# Doctor of Medicine Student Handbook 2023 - 2024

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### Submit Questions, Suggestions, Corrections, Additions

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### Introduction

The School of Medicine MD Student Handbook is a reference for medical students and others regarding the administrative policies, rules and regulations of Emory University and the Emory University School of Medicine (EUSOM). In addition, this Student Handbook contains policies and procedures for areas such as admissions, academic and professional standards, progress and promotion, financial aid, student organizations, disability insurance, academic and personal counseling, and student health.

The policies and procedures in place are to maximize student success and help students maintain the high academic and professional standards necessary to be a physician. The School of Medicine abides by and follows all University policies, except where noted. Part of being an excellent physician is always knowing expectations and ensuring those are met. These skills will continue to serve students well as they are required to obtain and maintain licensure, hospital privileges, credentialing, and beyond.

### Handbook Disclaimer

The policies and procedures appearing in the MD Student Handbook reflect the most current policies and procedures
of the University and School of Medicine but are subject to amendment and change without prior notice. EUSOM reserves the right to change policies, procedures, and programs. Minor changes will be posted directly to the Student Handbook. When major changes occur, a notification will be sent to all medical students.

**It is the responsibility of faculty, administration, and each student enrolled in the Emory University School of Medicine to understand and abide by the regulations and policies within this handbook and within Emory University Publications.**

**Part I: General Information**

**Section 1: Accreditation**

Emory University is accredited by the Southern Association of Colleges and Schools Commission on Colleges to award associate, baccalaureate, masters, doctorate, and professional degrees. Contact the Southern Association of Colleges and Schools Commission on Colleges at 1866 Southern Lane, Decatur, Georgia 30033-4097 or call 404-679-4500 for questions about the accreditation of Emory University.

The Emory University School of Medicine MD Program is fully accredited by the Liaison Committee on Medical Education (LCME). Current accreditation standards and additional information are available at the LCME website.

**Section 2: Diversity, Equity, and Inclusion**

As one of Emory University’s nine schools, Emory School of Medicine (ESOM) affirms diversity, equity, and inclusion, as core values. We are guided by Emory University’s Institutional Statement on Diversity and the Association of American Medical College’s (AAMC) Diversity, Equity and Inclusion* competencies across the learning continuum which defines these values as follows:

**Diversity:** Individual differences (e.g., personality, prior knowledge, and life experiences) and group/social differences (e.g., race/ethnicity, class, gender, sexual orientation, country of origin, and ability as well as cultural, political, religious, or other affiliations).

**Equity:** Fairness and justice recognizing that we do not all start from the same place because power is unevenly distributed. The creation of opportunities for historically underserved populations to have equal access to and participate in programs that can close the achievement gaps in learners’ success and maximize the success of each of our community members. The principle of equity-mindedness demonstrates a willingness to take personal and institutional responsibility for the success of learners, faculty, and staff by critically assessing their own practices.

**Inclusion:** The process of creating a working culture and environment that recognizes, appreciates, and effectively utilizes the talents, skills, and perspectives of members of the ESOM community by using the ESOM member’s skills to achieve ESOM’s objectives and mission; connecting members of ESOM to the organization; and encouraging collaboration, flexibility, and fairness. In total, inclusion is a set of behaviors (culture) that encourages the ESOM community to feel valued for their unique qualities and experience a sense of belonging.

These attributes enhance our scholarly, learning, living, and healthcare environments. They enhance our ability to deliver equitable, compassionate, cross-cultural healthcare, improve community health, and lead efforts to eliminate health inequalities and improve health outcomes in disadvantaged and vulnerable populations. We must train, recruit, and employ a diverse group of faculty, staff, students, and trainees, including members of communities underrepresented in the health professions and scientific workforce who reflect and understand the multicultural and
international communities that Emory serves. Our recruitment and retention efforts focus on groups traditionally
underrepresented in health professions in alignment with the population we serve.

Our work in this area shall be guided by the following principles. Emory School of Medicine (ESOM) will:

- Partner with the University to engage in continuous, systematic, and focused recruitment and retention activities
to ensure diverse student, trainee, faculty, and staff populations, including enhancement of mentorship and
avancement.
- Design, implement and grow programs and partnerships aimed at broadening diversity among qualified
applicants for admission to its degree and training programs.
- Design and implement programs that celebrate the diversity within our community and our successes in
promoting diversity.
- Provide institutional resources, including scholarship funds and academic preparation assistance, to enhance
success and retention of graduating students and trainees.
- Develop, implement, and continuously refine training programs designed to improve recruitment, hiring, support
and promote faculty and staff by utilizing programs aimed to reduce the impact of bias in these areas.

ESOM’s Office of Equity and Inclusion (OEI) in partnership with the Office of Multicultural Affairs (OMA), Office
of Medical Education and Students Affairs (OMESA), and the Office of Faculty Academic Affairs and Professional
Development is charged with monitoring the school’s progress toward achieving diversity, equity, and inclusion
across all its activities and programs and advising the Dean of the School of Medicine on how best to promote and
achieve these goals. Ongoing assessment will include review of admissions, recruitment and retention data with the
Emory University Office of Equity and Inclusion and periodic administration of surveys by the Dean’s Office that are
designed to assess diversity, equity, and inclusiveness across the spectrum of ESOM’s programs and activities.

To ensure continuous attention to goals in these areas, the Office of Equity and Inclusion will provide the Dean of the
School of Medicine with an assessment of progress relative to diversity and inclusiveness-related goals no less than
annually.

*AAMC. Diversity, Equity, and Inclusion Competencies Across the Learning Continuum. AAMC New and Emerging

Section 3: Emergency Preparedness

CEPAR (Center for Emergency Preparedness and Response)

The Office of Critical Event Preparedness and Response (CEPAR) serves as the center for Emory enterprise-wide
planning for and coordinated response to catastrophic events affecting Emory and the broader community. Learn
more about CEPAR.

Emergency Notification System

The Emory Emergency Notification program is a multi-modal system for alerting students, staff, faculty and visitors
of an emergency affecting the Emory community. The wide array of notification options affords Emory the flexibility
to convey emergency information in the most appropriate manner and provides redundancy to help ensure the
message gets out. Not all emergencies require all the notification components to be engaged simultaneously.

Students can access the Emergency Alert Information page by logging into OPUS or PeopleSoft. Students should
enter their cell phone number and provider information. Students should be sure to update their information if changes to cell phone number or mobile carrier occur.

**LiveSafe App**

LiveSafe is a personal safety mobile app that Emory University provides to all students, faculty, and staff to download for free. The app provides a quick, convenient, and discreet way to communicate directly with Emory University safety officials, enhancing your overall safety and allowing Emory University Police to better protect you. We encourage all students to download the LiveSafe App.

**Section 4: MD Program**

**Overview of the MD Student Program**

**Student Physician Activities (SPAs)**

The Emory University School of Medicine Executive Curriculum Committee (ECC) has stated the outcomes of the MD program in terms of the activities characteristic of a physician that students will learn and do. These “Student Physician Activities” (SPAs) define what students should be able to perform prior to graduation. The SPAs are enumerated in the [graduation requirements](#).

The MD curriculum is divided into four phases ([view a chart of the 4-year MD Curriculum](#)):

**Foundations of Medicine (18 months):**

Following one week of orientation and a week-long immersion experience, known as “Week on the Wards,” students begin “Healthy Human”, a five-month period during which the focus is on healthy human physiology, basic science, and epidemiologic principles. During this time, students also begin their clinical skills training, meeting regularly with their small group – forming a close relationship with classmates and their faculty mentor early on. Small group discussions about professionalism, ethics, communication, cultural competency, and other essentials of patient care skills add to the “whole person approach” to medical education.

Using these new skills, students begin seeing patients in an outpatient clinic (OPEX – outpatient experience) in the early months of medical school. Reporting for service one afternoon every other week for twelve months, first-year medical students are able to learn from a healthcare team – and their patients – in a longitudinal experience.

In winter of the first year, students begin studying human disease in organ-system based courses for the duration of the Foundations phase. Anatomy also takes place during this time period. Each of 24 dissection tables is equipped with a computer to display cross-sectional imaging, study guides, lecture notes, and other electronic references.

Throughout Foundations, students study microbiology, immunology, pharmacology, biochemistry, evidence-based medicine, physiology, and pathology as thread topics interwoven into courses and other educational experiences. In addition, students study ethics in medicine, climate change and environmental health, clinical decision making, financial literacy, and diversity, equity, inclusion, and racial advocacy throughout the 4-year curriculum.

A central component of the curriculum involves our Society System. There are four Societies with four experienced clinician-educators (Small Group Advisors) in each Society; thus, each medical school class has 16 practicing physicians who are dedicated clinical teachers. Every student is assigned to a Society and a Small Group Advisor who
stays with the student throughout their four-year medical education. Small Group Advisors instruct students in professionalism and the art of patient care, patient-physician communication skills, and the principles of physical examination and diagnostic thinking. Small group instruction also covers many other critical topics over the four-year curriculum.

An integral part of the MD student experience is the Community Learning and Social Medicine course. This structured learning experience combines community service with preparation, action, and reflection. Learners will have the opportunity to work with over 50 community-based organizations/partners focused on one of a number of underserved or disadvantaged populations, including elderly, disabled, economically disadvantaged, and immigrant/refugee populations.

Upon completion of the formal courses in Foundations, students are given protected study time for Step 1 of the United States Medical Licensing Exam.

**Application of Medical Sciences (12 months):**

Providing students with core knowledge of the basic clinical medical and surgical fields, each student will complete required rotations in Surgery, Medicine, Pediatrics, Psychiatry, Neurology, Obstetrics & Gynecology, Radiology, Primary Care, Dermatology, Ophthalmology, Palliative Care, and Anesthesiology.

Students complete these rotations at Emory and Emory-affiliated healthcare facilities throughout the Atlanta area, including:

- Grady Memorial Hospital
- Emory University Hospital
- Emory University Hospital Midtown
- Emory University St. Joseph’s
- Children’s Healthcare of Atlanta at Egleston
- Children’s Healthcare of Atlanta at Hughes Spalding
- Emory Wesley Woods Center
- Atlanta Veterans Affairs Medical Center
- The Emory Clinic (multiple sites around Atlanta)
- Other clinical sites in and around Atlanta

During the Application phase, students still regularly meet with their Small Groups to further develop their professional identity and to process and reflect on their clinical experiences. In addition, students study ethics in medicine that builds on clinical experiences in the core rotations.

**Discovery (5 months):**

The **Discovery phase** is a structured time for students to conduct a hypothesis-driven research project under the direction of a faculty member. While the Discovery project must be a scientific inquiry based in medicine, students are able to combine their interests in other areas, such as creative writing, public health, community development, education, or health policy, into their project. Some students are also able to include an international experience in their Discovery project. This is an opportunity for students to renew their creative energies and explore a new facet of medicine under the tutelage of an Emory faculty member.

Students must carry out a research project that meets the standards for the MD degree as established by the Discovery faculty. This project can be part of the student’s second-degree program and may be designed and undertaken as part of that program. The Discovery leadership is responsible for assuring that the project fulfills the requirements for the Discovery phase of the MD curriculum.
During Discovery, medical students work full time on their projects with minimal other academic commitments except occasional seminars or workshops relevant to their research. Many students publish their Discovery work in peer-reviewed scientific journals and all students are required to present their Discovery project at Medical Student Research Day in the fourth year.

**Translation of Medical Sciences (7 months):**

This phase prepares each individual for the transition to being a physician. Required senior rotations include Emergency Medicine, Critical Care Medicine (ICU), 3 months of electives, and a sub-internship in Surgery, Medicine, or Pediatrics; there is sufficient time for up to two away-rotations during this year. The Translation phase concludes with a required month-long Capstone course that offers carefully designed lectures, workshops, panel discussions, and exercises which equip the soon-to-be graduate with the practical skills and information that will be crucial to their success as residents.

**Section 5: Office of Medical Education and Student Affairs (OMESA)**

The School of Medicine Office of Medical Education and Student Affairs (OMESA) specializes in helping students succeed both academically and personally so that they graduate well-prepared for a career in medicine.

**Executive Associate Dean (EAD) for Medical Education and Student Affairs**

The Executive Associate Dean for Medical Education and Student Affairs is responsible for oversight and coordination of educational programs within the School of Medicine. These programs include Graduate Medical Education (GME) and Undergraduate Medical Education (UME). The MD program is one of six degree programs in UME.

**Office of the EAD**
Emory School of Medicine
100 Woodruff Circle, Suite 453
Atlanta, GA 30322

**Executive Associate Dean for Medical Education And Student Affairs**

J. William Eley, MD, MPH
Professor, Hematology/Oncology
jeley@emory.edu
404-712-9979 office
404-310-6022 cell

**Executive Administrative Assistant**

Traci Mack
traci.mack@emory.edu
404-712-9979

**OMESA Administrative Deans and Staff**
Associate Dean for Student Affairs, Clinical Services

Stacy Higgins, MD
smhiggi@emory.edu
404-778-1622 office
404-310-0223 cell

- Any absences during the Application and Translation phases
- Oversight of clerkship experience (clerkship directors first contact)
- Pre-residency application counseling
- Approval of away electives
- Oversight of MSPEs
- Oversight of residency application process
- Clinical rotation changes (Laura Hopkins and Mary Kaye Garcia first contact; Dr. Higgins to be copied)
- Career in academic internal medicine, medical education leadership, healthcare for the underserved
- General questions, concerns, or suggestions

Director of Foundations

David Schulman, MD
daschul@emory.edu
678-471-9959 cell

- Oversight of Foundations phase (content, policies, faculty, course, and thread directors)
- Exam schedule changes in Foundations phase
- Absences during Foundations phase (if Dr. Schwartz unavailable)
- Career in academic internal medicine (Pulmonary/Critical Care/Sleep Medicine), medical education contact

Assistant Dean, Student Success & Multicultural Affairs

Yolanda Hood, PhD
yhood@emory.edu
(404) 727-0602

- Oversight of OMA
- National HCOP Academy
- Mentorship programs
- Pipeline/Pathway programs

Associate Dean for Student Success

Christen Hairston, PhD, MEd
christen.hairston@emory.edu
(404) 712-0428 (office)
(864) 401-1888 (cell)

- Accommodations
- Student mistreatment
- Academic support services
- Well-being programming
- Holistic student success matters
- Academic resources
- Tutoring
- Mental health
- Enrollment status (Mary Kaye Garcia first contact)
- Financial Aid (Cortney Davis first contact)
- Student Affairs Staff (Mary Kaye Garcia is first contact)
- General questions, concerns, or suggestions
Director of Societies
Mary Jo Lechowicz, MD
mlechow@emory.edu
404-778-3908 office
678-575-7677 cell

- Oversight of Small Group Advisors
- Oversight of the SGA faculty leadership council
- Responsible for Application phase Tuesday evening schedules for small groups
- Resource for Discussion and conflict management of Small Group experience for faculty and students
- Course Director for Prologue I
- Liaison to student support committee
- Careers in Hematology/Oncology, medical education leadership
- Mentorship/research in Hematology/Oncology for learners from all disciplines and status

Assistant Dean for Medical Education
Douglas Ander, MD
dander@emory.edu
678-772-8162

- Honor Council Liaison
- Dean Liaison to the Health Professions Programs
- Interprofessional Education Thread Leader
- Career in academic emergency medicine, medical education scholarship

Assistant Dean for Medical Education Research
Hugh Stoddard, MEd, PhD
hugh.stoddard@emory.edu
404-727-8451 office
404-821-1883 cell

- Curriculum/course development
- Construction/administration of student assessments
- Study design for medical education research
- Management information systems for education data

Assistant Dean for Medical Education and Student Affairs
Gordon Churchward, PhD
gordon.churchward@emory.edu
404-712-9943 office
678-612-7499 cell

- Academic advising and support
- NBME registration (Mary Kaye Garcia first contact)
Director of Discovery
Maureen Powers, PhD
mpowers@emory.edu
404-727-8859
- Director, Discovery phase
- Research mentor

Assistant Dean for Medical Education and Student Affairs
Gordon Churchward, PhD
gordon.churchward@emory.edu
404-712-9943 office
678-612-7499 cell
- Academic advising and support
- NBME registration (Mary Kaye Garcia first contact)

Associate Dean for Medical Education
Erica Brownfield, MD, MBA
ebrownf@emory.edu
404-727-3400 office
404-213-1642 cell
- Curriculum Oversight
- Curriculum Committee
- LCME accreditation
- Policies, procedures, MD Student Handbook
- Weekly email updates
- Oversight of Course and Clerkship Leadership (for Foundations, Dr. Schulman is first contact, for Application and Translation phase, Dr. Higgins first contact)
- Medical Education Staff (Tyrese Hinkins Jones is first contact)
- Research involving medical students as subjects
- Career in academic internal medicine, medical education leadership, healthcare for the underserved
- Any general questions, concerns, or suggestions

Associate Dean for Medical Education
UME, GME and Health Professions
Marilane Bond, EdD, MEd, MBA
mbond@emory.edu
404-712-9979 office
- Oversight of business, finance, and administration for all SOM education programs
- Collaborates with other education deans, SOM staff, department chairs and administrators
Admissions

The work of Admissions does not end when a new class matriculates into the M1 year. Staff continue to serve students by organizing M1 Orientation; White Coat Ceremony; Week on the Wards; class officer elections; Student Organization Fair; senior student day interview day participation; access to the SOM Music Room; and helping enrolled students coordinate a wide variety of student-organized clubs and events.

Office of Admissions
Emory School of Medicine
100 Woodruff Circle, Suite 231
Atlanta, GA 30322

Associate Dean of Medical Education and Student Affairs
Ira Schwartz, MD
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404-727-5660

Admissions Senior Program Coordinator
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Executive Associate Dean
Office of Medical Education and Student Affairs
Graduate Medical Education
J. William Eley, MD, MPH
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404-712-9979

For appointment traci.mack@emory.edu

Office of Admissions
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J. William Eley, MD, MPH
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For appointment traci.mack@emory.edu

• Director of Admissions
• Co-Chair of Admissions Committee
• Oversight of Admissions applications and decisions
• Absences during Foundations phase, including leave of absence
• Assists students in finding personal health care
• Aids small group advisors and course directors with student counseling issues (both personal and academic)

• Oversight of all SOM education programs
• Oversight of all SOM education and student affairs deans
• Career in academic medicine, public health, medical education leadership
• Career in Hematology/Oncology
Center for Holistic Student Success

The Center for Holistic Student Success (CHSS) at Emory School of Medicine strives to (1) improve access to mental health resources, (2) improve access to academic support resources, and (3) promote trust and sense of belonging within the School of Medicine.

Our mission is to improve students’ energy preservation through structures, systems, and supports that enhance student learning and development.

Our vision is to create an environment that optimizes the balance of health science students’ mind, body, and spirit at Emory School of Medicine.

The goal of the CHSS is to promote student’s self-guided learning and ability to navigate life with:
1) optimal coping mechanisms,
2) agency in accessing support, and
3) experience in refining one’s professional excellence.

The holistic triad of CHSS is the mind, body, and spirit of the SOM student.

Mind: Academic and Mental Health Resources
- 1:1 academic coaching
- Learning strategy support
- Accommodations
- Tutoring
- Access to mental health resources inside and outside of Emory
- USMLE Step 1 and 2 preparation resources
- Student success workshops

Body: Physical Environment and Wellness Initiatives
- Well-being calendar complete with yoga, meditation, community-building, and holistic wellness initiatives
- Encourage check-ups, preventative medicine, etc.
- Access to healthy eating and promotion of options on campus
- Workshops focused on food and movement and its impact on your learning
- Continuous improvement of the physical space in the SOM
- Provide oversight of student mistreatment reporting and action taken

Spirit: Spiritual and Human Connection
- Grounding you in your “why”
- Focus on sense of trust and sense of belonging among students, faculty, and staff
- Emory connections to chaplains, religious and/or spiritual services, and access to interest groups focused on spiritual growth and development
- Building synergy across the School of Medicine to optimize student success through relationship building, mission alignment, and community building.
Human Simulation Education Center (HSEC)

The Human Simulation Education Center (HSEC) is located in the James P. Williams School of Medicine Building on the 3rd floor. The Center is a state-of-the-art educational space designed for simulated participant (SP) encounters.

HSEC is utilized for SP education, clinical skills education, physical examination practice, diagnosis assessment and other educational experiences. It contains four suites, each of which contain a central debrief room with projection capability and four adjacent examination rooms equipped with examination tables and standard clinic equipment. All HSEC rooms have the capacity for direct and remote observation and recording through our simulation software system.

HSEC is a resource for the entire School of Medicine. Currently, many of the school’s educational programs, residencies, fellowships, and faculty programs work with the Center staff to build robust Human Simulation educational experiences.

Director, Human Simulation Education Center
Gina Shannon
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404-295-1776

Program Coordinator, SP Educator
Dan Brown
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Senior Program Coordinator, SP Educator
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Senior Program Coordinator, SP Educator
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Program Coordinator, Simulation Software Specialist
Adam Bailey
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Program Coordinator, SP Educator
Elisa Hoover
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Program Coordinator, Logistics Coordinator
Sherry Stewart
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Emory Center for Experiential Learning (ExCEL)

The ExCEL Simulation Center is located in the James P. Williams School of Medicine Building and includes state-of-the-art spaces and equipment such as task trainers, high fidelity electronic mannequins, mock clinical spaces such as an operating room and ICU used for immersive simulation scenarios for individual and interdisciplinary team learning, and virtual reality equipment for learning various procedural techniques. All ExCEL rooms have the capacity for direct and remote observation and recording.

ExCEL is a resource for the entire School of Medicine. Currently, many of the school’s educational programs, residencies, fellowships, and faculty programs work with the Center staff to build robust simulation educational experiences.

Interim Director, ExCEL Simulation Center

Michele Sumler, MD
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Senior Program Associate, ExCEL Simulation Center

Reginald Adams
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Program Coordinator ExCEL Simulation Center

Alison Dean
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BLS/ACLS Technology Specialist ExCEL Simulation Center

Hannah Chong
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Financial Aid

The goal of Financial Aid staff is to help students find the necessary resources to cover their educational and living expenses and provide counseling to minimize and manage personal expenses while enrolled. Financial aid personnel review applications for financial assistance to determine eligibility for federal and University funds and certifies loan applications. In addition, staff offer education loan indebtedness counseling for all students.

Cortney Davis
Assistant Director
Financial Aid and Scholarships
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404-727-5683

Medical Education

The Medical Education unit is responsible for executing the medical education program leading to the MD degree, including curriculum development, program evaluation, and student assessment. It also provides administrative support for education-related faculty committees and schedules space for classes, conferences, and other meetings in the School of Medicine building.
Office of Clinical Education

The Office of Clinical Education provides resources to support students during the Application, Discovery, and Translation phases. Some of the major activities of this office include:

- Plan and implement Orientation to the Clinical Years
- Career counseling and assistance with selecting a clinical advisor
- Determine student schedules during the Application and Translation phases
- Review clinical student assessments and provide counsel to students in need of remediation
- Oversight of committee that writes Medical Student Performance Evaluation (MSPE) letters for residency
applications
• Issue tokens to access ERAS and upload documents
• Counsel and assist students with the residency application process - selecting letter writers for letters of recommendation, residency program choices, interviewing, NRMP rank list, etc.
• Counsel unmatched students with the Supplemental Offer and Acceptance Program (SOAP)
• Assign student lockers for storing personal belongings while rotating at Grady
• Set up AAMC Visiting Student Learning Opportunities (VSLO) access for Emory students
• Screen and process visiting student applications, and place visiting students into electives

The Office of Clinical Education is supported by the Grady Campus Student Affairs staff listed below.

**Grady Campus**
Emory University Faculty Office Building
49 Jesse Hill Jr. Drive
Suite 102

**Associate Dean of Student Affairs, Clinical Services**

Stacy Higgins, MD, FACP
smhiggi@emory.edu
404-778-1372

**Registrar, School of Medicine**

Mary Kaye Garcia
marykaye.garcia@emory.edu
404-712-9921
(Emory SOM Clifton Campus)

**Administrative Manager Office of Clinical Education**

Barbara Bingham
bbingha@emory.edu
404-778-1372

**Academic Services Coordinator Office of Clinical Education**

Vacant
404-778-1372

**Program Coordinator**
**Electives & Visiting Students**

Olivia Wilson
olivia.d.wilson@emory.edu
404-778-1367

**Office of Multicultural Affairs (OMA)**

The Office of Multicultural Affairs (OMA) provides programs to support the development and matriculation of diverse learners, including those enrolled in EUSOM degree and pipeline programs. View up-to-date information about the Office of Multicultural Affairs.

**Assistant Dean**
**Student Success & Multicultural Affairs**

Yolanda Hood, PhD
yhood@emory.edu
404-727-0602

**Program Coordinator, Multicultural Affairs**

Annie Butler
annie.butler@emory.edu
404-712-9937
Director, Multicultural Affairs
Allen Lee, MAT
allen.lee@emory.edu
404-727-7015

Assistant Director, Diversity Learner Programs – Academic Health
Vanessa Fleites, PhD
vanessa.caridad.fleites@emory.edu

Faculty Advisor
Tracey Henry, MD
tracey.l.henry@emory.edu

Registrar
The School of Medicine Registrar works closely with the University Registrar and maintains the permanent records and academic documents of all active and former School of Medicine students.

The Registrar is also responsible for:

- Processing requests from students and alumni to view permanent student records
- Maintaining the School of Medicine course catalog and making the necessary annual updates
- Updating the MD program course descriptions and other pertinent information in OASIS
- Managing the registration of all students in their classes each term
- Verifying the accuracy of student grades in the Emory PeopleSoft/OPUS system
- Managing student enrollment changes
- Monitoring satisfactory progress and advancement to the next phase of the curriculum for MD students
- Ensuring degree candidates have met all graduation requirements
- Certifying graduates with the University, AAMC, and the NBME
- Data reporting on student demographics, enrollment, and academic progress

Mary Kaye Garcia
Registrar, School of Medicine
Associate Director, Student Affairs
marykaye.garcia@emory.edu
404-712-9921

Student Affairs and Enrollment Services
Student Affairs processes student enrollment and class registration and provides resources to support and promote students during their development at Emory School of Medicine. Student Affairs provides services to all students on all campuses and has staff members on both the main Emory and Grady campuses. Some of the specific functions of this office include:

- Class registration in the Emory PeopleSoft/OPUS system
- Ensure final grades (including grade changes) have been posted into OPUS
- Process changes to enrollment status for student leaves, dual degree study, and withdrawals in OPUS
- Organize and implement informational class meetings, including Residency Days, for students in their clinical years
• Support EmoryDOCS, which includes organizing and planning student Career Advising resources, activities, class meetings, and maintaining and updating the EmoryDOCS website
• Assign space for classrooms, conferences, and other meetings in the School of Medicine building space using 25Live
• Arrange access to the School of Medicine Building after hours for after-hours events and for students with ID prox cards
• Enrollment verification and letters of good standing for current students
• Degree verifications for state medical board/residency programs for alumni
• Request exclusion of jury duty during medical school rigors on behalf of students
• Facilitate, monitor, and ensure compliance of students’ annual immunization and healthcare training requirements
• Arrange N95 respirator fit testing for students
• Monitor and facilitate the sign up for USMLE Step 1 board examination
• Clinical rotation schedules
• Assign student lockers: anatomy locker rooms, and lockers for use by bicyclists
• Lost and found for the School of Medicine building

The office is supported by the Emory Clifton Campus Student Affairs staff listed below.

Emory Campus
School of Medicine Building 100 Woodruff Circle
Suite 375P

Registrar, School of Medicine
Associate Director, Student Affairs
Mary Kaye Garcia
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Assistant Director of Registration and Student Affairs
Kimberly M. Hemingway
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Program Coordinator Enrollment Services
Vacant
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Program Coordinator, Student Affairs
Emily Barnes
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Academic Records Specialist
Cindy Cheddar
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404-727-5655

Program Coordinator, Clinical Services
Laura Hopkins
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Part II: Matriculation

Section 1: Criminal Background Checks and Drug Testing

All incoming medical students must undergo a Criminal Background Check (CBC) and drug screening before matriculation as facilitated by a contracted vendor. Acceptance to Emory School of Medicine is contingent upon the
authorization to conduct a drug screening and CBC, as well as the release of its 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 clinical rotation sites, or if required to do so as an evaluation of their fitness to participate in their medical education.

All positive and multiple negative-dilute drug screenings, and any findings from the 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 review of the results of the CBC and/or drug screening, the committee may seek additional information from the student, in writing or via interview. In the case of multiple negative-dilute drug screenings, the committee may require the student to submit to a blood-based drug screening.

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

1. Revocation of the acceptance to Emory University School of Medicine (for students who have been accepted but not yet enrolled)
2. Referral to a conduct committee for further consideration (for enrolled students)
3. No further action to be taken (for both enrolled and accepted but not yet enrolled students)

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

Section 2: Entering Medical Student Health and Immunization Requirements

For the protection of the health of our students and because of the risks of exposure to infectious diseases to which medical students are subjected in the course of clinical work, certain tests and immunizations are required of all students prior to matriculation.

Entering students are required to provide documentation of all required immunizations using the Emory University Student Health Services (EUSHS) Immunization Form. This form must be signed by a healthcare provider and returned to EUSHS prior to matriculation.

A physical examination is also required prior to matriculation and must be recorded on the School of Medicine Physical Examination Form. This form must also be signed by a healthcare provider and returned to EUSHS prior to matriculation.

Students will not be allowed to register or participate in any clinical activities until both forms are on file with EUSHS. An updated medical history and physical examination are required for re-enrollment after more than one year of attendance lapses. For re-admission after withdrawal for medical reasons, medical clearance by designated University health officials is required.

Immunization Requirements 2023-2024
Documentation for the following immunizations and tests is required prior to matriculation for all entering medical students:

- **COVID-19 Vaccine** - All health science students in the School of Medicine must be compliant with the current Emory COVID-19 vaccine requirements. Student Health Services will list the current COVID-19 vaccine requirements and acceptable COVID-19 vaccines on its website.

- **Tetanus/Diphtheria/Pertussis** – primary series of 3 doses of Diphtheria and Tetanus Toxoid (DT or TD), in addition to at least one adult Td or Tdap booster within the past 10 years. One adult Tdap booster is mandatory after the age of 11.

- **Measles/Mumps/Rubella (MMR)** – 2 doses of a combined MMR -OR- two (2) doses of Measles, two (2) doses of Mumps, and one (1) dose of Rubella –OR- a positive antibody titer for each disease.

- **Varicella (Chickenpox)** – positive Varicella antibody titer -OR- two (2) doses of the Varicella vaccine given at least 1 month apart.

- **Hepatitis B** – complete 2 or 3 dose series, followed by a positive quantitative antibody titer.

- **Tuberculosis Screening** – students must provide a negative IGRA tuberculosis blood test (QuantiFERON Gold or T-spot) that has been administered within six months prior to matriculation.

**TB Screening notes:**
- Entering students with a positive test for latent TB are required to provide a negative chest x-ray.
- Students who have received BCG vaccination in the past are required to have a negative IGRA tuberculosis blood test (QuantiFERON Gold or T-spot). If the IGRA is positive, students are required to provide a negative chest x-ray.

**Exceptions**

Emory Student Health Services is aware that some students request medical or religious exemptions to vaccination with one or more of the required vaccines. In the case of a medical contraindication, EUSHS requires the student to submit a letter of explanation, signed by both the student and the student’s healthcare provider, along with other immunization records to EUSHS through the Student Patient Portal. To see more details about medical and religious exemption processes, please visit our immunization page and scroll to the FAQs section.

View more information regarding immunization requirements.

**Section 3: Student Agreements and Releases**

**Student Agreements**

All medical students must abide by the academic standards, policies, and procedures as outlined in the MD Handbook. All medical students must comply with the rules and regulations of the University and SOM as published in official publications of the University and as amended or revised during the student’s continued enrollment.

Students must agree to use the systems and software required by the School of Medicine for testing, evaluation, and communication.

Students must also agree to be photographed and recorded. Many of the clinical and professional skills assessments require that faculty and students view recordings of their assessments together.

**Student Releases**
Students must release certain information, including specific protected health information (PHI), to Emory School of Medicine and allow the School of Medicine to provide this information to Emory facilities and to any outside institution that requests verification of immunization status prior to participation in any required, elective, or voluntary clinical experience related to medical training at Emory School of Medicine.

Students must allow the Emory School of Medicine to release information to other departments of the University, such as Student Health Services and the Office of Financial Aid, in order to verify or certify services, scholarship eligibility, or other items necessary for the continuation of enrollment and to meet all state and federal health and safety requirements.

Because passing USMLE licensing exams is a requirement for promotion and graduation from EUSOM, students must agree to release their USMLE Step 1 and Step 2 Clinical Knowledge exam results to the Emory School of Medicine.

If a student should refuse to provide or revoke any of these agreements or releases, the student should understand that such action might affect the student’s ability to meet the requirements for the degree and eligibility to graduate and participate in the national residency match.

These agreements and releases must be provided by the student upon matriculation and will remain in effect throughout the student’s enrollment or until such time as agreement is revoked, in writing, by the student.

Section 4: Technical Requirements for Matriculation

For successful completion of the course of study for the Doctor of Medicine degree at Emory University, students must have certain technical and intellectual skills. To maintain an acceptable level of performance, the student must:

- Be able to develop the ability to obtain a medical history and perform a thorough physical examination. These activities require that the student:
  - Possess proficiency in written and verbal English.
  - Communicate effectively with the patient and the patient's family in order to obtain an adequate medical history.
  - Review records that relate to the patient's medical history and be able to develop a medical record for the current episode that will be useful to others who care for the patient.
  - Perform the essential functions of the medical school curriculum such as performing a thorough physical examination by using the appropriate instruments and manual techniques required.
- Be able to participate in and demonstrate an understanding of all phases of the educational program, including lectures, laboratory activities, teaching conferences, hospital rounds, and clinical duties.
- Be able to demonstrate characteristics that suggest that the student has the ability to function in complex social, professional, and personal roles.
- Be able to function in delicate interpersonal relationships and manifest honesty, reliability, genuineness, warmth, and empathy.
- Be able to control impulses and maintain good judgment even under physically and emotionally exhausting conditions.


Part III: Academic Standards, Policies, and Procedures
Section 1: Attendance

Overview and Expectations

Active participation in all aspects of the medical education program is critical to students’ development as physicians. Attendance is strongly encouraged at all scheduled activities and is mandatory at all small group sessions, preceptorships, laboratory experiences and patient presentations. Attendance is also mandatory for all examinations, including written, oral, and objective structured clinical exams (OSCEs). Attendance is likewise mandatory for class meetings and orientation sessions. Daily attendance during clinical clerkships is mandatory, except for scheduled days off as outlined below.

Duty Hours on Clinical Clerkships

During clinical clerkships, students must adhere to the duty hour guidelines as outlined by the Accreditation Council of Graduate Medical Education (ACGME), with the exception that students cannot work more than 80 hours in any given week.

Duty hours are defined as all clinical and academic activities related to the program:

- Patient care (both inpatient and outpatient)
- Administrative duties relative to patient care
- The provision for transfer of patient care
- Time spent in-house during call activities
- Scheduled activities, such as conferences

Duty hours do not include reading and preparation time spent away from the duty site.

Students on clinical clerkships are required to report their duty hours on a weekly basis via OASIS. The Executive Curriculum Committee monitors student duty hours and makes any necessary curricular revisions to ensure duty hour compliance.

Punctuality

In addition to attendance, punctuality is considered part of professional duty and is one of the 24 Student Physician Activities (SPA PP-04). It is the responsibility of the student to arrive on time for all required experiences.

Arriving Late for or Missing an Examination

Students who arrive after an examination has begun may be refused admission to the examining room, thus jeopardizing their course or clerkship grade. Unapproved absences from a scheduled exam will result in a grade of “U” for that examination. Unapproved absences from NBME or OSCE exams will result in the student being charged for any additional costs associated with rescheduling of the examination.

Students who are late to an examination or other required sessions as outlined above, are subject to an Unprofessional Conduct Evaluation Form being submitted to the Progress and Promotions Committee.

Section 2: Absences

Overview
We strongly recommend students to be present for ALL educational activities. And as stated above, for many of the educational sessions, attendance is required.

The practice of medicine is collaborative and collegial. Excellent patient care requires good communication and trust among and between colleagues. Medical education requires students to work collaboratively with each other, patients, fellow students, staff, and faculty in a regular and predictable manner.

The nature of our work as caregivers requires that we notify appropriate persons when we must be absent so that patient care is not compromised, and both clinical and educational responsibilities are fairly shared. As a supportive community that values wellness and well-being, the School of Medicine faculty, staff, and administration realize that various circumstances—emergent or otherwise—will require that members of our community must occasionally be absent from required events. Furthermore, we must work together to support each other during circumstances that take us away from required events. This policy outlines the process by which students can request absence from required duties. Failure to comply with this policy will be considered unprofessional behavior.

**Absence Policy**

**During Foundations**

During Foundations, absences from required duties will be considered for the following reasons:

- Appointments for medical care that cannot reasonably be scheduled outside of the MD program responsibilities
- Acute medical illness or family emergency
- To give a scholarly presentation at an academically relevant national meeting
- Running for or holding national office in a relevant professional organization
- Religious observances
- Required student meetings with deans and potential/actual Discovery mentors
- Required MD/PhD meetings, including the annual MD/PhD retreat
- Important personal events (weddings/graduations of immediate family members)
- Curriculum committee meetings
- Other possible absences will be considered by the Associate Dean for Medical Education and Student Affairs on a case-by-case basis

During the Foundations phase, students should contact Dr. Ira Schwartz to be granted an approved absence.

*Requests should be made as far in advance as possible, and always before the experience for which the student will be absent. For emergent absences, students should phone AND email the appropriate Dean.* All other requests should be made in person or by email.

If the requested absence is approved, Dr. Schwartz will notify the Foundations director and the student’s Small Group Advisor.

Any required sessions or assignments that are missed must be fulfilled to the satisfaction of the course and Foundations director and the appropriate Dean. Within reason, course directors will assist students to complete all work missed during approved absences, as they deem necessary. If an approved absence does not allow for the missed work to be made up before the end of the course or phase, the student may be assigned a grade of “Incomplete” until the work is completed. If the student is unable to complete the missed work in a timely manner, as determined by the course director, the grade may be converted to “Withdrawal”. The designation of “Withdrawal” would require the student to repeat the course.
Repeated unapproved absences during the Foundations phase will be considered a professionalism concern and will be brought to the attention of the Progress and Promotions (P&P) committee. If a student has three or more unapproved absences, referral to the P&P committee could result in a letter of concern, warning, probation, or other ramifications as the committee deems appropriate.

**During Clinical Clerkships and Clinical Electives**

During the Application, Discovery, and Translation phases, students should follow the Absence from Clinical Duties Policy and Process (below).

Clinical training is an essential part of medical education and represents a critical phase of the medical student experience. Given this, any absence from clinical duties (ACD) is considered a serious matter and may require the time to be made up. This includes if the absence is anticipated (for example: attendance/presentation at a national meeting, important personal events, etc.) OR unanticipated (for example, personal illness/injury or family emergency). Clerkship directors understand that circumstances will sometimes require a student to be absent from clinical duties.

Per SOM policy, students have 1 day off per week (timing negotiated with their clinical teams or the clerkship director) and 1 wellness half-day per month on rotations that are 4 weeks or longer. Clerkship directors may place restrictions on when days off and wellness half-days can be taken (e.g., not during orientation, exam periods, didactic days, etc.). The following are responsibilities and general guidelines for a medical student considering an ACD.

**Terms and Definitions**

**Absence from Clinical Duties (ACD)**

This is defined as an absence that occurs during scheduled duty hours, not during mandatory time off or on additional scheduled days off from clinical service. A student who has an ACD may be required to make up the time absent (or work missed), depending on how much time and what activities were missed.

There are no automatically “approved” absences. You must discuss the need to make up any clerkship related activities with your clerkship director. Your clerkship director will also direct when any missed time/work will be made up.

**Anticipated Absences from Clinical Duties**

If possible, try to schedule activities outside of clinical duty hours. If this is not possible, the student should notify the clerkship director and clerkship coordinator, as well as the Associate Dean of Student Affairs, Clinical Services, Dr. Higgins as soon as a need is known to seek permission to miss clinical duties during the affected clerkship.

Please make requests in a professional manner. Accommodation is not guaranteed, as some clerkship activities cannot be rescheduled or made-up. The final decision regarding accommodation of anticipated absences will be with the Associate Dean of Student Affairs, Clinical Services.

Below is a non-exhaustive list of common anticipated reasons that an ACD may be requested.

- Appointments for medical care that cannot reasonably be scheduled outside of the MD program responsibilities (should be scheduled during wellness half-days if possible)
- Acute medical illness or family emergency
• To give a scholarly presentation at an academically relevant national meeting
• Running for or holding national office in a relevant professional organization
• Religious observances
• Required student meetings with deans and potential/actual Discovery mentors (should be scheduled during wellness half-days or late in the day/early evening to limit interference with clinical activities)
• Required MD/PhD meetings, including the annual MD/PhD retreat
• Important personal events (weddings/graduations/funerals of immediate family members)
• Curriculum committee meetings
• Other possible absences will be considered by the Associate Dean for Medical Education and Student Affairs on a case-by-case basis
• Residency interviews, including “second look” invitations after online interviews
• Other possible anticipated absences will be considered by the clerkship director and the Associate Dean of Student Affairs, Clinical Services on a case-by-case basis

Unanticipated Absences

Include:
• Personal illness/injury
• Family emergency

Students with unanticipated circumstances requiring ACD should notify the clerkship director and coordinator and the Associate Dean of Student Affairs, Clinical Services immediately via text, email, or phone call, as well as the attending faculty and/or most senior resident member of their clinical team.

Students with Confirmed or Suspected COVID-19 Illness:

1. Students with suspected/confirmed COVID or other febrile respiratory illness (i.e., fever and cough/sore throat) may return to work if all 3 criteria are met:
   • No fever for at least 24 hours without fever-reducing medication (e.g., acetaminophen or ibuprofen) AND
   • Improving symptoms for at least 24 hours AND
   • Student agrees to always wear a surgical mask at school or in clinicals (unless alone AND actively eating/drinking) for 10 days from the onset of symptoms (NOTE: the first day of symptoms is considered “day 0”)
2. Students who miss 3 days or less of classes must notify their program director but a medical excuse is NOT required.
3. Students missing 4 days or more of clinical duties or coursework would need a medical excuse from their PCP, SHS or urgent care for it to be an approved absence.

Time Allowed Before Make-Up is Required

Below is a general guideline of days missed after which make up clinical time is required.
• 1-week clerkship/rotation: any days
• 4-week clerkship/rotation: > 1 day
• 6-week clerkship: > 2 days
• 8-week clerkship: > 3 days

Scheduling Make-Up Time or Work

If time needs to be made up after an ACD, the student should work with the clerkship director to do so during the
clerkship. If this is not possible, the time may need to be made up after the clerkship is over, during weekends, or holidays or scheduled break times.

The student will need to work with the clerkship director and the Associate Dean of Student Affairs, Clinical Services, to find an appropriate time to do this. School policy does not allow missed **time to be made up for one clerkship while engaged in another clerkship**.

**Duty hours**

Duty hours are defined as time spent doing all clinical and academic activities related to the program and include patient care, administrative duties related to patient care, and scheduled educational conferences. Clinical service time may occur outside of business hours but should not exceed 80 hours/week.

**Scheduled Days Off/Mandatory Time off/Wellness Half-Days**

Each clerkship (except Emergency Medicine) will assign a number of scheduled days off, which includes the minimum mandatory time off from duty hours, as specified by ACGME guidelines. The total number of scheduled days off will be determined by each clerkship according to clinical service needs and schedules. Required wellness half-days are considered mandatory time off from clinical duties and students are expected to request the allotted amount of wellness half-days for each clerkship.

**Student Responsibilities**

1. Students should attempt to schedule non-clerkship related activities outside of normal duty hours for that clerkship (e.g., late afternoons/evenings and weekends or scheduled/mandatory time off, or during wellness half-days).
2. Students must communicate all requests with advance notice (as soon as the need is known to the student) to the clerkship director, clerkship coordinator, and Associate Dean for Student Affairs, Clinical Services.
3. Students must recognize that not all requests for ACD will be able to be accommodated and should be willing to prioritize their requests to assist the clerkship leadership team with their planning.
4. All communication regarding requests for time off should be done in a professional manner.
5. Students who are ACD are required to collect any didactic materials/notes from lectures that they may have missed during their time away.

**Guidelines**

1. Advance communication with the clerkship director, clerkship coordinator, and the Associate Dean for Student Affairs, Clinical Services is required for any requested activity that could result in an ACD. Requests should be made as far in advance as possible, and always before the experience for which the student will be absent. For emergent absences, students should phone AND email the Associate Dean for Student Affairs, Clinical Services, and clerkship director.
2. With advance notice, the clerkship directors will work with the student to try and avoid an ACD. This may include arranging rotations or shifts to accommodate the request or helping the student select the best days/times to attend their activity and limit time away from clinical duties. If accommodations can be made to align the student’s scheduled time off with their activity, the absence will not be considered an ACD. However, clerkship directors may not always be able to accommodate these requests. In this case, if the clerkship director permits the student to attend the activity, this will result in an ACD.
3. Emergency requests for ACD such as student illness, personal injury, or injury/illness/death of a family member should be communicated as soon as possible to the Associate Dean for Student Affairs, Clinical Services and the clerkship director and clerkship coordinator.
4. In cases of ACD without prior communication with, or approval by, the Associate Dean for Student Affairs,
Clinical Services office and the clerkship director, a Professional Conduct Evaluation Form will be filed by the clerkship director. This includes unauthorized extension of a previously authorized ACD.

Further information about common reasons for missing required educational events:

Absence from Clinical Duties for Personal Medical Care

Medical students are strongly encouraged to maintain their own physical and mental health and well-being. Whenever possible, students should schedule non-emergent healthcare appointments during times that do not conflict with classroom and clinical activities. In the event an appointment must be scheduled during a required educational activity, students must request permission to be absent from required duties from the appropriate Dean (see above).

Religious Observances

The Emory School of Medicine recognizes and respects the importance of individual religious beliefs and practices. While the School of Medicine calendar includes only religious observances recognized as U.S. federal holidays, the school seeks to accommodate student religious needs reasonably and within the requirements of the academic schedule. There shall be no adverse or prejudicial effect resulting to any student requesting an absence from required duties for religious observances. Students assigned to patient care educational activities may request assignments that allow the student to meet their religious needs; however, students may be asked to attend patient care activities that cannot be reasonably re-scheduled, such as on-call time with a care team. Required academic work missed as part of an absence from required duties must be made up to the satisfaction of the supervising faculty member.

Residency Interviews

During clinical clerkships, students MAY be granted one-day of absence from clinical duties for residency interviews per each two weeks of the clinical rotation. This may vary on rotations that schedule shift clinical duties (e.g., Emergency Medicine). Students should discuss and submit requests for absence from clerkship responsibilities to the Deans Office and clerkship director PRIOR to making travel or other interview plans. Regardless of absences for interviews, students must complete the requirements of the rotation by the last day of the rotation. Any deviation from this policy must be approved by the Associate Dean for Student Affairs, Clinical Services.

Participation in the MD or MD/PhD Admissions Process

Students actively participate in the MD and MD/PhD admissions process, serving as interviewers. Students will not be allowed to miss mandatory components of any clerkship to serve as an interviewer.

Participation in Meetings of the EUSOM Executive Curriculum Committee and its Subcommittees

Students actively participate in the subcommittees of the EUSOM Executive Curriculum Committee. They play an invaluable role in curricular decisions.

Required Student Meetings with Deans and Potential/Actual Discovery Mentors

During the required clerkships, students are required to meet with the Associate Dean for Student Affairs, Clinical Services, or their designee. In addition, students need to meet with faculty members in order to select a mentor for their Discovery phase project. If possible, these meetings should be scheduled during a time that minimizes student disruptions in clinical care activities.
Section 3: Academic Integrity

Integrity is defined as a commitment, even in the face of adversity, to six fundamental values: honesty, trust, fairness, respect, responsibility, and courage. The Emory School of Medicine seeks to involve every member of the community in cultivating a culture of academic integrity and promoting communal standards.

Pursuant to this goal, the students, faculty, and administration of the Emory School of Medicine have created the Honor Code, which presents our standards of academic integrity and outlines the consequences for violations thereof.

This section of the student handbook outlines the School of Medicine Honor Code, along with academic regulations and procedures, promotional guidelines, and graduation requirements.

Emory University School of Medicine Honor Code

Preamble

The students, faculty, and administration of the Emory University School of Medicine join together in support of this School of Medicine Honor Code for the purposes of (a) providing an atmosphere of mutual trust, concern, and respect; (b) fostering honorable and ethical behavior; and (c) cultivating lifelong professional conduct.

To promote this purpose, matters regarding academic misconduct shall fall under the jurisdiction of the Honor Code. Matters outside of those that fall within the jurisdiction of the Honor Code, such as violations of the Student Conduct Code, will be handled in accordance with the applicable policy.

Students who matriculate in the Emory University School of Medicine must agree to abide by and uphold the Honor Code.

Statement of the School of Medicine Honor Code

Any action indicating lack of integrity and/or dishonesty in academic matters is considered a violation of academic ethics. Such offenses include, but are not limited to, engaging in, or attempting to engage in cheating, plagiarism, sabotage, falsifying or manipulating data, misrepresenting attendance, or knowingly passing off work of another as one’s own.

Honor Code Violations Definitions and Policies Include:

Cheating. Cheating includes knowingly acquiring, receiving, or passing on information about the content of an examination prior to its authorized release or during its administration, provision or utilization of un-authorized aids, or impermissible collaboration.

Plagiarism. Plagiarism is the act of incorporating into one’s own work, the work or expression of another without appropriately and adequately indicating the source.

Sabotage. Sabotage is defined as intentional and malicious actions that impair another student’s academic performance.

Falsifying or manipulating data. Falsifying or manipulating data is the act of creating, enhancing, or otherwise
changing actual results in academic, clinical, or research matters.

Acts observed that appear to be in violation of the Honor Code must be reported to the Honor Council as detailed below. Failure on the part of a student to report such apparent violation will itself be considered a violation of the Honor Code.

Students are expected to abide by the terms of the Honor Code and a lack of knowledge of the actions prohibited by the Honor Code is not a valid defense and does not excuse a violation of the Honor Code.

To uphold this Honor Code and its purpose, an instructor may ask students to sign the following pledge at the end of all final examinations, quizzes, and other important projects:

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

*The absence of this pledge does not exempt the student or the assignment from abiding by this Honor Code.*

Each student upon entering the School of Medicine must sign a pledge stating that the student has read, understands, and is aware of the student’s responsibilities under the Honor Code.

**The Medical Student Council on Honor**

The Medical Student Council on Honor, hereafter, referred to as the Honor Council, will have jurisdiction over the supervision of the Honor Code as applies to students in the MD program.

The Medical Student Honor Council will consist of 5 (five) elected student representatives (1 M1, 1 M2, 1 M3, and 2 members of the M4 class), and four faculty members (two of whom will be alternates) appointed by the EAD. Two alternate members from each MD class will be elected.

**Student Representatives and Alternates**

Each medical school class shall elect class members to serve on the Honor Council for each election cycle.

The elections will be open to any student, including previous members of the Honor Council, who wishes to run. In order to be eligible to serve as a student representative or alternate student representative, a student must remain in good standing and cannot have previously been found to be in violation of the Honor Code. Student representatives and alternate student representatives must also be an enrolled member of their class.

M1 students will elect Honor Council members and alternates during the first month of classes. Vacancies will be filled by special election of the respective student classes.

**Faculty Representatives and Alternates**

To establish a pool of four faculty members, two of whom are replaced each year, the following process will be utilized:

- The EAD will appoint four faculty members (clinical and basic science), two of whom will be alternates. The faculty members will serve a five-year term which will automatically renew once. Hence, each appointed member could serve no more than two terms.
- The EAD will appoint new faculty members as vacancies arise.

**Honor Council Liaison**
An Assistant or Associate Dean in the School of Medicine (currently Dr. Douglas Ander, Assistant Dean for Medical Education) will function as an ad hoc advisor to the Honor Council indefinitely in order to provide guidance and continuity in the day-to-day operations of the Honor Council. The Honor Council Liaison (hereafter called the HC Liaison) will be notified that an alleged violation of the Honor Council has occurred and will assist the Council to ensure the investigation and hearing are conducted according to policies. The HC Liaison will not be directly involved in investigations and/or hearings but will serve primarily in an administrative role facilitating contact between faculty advisors, students, and Honor Council members. The HC Liaison will:

- Work with the EAD to ensure faculty and student representatives are selected.
- Coordinate and lead the two training sessions described below.
- Provide guidance, as needed, to the student leadership, investigators, and the student and faculty representatives during the process of an investigation and hearing.
- Be notified that an accusation has been made and will assist the Council to ensure the investigation and hearing are conducted according to policies.
- The HC Liaison will only be given the name of the student who is alleged to have violated the Honor Code if a hearing is deemed warranted.

**Training**

The HC Liaison will coordinate and provide a formal training session for all new faculty and student representatives in the fall. Additional training will be provided on an as needed basis.

All members of the Honor Council are required to complete the training prior to participating in an investigation or hearing.

**Leadership of the Honor Council**

The chair, vice-chair and secretary will be chosen from the student representatives of the Honor Council. The HC Liaison will ask if any of the student representatives would like to volunteer to fill each position. If there are multiple student representatives who volunteer to fill a position, the Honor Council Liaison will coordinate an election where the positions will be voted on by the members of the Honor Council by majority vote. Any person who volunteers or is elected to fill one of the positions must ultimately be confirmed by a majority vote of the Honor Council.

- Chair: The chair will be a M4 Council member.
- Vice-Chair: The vice-chair will be a M4 Council member.
- Secretary: The secretary will be a M2 Council member.
- Rising M2, M3, and M4 class elections for the Honor Council will be held in April, and M1 class elections will be held by September 30th of each year.

**Procedures for Reporting and Investigating Honor Code Violations**

1. If an individual believes that a violation of the Honor Code has or may have occurred, that individual must report the violation as soon as possible to any member of the Honor Council. Failure to report the violation will itself constitute a violation of the Honor Code.
2. Once an allegation has been made, the individual making that allegation must draft, sign, and submit a brief statement to the Honor Council Secretary.
3. Upon notification of a possible violation of the Honor Code, the following will occur:
   - The Honor Council secretary will inform the Honor Council chair that a possible violation of the Honor Code has been reported.
• The Council secretary will then appoint two investigators from available student representatives. The investigators will be responsible for gathering information about the case.
• The Honor Council chair will inform the Honor Council faculty representatives and the HC Liaison that the Honor Council has received a complaint of an alleged violation of the Honor Code and an investigation will be conducted. All violations that include plagiarism, falsifying or data manipulation in any stage of research shall be brought to the attention of the Office of Research Integrity and Compliance (ORIC) oric@emory.edu by the investigators. The name of the student and details of the incident will remain known only to the chair, the secretary, the investigators, and any individuals the chair may deem necessary.
• The student named in the allegation will be informed of the investigation prior to its onset by the HC secretary and an investigation will proceed.
• After the investigators finish gathering information concerning the alleged violation, the investigators will submit that information to the Honor Council chair, who along with the two investigators, will determine whether sufficient evidence exists to warrant a formal hearing by a majority vote.

Prior to the Hearing

1. If the chair and investigators determine that sufficient evidence exists to warrant a formal hearing, the secretary of the Honor Council will notify the student accused of violating the Honor Code of that decision in writing and provide the date, time, and place of the hearing; the nature of the violation with which the student is charged; the evidence of the violation, including the name of the individual(s) making the allegation. Upon notification of the hearing, the student will be provided with a list of available faculty by the HC Liaison, with whom to seek advice during the honor council process. Alternatively, the accused student may select a faculty or staff member of the school of medicine with the guidance of the HC Liaison.
2. The hearing will take place no more than 21 days after the determination is made to move forward with a hearing. In rare instances, the Honor Council, at their sole discretion, may extend that time period if the Honor Council feels that the circumstances dictate such an extension.
3. Any student who is alleged to have violated the Honor Code will be permitted to continue academic endeavors until a final decision is made.
4. The student who is alleged to have violated the Honor Code may review the evidence of a violation and gather evidence prior to the hearing.
5. For each hearing, the hearing panel will consist of six members: two student representatives, the secretary, the chair (or vice-chair should the student alleged to have violated the Honor Code be from the same class as the chair) and two faculty representatives. The three student representatives are randomly selected by the chair from the student representatives, then from alternate student representatives, if needed. If any student or faculty representative is unable to serve for any reason, including conflict of interest, then the chair will select an alternate student or faculty representative. The student representatives who investigated a case will present pertinent information at the hearing but will not be allowed to vote in the proceedings or be present during deliberations.
6. The Honor Council secretary will inform the Honor Council members chosen to be on the hearing panel of the alleged violation (date, person involved, and nature of the accusation).

The Hearing

The chair (or vice-chair) will preside over the hearing and participate in the discussion and deliberation of the case but will not have a vote.

Order of Proceeding

1. Call to order.
4. Presentation of evidence: The investigators and the student alleged to have violated the Honor Code may present testimony and other evidence as appropriate and relevant to the case. The chair and members of the Honor Council, and the student alleged to have violated the Honor Code, may ask questions of witnesses.
5. The chair will determine whether the hearing board can properly weigh or take into consideration any evidence offered by a party or witness based upon relevance. Rules of evidence applicable to criminal or civil court proceedings will not apply.
6. Discussion and deliberation by the Council is held in a private executive session.

After all admissible evidence has been reviewed, the hearing panel shall deliberate to decide the case.

Rules Governing Proceedings

All hearings will be conducted in closed-door sessions and will remain confidential. Participants in the hearing will be limited to the following:

- Chair (or vice-chair) of the Honor Council.
- The four selected Honor Council representatives (2 faculty, 2 students, not including the chair, vice-chair, or secretary)
- The secretary or, if needed, a temporary secretary appointed by the permanent secretary.
- The student accused of the Honor Code violation.
- The two investigators assigned to the case.
- Relevant witnesses who may be present only while testifying.
- The faculty advisor selected by the accused. This individual is not permitted to testify, ask questions, or to make statements of any nature.

The Secretary or their appointee will take minutes of the hearing and make them available to the Honor Council.

Decision and Penalties

For a student to be found responsible of an Honor Code violation, the unanimous vote of the five voting members of the Honor Council is required [the chair (or vice-chair) is not eligible to vote]. For all cases, the standard that shall be used to determine whether a violation was committed is “preponderance of the evidence”, i.e., it is more likely than not that a violation of the Honor Code occurred.

If a student is found to have violated the Honor Code, the hearing panel will make a recommendation to the EAD for a sanction. The hearing panel will make the decision on the sanction by majority vote of the voting members of the Honor Council. In case of a tie, the chair (or vice-chair) will cast a vote.

The HC Liaison and EAD will be informed of the decision of the hearing panel and recommendation for sanction, where applicable, promptly following the decision of the hearing panel.

Recommended Sanctions for Violations of the Honor Code

The standard sanction for violation of the Honor Code is (a) a mandatory leave of absence from Emory University School of Medicine for at least one academic term (semester); and (b) a grade of “Incomplete” for all courses in which the student is enrolled at the time of the infraction.

The Honor Council may recommend to the EAD a penalty more severe than a mandatory leave of absence (e.g., permanent expulsion) or may recommend a less severe penalty (e.g., disciplinary probation for Honor Code violation),
dependent upon the circumstances of the case.

Upon receipt of a mandatory leave of absence, the student cannot advance to the next term until they have completed the term in which the “Incomplete” grades were given.

If the student is in the first or second year of medical school, they will return from a mandatory leave of absence to the beginning of the uncompleted term which will likely require waiting an entire year due to required course and thread sequence. If the student is in the third or fourth year of medical school, they will return from a mandatory leave of absence to the beginning of the uncompleted clerkship. Due to scheduling, availability of clerkship rotations, and the nature of longitudinal small group activities, students may require waiting a year before returning to clerkships.

A student on a mandatory leave of absence may enroll in graduate resident status.

**Decision of the Executive Associate Dean (EAD) of the School of Medicine and Appeals**

The final decision on responsibility and the sanction rests with the EAD. The decision of the EAD will be effective immediately, unless there is an appeal to the dean. The appeal, including the basis for the appeal, must be submitted by the student in writing to the dean within one week after the student is notified by the EAD of the decision. If a student files an appeal, the EAD will appoint an ad hoc committee consisting of three faculty members from the School of Medicine. The EAD will provide the committee with the information reviewed by the hearing panel, the minutes of the hearing, and the student’s appeal. The committee will then make a recommendation to the dean that the decision of the appeal committee be affirmed or remanded to a new hearing panel. The dean will then review that recommendation and make the final decision in the matter.

**Amendments to the Honor Code**

Amendments to the Honor Code may be proposed by the Honor Council at any point in the academic year; proposed amendments must be reviewed by Emory School of Medicine General Counsel and approved by the EAD before becoming effective. If an amendment is approved while a case is under active review that amendment will not apply to that case. Any new amendment, once approved, will become effective as soon as all medical students have been notified of the change via mail or email.

**Honor Council Necessary Personal Belongings Policy**

**Objective:**

- To optimize the testing environment in all rooms where EUSOM and NBME tests/exams are administered.
- To implement a clear policy, which would hopefully, in turn, minimize opportunities to cheat and minimize the chance someone could be perceived as cheating.
- The testing procedures laid out by third-party testing companies, such as the NBME, should be followed per their specific policies and procedures. If third parties do not have established policies and procedures, the Necessary Personal Belongings Policy should serve as the policy for any test administered by the School of Medicine.

**Actions:**

- OMESA staff will display a PowerPoint slide at the start of each test that will explicitly refer to the Honor Code to remind students of the “Necessary Personal Belongings Only” policy.
- This policy applies to all MD students, first through fourth year classes.
- This policy will be enforced by the students who are in the testing room.
• Any student found in violation of the policy should be reported to the Honor Council.

Policy:

Only necessary personal belongings are allowed at a student’s testing station (or in the possession of a student) while taking any exam administered by EUSOM. All other belongings must be placed in the student’s locker or at an appropriate location as designated by the below policy.

- Possible necessary personal belongings that may be at the students testing station include: laptops without sticky notes or other academic stickers, unmarked laptop chargers, simple writing instruments, a water bottle without academic stickers, unwrapped food items in clear containers or food provided by SOM, unmarked Emory Student ID, disposable ear plugs, and any medically necessary items such as an insulin pump, all within reason and subject to inspection.

- Unnecessary personal belongings include, but are not limited to: study materials, such as books, notes, drawings, and flash cards; bags of any kind, such as backpacks, briefcases, and purses; extraneous clothing; cell phones; wired/wireless earbuds; smart watches; food wrappers.

Students may start the exam wearing a sweater/sweatshirt/vest and can take it off and hang it on the back of the chair during an exam. Students cannot start the exam with any extraneous clothing or outerwear at their desk. Students may only put back on their original layer during an exam.

All unnecessary personal belongings, including cell phones and smart watches, are to be placed in bags and not on any student’s person during an exam.

First- and second-year students should store all unnecessary personal belongings in lockers. If the lockers are too small to accommodate large items, students must make prior alternative arrangements to keep all unnecessary personal belongings outside of the testing room.

Third- and fourth-year students, as students without lockers and those taking exams outside of the SOM, are encouraged to minimize the belongings brought to the test. If this is not possible, any items that fall under “unnecessary personal belongings” should be placed against the wall at the front of the testing room. Students are not permitted to put bags on the sides or back walls of the testing room, or in the hallways near testing rooms. Note this does not apply to third-party testing. Please refer to specific policies for NBME, Aquifer or other third-party exams.

It is the responsibility of the students testing to enforce this policy and report any violations to the Honor Council.

Section 4: Student Records

The official record of each Emory University School of Medicine student is maintained in the School of Medicine. These records include information that assists in evaluating the progress of students in obtaining their medical education. Student records are kept secure and are not available to anyone other than faculty members and administrators of the school who have an appropriate need to review a student’s attendance or progress.

Other than information covered in the “Consent to Release Information” form, no information is released to external sources without written permission from the student.

While students are enrolled in the School of Medicine, the student record may contain the following:

- Official premedical education transcripts
- Admissions application
- Letter of acceptance
- Georgia residency affidavit
- Consent to Release Information Form
- Verification of TB and mask fit testing
- Verification of annual OSHA and HIPAA training
- Information regarding research or scholarship activities
- Honor Code compliance signature
- MD student Medical Student Performance Evaluation (MSPE)
- Copy of MD student USMLE Exam certification of identification form
- Letters concerning probation, deceleration, leave of absence, failure to be promoted, or disciplinary actions
- Notes concerning health problems are not maintained unless said health problems influence academic or clinical performance.

**Access to Student Records**

Per Emory University policy under the Family Educational Rights and privacy Act (FERPA), each student has a right of access to their education records, except confidential letters of recommendation and financial records of the student’s parents. These rights include:

- The right to inspect education records
- The right to limit disclosures of personally identifiable information contained in educational records, except to the extent that FERPA authorizes disclosures without consent (i.e., directory information, faculty members and administrators of the school who have an appropriate need to review a student’s attendance or progress)
- The right to request correction of the educational record

Students who wish to review their file must do so in writing to the School of Medicine Registrar by completing a Request to Review Educational Records Form. The School of Medicine complies with a request within a reasonable time, at most within 45 days. Arrangements are made for the student to read their academic file in the presence of a staff member.

Without exception, all requests for letters of reference or for completion of forms relating to academic performance and/or personal qualities require written authorization from the student (or graduate) for release of such information. This also applies to requests for information from faculty or administrative officers. Students have the right of access to letters or statements giving such information unless, in the authorization for release, the student waives this right and agrees that the information to be sent is to be held confidential. Confidential references are often requested by agencies or institutions to which students apply for aid or a clinical position.

Without a formal request, School of Medicine students have access to review information about themselves within the educational systems used by their program that contain courses taken, clinical schedules, assessments, and grades received.

[View more detailed information about FERPA](#)

**Requesting Certified University Transcripts**

Students can log into the [OPUS](#) system to obtain their course grades and accumulated hours of credit.

*If any discrepancies appear on the transcript, students are encouraged to contact the School of Medicine Registrar immediately so the record can reflect the correct information.*
The School of Medicine Registrar does not produce transcripts. Students can request certified transcripts by clicking “Request Emory Transcript” under the Academic Record section of the login page. Certified transcripts are delivered electronically to a specified individual, agency, or organization, provided the student’s financial status with the University is clear (no indebtedness except for loans with approved repayment schedules). Emory University utilizes the services of a third party called Parchment, Inc. to process requests. Before initiating the request, students must obtain an email address of the recipient. The transcript will be transmitted within 30 minutes of the online request. If the recipient will not accept an electronic transcript, an option to request a paper copy still exists and can be arranged through the same online process. There is no charge to request an electronic or paper transcript. If a student requests that expedited shipping of the transcript, a shipping fee will be charged to the student. All transcripts include the entire academic record at Emory University; the Registrar will issue no partial statements of record as transcripts. Report of performance in courses before the end of the academic year may be sent to any agency or institution by one of the school’s administrative officers on written request by the student.

View further information on official transcripts.

Legal Name Changes

Legal name changes are recorded in a variety of government offices (Social Security card, driver’s license, passport, birth certificate in some cases). Once you have updated documents, you will be able to update your legal name on campus. These are Emory systems where you should update your information:

- OPUS
- HR/Payroll (so any tax documents are correct)

Please note that:

1. Emory does not update network IDs with legal name changes. Your network ID will remain as originally issued. Thus, you will continue to use your netID to access email and other campus systems that utilize your netID/password for authentication.
2. These systems do not “talk” to each other (even though they may all use your netID to log you in). In other words, updating your legal name in OPUS does not automatically update your Human Resources record, or vice-versa.
3. The above pertains to updating your legal name in university systems. That process is separate from the Registrar policy that allows students to add a preferred name (Registrar website) or from the ability to create an email alias.

Designated Name

Emory University recognizes that students may wish to use a name other than their given names as recorded on official University documents. When designated by a student in OPUS, the University will use a preferred first/middle name except where use of the official name is required by university business or legal. Emory University Student Designated Name and Pronoun Policy

Students may enter a designated name through OPUS regardless of whether they have legally changed their name.

Places Where Designated Name Can Be Used

- OPUS Student Self Service
• Class and Grade Roster
• Emory Online Directory (unless directory suppressed)
• Canvas
• Emory Card
• Diploma (due to state medical licensing applications and requirements, there are serious implications for students in the health professions that use a preferred name instead of a legal name on diplomas)

Places Where Legal First Name Must be Used:

• Student Financial Accounts
• Financial Aid
• Responses to enrollment enquiries such as verification requests
• Official transcripts
• Student payroll information
• Emergency responder and enforcement systems (parking, police, etc.)
• Internal systems that require and can only accommodate legal name
• All external communications and reporting

Section 5: Policies and Procedures for Students with Disabilities

Department of Accessibility Services (DAS)

Emory University provides all persons an equal opportunity to participate in and benefit from programs and services afforded to others. Students requiring accommodations are referred to the Department of Accessibility Services (DAS). The DAS office offers a wide variety of services to students with documented disabilities.

As the administrative office responsible for managing access needs, providing Americans with Disabilities Act (ADA) accommodations, ensuring compliance with local, state, and federal civil rights regulations pertaining to disability law, and serving as a critical resource for the enterprise, it is DAS’s role to embody Emory’s commitment to its mission "in work and deed."

DAS assists eligible students and faculty/staff in obtaining a variety of services (i.e., alternative testing, note taking, interpreting, advocacy, mobility/transportation, etc.) and ensures that all matters of equal access, reasonable accommodation, and compliance are properly addressed.

Eligible students and faculty/staff must register and request services — contact DAS at Emory University or Emory’s Oxford College. Confidentiality is honored and maintained.

In compliance with the Americans with Disabilities Act, Emory University School of Medicine is committed to making reasonable accommodations to assist students with documented disabilities to fulfill their educational objectives.

Students with disabilities who wish to request accommodations under the ADA must follow the University’s procedures for verification of ADA eligibility by submitting supporting documentation to the Department of Accessibility Services (DAS). Once DAS verifies an individual’s ADA eligibility, the student will work with the medical school’s Associate Dean of Student Success, Dr. Christen Hairston, to coordinate their accommodations while matriculating. Further information about documentation requirements and the eligibility process can be found at the DAS’s website.
Once a student’s ADA eligibility has been verified, there is no need to repeat the registration process unless the student’s situation or needs change. Students must request an updated accommodation letter each term to share with Dr. Christen Hairston. If an adjustment to an accommodation is needed, it is the student’s responsibility to reach out to DAS. Accommodations are only determined by DAS.

Any confidential records and documentation submitted by the student to DAS to support determination of ADA eligibility will be retained and kept confidential in the DAS office. Once an accommodation letter has been generated, it is the student’s responsibility to share this letter with faculty, course directors, clerkship directors and clerkship coordinators. This is an official notice of the individual’s ADA eligibility and guidelines related to reasonable accommodations appropriate for the individual’s needs.

It is the responsibility of the student to request needed accommodations. Once a request is made, the student will meet with DAS and Dr. Christen Hairston to assist in the implementation of necessary accommodations. Unless a request is made, and the student authorizes release of the information regarding the need for accommodations to appropriate others (faculty, staff, etc.), the medical school will not proceed with arranging accommodations. No retroactive consideration will be given to students who fail to request or to complete the approval process.

Notification to faculty and others about a student’s need for accommodations will contain a statement of the student’s ADA eligibility as well as guidelines for necessary accommodations. No information about the student’s diagnosis, condition or history will be available in any way to course instructors or others from whom a student might request an accommodation.

The Associate Dean of Student Success will maintain a folder containing all accommodation letters for each student. Such material will be retained separately from the student’s academic file, and access to such material will be limited and appropriate confidentiality will be maintained. The school will not release details related to accommodations that were provided (for example to residency programs, etc.).

Students will be apprised of ADA eligibility within the timeframe that is established by DAS. If a request for eligibility verification is made at the start of an academic period, accommodations cannot be implemented until the student’s registration is finalized with DAS. Because of the number of verifications being processed at the beginning of the academic period, students are urged to submit their request for eligibility verification and accommodations as far in advance as possible. Advance preparation will ensure the smoothest availability of needed accommodations.

**Requesting Accommodations and Determining Initial Eligibility**

Students who need accommodations to participate fully in Emory’s programs must file a formal request for accommodations with DAS. This includes students who may develop an impairment due to an illness, accident, or surgery. DAS may be contacted about potential accommodations for a temporary disability. The best time to do so is immediately after registering for classes each semester or term or following the development of an impairment. This allows DAS to adequately coordinate services and provide instructors with reasonable notice.

Students new to Emory or the accommodations process must follow DAS policies and procedures for determining initial eligibility. Determination of eligibility for DAS services and accommodations is not part of the admission process. Returning students will skip this step.

Fill out Emory’s [student registration form](#) and submit it along with the appropriate medical/disability documentation. A DAS staff member will review the application materials and determine appropriate accommodations specific to the individual's disabilities. Accommodations are developed for students on an individual basis and, depending on the course content and format, may vary by semester or term.
If a student is determined to be eligible for reasonable accommodations, a DAS staff member will meet with the student to discuss approved accommodations. Otherwise, DAS may assist the student in identifying voluntary and readily achievable means for meeting their needs.

*Students have the primary responsibility of advocating for themselves during the accommodation process.* They should not rely on their parents, faculty members, or others to do so for them.

**Implementing Accommodations**

After registering with DAS and receiving approved accommodations, the student will request an accommodation notification letter via the Accommodate portal. Students who are already registered with DAS must request accommodation letters each term.

It is each student’s responsibility to contact the Associate Dean of Student Success, Dr. Christen Hairston, to provide a copy of the official notification letter and to schedule a meeting to discuss EUSOM’s policy for the administration of accommodations.

A copy of the official notification letter must also be submitted to individual faculty members, clerkship directors and coordinators responsible for teaching and/or administering an assessment of the student in which an accommodation is requested.

**Accommodations Testing Policy**

Students must contact the Program Coordinator, Assessment, Joshua Cook at joshua.cook@emory.edu to make test day arrangements. Arrangements must be requested in advance and receive prior approval if a student needs to take an examination outside of normal business hours.

**Before Your Exam**

- To utilize approved accommodations, it is the student’s responsibility to contact Joshua Cook at the beginning of each term they are registered and submit the official accommodation letter from the Department of Accessibility Services.
- Once the School of Medicine receives the letter of notification, students must contact Mr. Cook at the beginning of each course or clerkship to coordinate logistics of administration of any assessments in which accommodations will be used.
- It is also the student’s responsibility to disclose to the director and/or coordinator of each course or clerkship if they choose to do so.
- Since both the student and their professor will need to complete several steps, it's important to verify that everything is ready before the date of each exam.
- You will receive an email confirmation to identify which building and room to report to for your exam.
- Review and confirm the exam schedule and details ahead of time.

**Day of Your Exam**

Certain rules and requirements apply to the testing environment. Students must review and become familiar with the rules and procedures listed below.

**Test Day Rules and Procedures**
• You must arrive ten minutes prior to the start of each exam or exam section for check in and to allow for any delays. Late arrival will result in loss of total examination time.
• You are required to adhere to your test day schedule.
• Do not bring any personal/unauthorized items into the secure testing area. Such items include but are not limited to outerwear, hats, food, drinks, purses, briefcases, notebooks, notes, pagers, watches, cell phones, recording devices, WIFI enabled earbuds and photographic equipment.
• If required, show a photo ID to the proctor when signing in. Testing cannot take place without an ID if such a requirement is in place.
• Food and drinks are only allowed if their presence is an approved testing accommodation by the Department of Accessibility Services.
• You are not permitted to access any unauthorized items during the exam administration.
• A scratch pad or paper will be provided to you. You are not allowed to bring your own paper into the secure testing area.
• Do not make notes on your scratch paper prior to starting your exam and/or entering your start up code. Once your exam begins, you are permitted to make calculations or notes ONLY on the erasable note board or scratch paper provided.
• You must turn in all used and unused scratch paper to the proctor at the end of your exam.
• You must adhere to the instructions provided by proctors administering the examination.
• Carefully review and agree to abide by any instructions provided or that appear at the start of the examination session.
• Test proctors are not authorized to answer questions from examinees regarding examination content or scoring during the exam.
• Do not leave the testing site at any time during the administration of your exam unless you inform and obtain permission from the testing proctor or are instructed to do so by test administration staff.
• Failure to follow test day rules and procedures may result in the withholding or cancellation of your scores, and/or a bar from future exams administered by the NBME.
• Earplugs and ear protectors are recommended.
• Exams are closely monitored. Staff enter the testing area often.
• If cheating occurs, the exam will be stopped, the course/clerkship/course director and dean will be notified, and all materials will be held for action.

Breaks

• If part of the accommodation, your break(s) will be scheduled and timed.
• Return all test materials and personal items to the proctor before you start your break.
• Students may choose to omit/skip breaks, but students may not exceed scheduled break times unless given permission by the proctor.
• Time will not be stopped during any exam unless it is an approved testing accommodation; it is at the student’s discretion to break while time is running.
• Note: EUSOM is not responsible for your personal belongings.

Cancellations

• Tests must be cancelled 48 hours in advance with approval from the student’s assigned dean.
• Students are responsible for rescheduling exams in communication with their dean and Mr. Cook.

EUSOM Accommodations Contacts
Section 6: Clinical Placement Reassignment and Schedule Changes

The School of Medicine considers student requests for clinical placement reassignments and schedule changes.

Requests for Clinical Placement Reassignments

During the Application and Translation phases, clerkship directors and coordinators are responsible for assigning students to specific clinical sites. Clerkship directors may factor student preferences into such assignments, but preferences are never guaranteed.

Should special circumstances arise either before or during when a student is placed, a student may request (in writing) a reassignment. A student’s request for reassignment must provide an appropriate rationale. All requests for reassignment should be sent to the respective clerkship director(s) unless the special circumstance is of a highly personal nature. In such cases, a student should request reassignment from the Associate Dean for Student Affairs, Clinical Services.

When a decision to deny a student’s request for reassignment is made by a clerkship director, the student may appeal the decision to the Associate Dean for Student Affairs, Clinical Services, who will have the final authoritative decision. If the decision to deny a student’s request is initially made by the Associate Dean for Student Affairs, Clinical Services, the student may appeal to the Executive Associate Dean for Medical Education and Student Affairs.

Requests for Schedule Changes in the Application and Translation Phases

During the Application and Translation phases, student schedules are created by the Office of Student Affairs. Many considerations are factored into student schedules. Should special circumstances arise before, during or after student schedules are finalized, a student may request (in writing) a schedule change. A student’s request for a schedule change must provide an appropriate rationale (e.g., personal, medical necessity or other unforeseen issues). Requests should be sent to the Associate Dean for Student Affairs, Clinical Services, who will make the final decision.

Section 7: Graduation Requirements for the MD Degree

Student Physician Activities (SPAs)

The learning outcomes for the Emory University School of Medicine MD program are stated in terms of the tasks and responsibilities of a professional physician, called Student Physician Activities (SPA). This list of SPAs defines what EUSOM students will learn over the course of their medical school career and will be required to demonstrate prior to
graduation.

- SPA PP-01 Fulfill the unique professional role of a physician in society
- SPA PP-02 Demonstrate trustworthiness to patients, colleagues, and other healthcare personnel
- SPA PP-03 Recognize and address ethical dilemmas
- SPA PP-04 Manage time
- SPA PC-05 Take a patient-centered history (focused and complete)
- SPA PC-06 Perform a physical examination (standard and “core and cluster”) and recognize normal and abnormal findings
- SPA PC-07 Prioritize a differential diagnosis based on clinical reasoning
- SPA PC-08 Develop a patient care plan that applies best evidence to the care of individual patients
- SPA PC-09 Execute technical procedures* at the specified level of performance
- SPA MK-10 Demonstrate understanding of relevant scientific principles of medicine and explain their application to patient care
- SPA MK-11 Contribute to generalizable medical knowledge
- SPA PL-12 Use feedback to improve one’s own practices
- SPA PL-13 Identify personal limitations and seek assistance as needed
- SPA PL-14 Formulate clinical questions and search the literature for evidence that enhances patient care
- SPA PL-15 Use electronic medical records and medical informatics to care for patients
- SPA PL-16 Teach peers and team members
- SPA IC-17 Treat patients while understanding own biases
- SPA IC-18 Communicate with patients and their support system regarding their care
- SPA IC-19 Participate in difficult conversations with patients and their families
- SPA IC-20 Document and present patient findings and treatment plans
- SPA SP-21 Recognize, resist, and work to rectify the inequities in health and health care that reinforce systemic racism, discrimination, and bias
- SPA SP-22 Serve the community
- SPA SP-23 Contribute to healthcare quality and safety initiatives
- SPA SP-24 Work collaboratively in interprofessional teams and with other healthcare professionals

* Graduation Technical Procedures List

1. Adherence to universal precautions
2. Putting on gloves and gowns using sterile technique
3. Basic life support (as evidence by completion of a BLS course)
4. Use of an automatic external defibrillator
5. Drawing venous blood

**Academic Requirements**

The judgment of the faculty as to the fitness of a student to receive the MD degree is based not only upon scholastic achievement, but also upon demonstration of the attitudes and behaviors expected of a medical professional. Each student must be approved for graduation by the dean and the School of Medicine Council of Chairs.

To be eligible to receive the degree of Doctor of Medicine from Emory University School of Medicine, students must:

1. Have attained satisfactory standing in all courses and clerkships required for the degree.
2. Have mastered the EUSOM SPAs and have successfully completed all the required activities
and assessments related to the SPAs.
3. Have taken and successfully passed Step 1 and Step 2 Clinical Knowledge of the USMLE.
4. Have completed all academic requirements of the MD degree within no more than six academic years from the date of matriculation.

Financial Obligations for Graduation

It is a requirement for graduation that all financial obligations to the University shall have been satisfied. Students with an unpaid balance on their student accounts may have a hold placed on their diploma and transcripts until the balance is paid in full.

Section 8: Leaves/Interruption of Medical Education

Requests for a leave may be granted by the Executive Associate Dean for Medical Education and Student Affairs or their designee or when recommended by a faculty committee. A leave may be granted, if deemed appropriate, for health, personal, or family reasons, or for special academic study. A leave is generally granted for a period of one year or less, and readmission is automatic at the time agreed upon when the request is made, provided any issues necessitating the leave have been dealt with appropriately. If for any reason the leave extends beyond one year, the student must apply for readmission, unless a longer period for special study is approved by the Executive Associate Dean for Medical Education and Student Affairs or their designee. The leave does not extend the six-year period allowed for completion of the standard MD degree unless the approved leave involves an academic course of study longer than two years to qualify for a degree or certificate. The fact that this leave will take more than two years must be made clear in writing to the Executive Associate Dean when requesting approval for the LOA.

The School of Medicine reports all leaves/interruption of medical education in the Medical Student Performance Evaluation (MSPE).

All students requesting a leave must:

1. Request the leave in a letter specifying both the start and the return to medical school dates
2. Meet with the Executive Associate Dean for Medical Education and Student Affairs or their designee
3. Meet with the School of Medicine Registrar
4. Meet with the Assistant Director of Financial Aid and Scholarships (if the student receives financial aid), and
5. Receive a letter from the Executive Associate Dean for Medical Education and Student Affairs or their designee approving the leave.

Discussion about planned absences (e.g., for special academic study, research fellowships, or other Extended Discovery activity) whether involving study at Emory, or away from Emory, should be made as far in advance of the absence as possible, and preferably during the application process for the special academic course of study. Optimally, written requests for such absences should be made at least 3 months in advance.

Section 9: Medical Student Performance Evaluation (MSPE)

The MSPE (“Dean’s Letter”) is prepared for all senior students by a faculty committee that includes the Associate Dean for Student Affairs, Clinical Services. The document is a key part of the residency application packet.

If for any reason, a student believes that the assigned MSPE writer cannot prepare the letter in an unbiased manner, the student may request that the letter be completed by another member of the committee.
The document is a letter of evaluation, NOT a letter of recommendation. That is, it is intended to be a comprehensive summary of the student’s academic record through the first three years of medical school. The MSPE consists of the student’s progress until the MSPE is submitted on or around September 30th as dictated by the Association of American Medical Colleges (AAMC). It is intended to present the student in the best possible light but also to convey accurate information to a residency program director about the student’s qualifications for graduate medical education.

Unique to Emory’s MSPE is inclusion of information written by the student’s Small Group Advisor as well as information on the student’s Discovery project. Regarding MD/PhD students, who are not expected to do Discovery, expansion of their research from their PhD work will be detailed in that section. For students who complete a master’s program (MPH, MA in Ethics, MSCR), details on their completed thesis will be included.

The MSPE is specialty-neutral and has been standardized by the AAMC across medical schools to include six sections that include the following:

- Identifying information
- Noteworthy characteristics (total of 3) written by student and edited by the MSPE writer
- Academic history – date of matriculation and leave/interruption of medical education (if applicable)
- Academic progress – includes student performance on USMLE Step 1 and 2 CK, Foundations and Application phases (grades and summative comments of clinical clerkships), the Discovery phase of the curriculum (unique to Emory), required clerkships in Translation phase completed before July of application year, and small group advisor comments
- Summary paragraph
- Medical school information

View additional information on the MSPE.

Process

All graduating medical students should make an appointment to meet with their MSPE writer between April and August of their senior year. Students must provide an up-to-date curriculum vita, 3-5 noteworthy characteristics and complete the MSPE form in OASIS, which is required by the dean’s office prior to the scheduled meeting. Each noteworthy characteristic should be no more than 6 lines and will be edited by the letter writer in consultation with the student.

Students can review the MSPE for factual accuracy at two points in the MSPE process (after the first and final drafts). All reviews must be done with the oversight of the Office of the Associate Dean for Student Affairs, Clinical Services (in-person or via Zoom). Students who will be out of town during September should notify their MSPE writer as soon as possible. Every effort will be made to have the letter completed before the student departs, so the student can review the final version of the letter in person. For those students who are not able to review their MSPE in the office, they are encouraged to arrange a call in which the MSPE will be read to them by the Associate Dean for Student Affairs, Clinical Services. The MSPE will not be transmitted electronically to students for their review.

All MSPEs are typically transmitted on or around September 30 of each academic year. This can vary, however.

View the most up-to-date timeline on the AAMC website.

It should be noted that invitations for residency interviews are sometimes offered before the MSPE is viewed by program directors; therefore, it is important that students submit their applications and letters of recommendation in a
Section 10: National Standardized Examinations

National Board of Medical Examiners (NBME) Subject Exams

NBME Subject Examinations are an important part of the educational process, evaluating the performance of a large, representative group of examinees at the same stage of training. These exams are used throughout the curriculum as one part of the evaluation process. Students are required to take NBME Subject Examinations at scheduled times and locations. Those students granted accommodations for testing must make sure that clerkship coordinators and Dr. Hairston are aware of their need for accommodation. It is recommended for students to email the clerkship director and clerkship coordinator with their DAS letter at the beginning of each clerkship.

Individual arrangements will be made for the student at each exam in accordance with the specified accommodations.

To prevent additional charges, exam orders must be placed at least 22 days prior to the testing date. Therefore, it is important for the Office of Medical Education and Student Affairs (OMESA) to know well in advance the number of students scheduled to test at every exam. Unapproved absences from NBME exams will result in the student being charged for any additional costs associated with rescheduling of the examination.

For NBME examinations, students MUST test during the exam time (and date) supported by the medical school. A published exam schedule is available through the OASIS calendar.

To ensure the security of NBME materials and compliance with testing regulations, all NBME subject exams must be administered by trained proctors in an NBME-approved testing site.

Arriving Late for an NBME Exam or Missing Examinations

It is considered part of professional behavior and the responsibility of the student to arrive on time for scheduled examinations with their Emory ID cards.

Emory designates a Chief Proctor for NBME exams. It is the responsibility of the Chief Proctor and their designees to assure that NBME exams are given in strict accordance with NBME policy. As per this policy, a student may be admitted to a testing room up to 30 minutes after the exam has started, provided the student’s name is on the check-in roster and the Chief Proctor approves the late start. Students arriving late for an exam will be expected to end the exam at the same time as other examinees; no extra time will be allotted to compensate for their tardiness.

For any student who is more than 30 minutes late for the exam, the NBME must be contacted by the Chief Proctor to seek approval for taking the examination. The Chief Proctor and their designees are not required to allow any student to start an exam late if doing so will be excessively disruptive to the other students.

United States Medical Licensing Examinations (USMLE)

The USMLE is an examination series with three complementary steps, the first two of which are graduation requirements for Emory University School of Medicine, in addition to academic requirements outlined earlier. Students must successfully pass Step 1 and Step 2 Clinical Knowledge to graduate from Emory University School of Medicine.

USMLE Step 1
In addition to successful performance during the Foundations phase, students must also earn a passing score, as set by the USMLE, on Step 1 examination of the United States Medical Licensing Examination (USMLE) prior to beginning the Application phase of the Emory University School of Medicine curriculum.

The deadline for taking USMLE Step 1 is three weeks before the start of the Application phase. Prior to taking USMLE Step 1, all academic requirements of the Foundations phase, including any necessary remediation, must be completed. For students who do not meet these deadlines, the school cannot guarantee Application, Discovery and Translation schedules that will permit the student to graduate at the expected time. Any delay in taking USMLE Step 1 must be approved by the Associate Dean for Student Success.

Students are offered a Step 1 Guide, workshops, and 1:1 Step 1 planning sessions through the Center for Holistic Student Success. Any delays or failures will be discussed with the Associate Dean of Student Success and any further delays will be discussed and their impact on scheduling and graduation.

Students who do not meet these deadlines for completion of academic requirements and for taking and passing USMLE Step 1 may be referred to the Progress and Promotions Committee for consideration of academic sanctions.

The following guidelines have been adopted regarding failure to pass the first administration of Step 1 of the USMLE. A student whose overall academic record warrants promotion, but has failed Step 1, has two options to gain promotion into the clinical years:

- **Option A** – permits re-taking the test at the next available administration. Once the examination has been retaken, the student may begin clinical work. If a passing score is achieved, the student will continue the Application phase; if a passing score is not achieved, the student will cease Application phase course work and be allowed to retake the examination a 3rd time. It is highly encouraged that such students engage in an intense review of the basic sciences and consider auditing courses prior to re-taking the examination for the third and final time.
- **Option B** – grants a year’s time during which the student is encouraged to obtain remedial help and engage in an intense review of the basic sciences, with retake of the examination by the deadline of the following year. If the test is passed at that time, the student then enters the Application phase.

Students may appeal to the Associate Dean for Student Success and request an earlier re-take if extenuating circumstances are supportive.

A student who fails USMLE Step 1 on the second administration will be given a third and final opportunity to successfully pass Step 1. A student who has three unsuccessful attempts to pass Step 1 of the USMLE will be considered for dismissal from the MD program by the Progress and Promotions Committee.

A delay in taking Step 1 can be considered for the following reasons:

- Academic concern
- Failure to demonstrate due progress during the Step 1 dedicated study period
- Illness, including mental health concerns
- Family or personal emergencies

Any student requesting to delay taking Step 1 must do so in writing to the Associate Dean for Student Success. If granted, a detailed plan of how best to support the student in achieving a passing score on USMLE Step 1 will be outlined. The School of Medicine Registrar will be notified in writing.
Any delay in taking Step 1 may have repercussions on the ability of a student to graduate on time. For a student intending to graduate in four years, time taken in delayed entry to the clerkships must be made up later from the time allocated in the curriculum for Step 2 CK study and residency interviews.

Any student who delays Step 1 more than three months from the beginning of the Application phase will rejoin the class below them the following March, granted that the student has successfully passed Step 1.

Any student who delays taking Step 1 should have regular check-ins with Dr. Christen Hairston (Associate Dean for Student Success) and Dr. Stacy Higgins (Associate Dean for Student Affairs, Clinical Services) so that support and student schedules can be maximized.

**USMLE Step 2 Clinical Knowledge (CK)**

Students are encouraged to take Step 2 CK as soon as feasible after the Application phase. At the latest however, students must take Step 2 CK by October 1st of their senior year. Passing Step 2 CK is a requirement for graduation. Students will have no more than 3 attempts to pass USMLE Step 2 CK. A student who has three unsuccessful attempts to pass Step 2 CK of the USMLE will be considered for dismissal from the MD program by the Progress and Promotions Committee.

**Section 11: Progress and Promotions**

**Promotional Guidelines**

A student is considered to have achieved satisfactory academic progress if they pass the sequence of courses and clerkships and other requirements established by the Executive Curriculum Committee. The assessment of academic progress includes the domains of knowledge, skills, behaviors, and attitudes – as expressed in the form of SPAs published in the student handbook. Professionalism is an integral component of many SPAs and is a factor in consideration of academic progress. Independent of the final grade, unprofessional behavior may be the sole criterion for which a student receives a sanction as described throughout this document.

Students must be aware that the designation of academic probation or suspension may result in the loss of federal financial aid.

**Progress and Promotions Committee**

The Progress and Promotions Committee (P&P) monitors the progress of students during the EUSOM curriculum to ensure that students are performing at an acceptable level to successfully complete their present phase and advance to the next phase of the medical curriculum. The committee reviews all students’ academic progress and discusses students who may not be making adequate progress. The committee makes decisions as to whether each individual student can advance based on school policies outlined below. P&P committee decisions are communicated to the Executive Associate Dean for Medical Education and Student Affairs (EAD) or their designee who then provides letters written by P&P to individual students.

**Academic Advancement**

All EUSOM students’ academic records are reviewed regularly to ensure satisfactory academic progress across the EUSOM curriculum. At the end of each phase, the institution reviews each students’ progress across institutional criteria to determine whether an individual is ready to progress to the next phase of the curriculum (e.g., Foundations to Application). Those who have not satisfactorily met all requirements will be sent to and discussed by the P&P
The committee will consider all aspects of a student’s performance, including course grades and adherence to the Emory School of Medicine (SOM) Conduct Code, Honor Code, and medical school student policies.

The P&P determines whether a student meets criteria to advance to the next phase using the following criteria:

1. Adequate Progress: Students with passing grades in all courses/clerkships.
2. Inadequate Progress (these students would not be promoted):
   a. Students who failed a course or clerkship and have not satisfactorily remediated;
   b. Students who have not completed course or clerkship requirements;
   c. Students who failed to complete any P&P mandated activities on which promotion is contingent;
   d. Students who are on suspension.

During the academic year, the P&P will also regularly review the progress of all students to assess whether they are making adequate progress toward attaining the achievement levels required for promotion to the next phase of the EUSOM MD curriculum. Upon review of academic progress, the P&P members will take a more thorough review of any students who:

- Have two or more incompletes in any phase
- Have one or more unsatisfactories in courses and/or clerkships
- Have professionalism violations
- Have received actions from P&P in the past so that their progress can be updated

**Academic Actions**

**Letter of Concern**

When the P&P has concerns about a student’s academic or professional performance, a letter of concern will outline the deficit areas and recommended resources for support. The letters are meant to foster a growth mindset but also to clearly delineate the consequences if the student does not improve their performance. Letters of concern will be included in a student’s internal academic file but will not appear on the Medical Student Performance Evaluation (MSPE).

The following is a non-exhaustive set of examples in which a student would be considered for a letter of concern:

- A student is required to remediate two Foundations examinations;
- A student has a professionalism or performance issue that is noted to be a pattern. This may include, but are not limited to:
  - Habitual or unapproved absences
  - Inappropriate responses to feedback
  - Lack of response to faculty or administrator communications
  - Repetitive concerns about a particular skill or behavior during the Application phase

**Academic Warning**

When a student’s deficiencies are of a more serious nature, the P&P committee may give the student an Academic Warning. The entirety of the student’s academic performance is factored into this decision. Notification of this status is intended to alert the student that, without improvement, they may not succeed in medical school. Academic Warning will be included in a student’s internal academic file but will not appear on the MSPE.

Although not an exhaustive list, an Academic Warning may be considered when a student:
• Has to remediate three Foundations examinations and the summed credit hours for the three courses is 6 or more. For the purposes of this determination and those interventions below, a single anatomy exam will count as 1 credit hour.
• Is noted to have a deficiency in their clinical performance over more than one clerkship or course (e.g., difficulty synthesizing clinical information, poor shelf exam performance, etc.).
• Received an Academic Warning in the Foundations phase and continues to struggle in a later phase
• Misses deadlines during Discovery
• Has recurrent professionalism problems or a single, more significant professionalism transgression. This may include, but is not limited to:
  o Inappropriate interactions with a member of the healthcare team and/or a patient
  o Failure to meet deadlines
  o Dishonesty
  o Lack of adherence to a course or clerkship policy
  o Lack of, or poor communication with, faculty or administrators

**Academic Probation**

When the P&P has significant concern about a student’s performance and, without improvement, the student is in danger of having to repeat the curriculum or to be dismissed, the student will be placed on Academic Probation. This serves three functions:

1. Provides official documentation that the student is deficient in areas related to academic or professional performance;
2. Provides a pathway and defines a timeline that the student must follow to regain good standing. This may include, but is not limited to, remediation, maintaining appropriate performance standards and/or adhering to professional expectations;
3. Describes the consequences that will result if a student does not meet stated expectations.

Academic Probation will be included in a student’s internal academic file but generally will not be reported on the MSPE unless a student receives an Unsatisfactory grade in a clerkship. It will be reported to residency programs that are in states that request this information.

The following is a non-exhaustive list of academic difficulties for which a student would be considered eligible for Academic Probation:

• A student is required to remediate four Foundations examinations (end of course and/or Anatomy) and the total for the courses is 10 credit hours or more.
• A student receives a U in a clerkship or course in the Application, Discovery, or Translation phases. The student will not progress in the phase until they have completed remediation of the clerkship or course.
• A student who is required to repeat a phase will do so with Academic Probation status.
• A student has a professionalism issue that the P&P members judge to be significant and highly concerning. This may include such issues as:
  o Unapproved absences during a clerkship
  o An unprofessional response to a communication sent by a faculty member or administrator.

**Repetition**

Students with ongoing academic difficulty may need to repeat a course, clerkship, or phase of the curriculum. There are two primary reasons for repetition. 1) Students may voluntarily repeat a phase because of specific events (e.g., health, personal or family issues). This voluntary repetition can only be approved by the EAD or the EAD’s designee. In these
cases, the student can repeat the phase without any academic penalty (i.e., not under Academic Probation. 2) Students may be required by the P&P to repeat a course or phase, due to a concern that the student has not mastered the relevant learning objectives. Repetition will be recorded in the student’s internal file and will be apparent on the student’s transcript. The student will do so under Academic Probation.

The following is a non-exhaustive list of actions for which the P&P would require a student to repeat a phase or course in the curriculum:

- A student is required to remediate five or more Foundations examinations
- A student fails to receive a satisfactory grade on the second retake exam during remediation of a Foundations course
- A student receives a grade of U in the Discovery phase
- A student receives a grade of U in a clerkship or course in the Application or Translation phases

**Academic Suspension**

Academic Suspension is considered for serious academic issues when the student’s academic performance or professional behavior would benefit from time away from the curriculum to manage external distractions or other concerns. The period of suspension is recommended by the P&P and will require specific conditions to be met before the student may restart the EUSOM curriculum. Students on Academic Suspension cannot restart the program until the concerns that placed them on suspension have been resolved.

**Dismissal**

Dismissal is considered for either serious breaches in professional conduct or significant academic concerns. Prior to voting on dismissal, the P&P chair will contact the student and invite them to meet with the P&P committee. The student will be advised to bring a mentor/advocate with them.

To be considered for dismissal from EUSOM by the P&P committee, a student must demonstrate an inability to resolve their academic or professional areas of concern, including but not limited to the following situations:

- **Academic**
  - Required remediation of four courses totaling at least 10 credit hours for a student who is repeating the Foundations phase under Academic Probation
  - An Unsatisfactory grade for a student who is repeating the Discovery phase
  - Two initial Unsatisfactory grades in Application/Translation courses or clerkships
  - An Unsatisfactory grade for one course or clerkship remediation during Application or Translation

- **Professionalism**
  - A professionalism violation that the P&P members consider gross negligence. This includes negligence that, in the mind of the committee, could have led to the death or serious injury of a patient. It also includes behavior in the clinical setting that is grossly inappropriate by the standards of the profession.

**Student Right to Appeal P & P Decisions**

Students may appeal interventions by the P&P including Academic Probation, Repetition, Academic Suspension, and Dismissal. If a student wishes to appeal, this request should be presented in writing to the EAD within 14 calendar days of receiving the notification of the action. The appeal may be based on the following grounds:

1. To consider new information or other relevant facts that the person appealing the decision feels the P&P may not
have known and that may have influenced its initial decision
2. To allege a procedural error in the P&P process that may have substantially impacted the fairness of the decision.

For appeals of Academic Probation, the EAD will make the final decision on the appeal and will notify the student of that decision. For appeals of Repetition, Academic Suspension, or Dismissal, the EAD will convene an ad-hoc appeals panel of three faculty members to consider the appeal. The appeals panel will review the documentation from the P&P and send its recommendation to the EAD whether to uphold the decision of the P&P. The EAD will ultimately make the final decision on the appeal and will notify the student of that decision. All appeal decisions are final.

It should be noted that all appeals should be conducted in a professional manner by the student involved; that is, demonstrating respectful disagreement with the perspective and judgment used by faculty members. Failure to exhibit appropriate professional attitudes may immediately terminate the appeal process and lead to a professionalism report.

### Length of Time to Complete Degree

The standard MD program at EUSOM takes four years to complete; however, students may apply to postpone graduation for a year if they want to:

1. Obtain another degree (e.g., MPH)
2. Spend a year doing a scholarly project (or extended Discovery)
3. Take an additional year of formal coursework.

Students who need time off for extenuating medical/personal issues are advised to take a Leave of Absence (LOA) from medical school. Students may be eligible to be enrolled at EUSOM for additional periods for purposes of remediation or completion of degree requirements.

Students who plan to obtain the MD degree with no additional degrees or certificates must complete all academic requirements of the MD degree within no more than six academic years from the date of matriculation. Approval for a well-planned fifth year is required. The academic records of students who are approaching the deadline of “Time to Degree” for the MD degree will be reviewed by the Registrar and the Progress and Promotions Committee, with enough notice to enable the student to complete the requirement by the end of “Time to Degree”.

### Section 12: Professional Conduct

**Expectations**

*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.

Professional behavior includes, but is not in any way 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:

- **SPA PP-01 & SPA PP-02 Honesty**
  Being truthful in communication with all others, while in the healthcare arena or in the community at large.

- **SPA PL-15 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.

- **SPA PP-02 Trustworthiness**
  Being dependable; following through on responsibilities in a timely manner.

- **SPA IC-18 & SPA IC-19 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).

- **SPA PP-03 & SPA PC-08 Respect for the rights of others**
  Dealing with all others, whether in a professional or non-professional 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 patients’ modesty and privacy.

- **SPA PL-12 & SPA PL-13 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.

- **SPA PC-01, SPA PC-08 & SPA PL-13 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 or inappropriate remarks; discerning accurately when supervision or advice is needed and seeking these out before acting; recognizing when one’s ability to function effectively 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 context of that patient’s beliefs and desires.

- **SPA PP-01 & SPA PP-02 Responsibility to duty**
  Effectively undertaking duties with alacrity [eagerness, enthusiasm and promptness are synonyms] and persevering until complete, or notifying a responsible more senior person of a problem; being punctual for class, small groups, rounds, conferences and other duties; timely notification of supervisory faculty, residents and Deans of absences or 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.

**Standards of Dress and Appearance**

Medical students are invited into virtual and interpersonal spaces that are perhaps the most challenging of any such
spaces that humans traverse. This is not a space where we seek to further our own identity. Rather, we enter into our patients lives to provide compassionate care. In keeping with this role in service to others, students are expected to convey a professional demeanor, 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 and patients. In all educational settings—classroom, laboratory, clinical environment—students are expected to be clean, well groomed, and dressed in a manner appropriate to their responsibilities and the standards of their assigned clinical sites. When patient-student contact is part of the educational experience (including interactions in the clinic, in the hospital, and with standardized patients), students are expected to dress professionally and wear a clean white coat unless otherwise instructed by EUSOM faculty. When patients are invited into the classroom as part of the Foundations curriculum, medical students should wear respectful and professional attire, as would be expected when seeing patients in the clinical environment, save for white coats, which are not necessary.

Of note, students must conform to dress policies set by each healthcare facility in which they rotate.

All students are required to be clean and maintain appropriate personal hygiene regarding their body, hair, and nails. Hair and nails need to be clean, neat, and of a length to not interfere with the student’s and/or patient’s safety or ability to perform their duties.

Professional dress for clinical duty is outlined below.

**Hair Maintenance**

Hair, including facial hair, should be neatly groomed, clean, and of a length that does not interfere with student and/or patient safety (including interfering with standardized personal protective equipment) or ability to perform clinical duties. No extreme hair styles or color are allowed. Unless head coverings are required as part of a medical uniform or for religious, cultural, or medical reasons, hats or other head coverings should be avoided.

**Clothing**

Students should wear business attire that is clean and in good repair. In general, clothes should be of a length, fit and style that are appropriate for the clinical environment. Avoid clothing with rips, tears, or frayed edges. Shorts and jeans are not appropriate professional dress. Shoes must be clean, close-toed and in good repair. Sandals should not be worn.

**Scrubs**

Scrubs suits should be worn in specific patient care areas only. They are the property of the hospital and are not to be defaced, altered, or removed from the hospital. Scrubs are NOT to be worn in the School of Medicine Building (including ExCEL) unless otherwise specified. Scrubs may be worn in the Anatomy Lab when appropriate; there are changing rooms adjacent to the lab to use for returning to street attire when leaving the lab area. Stained or soiled scrub suits must be changed as soon as possible; they are a source of potential contamination. All Personal Protective Equipment (e.g., masks, hats, booties) must be removed upon leaving OR’s/procedural/patient room areas.

**Body Piercing and Tattoos**

Tattoos should be covered to the extent possible. Piercings, other than simple ear and nose piercings, should be covered or removed in professional settings. Body jewelry should be minimal. Necklaces, earrings, bracelets, rings, or other adornments should be of a size and design to not interfere with student and/or patient safety or the ability to perform clinical duties.
Nails

Nails need to be clean, neat, and of a length to not interfere with the student’s and/or patient’s safety or ability to perform their duties.

Name Tags/Badges

Students should always wear their name tag/badge in the clinical environment. Name tags/badges should be above the waist, near eye level.

The above provide guidelines that represent minimum standards for dress and appearance to ensure that students present a positive and professional image to patients. You will receive feedback about your grooming and attire from standardized patients, faculty, course directors, and peers when your appearance does not meet expectations for professional and clinical environments. If a faculty member, course or clerkship director or staff member feels that the dress is inappropriate for the setting, they may ask you to change prior to continuing in that environment.

Use of Social Media

As described above, behavior of students in the academic setting and beyond must be in keeping with the ideals of the institution and the profession of medicine. The following paragraphs indicate the current standards for behavior that relate to the use of social media.

Each student is responsible for their postings on the Internet and in all varieties of social media. In all communications, students are expected to be courteous, respectful, and considerate of others. Inappropriate postings on the Internet or social media will be considered lapses in the standards of professionalism expected of Emory School of Medicine students. Students responsible for such postings are subject to the Conduct Code process in the same manner as for any other unprofessional behavior that occurs outside the academic setting. Students who do not follow these expectations may face disciplinary actions including dismissal from the School of Medicine.

Students within the School of Medicine are urged to consider the following before posting any comments, videos, pictures, or essays to the Internet or a social media site:

- There is no such thing as an “anonymous” post. Furthermore, any posts or comments submitted for others to read should be posted with full identification of the writer. Where your connection to Emory is apparent, make it clear that you are speaking for yourself 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 my university or the School of Medicine" are required.
- Internet activities may be permanently linked to the author, such that all future employment may be hampered by inappropriate behavior on the Internet
- Making postings “private” does not preclude others copying and pasting comments on public websites. “Private” postings that become public are still subject to sanctions described in the School of Medicine Conduct Code.
- Do not share information in a way that may violate any laws or regulations (i.e., HIPAA). Disclosing information about patients without written permission of the patient and the School of Medicine, including photographs or potentially identifiable information is strictly prohibited. This rule also applies to deceased patients.
- For Emory’s protection as well as your own, it is critical that you show proper respect for the laws governing intellectual property, copyright and fair use of copyrighted material owned by others, including Emory’s own copyrights and brands. Curricular materials developed by Emory faculty and staff, or faculty/staff of other
medical schools or educational institutions should not be distributed or redistributed. When in doubt, students should seek guidance regarding appropriate use of such materials.

- Do not share confidential or proprietary information that may compromise Emory’s research efforts, business practices or security.

View Emory University Social Media Guidelines

AMSA Social Media Guidelines for Medical Students and Physicians

In addition to the above, the Social Media Guidelines for Medical Students and Physicians, created by the American Medical Student Association, should be followed.

In all situations, including on social media sites, members of the medical profession should always represent themselves in a manner that reflects values of professionalism, accountability, integrity, honor, acceptance of diversity, and commitment to ethical behavior.

For purposes of these guidelines, “social media” includes Internet and mobile-based applications that are built on user-generated shared content. Social networks including, but not limited to, blogging, microblogging (e.g., Twitter), networking sites (e.g., Facebook, LinkedIn), podcasts and video sites (e.g., Flickr, YouTube) – offer opportunities for communication, information/experience sharing, collaborative learning, professional interactions, and outreach.

Guidelines for social networking*

- **Be professional.** As medical students and physicians, we should represent our profession well. Adhere to rules of ethical and professional conduct at all times.
- **Be responsible.** Carefully consider content and exercise good judgment as anything you post can have immediate and/or long-term consequences and carry the potential for significant public impact and viral spread of content. Therefore, all statements must be true and not misleading. Make sure that you differentiate opinions from facts.
- **Maintain separation.** Avoid interacting with current or past patients through social media and avoid requests to give medical advice through social media. (e.g., replying to a post on social media asking to be diagnosed)
- **Be transparent/use disclaimers.** Disclose yourself and provide an appropriate disclaimer that distinguishes your views from those of the clinic, hospital system and/or University with which you are associated (while at the same time, being careful not to violate any social media policy to which you may be subject by such organizations). Without specific direction from the appropriate personnel, you may not present yourself as an official representative or spokesperson for said organizations. Also, be sure to reveal any conflicts of interest and be honest about your credentials as a medical student or physician (resident or otherwise).
- **Be respectful.** Do not use defamatory, vulgar, libelous, and potentially inflammatory language and do not display language or photographs that imply disrespect for any individual or group because of age, race, national origin, gender, sexual orientation, ethnicity, marital status, genetic information, military status, or any other protected characterization or group.
- **Follow copyright laws.** Comply with copyright laws. Make sure you have the right to use material before publishing.
- **Protect client/patient information.** Do not discuss confidential information and follow standards of patient privacy and confidentiality and regulations outlined in Health Insurance Portability and Accountability Act (HIPAA) and the Family Educational Rights and Privacy Act (FERPA, 20 U.S.C. § 1232g). Remember you could personally face a HIPAA violation if there are enough details in the post for patients to recognize themselves.
- **Avoid political endorsements.** Political endorsements of candidates should be avoided outside your own
personal social media accounts, even there, comments should be carefully considered. Endorsements of any candidates or political parties via AMSA social media channels is strictly prohibited, be aware of where and how AMSA’s name is used.

• **Comply with all legal restrictions and obligations.** Remember use of social networking sites or weblogs can carry legal and professional ramifications. Comments made in an unprofessional manner can be used in legal, professional, or other disciplinary proceedings (i.e., hearings before a State Medical Licensing Board).

• **Be aware of risks to privacy and security.** Read the site’s Terms of Use and Privacy Policy. Be cognizant of continuous changes in these sites and closely monitor the privacy settings of the social network accounts to optimize your privacy and security.

*Adapted from the Social Media Guidelines for the American Medical Student Association (AMSA).

### Emory University School of Medicine Conduct Code

Given the goals of the University as a place of academic freedom, and the School of Medicine as a site of training for highly ethical healthcare providers, a system is necessary to provide the proper balance between the academic freedoms allowed a member of the University and their responsibility as a future healthcare professional. For this purpose, and in accordance with the Bylaws of the University, the President of the University has defined the interests of the University community to be promoted and protected by such a system and has delegated to the Executive Associate Dean for Medical Education and Student Affairs for the School of Medicine the responsibility of designing and maintaining a conduct code for Emory School of Medicine students.

This Code may be reviewed annually, and changes require the approval of the Executive Associate Dean for Medical Education and Student Affairs and approval of the Senior Vice President and Dean for Campus Life. Provisions of this Code may be revised, supplemented, or amended at any time by action of the appropriate University authorities.

From the time an individual accepts an offer of admission to a program of the School of Medicine until the day of completion of that degree program and graduation from Emory University, they are considered a student of the School of Medicine and is governed by the principles set forth within this Conduct Code.

The Emory University School of Medicine Conduct Code pertains to misconduct of medical students enrolled in the School of Medicine outside of an academic setting. Academic and professional discipline of students is not covered by this Code but rather falls within the jurisdiction of either the School of Medicine Honor Code or the Progress and Promotions Committee.

#### Basic Expectations/Inherent Authority

The primary purpose for the imposition of non-academic discipline in the School of Medicine setting is to protect and preserve the quality of the educational environment in the campus community. This purpose entails several basic expectations:

- That the School of Medicine and the University at large assumes high standards of courtesy, integrity, and responsibility in all of its members.
- That each student is responsible for their conduct and that continuation as a student is conditional upon compliance with the requirements of student conduct expressed or implied in this Code.

The School of Medicine reserves the right to take necessary and appropriate action to protect the safety and well-being of the campus community and the patients we serve. The Executive Associate Dean for Medical Education and Student Affairs is charged with the welfare of all medical and health professions programs students. Accordingly, in emergency situations, this individual has full authority to deal with student conduct according to the exigencies of the emergency situation.
and for its duration.

The School of Medicine is not designed or equipped to rehabilitate students who do not abide by this Code. It may be necessary to remove those students from the campus and to sever the institution’s relationship with them as provided in this Code.

The Senior Vice President and Dean for Campus Life is delegated responsibility pertaining to all student organizations and student government and, in conjunction with the Executive Associate Dean for Medical Education and Student Affairs, has the responsibility and authority to discipline such organizations whose members are students within the School of Medicine.

Confidentiality

The details of Conduct or Progress and Promotions meetings are confidential and will not be released outside the University without the student’s specific written permission except as provided by applicable law. If a student is found to have violated the Conduct Code, the resulting sanctions can be included in any performance assessment or letter of recommendation requested by the student or an outside entity. Conduct Code violations and sanctions may also be reported to other agencies, such as the military, the federal government, licensing boards, and others if requested by the agency and accompanied by a signed release from the student.

Violations of the Law and This Code

Students may be accountable both to civil authorities and to the University for acts that constitute violations of law and of this Code. Those accused of violations of this Code are subject to the disciplinary proceedings outlined in this Code while criminal, civil, or other internal proceedings regarding the same conduct are pending. Accused students may not challenge the disciplinary proceedings outlined in this Code on the grounds that criminal charges, civil actions, or other internal proceedings regarding the same incident are pending, may be initiated, or have been terminated, dismissed, reduced, or not yet adjudicated. The University will refer matters to federal, state, and local authorities for prosecution when appropriate.

Prohibited Conduct

Each student may be subject to this Code whether misconduct occurs on university premises, at University or School of Medicine sponsored activities, or at any location off-campus when such conduct is brought to the attention of the University or the School of Medicine.

It is neither possible nor necessary to specify every instance of misconduct that could result in disciplinary action against a student. Violations of the Standards of Professional Conduct as described in the Student Handbook may also constitute “Prohibited Conduct” that is subject to this Code of Conduct. The following list includes, but is not limited to, conduct that may subject a student to disciplinary action:

1. Attempting, assisting, or encouraging any conduct as described below.
2. Causing physical harm to any person or causing reasonable apprehension of such harm.
3. Disorderly or indecent behavior including, but not limited to, destroying or damaging University property or the property of others.
4. Engaging in conduct directed at a specific person or persons that seriously alarms or intimidates such person or persons and that serves no legitimate purpose. Such conduct may include: explicit or implicit threats, including gestures that place a person in reasonable fear of unwelcome physical contact, harm, or death; following a person about in a public place or to or from their residence; making remarks in a public place to a specific person that are by common usage lewd, obscene, expose a person to public hatred, or that can reasonably be expected to have a
tendency to cause acts of violence by the person to whom the remark is addressed; or communicating anonymously by voice or graphic means or making a telephone call anonymously whether or not a conversation ensues.

5. Violating the University’s Policy on Sex and Gender-Based Harassment and Discrimination.

6. Violating the University’s Policy on Equal Opportunity and Discriminatory Harassment.

7. Initiating or causing any false report, warning, or threat of fire, explosion, or other emergency.

8. Misrepresenting information or furnishing false information to the University or its representatives.

9. Forgery, alteration, misrepresentation, counterfeiting, or misuse of any University or other document, instrument of identification, or access device.

10. Providing alcoholic beverages to an individual under 21 years of age or to one who is noticeably intoxicated, or possession or use of alcoholic beverages by an individual less than 21 years of age.

11. Unauthorized possession of an open container of an alcoholic beverage.

12. Appearing in a public place manifestly under the influence of alcohol or a controlled or other intoxicating substance, particularly when there is danger to self, others, or property or there is unreasonable annoyance to person(s) in the vicinity.

13. Unauthorized distribution, possession, or use of any controlled substance or distribution, possession, or use of any illegal drug.

14. Unauthorized use, possession, or storage of any weapon.

15. Unauthorized use or possession of fireworks or incendiary, dangerous, or noxious devices or materials.

16. Intentionally or recklessly misusing or damaging fire or other safety equipment.

17. Theft or misuse of property or services.

18. Substantially interfering with the freedom of expression of others.

19. Interfering with normal University or School of Medicine functions, University-sponsored activities, or any function or activity on university premises including but not limited to studying, teaching, public speaking, research, University or School of Medicine administration, or fire, police, or emergency services.

20. Disregarding or failing to comply with the directive of a hearing body or University official including a campus police officer acting in the performance of their duties.

21. Disregarding or failing to comply with the directive of an officer of the law acting in the performance of their duties.

22. Disrupting university or other computer systems; unauthorized alteration, disclosure, gaining or providing unauthorized access; or destruction of university or other computer system or material; improper access to university or other computer files and systems; or violation of copyright or proprietary material restrictions connected with university or other computer systems, programs, or materials.

23. The display or distribution of lewd, offensive, threatening, or inappropriate material via paper or electronic means. Such material includes pictures, videos, or written content that portray oneself or others in a manner that brings dishonor to the profession of medicine.

24. Violating any government laws or ordinances, or of any University or School of Medicine rules, regulations, or policies including but not limited to the “Standards of Professionalism” set forth above. Such rules, regulations, or policies shall include but are not limited to the regulations and policies contained in the Campus Life Undergraduate Code of Conduct, Information Technology Division (ITD) materials, Policy Statement on Discriminatory Harassment, Sexual Assault Policy Statement, School of Medicine Medical Student Handbook; regulations relating to entry (opening and closing hours) and use of University facilities; traffic and parking regulations; regulations and policies on the sale, consumption or misuse of alcoholic beverages; and on the misuse of identification cards.

25. Failure to report any arrests, criminal charges, positive results of drug tests or Criminal Background Checks (CBCs) that occur from the time of acceptance until graduation.

26. Recording any other person without the consent of the person(is) being recorded.

27. Inappropriate use of social media.

**Conduct Procedures**
Anyone wishing to report an alleged incident of misconduct under this Code may make such a report to the Executive Associate Dean for Medical Education and Student Affairs or to any Assistant or Associate Dean for Medical Education and Student Affairs. Reports generated by the Emory Police will be forwarded to the Dean for Campus Life or their designee and to the Executive Associate Dean for Medical Education and Student Affairs. The Executive Associate Dean for Medical Education and Student Affairs will decide as to whether or not an action should be taken in response to a report. If it is determined that further action should be taken, the Executive Associate Dean for Medical Education and Student Affairs will notify the student in writing that they must make an appointment for a preliminary meeting within five days of the date on the notice for the purpose of reviewing the report. Failure of the student to schedule or attend this preliminary meeting will automatically result in formal charges as described below.

Following this preliminary meeting, an investigator (faculty member) will be appointed by the Executive Associate Dean for Medical Education and Student Affairs to conduct an investigation to determine if the report has merit. The investigator may recommend the matter should proceed to formal charges or be disposed of administratively by agreement of the parties involved on a basis acceptable to the Executive Associate Dean for Medical Education and Student Affairs.

If the matter is not so resolved, the Executive Associate Dean for Medical Education and Student Affairs will then meet again with the student and present the student with a letter stating the formal charges and a copy of all documents relevant to the case.

If a student admits to having violated the Code of Conduct as charged, the student shall have the following options as to how sanctions will be determined:

1. The student may waive their right to a hearing and have the Executive Associate Dean for Medical Education and Student Affairs determine the appropriate sanction.
2. The student may choose a hearing with an ad hoc conduct committee appointed by the Executive Associate Dean for Medical Education and Student Affairs to determine the appropriate sanctions.

This selection shall be made in writing within five days of the student’s request for a hearing and be recorded by the Executive Associate Dean for Medical Education and Student Affairs.

If the student does not admit to having violated the Code of Conduct as charged, the charges will be referred for a hearing and a copy of all documents relevant to the case will be forwarded to the appropriate hearing body and the student involved.

If an accused student fails to respond to any notification in writing concerning the conduct process, their case will be automatically referred to a hearing with an ad hoc conduct committee.

The School of Medicine reserves the right to place a “hold” on the diploma, degree certification, or official transcripts of a student who has been charged with a conduct violation under the Code even though they may have completed all academic requirements. The diploma, degree certification, or official transcripts may be withheld until the conduct charges have been resolved and/or sanctions completed.

**School of Medicine Conduct Committee**

The School of Medicine Conduct Committee is an ad hoc committee appointed by the Executive Associate Dean for Medical Education and Student Affairs to hear non-academic medical or health professions programs student conduct cases. The Conduct Committee is composed of:

1. A chair appointed by the Executive Associate Dean for Medical Education and Student Affairs, who shall be a
2. Two voting faculty members and one alternate.
3. One voting School of Medicine administrator (dean, director, associate, or assistant dean) and one alternate.
4. Three voting student members (medical students or academic health students, determined by the school enrollment status of the student accused of misconduct) and one alternate.

The ad hoc Conduct Committee must have a minimum of five members present in order to convene, two of who must be faculty.

**Hearing Procedures**

The Executive Associate Dean for Medical Education and Student Affairs may require any student, faculty, or staff member of the School of Medicine to attend and/or testify at any hearing or meeting regarding a conduct matter that is covered under this Code.

Whenever a hearing is to be held regarding an alleged incident of misconduct under this Code, the accused student, and the complainant, if any, shall be given at least seven (7) calendar days’ written notice of the charges alleged against the accused student and of the date, time, and place of the hearing.

The ad hoc Conduct Committee shall conduct the hearing. The committee may require witnesses to testify at the hearing who are students, faculty, or staff of the School of Medicine and who are available to attend. Rules of evidence that apply in courts of law shall not apply in such hearings. The hearing shall be closed to everyone except the hearing body, appropriate staff, the accused student, and the complainant, advisors to the accused student and the complainant. Witnesses will be present at the hearing only during the actual time of their testimony.

An advisor of their choice may assist the accused student and the complainant. The advisor must be a member of the Emory University School of Medicine faculty or staff, or a student currently enrolled in the School of Medicine. The chair of the ad hoc Conduct Committee will consider exceptions. The advisor may not be an attorney.

Both parties and/or their advisors are allowed to:

- Be present at the hearing until such time as the hearing body retires to deliberate the decision. However, if either the student or the advisor or the complainant fails to appear at the hearing, the hearing may be held in their absence.
- Present tangible and documentary evidence and evidence by witness or by signed witness statements of witnesses who do not attend the hearing including the signed written statements of the complainant or the accused. If witnesses fail to appear, the hearing shall be held in their absence. It is the responsibility of the accused student and of the complainant to notify any additional witnesses not called by the hearing body. Additional witnesses must have the prior approval of the chair of the hearing body. All witnesses should be notified of the date, time, and place of the hearing.
- Question all witnesses who give evidence at the hearing directly or through written questions presented through the chair.

The chair of the ad hoc Conduct Committee shall have final decision on what evidence may be presented and the tone of questioning. The chair may decide to stop questions at any time.

**Hearing Decisions**

The decisions of the ad hoc Conduct Committee as to both violation and sanctions are in all cases advisory to the Executive Associate Dean for Medical Education and Student Affairs. The ad hoc Conduct Committee shall deliberate
and decide whether the accused student has violated this Code. The hearing body may decide that the student is in violation of a less serious offense than that originally charged. A determination that a student has violated the School of Medicine Conduct Code requires a simple majority vote. In the case of a tie, the chair shall cast the deciding vote.

If the finding of a violation is determined, the hearing body shall be provided with the record of previous disciplinary proceedings in which the student was found in violation. On the basis of the hearing and the student’s previous record, a decision will be made regarding sanctions by a simple majority vote. In the case of a tie, the chair shall cast the deciding vote.

A written decision will be issued from the hearing committee to the student within seven (7) days of the date of the hearing. The accused shall receive written notice of the outcome of the hearing which includes: (1) a statement of charges; (2) a summary of the facts in the case; (3) the decision; (4) a brief statement of the hearing body’s reasoning; and, if a violation is found, (5) sanction(s). The accused student will also receive information on the rights of appeal. The Executive Associate Dean for Medical Education and Student Affairs shall review all decisions of the Conduct Committee. The dean of the School of Medicine shall also review any decision resulting in a sanction of suspension or expulsion. The Executive Associate Dean for Medical Education and Student Affairs and the dean shall make a final decision regarding the recommendations of the Hearing Committee.

Sanctions

The following sanctions, singularly or in combination, may be imposed upon any student found to have violated the School of Medicine Conduct Code:

1. Warning: A notice in writing to the student that the student has violated institutional regulations and must cease and not repeat the inappropriate action.
2. Probation: A written reprimand for violation of specific regulations. Probation is for a designated period of time and includes the probability of more severe disciplinary sanctions if the student is found to be violating any institutional regulation(s) during the probationary period.
3. Restitution: Compensation for loss, damage, or injury. This may take the form of service, monetary compensation, or material replacement.
4. Discretionary Sanctions: Work assignments or service to the School of Medicine, the University, or the community.
5. Suspension: Separation of the student from the School of Medicine for a definite period of time, after which the student may be eligible to return. Conditions for readmission may be specified.
6. Expulsion: Permanent separation of the student from the School of Medicine.

Conduct sanctions (5) Suspension and (6) Expulsion shall be entered permanently on a student’s record. Sanction (2) Probation shall be entered on a student’s record for the term of the probation. Any sanction may include mandatory referral to university-based resources for medical or mental health evaluation and treatment if necessary. An evaluation supporting the student’s reentry to medical school may be needed before reentry into any course work or clinical rotations.

Appeal

The accused student may appeal decisions rendered by the ad hoc Conduct Committee to the dean of the School of Medicine. To initiate an appeal, the accused student must submit a signed, written statement of the specific reason(s) to the dean within seven (7) days of receipt of the hearing decision.

The dean will review the process and the decision to determine:

1. Whether or not the hearing was conducted in accordance with the procedures outlined in the Conduct Code.
2. Whether or not the interpretation of the code was appropriate.
3. Whether or not the sanction(s) imposed were appropriate.
4. After reviewing the documents pertaining to the case, the dean will issue a written review of the hearing decision with a reasonable period of time from the receipt of the request for review.

The dean will either:

1. Affirm the hearing decision.
2. Affirm the findings of the hearing decision but recommend a different sanction, OR
3. Remand the case to the Executive Associate Dean for Medical Education and Student Affairs to assign an ad hoc School of Medicine Conduct Appeal Board to conduct a new hearing.

**School of Medicine Conduct Appeal Board**

The Appeal Board will be established at the time the dean remands a case to the Executive Associate Dean for Medical Education and Student Affairs for conducting a new hearing.

The Board shall be composed of:

1. One voting administrator appointed by the Executive Associate Dean for Medical Education and Student Affairs.
2. Up to three voting faculty members appointed by the dean.
3. One voting MD or academic health student, depending on the status of the accused, appointed by the dean.

The Appeal Board shall follow the same guidelines as the initial hearing, reviewing the case independently, and make a final recommendation to the dean. The Executive Associate Dean for Medical Education and Student Affairs shall provide the recommendation of the School of Medicine Conduct Appeal Board to the dean whose decision shall be final.

**Notification and Retention of Records**

The Executive Associate Dean for Medical Education and Student Affairs shall forward notification of all final actions to the dean. The Executive Associate Dean for Medical Education and Student Affairs shall maintain files on all medical and academic health students’ conduct reports, records, and hearing proceedings according to procedures established by that office.

**Professional Conduct Evaluation Form**

The Professional Conduct Evaluation Form can be completed by any course or clerkship director, or a small group advisor. The form is a tool that can be used to document concerns regarding student professional behavior. The form is completed, reviewed with the student, and then forwarded to the Progress and Promotions Committee for review.

**Section 13: Registration, Cancellation, and Withdrawal**

Administrative staff in the Office of Medical Education and Student Affairs register MD students in their classes before each semester. If a student requests any deviation from the regular curriculum, such as time away from medical school or a research year, they must contact the appropriate dean for approval before the start of the semester. Students in the Foundation phase should contact the Associate Dean for Admissions and Student Affairs; students in the Application phase and beyond should contact the Associate Dean of Student Affairs, Clinical Services.

Class registration for any term is not complete until the student is in compliance with all published procedures and
until outstanding financial responsibilities to the University have been met. Students with a hold on their account preventing registration will be contacted to clear the hold before class registration can proceed. After the last date for changing courses, registration may only be permitted by joint consent of the Executive Associate Dean for Medical Education and Student Affairs or their designee, the Registrar, and the faculty of the desired courses. Tuition and fees are due and payable prior to the first day of class each semester.

A student's registration and attendance of classes is considered as agreement to comply with the rules and regulations of the University as published in the catalogs and other official publications of the school and as amended or revised during the student's continued enrollment.

Registration may be cancelled during the first week of classes as stated in the University academic calendar with the precise date each semester. Cancellation of registration means that no deficiencies will be noted on the student's transcript. A student who wishes to leave the University after the first week must officially withdraw; honorable dismissal requires that this procedure be followed.

Withdrawal forms may be obtained in the School of Medicine Registrar’s Office.

Section 14: Feedback to Students

In addition to summative feedback, students receive frequent formative feedback throughout medical school to help in their progress in learning. During the Foundations phase, students have formative feedback opportunities such as practice tests, thought questions, in-class or online quizzes, and practice problem sets. Students receive formative feedback on their clinical skills from their small group advisor and from simulated participants as part of the Essentials of Patient Care course. Students receive formative feedback during the outpatient experience (OPEX) from their clinical preceptors. During the clinical years, students receive on-going feedback about their progress. This is based on direct observation of students’ clinical skills. In addition, students receive formative feedback about their progress in medical school with attention to areas such as professionalism and adjustment to medical school from their small group advisors. See the formative feedback policy.

Section 15: Student Assessment, Grading, and Grade Appeals

Overview

Assessments are measurements of student performance conducted using instruments such as written exams or observational checklists. Evaluations are comprehensive summaries of student performance measured against a performance standard.

A wide variety of assessment types are used to measure students’ academic and professional performance in relation to the Emory University School of Medicine Student Physician Activities (SPAs) and are incorporated into grades for courses and clerkships. In addition to written exams and academic papers, instructor observational assessments are often used during small group work, during patient care on clerkships, for elective courses, and in research labs. Objective Structured Clinical Exams (OSCEs) are a regular and vital element of student assessment.

Students receive both narrative and summative assessments during the 4-year curriculum. See policies regarding narrative assessments and summative assessments.

Grading Scales

S/U
• “S” indicates satisfactory work, Pass
• “U” indicates unsatisfactory work
• A grade of “U” carries no academic credit. A student cannot be promoted to the next phase of the curriculum with a grade of “U” on their transcript. Any student who receives a “U” will, at a minimum, have to successfully remediate the course and may be susceptible to additional actions such as probation or dismissal, as determined by the Progress and Promotions Committee.

IP and I

• “IP” indicates ‘in-progress’ course work. Final transcripts cannot carry grades of “IP.”
• “I” indicates incomplete course work. Final transcripts cannot carry grades of “I.”
• The grade of “I” will be assigned to students who have been unable to complete the requirements of the course/clerkship. The grade of “I” is appropriate only when enough work has been completed at an acceptable level of performance such that the student can complete the remaining work without repeating the entire course/clerkship.
• If a student receives a grade of “I,” the remaining work must be completed within a reasonable time, as determined by the dean’s office, or the grade of “I” will automatically convert to an “IU.” The grade of “I” cannot be assigned for unsatisfactory work. The grade of “I” is to be viewed as a non-prejudicial entry on the student’s record.

W and WU

• “W” indicates withdrawal from course or clerkship without penalty
• “WU” indicates unsatisfactory withdrawal

Grading in the Foundations Phase

In the Foundations phase of the curriculum, grades “S” or “U” are assigned to students for each course. Students will receive a grade of Satisfactory in any course during the Foundations phase if they meet either of the following criteria: A student’s total score for the course is greater than 2 standard deviation units below the mean (i.e., z > -2.0) OR the student’s total percentage score is greater than 68.2%. When appropriate, students may also be assigned the grades of “I,” “IP,” “W,” or “WU.”

Students may not progress to the Application phase of the curriculum without receiving a final grade of “S” in all Foundations courses. Although Anatomy is not a separately graded course, students must also reach a satisfactory standard of performance as defined in the Anatomy syllabus.

Grading in the Application, Discovery, and Translation Phases

In the Application, Discovery, and Translation phases of the curriculum, grades “S” or “U” are assigned to students for each clerkship/course. When appropriate, students may also be assigned the grades of “I,” “IP,” “W,” or “WU.”

If a student fails any aspect of a clerkship that is required to pass the clerkship, the student will receive a failing grade (“U”) for the clerkship and be required to repeat the clerkship in its entirety. The student will be re-enrolled in the clerkship and a second grade will be issued after repetition of the clerkship; however, the “U” grade earned after completing the clerkship for the first time will remain on the student’s official transcript.

Students must successfully complete all Application requirements before proceeding to the next phases of the
curriculum.

**Completion of Clerkship Requirements**

All clerkship requirements, as defined by the individual clerkship directors, must be completed by 5pm on the final day of the rotation, including but not limited to required clinical experience patient logs in OASIS and direct observation forms. Students who fail to complete clerkship requirements on time will be subjected to penalties outlined by the clerkship directors and may result in an unsatisfactory grade for the clerkship.

**Conflicts of Interest in Grading**

Residents and faculty members with a conflict of interest (e.g., professional, personal, or familial relationship to a student, including providing health services or psychiatric/psychological counseling) should not participate in assessing a student in which a conflict exists. The EUSOM Separation of Roles outlines this in further detail.

On the rare occasion when a student’s small group advisor is also a clerkship director, the department vice chair for education (or designee) will be responsible for assigning grades for those students in which a conflict exists.

**Grade Appeals**

Students are encouraged to discuss their final grades with the course, clerkship, or elective director. Although grades are assigned as an accurate and fair representation of a student’s work, students have the right to appeal a grade and to receive an independent review of the grading criteria and their performance.

If a student wishes to appeal a final grade, this should be presented in writing to the Executive Associate Dean of Medical Education and Student Affairs **within 14 days** of receiving the grade. The appeal may be based on the process that led to the grade and/or questions of factual content used in the evaluation process. The Executive Associate Dean for Medical Education and Student Affairs or their designee will then review the basis for the appeal of the grade.

Upon review, the Executive Associate Dean for Medical Education and Student Affairs may find that based on process or factual content, there is no basis for a change of an evaluation or grade.

Alternatively, the Executive Associate Dean for Medical Education and Student Affairs may recommend that the grade be changed.

After review by the Executive Associate Dean for Medical Education and Student Affairs and submission of the reconsidered grade, the student may appeal any decision to the dean of the medical school. The decision by the dean shall be final.

It should be noted that all grade appeals should be conducted in a professional manner by the student involved; that is, demonstrating respectful disagreement with the perspective and judgment used by faculty members. Failure to exhibit appropriate professional attitudes may immediately terminate the appeal process and lead to an unprofessional conduct report.

**Section 16: Remediation**

**Remediation During the Foundations Phase**

Assessments are used to identify those students who have not achieved minimal competency during a course:
remediation is the process used to improve student performance and ensure that all students achieve the designated Student Physician Activities (SPAs) before moving on to the Application phase of the curriculum.

**Remediation Policy**

The Office of Medical Education and Student Affairs will notify students by email of their need to remEDIATE a course no later than three weeks after exam completion. A link to the remediations policy will be included in this email. This email will be cc’d to the course and Foundations director.

**Schedule:**

- The student must contact the course director within one week after the notification from OMESA. **It is the responsibility of the student to schedule the remediation process with the course director.**
- Students are required to make their first attempt at remediation no later than two weeks after their notification about the need to remediate an anatomy examination, and no later than the end of the week following the next school break for all other courses. Under certain circumstances, remediation may be delayed with prior permission from Dr. David Schulman, Director of Foundations.
- Students with remediations outstanding at the end of the Foundations phase must complete these remediations no later than December 31 of their second year of medical school. All remediations must be complete before a student may move into the Application phase. In addition, a student may not sit for the USMLE Step 1 exam administered by the National Board of Medical Examiners until all Foundations phase remediations are complete.

**Process:**

- Students requiring remediation must meet with the director of the course to be remediated. If, during this conversation, the student identifies a non-academic contributor to their poor performance (i.e., something medical or social), this should be brought to the attention of the Associate Dean for Student Success within 24 hours.
- The process for remediation, as determined by the course director, should be tailored to the individual student through the identification and correction of specific areas of deficiency. Retaking the entire course exam should only be necessary if the student’s performance in all major content areas is unsatisfactory. A take-home exam on its own does not allow the student to demonstrate competence.
- The course director will provide the Office of Medical Education and Student Affairs a record of the remediation process for each student. This record will outline the format of the remediation, the date(s) on which it occurred, and whether the student successfully remediated on that date. If the student was unsuccessful on a remediation attempt, the course director will briefly outline how they were unsuccessful, and the Foundations Phase Director will notify the Associate Dean for Student Success to connect directly with the student prior to additional remediation. This will be part of the student’s internal record but will not be indicated on the student’s official transcript. If a student is not able to demonstrate mastery of the course material after two attempted remediations, the course director will refer the student to the Progress and Promotions Committee for recommendation of repetition of part or all of the Foundations phase curriculum.
- Each failed anatomy exam will need to be individually remediated.

To identify students more readily in academic difficulty and offer them additional support services in a timely fashion, students who need to remEDIATE more than one course/thread will be provided with information on receiving a learning assessment, the results of which may trigger further support services that may help the student avoid the need to remEDIATE additional courses.
For students required to repeat the Foundations phase of the curriculum, student progression in anatomy will be as follows:

- Students will be allowed to continue in anatomy, at the discretion of the anatomy director, if they begin the repetition process after having already started the anatomy thread. In this situation, students will not be required to retake anatomy (as part of repeating Foundations) if they pass ALL the anatomy exams.

**Remediation During the Application, Discovery, and Translation Phases**

Students who receive a “U” in a clerkship or Discovery will have to repeat and successfully pass the respective clerkship or Discovery in order to progress to the next phase of the curriculum.

**Section 17: Use of Student Feedback**

**Confidentiality of Student Evaluations**

Students are expected to submit candid, constructive, professional evaluations of EUSOM courses, faculty, residents, and others when asked to do so. All evaluations are confidential and are blinded to prevent school personnel from knowing the identity of the person submitting an evaluation. It is vital to the evaluation process that students do not fear retribution or recrimination based on their honest perceptions.

Although students must log in to the OASIS system in order to submit evaluations, OASIS is specifically designed to redact all identifying data from every type of evaluation form submitted. This protects students from real or perceived retribution for the evaluation data that they submit. Evaluation data collected through OASIS are stripped of individual identifiers and stored on secure servers.

In the unlikely event that a student submits information through the evaluation process that could pose a credible threat to the safety of that student or others, a mechanism can be activated to retrieve identifying information about the responsible student. The decision to seek the identification of a student based on information from an evaluation form rests solely with the Executive Associate Dean for Medical Education and Student Affairs, or in their absence, a designee. In such a case, the specific evaluation will be matched to the individual student by the designated staff member who has the authority and ability to do so.

Except for the aforementioned extreme circumstance, no school personnel will have access to the identity of students who submitted an evaluation.

**Student Feedback of Courses, Clerkships and MD Program**

Student evaluations of individual courses, clerkships, phases, and the MD program as a whole is essential to improving the education experience. In addition to being reviewed by course and clerkship directors, student feedback is reviewed by the Executive Curriculum Committee and its multiple subcommittees. Evaluations are designed to be completely anonymous and are reviewed as part of aggregate data. The School of Medicine is interested in both positive and negative feedback and finds specific, constructive feedback to be most helpful in making necessary changes to the program.

**Student Feedback of Residents and Faculty**

Student evaluations of residents and faculty are an essential component to improving medical education. Student
feedback further assists with resident and faculty development. Course and clerkship directors and the dean’s office have developed ways to ensure that students are protected from retribution when completing evaluations. First, residents and faculty never see names associated with evaluations. Second, residents and faculty cannot see their evaluations until course and clerkship grades have been assigned to students. Third, student evaluations are not available to residents and faculty until they have been aggregated with other evaluations to provide a summarized analysis of resident and faculty teaching performance. These aggregations occur no more frequently than every six months and have at a minimum at least four evaluations aggregated and summarized. Finally, all student feedback of residents and faculty is handled by course and clerkship directors in a delicate and responsive fashion to further protect the identity of students submitting anonymous evaluations.

Part IV: Other University and EUSOM Policies & Procedures

Section 1: Emory University Policies

Alcohol and Drug Abuse

Anti-Hazing

Child Abuse Reporting

Equal Opportunity and Discriminatory Harassment

Faculty, Staff, and Student External Volunteer Guidelines

Missing Student Notification

Respect for Open Expression

Sex and Gender-Based Harassment

Smart Device Security Policy

Student Complaints (Grievances)

Student Vehicle Use

Travel and Expense Reimbursement

University Recognized Student Organizations
Section 2: EUSOM Policies

Access to Educational Records

Per Emory University policy under the Family Educational Rights and privacy Act (FERPA), each student has a right of access to their education records, except confidential letters of recommendation and financial records of the student’s parents. These rights include:

- The right to inspect education records.
- The right to limit disclosures of personally identifiable information contained in educational records, except to the extent that FERPA authorizes disclosures without consent (i.e., directory information, faculty members and administrators of the school who have an appropriate need to review a student’s attendance or progress)
- The right to request correction of the educational record.

Students who wish to review their file must do so in writing to the School of Medicine Registrar by completing a Request to Review Educational Records Form. The School of Medicine complies with a request within a reasonable time, at most within 45 days. Arrangements are made for the student to read their academic file in the presence of a staff member.

Without exception, all requests for letters of reference or for completion of forms relating to academic performance and/or personal qualities require written authorization from the student (or graduate) for release of such information. This also applies to requests for information from faculty or administrative officers. Students have the right of access to letters or statements giving such information unless, in the authorization for release, the student waives this right and agrees that the information to be sent is to be held confidential. Confidential references are often requested by agencies or institutions to which students apply for aid or a clinical position.

Without a formal request, School of Medicine students have access to review information about themselves within the educational systems used by their program that contain courses taken, clinical schedules, assessments, and grades received.

Clinical Supervision of Medical Students

Purpose
To ensure the safety of patients and students and foster an optimal environment for student learning.

When is this policy applicable?
This policy applies to medical students involved in patient care as part of the MD curriculum.

Who may supervise medical students?

- Faculty physicians or residents and fellows supervised by faculty physicians
- Licensed non-faculty physicians approved by the clerkship/course director
- Licensed healthcare providers supervising an activity within the scope of their practice

Levels of supervision
Students must be supervised at all times at one of the two following levels:

1. **Direct supervision**: supervisor is physically present with student and patient
2. **Indirect supervision**: supervisor is not physically present with student and patient but is present on the clinical site and immediately available to the student to provide direct supervision

**Special Situations**

- **Intimate exams**: Students must be *directly supervised* by a clinician while performing an intimate exam. Intimate exams include genitourinary, rectal, and breast exams.
- **Procedures**: The supervising physician is responsible for determining the level of supervision that is required based on the student’s competency and the procedure being performed.

The level of supervision will be determined by the supervising clinician based on several factors:

- Objectives and required clinical experiences for the course/clerkship
- Level of training of the student and their experience with the clinical activity/setting
- Supervising clinician’s familiarity of the student’s abilities
- Acuity of the patient and complexity of the clinical activity

Regardless of the level of supervision, the supervising clinician must evaluate all patients primarily seen by students before they leave the healthcare setting.

**Training of Supervisors**

Faculty physicians are responsible for all learning events in their environment, including events supervised and facilitated by non-physician healthcare providers and non-faculty physicians.

- All supervising clinicians must be aware of and have access to this supervision policy and Emory’s student mistreatment policy.
- All faculty physicians responsible for supervising a student during a given clerkship/course must be aware of MD course objectives. Clerkship/course directors are responsible for disseminating this information.

**Policy Implementation**

- Clerkship/course directors are responsible for ensuring access to aforementioned policies.
- Students should immediately report concerns about inadequate supervision to the course/clerkship director, the Associate Dean of Student Affairs, Clinical Services, and/or on the Learning Environment and Professionalism survey at the end of the course/clerkship. Clerkship/course directors must ensure students are aware of how to report violations of this policy.

**Communications and Marketing at Emory**

Regarding communications and marketing, the following are the Top 3 Things to Know as a student at Emory:

1. Protect the Emory logo
   - We follow [Emory University guidelines](#) for logo use
   - Do not alter the logo
   - Do not design your own logo
   - Do not use logos of our clinical partners, including EHC, Grady, Children’s, and VA, without written permission from their marketing departments
2. The media team is here to help
   - If you are contacted by a member of the media:
     o Always reach out to Emory’s media relations team before agreeing to an interview or placing an op-ed. Contact jen.king@emory.edu to be connected to the appropriate contact (depending on topic).
     o The media team is here to vet opportunities, advise on whether an interview is a good idea, and support you with messaging. They can also review and edit op-eds; please provide as much time as possible to review.

3. Process to order Emory-branded merchandise
   - First, get approval from the EAD on the design and any wording you have in mind.
   - Use our approved vendors whenever possible.
   - Other, non-approved vendors are not permitted to print an Emory logo without a licensing letter.
   - Reach out early in the process, we can help.

4. A couple more helpful hints:
   - Do not post any information about patients or photos of patients on social media, even if it is de-identified
   - When advocating, make sure you are advocating in a way that is aligned with our policies by reviewing the following article

Conduct Code

See entire section on the Emory University School of Medicine Conduct Code.

Confidentiality of Student Evaluations

Students are expected to submit candid, constructive, professional evaluations of EUSOM courses, faculty, residents, and others when asked to do so. All evaluations are confidential and are blinded to prevent school personnel from knowing the identity of the person submitting an evaluation. It is vital to the evaluation process that students do not fear retribution or recrimination based on their honest perceptions.

Although students must log in to the OASIS system to submit evaluations, OASIS is specifically designed to redact all identifying data from every type of evaluation form submitted. This protects students from real or perceived retribution for the evaluation data that they submit. Evaluation data collected through OASIS are stripped of individual identifiers and stored on secure servers.

In the unlikely event that a student submits information through the evaluation process that could pose a credible threat to the safety of that student or others, a mechanism can be activated to retrieve identifying information about the responsible student. The decision to seek the identification of a student based on information from an evaluation form rests solely with the Executive Associate Dean for Medical Education and Student Affairs, or in their absence, a designee. In such a case, the specific evaluation will be matched to the individual student by the designated staff member who has the authority and ability to do so.

Except for the aforementioned extreme circumstance, no school personnel will have access to the identity of students who submitted an evaluation.

Consensual Teacher – Student Relationships

The relationship between teacher and student is the foundation of the academic mission of the University. This
relationship vests considerable trust in the teacher, who, in turn, bears the responsibility to serve as mentor, educator, and impartial evaluator. In discharging this responsibility, teachers are accountable for behaving at the highest professional level, recognizing the dignity and worth of each person, and protecting the integrity of the student-teacher relationship.

Teacher-student relationships carry risks of conflict of interest, breach of trust, abuse of power, and breach of professional ethics. For these reasons, teachers must not engage in any consensual sexual relationships with a student while the teacher is in a position of supervisory academic authority with respect to the student. Nor may a teacher assert any supervisory academic authority with respect to a student who was the subject of a previous consensual sexual relationship. This prohibition extends to consensual sexual relationships between a graduate or professional student and an undergraduate when the graduate or professional student has some supervisory academic responsibility for the undergraduate, to consensual sexual relationships between department chairs and students in that department, to consensual sexual relationships between graduate advisors, program directors, and all others (each of whom is considered a teacher) who have supervisory academic responsibility for a student and that student.

When a teacher-student consensual sexual relationship exists, has previously existed, or develops, the teacher must decline to participate in any evaluative or supervisory academic activity with respect to the student. Furthermore, it is the responsibility of the student to inform the appropriate dean when such a relationship exists, or has existed, so that they will not be placed in any such situation. The appropriate dean to inform includes the Associate Dean for Medical Education and Student Affairs, Director of Admissions for students in the Foundations phase, and the Associate Dean for Student Affairs, Clinical Services for students in the Application, Discovery, and Translation phases.

The deans, department chairs, and other administrators should respond to reports of prohibited sexual relationships by inquiring further and, if such reports appear to be accurate, initiating appropriate disciplinary action or remedial measures against the teacher involved. Egregious breach of this policy is adequate cause for termination under paragraph 12.2 of the Emory University Faculty Handbook Statement of Principles Governing Faculty Relationships.

Non-consensual sexual relationships are prohibited by the Equal Opportunity and Discriminatory Harassment policy (1.3).

**Disaster Preparedness**

See section on Emergency Preparedness.

**Duty Hours**

During the clinical clerkships, students must adhere to the [duty hour guidelines](#) as outlined by the Accreditation Council of Graduate Medical Education (ACGME), with the exception that students cannot work more than 80 hours in any given week.

Duty hours are defined as all clinical and academic activities related to the program:

- Patient care (both inpatient and outpatient)
- Administrative duties relative to patient care
- The provision for transfer of patient care
- Time spent in-house during call activities
- Scheduled activities, such as conferences

Duty hours do not include reading and preparation time spent away from the duty site.
Students on clinical clerkships are required to report their duty hours on a weekly basis via OASIS. The Executive Curriculum Committee monitors student duty hours and makes any necessary curricular revisions to ensure duty hour compliance.

**Formative Feedback**

**Policy Statement**

The Emory University School of Medicine provides students with formative feedback on their academic performance, based on assessment data, regarding their progress towards achieving course and/or program outcomes. Such formative feedback is delivered in a timely manner that allows sufficient time for self-improvement.

**Reason for Policy**

Formative feedback to students regarding their educational progress is vital to ensuring that all students are aware of relevant learning outcomes and are informed about their individual progress towards meeting the ultimate educational outcomes. This policy ensures that students are given valid information about their progress towards course/clerkship outcomes and as needed, can take action to avoid falling short of expectations. This policy also ensures that EUSOM meets the Liaison Committee on Medical Education (LCME) MD program accreditation requirements.

**Policy Text**

**Formative Feedback during Foundations Phase Courses**

Assessment activities for the purpose of generating formative feedback to learners will be provided to students as a component of all courses during the Foundations phase, starting with Human Development. Other than longitudinal courses, the total number of opportunities for formative feedback will be equal to or greater than the number of weeks allocated to the course. Formative feedback opportunities during the Foundations phase will be determined by the course director with guidance from the Foundations subcommittee. They may include but are not limited to in-class review sessions with discussion, online quizzes with explanations to the answers, summary worksheets, and in-class response questions. These opportunities are meant to complement other student activities in the course and should be resources that allow students to self-identify knowledge gaps and help guide students’ thinking or behavior to improve subsequent learning and performance.

**Formative Feedback during Application and Translation Phase Clerkships**

During the Application and Translation phases, it is expected that formative feedback will be provided to students in all required clinical clerkships. Clerkships that are four or more weeks in duration will provide formative feedback by the midpoint of the clerkship. Clerkships less than four weeks in duration will provide formative feedback at an appropriate point during the clerkship. Formative feedback in the Application and Translation phases may include verbal and/or written comments from attending faculty, residents, or course leaders as well as results from written quizzes, OSCEs, or independent learning activities.

**Formative Feedback during the Discovery Phase**

During the Discovery phase, formative feedback from the designated mentor will be provided to students, at a minimum, by the midpoint of an individual student’s Discovery project. Formative feedback in the Discovery phase may include verbal comments and will include written comments from the mentor.

**Procedures**

The Foundations Subcommittee of the Executive Curriculum Committee will annually review the plan for and
execution of formative feedback during each course in the Foundations phase of the curriculum and will ensure that it complies with this policy. Student evaluations of self-assessments will be used in these reviews. An updated formative feedback plan will be required for courses that do not comply with the policy. The Required Clerkships Subcommittee of the Executive Curriculum Committee will annually review the plan and execution of formative feedback during each required clerkship in the Application and Translations phases of the curriculum and will ensure that it complies with this policy. Student evaluations of self-assessments will be used in these reviews. An improvement plan will be required for clerkships that fail to meet the policy. The Discovery and Medical Scholarship Subcommittee of the Executive Curriculum Committee will annually review the formative feedback for the Discovery course and will ensure that it complies with this policy.

Definitions

Formative Feedback: feedback provided to a learner that highlights strengths and areas in need of improvement and informs future learning.

Responsibilities

During the Foundations phase, course directors are responsible for creating and/or identifying opportunities for formative feedback and incorporating those opportunities within their own course. Course directors need to clearly designate formative opportunities in the course syllabus and make these opportunities known to students. During the Application and Translation phases, clerkship directors are responsible for ensuring that students receive structured formative feedback at the midpoint of the clerkship, as required by this policy, informing students of the policy, and monitoring compliance in the clerkship. The clerkship director is also responsible for facilitating and encouraging ad hoc formative feedback opportunities in the workplace. During the Discovery phase, the Discovery course Director is responsible for ensuring that students receive structured formative feedback at least at the midpoint of a student’s Discovery project. The Director is also responsible for designing the format and timing of such feedback. The director must also clearly define formative opportunities in the Discovery syllabus and make these opportunities known to students.

Oversight

The Executive Curriculum Committee, via the Foundations, Discovery and Medical Scholarship, and Required Clerkships Subcommittees, ensures compliance with the requirements established by this policy as outlined above in the responsibilities.

Gross Anatomy Laboratory Procedures and Policies

The bodies available for dissection were donated by individuals who wanted their remains to be used for education and research. As a medical student, you are privileged to have the opportunity to use this anatomical donation. The rules of the anatomy laboratory are based upon PATIENT PRIVACY, RESPECT, SECURITY, SAFETY, and MAINTENANCE. These rules will be observed in the laboratory AT ALL TIMES.

Respect

The anatomical donors are to be always treated with the utmost respect. Inappropriate or improper behavior and/or comments within and outside the laboratory is/are unacceptable. The articulated skeletons, skulls and isolated bones are to be afforded the same respect cadavers.

Do not remove the numbered tag from your cadaver.
The cadavers are to be properly maintained. Drying of tissue can be prevented by wrapping body parts in wet paper towels after each dissection. A special wetting fluid with a mold inhibitor is provided for this purpose in the large carboys near the sinks; do not use tap water. Any suspicion of mold or rot should be reported to the facility director immediately, since it can rapidly spread throughout body and to other donors in the room. The plastic body bag should be closed after each dissection. Take good care of your cadaver – it is the best teacher you have in this course.

All cadaver waste tissues are to be disposed of in the green trash bins. No other waste is to be disposed of in these bins (see below for the disposal of other waste).

Dissection tables should be kept clean and free of excessive tissue.

The right of privacy and confidentiality due all medical patients is extended to our anatomical donors at all times.

Cadavers will be appropriately draped at all times. All regions not being studied should be draped. Entirely cover the cadaver when leaving it for any period of time.

Use of cameras, cell phones or other photographic or video equipment is not permitted in the laboratory at any time unless specifically authorized by the course administration.

Only students, faculty and other authorized UVA personnel are allowed in the gross anatomy lab. Under no circumstances may a student bring an unauthorized visitor into the lab. Permission to bring a visitor into the lab can be granted only by Drs. Iwanik and McCollum and is restricted to healthcare professionals or individuals with an approved academic purpose.

NOTHING leaves the lab without the permission of the facility administrator or the course director.

Food and/or drinks are not allowed in the laboratory.

Security

Access to the anatomy lab is via electronic ID card key. Students have access to the Anatomy Lab 24 hours a day, seven days a week. Student access to the lab is recorded in the University ID card access database. For safety and security after hours, students should only use the lab in the presence of another student - a “buddy system”.

Keep the doors of the laboratory closed AT ALL TIMES.

Do not share your bone drawer combination with anyone.

Safety

The following safety procedures are in place to prevent injuries and limit exposure to chemicals:

- Students must wear long pants and closed shoes whenever they are in the laboratory. Open-toed or perforated shoes (e.g., sandals), shorts and skirts are not to be worn in the anatomy lab. You will be asked to leave the laboratory if you are in violation of this dress code.

- Students must wear a lab coat when in the lab. It is your responsibility to maintain your lab coat in a reasonably clean condition. The faculty will insist you wear your lab coat regardless of how dirty it is.
• Nitrile gloves must be worn throughout the dissection period.

• Eye protection must be worn whenever you are within five (5) feet of an open cadaver. Regular eyeglasses are sufficient eye protection. Students must wear safety goggles when using hammers, chisels, bone pliers and Stryker saws.

• All used scalpel blades must be disposed of in the provided “sharps” containers. Never dispose of “sharps” in wastebaskets or garbage cans (see below for the disposal of other waste).

• All injuries incurred in the gross anatomy laboratory, no matter how insignificant they may appear, must be reported immediately to an instructor. The instructor will administer first aid and determine whether the student should be directed to a facility for further treatment.

• In case of an EMERGENCY, use the lab phone to call the police (9-911).

• Students who are pregnant, or believe they may be pregnant, are responsible for discussing attendance in the gross anatomy lab with their physician.

**Maintenance**

The laboratory must be kept neat at all times, and you are expected to clean your area after each day’s dissection. This includes frequently emptying the bucket at the end of your table and wiping up any large spills from the floor. You are provided space for storing your atlases and dissection tools – please use it! Atlases and tools that are left on the counters will be placed in the lost and found box. Note that proper trash disposal is as follows:

- cadaver (tissue) waste – green trash cans
- gloves and cadaver-soaked paper towels – red hazardous waste containers
- blades – red sharps disposal boxes located on counter tops
- paper towels, papers, etc. – regular gray trash cans

The anatomy study room is a grease-free area. Do not wear lab coats or gloves in this room. Please shut the door to the study room if you are the last person to leave the lab after hours.

Models are to be examined only in the anatomy study room. Using a pen or pencil to point out structures on a model is strictly prohibited. Blunt probes are to be used instead.

Do not share the laboratory combination with anyone! Do not allow any unauthorized person entry into the laboratory!

**Lockers**

You will be assigned a locker to place your clothes and personal belongings while you are in the lab. The locker area must be kept clean and orderly at all times. When the anatomy course is complete, you will be given notice to clear any personal items from your lockers. Afterward, any remaining items will be discarded.

**Honor Code**

See entire section on the Emory University School of Medicine Honor Code.
Inclement Weather

During a weather emergency, student safety is the highest concern. In the event of inclement weather, the School of Medicine follows the Emory University Inclement Weather Policy 4.42 with the following modifications:

When the University is closed, in-person classes or learning activities during the Foundations phase may be modified. The Director of Foundations will notify students of any new arrangements for required activities or exams.

The Associate Dean for Student Affairs, Clinical Services will notify students of the expectations regarding reporting for clinical duties during inclement weather. As a general rule, if you live within walking distance of your clinical site or if you can travel via public transit (assuming it is running), you should report to your site. If you are working at a private practice or another outpatient site, you should call to confirm that the office is open. If travel to the clinical site would be dangerous, students should let their clerkship director and team know that you cannot safely travel to the site (you will not be penalized for this decision).

If students miss clinical time due to inclement weather, they may be asked to make up this time (especially a call day/night) if it is feasible within the duty hour restrictions and time left in the clinical rotation.

Industry Relations

The primary missions of the School of Medicine are to provide outstanding educational programs for medical and graduate students and trainees; to provide the highest standard of clinical care for patients; to develop outstanding, knowledgeable physicians and scientists who serve the community and the world; and to conduct innovative and collaborative research and integrate this knowledge into the practice of medicine. The School of Medicine is committed to ensuring that its faculty, staff, students, and trainees strive for the highest degree of ethical and professional standards in carrying out its missions. As part of this commitment, the school supports principled relationships with industry in which its faculty, staff, students, and trainees collaborate with industry on advances in science and medicine that enhance Emory’s missions and are beneficial to the public.

Industry has a long history of collaboration with academic medicine that has contributed to our educational, clinical, service, and research missions. These partnerships have often benefitted individual and public health through the development of new drugs, devices, equipment, computer technology, therapies, and services. For example, industry provides grants to Emory University to fund clinical trials and other research conducted by faculty; and faculty consult with industry to advise on research directions and health needs.

The primary intent of this policy is to support faculty, staff, students, and trainees in effectively engaging in relationships with outside entities. The individual, the School and University can work together to enhance the beneficial outcomes of personal external relationships and to prevent situations that might create actual or perceived conflicts of interest and might harm the public, the institution, or the individual. View the entire policy.

Emory SOM students:

- May not accept gifts from industry, on or off the Emory campus (pens, pads, cash, food and drink, entertainment, books, software, etc.). Travel expenses are also considered a gift, and therefore prohibited.
- May not accept donations of medications.
- Must not disclose information regarding clinical trials of medical devices or drugs to any outside entity.
- Must not provide advice or training to industry regarding selling, marketing, or promoting of a company’s products.
- May not receive remuneration for listening to sales talks or attending industry-sponsored education and training.
• May be part of interactions between industry representatives and faculty that concern research being done by the faculty member and industry, as long as the meeting does not include sales, marketing, or promotion.
• Must cooperate with inquiries from Emory administrative offices regarding compliance with these policies.
• Submit proposals for personal, external professional relationships with industry and other entities to the dean for review and approval prior to engaging or receiving compensation for the activities.

Additional regulations in this policy include:

• Commercial exhibits are prohibited in School of Medicine Buildings.
• Any book or educational material that is recommended by a faculty member who has a financial interest in the book or material must be approved by a committee formed by the faculty member’s chair.
• Faculty presentations to School of Medicine students and residents should disclose all their personal, professional financial relationships with industry in each presentation.

Any violation of this policy by a student will be considered unprofessional behavior and will subject the student to actions by the appropriate Progress and Promotions Committee or by an ad hoc Conduct Committee appointed by the Executive Associate Dean for Medical Education and Student Affairs.

Involuntary Withdrawal of Student from EUSOM

Overview

Emory University considers the safety and welfare of its students, faculty, staff, and patients a top priority. When a student engages in behavior that violates Emory’s rules of conduct, the behavior will be addressed as a disciplinary matter under the applicable Student Conduct Code. The Student Conduct Code defines prohibited conduct and outlines a process for conducting disciplinary proceedings.

This Involuntary Withdrawal Policy and Procedure is not a disciplinary code, policy, or process. It is not intended to apply to situations in which a student engages in behavior that violates the University’s rules of conduct. It is intended to apply when a student’s observed conduct, actions and/or statements indicate a direct threat to the student’s own health and/or safety, or a direct threat to the health and/or safety of others. There may be situations in which both this Involuntary Withdrawal Policy and the Student Conduct Code may apply. In all cases, the dean of the School of Medicine shall have final authority regarding the decision, enactment, enforcement, and management of the involuntary withdrawal of a student.

Policy Details

Criteria

A student may be withdrawn involuntarily from Emory if the University determines that the student represents a direct threat to the health and safety of themself or others by (1) engaging or threatening to engage in behavior which poses a high probability of substantial harm to themself or others; or (2) engaging or threatening to engage in behavior which would cause significant property damage, would directly and substantially impede the lawful activities of others, or would interfere with the educational process and the orderly operation of the University; or (3) is unable to fulfill their role as a student of the healthcare profession.

Procedure

When the Executive Associate Dean for Medical Education and Student Affairs (EAD) or their designee, based on a
student’s conduct, actions or statements, has reasonable cause to believe that the student meets one or more of the
criteria for involuntary withdrawal, they may initiate an assessment of the student’s ability to safely participate in the
University’s program.

The EAD initiates this assessment by first meeting with the student to (1) review available information concerning the
behavior and/or incidents which have caused concern, (2) provide the student with a copy of this Involuntary
Withdrawal Policy and Procedure and discuss its contents with the student, (3) provide the student an opportunity to
explain their behavior, and (4) discuss options available to the student, including counseling, voluntary withdrawal
and evaluation for involuntary withdrawal. If the student agrees to withdraw voluntarily from the University and
waives any right to any further procedures available under this policy, the student will be given a grade of W for all
courses, will be advised in writing of any conditions that must be satisfied prior to re-enrollment, and may be referred
for appropriate mental health or other health services. If the student refuses to withdraw voluntarily from the
University, and the EAD continues to have reasonable cause to believe the student meets one or more of the criteria
for involuntary withdrawal, the EAD may require the student to be evaluated by an appropriate mental health or other
healthcare professional.

Evaluation

The EAD may refer the student for a mandatory evaluation by an appropriate mental health professional or other
appropriate professional. The professional may be selected by the University, so long as there is no cost to the student
for the evaluation. A written copy of the involuntary referral shall be provided to the student.

The evaluation must be completed within five school days after the date the referral letter is provided to the student.
Prior to the evaluation, the student will be required to sign a written authorization authorizing the exchange of
relevant information among the mental health professional(s) (or other professional) and the University. Upon
completion of the evaluation, copies of the evaluation report will be provided to the EAD and the student.

The professional making the evaluation shall make an individualized and objective assessment of the student’s ability
safely to participate in Emory’s program, based on a reasonable professional judgment relying on the most current
professional knowledge and/or the best available objective evidence. This assessment shall include a determination of
the nature, duration and severity of the risk posed by the student to the health or safety of themself or others, the
probability that the potentially threatening injury will occur, and whether reasonable modifications of policies,
practices or procedures will sufficiently mitigate the risk. The professional will, with appropriate authorization, share
their recommendation with the EAD, who will take this recommendation into consideration in determining whether
the student should be involuntarily withdrawn from Emory. A copy of the professional’s recommendation will be
provided to the student, unless, in the opinion of the professional, it would be damaging to the student to do so.

If the evaluation results in a determination that the student’s continued attendance presents no significant risk to the
health or safety of the student, patients, or others, and no significant threat to property, to the lawful activities of
others, or to the educational processes and orderly operations of the University, no further action shall be taken to
withdraw the student from the University.

If the evaluation results in a determination that the continued attendance of the student presents a significant risk to
the health or safety of the student, patients, or others, such that there is a high probability of substantial harm, or a
significant threat to property, to the lawful activities of others, or to the educational processes and orderly operations
of the University, the student may be involuntarily withdrawn from the University. In such an event, the student shall
be informed in writing by the EAD of the involuntary withdrawal, of their right to an informal hearing, of their right
to appeal the decision of the hearing officer to the dean of the School of Medicine, and of any conditions necessary
for re-enrollment. In most cases, a student who is involuntarily withdrawn will be given a grade of W in all courses in
which the student is currently enrolled.
Informal Hearing

A student who has been involuntarily withdrawn may request an informal hearing before a hearing officer appointed by the EAD by submitting a written request to be heard within two business days from receipt of the notice of involuntary withdrawal. A hearing will be set as soon as possible. The student shall remain involuntarily suspended pending completion of the hearing.

The hearing shall be informal and non-adversarial. During the hearing, the student may present relevant information and may be advised by an Emory faculty or staff member or a health professional of their choice. The role of the advisor is limited to providing advice to the student.

At the conclusion of the hearing, the hearing officer shall decide whether to uphold the involuntary withdrawal or whether to re-consider, and the student shall be provided written notice of the hearing officer’s decision as soon as possible.

Appeal to the Dean

The student may appeal the hearing officer’s decision to the dean, who shall review all information presented and make a final decision as to whether to uphold the involuntary withdrawal.

Emergency Suspension

The University may take emergency action to suspend a student pending a final decision on whether the student will be involuntarily withdrawn, in situations in which (a) there is imminent danger of serious physical harm to the student or others, (b) there is imminent danger of significant property damage, (c) the student is unable or unwilling to meet with the EAD, (d) the student refuses to complete the mandatory evaluation, or (e) the EAD determines such other exceptional circumstances exist that suspension is warranted. In the event emergency action is taken to suspend the student on an interim basis, the student shall be given notice of the emergency suspension and an initial opportunity to address the circumstances on which the emergency suspension is based.

Conditions for Re-Enrollment

Because this Involuntary Withdrawal Policy applies to cases in which there is a concern about the safety of the student or others, the dean or their designee may require a student who has been involuntarily withdrawn under this policy to be re-evaluated before they are readmitted in order to assure that they present no direct threat to themself or others.

Laptop/Smartphone Requirements

All SOM students are required to own a laptop that meets or exceeds SOMITS’ minimum IT requirements (see Minimum Requirements) and a smartphone (iOS or Android) capable of using Emory’s Duo Security Two-Factor Authentication. The Emory MD curriculum incorporates the following tasks:

- Accessing and downloading course files (documents, presentations, videos, etc.)
- Uploading collaborative assignment files (documents, presentations, videos, etc.)
- Taking quizzes and exams
- Participating in remote educational activities
- Accessing resources through different browsers
• Interfacing with applications and online activities that fulfill curricular requirements (e.g., course evaluations, course grades, etc.)

Students are required to attend the computer orientation session with their laptop so that laptops can be configured, certified, and approved for use. It is the responsibility of students to ensure that their SOMIT-approved laptop is in good working order and capable of running the required software on exam days and is compliant with current SOMITS technical requirements.

Students who fail to certify their computer prior to starting medical school will not be able to continue in the curriculum. Students who extend their duration in the curriculum beyond their program’s standard curriculum time are encouraged to visit the SOMITS office to ensure their device continues to meet current IT requirements.

The school will work with students who have barriers to purchasing a laptop / smartphone to determine temporary and long-term solutions. Students with barriers will not be penalized.

**Learner Model Abnormal Finding Reporting**

**Definitions**

For the purpose of this policy and set of procedures

• A Learner Model (LM) is any person (student, house staff, faculty, volunteer, etc.) participating as a model for a physical examination skill or ultrasound skill.
• Examiner will encompass any person (student, house staff, faculty, etc.) performing a physical examination skill or ultrasound skill.
• Skill will encompass a physical examination skill or ultrasound skill
• Instructors will encompass any faculty, house staff, staff or learner instructing in a skill session
• Observers will encompass other learners observing the skills being performed by others
• Staff are SOM personnel
• Licensed healthcare provider will encompass those credentialled to assess the LM for an abnormal finding

**Purpose**

This policy serves as a SOM guideline for how to report any abnormal findings of the LM in a consistent manner.

**LMs Rights and Responsibilities**

• Participation as an LM is voluntary, and individuals can withdraw at any time.
• Instructors should remind LMs that they can decline to be examined if they are uncomfortable or no longer desire to participate.
• LMs shall always be treated with respect by the examiners, instructors, staff, and observers.
• Prior to the examination, examiners shall explain to the LM what they intend to do and why.
• Parts of the body that may be examined include the chest (excluding breasts) and abdomen, head and neck, extremities, and transabdominal pelvis. Prior to the exam, the LM will be informed about which parts of the body will be examined.
  o No genitourinary examinations allowed except in special situations with trained LMs.
  o If the LM is uncomfortable with the parts of the body being examined, they should not volunteer and have the right to stop the procedure at any time if unexpected discomfort arises.
• If an examiner does not comply with these guidelines, LMs should stop the examination and immediately notify the course instructor or staff.
• Examiners shall maintain respect of the LM’s pain limits. If the examiner is pushing too hard the LM should tell the examiner and any necessary accommodations should be made or the LM may tell the examiner to stop the examination.
• LMs should not be placed in an uncomfortable physical position for an extended period of time.
• For ultrasound examination, the LM may be asked to lie supine, prone, or lateral. Multiple examiners may scan the LM at different times. The LM will experience varying amounts of pressure. Ultrasound gel will be used.
• If a LM is not feeling well, they should not attend the session.
• If a LM has any medical conditions that might affect their ability to participate, they may decline to be examined.
• LMs should tell the course director or staff if there is any chance that they may be pregnant; in this case a licensed healthcare provider is required to give permission to participate.
• LM information is kept confidential.
• LMs will be made aware that the scanning is educational and does not substitute for a medical examination.
• At no time will a LM’s name or other identifying information be placed on ultrasound images.
• Incidental findings are handled discretely according to the process described below.
• It is important to remember that this is not a true medical examination, and while the LM will be informed of incidental findings, it is the responsibility of the LMs to consult a healthcare provider for workup and treatment.

Process for Managing Abnormal Findings

To respond in a consistent manner when examiners or instructors discover a potential abnormal finding on a LM:
• Most students will not recognize abnormal findings when they see them for the first time. Whether in the presence of the course director or faculty instructor or not, the potential abnormal finding should be confirmed by the responsible faculty or another licensed healthcare provider.
• If the abnormal finding is confirmed, that according to the supervising physician requires follow-up, this information will be forwarded to the Associate Dean for Student Affairs, Clinical Services. Following this notification, the Associate Dean for Student Affairs, Clinical Services will discuss with the LM and notify them using a templated correspondence (appendix) noting the abnormal finding, discussion, and suggested next steps. This letter will be transmitted electronically with return receipt by the Associate Dean for Student Affairs, Clinical Services. A copy of the letter will be saved by the Associate Dean for Student Affairs, Clinical Services and the Emory School of Medicine Office of Medical Education and Student Affairs.
• All unexpected abnormal findings should be mentioned privately to the LM, not in front of other individuals.
• If an examiner or instructor suspects an unexpected abnormal finding, they should stop examining that structure and they should privately inform the LM.
• If an examiner inadvertently mentions the possibility of an abnormal finding with the group, the instructor should wait until the session is over before addressing the issue unless believed to be a medical emergency.

Appendix: Correspondence Template

LM name and address

Date

Dear _______.
Thank you for attending the *(event name)* on *(date)* and serving as a simulated patient. As you are aware, *(abnormal finding)* was discovered. I understand that this information was conveyed to you verbally by the instructor and/or a *(licensed healthcare provider)*, an *(specialty)* faculty member. Although the information was conveyed to you verbally, I wanted to make sure you had a written copy of the information.

This was an educational activity, and it was not intended to be diagnostic. Thus, no physician-patient relationship has been established between you and the providers present during the training, nor by virtue of this letter. We want to encourage you to use the information above to seek care with your (specialist) care provider. Please feel free to pass along this information to your care provider.

Sincerely,
Signature
Title

**Narrative Assessments**

**Policy Statement**

The Emory University School of Medicine sets the expectations and guidelines for providing students with summative assessments by faculty (including written narratives) that describe and evaluate student performance. This policy also defines the criteria for courses in the Emory School of Medicine MD Program in which narrative, summative assessment of medical student performance is required.

**Reason for Policy**

Narrative assessment of medical student performance provides robust information that is a component of student assessment and is used to evaluate students’ progress toward graduation and residency placement. This policy ensures that EUSOM meets the Liaison Committee on Medical Education (LCME) MD program accreditation requirements expressed in Element 9.5.

**Policy Text**

All medical students receive narrative, summative assessments in courses and clerkships during which the student-instructor interaction lends itself to meaningful written statements that evaluate the student’s knowledge, skills, behaviors, and/or attitudes in comparison to the approved course/clerkship standards. The narrative assessments are made available to students via the Emory OASIS platform or through other mechanisms. In the Foundations phase of the Curriculum, narrative, summative assessment is provided in the following courses:

- Essentials of Patient Care – preceptor assessments for the Outpatient Experience component of this course.

In the Application and Translation phases of the curriculum, narrative, summative assessment is provided by all required clerkships except for the longitudinal radiology clerkship. In the Discovery phase of the curriculum, narrative, summative assessment is provided and accessible to students following “Research Day,” which marks the end of the Discovery course.

**Policy Oversight**

During regular reviews of each course in the Foundations phase, the Foundations Subcommittee of the Executive Curriculum Committee will determine the appropriateness of narrative, summative assessments in terms of LCME expectations. The Required Clerkships Subcommittee of the Executive Curriculum Committee will annually review compliance with this policy for each required clerkship in the Application and Translation phases of the curriculum and
Definitions

Narrative: a written description and evaluation of student performance.
Summative Assessment: An assessment that evaluates student performance as compared to a standard or benchmark.

Responsibilities

During the Foundations phase, each course director, in consultation with the Foundations and Student Assessment Subcommittees of the Executive Curriculum Committee, are responsible for determining if a preclinical course includes faculty-student interaction that permits narrative assessment. The director is also responsible for implementing a process of providing narrative assessment, when appropriate. During the Application and Translation phases, clerkship directors are responsible for ensuring that each student receives a narrative, summative assessment of performance. During the Discovery phase, the Discovery course Director is responsible for ensuring that each student receives a narrative, summative assessment of performance.

Personal Recordings

Students are not permitted to record (either via audio or video) any Emory School of Medicine educational event without the prior expressed authorization of the faculty member. Furthermore, audio or video recording of meetings, phone calls, conversations, patients, or of any content involving others is prohibited unless prior consent of all parties involved is obtained. Violation of this rule may be deemed a violation of the Student Conduct Code, and improper use of any curricular material, including recordings, may constitute infringement of intellectual property rights.

Preclinical Scheduled Time for Required Educational Activities

Policy Statement

The Emory University School of Medicine sets the guidelines for student schedules during the preclinical curriculum. This policy defines the number of hours that students have required activities in or out of class.

Reason for Policy

In order to provide students with enough time for self-directed learning and studying and to protect student well-being, this policy sets a maximum number of scheduled hours during the Foundations curriculum. This policy ensures that EUSOM meets the Liaison Committee on Medical Education (LCME) MD program accreditation requirements expressed in Element 8.8.

Policy Text

During the Foundations phase of the curriculum, the number of scheduled hours should generally be limited to a maximum of 32 per week. This includes all course-related activities, as well as time to complete required readings and other preparation for in-class activities but not self-directed study time. There may be limited exceptions to this guideline, but the average number of weekly scheduled hours over a month should not exceed 30. There may be no more than nine hours of scheduled time in a single day.
Policy Oversight

During regular reviews of each course in the Foundations phase, the Foundations Subcommittee of the Executive Curriculum Committee will review student schedules to estimate the average and maximum number of hours students need to complete required activities. The Foundations Subcommittee chair reports their findings on an annual basis to the Executive Curriculum Committee.

Definitions

Required activity – a scheduled session or activity, whether inside or outside of class, that all students are expected to complete. This includes work that must be completed to prepare for in-class sessions but does not include individual study time.

Responsibilities

Course directors must abide by this policy as well as policies around the blocks of time that are available to them in the schedule. The Foundations subcommittee totals the scheduled time and reports this back to the Executive Curriculum Committee. They provide feedback on course schedules to course directors.

Required Clinical Experiences

All required clinical clerkships define the types of patients and clinical conditions that medical students are required to encounter, the skills to be performed by medical students, the appropriate clinical settings for these experiences, and the expected levels of medical student responsibility. Clerkship directors will notify students of required clinical experiences (RCE) through orientation sessions, Canvas course syllabi, and check-ins throughout the clerkship. Completion of RCEs is necessary for students to satisfactorily pass required clerkships.

Research Studies Involving School of Medicine Students as Subjects

All research studies that include Emory School of Medicine medical students as subjects (i.e. any study that requires human subject protections as defined in HHS 45CFR46) must be approved by the School of Medicine. This policy includes: all studies performed by Emory University School of Medicine students on other students, studies by Emory University School of Medicine faculty members, studies performed by students or faculty members from all other LCME-accredited medical schools, or all others. Internal approval of a study does not replace the judgment of the Emory Institutional Review Board (IRB) and consent may be contingent on obtaining the appropriate IRB approval.

All requests to conduct studies using Emory University School of Medicine medical students as subjects should be directed to the Associate Dean of Medical Education, Dr. Erica Brownfield.

Separation of Roles

Faculty and house staff members’ professional or personal roles should not conflict with their roles as teachers and evaluators of students. Faculty and house staff members who have a professional, personal, or familial relationship to a student, including providing health services or psychiatric/psychological counseling, should not have any involvement in the academic assessment of that student.

All faculty and house staff members are required to recuse themselves of assessing a student with whom they have such a conflict. For any student assessment they complete, faculty and house staff must attest that no conflict exists.
Students must notify the Executive Associate Dean of Medical Education of any potential conflicts of interest to allow for changes in a resident or faculty teaching assignment. Students will be reassigned to a different faculty or house staff member for coursework and subsequent assessment. Any information provided to the Executive Associate Dean regarding potential conflicts will be treated as confidential.

**Students as Chaperones**

A chaperone’s role regarding intimate examinations (those involving breast, genitalia, or rectum), is both to protect patients from abuse, as well as to protect medical care providers from false allegations. Due to the potential liability issues, medical students cannot serve as a chaperone for intimate examinations. This does not preclude medical students from performing or for being present for such examinations as part of their educational experience.

**Students as Interpreters**

Medical interpreting is a profession that requires training, experience, skills, knowledge of medical terminology, the Standards of Practice, and the Code of Ethics, as well as language fluency and proficiency in both English and the patient’s language. The Department of Human Health Services states that “an individual that has above average familiarity with speaking or understanding a language other than English does not suffice to make that individual a qualified interpreter for an individual with limited English proficiency.”

A qualified interpreter is required per federal standards and compliance with hospital policies. Students should not interpret for another person (third party) unless they meet the required interpreter qualifications. The same regulations apply to those that are hearing impaired. The only exception is if the medical situation is life threatening and no professional interpreters are available.

Furthermore, when a patient, family member or companion is deaf, non-English speaking or is Limited English Proficient (LEP), in order for bilingual/multilingual providers to communicate directly with said patient, family member or companion, in a language other than English, the provider must be assessed to determine their ability to communicate effectively in the target language. Students who wish to be assessed should contact Emily Barnes in the School of Medicine Student Affairs Office to understand the responsibility and procedures related to doing this. A formal assessment can be arranged through a third-party vendor at no cost. Students achieving a final score of 3+ may communicate in the language in which they were assessed.

**Student Employment During the MD Program**

The schedule of studies and clinical activities of the MD 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. While employment is discouraged by the medical school, any student contemplating employment for any reason should discuss the matter with the Executive Associate Dean for Medical Education and Student Affairs before undertaking employment. Any student who is considering (or engages in) employment must be in good academic standing. If at any time there is evidence that the student’s academic performance is placing the student at risk for failing, the student’s employment status will be reviewed with the student. This could result in being asked to terminate employment.

**Student Mistreatment Policy, Reporting, and Investigation**

The School of Medicine strives for an environment that is respectful of all community members and does not tolerate mistreatment of students. Per the University Equal Opportunity and Discriminatory Harassment Policy (Policy 1.3), Emory encourages anyone who has knowledge of discrimination on campus to report alleged violations of Policy 1.3
to the Emory University Office of Institutional Equity and Compliance. Emory faculty, administrators and supervisors are required to immediately report any complaints they receive or incidents of discrimination or discriminatory harassment they witness, to their immediate report or to the Emory University Office of Institutional Equity and Compliance.

Per the Emory University Sex and Gender-Based Harassment and Discrimination Policy (Policy 8.2) every university employee who is informed about an allegation of sexual misconduct involving any student is required to notify the Department of Title IX. In conjunction with these two University policies, the School of Medicine Student Mistreatment Policy addresses additional types of behavior that will not be tolerated.

Definition of Mistreatment

Mistreatment, either intentional or unintentional, occurs when behavior shows disrespect for the dignity of others and unreasonably interferes with the learning process. Mistreatment includes, but is not limited to, students:

- Being treated in a manner that a reasonable person would find belittling, humiliating, insulting or disrespectful under the circumstances
- Being sexually harassed
- Being denied opportunities for training or rewards, or receiving lower evaluations or grades based on any prohibited consideration, including race, color, religion, ethnic or national origin, gender, genetic information, age, disability, sexual orientation, gender identity, gender expression, veteran's status, or any factor that is a prohibited consideration under applicable law (referred to as "prohibited considerations")
- Being maliciously and intentionally left out of communications to the detriment of a student
- Being subjected (directly or indirectly) to offensive sexist, racist, or ethnically offensive remarks, advances, or names
- Being required to perform inappropriate personal services (i.e., babysitting, shopping)
- Being threatened with physical harm (e.g., hit, slapped, kicked)

Scope of School of Medicine Student

Any student enrolled in active academic programs for Emory School of Medicine including MD, PA, DPT, GC, MI, and AA.

Student Mistreatment Group (SMG)

The School of Medicine SMG is convened to review the aggregate, deidentified data on reports of student mistreatment that occur in the learning environment and recommend actions to improve the student clinical learning experience. The SMG will include faculty and staff from Emory School of Medicine and representatives of all programs.

Reporting Student Mistreatment

School of Medicine students who experience mistreatment themselves or observe other students experiencing possible mistreatment are expected and encouraged to follow the following reporting process.

The initial step for students to discuss the incident of mistreatment is to either confidentially report via the Student Mistreatment Form (preferred) or talk to their program leader, the deans, academic advisor, career counselor, or Small Group Advisor (SGA). All reports of student mistreatment will be routed first to Dr. Christen Hairston, Associate Dean for Student Success, who will follow the algorithm below.
Prohibition of Retaliation

The School of Medicine prohibits retaliation against a student who, in good faith, complains about or participates in an investigation of student mistreatment. Any student who feels they have been retaliated against or threatened with retaliation should report the allegation immediately to the Associate Dean of Student Success. The appropriate department related to the incident will investigate the alleged retaliation and make a report to the Executive Associate Dean for Medical Education and Student Affairs, when possible, within 30 days of the filing of the complaint. While mistreatment issues may be written in student evaluations of residents or faculty and evaluations of courses or clerkships, students should NOT rely on those mechanisms as the primary or sole means to report mistreatment. The reporting mechanisms described above have been established to produce a timely and effective resolution to any mistreatment concerns.

If you have questions about student mistreatment, please reach out to Dr. Stacy Higgins (MD clinical), Dr. Christen Hairston (Student Success–All programs), or Dr. Douglas Ander (Health Science Programs).

Summative Assessments

Final course and clerkship grades must be available to students within 4 weeks (and up to 6 weeks at the latest) after the course or clerkship end date.

Use of SOM Building

All student activities in the School of Medicine that require the reservation of space must be submitted via 25Live using the following steps:

1. Use 25Live with your University User ID and Password.
2. Login with your Emory NetID and password and request the space. If you do not have access to 25Live, notify
Student Affairs somregi@emory.edu to request access. If time is a concern, let Student Affairs know the request has been placed in the system.

3. If your event requires staging (tables and chairs) requests, custodial services or if changes must be made to the space requested, you will need to contact Campus services. (For changes to the space you can submit a diagram of the set-up for your event to the Staging Department in Campus Services. Campus Services will need it in order to set up and return the space to its original order.)

   Campus Services, Telephone: 404.727.7463, cscsc@emory.edu

4. All users of space in the School of Medicine must abide by the Use of School of Medicine Buildings policy. Failure to do so would prevent confirmed reservations in the future.

   Students must use the on-line request procedures.

**Part V: Costs and Financial Aid**

**Section 1: Costs of the MD Program**

Medical school tuition covers a normal program of study for the Doctor of Medicine degree. In addition, students must pay the following mandatory fees each semester: Athletic Fee, Activity Fee, Immunization/Disability Fee, Health & Wellness Fee, Clinical Administrative Fee, and Technology Fee. A one-time Transcript Fee is assessed to students for their first semester of a degree seeking program at Emory.

A portion of the Student Activities Fee is returned to the individual classes/organizations to cover funding of appropriate class activities. Tuition payments are divided, one-half to be paid at fall registration and one-half to be paid at the beginning of spring semester. In the case that certain federal funds are not appropriated in future years for the support of education in the School of Medicine, subsequent increases in tuition rates may be necessary. Tuition rates are subject to change and will affect all students unless otherwise specified.

The 2023-2024 tuition rate for the Doctor of Medicine program is $27,000 per semester. The Doctor of Medicine program has two semesters of payment (Fall and Spring) per year.

**2023-2024 Fees for the Doctor of Medicine Program**

- Athletic Fees Per Semester $158
- Activity Fees Per Semester $100
- Transcript Fee (Entering students only) one-time fee of $70
- Health and Wellness Fee Per Semester $103
- Clinical Administrative Fee Per Semester $75
- Student Immunization and Disability Fee Per Semester $125
- Technology Fee Per Semester $60

Each year the Financial Aid Office must estimate all normal expenses incurred by students in each academic program. This estimate is called the Cost of Attendance. In addition to tuition and fees, this estimate includes expenses for books, supplies, transportation, health insurance, food, rent, utilities, etc.

The estimated Cost of Attendance for the 2023-2024 academic year (Fall 2023/Spring 2024) is approximately $98,130 This covers a 12-month period.

**How much should I expect to borrow for the entire MD program?**
The average indebtedness for the MD students who graduated from the program in 2023 was approximately $177,000. This includes only students who borrowed during medical school and loans for students who pursued a dual degree.

**Are there programs that can reduce my indebtedness?**

Yes, there are a number of employment arrangements in which students can reduce their indebtedness after they complete their degree. Some of these include the National Institutes of Health, the U.S. military and state health agencies. Also, some healthcare facilities will offer loan repayment incentives to potential employees. These arrangements often require the employee to commit to employment for a specific number of years. Also, students who work for a non-profit healthcare facility may qualify to have the balance of their loans forgiven after 10 years of repayment through the [Public Service Loan Forgiveness Program](#).

Emory medical students and recent MD graduates who choose a primary care career in pediatrics, medicine, family medicine, or geriatrics and commit to practicing in Georgia may be eligible for The Kathleen and Dan Amos Medical Student Loan Forgiveness Program: Improving Access to Primary Care in Georgia. This program offers annual awards of $40,000 – up to $160,000 maximum.

[View more information, including eligibility requirements and FAQs.](#)

**Section 2: Applying for Financial Aid**

**Incoming MD students** are encouraged to apply for financial aid as soon as possible. You do **not** have to be accepted to begin the financial aid process.

Students who wish to apply for need-based scholarships must complete both the Free Application for Federal Student Aid (FAFSA) and the CSS PROFILE. Parental income and assets must be included on the PROFILE regardless of the student’s age or marital status. The 2023-2024 FAFSA and PROFILE are based on 2021 income.

Students who wish to apply for federal loans only can complete just the FAFSA. Only the student (and spouse) information is required on the FAFSA.

View [detailed instructions for applying for financial aid for the MD program](#)

The [FAFSA](#) is available online. The school code for Emory is **001564**. The [PROFILE site](#) school code is **0140**.

The deadline to submit your financial aid documents is **February 16, 2023, for incoming students**. This is a target date and not a cut-off date, but students who complete their financial aid file later may miss out on some institutional funds. **The deadline for returning students is April 1, 2023.**

Once the university Office of Financial Aid receives your FAFSA information, they will begin to send you e-mails to let you know if other documents are required. Your financial aid file will be considered incomplete until all documents requested have been received.

The Office of Financial Aid will review your application and begin sending award letters to incoming students in April. The award letters will be electronic. **Returning students will begin receiving their award letters in June.**

By the time you are awarded, you will have access to Emory’s student information system OPUS. You will be able to review and accept your awards on-line, and you will be given instructions to complete promissory notes for any.
student loans that you accept.

Section 3: Types of Financial Aid

Veterans Benefits

The University Office of the Registrar is responsible for certifying the eligibility and enrollment for students receiving veteran’s educational benefits.

Yellow Ribbon Program for Veterans

The Yellow Ribbon Program is a provision of the post-9/11 Veterans Educational Assistance Act of 2008. This program provides additional financial support for veterans who have 100% eligibility for post-9/11 benefits. The dependents of such veterans can be eligible for Yellow Ribbon also.

Currently, one student in the MD program is awarded this funding annually in the amount of $7,000. The VA will match this amount in addition to providing any other benefits the veteran (or their dependent) is eligible to receive.

All veterans’ benefits are administered through the University’s Office of the Registrar. However, each school in the University has a specific contact for Yellow Ribbon. In the School of Medicine, the contact is the Assistant Director of Financial Aid and Scholarships. Interested students should contact the director on July 31, 2023, for the 2023-2024 Yellow Ribbon Awards. Keep in mind that the funds are offered on a first-come, first-served basis for eligible applicants.

For detailed information about Veterans Benefits, including the Yellow Ribbon Program at Emory, please review the information on the Office of the Registrar’s website.

Emory Nelnet Payment Plan

Emory has partnered with Nelnet Business Solutions to develop a monthly payment plan for students who prefer to spread their payments throughout the term. The Nelnet Payment Plan is available to qualified students who wish to divide tuition fees into scheduled payments. A $25 service fee is charged to participate in the Nelnet Payment Plan.

Instructions are given for deduction of loans and for university-administered scholarships in listing the amount due, which is to be paid in two, three or four installments each semester according to the Emory Nelnet Payment Plan Schedule.

Contact Student Financial Services at (404)727-6095 or their website to sign up for a payment plan.

Scholarships for Medical Students

Over 90 named scholarships are available and awarded by the Office of Financial Aid based on eligibility as determined by the information students submit on the FAFSA and the PROFILE. In addition to need, there are scholarships based on merit and community service. No supplemental applications are required. For a list of scholarships, please refer to the financial aid website.

Loan Programs

Direct Federal Unsubsidized Stafford Loan
Not based on financial need; up to $47,167 per academic year for M1-M3; up to $40,500 for M4; 6.54% interest rate for loans disbursed before July 1, 2023; 7.05% interest rate for loans disbursed on or after July 1, 2023; interest is assessed as soon as student receives full disbursement of loan, but student can allow interest to accumulate, and accumulated interest is added to loan amount when student begins repayment; up to 10 years to repay (may be extended up to 25 years depending on total indebtedness); no cosigner required.

**Direct Federal GradPLUS**

Not based on financial need; can borrow up to the Cost of Attendance (see above) minus any other aid student is receiving; 7.54% interest rate for loans disbursed before July 1, 2023; 8.05% interest rate for loans disbursed on or after July 1, 2023; repayment begins 60 days after student receives full disbursement of loan but student can request a deferment until 6 months after leaving school; interest accumulates if student defers payments while enrolled; up to 10 years to repay (may be extended up to 25 years depending on total indebtedness); student must pass a credit check or have a credit-worthy cosigner.

**Institutional Loans**

Based on financial need; $5,000 per academic year; 4.22% interest rate; repayment begins 6-months after leaving school; up to 10 years to repay. These include Emory Clinic Medical Loan, Medical School Dean’s Loan, Martha W. Andrews Medical Loan, AMA-ERF Medical Loan, Georgia Pediatric Society Medical Loan, Richardson Medical Loan, and Ben Smithloff Medical Loan.

**Private Loans**

Students are encouraged to take advantage of all institutional and federal aid before turning to private loans, which may have higher interest rates and/or lack some of the other benefits of federal aid. However, students who have reached federal loan limits or fail to meet certain academic requirements may need to look to private loans for assistance. These loans are available from some banks that participated in federal loans previously. Borrowers must be credit-worthy or have a credit-worthy cosigner. Contact the Office of Financial Aid or refer to its website for more information.

**Emergency Loans**

Students in need of emergency loans should contact the Assistant Director of Financial Aid and Scholarships. Short-term, interest-free loans up to $1500 are available to students for their living expenses. These emergency loans are available within 90 days of the next financial aid disbursement date. Any amount due on emergency loans will be deducted from the student’s next financial aid disbursement on the disbursement date. If the disbursement does not cover the emergency loan amount, the student must cover the remaining balance out of pocket. Finance charges will accrue monthly on any remaining balance.

**Section 4: Maintaining Academic Eligibility for Financial Aid**

An underlying requirement for all federal, state, and institutional financial aid is the need for students to meet minimum academic standards. Students who do not meet these standards may lose their eligibility for financial aid (including loans) even if they meet all other requirements of the aid programs. Some students could lose their eligibility for financial aid even if their academic program allows them to continue with their studies. These minimum academic standards are part of the Financial Aid Satisfactory Academic Progress Policy. Please note that the Financial Aid Satisfactory Academic Progress Policy is distinct from the Satisfactory Academic Progress that governs progress and promotions.
Financial Aid Satisfactory Academic Progress Policy – MD Program

Federal regulations require that students receiving financial assistance maintain satisfactory academic progress. The Office of Financial Aid is required to monitor a student aid recipient’s academic progress. Aid recipients must meet certain quantitative and qualitative measures and complete their programs within a maximum time frame. All students who receive financial aid, whether from federal, state or Emory-funded sources, must be enrolled degree candidates in good standing to retain financial aid awards.

**Academic records will be evaluated each semester as follows:**

Time to degree completion (maximum attempted units), and percentage of courses passed (completion rate) will be evaluated at the conclusion of each year. Medical students must maintain a completion rate of 66.6% to meet satisfactory academic progress standards.

Failure to maintain the completion rate for two successive years will result in disqualification from receiving financial aid.

All students are expected to complete their degree programs within a maximum time frame. The maximum time frame for graduate students is 150% of the hours required to complete their degree program. Time to degree completion is calculated for all credit hours for which the student enrolls or receives credit at Emory and any of the following grades are assigned: Satisfactory and Unsatisfactory. A course assigned an Incomplete, In Progress or Withdrawal is also counted toward attempted credits. Audited classes are not considered attempted credits. Medical students must complete the degree within 269 attempted units based on a 179 unit-degree requirement.

Students who exceed the maximum timeframe are disqualified from receiving financial aid.

Please reach out the Financial Aid office for additional advice if you are disqualified, as you may be able to appeal. However, this is evaluated on a case-by-case basis.

**Monitoring Eligibility: Disqualification, Probation, Suspension and Conditions of Reinstatement**

Students whose academic records fall below the minimum standards stated above will be disqualified from receiving future financial aid payments. Disqualified students may be approved to receive financial aid after successfully appealing their case. Students who successfully appeal may have their financial aid reinstated but will be reevaluated on a semester basis.

Students who fail to meet the terms of their appeal will be ineligible for future financial aid payments. Students who become ineligible for financial aid can re-establish their eligibility by attending classes at their own expense or with the help of private resources from outside the University. Once minimum standards are met, financial aid funding may be reinstated.

An appeal for extenuating circumstances should be submitted by the first day of class for the semester one is appealing to ensure adequate time to prepare for any impact to the student account. Failure to submit a complete appeal by this date may result in the loss of your financial aid for that semester.

A Satisfactory Academic Progress Appeal Form should be submitted with supporting documentation of any mitigating circumstances that negatively impacted academic progression. The financial aid advisor should be contacted for any questions.
Generally, the Office of Financial Aid will only approve one appeal per academic degree. This policy may be waived on a case-by-case basis where extenuating circumstances can be documented.

**Section 5: Financial Obligations for Graduation**

It is a requirement for graduation that all financial obligations to the University shall have been satisfied. Students with an unpaid balance on their student accounts may have a hold placed on their diploma and transcripts until the balance is paid in full.

**Section 6: Tuition Refunds**

Tuition refunds are partial. A student may cancel registration during the first week of the semester in which case only the deposit is forfeited (or twenty-five dollars if no deposit was required). After the first week of class, a student may voluntarily withdraw, and the tuition forfeiture increases progressively. Please refer to the Withdrawal Deadlines Schedule posted on the Student Financial Services webpage for the most current refund policy for complete withdrawals.

No refund is given after the fifth week of any semester. No refund is given if students drop only part of their coursework after the last day specified for approved schedule changes. No refund is given to a student who is dismissed.

Refunds for first-time Emory University students who are federal aid recipients (Title IV) will be prorated in accordance with the Higher Education Amendments of 1992 and any related regulations.

Readmission of students following withdrawal for medical reasons requires medical clearance by designated University health officials.

A student who withdraws may not continue to live in university housing or participate in student activities.

**Section 7: Financial Aid Resources and Helpful Links**

Emory has created a 4-year program to provide students with up-to-date knowledge regarding debt management and personal finances during school and after. Workshops and classes on financial management and individual coaching sessions are provided during your medical school career. This is a component of the EUSOM “Debt Management Initiative”.

Other helpful resources include:

- [Emory University Office of Financial Aid](#) - Detailed instructions and information regarding the financial aid application process
- [Emory University Student Accounts and Billing Office](#) – This is the student accounts office. They send bills, accept payment for tuition and fees, and process refunds.
- [Free Application for Federal Student Aid (FAFSA)](#) - Complete FAFSA application and apply for Grad PLUS loan.
- [CSS PROFILE](#) - Institutional need-based aid application.
- [Department of Education](#) – Official information on federal financial aid programs, including eligibility requirements and options for loan repayment.
- [Association of American Medical Colleges (AAMC)](#) – A wealth of information regarding financing your
medical education as well as tools for financial literacy.

Part VI: Student Wellness, Health, and Other Resources

Section 1: Student Health

The health and well-being of Emory students is a top priority and essential to student success. While we encourage self-care, health promotion and prevention, medical students are not exempt from having physical and/or mental illness.

All students are expected to take responsibility for maintaining personal wellness by utilizing the multiple resources at Emory outlined below and notifying the dean’s office when personal health becomes a concern.

Emory University Student Health Services and Counseling and Psychological Services (CAPS) supports and empowers each student to embrace and prioritize their physical, mental, and social health, and overall well-being to complement their academic mission and achieve lifelong success. Through evidence-based, exemplary care, we are committed to providing innovative, compassionate services to our diverse student body. For our community, we serve as public health stewards to ensure appropriate support and resources during times of need. Emory University Student Health Services is very proud to be fully accredited by the Accreditation Association for Ambulatory Healthcare, Inc. (AAAHC). The Emory Counseling and Psychological Services’ (CAPS) Psychologist Training Program is fully accredited by the American Psychological Association (APA).

Student Health Services (SHS)

Emory University Student Health Services (EUSHS) is located in the 1525 Clifton Road Building on the Emory Campus and provides comprehensive outpatient medical care for enrolled students. Services available are outpatient primary medical care, physical examinations, confidential HIV testing, STI testing, contraception, IUD insertion and colposcopy, psychiatry, PrEP, transgender care, preventive medicine, sports medicine, allergy injections, immunizations, PPD tuberculin skin tests, referrals to specialists, health education, international travel information and immunizations, nutrition counseling, and alcohol, tobacco, and substance abuse counseling.

An after-hours medical call center is available for telephone consultation with provider backup when the office is closed and can be contacted by calling 404-727-7551, option 0.

Professional fees for primary care visits to EUSHS during regular hours are mostly covered by Emory tuition. Other services, such as laboratory tests, x-rays, immunizations, and allergy injections are not covered by tuition and must be paid for by the student or their insurance. Charges incurred at EUSHS are covered 100% by the Aetna Student Health Insurance Policy. EUSHS is a member of over 43 national PPO networks, including most major insurance carriers. EUSHS will provide the necessary paperwork to submit for reimbursement. Most other insurance carriers will be billed directly. Students will be responsible for any outstanding charges that are not covered by insurance. Payment options are available by calling the front office at 404-727-7551 and discussing with the billing office.

The EUSHS “Patient Portal” is a 24-hour Internet communication tool for Emory students. By using this system, Emory students are able to communicate online with EUSHS in a private, confidential, and secure manner that meets federal HIPAA/FERPA privacy standards. Your Patient Portal can be used to schedule appointments, request prescription refills, view recent billing statements and request medical records releases.

Appointments
EUSHS operates on an APPOINTMENT ONLY system, including same day/urgent care appointments. Appointments are scheduled by calling (404) 727-7551 (press 1) during office hours, or you can schedule your own appointment through the on-line appointment system (Student Patient Portal). You will be scheduled as follows:

- For routine care, appointments are scheduled up to two weeks in advance.
- For urgent conditions, an appointment or urgent consultation can be arranged for the same day.

For most acute, but not urgent needs, you may get an appointment in 24-48 hours. The only patient visits that will be handled on a work-in basis will be urgent care. EUSHS will continue to provide, via our HIPAA-compliant Zoom telehealth platform, options for psychiatry and primary care for those students in Georgia. In addition, TimelyCare which is a third-party telehealth company is also available to supplement access to care, especially for those who are not currently in Georgia or during after-hours and weekends.

If you cannot keep your appointment, please call, and cancel at least two (2) hours before the scheduled appointment time or 24 hours in advance before specialty clinics. Charges do apply for not showing up (No Show) for a scheduled appointment.

- **Emory University Student Health Services**: 404-727-7551 Sharon Rabinovitz, MD, Executive Director
- **Student Health Immunization Nurse**: Send a message on the patient portal to “Immunization Compliance” or email to immunizations-shs@emory.edu.

**Student Counseling and Psychological Services (CAPS)**

The Emory University Student Counseling & Psychological Services (CAPS) is located in the 1462 Clifton Road Building, Suite 235. CAPS provides free, confidential individual, group, and couples counseling for enrolled undergraduate, graduate, and professional students at Emory University. CAPS staff also provides consultations to students, faculty, or staff who are concerned about an Emory student. In addition, CAPS provides outreach and educational workshops on a variety of topics. Telehealth mental health visits are available for those living in Georgia as an option for care.

Services are provided by competent, caring psychologists, social workers, and psychology and social work trainees. Services at CAPS are covered by the Health and Wellness Fee. CAPS also provides referrals to other agencies on campus, low-cost services in the community, or private practitioners in the community when necessary and/or requested.

An Emory student interested in arranging an appointment can call (404) 727-7450 or come to CAPS between 8:30 am and 5:00 pm, Monday through Friday. Same day crisis triage appointments are available between 8:30 am and 3:30 pm. Psychiatric services are available at Student Health Services at 1525 Clifton Road, phone (404) 727-7551.

Telehealth mental health visits through CAPS are available for those living in Georgia as an option for care. Emory University has also contracted with a 3rd party vendor, TimelyCare, to provide 24/7 mental health support. This support includes scheduled counseling visits (12/year) and 24/7 access to emotional support with their TalkNow program. TalkNow is also available to international students. CAPS also offers consultation, support/discussion groups (e.g., international support group, Black graduate student support), and various types of helpful workshops (e.g., stress & mindfulness programming) via a HIPAA-compliant Zoom platform that are available to all students, regardless of where they are located.

Dr. Shujing Zhang is an Emory Counseling and Psychological Services (CAPS) psychologist embedded in the School
of Medicine. Dr. Zhang provides mental health services and support to students in individual and group spaces. Dr. Zhang is a licensed psychologist with rich experience offering counseling services to medical students, medicine residents, allied health students, and medical providers with diverse backgrounds.

Learn more information about CAPS services.

Other after hours’ resources include:

- TimelyCare’s TalkNow services: http://timelycare.com/emory
- Crisis Text Line – free, 24/7, confidential text message service for those in crisis – text HOME to 741741 or text STEVE to 741741 (to reach a person of color) crisistextline.org
- National Suicide Prevention Lifeline: 9-8-8 (formerly 1-800-273-TALK [8255])
- Transgender Crisis Hotline: (877) 656-8860
- LGBTQ+ Hotline: (866) 488-7386
- Graduate Student Helpline: (800) 472-3457
- Veterans Helpline: (800) 838-2838
- SAMHSA Disaster Distress Helpline: (800) 985-5990
- Georgia Crisis & Access Line (GCAL) at 1-800-715-4225, available 24/7

In case of an emergency the Police should be called by dialing 911.

The Office of Respect

The Office of Respect, located at 630 Means Drive in the Alumni Memorial University Center (AMUC) suite 110, provides confidential support for Emory students who have or are experiencing interpersonal harm (including, but not limited to, sexual assault, dating/relationship violence, sexual harassment, and stalking) as well as their allies. The Office of Respect provides 24/7 crisis response, advocacy (accommodations assistance, accompaniment to medical assistance, police, Title IX, etc.), and confidential counseling (individual and group). The Office of Respect partners with campus and community resources to provide violence prevention initiatives/ intervention education and aides in campus policy development that supports survivors and dismantles oppressive systems.

Staff are available as resources for information and support for students to be empowered to make informed choices about available options as they begin their healing processes. Respect staff do not tell students what they should do or must do, but rather are present to help ensure that students understand what they can do, prioritizing safety concerns. Staff support each student through an individualized services approach and healing path that fits best for them at that time. Visit respect.emory.edu for additional information.

The survivor lounge located at 630 Means Drive AMUC Suite 110 is available with resources M-F 9-5pm and after hours as needed.

24/7 Crisis support is available through the Respect Line at 470-270-5360

To make a consultation or counseling appointment with a counselor/advocate, call 470-270-5360 or email respect@emory.edu

Section 2: Student Insurance

Mandatory Health Insurance
Student Health insurance coverage for sickness, accidents and hospitalization is required of all Emory students. See Emory Mandatory Student Insurance Policy 8.7. All new and continuing degree-seeking and international Emory University students are required to have health insurance. Coverage must be continuous from the date of matriculation until the date of graduation and must meet University minimum coverage requirements. This is the website for insurance.

The Emory University Student Health Insurance Plan (EUSHIP) provides care for enrolled Emory students. Term of coverage is August 1 to July 31. View an overview of the Emory University Student Health Insurance Plan.

All students are automatically enrolled and charged for the Emory University Student Health Insurance Plan. The charge will appear on students’ fall and spring billing statements. For each continuing year, coverage will be 8/1 to 7/31.

As a result of national healthcare reform, students may be eligible to remain on a parent’s insurance plan until age 26. Contact your insurance carrier if you have questions about current federal or state law. Students who have health insurance coverage through another carrier must complete an online waiver by August 1 in OPUS confirming they have health insurance coverage that is comparable and meets Emory University waiver criteria. The Health Insurance Waiver site opens every spring (April or May) prior to matriculation. After the online waiver has been completed and approved through the online audit process, the charge for the Emory University Student Health Insurance Plan will reverse on the student’s university account. Beginning with students’ second year, the waiver process must be completed annually for EACH year they are enrolled at Emory.

Incoming MD students (including MD/PhD) will also be automatically enrolled in supplemental “pre-term” coverage for July 15-31 which can also be waived.

To reiterate, incoming students who have health insurance with another carrier that meets University minimum coverage requirements will need to complete TWO waivers in OPUS (one for the pre-term coverage and one for the annual 2023-2024 coverage).

Maintaining health insurance coverage is a requirement for continued enrollment. Students are responsible for informing themselves of the current policy.

View more information regarding the mandatory health insurance waiver process.

Disability Insurance

All students enrolled full-time in the Emory University School of Medicine are provided with group long-term disability insurance coverage. For the 2023-2024 academic year this coverage is provided by The Guardian Insurance Co., Inc. A summary of the plan and an electronic copy of the benefit booklet is distributed to students annually. Additional information concerning the plan is available by calling the plan administrator, Ms. Susan Gelber of InsMed Insurance Agency, Inc., 1-800-214-7039. Seniors will be given 30 days after graduation to extend the policy if desired. Ms. Gelber is also available by phone to discuss the options available to graduating seniors.

Liability Insurance

Students are covered by professional medical liability insurance any time they are enrolled in a clinical course for credit, observing or assisting in the provision of care under the supervision of Emory faculty, or under the supervision of faculty at other institutions as part of their Emory educational program.
This would include:

- activities that are an official component of the curriculum, including required and elective courses
- clinical activities that students may participate in, at the invitation of faculty, but which are not required as part of that faculty member’s SOM clinical duties
- volunteer clinical activities supervised by Emory faculty

At all times, students must be under supervision of faculty in performing clinical service, and the performance of such services must be within the scope of the supervisor’s training and certification.

Students who provide medical services outside the scope of the School of Medicine curriculum or with non-Emory faculty physicians are NOT covered by university liability insurance. Students are advised not to engage in such activities unless other liability coverage is provided for them.

**Section 3: Wellness and Well-Being**

Emory University School of Medicine is committed to the wellness and well-being of learners, faculty, and staff from diverse backgrounds. This is facilitated through multiple domains which is longitudinal and begins at the start of medical school and extends to graduation. These faculty and student-driven initiatives are in alignment with the EUSOM’s goal on wellness which is to “facilitate system-wide cultural changes to maximize the success and well-being of our patients, learners, and teachers”.

While not an exhaustive list, EUSOM supports student wellness including mental and physical health, and financial, environmental, and social well-being. Well-being resources include:

- **Center for Holistic Student Success**: EUSOM student success center focused on mind, body, and spirit of students
- **Relationships and Community**: Emory organizes society social events, and other offerings that help promote a healthy learning environment and a sense of belonging within the community for students.
- **Purpose**: EUSOM helps students develop their professional identity and find meaning within their medical school experience. EUSOM embraces the value of diversity and personal growth and encourages students to pursue their passions (via Discovery, elective and other opportunities).
- **Mental and physical health**: Emory provides counseling and psychological (CAPS) and student health services (SHS) for all medical students. EUSOM encourages the practice of meditation, supports the enhancement of the physical environment (such as the Healthy Emory Sustainable initiatives) and strives to ensure students build their resiliency. EUSOM provides support systems and encourages healthy habits such as allowing students time to go to their doctor’s appointments. In addition, Emory is a Tobacco Free Campus. EUSOM provides suggestions to enhance how students organize and manage their lifestyle which can be found in the manual “Academic Success in Emory Medical School”.
- **Security**: EUSOM promotes student safety through policies and procedures regarding student mistreatment, harassment, and equal opportunity, and by ensuring a safe environment with the help of Emory’s Public Safety Departments. EUSOM helps promote financial security by organizing workshops on debt management and finances throughout the curriculum.
- **Wellness Half-Days**: During the clerkships, students are required to take half-days off with “no questions asked” to engage in any preventative wellness activity. The number of wellness half-days depends on the length of the clerkship.

Other resources include your small group advisors, deans and access to the SOM Wellness and Well-being Committee through your student representative.
Section 4: Infection Control Protocols

Needle Sticks and Other Blood/Body Fluid Exposures

1. Learn and always observe Standard Precautions (Universal Precautions).
2. If you have an exposure to blood or other body fluids (e.g., needle stick, cut), immediately clean the wound with soap and water.
3. Exposed oral and nasal mucosa should be decontaminated by vigorously flushing with water. Exposed eyes should be irrigated with clean water or sterile saline. Eyewash facilities can be accessed quickly in the emergency department for each hospital.
4. Follow the protocol of the hospital in which the incident occurred to the fullest including all follow-up (through the hospital’s Employee Health Service). It is especially important that you report your exposure to the hospital’s Employee Health Service as soon as possible so that a timely evaluation can be performed. Additionally, your exposure may guide future preventive efforts (e.g., education, training, selection of devices). If prophylactic medications are indicated, it is recommended they be initiated as soon as possible after the exposure, ideally within two hours.
5. If you are uncertain of the procedures for reporting and obtaining care at the facility where your exposure occurred, call the Woodruff Health Sciences Center (WHSC) Needle stick Hotline for assistance at 404-727-4736.
6. Acute serology should be drawn to establish one’s baseline antibody titers to hepatitis B virus (if you have not previously been determined to be HBsAb positive [immune to Hepatitis B]) and, if indicated, to HIV and/or Hepatitis C Virus [HCV] (if the source patient is HIV-positive or HCV-positive).
7. Depending on the results of one’s serology and the baseline serology of the patient (from which the incident occurred), you may need follow-up serologies as per the hospital protocol where the injury occurred.
8. If the source patient is HIV-infected, the administration of post-exposure prophylaxis (PEP or “prophylactic” antiretroviral medications) to decrease the risk of patient-to-healthcare worker transmission should be strongly considered. Medications may be initiated pending results of HIV serology on the source patient. If used, these medications should be taken as soon as possible after the needle stick injury. Each hospital has a protocol and will counsel you and give advice as needed. PEP regimens are complicated; therefore, be sure that the individual who manages your exposure consults with the Hospital Epidemiologist (see list below).
9. Again, call the WHSC Needle Stick Hotline 404-727-4736 if you have any questions about management of the needle stick or other occupational exposure.
10. If you are exposed to blood or other body fluids at another facility, follow their guidelines and follow-up instructions. If you are unsure of the reporting procedures or have difficulty obtaining immediate care, call the WHSC Needle Stick Hotline for assistance at 404-727-4736.

The following list of specific areas and/or individuals should be contacted at the facility in which the exposure occurs:

Contacts for Infection Control Protocol

Grady Memorial Hospital and Affiliated Sites

- Healthcare worker goes directly to the Employee Health and Wellness (EHW) Center (located on the ground floor). An EHW nurse will facilitate post-exposure care in collaboration with an EHW doctor. EHW staff will arrange for source patient testing.
- EHW staff may call the ID attending on call for needle sticks/other body fluid exposures for consultation as needed.
After hours and on weekends:

Healthcare worker should NOT go to the emergency room unless they need an emergency eye wash. Healthcare worker calls STIX Hotline (404-616-STIX) and follow directions:

- Press 4: to be connected directly to the cell phone of the Health System Administrator HSA (who is physically present in the hospital). This cell number is: 404-319-7367
- Press 5: to leave a voicemail message for the Health System Administrator. This message will be delivered immediately to their cell phone, and they will return the call promptly.

HCW may also call the WHSC Needle Stick Hotline and the Grady ID attending on-call for blood and/or body fluids (BBF) exposures will be paged. The attending will inform the HCW of reporting procedures and assist them. HSA will personally arrange for source patient testing. Rapid HIV test results should be back within the 4-hour time frame for starting ART PEP.

If source patient is known to be HIV positive or the rapid test returns positive, the HSA will escort the HCW to the Emergency Department where they will receive care from an ED attending with consultation from the ID attending on call for BBF exposures. The HSA will contact the ID attending on call for BBF exposures. The ID attending will discuss the exposure with the ED attending (and the HCW) and make recommendations for ART PEP. The first dose of PEP will be given in the ED. Additional doses needed to last until the next business day will also be provided directly to the HCW.

If the source patient tests HIV negative, the HCW will be instructed to report to EHS on the next business day to get final lab results on the source patient (hep C, hep B sAg) and determine if additional follow-up is needed.

Other contacts at Grady:

- Employee Health Nurse on call (from home): 404-809-7470
- Susan Ray, MD cell: 404-536-8233 or PIC 17255

**VA Medical Center**

- Report incident directly to VA Occupational Health Injury Management
  - Location: 1B 170
  - Email: VHAATGOccupationalHealth1@va.gov
  - Phone number: extensions: 20-5400 (x5400) and 20-1521 (x1521) (main number is 404-321-6111)

After hours and on weekends:

- Contact the nurse supervisor on call (physically present in the hospital): Call hospital operator and ask for the “AOD” on call.
- The HCW is seen in Emergency Room for Treatment with follow-up in VA Occupational Health the next business day. This is important for OH to forward BBPE information to Emory for further follow-up

Other contacts at VAMC:

- Lauren Epstein, MD, Hospital Epidemiologist – cell: 202-255-3672
- Alton Greene, MD, VA Occupational Health Director – x5400
- If you are unable to reach any of the above individuals, call the WHSC Needle Stick Hotline 404-727-4736.
Emory University Hospital - Midtown

- Daytime hours, Monday thru Friday (7 am to 4 pm)
- Occupation Injury Management (OIM) 404-686-2352

After hours, and on weekends:

- Healthcare worker calls Occupation Injury Management (PIC 50464) or calls the WHSC Needle Stick Hotline (404-727-4PEM).
- If WHSC Needle Stick Hotline called, the on-call OIM nurse practitioner will be paged (PIC 50464). The Occupational Injury Management (OIM) nurse practitioner will facilitate immediate post-exposure care. Healthcare worker should go to OIM during the next business day to have baseline labs drawn.

Other contacts at Midtown:

- Hospital epidemiology pager: 51427

Emory University Hospital

- Daytime hours, Monday thru Friday (7 am to 4 pm) Employee Health/Occupational Injury Management Office 1364 Clifton Road, Room D219
- Occupational Injury Management (Worker's Compensation) 404-686-8587
- Employee Health Services 404-686-8589

After hours and on weekends:

- Healthcare worker calls Occupational Injury Management (OIM) (PIC 50464) or calls the WHSC Needle Stick Hotline (404-727-4PEM)
- If WHSC Needle Stick Hotline called, the on-call OIM nurse practitioner will be paged (PIC 50464). The OIM nurse practitioner will facilitate immediate post-exposure care.
- Healthcare workers should go to OIM during the next business day to have baseline labs drawn.

Other contacts at EUH:

- Hospital epidemiology pager: 51090

Children's Healthcare of Atlanta (CHOA) (Egleston, Scottish Rite, or Hughes Spalding)

- Any needle sticks or blood borne pathogen exposure is referred to the 24/7 hotline 404-785-7777. This is staffed by an employee health nurse who will provide guidance to students.
- Employee Health Digital Pager 1-800-682-4549 or Needle Stick Hotline (ext. 4444 at Egleston and ext. 824444 at Scottish Rite)

Other contacts at CHOA (if students cannot reach employee health nurse via hotline or pager)

- Andi Shane, MD – cell: 404-354-7692 or office 404-727-9880

Infectious Disease Service Team on Call – pager: 404-785-7778 and ask for the ID Service Team on Call
If you are unable to contact any of the above individuals, call the WHSC Needle Stick Hotline 404-727-4736.

**Financial Considerations of Accidental Needle Sticks**

The cost of the follow-up and necessary medications may be borne by Emory University Affiliated Hospitals or may need to be submitted through the student’s health insurance. Any uncovered costs will be covered through the Office of Medical Education & Student Affairs if the procedures outlined above are followed.

For medical students and students in the health professions, initial evaluation of the exposure should be as explained above. Following this initial evaluation, all incidents and follow-up for exposures occurring at a hospital should be reported by the student within 4 days to the Registrar, Ms. Mary Kaye Garcia 404-712-9921.

**Conversions**

PPD tuberculin skin tests will be performed every year (at a minimum) or at the time of exposure for medical students. Those with PPD conversions will be referred to an appropriate physician in the University Health Services for follow-up. Expense of drugs, x-rays, and laboratory testing will be covered as long as protocol is followed.

**Students Infected with Hepatitis B (HBV), Hepatitis C (HCV), HIV**

Because medical school training requires students to participate in exposure-prone procedures, it is an ethical obligation, and in many instances a Joint Commission requirement, of students (and all healthcare providers) to (1) know their HBV, HCV, and HIV infection statuses; (2) to be vaccinated with HBV vaccine; (3) to seek appropriate treatment for HBV, HCV, and HIV if found to be infected; and (4) to inform the Director of Student Health Services in order to facilitate the establishment of an oversight panel who will define if any limitations are necessary on clinical rotations and make such accommodations as may be reasonable to permit the student’s continued matriculation.

The oversight panel (composed of Student Health Services and infectious disease physicians) will make recommendations for students continued education on a case-by-case basis, utilizing the best currently available scientific knowledge and any established recommendations from the U.S. Centers for Disease Control and Prevention and other applicable governmental guidelines regarding what, if any, limitations need to be applied to clinical activity for persons with the given condition. In conducting this evaluation and making such recommendations, the oversight panel will consult with the student, the student’s personal physician, and others, as determined appropriate to assist in this individualized judgment. Within the parameters of existing law, the student’s confidentiality will be maintained during this process.

The oversight panel will notify the Executive Associate Dean (EAD) for Medical Education and Student Affairs of any changes that need to be made to a student’s clinical experience based on their judgment. The EAD will not be made aware of the specific student diagnosis but will work with clerkship directors so that any special assignments can be made.

Reasonable efforts to assist the student in completing the requirements for an MD degree will be made by the School of Medicine. Students will be carefully counseled concerning their potential risk to patients and their risk to themselves. They will be instructed to be punctilious in the use of universal precautions and up-to-date hospital infection control techniques. In addition, the student will be offered counseling concerning the options for the future selection of a career pathway in the profession of medicine.

The student will be allowed to withdraw without penalty from any clinical setting that the student feels might present a risk for infectivity.
The student’s condition will be re-evaluated at least annually to determine if any additional limitations are indicated.


Section 5: Academic Assistance

Academic Advising

Several types of academic advising are available to all students as necessary. These are general advising, skills workshops, peer tutoring, private tutoring services in the case of USMLE Step 1 and 2 examinations, and professional educational advising.

General Advising

General advising is organized in the School of Medicine through workshops, 1:1 academic advising, and faculty interactions. All students receive advice during orientation to the different curriculum phases. Beginning at orientation, first year students engage in various workshops focused on how to study in medical school, managing time, optimizing student success, self-care, and preparing for class. In addition, they receive access to the booklet entitled Academic Success at Emory that includes advice on study and learning skills, time management, test taking, wellness and self-care and lifelong learning. For first year students, the Center for Holistic Student Success invites students to engage in one-on-one academic advising meetings as well as encouraged to continue making connections with their small group advisors and other Deans. During the curriculum, most general advising is carried out by our Associate Dean of Student Success, Associate Dean for Medical Education and Student Affairs, Associate Dean of Student Affairs, Clinical Services, Assistant Dean of Medical Education and Student Affairs, and our Director of Foundations. This advising occurs in the form of scheduled meetings with all students in a particular curriculum phase, and ad hoc meetings with students appearing to be in difficulty. Ad hoc meetings can occur at the request of the appropriate dean or at the request of a student.

Skills Workshops and Special Topics Lectures

Skills workshops and special topic lectures occur during orientation and primarily by student request at intervals during the curriculum. Examples include time-management, using electronic resources for study, a focused series on preparation for USMLE Step 1. They are conducted either by faculty or by members of the staff at the Emory Counseling and Psychological Services (CAPS) who are supported by the School of Medicine.

Peer Tutoring

A select number of advanced students participate in a formal peer tutoring service overseen by a qualified faculty member. A call is put out for applications each summer and individuals who are selected must then undergo training organized by the responsible faculty member who must then match the tutor with the needs of individual students needing assistance.

Private Tutoring Services

Those students needing assistance in preparation for USMLE 1 and 2 are advised to attend residential courses at either Wolpacc or the Pass program, with whom the school has long-standing relationships. By policy, the school will support students for tuition and living expenses for a residential program if they are recipients of financial aid.
Professional Academic Advising

Students who are unable to make progress through the curriculum are referred to the principal of a local education institution for further evaluation. They may then continue working with that person or be recommended for a complete psychological educational assessment by an outside psychologist.

Section 6: Career Advising

Choosing a career path is one of the most significant decisions a medical student will make. At Emory, the career planning begins at matriculation and continues throughout medical school.

Career planning is part of every academic year’s Orientations, and specific Career counseling sessions occur throughout the curriculum. Small Group Advisors are trained to provide guidance on this important issue and are able to advise medical students where to seek specialty-specific information and counselors.

Career planning at Emory includes:

Resources

- Emory Development of Career Specialty (DOCS) website – (information regarding career planning, advisors, match results, and related resources)
- Association of American Medical Colleges Careers in Medicine (CiM) website (career planning program designed to help medical students choose a specialty and residency program, successfully land a residency position, and plan their physician career)

Career Counseling

- Small group advisors offering career guidance and facilitating networking within and outside Emory
- Scheduled career advice and planning sessions throughout the curriculum
- One-on-one meetings with the Associate Dean for Student Affairs, Clinical Services for career counseling
- Department-designated medical student advisors chosen to counsel students regarding their specialty (on EmoryDOCS website)
- Choosing advisors, both informally for career advice, and formally to help students plan and schedule their Translation phase of medical school
- Easily accessible deans, faculty, recent Emory graduates, and staff to contact for career advising

Activities

- Planned curricular activities to aid in making a career choice
- Exposure to a wide variety of specialties and careers through the Foundations, Application and Translation phases (required clerkships and electives)
- Research opportunities through the Discovery phase
- Three class meetings during the Translation phase to discuss:
  - Advice and counseling for students who are still undecided after completing the Application phase
  - Early preparation for residency applications
  - Timeline for applying to residency programs
  - Information about early match programs
• The residency application and matching process
• Exploring residency options – panel discussions with residency program directors
• Where to access detailed information about specific residency programs
• Applying for highly competitive programs
• How to prepare for and interview effectively
• Mock residency interviews

For additional information and/or questions:

**Director, Emory DOCS**  
Mary Dolan, MD, MPH  
mdolan@emory.edu

**Senior Program Coordinator**  
Center for Holistic Student Success  
Emily Generally, MSM  
emily.generally@emory.edu  
404-712-0448

### Section 7: Other Resources

#### Parking and Transportation

**Emory Campus Parking**  
Parking on the Emory Campus requires the display of a valid permit. Only permits issued by Emory Transportation and Parking Services are valid. Permits are the property of Emory University.

Permits are non-transferrable and are for use by the permit holder.

Any permit purchased requires submission of vehicle information for all vehicles which will be used with the permit. Vehicle information includes the make, model, color, style, and state issued license plate number. Failure to maintain current vehicle information with Parking Services will result in a fine.

Permits can be requested in person at the Parking Office or online.

Acceptance of a permit indicates acknowledgement and agreement to abide by the Transportation and Parking Services Rules and Regulations.

Parking privileges can be suspended or revoked for violation of the Rules and Regulations.

Permit ownership is nontransferable.

Falsifying information in order to obtain a permit is a violation of parking regulations.

There is a replacement cost of a lost or stolen permit which is nonrefundable.

All vehicles that belong to the immediate family of a student, whether registered with Emory or not, will be considered the responsibility of that individual. Any parking violations charged against that vehicle will be the responsibility of the individual.

Permit owners are responsible for maintaining current vehicle information with Parking Services.
Unregistered vehicles with outstanding citations will be identified through the vehicle plate information obtained from the U.S. state registration system. An additional fine will be applied if a vehicle is not registered with Parking Services.

Individuals with outstanding fines will not be allowed to purchase new permits until the fines are paid in full. Outstanding fines can also result in loss of parking access, immobilization of vehicle, or the vehicle being towed.

Cars are not to be parked in the loading dock areas unless a special tag is given and are subject to towing and fines.

View information about annual and other parking permit costs.

Parking at Affiliated Hospitals

- **Emory Midtown** – No charge for parking. Arrangements for MD students are made by Barbara Bingham in the Office of Clinical Education at Grady
- **CHOA** – Emory students use Emory parking office arrangements
- **VAMC** – Students should park in the back of the hospital. No sticker/pass or charge for parking.
- **Grady** – Students currently park at an offsite parking lot and take a provided shuttle to Grady

Shuttle Services

Emory Transportation Services offer shuttles on campus, for commuters, between major affiliated hospitals and other routes such as Georgia Tech, Oxford, and shopping facilities. In addition, late-night service and SafeRide are available.

View [Cliff routes & schedules](#).

Contact Information

Contact a Transportation Services representative or visit the Transportation Services Offices in the Clairmont Campus Parking Deck (1945 Starvine Way, Atlanta, 30322). Office Hours: Mon-Fri, 7:30 am - 4:30 pm

To report shuttle delays or problems, call 404-727-1829 or email shuttles@emory.edu.

Safety and Security

Emory University School of Medicine is enriched by the legacy and energy of Atlanta, but the location also means that urban crime or violence are possible.

Every effort is made by the Emory University School of Medicine and Emory University to provide a safe and secure environment for our students at all sites (campuses, healthcare facilities, etc.). Emory maintains its own police department that manages law enforcement, fire safety and emergency medical services as well as advising schools and individuals on public safety matters. The Emory University School of Medicine is made aware of all public safety matters and acts on them accordingly. Grady and the VA have their own security departments and we work in conjunction with them to maintain a safe environment for all students.

The James P. Williams School of Medicine building provides 24-hour study space for School of Medicine students and a security guard is on duty after hours. The entire building can be accessed outside of business hours only by
using an Emory ID card. The security guard checks student ID cards to limit after hours use to registered School of Medicine students only.

We encourage students to request a security escort to or from the parking decks. Each campus also provides motorist assistance.

Emergency "blue light" phones located throughout campus link callers directly to the Emory Police Department in order to report emergencies and request security escorts.

Although parking decks have restricted access, the possibility still exists for break-ins. Please remove all valuables from your vehicle and either store them in locked storage spaces provided at each site or leave them at home.

Emory University Office of Critical Event Preparedness and Response (CEPAR) coordinates campus-wide activities related to unusual events. CEPAR uses Emory website bulletins, cell phone text messages, emails, and other means to notify community members about precautions and plans.

**Emory University-Affiliated Hospitals Public Safety Departments**

Officers are on duty twenty-four hours each day. Students are encouraged to notify the Public Safety Departments concerning any activity which may compromise an individual student's safety and/or the safety of any other students, physicians, residents, hospital employees, patients, or visitors.

**Public Safety**

Risk Reduction Tips:

- Stay alert, trust your instincts, and be aware of your surroundings.
- If something or someone makes you uneasy, move toward a place where there are other people.
- Walk in a group, or at least with one other person, whenever possible.
- Use well-lit and well-traveled areas.
- Use the safety escort services.
- Do not leave valuables (cell phones, laptops, etc.) unattended or exposed to public view.
- Program emergency numbers in your cell phone.
- Report suspicious behavior to the police immediately.

Call the appropriate number below if you ever feel that your safety or that of others is compromised, to report information about a crime under investigation, or to access resources available for survivors of sexual assault.

<table>
<thead>
<tr>
<th>Safety Escort Services</th>
<th>Emergency and Safety Escort Telephone Numbers</th>
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</thead>
<tbody>
<tr>
<td>Emory University SafeRide Program</td>
<td>404-727-7555</td>
</tr>
<tr>
<td>Oxford College of Emory University</td>
<td>404-727-6111</td>
</tr>
<tr>
<td>Emory University Hospital Midtown</td>
<td>404-686-2597</td>
</tr>
<tr>
<td>Emory University Orthopedics and Spine Hospital</td>
<td>404-831-4207</td>
</tr>
<tr>
<td>Emory John’s Creek Hospital</td>
<td>678-474-8132</td>
</tr>
<tr>
<td>Emory St. Joseph’s Hospital</td>
<td>678-843-7568</td>
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<tr>
<td>Emory Decatur Hospital</td>
<td>404-501-5339</td>
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<tr>
<td>Emory Hillandale Hospital</td>
<td>404-501-8162</td>
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<tr>
<td>Emory LTAC Hospital</td>
<td>404-501-6578</td>
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<tr>
<td>Emory Grady Area Campus</td>
<td>404-557-8106</td>
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</tbody>
</table>
Emergency Contacts

<table>
<thead>
<tr>
<th>Emory Police Department</th>
<th>404-727-6111</th>
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<tbody>
<tr>
<td>Emory Police Department at Midtown</td>
<td>404-686-4357</td>
</tr>
<tr>
<td>Emory Police Department at Oxford</td>
<td>404-727-6111</td>
</tr>
<tr>
<td>All Other Police Agencies</td>
<td>9-1-1</td>
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</tbody>
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LiveSafe Mobile App
Download “LiveSafe” from the [App Store](https://apps.apple.com) or [Google Play](https://play.google.com)

To Report Information Related to a Crime Under Investigation

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<thead>
<tr>
<th>Emory Police Department</th>
<th>All Locations</th>
<th>404-727-6111</th>
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</thead>
<tbody>
<tr>
<td>Atlanta Police Department</td>
<td>404-577-8477</td>
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<tr>
<td>Brookhaven Police Department</td>
<td>404-637-0600</td>
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<tr>
<td>Decatur Police Department</td>
<td>404-373-6551</td>
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<tr>
<td>DeKalb County Police Department</td>
<td>770-724-7850</td>
<td></td>
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<tr>
<td>Gwinnett County Police</td>
<td>770-513-5390</td>
<td></td>
</tr>
<tr>
<td>Johns Creek Police Department</td>
<td>678-474-1600</td>
<td></td>
</tr>
<tr>
<td>Newton County Sheriff’s Department</td>
<td>678-625-1400</td>
<td></td>
</tr>
<tr>
<td>Oxford (City) Police Department</td>
<td>770-788-1390</td>
<td></td>
</tr>
<tr>
<td>Sandy Springs Police Department</td>
<td>678-551-6900</td>
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</table>

Resources for Survivors of Sexual Assault

| Emory |
|--------------------|----------------|
| Counseling and Psychological Services (CAPS)–Atlanta Campus | 404-727-7450 |
| Title IX Coordinator for Students | 404-727-4079 |
| Office of Respect | 470-270-5360 |
| Student Health Services – Atlanta Campus | 404-727-7551 |
| Oxford College Campus Life | 770-784-8391 |
| Student Health and Counseling Services-Oxford Campus | 770-784-8394 |
| Institutional Equity and Inclusion | 404-727-2611 |

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<tr>
<th>DeKalb County</th>
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<tbody>
<tr>
<td>Day League (formerly DeKalb Rape Crisis Center)</td>
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Student Life

Campus Life

Emory University’s [Division of Campus Life](https://www.emory.edu/campuslife) cultivates a welcoming and dynamic community that is committed to developing skills necessary for lifelong success and positive transformation in the world.

In addition to the over 500 organizations officially recognized by the Emory Student Government Association, Campus Life provides numerous resources to assist you with social and intellectual advancement, including public safety, spiritual and religious life, recreation and wellness, mail services, and bookstores.
Housing

Emory’s graduate housing is available at Campus Crossings Briarcliff (operated by Campus Apartments). View a complete listing of all nearby housing.

Each year in June, the Office of Admissions and the rising second year class host a Housing Weekend for the incoming medical students. This event is designed to showcase the variety of housing options available in the Emory area and surrounding neighborhoods.

Student Government

The students at Emory University are governed by the Graduate Student Government Association (GSGA) and all student organization charters must be approved by the GSGA.

The Medical Student Senate (MSS) approves all applications for medical student groups seeking charter with the SGA.

Starting a Student Organization

Students are encouraged to charter new organizations when there is interest. Funding for guest speakers, teaching forums, and other education events are available for chartered organizations.

For more information about chartering a student organization, please visit the Medical Student Senate website.

Medical Student Class Officers

Each medical school class will elect officers to coincide with each phase of the curriculum, including Medical Student Senators. These elections are run in accordance with the SGA Code of Elections. The current list of officers for each class can be found on the Student Portal.

Other Medical Student Positions

There are numerous opportunities for medical students to serve on various committees and organizations. Such opportunities, like student representatives for Honor Council, Wellness, individual courses and clerkships, the Executive Curriculum Committee, are introduced and discussed at various meetings throughout the year. A list of these can be found on the Student Portal.

Section 8: Video Lecture Capture and Captioning

During Foundations, lectures are captured by video recording in Echo 360. SOM will caption any audiovisual content captured in Echo360 if it is part of an approved accommodation for students with disabilities.

Part VII: Library and Information Technology

Section 1: Information Technology Conditions of Use
As a student who is issued an Emory NetID computer account, it is important for you to know the policy that apply to connecting to the Emory network and Emory IT resources. View Policy 5.1

Section 2: School of Medicine Information Technology Services (SOMITS)

The School of Medicine’s Information Technology Services Department collaborates with OMESA in the delivery of student support services. Information Technology Services’ primary objective is to manage and maintain technology utilized for the delivery of the School of Medicine’s curriculum.

For help with Emory University School of Medicine’s IT Resources: Student Computing, Equipment Checkout, Public Printing, SOM Computer Labs, Mobile Video Conferencing, Audio / Visual Assistance, Classroom Podiums, Classroom Audio / Visual Training, and SOM Event Consultation.

- Phone: 404-72-SOMITS (7-6648)
- Web: https://emory.sharepoint.com/sites/SOMITS & https://med.emory.edu/education/resources/somits-cs/index.html (new student support)
- Email: meded-help@emory.edu (opens a support ticket)
- Hours: Monday - Friday, 8 am - 5 pm.*Excludes Emory Observed Holidays

**Director, SOMITS**

**Tom Quinn**
404-727-9805
tdquinn@emory.edu

**Sr. IT Manager, Curricular Support**

**Jess Bowling**
404-712-8824
jbowlin@emory.edu

**Sr. Manager, AV Technology**

**Jon Hamilton**
404-712-1563
jon.hamilton@emory.edu

Section 3: Bring Your Own Device (BYOD) IT Requirements

All SOM students are required to own a laptop that meets or exceeds SOMIT’S Minimum Standards. Tablets do not meet the requirement (except for Surface Pro tablets running standard Win 10/11 [not S model]). An external storage solution (hard drive or Cloud) is recommended for backing up data. While not required, we *strongly recommend* laptops be no more than 4 years old from date of purchase.

School of Medicine Laptop/Smartphone Requirements

All SOM students are required to own a laptop that meets or exceeds SOMITS’ minimum IT requirements (see Minimum Requirementshttps://med.emory.edu/education/resources/somits-cs/index.html) and a smartphone (iOS or Android) capable of using Emory’s Duo Security Two-Factor Authentication. The Emory MD curriculum incorporates the following tasks:

- Accessing and downloading course files (documents, presentations, videos, etc.)
- Uploading collaborative assignment files (documents, presentations, videos, etc.)
- Taking quizzes and exams
• Participating in remote educational activities
• Accessing resources through different browsers
• Interfacing with applications and online activities that fulfill curricular requirements (e.g., course evaluations, course grades, etc.)

Students are required to attend the computer orientation session with their laptop so that laptops can be configured, certified, and approved for use. It is the responsibility of students to ensure that their SOMIT-approved laptop is in good working order and capable of running the required software on exam days and is compliant with current SOMITS technical requirements. Students who fail to certify their computer prior to starting medical school will not be able to continue in the curriculum. Students who extend their duration in the curriculum beyond their program’s standard curriculum time are encouraged to visit the SOMITS office to ensure their device continues to meet current IT requirements.

The school will work with students who have barriers to purchasing a laptop/smartphone to determine temporary and long-term solutions. Students with barriers will not be penalized.

Section 4: Smart Device Security

The Emory Smart Device Security Policy applies to any smart device, either Emory owned or privately owned, that accesses Emory Exchange e-mail, and/or stores sensitive Emory data.

Section 5: Student Portal

The Student Portal Website provides a real time calendar (via OASIS) on curricular and event information. The Portal includes a link to the most current version of this student handbook as well as to other valuable resources or references. Be sure to bookmark it as a favorite to get up to the minute information. Updates or additions to the portal can be submitted to Mary Kaye Garcia who will forward to the appropriate Student Portal Editor.

Section 6: Woodruff Health Sciences Center Library

The Woodruff Health Sciences Center Library (WHSC Library) supports medical education, biomedical research, and clinical care through a wide range of services and programs.

We offer services such as:

• Personalized consultation and customizable group training for research, knowledge management, and evidence-based projects
• Instruction on how to use different databases and information resources for problem solving, biomedical imaging, and access to data sets.
• Assistance with publication analysis and research impact reporting, and expert support for systematic reviews

Main Campus Library

1462 Clifton Road
Atlanta, GA 30322
Location & Directions
Call the Information Desk: 404-727-8727
• Please use the Ask A Librarian form to submit questions or requests. Questions are usually answered within one business day.
• Schedule a Research Consultation with an Informationist.
• Book a Study Room appointment.

Hours of Operation

Please note: Hours and policies may change; please check the WHSC Library’s website for any updates.

- Monday through Thursday: 7:30 AM - 11:00 PM
- Friday: 7:30 AM - 7:00 PM
- Saturday: 9:00 AM - 7:00 PM
- Sunday: 9:00 AM - 11:00 PM

Information About the Hospital Library Branches

EUH Branch Library

1364 Clifton Road
Atlanta, GA 30322
Emory University Hospital
Room H-140

- 24/7 card access available to students on rotations with activated ID card.
- To have your ID badge programmed, take your schedule to Public Safety, Room HB43.
- For assistance: EUH Branch Clinical Informationist: 404-727-5192

EUH Midtown Branch Library

550 Peachtree St. NE
Atlanta, GA 30308
Davis-Fischer Building, 1st Floor
Room 1312

- 24/7 card access available to students on rotations with activated ID card.
- To have your ID badge programmed, take your schedule to Security Services, Orr Building.
- For assistance: EUHM Branch Clinical Informationist: 404-686-1978

Grady Branch Library

69 Jesse Hill, Jr. Drive
Atlanta, GA 30303

- Hours: Monday, Wednesday, and Thursday: 10:00 AM - 3:00 PM (By appointment only)
- For assistance contact the WHSC Library’s Information Desk: 404-727-8727

How to Use Library Resources & Services

- Always start at the Woodruff Health Sciences Center Library page. Login with your network ID and password when prompted.
• **Looking for a book or journal?** [Search our online library catalog](#) to locate print and electronic collections of books and journals.

**Course Reserves**

- Instructors make materials such as links to full-text articles, e-books, streaming media, and physical books available via [Course Reserves](#).
- Students access their course materials directly through [Canvas](#) by clicking on the *Library Course Reserves* link within a course.

**Frequently Used Links**

- **PubMed**: Bookmark this link for quick access to Emory’s full-text articles
- **Other Databases**
  - CINAHL
  - Embase
  - Scopus
  - Web of Science
  - For more info, visit [A-Z Databases](#)
- **eJournals**
  - CINAHL
  - Embase
  - Scopus
  - Web of Science
  - For more info, visit [A-Z Databases](#)
- **eBook Collections**
  - AccessMedicine
  - AccessEmergency Medicine
  - AccessSurgery
  - ClinicalKey
- **Current Awareness**: Visually explore Emory libraries’ journal collections. Fill "My Bookshelf" with favorite titles and alerts for new content with [BrowZine](#).
- **eTools**: For access to EndNote, SPSS, and others, please visit Emory’s [Software Express](#).
- **Clinical Resources**
  - AccessMedicine
  - ClinicalKey
  - Cochrane Library
  - DynaMed
  - Other [point-of-care and patient care support resources](#)

**Remember**: When searching Emory databases, look for the "Find it at Emory" button. Click to view full-text availability and other options. If full text or print is unavailable, click on “[Request via ILLiad](#).”

**Other Resources**

- Go to the WHSC Library’s [Medical Students’ Resources](#) or the [Services for Students](#).
- Need materials not available at Emory? Request via [Interlibrary Loan](#).
- Any other questions, suggestions, or concerns? Please send to [Ask a Librarian](#).
Submit Questions, Suggestions, Corrections, Additions

Questions, suggestions, corrections, or additions regarding the information contained in the Student Handbook should be sent to ebrownf@emory.edu.