MASTER OF MEDICAL SCIENCE PROGRAM

IN ANESTHESIOLOGY

Student Handbook 2023 – 2024

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STUDENT HANDBOOK

The Student Handbook for the Master of Medical Science Program in Anesthesiology (hereinafter Anesthesiology Program) provides information, rules, regulations, and policies of the Program and the Department of Anesthesiology – in accordance with the policies, rules, and regulations of Emory University School of Medicine and Emory University§. A copy of this Student Handbook is provided to each matriculant during orientation and again at the beginning of senior year. Each student is responsible for reading, understanding, and complying with all rules, regulations, and policies stated in the current Handbook. Addenda to the Handbook are published as necessary.

Current information pertaining to communications with faculty, staff, students, and clinical sites is available in the Program Office. A student directory, including a list of current class officers, is distributed separately by the Program Office.

Issues not covered specifically in this Handbook will be dealt with by the Program Directors in consultation with appropriate individuals, as needed.

Emory University, Emory University School of Medicine, the Department of Anesthesiology, and the Anesthesiology Program reserve the right to revise information, requirements, policies, rules, regulations, and financial charges at any time. Whenever changes occur, every effort will be made to notify students who may be affected.

NOTE URLs listed in this Handbook were accurate as of the date of publication. Changes can be made at any time by any organization. If you find that a URL is not active, please notify the Program Office.

EDUCATIONAL OPPORTUNITIES IN THE DEGREE PROGRAM

In-person Activities

In-person activities include lectures, human patient simulation, labs, small group discussions, workshops, and objective structured clinical examinations (OSCEs). The date, time, and location for each scheduled in-person activity will be posted on the Program's Google calendar.

Remote Activities

Remote participation may be approved for lectures, seminars, small discussion groups, lab prebriefs, and review sessions following exams. The principal tool for remote activities is Zoom. The date, time, ID, and password will be provided as needed.

Clinical Rotations

FY Semester 1. Clinical activity for the first semester for first-year students is primarily an observational activity with limited opportunities for hands-on participation. The date, time, and location for each scheduled clinical activity will be posted on the Program's Google calendar.

FY Semesters 2-3-4. Clinical activity for the 2nd, 3rd, and 4th semesters for first-year students will be scheduled at clinical rotation sites throughout metro Atlanta. Dates and location for each scheduled clinical activity will be posted in the Program's scheduling app.

SR Semester 5-6-7 Clinical rotations for senior students will be scheduled at clinical rotation sites throughout the United States. Dates and location for each rotation will be posted in the Program's scheduling app.

NOTE In accordance with Emory University School of Medicine policy, a student cannot work more than 80 clinical hours in any given week (https://med.emory.edu/education/programs/md/student-handbook/policies/som/duty-hours.html).

EMORY UNIVERSITY

Equal Opportunity

Emory University does not discriminate in admissions, educational programs, or employment on the basis of race, ethnicity, color, religion, sex, sexual orientation, national origin, age, disability, or Veteran/Reserve/National Guard status and prohibits such discrimination by its students, faculty, and staff. Students, faculty, and staff are assured of participation in University programs and in use of facilities without discrimination. The University complies with all applicable federal and Georgia statutes and regulations prohibiting unlawful discrimination. Inquiries regarding this policy should be directed to the Office of Diversity, Equity, and Inclusion (<u>http://diversity.emory.edu/</u>).

ANESTHESIOLOGY PROGRAM

The Master of Medical Science Program in Anesthesiology accepts qualified individuals into a seven-semester clinical masters-degree program and provides direction, motivation, and didactic and clinical opportunities to enable the students to become knowledgeable, skilled, safe anesthetists with sound clinical judgement. In addition, the Anesthesiology Program imbues professionalism, including commitment to patients and the community, and inculcates a life-long desire for learning.

The Program's obligation to the public, to employers, and to the profession is such that awarding a Master of Medical Science Degree indicates that the Anesthesiology Program's faculty agree that the student has attained proficiency in the delivery of anesthesia and has exhibited good ethical and moral behavior.

Students with poor performance in academics, clinical, or conduct will be counseled and will be carefully monitored by Program faculty for suitability to continue in the Program. Students must meet the academic standards of the Anesthesiology Program and Emory University in order to continue in the Anesthesiology Program. Students who are performing well in the classroom but are having difficulty with clinical assignments may be required to perform remedial clinical work in order to continue in the Program. Students who are performing well in the classroom and with clinical assignments but exhibit poor conduct will not be permitted to continue in the Program. Students must perform satisfactorily in all three areas in order to graduate from the Program. Deficiencies in any area must be resolved in order to continue in the Program.

The Program has an obligation to students to provide high quality learning experiences in the classroom and in the clinical environment. The Program is continually reevaluating the methods and people responsible for teaching, and students are encouraged to provide feedback on their educational experience. The Program expects that students will take the initiative and assume responsibility for optimizing their own educational experience and will avail themselves of the opportunities that exist in the University, the School of Medicine, the Department of Anesthesiology, the Program, and the clinical sites.

The Program has an obligation to the faculty to provide the most qualified students through a fair and impartial admissions process and to provide the facilities, instructional equipment, and other resources necessary to support the teaching process.

Facilities

The Anesthesiology Program is located at Executive Park in Suite 300 of Building 57. The Anesthesiology Program Office includes faculty and staff offices, classrooms, library, learning resources center, human patient simulation center, and other facilities. An Anesthesiology Library is available in the Program Office. Medical libraries are available on the main Emory campus and in many of the hospitals at which students rotate.

Organization

The Academic Program Director and Clinical Program Director are responsible for the organization and overall operation of the Program. The Academic Program Director and the Clinical Program Director work closely to integrate and manage all Program activities. Human patient simulation and other labs are under the direction of the HPS & Laboratory Director. Clinical site relations and clinical rotations are under the auspices of the Clinical Rotation Director.

The Assistant Program Director is responsible for day-to-day operations and is the principle contact for students' registration, scheduling, and grade reporting. Other staff members include Director of Admissions; Technology Support Coordinator, who manages evaluation, testing, and technology; Contracts Specialist; Clinical Site Credentialing Specialist; Administrative Assistant; and Simulation Technologist/Laboratory Manager.

Accreditation

Anesthesiologist assistants were officially recognized by the American Medical Association [AMA] as a new emerging health occupation in 1985. The AMA through its Committee on Allied Health Education and Accreditation [CAHEA] approved the Education Essentials for Anesthesiologist Assistant Educational Programs, which provides the basis for establishing and reviewing educational programs for anesthesiologist assistants. The Commission on Accreditation of Allied Health Educational Programs [CAAHEP] became CAHEA's legal successor in 1994. Information on accreditation can be obtained on CAAHEP's web site, www.caahep.org.

Emory's Master of Medical Science Program was initially accredited in 1988 and has been reaccredited in 1994, 2002, 2007, and 2012, and 2022.

Minimum Expectations

The Program's minimum expectations are that the student will become a competent entry-level Anesthesiologist Assistants in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains.

Expectations for Professional Conduct

Emory University is an institution dedicated to providing educational opportunities for its students, transmitting and advancing knowledge, and providing a wide range of services to students and to the general community. To accomplish these objectives and responsibilities requires that the University be free from violence, threats, and intimidation; protective of free inquiry and dissent; respectful of the rights of others; open to change; supportive of democratic and lawful procedure; and dedicated to intellectual integrity and a rational approach to the resolution of human problems.

The tradition of the university as a sanctuary of academic freedom and center of informed discussion is an honored one, to be guarded vigilantly. The basic significance of that sanctuary lies in the protection of intellectual freedoms – the rights of professors to teach; of scholars to engage in the advancement of knowledge; of students to learn and express their views.

Health professionals are privileged to serve in important and time-honored roles as caregivers for other humans. These roles include physical and emotional dimensions that demand the highest degree of ethical behavior. Ethical behavior includes but is not limited to honesty, maintaining

confidentiality, trustworthiness, professional demeanor, respect for the rights of others, personal accountability, concern for the welfare of patients, and responsibility to duty.

- □ Honesty Being truthful in communication with all others while in the healthcare arena or in the community at large.
- □ Maintenance of patient confidentiality Restricting discussion of patient care to those areas where conversations cannot be overheard by others outside of the care team; refraining from disclosing patient identity to those not connected to the care of the patient; maintaining appropriate security for all paper and electronic patient records, whether in the patient care or research realms.
- Trustworthiness Being dependable; following through on responsibilities in a timely manner.
- Professional communication and demeanor Being thoughtful and kind when interacting with patients, their families, other members of the healthcare team, and all others; maintaining civility in all relationships; striving to maintain composure under pressures of fatigue, professional stress or personal problems; maintaining a neat and clean appearance and dress in attire that is reasonable and accepted as professional to the circumstances; refraining from intoxication; abstaining from the illegal use of drugs (both prescription and illicit drugs).
- Respect for the rights of others Interacting with others, whether in a professional or nonprofessional setting, in a considerate manner and with a spirit of cooperation; respecting the rights of patients and their families to be informed and share in patient care decisions; respecting every patient's modesty and privacy.
- Personal accountability Participating responsibly in patient care to the best of one's ability and with appropriate supervision; undertaking clinical duties and persevering until they are complete; notifying the responsible person if one is unable to perform clinical tasks effectively; complying with University policies and procedures in an honest and forthright manner.
- □ Concern for the welfare of patients Treating patients and their families with respect and dignity both in their presence and in discussions with others; avoiding the use of foul language, offensive gestures, and inappropriate remarks; discerning accurately when supervision or advice is needed and seeking these out before acting; recognizing when one's ability to function is compromised and asking for relief or help; never administering care, in person or over the phone, while under the influence of alcohol or other drugs (prescription or illegal); not engaging in romantic, sexual, or other nonprofessional relationships with a patient, even upon the apparent request of a patient; advocating for the best care of the patient, in the context of that patient's beliefs and desires.
- Responsibility to duty Undertaking duties with alacrity, eagerness, enthusiasm, and promptness; persevering until complete; notifying a responsible, more senior person when a problem arises; being punctual for clinical assignments, lectures, group discussions, rounds, conferences, and other duties; providing timely notification to supervisory faculty, staff, and preceptors of absences or of an inability to carry out assigned duties; seeing patients regularly

and assuming responsibility for their care with appropriate supervision; identifying emergencies and responding appropriately; and being available to faculty or staff personnel when on duty.

ALCOHOL AND OTHER DRUGS POLICY

Federal regulations, including the Drug Free Workplace Act of 1988 and the Drug Free Schools and Communities Act, mandate that Emory maintain an Alcohol and Other Drugs (AOD) Policy and distribute such policy to all students, faculty, and staff.

Emory's policy, along with resources, health risks of alcohol and drug abuse, and consequences of this abuse may be found at <u>https://clery.emory.edu/policies/alcoholDrug.html</u>. Members of the campus community are responsible for being fully aware of University policy as well as local, state, and federal laws regarding the use of alcohol and other drugs.

Emory University is committed to the health and well-being of its faculty, staff, and student body. Alcohol and drug misuse and abuse can be detrimental to one's overall physical and emotional health, as well as academic and/or professional work performance.

Resources for Students

If you or someone you know needs assistance for alcohol and/or drug use, Emory sponsors several programs that provide information and professional services for faculty, staff, and students. These programs provide education, consultation, assessment, counseling, and referral in a professional environment that respects individual confidentiality and integrity. Resources, which can be found at <u>http://www.studenthealth.emory.edu</u>, include

Student Health Counseling and Psychological Services Office of Health Promotion

APPLICATION FOR DEGREE

Each senior student must apply for his/her degree approximately six weeks prior to expected graduation. Information concerning degree application is available in the Program Office.

ATTENDANCE, OPERATIONAL TIME, AND ABSENCES

The rules and information in this section apply from matriculation through the end of the degree program. Violations are subject to penalty and may represent misconduct.

Operational Time and Activities

Operational time for the Anesthesiology Program is from 5:30 AM until 6:00 PM Monday through Friday and for any hours during nights and weekends for clinical assignments. Program activities include, but are not limited to, lectures, small discussion groups, HPS, labs, practica, examinations, quizzes, and clinical assignments.

Attendance

Attendance to and availability for all Program activities during Program operational days are mandatory. If a student must schedule non-program activities during Program operational hours, then he/she must submit a Request to be Absent and receive approval in order for the absence to be valid and not be penalized. The student will be responsible for any Program activities that are missed during the time of absence.

Clinical Attendance

Attendance is required for all clinical assignments. In order to receive credit for clinical attendance, the student must spend a minimum of 4.5 hours in clinical activities during the day, enter all case data into the current clinical tracking system, and receive a daily evaluation by the assigned preceptor. Failure to meet these requirements will result in a personal day being assigned to the student. Occurrence of three or more such failures during any semester will result in a conduct review by the Program.

Holidays and Breaks

First-year Students (Semesters 1-4)

Holidays and breaks include Labor Day; Thanksgiving (Thursday and Friday); winter break (December-January block); MLK Day; Memorial Day; Juneteenth; spring break (five days assigned by the Program in Spring Semester); 4th of July; summer break (week of July 4th). Each student has two personal days in each of the four semesters of the first year. There is no carry-over of personal days from semester to semester during semesters 1-4. All time away from the Program except for University holidays and breaks must be approved by submitting an RTA.

Senior Students (Semesters 5-7)

University holidays include MLK Day; Memorial Day; Juneteenth; 4th of July; Labor Day; Thanksgiving (Thursday and Friday). Time for a senior student to be away from the Program includes Emory University holidays; the week of Memorial Day; the week of July 4th; two personal days per semester; four professional leave days for approved meetings and job interviews; three days preparation for the NCCAA Certifying Examination. The personal days can carry over from semester to semester during semesters 5-7. All time away from the Program except for University holidays and holiday weeks must be approved by submitting an RTA.

Absences and Requests to be Absent

Requests to be absent (RTA) are managed in an electronic, web-based system that employs the rules listed below for each type of absence. The student will be responsible for all Program activities that are missed during an absence for any reason.

Personal Leave

Personal leave is available for personal reasons, minor illnesses, emergencies, and job interviews (senior year). A request to be absent for personal reasons must be submitted 30 calendar days before the first day that is being requested for absence. Approval should be obtained before making any travel commitments.

Minor Illness or Minor Unforeseen Circumstance

A minor illness or minor unforeseen circumstance occurs when a student must be absent from Program activities for one day due to illness, family emergency, car breakdown, or unexpected job interview. The request to be absent must be submitted as soon as the student realizes that he/she cannot attend clinical or other Program activities but no later than 6:00 AM on the day of absence. The student must notify the clinical site as soon as possible after submitting the request to be absent. Days of absence for minor illnesses or minor unforeseen circumstances will be subtracted from personal leave days. Failure to submit a request or to notify the clinical site on a clinical assignment day is a violation of policy (see below).

Major Illness or Major Unforeseen Circumstance

A major illness or major unforeseen circumstance occurs when a student must be absent from Program activities for two or more consecutive days for illness or family emergency. This request to be absent must be submitted as soon as the student realizes that he/she cannot attend clinical or other Program activities but no later than 6:00 AM on the first day of absence. The student must notify the clinical site as soon as possible after submitting the request to be absent. The reason for absence must be documented in a communication to the Program from the student's physician within three days of return to Program activities. Days of absence due to major illness may or may not be subtracted from personal leave days. Subtraction of days of absence for major illness from personal leave days is solely at the discretion of Program Directors. Failure to submit a request or to notify the clinical site on a clinical assignment day is a violation of policy (see below).

Medical Leave

See Medical Leave in the section Interruption in Degree Program.

Professional Leave

Each student has three days available during the first four semesters and three days available during the last three semesters to request leave for attendance at specific professional meetings: AAAA, ASA, GAAA, GSA. A request to be absent for professional leave must be filed and approved for the student to be able to attend a meeting, and documentation of attendance must be submitted to the Program in order for the request to be valid.

Jury Service

In most states, including Georgia, enrollment as a full-time student in an accredited educational program is a valid reason to be excused from jury duty. In the event that a student will not be excused from a jury summons or jury duty, then the student must request to be absent as soon as jury

service notification is received. A copy of the communication from the jurisdiction issuing the jury summons must accompany the request to be absent. There will be no grade penalties for a jury duty absence. However, clinical rotation assignments and the 2500-clinical-hour minimum must still be met in order to be eligible for graduation.

Bereavement

Bereavement leave may be granted for attendance at a funeral or comparable service; related travel time; and time necessary to conduct arrangements or other related, necessary business. Absence may be approved for up to five days per occurrence for an immediate family member identified as parent, grandparent, step-parent, legal guardian, parent-in-law, spouse, same-sex domestic partner, child, step-child, grandchild, legal ward, or sibling.

A request to be absent must be submitted as soon as dates for the leave are known. Approval for this leave, including length of time for the absence, is solely at the discretion of Program Directors. The amount of time granted depends on the relationship the individual has with the deceased, the individual's level of responsibility for arrangements, travel time needed, and other relevant circumstances. Should additional time be required in excess of bereavement leave, the student may request personal days.

Mission Trips, Service Projects, and Associated Travel

The Anesthesiology Program encourages students to participate in service activities at home and abroad. However, the Program does not currently have any elective rotations in mission or service or any rotations outside the United States.

The Program will support – within the guidelines below – senior students who wish to *personally participate* in mission trips or service projects while they are enrolled in the Anesthesiology Program at Emory University.

No later than 90 days prior to a mission trip or service project, the student must apply for leave for the project by submitting complete information on that project:

- □ Sponsoring organization
- □ Sponsoring physician
- □ Complete name, contact information, and specialty of the physician who will be present during the service or mission project
- □ Location of the project
- Dates of the project, including travel dates
- □ The student's role in the project

A student who is *personally participating* in a mission trip or service project must be aware of the following limitations:

- □ Students are NOT covered by Emory's malpractice/liability insurance.
- □ Students are NOT covered by Emory's travel insurance.
- □ Emory's needle stick policy will NOT apply. The needle stick hotline may respond to a student regardless of where they are, but Emory will not provide service to students who are serving at a facility with which Emory University does not have a clinical rotation contract.

- □ The student should confirm that his/her student health insurance or personal health insurance is in effect and will cover injuries/illness sustained during the project and will cover medevac from the location of the mission trip or service project back to an appropriate medical facility in the United States.
- □ The student will be responsible for making claims through the student health policy or his/her private insurance policy for injury or illness sustained during the mission trip or service project and for medevac.

Any student undertaking a project abroad is encouraged to contact EHC TravelWell to be certain that all vaccinations and other medical preparations are complete well before time for out-of-country travel.

Clinical hours credit for time performing clinical duties on the project may be awarded if the following requirements are met:

- □ The physician on the project is an Emory faculty member <u>or</u> the physician has been pre-approved by Emory University, which will require the physician submitting a CV.
- Learning objectives are in place prior to the project.
- □ The physician confirms that the learning objectives were met during the project.

Violations of Policy

Any violation of policies governing absences or requests to be absent will result in a grade penalty. For each violation of policy, two points will be deducted from that semester's clinical grade. Deducted points are cumulative for the duration of the degree program; ie, deducted points carry over from semester to semester.

<u>Example</u> In fall semester, one violation results in two penalty points. The student, who otherwise would have had a clinical grade of 89 (B) now has a clinical grade of 87 (still a B). In spring semester there are no violations, but in summer semester this student has two violations and receives four penalty points. Her summer clinical grade would have been 84 (B) but now is 78 (C); ie, 84 - 4 [new penalty points] - 2 [existing penalty points].

Serious violations or repeat violations represent misconduct and may result in probation or dismissal from the Anesthesiology Program.

Timekeeping System

The Program uses a timekeeping system to monitor attendance at clinical sites. All students are required to clock in and clock out each day that they have a clinical assignment scheduled. The student must clock in and out from their assigned clinical site.

Allowing another person to clock in or out of the system for a student or clocking in or out for another student represents misconduct and is grounds for immediate suspension from clinical activity.

If a student neglects to clock in or clock out at their assigned clinical site, then he/she must submit an Attendance Exception Report within 72 hours. Failure to submit an Attendance Exception Report will result in loss of clinical hours for the day for which the report is missing.

CALENDAR FOR ANESTHESIOLOGY PROGRAM

The current calendar for the Anesthesiology Program is posted on the Program's Google calendar. The calendar is updated as often as needed - sometimes more than once a day. Each student is responsible for keeping up to date with events scheduled on this calendar.

Final exams are scheduled during the final exam week for each semester. Each semester ends at the end of the last day of final exam week.

CAMPUS LIFE AT EMORY UNIVERSITY

See Campus Life Handbook: <u>www.emory.edu/home/explore/life/index.html</u>.

CASES AND CASE RECORDS

Based on national data and ARC-AA Standards and Guidelines, the Anesthesiology Program has established requirements for numbers and types of cases and procedures that must be performed during the degree program – as listed in the following table.

Anesthesia Cases & Procedures Table	
CASES & PROCEDURES	REQUIREMENTS FOR DEGREE
Total anesthesia cases	650
Total clinical hours	2500
Patients ASA III - VI	250
Emergent or trauma cases	35
Ambulatory (out patient)	200
Geriatric (> 65 years old)	150
Pediatric (0 - 12 years old)	50
< 2 years old	10
Surgery by specialty	
Anesthesia in remote locations Radiology, GI, cath lab, interventional pulmonary	50
Cardiac surgery	10
With cardiopulmonary bypass	5
Dental & maxillofacial surgery	5
ENT	30
General surgery	50
GU – surgeries and procedures	10
Gynecologic surgery	10
Neurosurgery	10
Intracranial	10
Other	10
Obstetrics – surgeries and procedures	40
Ophthalmologic surgery	10

Orthopedics – surgeries and procedures	50
Plastic surgery	10
Thoracic surgery	10
Vascular surgery	
Revascularization	5
Other	20
Methods of anesthesia	
General anesthesia	
Total general anesthesia cases	450
Inhalational induction	40
Airway management	
Orotracheal intubation	295
Nasotracheal intubation	5
EBT/DLT or bronchial blocker	5
Airway management with FFO scope, videolaryngoscope, other alternative device	50
Supraglottic airway device	80
Total intravenous anesthesia	10
Emergence from anesthesia	350
Regional anesthesia/analgesia	
Neuraxial§*	10
Peripheral nerve block§*	5
Monitored anesthesia care	50
Procedures	
Arterial puncture or arterial catheter placement*	30
Intra-arterial pressure monitoring	40
CVP catheter placement*§	5
CVP catheter monitoring	15
IV catheter placement*	125

Gastric tube placement (NGT/OGT)	10

- * Performance must involve all steps, including needle placement.
- § At the discretion of Program Directors, a student who has not achieved one or more of these requirements by the seventh semester may demonstrate competence via simulation with Program simulation faculty.

Students who fail to meet case and procedure requirements prior to the degree certification date will have their degree program extended by a minimum of one semester in order to meet those requirements.

Electronic Anesthesia Case Records

The Anesthesiology Program requires that students enter all patient encounter data into an electronic clinical tracking system. Complete data must be entered for every patient encounter in which the student participates while enrolled in the Anesthesiology Program.

Electronic tracking of patient encounter data closes by calendar date. Complete data must be entered before midnight of the following day of every patient encounter.

Case data for each student are extracted periodically from the electronic clinical tracking system and become part of the student's academic record. The Anesthesiology Program monitors the extracted data for accuracy and completeness.

Forfeit Hours

Failure to maintain current patient encounter data will result in loss of all clinical hours for each and every day for which the student has not entered complete data for all patients encountered. On the monthly and annual clinical hours reports, the lost hours are listed as forfeit hours. Forfeit hours are cumulative in the educational program; ie, forfeit hours carry forward from the first year into the senior year.

CERTIFICATION IN THE UNITED STATES

The National Commission for Certification of Anesthesiologist Assistants [NCCAA] provides the certification process for anesthesiologist assistants in the United States. Initial certification is obtained by successfully completing the Certifying Examination for Anesthesiologist Assistants.

Information regarding certification and examination is available on NCCAA's web site, <u>www.aa-nccaa.org</u>. The Program also requires that each student take an in-training examination in the first year of the program.

CLASS OFFICERS AND REPRESENTATIVES

Each class elects officers and representatives. Elections are held by class members without faculty input or direction. A list of current class officers and representatives is available in the Program Office.

CLINICAL ANESTHESIA WORKBOOK

The **Clinical Anesthesia Workbook** contains information needed to develop a basic fund of clinical knowledge, as well as guidance for developing clinical skills. The workbook is provided on Canvas. The questions in each workbook section should be discussed with clinical preceptors.

Clinical Task Progression

The Workbook contains a list of clinical tasks, including definition of task, source of information for task, references, and requirements for task completion. A Clinical Task Progression Chart in the Workbook contains a time line for each task – indicating the time during which the student is expected to obtain the requisite knowledge and attain the motor skills and coordination necessary to safely accomplish the task. A box at the end of each time line represents the point at which every student must be able to demonstrate proficiency for the task. Proficiency includes having basic knowledge for the task, understanding quality assurance and risk management issues related to the task, knowing costs associated with the task, as well as being able to safely and efficiently perform the task. Evaluation of many of the clinical tasks will be made by clinical instructors at the clinical sites to which students are assigned. Testing of material in the clinical task progression series will be included in the comprehensive examinations, along with objective, structured clinical evaluations [OSCEs]. The student must have completed all tasks assigned within each semester in order to receive a clinical grade for that semester and be eligible to advance to the next semester.

The first-year clinical task progression series is designed to prepare students for those clinical activities for which they will be expected to be safe and proficient when they enter their senior year. The clinical task progression series is task-achievement oriented – once the student has completed the requirements for a given task, he/she should move on to other tasks.

CLINICAL HOURS

Clinical hours are awarded for time spent taking care of patients – in preop, in the OR, in PACU, and in other patient care locations. Clinical hours are not awarded for non-clinical activities.

First Year

Each student must acquire 500 clinical hours during the first year. Any student who fails to meet the 500-hour requirement will have their first year extended in order to meet the requirement before being considered for advancement into the senior year.

Second Year

Each student must acquire 2500 clinical hours during the degree program. Any student who fails to meet the 2500-hour requirement will have their degree program extended by a minimum of one semester in order to meet the requirement.

CLINICAL EVALUATION

Evaluation of each student's clinical performance is conducted in every semester, beginning with activities in human patient simulation in the first semester. In semesters 2 - 7, for each clinical day, a student receives an evaluation by a clinical preceptor, including a grid score and comments on clinical performance. In addition to daily evaluations, the Program receives communications from anesthetists, anesthesiologists, and other providers at clinical sites. In each semester, comprehensive exams are used to help evaluate each student's fund of clinical knowledge.

The Clinical Review Committee assesses each student's clinical performance, including grid scores, clinical comments, and communications from clinical sites. The Committee takes into account the many facets of successful clinical practice, including but not limited to conduct; patient safety; communication; interaction with patients, families, and other healthcare providers; clinical skills; clinical knowledge; and case management. The Clinical Review Committee provides input into grades for all clinical anesthesia courses (ANES 561 A,B,C; ANES 660 A,B,C) and provides input to the Progress, Promotion, and Review Committee.

CLINICAL ROTATIONS

Clinical rotations are scheduled in both academic and private practice hospitals, including hospitals within the Emory system, hospitals in metropolitan Atlanta, and out-of-town hospitals in Georgia and other states.

First-year Clinical Activity

During the first year of the Program, students progressively develop knowledge and skills in patient evaluation; vascular access; airway management; and clinical anesthesia. Each student is assigned to a single clinical site for a block of time. Clinical assignments are for partial or full days during each week so that clinical activity is interspersed with classroom work and laboratory sessions on a day-to-day basis.

Knowledge and clinical skills to be obtained each month are outlined in the Clinical Anesthesia Workbook. Beginning in the first fall semester, three general comprehensive examinations are administered each semester. Knowledge demonstrated on the examinations and the clinical milestones set forth in the Clinical Anesthesia Workbook must be met before the student may advance to the next semester. Failure to meet the milestones can result in retesting and/or remedial work and/or probation and/or extension of the degree program.

Senior Clinical Rotations

During the senior clinical year, clinical rotations are assigned in all subspecialty areas of anesthesia practice, including general surgery, pediatrics, obstetrics, gynecology, orthopedics, neurosurgery, ophthalmology, genito-urinary surgery, vascular surgery, cardiac surgery, thoracic surgery, transplantation, trauma, radiology, GI, and interventional pulmonary. Mandatory subspecialty rotations include pediatrics, obstetrics, and cardiac. Each student will have a minimum of two away rotations scheduled by the Program. Local and away rotations are defined by the Program.

Clinical rotation assignments are based upon clinical sites' requirements, a student's clinical performance, faculty assessment of a student's suitability for the clinical rotation, and fairness to all students. All aforementioned variables being equal, requests will be granted on a first-come, first-serve basis.

Requests for clinical rotations or for changes in clinical rotations must be made via the clinical tracking system and must be submitted at least two months prior to the start date for the requested change. Requested changes must be approved by the Program and the clinical site. The student will be notified by email of approval or denial. Requests must be made with sufficient lead time so that – following approval – there will be at least six weeks remaining prior to the rotation start date for credentialing to be completed. A student may not go to a clinical rotation unless credentialing is complete.

Students may not contact a clinical site to arrange a rotation or change a rotation. Rotation scheduling is solely the responsibility of the Anesthesiology Program.

No requests for changes will be accepted for the following rotations once assignments have been scheduled: away rotations, specialty rotations, rotations requiring an application, rotations that provide housing.

Each student may participate in each clinical rotation only \underline{once} – with the exception of the final clinical rotation if that clinical site is where the student will be employed following graduation.

Clinical sites may offer more than one clinical rotation; specialty rotations at the same clinical site are considered separate rotations.

Each student will only be approved for a maximum of two clinical rotation changes during the senior year.

All clinical sites have the right to cancel or change clinical rotation schedules. If a student's scheduled rotation is changed or cancelled, the Program will assign a new clinical rotation.

Daily Clinical Activity

Daily Case Assignments

For each clinical day, the student should contact the site's clinical coordinator, and in concert with the clinical coordinator, choose cases appropriate for level of training. Ideally for most days, cases will be available for selection for the following day. Students have targets for specific numbers of different types of cases and should work with each site's clinical coordinator to try to satisfy these targets as opportunities exist. Given each student's educational requirements, clinical coordinators will make every effort to see that the student obtains appropriate experience, including types and numbers of cases. Student clinical assignments will be made based upon constraints of the clinical site and the student's knowledge and abilities. However, it is the student's responsibility to optimize their own learning experience by requesting specific clinical assignments through the clinical coordinator – not passively waiting for assignments.

Initial Daily Activities

For elective OR day schedules, the student is expected to be at his/her clinical site no later than 6:00 AM unless the clinical coordinator states otherwise or a different time is published in the Clinical Rotations Handbook for that clinical rotation. As a student begins to participate more fully in the anesthesia care team, the student is expected to allow sufficient time at the beginning of each clinical day to complete the following activities prior to entering the OR with the patient:

- complete the anesthesia set up in the operating room
- perform all anesthesia apparatus checkouts
- prepare all necessary monitoring
- prepare all needed drugs
- meet the patient with your preceptor
- review and update the anesthesiology consultation
- review the patient's current medical record
- review the patient's old chart (if available)
- perform all indicated vascular access, as supervised by preceptor or designee
- administer preop medications, including antibiotics, that have been ordered
- obtain blood for laboratory tests that have been ordered.

Clinical Time

All clinical time must be spent at a student's currently assigned clinical site unless otherwise approved by the Anesthesiology Program.

Clinical time on special rotations specified by the Program (eg, OB Anesthesia, Trauma) includes time spent in the hospital when there may or may not be cases available for the student. The student will be awarded clinical hours for 100 percent of assigned time spent in the hospital on these rotations.

Clinical time on regular rotations in the first year and in the senior year is expected to be spent taking care of patients – in the OR, Preop Clinic, and elsewhere as assigned. For general OR rotations, clock-in should not occur prior to 0545 on weekdays. For cardiac rotations, clock-in should not occur prior to 0500 on weekdays.

Downtime before or between patients is expected to occur on these rotations, but the amount of downtime should be minimized by each student working closely with preceptors and the clinical site coordinator to optimize their clinical experience. With very few exceptions, students are not expected to clock clinical hours that exceed 80 percent of case hours on a regular clinical rotation. Clinical time exceeding 80 percent of case time is subject to review by the Program.

Remedial Clinical Work

Each student's clinical performance is evaluated each semester. Based upon review of evaluations and discussions with clinical faculty, the Clinical Review Committee may recommend that the Program Directors assign remedial clinical work to a student in the semester following a semester in which the student's clinical performance did not meet requisite standards. All remedial clinical time must be scheduled through the Program Office. This remedial work may require extending the duration of the student's degree program by one semester or longer. Students may NOT arrange remedial clinical time on their own with any clinical site.

CLINICAL SITES

The Program Office maintains a current listing of clinical rotation sites.

COMMITTEES

Seven standing committees exist in the Master of Medical Science Program:

Admissions Committee Advisory Committee Clinical Review Committee (CRC) Diversity, Equity, and Inclusion Committee Progress, Promotion, and Review Committee (PPRC)

A list of current committee members is available in the Program Office.

CONDUCT

The student is responsible for his/her conduct at all times. Conduct can be reviewed and the privilege of working with patients can be withdrawn at any time.

Misconduct - Clinical

In the practice of anesthesia, the safety and well-being of patients is every practitioner's first and foremost concern. The confidential acquisition and maintenance of patient data are also of paramount importance. To these ends, students must always appropriately interact with patients and patients' families, review medical records, and obtain and honestly record data.

It is the expectation of the Anesthesiology Program and the clinical rotation sites that students will conduct themselves in a professional manner at all times, including being primarily focused on patients and the well-being of the patients. To this end, cell phones, computers, and other electronic devices are NOT to be used for personal reasons in operating rooms or other patient care locations. Any clinical use of electronic information devices must be approved by the clinical preceptor at the time of use.

Examples of clinical misconduct include but are not limited to

- o commission of a felony under local, state, or federal laws
- o deceit in verbal or written communications
- o drug abuse
- o failure to maintain patient data in an appropriate, honest, confidential manner
- o falsifying or intentionally misrecording data in a drug-reporting forms, including but not limited to DEA forms for scheduled substances
- o falsifying or intentionally misrecording patient data in any medical record, including but not limited to the anesthesia record and preoperative consultation
- o falsifying clinical attendance records, including the timekeeping system
- o falsifying evaluation records or case records
- o forging data or signatures in a medical record or healthcare document
- o inappropriate behavior in a clinical setting
- o inappropriate interaction with a patient or patient's family
- o vandalism
- o violation of the Health Insurance Portability and Accountability Act
- o violation of conduct regulations of a healthcare facility while on rotation
- o audio and/or video acquisitions in patient care locations
- o inappropriate use of cell phones, computers, or other electronic devices in patient care locations

Misconduct – Nonclinical

Examples of nonclinical misconduct include but are not limited to

- o cheating knowingly acquiring, receiving, or distributing information about the content of an examination prior to administration, during administration, or following administration if the content source of said examination is confidential and secure information; provision or utilization of unauthorized aids; impermissible collaboration
- o commission of a felony under local, state, or federal laws

- o deceit in verbal or written communications
- o falsifying attendance or evaluation records
- o falsifying or manipulating data in academic or research documents
- o forging data or signatures on any Program or University document
- o neglecting mandatory requirements for program and university compliance
- o plagiarism incorporating into one's own work, the work or expression of another without appropriately and adequately indicating the source
- o sabotage intentional and malicious actions that impair another student's academic performance

o theft

- o vandalism
- o inappropriate use of cell phones, computers, or other electronic devices in academic locations
- o violation of laws governing intellectual property, copyright, and fair use of copyrighted material owned by others, including Emory's own copyrights and brands
- o inappropriate use, distribution, or redistribution of curricular materials developed by Emory faculty or staff or the faculty/staff of other medical schools or educational institutions. (When in doubt about such materials, students should seek guidance regarding appropriate use from a Program Director.)
- o sharing confidential or proprietary information that may compromise Emory's research efforts, business practices, or security.

Monitoring and Reporting

The Master of Medical Science Program employs several methods for monitoring conduct, including but not limited to clinical evaluations, proctoring of examinations, audio and video surveillance of examinations, audio and video surveillance of classrooms and other sites within the Program suite, written and verbal communications with faculty, staff, and clinical sites. In addition, other Emory locations, as well as any clinical site, may employ audio and/or video surveillance at their locations and may share audio and video surveillance information with the Master of Medical Science Program and Emory University and any of its agents when conduct issues arise.

Faculty, staff, students, and others may report conduct matters to a Program Director at any time. If a student believes that a conduct violation has occurred, that student must report the violation as soon as possible to a Program Director.

The exception to reporting conduct violations to a Program Director involves violations of academic ethics (eg, cheating, plagiarism, sabotage). If a student believes that a violation of academic ethics has occurred, that student may report the violation to any member of the Honor Council rather than to a Program Director. When a student reports a violation of academic ethics to the Honor Council, then the actions and decisions of the Honor Council shall supercede the policies of the Anesthesiology Program. Complete information related to the Honor Council and its processes can be found in the Emory University School of Medicine Student Handbook.

Process for Conduct Matters

Upon receipt of an evaluation based on misconduct or a report of alleged misconduct, a Program Director will take appropriate action based on the type and severity of the alleged misconduct. If warranted, a Program Director will refer the matter to the Progress, Promotion, and Review Committee. If the alleged conduct is deemed illegal under federal, state, or local laws or the conduct

poses a threat to the student or others, pending investigation, a Program Director will suspend the clinical activity of the student.

When a conduct matter is referred to the Progress, Promotion, and Review Committee (PPRC) for investigation and review, a Program Director will inform the student in writing of the conduct matter and its referral to PPRC.

The PPRC will initially review the conduct matter and determine if the misconduct charges are warranted. If misconduct charges are warranted, the PPRC will conduct a thorough investigation, during which the Committee shall have access to all information on the student which is maintained by the Anesthesiology Program. During the review process, the student will be asked to appear before the Committee. At the conclusion of the review, including interview of the student, the PPRC will determine what action is warranted and recommend same to the Program Directors. The Program Directors, with consideration of the recommendations from the PPRC, will impose an action (see below). The student will be informed in writing by the Program Directors of the action.

Actions for Misconduct

Continuation

The student will be informed in writing that they may continue in the Program without penalty.

Continuation with Warning

The student will be informed in writing that they may continue in the Program, but if another misconduct occurs, they will be subject to penalty, probation, or dismissal – depending upon the severity of the matter.

Continuation with Penalty

The student will be informed in writing that they will receive a penalty and may continue in the Program. Penalties can include but are not limited to grade reductions, remedial/additional didactic work, remedial/additional clinical work, enrollment and successful completion of special instructional work (eg, ethics course).

Probation

The student will be informed in writing that they are being placed on probation. The probation letter will include the reason(s) for probation, the duration of probation, and the condition(s) under which probation will be ended. The probation letter will also inform the student that occurrence of other misconduct or academic probation during the period of probation may result in extension of probation, additional penalties, or dismissal from the Anesthesiology Program.

Extension of Time in the Degree Program

The student will be informed in writing that their degree program is being extended. The extension letter will include the reason(s) for extension and the duration of extension.

Dismissal

Dismissal is the action established for various types of misconduct, including but not limited to cheating, drug abuse, falsification of records, forgery, unacceptable behavior at clinical sites, and HIPAA violations. Dismissal from the Master of Medical Science Program at Emory University can occur regardless of academic standing.

Appeals for Misconduct

If the action taken for misconduct is continuation with warning, probation, or extension of time in the degree program, then the student may appeal that action within 10 days to the Chair of the Department of Anesthesiology. The appeal must be in writing and must include the basis for appeal. Only one written appeal may be submitted and must be complete at the time of submission. The Anesthesiology Department Chair's decision on the appeal is final in the matter.

If the action taken for misconduct is dismissal, then the student may appeal that action in writing within 10 days to the Executive Associate Dean for Medical Education and Student Affairs of the Emory University School of Medicine. The appeal must be in writing and must include the basis for appeal. Only one written appeal may be submitted and must be complete at the time of submission. The Executive Associate Dean's decision on the appeal is final in the matter.

Record of Misconduct

A summary of the review, recommendations, action, and appeal (if any) will become part of the student's permanent file and may be used when the student requests letters of evaluation or recommendation.

Social Misconduct

The Program will refer matters of social misconduct other than sexual misconduct to the Executive Associate Dean of the School of Medicine for review and appropriate action. Examples of social misconduct include physical abuse, verbal abuse, bullying, and personal threats.

Sexual Misconduct

The Program will refer matters of sexual misconduct to the Deputy Title IX Coordinator for the School of Medicine for review and appropriate action. Examples of sexual misconduct include sexual harassment and inappropriate sexual behavior.

Discriminatory Harassment

The Program will refer matters of discriminatory harassment – either sexual or non-sexual – to the Office of Equity and Inclusion (formerly Equal Opportunity Programs). Policies related to harassment apply to persons who are employees and students of Emory University, vendors, contractors, guests, patrons, and other third parties participating in any Emory-sponsored event or program, whether on or off campus.

Any student who feels that he/she has been subjected to any form of harassment should notify a Program Director, who will communicate about the matter with the Office of Equity and Inclusion. In addition, the student may personally inform the Office of Equity and Inclusion.

Complete information concerning Emory's policies on harassment and contact information for the Office of Equity and Inclusion can be found at the SOM policies website: https://med.emory.edu/education/programs/md/student-handbook/policies/som.

CONTINUATION, INTERRUPTION, TERMINATION OF THE MMSC DEGREE PROGRAM

Continuation

Suitability and fitness for continuation in the Program is based upon academic performance; clinical competence, including the ability to safely care for patients; and standards of conduct appropriate for a healthcare professional. Standards of conduct include trustworthiness; responsibility to duty; appropriate interaction with patients, patients' families, and other healthcare professionals; and professional demeanor.

Advancement Requirements

In order to continue in good standing in the Master of Medical Science Program to the next semester or to graduate from the Master of Medical Science Program at the end of the degree program, a student must

□ Maintain a semester GPA equal to or greater than 2.8.

AND

- Exhibit satisfactory clinical performance as judged by the faculty of the MMSc Program; AND
- □ Have conduct and ethical behavior that in the judgement of the MMSc Program faculty meet those standards essential for an anesthesiologist assistant practitioner.

Advancement

The Progress, Promotion, and Review Committee reviews the academic performance, clinical performance, and overall conduct of each student each semester. Throughout the degree program, each student's advancement to the next semester must be approved by the Progress, Promotion, and Review Committee.

At different times during the educational program, different conditions will trigger review by the Progress, Promotion, and Review Committee (PPRC) that can result in warning, probation, extension, or dismissal.

Semester 1

For the first semester, a GPA below 2.8 will prompt a review by PPRC that can result in warning, probation, or dismissal. Receipt of one D is grounds for dismissal; depending upon circumstances, the student may be offered an opportunity to join the next matriculating class.

Semesters 2, 3, 4

A semester GPA below 2.8 or a cumulative GPA below 2.8 will prompt a review by PPRC that can result in warning, probation, extension, or dismissal. A D in any course with a cumulative GPA equal to or greater than 2.8 will be reviewed by the Progress, Promotions, and Review Committee (PPRC), and can result in the student repeating the course the next time the course is offered.

Semesters 5, 6, 7 (Senior Year)

Receipt of a D in any semester of the senior year will result in extension of the student's educational program by one semester. If the student is on probation when the D is received, PPRC can recommend dismissal from the Program.

Any student who is not on target for clinical hours at the end of any semester will receive an incomplete (I) in ANES 660 and will be referred to PPRC, which may result in probation, extension, or dismissal from the educational program.

Any Semester

In any semester, scores below 70 percent on all exams in any one course – regardless of cumulative GPA – will result in a warning or probation.

Academic Penalties

Academic Warning

An official warning from the Program Directors to a student whose performance is of concern in any curricular area – didactic, simulation, or clinical. The academic warning letter will cite the specific concern(s) and will communicate an action plan for improvement, additional simulation time, and/or modification of clinical assignments. Any student who receives an academic warning must contact their advisor within 5 business days to develop an action plan for improvement.

Academic Probation

Academic probation is assigned by the Program Directors based on recommendation from the Progress, Promotion, and Review Committee when a student's academic performance meets any of the criteria outlined above for Semesters 1 through 7. The academic probation letter will cite the specific reason(s) that generated academic probation.

The academic probation letter will list the criteria for removal of probation, including achieving a semester GPA equal to or greater than 2.8.

The academic probation letter will inform the student that receipt of a D or a second semester of probation – including non-consecutive semesters – represents grounds for dismissal from the educational program.

A student on academic probation is <u>not in good standing</u>, which is information that can be made available to parties within Emory University, as well as outside agencies (eg, state boards, hospitals, practice groups). A copy of the academic probation letter becomes part of a student's file and may be used as part of recommendations and requested performance evaluations. The designation of academic probation may result in the loss of financial aid.

Dismissal

If a student meets any of the following criteria at any time during enrollment in the Program, that student shall be dismissed from the Master of Medical Science Program:

 $\Box \quad \text{Receipt of two grades of D or one grade of F};$

OR

Receipt of one D or one F following return from a leave of absence for academic reasons; OR

- Unsatisfactory clinical performance as determined by the Program Directors; OR
- Conduct or ethical behavior that does not meet the standards essential for an anesthesiologist assistant practitioner as determined by the Program Directors;
 OR
- **G** Failure to complete course work or clinical assignments as determined by the course instructor.

First Year: Leave of Absence for Academic Reasons

The didactic curriculum of the Master of Medical Science Program is tightly integrated and scheduled for the four continuous semesters of the first year. The senior clinical year of the educational program is comprised of clinical rotations throughout the United States. Anesthesiology didactic courses and basic science didactic courses are scheduled on an annual basis.

When a student is offered a leave of absence for academic reasons, then that student must complete all course work in the semester in which he/she meets the criteria for the leave of absence for academic reasons, and the leave of absence for academic reasons must be approved by the Progress, Promotion, and Review Committee.

If approved, the leave of absence will begin effective at the end of the semester in which it is approved. The student may then return to the Master of Medical Science Program at the beginning of the following academic year to restart the educational program.

If the student elects to return to the Master of Medical Science Program, then he/she must meet the Program's requirements for continuation.

The alternative to leave of absence for academic reasons is dismissal from the Program.

Financial Aid Implications

Within three days of taking a leave of absence as described above, the student must contact the Financial Aid Office of Emory University and make all necessary arrangements concerning financial aid and repayment of same. Applicable rules and regulations are available from the Financial Aid Office. The student should contact Emory's Office of Financial Aid for complete information and to obtain specific answers to questions regarding financial aid and leave of absence.

Senior Year: Probation and Extension of the Educational Program

For senior students, receipt of a D in any clinical series (ANES 660A,B,C; ANES 680A,B,C) will result in probation and automatic extension of the educational program by one semester. In order to continue in the MMSc Program beyond the semester in which the D was received or in order to graduate from the MMSc Program, then that student must meet the following requirements:

- Receive a letter grade of C or above in all subsequent clinical courses (ANES 660A,B,C; ANES 680A,B,C);
 AND
- Maintain a semester GPA of 2.0 or higher in all subsequent semesters; AND
- □ Have an overall GPA or 2.0 or higher at the end of all subsequent semesters; AND

□ Meet all other Program requirements for continuation.

Academic Appeals

A student may appeal a course grade within ten (10) days of the University's posting of the grade. The appeal must be in writing to the Chair of the Progress, Promotion, and Review Committee and must include the basis for appeal. Only one written appeal may be submitted and must be complete at the time of submission. The decision of the Progress, Promotion, and Review Committee is final in the matter unless the grade will result in the dismissal of the student.

If the Progress, Promotion, and Review Committee's decision to uphold a grade will result in dismissal, then the student may appeal that the Committee's decision within ten (10) days to the Executive Associate Dean for Medical Education and Student Affairs of the Emory University School of Medicine. The appeal must be in writing and must include the basis for appeal. Only one written appeal may be submitted and must be complete at the time of submission. The Executive Associate Dean's decision on the appeal is final in the matter.

Interruption of Degree Program

Medical Leave

A student may petition the Program for interruption of his/her degree program because of a serious illness or injury. In the petition, the student must provide documentation of diagnosis by a physician licensed to practice medicine in the United States and an estimate by that physician of the time to recovery sufficient to resume the degree program. Granting the petition for interruption in the degree program is solely at the discretion of the Anesthesiology Program.

Medical leave may not be requested retroactively after a student has received a D or F in a course.

Approval for a medical leave can involve OMESA and the School of Medicine's Financial Office.

In order to return to Program activities following a medical leave, the student must provide a statement from the treating physician that the student is cleared to return to a full academic load and clinical assignments. Per School of Medicine policy, before being permitted to return to the degree program, the student may be required to be evaluated by a practitioner selected by the School of Medicine.

Leave of Absence

First Year

A student in good standing may petition the Program for a leave of absence by submitting the request in writing, including a complete explanation for the leave. If a leave of absence is granted, leave shall be for the balance of that academic year. The student must return as a full-time student in the next academic year at the beginning of the semester in which he/she was granted leave. Tuition refund for the semester in which the leave of absence is granted shall follow University guidelines for cancellation and withdrawal. Granting a petition for a leave of absence is solely at the discretion of the Anesthesiology Program.

Senior Year

A student in good standing may request a leave of absence by submitting the request in writing, including a complete explanation for the leave. Following review of the request, the Program Director may grant a leave of absence for one to six months at the end of which the student must return as a full-time student at the beginning of an approved clinical rotation. The full one to six months of absence must be satisfactorily completed on approved clinical rotations in order for the student to meet academic and residence requirements for degree eligibility. Tuition refund for the semester in which the leave of absence is granted shall follow University guidelines for cancellation and withdrawal. Registration and payment of tuition and fees for the extended clinical time in the degree program shall follow University guidelines. Granting a petition for a leave of absence is solely at the discretion of the Anesthesiology Program.

Maximum Allowable Time for Absence from the Degree Program

The clinical education of an individual aspiring to become an anesthesia provider requires a continuum of clinical exposure with opportunities for developing the knowledge and skills requisite to being a safe practitioner. A prolonged absence from clinical rotations can seriously impede a student gaining the knowledge and skills.

The Anesthesiology Program limits absence from the Program to one year. Absence greater than one year will result in termination of the degree program for that student.

Termination Prior to Completion of Degree *Cancellation*

Registration may be cancelled during the first five days of classes without transcript deficiencies or financial penalty other than loss of deposit.

Withdrawal

A student may voluntarily withdraw from Emory University at any time. Official withdrawal requires completion and approval of withdrawal forms, which are available from the Office of Medical Education and Student Affairs in the School of Medicine. In the case of voluntary withdrawal, tuition refund will be prorated by the Office of the Bursar. No refund will be given after the fifth week of classes. No refund will be given for reduced course load.

Dismissal

A student may be dismissed from the Anesthesiology Program at Emory University for academic deficiency, for clinical deficiency, or for violation of standards of conduct (see section on CONDUCT). No refund will be given to a student who is dismissed.

Involuntary Withdrawal from Emory University

Emory University considers the safety and welfare of its students, faculty, and staff a top priority. Involuntary withdrawal information can be found at <u>www.med.emory.edu/education/programs</u> ... <u>involuntary-withdrawal.html</u>. This policy and related School of Medicine policies apply to students enrolled in the Master of Medical Science Program in Anesthesiology.

COUNSELING RESOURCES

Academic Counseling

If at any time during a semester, a student receives a grade of D or lower on an examination or has a projected grade of D or lower in any course, then that student is expected to meet with the course director to review course work and overall performance in the educational program.

University Counseling Services

Complete information about Emory's counseling services can be found at <u>www.emory.edu.</u>

CURRICULUM

The Master of Medical Science Program in Anesthesiology offers course work and clinical rotations in a dynamic curriculum. Individual courses and clinical rotations are subject to changes in name, number, semester offered, and location.

NOTE The semesters for the course listings in this section are the semesters in which the class entering in Fall Semester 2020 will take the courses. The class that entered in Summer Semester 2019 will take the courses in the semesters published in Student Handbook 2019.

Required Anesthesiology Courses

ANES 505A. Human Patient Simulation Lab I.

Fall. Credit 2 hours. Introduction to the operating room; anesthesia machine; basic drug doses and syringe preparation; airway equipment preparation; standard physiologic monitoring; basics concepts of anesthesia induction, maintenance, and emergence; basic airway management; basic hemodynamic management; anesthesia record keeping; basics of the preoperative patient data base and anesthetic plan; basic vascular access.

ANES 505B. Human Patient Simulation Lab II.

Spring. Credit 2 hours. Basic anesthesia procedures and concepts. Anesthetic simulation cases, including decision making and critical incidences related to hemodynamics, airway management, cardiac problems, as well as equipment problem solving.

ANES 505C. Human Patient Simulation Lab III.

Summer. Credit 2 hours. Spinal and epidural anesthesia; advanced vascular access using ultrasound; vasoactive drugs used in the management of hemodynamically compromised patients. Semester ends with a capstone simulation requiring each student to bring together their knowledge and experience to successfully conduct and complete an anesthetic.

ANES 507. Introduction to Anesthesia Practice.

Fall. Credit 5 hours. Introduction to concepts and techniques of general anesthesia, regional anesthesia, and monitored anesthesia care. Includes principles of airway management, anesthesia equipment, monitoring, patient evaluation, pharmacology, and physics.

ANES 508. Physiology for Anesthesia Practice

Fall. Credit 3 hours. Human physiology applicable to anesthesia practice based on an organ-system approach: cardiovascular, pulmonary, renal, muscular, digestive, neural, and endocrine. Other topics include metabolism, tissue regeneration, pain, and inflammation. Case based discussions will be integrated into the course.

ANES 509. Anesthesia Practice Seminar.

Fall. Credit 1 hour. Weekly small group case discussions, including the concepts and techniques presented in ANES 507. Anesthesia preop consultation and anesthesia records – paper and electronic – are emphasized.

ANES 512A,B. Principles of Airway Management I, II.

Spring, Summer. Credit 1,1 hours. Structure, function, pathophysiology, and diseases of the human airway. Basic and advanced principles of elective and emergent airway management, including equipment and techniques.

ANES 513. Anesthesia Delivery Systems and Equipment.

Spring. Credit 1 hours. Compressed gases, gas distribution systems, anesthesia machines, breathing circuits, anesthesia ventilators, waste-gas scavenging, respiratory care equipment, resuscitation equipment.

ANES 516A, B. Pharmacology in Anesthesia Practice I, II.

Summer, Fall. Credit 1 hour each. Drugs specifically related to the practice of anesthesia, including inhaled anesthetics, narcotics, barbiturates, benzodiazepines, anticholinesterases and anticholinergics, neuromuscular blockers, adrenergic agonists and antagonists.

ANES 520 Practical Aspects of Anesthesia Practice I.

Fall. 1 credit hour. Social, regulatory, ethical, and professional aspects of becoming an anesthesiologist assistant. Developing effective communication skills with patients and with other healthcare providers. Evidence based medicine and clinical practice. National healthcare issues, especially those pertaining to anesthesia practice.

ANES 525. Applied Anatomy for Anesthesia Practice

Fall. 2 credit hours. Gross anatomy, histology, and medical imaging. Anatomic terms, structures, and relationships emphasizing functional significance and application in clinical anesthesia practice. Laboratory provides demonstrations on models, prosections, and digital media.

ANES 530. Physics for Anesthesia Practice.

Fall. Credit 1 hour. Physical principles and processes applied to the practice of anesthesia. Dimensional analysis; work, energy, and power; gas laws; fluid mechanics; heat transfer; vaporization; solubility, diffusion, and osmosis; fires and explosions; laser and x-ray radiation; applied electric circuit theory; time constants.

ANES 535A,B. Principles of Monitoring and Instrumentation I, II.

Summer, Fall. Credit 2, 2 hours. Principles, applications, and interpretation of monitoring used in anesthesia practice: electrocardiography; invasive and non-invasive blood pressure; oximetry; cardiac output; hemodynamic calculations; respiratory gases; ventilation; ICP; electroencephalography; temperature; renal function; neuromuscular blockade; ultrasound; echocardiography; point-of-care instrumentation.

ANES 536A,B,C. Anesthesia Practice I, II, III.

Spring, Summer, Fall. Credit 4 hours each. Systems-based approach to physiology and pathophysiology in anesthesia practice, including applications and effects of general and regional anesthesia. Emphasizes the integration of preoperative evaluation, planning, and anesthetic management for surgical patients. Includes risk management and critical incidents in anesthesia. Includes participation and performance in small discussion groups.

ANES 540A,B,C. Clinical Methods.

Spring, Summer, Fall. Credit 1 hour each. Preoperative patient evaluation, including history taking, physical examination, chart review, and select laboratory, radiologic, and other testing. Basic EKG interpretation.

ANES 561A,B,C. Clinical Anesthesia I, II, III.

Spring, Summer, Fall. Credit 3 hours each. Foundations of the clinical practice of anesthesia gained through one-on-one supervised instruction in the operating room and other clinical locations. Grades for the 561 Clinical Anesthesia series include input from clinical evaluations and CCC participation and quizzes. Any student who is not on target for clinical hours at the end of fall semester will receive an incomplete (I) in ANES 561C.

ANES 611A,B,C. Senior Seminar in Anesthesia.

Spring, Summer, Fall. Credit 1 hour each. All Senior Friday activities, including patient presentations by students. Keywords review. Anesthesiology Department grand rounds. Unexcused absences will result in grade reduction.

ANES 620. Practical Aspects of Anesthesia Practice II.

Fall. 1 credit hour. Professional development related to employment and practice as an anesthesiologist assistant. National certification, state licensure, and credentialing. Medical coding and billing. Healthcare finance issues. Career and leadership opportunities at local, state, and national levels.

ANES 660A,B,C. Clinical Anesthesia I, II, III.

Spring, Summer, Fall. Credit 12 hours each. Clinical rotations in anesthesia, including all subspecialty areas, preop clinic, pain, critical care medicine. Any student who is not at 90 percent of the target for clinical hours for spring semester will receive an incomplete (I) in ANES 660A and will be referred to the Progress, Promotion, and Review Committee (PPRC). Any student who is not at 90 percent of the target for clinical hours for summer semester will receive an incomplete (I) in ANES 660B and will be referred to PPRC. Any student who is not on target for clinical hours at the end of fall semester will receive an incomplete (I) in ANES 660C, will not be eligible for graduation, and will be referred to PPRC.

ANES 680A,B,C. Comprehensive Examinations I, II, III.

Spring, Summer, Fall. Credit 2 hours each. Three general comprehensive examinations each semester cover the principles and practice of anesthesia. Three specialty comprehensive examinations during the senior year cover cardiac anesthesia, OB anesthesia, and pediatric anesthesia. Specialty examinations should be taken within 30 days of the student's completing the specialty rotation. Examination coverage is based on directed self-study and on monthly clinical concepts conferences occurring during the senior year. Each semester's grade is comprised of the scores on the three general comprehensive examinations and the scores on quizzes from the clinical concepts conferences during the semester. All general comprehensive examinations must be completed within the semester in which they are administered or within 10 days of the start of the next semester. Failure to complete an examination within the time allotted will result in a score of zero being assigned to that exam. The scores of all specialty comprehensive examinations taken during the year will be included in the grade for ANES 680C (the final semester of the senior year).

Elective Anesthesiology Courses

ANES 596R. Individual Tutorial Each semester. Credit variable. Provides opportunity for in-depth study of a curricular topic under the direction of a faculty member.

ANES 597R. Individual Directed Study

Each semester. Credit variable. Provides opportunity for in-depth study of a non-curricular topic under the direction of a faculty member.

ANES 695R. Individual Clinical Practicum

Each semester. Credit variable. Provides opportunity for clinical experience in a subspecialty area under the direction of a faculty member.

ANES 697R. Individual Directed Study

Each semester. Credit variable. Provides opportunity for advanced study under the direction of a faculty member.

ANES 699R. Individual Research

Each semester. Credit variable. Provides opportunity for laboratory or clinical research under the direction of a faculty member.

Required Basic Science Courses

Basic science courses are taught in their respective departments in the Emory University School of Medicine.

BAHS 504. Pharmacology.

Spring. Credit 3 hours. Basic principles of drug action; absorption, distribution, metabolism, and excretion of drugs; mechanisms of drug action; toxicity. Basis for the use of medicines in pharmacologic therapy of specific diseases.

Credit in Transfer

Matriculants into the Master of Medical Science Program in Anesthesiology have varied educational backgrounds – some of which may make it possible to receive credit in transfer for prior course work. The matriculant with a graduate degree (masters degree or doctoral degree) or the baccalaureate degree holder who has successfully completed applicable graduate courses within five years of application to the MMSc Program may be able to receive credit in transfer for previous graduate courses in human physiology and pharmacology.

The certified primary care physician assistant with a masters degree may be able to receive credit in transfer for his/her prior masters-level courses in human physiology, pharmacology, and clinical methods.

An applicant meeting any of the above criteria may complete a request for credit in transfer and submit the request as part of his/her application. Each request will be reviewed and decided individually.

DRESS CODE

Standards of Dress and Appearance

Students are expected to convey a professional demeanor at all times – not only in their behavior but also in their dress and appearance. A professional image conveys credibility, trust, respect, and confidence to one's colleagues, patients, and their families. In all educational settings – classroom, laboratory, and clinical environment – students are expected to be clean, well groomed, and dressed in an appropriate manner. Students are expected to dress professionally and wear a clean white coat unless otherwise instructed by faculty. Students must wear Program and SOM identification badges at all times in both clinical and academic settings.

All students are required to be clean and maintain appropriate personal hygiene. Hair and nails need to be clean, neat, and of reasonable length so as to not interfere with patient safety or with the student's safety or ability to perform their duties. Cologne and perfume are discouraged at all times and should never be worn on days when students have clinical assignments.

Patients vary in sensitivity to and in expectations regarding the appearance of their health care providers. A reasonable rule of thumb is to dress conservatively, thereby meeting the expectations of the most sensitive patients.

Guidelines for Dress and Appearance

Hair should be neat, clean, and of a natural human color. Unless head coverings are required for religious or cultural reasons, hats and other head coverings should not be worn.

Clothing should be clean and in good repair. Women should avoid wearing bare back tops, halter tops, midriff tops, spandex tops, and short skirts. Men should wear slacks and a dress shirt. Shorts and blue jeans are not appropriate attire.

Shoes must be clean and in good repair.

Scrubs must be worn only in designated locations. Scrubs are the property of the hospital and are not to be defaced, altered, or removed from the hospital. Stained or soiled scrubs must be changed as soon as possible.

Personal protective equipment (masks, hats, shoe covers) must be removed upon leaving the OR or procedural area.

Body piercings and tattoos should not be worn or displayed in professional settings.

You should expect to receive feedback about your appearance and attire from faculty, staff, and peers. You may also receive direct or indirect feedback from patients and their families. If your appearance or attire does not meet expectations for professional or clinical environments, faculty or preceptors may ask you to change prior to continuing in that environment.

Attire at all times outside the operating room is business casual, which should be comfortable but not detract from the serious educational atmosphere or from the climate of patient care. Students should avoid attire that could be offensive to the public, peers, patients, or patients' families.

Each student must be dressed appropriately in business casual attire whenever he/she is in any patient care environment, including entering and leaving the hospital. For clinical rotations in the operating room, appropriate attire always includes clean scrubs, hair covering, and eye protection.

Program and School of Medicine identification must be visible at all times. In certain clinical facilities, clean scrubs with a white coat may be worn for short periods outside the operating room (eg, breaks, patient transport). When scrubs and a white coat are being worn, you must NOT wear caps or shoe covers outside the operating room.

Scrubs may be required for human patient simulation and certain labs. Changing facilities and lockers are provided for first-year students. Students may not wear scrubs to and from Executive Park. Students may not wear scrubs at Executive Park for other than HPS or required labs. Students may never wear scrubs bearing hospital designations at Executive Park.

Scrubs are not to be worn outside the operating room. Scrubs may NOT be worn to and from clinical sites, to and from classes, or in classes. A student appearing in class in scrubs may be dismissed from that class. Each day that a student appears in scrubs (top and/or bottom) in the Program facility at Executive Park, he/she will have one point deducted from his/her clinical grade for that semester.

For clinical rotations outside the operating room (eg, Preop Clinic, Pain Service), appropriate attire is always business casual and white coat with Program and EUSM identification visible.

This policy is in effect beginning with the first day of class and continuing throughout enrollment in the educational program. In addition, the dress code policies of the Emory University School of Medicine apply to students at all times. Some clinical rotation sites may have additional dress code requirements which must be followed at that site.

Failure to follow the dress code policies of the Program, Emory University School of Medicine, or an assigned clinical rotation site may result in dismissal from the clinical assignment or from class with resulting grade penalty.

DRUG TESTING AND CRIMINAL BACKGROUND CHECKS

All students coming into the School of Medicine must undergo a criminal background check (CBC) and drug screening prior to matriculation as facilitated by a vendor contracted by Emory. Acceptance to the Emory University School of Medicine is contingent upon the student's authorization to conduct a drug screening and CBC, as well as the release of findings to Emory. The Admissions Committee will review any findings to determine what, if any, action is required.

Students may also be required to undergo additional CBCs and drug screening as required by their Program, by clinical rotation sites, or if required as part of an evaluation of their fitness to participate in medical education.

All positive and multiple negative-dilute drug screens and any findings from a CBC that were not previously disclosed by the applicant prior to acceptance will be reported to the Executive Associate Dean for Medical Education and Student Affairs and then referred to a faculty committee for further consideration. After reviewing results of the CBC and/or drug screen, the committee may seek additional information from the student in writing or via interview. In the case of multiple negative-dilute drug screens, the committee may require the student to submit to blood-based drug testing.

Based upon the reports and follow-up information, the committee will provide the Executive Associate Dean for Medical Education and Student Affairs with one of the following recommendations:

- Revocation of the acceptance to Emory University School of Medicine for students who have been accepted but not yet enrolled.
- □ Referral to a conduct committee for further consideration for enrolled students.
- \Box No further action for enrolled students and students accepted but not yet enrolled.

The Executive Associate Dean for Medical Education and Student Affairs will consider the report of the faculty committee and convey their decision to the student in writing.

Based upon the nature of the findings in the CBC report or drug screening, the Executive Associate Dean for Medical Education and Student Affairs reserves the right to immediately suspend a student, pending further investigation. The student may appeal the decision of the Executive Associate Dean for Medical Education and Student Affairs to the Dean of the School of Medicine.

EUSM 07/14/2023

EMPLOYMENT DURING THE PROGRAM

The schedule of studies and clinical activities of the Anesthesiology Program requires full-time engagement of each student. Employment during any part of the educational program may interfere with studies and clinical work and seriously jeopardize a student's ability to complete the degree program. Any student contemplating employment for any reason should discuss the matter with a Program Director <u>before</u> undertaking employment.

EQUIPMENT AND CLOTHING REQUIRED

Clinical experience begins in the first week and continues throughout the educational program. Labs and practica occur frequently during the first year.

Each student is required to have the following equipment with them every Program operational day: calculator with fractional exponents and parenthetical expression clean, short, white coat with Emory AA Program designation pen light six-inch, 15-centimeter ruler stethoscope student identification from Emory University School of Medicine student identification from the Anesthesiology Program

Failure to have all requisite equipment can result in grade penalty.

Each student must have the following equipment at Executive Park: solid-color scrubs¹ combination lock

¹Scrubs will be required for some labs and some practica. Since scrubs are not to be worn to and from the Program Office at Executive Park, each student should purchase and keep one clean set of scrubs at Executive Park throughout the first year. Scrubs must be purchased. Students may not take scrubs from any hospital.

EVALUATIONS BY STUDENTS

Feedback from students is a vital part of ongoing evaluation and improvement for the Program. Written comments (anonymous or attributed) are appreciated at any time. The Program conducts periodic surveys.

Courses and Instructors

Students are asked to evaluate courses, instructors, and seminar leaders on a regular basis. Evaluations are anonymous.

Clinical Rotations and Instructors

Students must evaluate clinical rotations and clinical instructors at the end of each rotation block. Content of the evaluations is anonymous. Failure to submit evaluations will result in an Incomplete grade for that semester's clinical course.

EXAMINATIONS

The Anesthesiology Program administers examinations within courses, as well as comprehensive examinations. The purposes for these two types of examinations are distinctly different. Examination formats include paper and pencil tests; computer based testing (CBT); objective, structured clinical examinations; and oral examinations.

Unless an exception is provided by the Anesthesiology Program, all CBT quizzes and examinations must be taken only in the rooms in which the computer-based testing is being administered.

Improper access to CBT quizzes and examinations represents misconduct – on the part of the examinee and the individual or individuals supplying a CBT access code to the examinee.

This CBT policy applies to all courses, human patient simulation, and comprehensive examinations in the Anesthesiology Program.

Each student must have an electronic device approved by the Anesthesiology Program for computerbased testing, and that device must be up to date for testing prior to the student's entering the room in which a computer-based exam will be administered.

The Program will supply hand-held calculators for all examinations. No other electronic devices (eg, personal computers, PDAs, cell phones, electronic memory devices, other computing or communications devices) are permitted in the rooms in which examinations are being conducted. Students must leave books, book bags, and all electronic devices outside the classroom prior to the start of an examination.

Course Examinations

Course instructors will publish their examination policy, including the purpose of examination, as part of their course syllabus, which will be distributed to all students no later than the first day of class.

Students must take each examination at the time that it is scheduled within a course. If a student must miss taking a scheduled examination, then he/she must inform the course instructor via text, email, or phone <u>prior</u> to the start of the examination. The course instructor will inform the student concerning rescheduling the examination. Penalties for failing to take the examination when it was scheduled and/or for failing to inform the course instructor <u>prior</u> to the start of the examination will be applied as stated in the course syllabus.

Basic science courses schedule and administer examinations independently of the Anesthesiology Program.

Comprehensive Examinations

Comprehensive examinations are an integral part of the education requisite to becoming a safe anesthesiologist assistant practitioner. Examinations contain objective and subjective items. The purpose of the comprehensive examinations is two-fold:

- Evaluate each student's progress in developing the knowledge, skills, and clinical judgement requisite to becoming an anesthesiologist assistant practitioner
- Help prepare the student for the national Certifying Examination

Coverage of each general comprehensive examination includes material from clinical task objectives, a schedule of topic assignments, and the general fund of knowledge of the practice of anesthesia. Coverage of each specialty comprehensive examination includes material of that specialty – cardiac anesthesia, OB anesthesia, or pediatric anesthesia.

Following final scoring of a comprehensive examination, a score report and keywords will be provided to each examinee for those items missed on the examination. It is the expectation of the Program faculty that each student will utilize his/her keywords to read and review material, remediate deficiencies, and prepare for subsequent comprehensive examinations.

The comprehensive examinations are secure examinations. Prior to taking a comprehensive examination, each student must acknowledge his/her responsibility and agreement to maintain absolute confidentiality concerning the contents of the comprehensive examination. It is a conduct violation to reproduce, transmit, or store in any form or by any means – electronic, mechanical, or otherwise – any portion of a comprehensive examination. It is a conduct violation to receive or provide assistance for a comprehensive examination personally or via the use of any unauthorized aid or by impermissible collaboration.

Each comprehensive examination contains questions on critical clinical concepts. The critical concept questions are more heavily weighted questions on each examination.

First-semester Math and Pharmacology Comprehensive Examinations

Two benchmark comprehensive examinations are administered during the first semester of the degree program. Comp Exam Phar covers basic anesthesia drugs. Comp Exam Math covers basic and applied math. The schedule for these two comp exams is posted on the Program Google Calendar. Students must pass each examination at the 85 percent level or better in order to continue in the Master of Medical Science Program in Anesthesiology. The score on the first attempt will be recorded as a component of the ANES 507 course grade. Each student has three opportunities to successfully complete each exam.

A student who fails to pass all three opportunities of either exam may be offered an academic leave of absence.

First-year Comprehensive Examinations

Three general comprehensive examinations are administered during each semester – fall, spring, and summer semester. If a student misses a comprehensive examination and does not have an approved request to be absent, then the student will receive a grade of F on that examination. Scores on first-year comprehensive exams are part of the grade of the clinical anesthesia course, ANES 561, for each semester.

Senior-year General Comprehensive Examinations

Three general comprehensive examinations are administered each semester for a total of nine general examinations during the senior year. If a student will miss a general comprehensive examination due to an approved request to be absent, the student must schedule the exam prior to the absence. If a student misses a general comprehensive examination and does not have an approved request to be absent, then the student will receive a grade of F on that examination. Scores on senior general comprehensive exams comprise the grade of ANES 680A and ANES 680B in fall and spring semesters, respectively. Scores on senior general comprehensive exams in summer semester comprise part of the grade for ANES 680C (see below).

Senior-year Specialty Comprehensive Examinations

Three specialty comprehensive examinations (cardiac anesthesia, OB anesthesia, pediatric anesthesia) are administered during the senior year. Each specialty examination should be taken within 30 days following the student's completion of the specialty rotation. The student must schedule administration of each specialty examination with the Program Office.

Preliminary scores and keywords for specialty comp exams will be distributed throughout the senior year in order to provide students with keywords to assist studying in preparation for the national certifying examination. Actual scores on the specialty exams may differ from the preliminary scores that accompany keyword distribution. Actual scores for specialty exams will be reported after final key validation, which occurs in summer semester. It is the final score for each specialty exam, along with the scores of the summer semester general comp exams, that will be used to calculate the grade for ANES 680C, which will be reported at the end of summer semester.

Comprehensive Examinations for Students in an Extended Degree Program

Students whose degree program has been extended for whatever reason must take the comprehensive examinations being administered during the semester of extension.

Remote Testing

The Anesthesiology Program administers remote testing for course examinations and for comprehensive examinations. All Program, School of Medicine, and University policies related to honesty and academic integrity apply to remote testing.

In addition, the Anesthesiology Program has the following policies for remote testing:

- □ The student must be alone at all times in the room where he/she is taking a remote exam.
- □ No print, electronic, or other sources of information may be available during remote testing.
- □ The student must maintain a full-face view at all times during remote testing.
- □ No information from the examination may be copied, transcribed, transmitted, or transferred by any means during or after remote testing.

Remote testing is monitored in real time <u>and</u> recorded. Each remote testing session can be reviewed at any time.

When monitoring or review reveals violation of one or more of the above policies, the student's score on the examination will be reduced by ten points for each violation.

For a continuous violation during remote testing (eg, failure to continuously maintain a full-face view), a failing score will be assigned to the exam.

For any student taking a remote examination, the Anesthesiology Program may require the student to take an examination of the same content in person at Executive Park.

FACULTY AND STAFF

A current listing of faculty and staff for the Anesthesiology Program is available through the Program Office.

FINANCIAL AID

Information about loans, scholarships, and deferred payments is available from Emory University's Office of Financial Aid at <u>http://www.studentaid.emory.edu</u>. Information about tuition loans is available from the Office of Medical Education and Student Affairs in the School of Medicine at <u>https://med.emory.edu/education/financial-aid/index.html</u>.

Student financial aid requests must be made annually. Rejection for financial aid for the first year does not necessarily mean that financial aid will not be available during the second year. Likewise, an award of financial aid for the first year does not guarantee financial aid for the second year.

GRADING AND REPORTING

Didactic Course Grades

Each course instructor is responsible for calculating, assigning, and reporting grades for his/her course. If a student has a question about the grade assigned for a course, the student should email his/her question to that course's instructor.

Laboratory and Simulation Course Grades

The laboratory faculty and HPS faculty are responsible for assessing student performance and for calculating, assigning, and reporting grades for labs and for HPS. Student performance in labs and HPS is based on

- attendance, including tardiness and continued presence
- preparation for the scheduled exercise
- understanding and applying procedures
- understanding and operating equipment
- understanding and applying principles of physiology, pharmacology, monitoring, and clinical methods
- desire to learn
- participation
- conduct

Conference Course Grades

The conference director is responsible for assessing student performance and for calculating, assigning, and reporting grades for conferences. Student performance in conferences is based on

- attendance, including tardiness and continued presence
- understanding topics
- desire to learn
- participation
- conduct

Seminar Course Grades

The seminar director is responsible for assessing student performance and for calculating, assigning, and reporting grades for seminars, including small discussion groups. Student performance in seminars is based on

- attendance, including tardiness and continued presence
- preparation
- quality of presentations
- understanding topics
- desire to learn
- participation
- conduct

Clinical Course Grades

Clinical anesthesia training begins during the first week and continues through the last week of the degree program. Clinical anesthesia training is a continuum during which evaluations occur daily, weekly, and monthly – depending upon the evaluation tools.

Clinical Evaluations

Evaluation of student performance in clinical includes but is not limited to

- attendance, including tardiness and continued presence
- knowledge
- skills
- multitasking
- problem solving
- completion of tasks
- desire to learn
- participation
- conduct
- overall performance

A clinical evaluation is mandatory for every day that a student has a clinical assignment – with certain exceptions (eg, Pain Service). The clinical evaluation system utilizes an electronic evaluation instrument which transmits evaluation data to the Program. The evaluation must be completed by the preceptor involved in that day's clinical activity. Failure to submit clinical evaluation data within seven (7) calendar days of a clinical assignment will result in no clinical hours being awarded for each clinical day for which the clinical evaluation data are missing.

Clinical Attendance

The Program uses timekeeping system to monitor each student's attendance on every clinical assignment and clinical hours reported on all clinical assignments. Each student must use the designated phone at the clinical site to sign in and sign out of the timekeeping system.

Failure to properly clockin/clockout from the designated clinical site will result in no clinical hours being posted for the clinical day.

Reconciliation of Assignments, Attendance, and Evaluation Data

Each student's attendance and clinical evaluations must match the clinical assignment made by the Program. Assignments, attendance, and evaluation data are reviewed during each semester. Repeat submission problems or inconsistencies or irregularities in clinical time and/or evaluation data represents misconduct and may be grounds for probation or dismissal.

Key Clinical Evaluations

Students may be assessed by key clinical evaluators at each clinical rotation site. Input from these practitioners will be incorporated into clinical grades and into the information provided to the Clinical Review Committee to assist in determining the student's readiness to progress to the next clinical level.

Comprehensive Examinations

Comprehensive examinations are an integral part of clinical grading.

Clinical Scores – Daily Evaluations

In the first year and in senior year, clinical scores are derived from two components of daily evaluations. A <u>grid score</u> (50%) comes from preceptors' scoring evaluation questions in the electronic evaluation instrument. A <u>comments score</u> (50%) is derived from additional feedback provided by preceptors and other clinical faculty. Comments are scored by the Clinical Review Committee (CRC) based on each student's aggregation of feedback during a semester; comment scoring is blinded to the students' names. A rubric is used to assign a score for the comments; eg, an 88 is assigned to comments that reflect a student is performing satisfactorily and meeting expectations.

Assignment of Clinical Grades

The Anesthesiology Program reserves the right to have clinical grades assigned by the Program Directors and Program faculty based upon their review of a student's clinical evaluations, clinical comments, and communications from clinical sites and preceptors. Conduct issues may override the grade assignment that would otherwise have been made based solely on calculation of daily clinical evaluation data.

The Program makes clinical assignments based on each clinical site's requirements pertaining to day, evening, night, and weekend rotations and call. Variance from the assignment must be submitted to the Program on an Alternate Clinical Attendance Form. If a student changes the format of a rotation without approved alternate attendance, the student's letter grade in clinical anesthesia for that semester will be decreased by one letter grade.

GRADING

Grade Scale

The following letter grades, their indication of performance, and assigned quality points are used by the Anesthesiology Program:

A B C D F	excellent above average average below average failing	4 3 2 1 0
I.	lannig	0
W WF	withdrawal without penalty withdrawal while failing	no course credit or residence credit no course credit or residence credit
WU	withdrawal while unsatisfactory	no course credit or residence credit
S	satisfactory	course credit and residence credit
U	unsatisfactory	no course credit or residence credit
IP	in progress	
Ι	incomplete	may result in a grade with credit or IF or IU

The notation IP for *in progress* will be submitted to the Registrar's Office when work in a course extends beyond one semester.

The notation I for *incomplete* will be submitted when course work, examinations, or clinical assignments have not been satisfactorily completed within a semester. If the course work and/or examinations have not been completed within 10 days of the beginning of the next semester, a final grade of IF or IU will be assigned. An incomplete will continue for any ANES 660 course until the clinical hours target has been met for the semester in which the incomplete was assigned.

Grade Reporting

Grades for basic science courses are reported to the Registrar by each basic science department. Grades for Anesthesiology Program courses are reported to the Registrar from the Program Office. Course grades usually are available to each student within a week following the close of each semester. Students may log into the University computer system and view their grades from the Registrar's office at any time.

Transcripts

Official transcripts are available from the Office of the Registrar. The Anesthesiology Program does not provide transcripts to students or to third parties.

GRADUATION REQUIREMENTS

Suitability and fitness for graduation is based not only on scholastic achievement but also on the student's character, ethical conduct, physical abilities, and professional interaction with patients, patients' families, and other healthcare professionals. Eligibility to be awarded the Master of Medical Science degree from the Anesthesiology Program involves the following requirements:

- o Residence of seven semesters.
- o Satisfactory completion of all didactic and clinical work.
- o Continued demonstration of ethical and moral behavior.
- o Absence of any felony convictions.
- o Adherence to the rules and regulations of all institutions at which the student has had clinical rotations, especially those rules and regulations pertaining to patient care and confidentiality of medical records.
- o Attaining a minimum of 2500 clinical hours.
- o Attaining the minimum number of cases and procedures listed in the Anesthesia Case Table.

Each student must successfully complete a <u>minimum</u> of 2500 clinical hours and the minimum number of required cases and procedures during the degree program in order to be considered for candidacy for graduation. There are no exceptions to these requirements.

Degree Certification for Graduation

Emory University has a *sealed records policy* – no changes can be made to a student's record after the degree certification date. All course work, clinical work, and other degree requirements must be completed and grades submitted prior to the degree certification date.

Degree certification dates are established by the University and cannot be changed or delayed for an individual student. Delaying degree certification for one student would delay degree certification for all students – thereby affecting every student's final transcript and, therefore, credentialing and licensing.

If a student cannot complete all requirements in order to meet the degree certification date, then the student may continue in *graduate in residence* status (grad res) with the possibility of graduating at the end of the next semester. Tuition and fees for a student in grad res is published each year by the School of Medicine.

Degree certification dates are published by the University Registrar.

HEALTH REQUIREMENTS

Given the emergence of new infective organisms and the rapidity with which some communicable diseases spread, policies stated in this edition of the Student Handbook may be superceded at any time by more applicable policies of Emory University, Emory Healthcare, Emory University School of Medicine, or the Master of Medical Science Program.

Policies of the School of Medicine

Policies and information for the School of Medicine can be found on Canvas in the School of Medicine (SOM) Connections course.

History and Physical Examination

A recent medical history and physical examination must be on file in the Emory University Health Service and in the Program Office prior to registration for the first semester. An updated medical history and physical examination are required prior to re-enrollment following an absence of one year or longer. Following a medical leave of absence of any duration, an updated medical history and physical examination, as well as a clearance for the reason for the medical leave, are required prior to re-enrollment.

Immunizations

Emory University and the School of Medicine have policies regarding immunizations, vaccinations, and testing. See <u>http://studenthealth.emory.edu/hs/new_students/immunization</u> for current information.

Each student must maintain a current record of immunizations, vaccinations, and testing on file in the Program Office. Failure to have a current record will result in the student's being immediately withdrawn from clinical assignments until the record is brought up to date.

Communicable Diseases and Infection Control

At matriculation, each student must undergo education provided by the Emory University School of Medicine pertaining to infection control. Throughout the degree program, each student is expected to utilize universal precautions and to comply with all OSHA-mandated safety requirements and always use OSHA-mandated protection equipment and disposables.

In the event of exposure to known or suspected pathogenic organisms, the student should do the following, depending upon the clinical location:

Emory-affiliated clinical sites Notify the Chief of the Anesthesiology Service or his/her designee and follow the protocol of the School of Medicine.

All other clinical sites: Contact the rotation's Physician Supervisor or his/her designee and follow that institution's exposure protocol.

All infectious disease exposure incidents must be reported to the Program within 72 hours using a Report of Infectious Disease Exposure.

Colds, Flu, Gastroenteritis

Colds, flu, and gastroenteritis represent risks to patients. The influenza viruses¹ and the norovirus² are highly contagious. The following precautions and actions help decrease the spread of infection. The Anesthesiology Program endorses and follows these CDC guidelines:

- □ Be vigilant with hand hygiene. Clean your hands before and after every patient contact *foam in/foam out*.
- □ In most situations, alcohol-based hand sanitizers are the best way to clean hands. After applying, rub your hands together until the hand sanitizer has dried completely.
- □ To prevent spread of norovirus, wash your hands with soap and water. Soap and water work better than alcohol hand sanitizers against norovirus.
- Always clean your hands after using the restroom.
- □ If you are ill and have a fever:
 - You should not go to clinical follow Program policies regarding RTA.
 - If you have a high or persistent fever, you should visit a healthcare provider (eg, Student Health or Minute Clinic) where a rapid influenza diagnostic test may be administered and you may be able to receive appropriate supportive medication if the diagnosis has been made in time. Be sure to inform the healthcare provider that you are involved in clinical medicine and are contacting patients.
 - If you have the flu, you should remain at home for 24 hours after your temperature has returned to normal.
- □ If you become ill or develop a fever while at clinical:
 - Notify the clinical coordinator for that site and leave clinical.
 - Notify the Program Office and follow Program policies regarding RTA.

¹Symptoms of infections caused by influenza viruses include fever (although not everyone develops fever with flu), chills, cough, sore throat, nasal congestion, myalgias, headache, and fatigue. Symptoms appear one to four days following exposure. An infected individual is contagious one day before symptoms appear and for five to seven days after becoming ill. Although the flu vaccine is required for all students, the vaccine is not 100 percent effective in preventing influenza.

²Symptoms of acute gastroenteritis caused by norovirus include nausea, vomiting, diarrhea, and abdominal pain, as well as fever, headache, and myalgias. Symptoms usually develop 12 - 48 hours after exposure. Recovery usually occurs within one to three days.

Tuberculosis

PPD Testing

PPD testing is provided through the Emory University Health Service. Students should provide one copy of each PPD test result to the Program Office and retain one copy for their files. Frequency of required PPD testing depends upon each student's clinical rotation schedule.

PPD Conversion

During full-time enrollment in the Program, any student who undergoes PPD conversion must follow the protocol of the School of Medicine.

Guidelines for Students Infected with HIV, Hepatitis B, or Hepatitis C

Any matriculant who knows that he/she is infected with the human immunodeficiency virus (HIV) or with hepatitis C virus or with hepatitis B virus or has an active TB infection must notify the Program during the initial registration period so that appropriate action can be taken.

Any student who learns that he/she has become infected with the human immunodeficiency virus (HIV) or with hepatitis C virus or with hepatitis B virus or with tuberculosis must notify the Program immediately and must follow guidelines established by the School of Medicine.

HEALTH AND MENTAL HEALTH SERVICES

Emory University Student Health Service

The Emory University Student Health Service is located at 1525 Clifton Road on the main Emory campus. Complete information about services can be found at <u>http://studenthealth.emory.edu</u>.

EUSHS is responsible for receiving and approving each student's history and physical examination at matriculation. EUSHS maintains each student's immunization record.

Mental Health Services

Complete information about mental health services and counseling can be found at <u>http://studenthealth.emory.edu</u>.

HONORS AND AWARDS

The John E. Steinhaus Award for Academic Excellence is presented at graduation to the student with the highest overall cumulative grade point average.

The David M. Nagle Award for Clinical Excellence is presented at graduation to the student who has maintained the highest clinical grade point average and who, in the opinion of the faculty, best exemplifies dedication to clinical excellence.

The Wesley T. Frazier Achievement Award is presented at graduation to the student who in the opinion of the faculty has demonstrated persistence and self-motivation to improve his/her clinical skills during the senior year.

Justin L. Lunt Memorial Award is presented at graduation to the student who has demonstrated unwavering professionalism, who looks out for others and is kind to all, whose conduct and actions model the high standards of the Emory Anesthesiologist Assistant Program.

HOUSING

Housing information is available from Emory's Office of University Housing online at www.emory.edu/housing.

IDENTIFICATION

Picture IDs are provided by the Anesthesiology Program and by the School of Medicine. Both IDs must be worn at all times either on the student's white coat or on scrubs. The student's picture and name on the front side of the Anesthesiology Program ID must be visible at all times whenever the student is in a clinical setting.

INSURANCE

Disability Insurance

Information regarding disability insurance is available from the Office of Medical Education and Student Affairs.

Health Insurance

Students in the Anesthesiology Program at Emory University are required to have continuous health insurance coverage in force for the duration of their enrollment. Complete information about insurance requirements, including information about the waiver process, is available from the Office of Medical Education and Student Affairs.

Each student must have a copy of his/her health insurance coverage on file in the Program Office before beginning any clinical assignments. No student will be allowed to begin or continue on clinical assignments without a copy of their current health insurance coverage being on file in the Program Office.

Liability Insurance

Students who are enrolled full-time in the Emory University School of Medicine are covered by liability insurance while they are on assigned clinical rotations. Students do NOT have liability insurance coverage during clinical or nonclinical employment or during participation in programs that are not assigned as part of the Master of Medical Science Program in Anesthesiology.

LETTERS OF RECOMMENDATION

Upon written request by the student, a Program Directors or other faculty member may provide a letter or complete a form of recommendation for a student. Program Directors will utilize, among other sources, the student's record, including written and transcribed evaluations. Misconduct may be reported in letters and forms of recommendation. All requests for letters and forms of recommendation require written authorization from the student or graduate making the request. Forms are available in the Program Office. The student's written request must include a statement concerning his/her providing or not providing a waiver for his/her right to access the letter or form of recommendation.

MEETINGS

Students are encouraged to attend professional anesthesiology meetings during the first and second years of the educational program.

PHOTOGRAPHY & RECORDING

The Anesthesiology Program utilizes audio-video recording for teaching and for evaluation of students enrolled in the degree program. The Anesthesiology Program also documents Program activities at Executive Park, clinical sites, and other locations, including photographs and video recordings that include students. By enrolling in the Anesthesiology Program, the student consents to participation in these photography and video recordings.

PRACTICE OF ANESTHESIA

Personal Risks Associated with the Practice of Anesthesia *Exposure to Pathogens*

Anesthesiologist assistants, physicians, nurses, and other healthcare providers that have direct contact with patients are at risk for occupational exposure to pathogenic organisms. Exposure can occur via contact with blood and other body fluids and tissues; air-borne and droplet transmission; needle stick or other penetration of skin.

The Anesthesiology Program and Emory University School of Medicine promote the safety and well-being of students as follows:

The Program and other departments and divisions in Emory University School of Medicine provide mandatory training in universal precautions and other work-safety practices.

All clinical training sites provide students on rotation with the OSHA-mandated safety and protection equipment and disposables.

In the event of exposure to known or suspected pathogenic organisms, the student is entered into a protocol established by Emory University through the Emory University Health Service and/or the protocol established by the clinical site at which the exposure occurred.

Substance Abuse

Both anesthesiologists and anesthetists are at greater risk for substance abuse than practitioners in other medical specialties or individuals in the general population. Handling and administering controlled substances occurs daily in the practice of anesthesia, and current literature suggests that individuals with a history of substance abuse of any kind are more likely to develop a drug abuse problem if they enter the field of anesthesiology.

If at any time during your enrollment in the degree program, you realize that you are using alcohol excessively or that you are suffering from any other form of drug abuse, you must contact a Program Director immediately so that appropriate followup can be instituted.

Exposures During Pregnancy

Certain risks exist for gravid women in healthcare environments, including exposure to communicable diseases (eg, cytomegalovirus) and exposure to anesthetic gases and vapors. The Anesthesiology Program will make every effort to minimize risks for gravid students. Any student who knows or has reason to believe that she is pregnant should speak with one of the Program Directors as soon as possible. The Program will review the student's clinical assignments, make indicated changes, and inform the clinical sites.

Technical Standards

To undertake and successfully complete the Anesthesiology Program, as well as successfully function as an anesthetist after graduation, requires that an individual meet certain fundamental physical, cognitive, and behavioral standards. The requisite technical skills include but are not limited to the following:

- o Effectively communicating verbally with patients and their family members and with other healthcare professionals.
- o Interacting with patients, including obtaining a history and performing a physical examination.
- Effectively communicating in writing and by record keeping those data and information essential to the practice of anesthesia and the care of patients, in general.
- o Reading and comprehending written parts of the medical record and other patient care documents in order to safely and effectively participate in the practice of anesthesia.
- o Having sufficient knowledge, motor skills, and coordination to perform diagnostic and therapeutic tasks, including invasive procedures, on patients in a timely manner so as to insure the safety and well-being of the patients. These tasks include but are not limited to peripheral and central venous catheterization, arterial puncture and cannulation, bag-and-mask ventilation, laryngeal mask airway insertion and management, endotracheal intubation.
- o Having sufficient strength, motor skill, and coordination to lift, move, and position patients as required for administration of anesthesia and performance of cardiopulmonary resuscitation.
- Having sufficient speed and coordination to quickly and safely react to emergent conditions throughout the hospital in order to order to assure patient safety.
- o Recognizing and differentiating colors of signals displayed on monitors; being able to work in both *light* and *dark* conditions as exist in patient care areas (eg, operating room, radiology suite, endoscopy suite); being able to recognize details of objects both near and far.
- o Hearing, processing, and interpreting multiple conversations, monitor signals, alarms, and patient sounds simultaneously in fast-paced patient care settings (eg, operating room, intensive care unit, emergency room).
- o Having no impairment that would preclude continuous performance of all of the above activities or any and all of the other activities that are an integral part of an anesthesiologist assistant's participation in the anesthesia care team.

If at any time during enrollment in the degree program, a student realizes that he/she is unable to meet any of the above technical standards, the student must contact a Program Director immediately so that appropriate followup can be instituted.

PROFESSIONAL ORGANIZATIONS

The American Academy of Anesthesiologist Assistants (AAAA) is the principal national professional organization for anesthesiologist assistants. AAAA offers a student membership category. Visit AAAA at www.anesthetist.org.

The American Society of Anesthesiologists (ASA) offers membership to anesthesiologist assistant students and practitioners. Visit the ASA at <u>www.asahq.org</u>.

RULES, REGULATIONS, AND POLICIES OF EMORY UNIVERSITY AND EMORY UNIVERSITY'S SCHOOL OF MEDICINE

Policies of Emory University are provided at <u>http://policies.emory.edu</u>. Additional information can also be found in the Emory University Campus Life Handbook (<u>www.emory.edu/campus_life</u>).

Policies of the School of Medicine can be found on Canvas in the School of Medicine (SOM) Connections course.

Each student enrolled in the Anesthesiology Program is responsible for reading, understanding, and abiding by all applicable Emory University and School of Medicine policies, rules, and regulations. Questions pertaining to rules, regulations, and policies should be directed to one of the Program Directors.

SENIOR FRIDAY

During the senior year, Senior Fridays occur at the end of each clinical rotation. Attendance for Senior Friday activities is governed by the following rules:

- □ If a student is on a clinical rotation within 150 miles of the Program Office at Executive Park, the student is expected to complete their Thursday clinical assignments and be present at Executive Park for all Senior Friday activities.
- □ If a student is on a clinical rotation beyond 150 miles of the Program Office at Executive Park, the student is expected to complete their Thursday clinical assignments and attend all Senior Friday activities remotely with camera on.
- □ If a student is driving to a clinical rotation that is greater than 1,000 miles from their current clinical rotation, the student must schedule and take their comprehensive exam prior to Senior Friday and should travel Fri/Sat/Sun to their next rotation. A request to be absent for Senior Friday should be submitted in CORE using the designation *Travel Day*.

Attendance at clinical rotations and attendance at Senior Friday activities are monitored by the Program. Unapproved absences will impact the ANES 611 course grade and may become a conduct issue.

SIMULATION

Simulation is used in the Anesthesiology Program both for instruction and for evaluation.

Once instruction of a topic or skill has been completed, then that topic or skill my be evaluated during any subsequent simulation session or by the use of standardized evaluation tools, including but not limited to computer based testing (CBT); written examinations; audiovisual recordings of task performance; and objective, structured clinical evaluations (OSCE).

Evaluations are conducted uniformly across student cohorts. Evaluation scores may be used in the calculation of course and/or clinical grades. Evaluations may also be used in assessing students for advancement from semester to semester during the year or for assessing students for advancement from the first year to the senior year.

SOCIAL MEDIA

Each student is responsible for his/her postings on the Internet and in social media. In all postings and social media communications, each student is expected to be courteous, respectful, and considerate of others. Inappropriate postings on the Internet or in social media represent unprofessional behavior and will be considered conduct violations. Any student who is responsible for an inappropriate posting may face disciplinary action including dismissal from Emory University without regard to academic standing.

Students should always consider the following points before posting comments, videos, pictures, or text on the Internet or on a social media site:

- □ There is no such thing as an *anonymous* post.
- □ Making postings *private* does not preclude others from copying and pasting comments onto public websites. A *private* posting that becomes public is subject to being considered a conduct violation.
- □ Posts or comments should be submitted with full identification. Where a student's connection to Emory is apparent, it should be made clear that the student is speaking for himself/herself and not on behalf of Emory. A disclaimer, such as *The views expressed on this [blog | website] are my own and do not reflect the views of Emory University, the School of Medicine, or the Anesthesiology Program* is required.
- □ Internet and social media activities may be permanently linked to the author which means that subsequent performance evaluations, future clinical rotations, and employment opportunities can be adversely affected by inappropriate postings.
- □ Postings on the Internet or in social media must not violate any state or federal laws.
- □ Postings on the Internet or in social media must not violate HIPAA regulations. This prohibition applies to both living and deceased patients.
- Postings on the Internet or in social media must not include any identification of the facility or the personnel or the cases on any clinical rotation.

STUDENT RECORDS AND FILES

The official record of each student enrolled in Emory University is maintained in the Office of the Registrar. To assist in evaluating each student's progress in the Program, records also are maintained in the Program Office. It is the policy of the Emory University School of Medicine that student records are to be maintained securely and are not to be made available to anyone other than faculty and staff of the Program and those persons involved in clinical rotations of the Program as permitted by the student.

To enable Emory University and clinical rotation sites of the Anesthesiology Program to evaluate a student's eligibility to participate in clinical rotations and to evaluate a student's performance on clinical rotations, it is necessary for Emory University and the clinical rotation sites to exchange educational records and information about that student. The educational records and information subject to release and exchange include grade reports, transcripts, evaluations, attendance records, examination results, and records of conduct and disciplinary investigations and actions. Release and exchange of educational records and information is between and among physicians, faculties, administrators, and other designees of Emory University and the facilities which have an Agreement with Emory University to provide clinical rotations. Each student must provide written permission before any records are released or exchanged.

TECHNOLOGY

The Anesthesiology Program's technology requirements follow the guidelines established by Emory University and the School of Medicine.

Each student is required to own a laptop computer that meets or exceeds minimum information technology requirements, including the ability to . . .

- □ Access and download course files (eg, documents, presentations, videos, schedules).
- **U**pload collaborative assignment files and other materials.
- □ Take quizzes and examinations employing Program-approved security. It is the responsibility of each student to ensure that his/her laptop is in good working order and capable of running the required software on exam days.
- Participate in remote educational activities (eg, zoom lectures, seminars, conferences when on away rotations).
- □ Access resources via different browsers.
- □ Access the Program's LMS, Canvas.
- □ Submit papers, lab assignments, and other materials required by courses.

Each student is required to attend a computer orientation session with their laptop so the laptop can be configured, certified, and approved for use. Any student who fails to certify their computer prior to the beginning of classes in fall semester will not be able to continue in the curriculum. Delay in obtaining certification beyond three days will result in dismissal.

The school will work with any student who has barriers to purchasing a laptop to determine temporary and long-term solutions. A student with barriers will not be penalized.

TRAVEL & LODGING

Students are responsible for costs related to travel, parking, and lodging for all educational activities and clinical rotations during the degree program. This student responsibility includes transportation in metropolitan Atlanta, in the State of Georgia, and in other states and Washington, DC.

During the senior year, reimbursement up to \$1500 is available to cover expenses of each month of an away rotation. An annual limit of \$3000 applies unless funding for additional away rotations is approved by a Program Director. Reimbursement for housing will <u>not</u> be provided when low-cost or no-cost lodging is available at a senior clinical rotation site.

Students must submit original copies of receipts for which they want reimbursement. Receipts must be submitted within 14 days of the end of the rotation. Once a student has reached the annual limit, the student will be personally responsible for all subsequent away-rotation costs.

TUITION AND FEES

A current listing of tuition and fees is available in the Program Office. Payment of tuition and fees is due at registration for each semester. Tuition and fees are subject to change and will affect all students unless otherwise specified. Please refer to the University calendar for tuition payment deadlines. Payment for any semester is due approximately ten days before the official start of the academic term.

Mandatory Confirmation of Payment

Because every semester of the Anesthesiology Program contains clinical assignments and because tuition and fees must be paid at registration of each semester in order for liability insurance coverage to be in effect, no student will be permitted to participate in a clinical rotation or clinical assignment in any semester until he/she has paid tuition and fees for that semester.

WEATHER

Emory University and the Metro Atlanta Area

In the event of inclement weather in the Atlanta area, Emory University will announce a delayed opening or a closing. University operations usually are announced by 5:30 AM. If it is not possible to specify an opening time, but it is expected that the University will open at some time during the day, an announcement to this effect will be made. The Anesthesiology Program's classes, labs, and examinations will follow the University's operational decision.

In line with School of Medicine policy, the Anesthesiology Program encourages students to attend clinical assignments if weather and roads permit doing so safely. In the event of inclement weather at a clinical rotation site, the student should follow the guidelines announced for that area by local, state, or federal authorities, or by the hospital at which the student is rotating.

Forms

Forms to be Completed at Matriculation

The eleven forms that are part of this Student Handbook must be completed by each student by initialing the designated statements. Failure to complete all of the forms may preclude enrollment in the Anesthesiology Program.

- o Consent for Release and Exchange of Educational Records
- o Consent for Release of Medical Information
- o Acknowledgment of Continuous Health Insurance Coverage
- o HIPAA Confidentiality Statement
- o Confidentiality Related to Patients and Healthcare Facilities
- o Student Information
- o Consent for Photography and Recording
- o Authorization for Drug Testing and Release of Drug Test Results
- o Release and Waiver of Liability: Venous Vascular Access Lab
- o Consent for Release of Contact Information to Professional Organizations

Forms to be Used During Enrollment

Several forms (electronic and/or paper) are used during enrollment in the Program. Locations for the forms are available through the Program Office. The forms include . . .

- o Report of Infectious Disease Exposure
- o Attendance Exception Report
- o Alternate Attendance Form

CONSENT FOR RELEASE AND EXCHANGE OF EDUCATIONAL RECORDS

Students in the Anesthesiology Program participate in clinical rotations which are part of the requisite course work for the Master of Medical Science degree offered by Emory University.

To enable Emory University and the clinical rotation sites to evaluate a student's eligibility to participate in clinical rotations and to evaluate a student's performance on clinical rotations, it is necessary for Emory University and the clinical rotation sites to exchange educational records and information about that student. The educational records and information subject to release and exchange include grade reports, transcripts, evaluations, attendance records, examination results, and records of conduct and disciplinary investigations and proceedings. Release and exchange of educational records and information is between and among physicians, faculties, administrators, and other designees of Emory University and the facilities which have an agreement with Emory University to provide clinical rotations.

I hereby consent to the release and exchange of my educational records and information as described above.

CONSENT FOR RELEASE OF MEDICAL INFORMATION

Students in the Anesthesiology Program participate in clinical rotations which are part of the requisite course work for the Master of Medical Science degree offered by Emory University. To enable Emory University and the clinical rotation sites to determine a student's eligibility to participate in clinical rotations, certain medical information about that student is required by Emory University and the clinical rotation sites.

Emory University, through its Emory University Health Service, is authorized to release to the Master of Medical Science Program in Anesthesiology, Emory University School of Medicine, and its clinical affiliates, medical information, including but not limited to immunization status, psychiatric and psychological information, information concerning infectious and communicable diseases (eg, tuberculosis, HIV/AIDS, hepatitis), information concerning alcohol and other drug abuse and treatment thereof, to be used to satisfy the health information requirements of clinical sites at which the student will rotate.

I hereby release Emory University and its officers, trustees, agents, and employees from any and all liabilities, responsibilities, damages, and claims which might arise from the release of information authorized above. I hereby waive any privilege with respect to records of any psychiatrist or psychologist released to the above named individual or agency and likewise waive any privilege concerning records of infectious or contagious diseases, including HIV/AIDS, and/or drug or alcohol abuse or treatment of same. I acknowledge that this consent is valid for one year following my graduation from or withdrawal from or other termination from the Master of Medical Science Program in Anesthesiology. I understand that I may withdraw this consent for release of information at any time prior to the expiration date, except to the extent that action has been taken in reliance hereon. I further understand that Emory University may refuse to release records where it will be detrimental to my physical or mental health or to the extent that psychiatric, psychological, or other mental health records are involved.

ACKNOWLEDGMENT OF CONTINUOUS HEALTH INSURANCE COVERAGE

Students in the Anesthesiology Program in the Emory University School of Medicine are required to have continuous health insurance coverage in force for the duration of their enrollment.

Each student must have proof of health insurance coverage on file in the Program Office for the duration of their enrollment.

Payment for all medical and psychiatric services – elective and emergent – are the responsibility of the student no matter what the source of an illness or injury may be. Student responsibility for payment of medical services includes all laboratory and other diagnostic and therapeutic services rendered as part of a protocol into which a student is entered in the event of exposure to known or suspected pathogenic organisms whether that protocol has been established by Emory University through the Emory University Student Health Service or by the clinical site at which the exposure occurred.

I hereby acknowledge my responsibility and agree to maintain continuous health insurance coverage through the health-insurance provider established by Emory University while I am enrolled at Emory University. If now or in the future, I elect to maintain health insurance coverage different than the health insurance plan offered through Emory University, I acknowledge that it is my responsibility to obtain a waiver of this requirement according to Emory University policy.

HIPAA CONFIDENTIALITY STATEMENT

IN FULFILMENT OF OBLIGATIONS UNDER THE UNDER THE HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT Prior to beginning any clinical activity, each student must review, understand, and agree to standards which protect the confidentiality and privacy of healthcare information as described in the Health Insurance Portability and Accountability Act (HIPAA). Each student will receive training on the standards enumerated on the reverse side, and a record of each student's agreement to these standards will be maintained during the student's enrollment at Emory University and for a period of ten years thereafter. A copy of a student's agreement to these standards may be made available to any clinical site at which the student rotates. When a student participates in a clinical rotation at a non-Emory clinical site, the student may be provided with training in that site's specific HIPAA policies and procedures and will be required to comply with those policies and procedures.

I hereby acknowledge my responsibility under applicable Federal law to keep confidential any and all information regarding patients and healthcare facilities. I agree, under penalty of law, not to reveal to any person, except those persons authorized as clinical staff, clinical faculty, and associated personnel, any specific information regarding any patient. I further agree not to reveal to any third party any confidential information related to patients or healthcare facilities except as required by law or as permitted by law and authorized by the healthcare facility at which the information is maintained. I furthermore agree not to maintain in any form, including but not limited to print and electronic, any identifiable patient-related information, including patient's name; address in any form or format; medical record number or other unique healthcare identification number; date of birth; patient-identifiable geographic information; any full-face or comparable image.

- I acknowledge my responsibility and agree to never discuss any patient matters or healthcare facility matters in any public venue.
- I acknowledge my responsibility and agree to participate in clinical conferences without revealing any identifiable patient-related information, including patient's name; address in any form or format; medical record number or other unique healthcare identification number; date of birth; patientidentifiable geographic information; any full-face or comparable image.
 - I acknowledge that any violation of this agreement represents unethical conduct for which I can be dismissed from the Master of Medical Science Program in Anesthesiology and Emory University regardless of academic standing.

CONFIDENTIALITY RELATED TO PATIENTS AND HEALTHCARE FACILITIES

Patient Information

- □ All patient information regardless of source and regardless of storage format is confidential information.
- Educational discussions, including all clinical conferences, must exclude patient's name; address in any form or format; medical record number or other unique healthcare identification number; date of birth; patient-identifiable geographic information; any full-face or comparable image. Said information shall not be presented in discussion or in any viewable format, including but not limited to, printed handouts, slides, transparencies, computer-based displays.
- □ Furthermore, the student is responsible for the disposition of any and all case materials used in a clinical conference even though the case materials contain no patient-identifiable information. Appropriate disposition includes release of case materials to the faculty member conducting the conference or destruction at the conclusion of conference by on-site shredding of the case materials.
- □ No patient information identifiable or otherwise may be discussed in any public venue, including but not limited to elevators, hallways, break rooms, libraries, conference rooms except those conference rooms in which a clinical conference is being formally conducted.

Healthcare Facility Information

- □ No information related to the identity, activities, operations, or personnel of any healthcare facility at which the student rotates as part of the Anesthesiology Program may be discussed with or revealed to any person or persons except authorized clinical staff and associated personnel at the healthcare facility and faculty and staff of the Anesthesiology Program except as required by law or as authorized by the healthcare facility.
- □ At any healthcare facility at which the student rotates as part of the MMSc Program in Anesthesiology, all sources of patient data, including primary patient data (eg, patient chart) and ancillary data (eg, EKG, CXR, lab results), must be treated as confidential. Access and use of said data must comply with the guidelines of the healthcare facility.
- No patient-identifiable data in any form or format may be removed from or transmitted from the premises of any healthcare facility at which a student rotates as part of the MMSc Program in Anesthesiology.
- I acknowledge that any violation of the above policies related to patients and healthcare facilities represents unethical conduct for which I can be dismissed from the Master of Medical Science Program in Anesthesiology and Emory University regardless of academic standing.

STUDENT INFORMATION

The following information must be on file in the MMSc Program Office at the time of your matriculation and must be updated as often as changes occur.

- **G** Full name
- □ Your name as you desire it to appear on Program and University documents
- □ Current mailing address, including city, state, and zip code
- □ Current phone number
- Current email address
- □ Emergency contact information

I acknowledge that I am responsible for maintaining current contact information on file with the Master of Medical Science Program in Anesthesiology – both while I am a student and for ninety days following graduation, withdrawal, or other termination.

CONSENT FOR PHOTOGRAPHY AND RECORDING

Education and Evaluation Purposes

I hereby grant to the Master of Medical Science Program in Anesthesiology, Emory University School of Medicine, and Emory University (*University*) the irrevocable and unrestricted right and permission to create, use, and share video recordings, audio recordings, photographs, or other media that contain or capture my likeness or voice or in which my likeness or voice may be included (*Recordings*) in connection with any educational purpose related to my training and education in the Master of Medical Science in Anesthesiology Program at Emory University.

The Recordings may be used by any instructional or administrative faculty for the purpose of assessing my knowledge, skills, and clinical judgement to complete the Master of Medical Science Program in Anesthesiology.

I acknowledge and agree that any copy of the Recordings or materials containing the Recordings that is provided to me shall be used solely for my personal educational purposes and shall not be further copied or distributed by me in any medium, including electronic media such as the internet.

Media Release

The Recordings may also be used in connection with any publication or materials relating to or serving the mission and educational purposes of the University, including but not limited to advertisements, brochures, and other promotional materials. The Recordings may be used with or without my name.

I acknowledge and agree that Emory University owns all rights, title, and interest in and to the Recordings, including all copyrights thereof, and has full and unrestricted right to edit and modify the Recordings. I hereby waive my right to inspect or approve the Recordings or any finished product incorporating the Recordings. I acknowledge that I will not receive any compensation in connection with the use of the Recordings.

Furthermore, I hereby release and forever discharge Emory University, its officers, agents, and employees from any and all claims, demands, rights, and causes of action of whatever kind that I may have, caused by or arising from the use of the Recordings, including all claims for libel and invasion of privacy.

By initialing this form, I signify that I have read and understand this Consent for Photography and Recording and agree to all of the above conditions.

AUTHORIZATION FOR DRUG TESTING AND RELEASE OF DRUG TEST RESULTS

In order to matriculate into the Master of Medical Science Program, Department of Anesthesiology, Emory University School of Medicine (*Emory*) and to participate in Emory's clinical education programs at certain healthcare facilities with which the Master of Medical Science Program is affiliated, students must consent to drug testing. Random drug testing may also be initiated at any time by the Master of Medical Science Program or the healthcare facilities with which Emory is affiliated.

If a student refuses to submit to drug testing under any or all of the above circumstances, that student will not be eligible to continue in the Master of Medical Science Program or participate in clinical education programs offered by Emory. If test results are positive or if there is evidence (in the opinion of Emory, the clinical education site, or the testing laboratory), that the testing sample was tampered with, substituted, or altered in any way, the student will not be eligible to continue in the Master of Medical Science Program or participate in clinical education programs offered by Emory. Being unable to participate in the clinical education programs offered by Emory precludes continuing in the Master of Medical Science Program and will result in dismissal from Emory University.

Tests will detect illegal drugs, other non-prescribed intoxicants, and some prescription drugs. Positive test results caused by the appropriate use of legally prescribed medications will not affect eligibility to participate in the Master of Medical Science Program or its clinical education programs unless such use would cause my participation or performance to be unsafe or unacceptable.

The requirements of the School of Medicine are in the Handbook section DRUG TESTING AND CRIMINAL BACKGROUND CHECKS.

- I hereby state that I have read, understand, and agree to abide by the School of Medicine's policies related to drug screening and criminal background checks.
- I hereby voluntarily consent to being tested for drugs under all of the circumstances listed above. I voluntarily consent to testing by any method that Emory deems reasonable and reliable, including blood analyses and urinalysis. I also consent to the release of the test results to Emory and to any agency or facility that is affiliated with Emory as a site for clinical education. I hereby waive any privilege concerning my drug test results for the purposes authorized above, and I hereby release Emory from any and all claims, liability, and damages that might arise from the use and/or disclosure of such information pursuant to this authorization.

RELEASE AND WAIVER OF LIABILITY: VENOUS VASCULAR ACCESS LAB

An integral part of the Emory University Master of Medical Science Program in Anesthesiology is the Venous Vascular Access Lab (hereinafter IV Lab). After formal instruction and under supervision of Program faculty, each student has opportunities to insert intravenous (IV) catheters into peripheral veins of fellow students. Likewise, each student affords fellow students opportunities to insert IV catheters in himself/herself.

Risks of intravenous catheter placement include pain, bleeding, hematoma formation, bruising, thrombophlebitis, and infection.

Participation in IV Lab is voluntary.

Initial one of the following two statements:

I hereby acknowledge and accept the risks associated with peripheral IV catheterization performed by an Emory University student or Program faculty and agree to voluntarily participate in IV Lab as described herein. As consideration for being permitted to participate in IV Lab, I and anyone entitled to act on my behalf now or in the future release from liability the other IV Lab participants, Emory University's Master of Medical Science Program in Anesthesiology, the Emory University School of Medicine, Emory University, and each of their respective directors, officers, employees, volunteers, agents, contractors, and representatives from any and all actions, injuries, losses, claims, or demands that may arise from the my voluntary participation in IV Lab.

I decline to participate in IV Lab.

CONSENT FOR RELEASE OF CONTACT INFORMATION TO PROFESSIONAL ORGANIZATIONS

Each student in the Anesthesiology Program may agree to have his/her name and contact information released to certain anesthesiology professional organizations, including the American Academy of Anesthesiologist Assistants (AAAA), American Society of Anesthesiologists (ASA), Georgia Academy of Anesthesiologist Assistants (GAAA), Georgia Society of Anesthesiologists (GSA).

Initial one of the following two statements:

The Anesthesiology Program may provide my contact information to the AAAA, ASA, GAAA, GSA so as long as I am enrolled in the Anesthesiology Program. I hereby release Emory University and its officers, trustees, agents, and employees from any and all liabilities, responsibilities, damages, and claims which might arise from the release of his authorized information.

____ I decline to permit the Anesthesiology Program to release my contact information.

APPENDIX: EMORY UNIVERSITY SCHOOL OF MEDICINE CONDUCT CODE

The Emory University School of Medicine Conduct Code is a publication of the School of Medicine and governs students enrolled in all of the educational programs in the School of Medicine.

INSTRUCTIONS

Each student is provided with an individual PDF copy of Student Handbook 2020. There have been significant changes since the previous edition, Student Handbook 2019. You should read the 2020 edition completely.

Each student cohort will meet with the Program Directors in order to have questions answered. Any student may meet individually with a Program Director to obtain clarification or discuss concerns.

Once you have completed reading Student Handbook 2020 and participated in the meeting with Program Directors, you should

- Re-read, then initial the sections that require initialling.
- Re-read and initial each form.
- Read and sign the agreement below.

Each student must complete and sign a copy of the Student Handbook in order to complete matriculation (incoming students) or continue into the senior year (rising seniors).

By electronically initialing all designated sections in the Handbook and by electronically entering my name and today's date below and submitting a completed copy of this document to the Master of Medical Science Program in Anesthesiology of Emory University . . .

... I acknowledge that have read and that I understand all sections of the Student Handbook, and I have had my questions, if any, answered satisfactorily by a Program Director.

 \dots I agree to abide by the policies, rules, regulations, and guidelines set forth in the Student Handbook.

Student's Name

Date