b. When a third report of unprofessional behavior (repeat or new) is brought in writing to the Promotion Board, the Board will recommend dismissal of the student for failure to meet the College's standards for professional behavior.

VI. INDIVIDUAL ADVANCEMENT

Individual Advancement is a program that offers a student additional time to complete the educational program. The program is intended for a student who is experiencing personal difficulties of a non-academic nature.

A. INITIATION OF PLACEMENT ON INDIVIDUAL ADVANCEMENT

1. A student with personal difficulties of a non-academic nature may elect to enter Individual Advancement with final approval by the Senior Associate Dean for Student Affairs and Admissions.
2. A student whose academic performance makes an extended schedule necessary (i.e., completing two years in three years) may be placed on Individual Advancement only at the discretion of the Promotion Board.
3. A student entering Individual Advancement for non-academic reasons or placed on Individual Advancement at the discretion of the Promotion Board, when academic performance makes an extended schedule necessary, is considered to be enrolled full time. (See Appendix VIII)

B. DEVELOPMENT OF AN INDIVIDUAL ADVANCEMENT PROGRAM PLAN

1. The structure of an Individual Advancement Program should be developed in conjunction with the Senior Associate Dean for Student Affairs and Admissions or a designee. Variations in the guidelines of the Individual Advancement Program must be reviewed and approved by the Promotion Board.
2. Course prerequisites must be observed in sequencing an Individual Advancement Program.
 - a. Prerequisites for first and second year courses

<u>Courses</u>	<u>Prerequisite(s)</u>
Brain and Behavior I	Gross Anatomy (Autumn, Winter)
Microbiology	Biochemistry
Pharmacology	Biochemistry, Physiology
Brain and Behavior II	Brain and Behavior I
Pathology	Histology and Cell Biology, Physiology
Clinical Foundations of Medical Practice 2	Clinical Foundations of Medical Practice 1, Brain and Behavior I

b. Prerequisites in the Clinical Biennium

Acting Internship
Electives

Internal Medicine Core Clerkship
Completion of all core clerkships
(exceptions granted only to
students with military obligations
or when special circumstances
occur and are approved by the
Senior Associate Dean for
Student Affairs and Admissions
or a designee)

3. The sequence of courses needs to allow a student to enter the next year's activities with strong skills and a solid knowledge base. Review activities or audit of courses may be part of the Individual Advancement Program sequence.

a. Pathology and Clinical Foundations of Medical Practice 2 must be taken for credit in the year immediately preceding the Clinical Biennium.

However, occasionally a student successfully completes the first year curriculum but then experiences problems in the second year of enrollment. If the problems do not lie with Pathology and/or Clinical Foundations of Medical Practice 2, and if these two courses are passed during the second year of enrollment, Pathology and Clinical Foundations of Medical Practice 2 must still be audited in the third year of enrollment prior to the Clinical Biennium. That is, the student would remediate in the third year of enrollment any Year II course deficiencies (Pharmacology, Microbiology, Brain and Behavior II) and, at the same time, audit Pathology and Clinical Foundations of Medical Practice 2. In all instances when Clinical Foundations of Medical Practice 2 is audited, the student must be actively involved in physical diagnosis.

b. While a student's primary effort must go toward courses being remediated or being taken for the first time, frequently, auditing of courses already passed may be a desirable programmatic feature. Auditing allows a student to strengthen his/her fund of knowledge while completing course requirements and/or remediating.

4. The minimum requirements for retention and advancement while on Individual Advancement should be reviewed in detail with the student.
- a. Years I and II. A student entering Individual Advancement in the first year of enrollment must pass four courses between the start of course work and the last day of exams Spring Quarter.

While on Individual Advancement during the second year of enrollment, a student must pass three first or second year courses by the last day of Spring Quarter in the second year. All first year courses must be passed by the July date specified for first year courses in Summer Quarter of the second year of enrollment. At that point in the academic year when all first year courses have been passed, the student will be advanced to the status of a second year student, although continuing in the Individual Advancement Program.

All second year courses must be passed by the last day of exams in the Summer Quarter of the third year of enrollment on Individual Advancement to advance to Year III. In addition, the requirements for passing USMLE Step 1 must be met. (See Specific Requirements for Year II, pp. 9-10)

If a student withdraws from a course during the academic year, the withdrawal automatically places the student in the Individual Advancement Program. The student will then have to complete the course in the next academic year and within the time limits for retention as described above.

- b. Clinical Biennium. A student who takes three years to complete the Clinical Biennium will have his/her progress monitored by the Year III/IV Promotion Board. All core clerkships must be completed no later than the January remediation exam date of the final year of enrollment. A passing grade must be recorded for the Internal Medicine Core Clerkship before starting the Year IV Acting Internship. If the Acting Internship follows immediately after the Internal Medicine Core Clerkship, the student may begin the Acting Internship. However, should the student not pass the Internal Medicine Core Clerkship, withdrawal from the Acting Internship would follow. Any exceptions must be approved by the Year III/IV Promotion Board and the Senior Associate Dean for Student Affairs and Admissions.

When maximum enrollment exists and prevents a student on Individual Advancement from securing a place in a core clerkship and when the student has completed at least three of the required six core clerkships, the Registrar may approve enrollment in a UC College of Medicine senior elective. It may not be an away (except military), special or part time elective nor one requiring the preparation missing because of an uncompleted core clerkship.

All non-core third year courses must be passed by May 1 of the final year of enrollment.

The Year IV Acting Internship and elective requirements must be passed by the last day of Spring Quarter of the final year of enrollment.

The requirements for taking and recording a passing score on USMLE Step 2 Clinical Knowledge and Clinical Skills Exams to graduate must be met. (See Specific Requirements for Year IV, p. 11)

C. APPROVAL OF AN INDIVIDUAL ADVANCEMENT PROGRAM

To enter Individual Advancement, the student must submit a Medical Student Status Form to the Registrar to officially record the change in his/her academic program. (See Appendix IV) The form must have the signature of the Senior Associate Dean for Student Affairs and Admissions or a designee. In Years I and II, the student must have his/her Individual Advancement course schedule approved by the Promotion Board. For Years III/IV, the computerized enrollment process, which requires approval of enrollment in courses by the course directors and Registrar, must be used to establish the course sequence.

D. PROGRESS DURING INDIVIDUAL ADVANCEMENT

Once a prescribed Individual Advancement Program has been initiated, it is the responsibility of the student to maintain appropriate contact with departments and the Dean's Office to assure his/her schedule allows for completion of coursework within times prescribed. (See also Addendum 3. Satisfactory Academic Progress for Financial Aid Eligibility for Medical Students)

VII. LEAVE OF ABSENCE

A. REQUEST FOR LEAVE OF ABSENCE

1. All requests for a Leave of Absence from the College of Medicine must be submitted in writing on a Medical Student Status Form (Appendix IV) to the Senior Associate Dean for Student Affairs and Admissions. All programmatic alterations for academic reasons must be reviewed by the Senior Associate Dean for Student Affairs and Admissions, who will, except in emergency situations, present the request to the Promotion Board for its approval. The Senior Associate Dean for Student Affairs and Admissions may approve a Leave of Absence for academic opportunities. The Senior Associate Dean of Student Affairs and Admissions may not approve a Leave of Absence for academic problems. On occasion, a student who requests a Leave of Absence may be asked to be present for the Promotion Board meeting at which the request is heard.
2. A student may be placed on a Leave of Absence by the administration, if the circumstances warrant.

3. The Senior Associate Dean for Student Affairs and Admissions will notify, via the Medical Student Status Form, the appropriate course directors that the student is on Leave. The student's grade (WP, WF, W or final grade) at the time a Leave of Absence begins will be recorded on the official transcript. Withdrawal from all or a portion of the curriculum without securing approval through an official Leave of Absence will result in an automatic grade(s) of Failure (F).
4. The Promotion Board must give final approval to all Leaves of Absence.

B. LENGTH OF LEAVE OF ABSENCE

A student accepted into medical school should expect to devote four years to pursuance of an MD degree. A student must maintain a regular rate of progress and must demonstrate the capacity to handle the customary volume of academic work expected of a medical student. Ample options to pursue alternate academic experiences within the existing curriculum time frame are present.

1. The usual length of a Leave of Absence is one year. The total Leave of Absence years allowed a student is two years. One or two Leave of Absence years may occur only in the basic science years (Years I and II). Only one year of Leave of Absence time may be accumulated in the clinical years (Years III and IV). If two Leave of Absence years have occurred in the basic science years, additional Leave of Absence time is not permitted for a student in the clinical years. On the other hand, one year of Leave of Absence could occur in the basic science years, and one year could occur in the clinical years for a maximum of two years of Leave of Absence.
2. Infrequently, a student may request a Leave of Absence for less than a year. A Promotion Board may also place a student on a Leave of Absence for less than a year.

C. LEAVE OF ABSENCE AND THE ACADEMIC CLOCK

1. The time during which a student is on a Leave of Absence is not generally counted in the total number of years a student may have to complete a degree. When a student in the basic science years (Years I and II) enters a Leave of Absence during or after the seventh week of Autumn Quarter, the year in which the Leave begins counts toward the total years a student may have to obtain the MD degree. When a student in the basic science years enters a Leave of Absence prior to the seventh week of Autumn Quarter, the year in which the Leave begins does not count toward the total years a student may have to obtain the MD degree. When a student enters a Leave of Absence at any time during the clinical years, the year in which the Leave begins does not count toward the total years a student may have to obtain the MD degree.
2. A student is permitted a maximum of three years in which to complete the two basic science years (Years I and II) on Individual Advancement (see pp. 28-31). A Leave of Absence year would count as part of the three-

year maximum if the Leave were begun during or after the seventh week of Autumn Quarter in either Year I or II. It would not count as part of the three-year maximum if the Leave were begun prior to the seventh week of Autumn Quarter.

3. A student is permitted a maximum of three years in which to complete the two clinical years (Years III and IV) on Individual Advancement. A Leave of Absence does not count as part of the three-year maximum for the clinical years.

D. ACTIVITIES WHILE ON LEAVE

While on a Leave of Absence, a student is not permitted to audit a course at the College of Medicine unless it is a prerequisite specified by the Promotion Board as essential to ensure up-to-date knowledge and facilitate reentry to the curriculum. For example, a review of Pathology and Clinical Foundations of Medical Practice 2 Physical Diagnosis is usually required to enter third year coursework when a Leave of Absence is taken following second year coursework. The University's malpractice coverage accompanies official enrollment in the College and prerequisites or similar activities undertaken at the direction of the Promotion Board.

E. REENTRY AND ACADEMIC REQUIREMENTS FOLLOWING A LEAVE

1. Prior to reentry following a Leave of Absence, regardless of length, a student must submit a letter (not an e-mail message) to the Senior Associate Dean for Student Affairs and Admissions confirming his/her intent to return and explaining how the need for a Leave of Absence has been resolved. A copy of the letter must be sent to the Executive Secretary to the Promotion Board. The Promotion Board may specify any documentation to support the student's readiness to resume coursework. Reentry may be granted by the Promotion Board if it is determined that the circumstances precipitating the Leave have been ameliorated. If a student does not respond in writing at the end of the Leave of Absence year or at a date specified by the Promotion Board, he/she will be withdrawn from the College of Medicine.
2. For the basic science years, the student, upon return from a Leave of Absence, must take all courses in the academic year (Year I or Year II) to which he/she returns. For example, a student who enters a Leave of Absence during Year I, upon return to coursework, must take all previously entered or completed Year I courses as well as those Year I courses not previously taken. The minimum requirements for retention in Year I and Year II apply (see pp. 9-10). All grades, including grades in repeated courses (including courses previously passed) will be recorded on the official transcript. The first grade will be used to calculate class rank.

VIII. ACADEMIC RIGHTS OF STUDENTS

A. GRIEVANCES

Should a student have cause to request a review of any treatment he/she has received during any portion of the academic program, a grievance procedure may be undertaken. Such grievances may include complaints regarding grades or evaluation, program requirements, violation of academic freedom, sexual, racial or religious discrimination or harassment, and all other grievances. Appeal of Promotion Board decisions and Honor Council decisions may not be heard or appealed through the grievance procedure, but are heard through other designated procedures. (See Academic Appeal, pp. 37-40 and Addendum 2, General Professional Standards: Guidelines for the Honor Council) A grievance procedure may be undertaken by an individual student; it may not be presented as a group submission.

1. Resolution of Grievances Prior to Seeking a Grievance Committee Hearing

- a. All requests for changes in grades and/or evaluations, or any issues raised in paragraph 1 of this section, will ordinarily first be discussed with the course director; such discussion must occur within ten (10) business days following the incident giving rise to the issue or the notification of the grade and/or evaluation. (Grades and/or evaluations are to be distributed when a student is engaged in coursework or present at the College or sent to an address provided by the student. The course director shall be present and available for consultation when grades are distributed.) All changes in grades and/or evaluations made by the course director must be sent to the Dean's Office within ten (10) business days following the student's notification of the grade/evaluation.
- b. If the grade and/or evaluation remains unsatisfactory after the course director's review or the issue is unresolved after the (10) business days, and if within fifteen (15) business days of the notification of the grade/evaluation or the incident giving rise to the issue, a grievance may be brought in writing to the department director. A copy of the written grievance must be given to the course director and to the Senior Associate Dean for Student Affairs and Admissions at the time it is given to the department director.

The department director (or designee) will conduct a departmental review that shall include (a) meeting with the course director, (b) meeting with the student and, if desired, the student's advisor, and (c) consulting as appropriate with other faculty and staff. The department director then informs the student, the course director, and the Senior Associate Dean for Student Affairs and Admissions in writing of the department's decision generally within ten (10) business days of receipt of the written grievance. If the issue cannot be resolved at the departmental level to the student's satisfaction, the student may request in writing, within five (5) business days of learning the results of the department director's decision, that a

review be instituted by the Senior Associate Dean for Student Affairs and Admissions.

- c. If the grievance involves the department director personally, the grievance should be brought in writing to the Senior Associate Dean for Student Affairs and Admissions within ten (10) business days of the incident giving rise to the issue or receipt of the course grade and/or evaluation.

2. College of Medicine Grievance Committee for Student Grievances

- a. The Senior Associate Dean for Student Affairs and Admissions will appoint an ad hoc committee to hear a student's grievance. It will consist of five faculty members and one senior medical student. One of the faculty members will be appointed to serve as a nonvoting committee chair. The Senior Associate Dean for Student Affairs and Admissions will attend as an ex-officio member.
- b. Committee procedures shall be initiated upon receipt of a written grievance from the student in the Office of Student Affairs. The Senior Associate Dean for Student Affairs and Admissions shall set the time, date for the hearing, and notify in writing the student, the Dean of the College, committee members and others with legitimate interest.
- c. The student may elect to have an advisor present at the grievance hearing. If an advisor is to be present, the name and identity of the advisor is to be given in writing to the Senior Associate Dean for Student Affairs and Admissions five (5) business days in advance of the grievance hearing.
- d. The student shall have the right to present witnesses, evidence and arguments on his/her behalf. The committee, the department or individuals in question may request the presence of witnesses and production of evidence by the student or other persons. All requests to have a witness(es) appear must be made to the Senior Associate Dean for Student Affairs and Admissions five (5) business days prior to the hearing, and written permission from the Senior Associate Dean of Student Affairs and Admissions must be granted for the witness(es) to be present.

In advance of the committee meeting, the chair may specify a reasonable time within which the student may provide written or documentary evidence or material, as he/she believes to be relevant to the committee. The committee may appoint an ad hoc fact-finding panel to gather such information if the committee feels this may be of assistance in preparing a hearing.

All materials must be in the hands of the Grievance Committee and the student two (2) business days in advance of the hearing.

- e. The committee shall endeavor to resolve all grievances within four weeks (20 business days) of receipt of the grievance and issue a recommendation within ten (10) business days following the hearing.
3. Operating Procedures for the Grievance Committee
- a. The Grievance Committee hearing shall be convened by the chair who will review the hearing procedures with the committee prior to the start. The entire hearing, with the exception of the committee's final deliberation, will be transcribed by a court reporter. The transcription will be kept on file as part of the grievance record.
 - b. The chair will commence the hearing. The student, his/her advisor, if any, the Senior Associate Dean for Student Affairs and Admissions and the person against whom the grievance is brought will be present during the hearing. Neither the student's advisor nor the Senior Associate Dean for Student Affairs and Admissions will speak before the committee on the student's behalf.
 - c. The student will speak first to present the basis for the grievance. The student has 30 minutes to present his/her case, including witnesses and any private discussions with an advisor. Following the initial presentation and each witness, the committee members may ask questions. Time spent responding to the committee's questions does not count against the 30 minutes.
 - d. The person against whom the grievance is brought speaks second. The person has 30 minutes to present his/her case, including witnesses. Following the initial presentation and each witness, the committee members may ask questions. Time spent responding to the committee's questions does not count against the 30 minutes.
 - e. Individuals asked to appear by the Grievance Committee will be heard third. Maximum time for this section is 30 minutes. The time spent responding to the committee's questions does not count against the 30 minutes.
 - f. Both sides may take an additional five minutes for a summary statement or response.
 - g. Witnesses will only be present during their time of presentation to the Grievance Committee. Questioning will be done only by the Grievance Committee members.
 - h. The Grievance Committee will be free to discuss the case with both sides in a question and answer format for approximately the next 30 minutes. All questions will be asked by the committee chair and/or members. Neither the student nor the person against whom the grievance is brought may direct questions to each other.
 - i. Next, all individuals, except the five voting members and the chair of the Grievance Committee, leave the room. The Grievance Committee will deliberate and make a final recommendation. The

committee may recall any witnesses to provide clarification in the presence of the student, advisor, and person against whom the grievance was brought.

- j. The chair, without unnecessary delay, shall provide the Dean with a letter stating the issues, summarizing the evidence, giving the recommendation of the committee and its basis for the decision.
- k. The Dean of the College of Medicine will communicate the recommendation of the Grievance Committee and his decision in writing to the student without unnecessary delay. The Dean will also make his decision known to the Grievance Committee chair, to the person against whom the grievance was brought and his/her department director, the Senior Associate Dean for Student Affairs and Admissions, and the Promotion Board. In all instances, the final decision rests with the Dean.

B. ACADEMIC APPEAL

1. Decision to Seek Appeal

A student recommended for dismissal may appeal this recommendation in accordance with these Guidelines for Promotion Boards. The student must make the request in writing to the Senior Associate Dean for Academic Affairs within five (5) business days of receipt of the written recommendation of dismissal, or forfeit any right of appeal. If no appeal is sought, then the Promotion Board's dismissal stands and record of it appears on the student's official transcript.

A student who initiates the appeal process, but later desires not to pursue the appeal and instead withdraw from the College of Medicine, must act to withdraw within ten (10) business days of receipt of the recommendation of dismissal.

Should the student choose to appeal, he/she must consider the following items and submit a decision regarding each. The decision must be submitted in writing at the time the written request for an appeal is made to the Senior Associate Dean for Academic Affairs, i.e., within five (5) business days of receipt of the written recommendation of dismissal.

- a. The student may have a medical student representative appointed as a member of the Academic Appeal Board. The student must indicate in writing whether he/she wishes to have a student present.
- b. The student may submit new information not previously considered by the Promotion Board. The nature of the new information must be stated. The new information must be relevant to the student's academic performance and represent extreme and extenuating circumstances. In rare instances where the information is not of the type adaptable to a written format, the student may ask witnesses to appear on his/her behalf. The names of all witnesses and their identities must be submitted in writing at the time the appeal request

is made. All witnesses must be approved by the Senior Associate Dean for Academic Affairs. It is the student's responsibility to make arrangements for his/her witnesses to appear at the hearing.

- c. The student may select an advisor of his/her choice to be present for the hearing, except for Board deliberations. If an advisor is to be present, the name and identity of the advisor must be given in writing at the time the appeal request is made. The advisor may not be a Dean's Office staff member.

When an appeal is requested, the student may continue coursework during the appeal process at the discretion of the Promotion Board and until and in the event the Dean renders a final decision dismissing the student. However, during this time, the student's first priority is to the activities of the appeal process. Alternatively, the student may temporarily halt current coursework. In event the student chooses this option or the Dean specifies that the student stop coursework, an Incomplete (I) will be given in the course(s) of current enrollment until coursework is completed or a Withdrawal, Withdrawal Pass or Withdrawal Failure is awarded if the dismissal is upheld. The Academic Appeal Board hearing should be held at the earliest date possible so the issue of the student's enrollment status is resolved expeditiously.

2. Academic Appeal Board Members

When an appeal is requested, the student makes the formal appeal before an Academic Appeal Board whose members are appointed by the Senior Associate Dean for Academic Affairs. The Board shall consist of the following:

- a. A minimum of five faculty members at the associate professor level or above, none of whom have had significant interaction with the student in an academic or nonacademic setting. Members of the Honor Council may not serve. One of the five faculty members shall be designated as chair.
- b. A medical student, if a student representative is requested by the student seeking an appeal, which shall be an upper-class student appointed by the Senior Associate Dean for Academic Affairs.

3. Role of the Academic Appeal Board

The Academic Appeal Board shall review the student's file, the Promotion Board actions and any new information submitted. The Board may invite others to appear before it to provide information. Those invited may include Dean's Office staff, the Promotion Board chair or others as needed, within the discretion of the Academic Appeal Board.

The role of the Academic Appeal Board is to determine the student's fitness to pursue his/her medical career and whether sufficient extreme and extenuating circumstances exist to set aside the Promotion Board's recommendation of dismissal. The Academic Appeal Board must give serious consideration and weight to the recommendation of the Promotion Board; and, in the absence of sufficient demonstration of extreme and extenuating circumstances, as noted above, the recommendation of the Promotion Board shall stand.

4. Distribution of Appeal Materials

The Senior Associate Dean for Academic Affairs shall notify the student and Academic Appeal Board members of the hearing date. In advance of the hearing, the Senior Associate Dean for Academic Affairs shall provide the student and all Board members with all the hearing documents, including any new information submitted, the student's complete file, the names and identities of all who will appear on behalf of the student at the hearing. Should the Board members desire to have witnesses appear to provide information; the chair will notify the Senior Associate Dean for Academic Affairs who will communicate in writing the witnesses' names and identities to the student. All materials must be in the hands of the Academic Appeal Board members and the student two (2) working days in advance of the hearing.

5. Operating Procedures for the Academic Appeal Board and the Dean

- a. The Academic Appeal Board hearing shall be convened by the chair. The entire hearing, with the exception of the Board's final deliberation, will be transcribed by a court reporter. The transcription will be kept on file as part of the appeal record.
- b. The student and his/her advisor, if any, will be present during the hearing. The advisor does not speak before the Board on the student's behalf.
- c. The student will speak first to present any new information and/or to highlight comments from the appeal letter, which might help to clarify the case. The student has 30 minutes to present his/her case, including witnesses. Following the initial presentation and each witness, the Appeal Board members may ask questions. Time spent responding to the Board's questions does not count against the 30 minutes.
- d. Individuals asked to appear by the Academic Appeal Board will be heard next. Maximum time for this section is 30 minutes. The time spent responding to the Board's questions does not count against the 30 minutes.
- e. The student may take an additional five minutes for a summary statement or response.
- f. Questioning will be done only by the Academic Appeal Board members. All individuals, with the exception of the student and advisor, if present, shall be in attendance only during the time of their presentation to the Board.
- g. The Academic Appeal Board will be free to discuss the case with the student in a question and answer format for approximately the next 60 minutes.

- h. Next, all individuals, including the student, advisor and court reporter, will be asked to leave so that the Academic Appeal Board may deliberate and make a final recommendation. The Academic Appeal Board may recall any witnesses to provide clarification in the presence of the student, advisor and court reporter, but new information may not be presented.
- i. The chair, without unnecessary delay, shall provide the Dean with a letter stating the recommendation of the Board and the basis for the Board's decision.
- j. The Dean of the College of Medicine will communicate the recommendation of the Academic Appeal Board and his decision in writing to the student without unnecessary delay. The Dean will also make his decision known to the Academic Appeal Board chair, to the Senior Associate Dean for Academic Affairs and the Senior Associate Dean for Student Affairs and Admissions.
- k. When the Academic Appeal Board recommends dismissal and the Dean upholds this recommendation, a notation of the dismissal is entered on the student's official transcript. If an appeal is sought and the Academic Appeal Board recommends reversal of the recommendation of dismissal and the Dean concurs, no statement regarding dismissal or reversal of the recommendation of dismissal is recorded on the student's permanent transcript. In either event, the entire appeal file shall be maintained as part of the student's permanent file.

IX. PARTICIPATION IN SCHEDULED EDUCATIONAL ACTIVITIES

A. ABSENCE FROM SCHEDULED ACTIVITIES

1. Excused Absences

Excused absences are those occurring because of (a) illness, accident or a major catastrophic event; (b) attendance of an event to present research or serve as the College's official representative; and (c) taking USMLE Step 2 CK/CS in Year IV.

An excused absence for any reason must provide (a) proper notification and (b) acceptable documentation of the reason (see below).

An excused absence permits the course director to specify time and nature of make-up activities.

2. Unexcused Absences

An unexcused absence is one occurring for reasons other than those named above and/or lacks proper notification and/or documentation of the reasons for absence. When the absence occurs in a required and/or graded activity, a zero (no credit) is automatically given. No make-up is permitted.

There is no valid reason for absence in the clinical years without prior notification or, in instance of illness, accident or major catastrophic event, the immediate notification of the course director or his/her designee. An excusable reason for absence that occurs without prior or immediate notification in the clinical years will be treated as an unexcused absence and may result in a failing final course grade.

3. Notification of Absence in Year I and II

- a. To document accurately the time, date and reason for an absence for which an excuse will be requested, the student is to notify directly (call) the Assistant Dean/Medical Registrar of the College of Medicine. For an examination, other required or graded activity, the course director and/or designee must also be called at the earliest time possible, customarily prior to the start of the exam/required graded activity.
- b. In instance of illness, a written excuse from the student's personal physician or from the University of Cincinnati Student Health Service physician is to be submitted to the Assistant Dean/Medical Registrar of the College of Medicine. The note from the physician must include the date(s) of excused absence and the date seen by the physician. For accident or other catastrophic events, other documentation is to be provided as specified by the Assistant Dean/Medical Registrar of the College of Medicine.
- c. The Assistant Dean/Medical Registrar of the College of Medicine will do the following in event of an absence:
 - (1) Call immediately the appropriate course director(s) or designee to give notification of the student's absence.
 - (2) Complete a Medical Student Status Form (see Appendix IV) recording the absence, date and reason; and send a copy to the appropriate course director(s) to verify that the absence is excused.
- d. Immediately upon return to coursework, it is the student's responsibility to speak with the course director to schedule make-up. Consultation in advance with Student Affairs staff and/or an advisor may be advisable in scheduling make-up with the course director. (See Figure 1, p. 16, describing handling of an Incomplete.)

A Medical Student Status Form is to be completed and submitted to the Assistant Dean/Medical Registrar to verify the date of the make-up.

A scheduled make-up activity or examination for an excused absence, which is not completed at the specified or prearranged time, will be awarded a Failure grade.

4. Notification of Absence in Years III and IV

- a. The student is to notify directly (call) both the Assistant Dean/Medical Registrar of the College of Medicine and his/her immediate clinical instructor (course director, attending, resident, or preceptor, etc.) according to the instructions given during orientation to the clinical course. If instructions are not given, the course director must receive notification.
- b. In an instance of illness, a physician's excuse will be required as described above for Years I and II. The excuse is to be submitted to the Assistant Dean/Medical Registrar of the College of Medicine who will complete the Medical Student Status Form and provide the course director with a copy of the form. The excuse is not copied to the course director.
- c. There are no valid reasons for absence in the clinical years without prior notification or, in instance of illness, accident or major catastrophic event, the immediate notification of the course director or his/her designee. Absence for USMLE Step 2 administration requires prior notification of the course director. One day of absence is permitted to take the USMLE Step 2 CK exam. Scheduling the Step 2 examination during an Acting Internship should be avoided. (Note: The number of absence days permitted to take the USMLE Step 2 CS exam will be established by the Clinical Biennium Curriculum Committee and announced as USMLE administration details are released for the CS exam.)

Absence from a course without written notification on a Medical Student Status Form of the course director and Assistant Dean/Medical Registrar of the College of Medicine may result in the award of a below passing grade (R or F). In all cases of absence, a student is required to check with the course director who will establish the nature of the make-up work to be done to fulfill course requirements.

5. Scheduling Make-up

a. Years I and II

Make-up examinations are to be taken within one week of when the student is capable of returning to class. Other assignments, such as papers, need to be completed no later than one day prior to the Year I or II Promotion Board meeting of the current quarter.

b. Years III and IV

Two make-up exam dates are specified annually for Years III and IV. One is during the Winter Holiday and the other is in June between the end of Year III and start of Year IV coursework. The dates are set annually to assure a student adequate preparation time. Preparation for a make-up exam in a first clinical rotation while completing a second rotation can jeopardize a student's performance in both activities; therefore, make-up examination dates which allow unscheduled or vacation time to be used for preparation are to be used for make-up and remedial exams in the clinical years.

6. Enrollment Status

A student's enrollment status must be known at all times, and a student's whereabouts at all scheduled academic times must be available to the Assistant Dean/Medical Registrar of the College of Medicine. If a student fails to contact the registrar or course director/designee in event of an absence or other unapproved and/or unannounced change in schedule, the Senior Associate Dean for Student Affairs and Admissions will designate a student's status. A student is to record any change in status on a Medical Student Status Form, secure the appropriate signatures, and submit the form to the Assistant Dean/Medical Registrar of the College of Medicine. A sample of the Medical Student Status Form appears in Appendix IV.

7. Special Curriculum Situations

a. Year II

On occasion, during the first and second year, special assignments for a course occur which overlap the scheduled time of another course. The special assignments of one course cannot take precedence over the sanctioned time of another course. The only instances where special assignments have been sanctioned are the Clinical Foundations of Medical Practice 2 pelvic and urologic examinations, which have been given official sanction by the Year II Curriculum Committee, and may be done by permitting a student to be absent during another scheduled course (Microbiology and Pathology), but not their examinations.

b. Year IV

In Year IV, only if sanctioned by the course director, interviewing for a residency may be an excused absence. An absence for an interview should be for one or at most two days during a four-week rotation. It is the course director's prerogative to allow or deny an absence for interviewing. Not all course directors grant an excused absence for this purpose; a student needs to inquire about the course director's policy in advance of enrollment. If an absence is permitted, the course director must receive advance notification and proper documentation from the student. Make-up work may be required.

B. Employment during Clinical Rotations

Students participating in clinical rotations with on-call schedules are strongly recommended to avoid participation in any outside activities that compromise their effectiveness on the rotation.

APPENDIX IROSTER OF MEMBERSHIP OF THE PROMOTIONS BOARDSYear I Promotion Board

Chair (Basic Science)*
 Gross Anatomy
 Histology and Cell Biology
 Physiology
 Brain & Behavior I
 Biochemistry
 Clinical Foundations of
 Medical Practice 1 (2)**
 Students (2, UC III or IV)***
 Senior Associate Dean for Student Affairs and
 Admissions (ex-officio)
 Assistant Dean for Medical Education
 (ex-officio) (serves as Executive
 Secretary to the Board)

Year II Promotion Board

Chair (Basic Science)*
 Microbiology
 Pathology
 Pharmacology
 Brain & Behavior II
 Clinical Foundations of
 Medical Practice 2 (2)**
 Students (2, UC III or IV)***
 Senior Associate Dean for Student Affairs and
 Admissions (ex-officio)
 Assistant Dean for Medical Education
 (ex-officio) (serves as Executive
 Secretary to the Board)

Year III/IV Promotion Board

Chair (Clinical Science)*
 Internal Medicine Core Clerkship
 Pediatrics Core Clerkship
 Surgery Core Clerkship
 Obstetrics & Gynecology Core Clerkship
 Psychiatry Core Clerkship
 Family Medicine Core Clerkship
 Specialty Clerkships (1) (serves two-year term)
 Acting Internship (Internal Medicine) (1)
 Students (2, UC IV)***
 Senior Associate Dean for Student Affairs and Admissions (ex-officio)
 Assistant Dean for Medical Education (ex-officio)
 (serves as Executive Secretary to the Board)

Note: Should a course director be unable to attend and need to send a substitute, the substitute must be a faculty member.

* Votes to break tie. A vice-chair is to be appointed by each Board to serve in the absence of the chair. The chair serves a three year term with option of reappointment.

** Share one vote

*** Students must currently be in and, during all years, have been in good academic standing.

Names may be submitted to the Executive Secretary to the Board by MSA, other organizations, faculty, administrative staff, and students or by the student him/herself.

APPENDIX II

DEFINITION OF PERFORMANCE VARIABLES

1. **COGNITIVE ABILITY**: the ability to assimilate large amounts of detailed information, integrate that information, and be capable of utilizing it for problem-solving; the ability to process information; reason, comprehend, measure, calculate, analyze, memorize, organize, and synthesize complex information; the ability to perceive and understand visual spatial relationship structures and three dimensional relationships.

2. **COMMUNICATION SKILLS**: the ability to demonstrate and use (in English) the knowledge acquired during the medical education process to elicit, convey, clarify and transmit information (both in oral and written form) effectively, accurately, efficiently and sensitively to patients, their families and other members of the health care team; the ability to communicate with patients in order to elicit information regarding mood, activity and posture and perceive nonverbal communication; the ability to communicate and transmit information through reading, writing, hearing and speech; e.g., be able to present legible, accurate and skillful information in oral and written form to a preceptor, professor, teammate, patients, families and other members of the health care team; the ability to effectively and efficiently participate in sometimes fast paced small group discussions/interactions and in patient care settings where clinical decisions may depend on rapid communication.

3. **BEHAVIORAL AND SOCIAL SKILLS**: the possession of emotional stability and the maturity to interact with others in a responsible manner; to use sound judgment and to use ethical and clinical reasoning; the ability to make decisions appropriate to the care of patients; the ability to function in a stressful and demanding environment; the ability to adapt to new and changing situations and to cope with ambiguity; the ability to be prompt in completion of all responsibilities in attendant to the diagnosis and care of patients.

The possession of human relations skills and the ability to demonstrate compassion, empathy, a caring attitude, tolerance, an acceptance of differences, personal generosity toward others, thoughtfulness and a general concern and respect for other individuals.

4. **PHYSICAL CAPABILITY**: the possession of sufficient emotional and physical stamina to acquire the knowledge and skills required in the classroom, to perform the duties in the basic science laboratories, to participate in activities on clinical rotations, to tolerate physically and mentally taxing workloads and function independently, competently and effectively under stress; the ability to complete the curriculum within the maximum time period specified by the faculty.

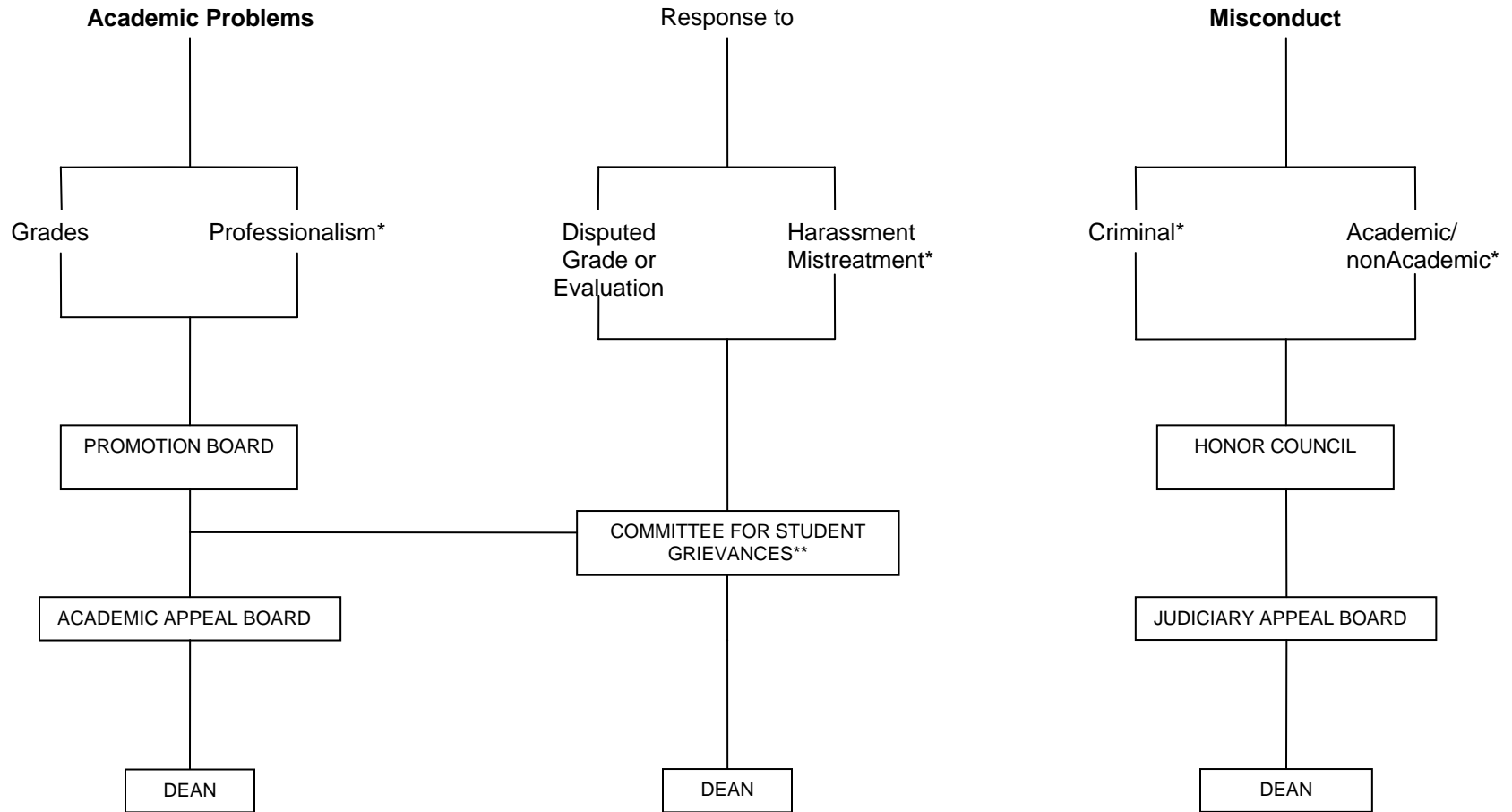
5. **MOTOR COORDINATION AND SENSORY SKILLS:** the possession of sufficient motor function, tactile ability and sensory abilities to attend and participate effectively in all classroom, laboratories, conferences, clinical settings, and activities that are part of the curriculum; the ability to respond to emergency situations in a timely manner; the ability to perform CPR, airway management (both endotracheal ventilation and mask/bag), nasogastric tube, placement of intravenous and foley catheters, simple wound repair, the application of pressure to stop bleeding and basic obstetrical procedures; the ability to perform simple lab tests (urinalysis, pregnancy test, etc.), use a standard light microscope, ophthalmoscope, stethoscope, prepare slides and use a computer; the ability to elicit information, such as performing a complete physical exam that includes inspection, auscultation, palpation and percussion as well as other diagnostic maneuvers and procedures such as a venipuncture, subcutaneous injection, intramuscular injections, and PPD/skin test battery; the ability to perform other required examinations including, but not limited to, neurological, gynecological, prostate, pediatric and obstetric examinations (with appropriate instruments); the ability to execute both gross and fine muscular movements, equilibrium, and assume reasonable bodily postures required to provide a general and specific diagnosis and treatment of patients.

6. **OBSERVATION AND SENSORY SKILLS:** the ability to acquire through independent observation, information in the basic medical sciences, including that obtained from demonstrations and experiential activities; e.g., be able to evaluate radiographic imaging studies and identify subcellular structures, cells, tissues and organs on microscopic and macroscopic levels; the functional use of the sense of vision and the other senses, specifically sufficient exteroceptive sense (touch, pain and temperature) and proprioceptive sense (pressure, position, movement, stereognosis and vibratory); the ability to observe a patient accurately from a distance and close at hand; the possession of all senses sufficiently to support the ability to use them to recognize normal versus abnormal and acquire or perceive sufficient factual material to accurately assess a patient's health status.

Note: Definitions of these variables are taken from the College of Medicine Admissions Standards approved by the Education Policy Committee, May 3, 2006 and Faculty Council, June 8, 2006.

APPENDIX III

FLOW SHEET FOR ACADEMIC AND PROFESSIONAL PERFORMANCE STANDARDS



*Office of General Counsel aids in resolving jurisdiction issues. See guidelines for each area for lists and/or examples of behaviors addressed within the standards.

**Committee for Student Grievances is a component of the Academic Performance Standards, Guidelines for Promotion Boards document.

APPENDIX VCLASS RANKING SYSTEM

Recognizing that class rankings are imprecise and not necessarily the best indicators of a student's potential as a resident, the College nevertheless has developed a ranking system which will allow a student's course grades to be compared to those of his/her colleagues. The method adopted by the College is to give the greatest weight to those courses with the largest credit hours. A type of weighted average (WA), which is the determinant for ranking, is calculated by adding the combined Year I and II WA to the Year III WA and dividing the total by two. The yearly weighted averages are calculated by multiplying the credit hours of each course by a numerical value assigned to the grade earned, summing the products, and dividing the sum by the total number of credit hours taken.

The College groups its students into five categories that it believes give a reasonable estimate of a student's potential for residency training.

<u>CATEGORY</u>	<u>APPROXIMATE PERCENTILE</u>	<u>DESCRIPTION</u>
Outstanding	80 - 99	Students have usually received 13-21 Honors and High Pass grades. Nearly all are AOA.
Excellent	60 - 79	Students have usually received 8-14 Honors and High Pass grades. A few may be AOA.
Very Good	30 - 59	Students have achieved 4-11 Honors and High Pass grades and have consistently been viewed as above average in clinical evaluations.
Good	10 - 29	Students are solidly passing and have functioned effectively as clinical clerks. Many of these students have 3-5 Honors and High Pass grades.
Recommend	1 - 9	Students have passed all courses. Most have received one or two High Pass grades. Some may have had occasion to repeat examinations or courses. They are rated as clinically competent.

CALCULATING THE WEIGHTED AVERAGE FOR THE MSPE CLASS RANK CATEGORIES

All WA's are for internal use only and are never released. Class rank is determined solely by the WA which is calculated by adding the Year III WA to the Years I/II WA and dividing the total by two.

Calculating the Years I/II WA (beginning with the 2001 entering class)

The student's percent score from each Year I and II course is converted to a *numeric grade* on a 0.000 to 4.000 scale. The minimum passing level (mpl) of the course (usually around 70%) will convert to a numeric grade of 2.000 and the maximum possible score (usually 100%) will convert to 4.000. All passing course percent scores will be interpolated between 2.000 and 4.000 and below passing percent scores will be interpolated between 0.000 and 1.999. (Course directors have a spreadsheet program to automatically do the conversions.)

In accordance with standard grade point calculation practice, the numeric grade is multiplied by a course's credit hours and the product is called *quality points*. The quality points are totaled, the sum is divided by the total credit hours attempted (not including incompletes), and the resulting quotient is the Years I/II WA. See below for an example calculation. For space purposes, only Year I courses are shown.

Note: credit hours are subject to change and numeric grade conversions are hypothetical.

<u>YEAR I/II COURSE</u>	<u>CREDIT HOURS</u>	<u>COURSE SCORE</u>	<u>NUMERIC GRADE</u>	<u>QUALITY POINTS</u>
Biochemistry	12	91%	3.455	41.460
Brain and Behavior I (F grade)	14	54%	1.543 *	21.602
Brain and Behavior I (repeated)	14	98%	3.867 *	54.138
Gross Anatomy	14	74%	2.267	31.738
CFMP I	14	70%	2.000	28.000
Histology and Cell Biology	12	82%	2.800	33.600
Physiology (R grade)	12	64%	1.910 **	22.920
Physiology after remediation (P grade)	na	na	na **	na
Total	92			233.458

$$\text{Years I/II WA (to date)} = 233.458 / 92 = 2.538$$

- * When an *entire* course must be repeated (due to an F or WF grade) or when in Year I and II all courses for the entire year must be repeated at UC, *both* the original and the repeat numeric grades are used.

When an *entire* Year I or Year II course must be repeated (due to an F grade) during the *Summer Quarter* at an AAMC approved site, *both* the original numeric grade and the repeat grade are used. If the AAMC approved course is repeated and passed, the repeat grade is always a P and 2.000 is the numeric grade; if the AAMC course is not passed, the grade is an F and 0.000 is the numeric grade.

- ** When only a *part* of a course must be repeated (due to an R grade), *only* the original Remediate grade (less than 2.000) is used.

When only a part of a course must be repeated (due to an R grade) and the remediation results in a Failure, the numeric grade for the R is replaced with the numeric grade for the Failure. When the entire course is repeated, both the numeric grade for the Failure and the repeat numeric grade are used.

Calculating the Year III WA

The Year III WA calculation rules are the same as for the Years I/II WA except that the percent scores from only the core clerkships (Family Medicine, Internal Medicine, Obstetrics/Gynecology, Pediatrics, Psychiatry, Surgery and Radiology) are converted to individual numeric grades on a 0.000 to 4.000 score and multiplied by the course credits hours to obtain quality points. Specialty clerkship grades (except Radiology) are not included.

APPENDIX VII
COURSE CREDIT

<u>Courses</u>	<u>Quarters</u>	<u>Credits</u>
<u>YEAR I</u>		
Gross Anatomy	A, W, S	14
Histology and Cell Biology	A, W	12
Medical Physiology	A, W	12
Medical Biochemistry & Genetics	A, W	12
Brain & Behavior I	S	14
Clinical Foundations of Medical Practice 1	A, W, S	<u>14</u>
		78
<u>YEAR II</u>		
Pathology	A, W, S	24
Pharmacology	A, W, S	12
Microbiology	A, W	10
Clinical Foundations of Medical Practice 2	A, W, S	16
Brain & Behavior II	W	<u>10</u>
		72
	<u>Weeks</u>	
<u>YEAR III</u>		
Internal Medicine Core Clerkship	8	16
Surgery Core Clerkship	8	16
Pediatrics Core Clerkship	8	16
Obstetrics/Gynecology Core Clerkship	8	16
Psychiatry Core Clerkship	6	12
Family Medicine Core Clerkship	4	8
Radiology Specialty Clerkship	2	4
Specialty Clerkship I	2	4
Specialty Clerkship II	2	4
	—	—
	48	96
<u>YEAR IV</u>		
Acting Internship in Internal Medicine	8	24
Clinical Neuroscience Selective	4	8
Electives	<u>24 min. req.</u>	<u>48</u>
	36	80

September 2009
University of Cincinnati College of Medicine

APPENDIX VIII

DEFINITION OF FULL TIME ENROLLMENT
UNIVERSITY OF CINCINNATI COLLEGE OF MEDICINE

The College of Medicine has a four-year program of study.

During the first two years of study, students are enrolled in a prescribed series of courses. Students following this standard curriculum are considered to be enrolled full time. For specified reasons, students may also extend the first two years of study to three under the Individual Advancement Program. Students following an Individual Advancement schedule approved by the Senior Associate Dean for Student Affairs and Admissions and/or the Promotion Board are considered to be enrolled full time.

During the final two years of study, students are enrolled in clinical clerkships for a prescribed number of weeks. Students following this standard curriculum are considered to be enrolled full time. For specified reasons, students may extend the final two years of study to three under the Individual Advancement Program. Students following an Individual Advancement schedule approved by the Senior Associate Dean for Student Affairs and Admissions and/or the Promotion Board are considered to be enrolled full time.